



Columbia Pacific CCO  
CAHPS® 5.0 Medicaid Survey

Banner Book Report

June 2014



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## METHODOLOGY

### Introduction

This banner book report summarizes the results of the 2014 CAHPS® Medicaid survey of Columbia Pacific CCO members. Columbia Pacific CCO is one of 17 CCOs that participated in the survey. It was administered over a 10-week period using a mixed-mode (mail and telephone) five-wave protocol. This protocol consisted of a pre-notification letter, an initial survey mailing and reminder postcard to all respondents, followed by a second survey mailing and reminder postcard to non-respondents. Phone follow-up was conducted for members who had not responded to the mailings. Respondents were surveyed in English and Spanish. DataStat administered the survey under contract with the State of Oregon Department of Human Services.

### Survey Milestones

Pre-notification letters mailed:	February 12, 2014
1st mailing of survey packets:	February 18, 2014
1st mailing of reminder postcards:	February 25, 2014
2nd mailing of survey packets:	March 25, 2014
2nd mailing of reminder postcards:	April 1, 2014
Phone follow-up start:	April 8, 2014
Mail and phone field terminated:	May 5, 2014

### Sampling

The sampling plan for the adult and child surveys called for a random sample of 900 eligible members per CCO in each age group. Adults were defined as members aged 18 years or older and children as 17 years old or younger, both as of December 31, 2013. To be eligible, members had to have been enrolled in Oregon Health Plan for at least six months as of December 31, 2013. The final selected sample consisted of 15,300 adult OHP enrollees and 15,300 child OHP enrollees.

### Questionnaires

The instruments selected for the survey were adaptations of the CAHPS® 5.0 adult and child core questionnaires for use in assessing the performance of CCOs. CAHPS® supplemental questions as well as OHP-specific items were added to the instruments.

### Selection of Cases for Analysis

Surveys were considered complete if respondents did not say 'No' to Q1 and if they provided a valid response to at least one non OHP-specific question.

## Composites, Overall Ratings, and Measures for Reporting

In addition to responses by individual question, the CAHPS® 5.0 questionnaire yields several types of results for reporting. *Composite scores* summarize responses in key areas of member experience. Four composites are calculated for the adult and child instruments: *Getting Needed Care*, *Getting Care Quickly*, *How Well Doctors Communicate*, and *Health Plan Customer Service*, and *Shared Decision Making*. Global or *overall ratings* measure respondents' assessments, using a scale of 0 to 10, of their health plan, health care, personal doctor, and specialist. In the child questionnaire, an additional set of six *Reporting Measures* are possible. These measures cover topics called *Access to Specialized Services*, *Family Centered Care*, and *Coordination of Care*.

The questions for each composite, overall rating, and reporting measure are listed below, with their locations in the adult and child questionnaires, respectively, as well as the topics addressed by the item.

### **Composite: Getting Needed Care**

- Q14/14. Got care, tests or treatment you thought you needed
- Q25/28. Getting appointments with specialists

### **Composite: Getting Care Quickly**

- Q4/4. Got care for illness/injury/condition as soon as you thought you/child needed
- Q6/6. Got an appt. for routine care as soon as you thought you/child needed

### **Composite: How Well Doctors Communicate**

- Q17/17. Personal doctor explained things in a way that was easy to understand
- Q18/18. Personal doctor listened carefully to you
- Q29/19. Personal doctor showed respect for what you had to say
- Q20/22. Personal doctor spent enough time with you

### **Composite: Customer Service**

- Q31/32. Health plan's customer service gave needed information or help
- Q32/33. Treated with courtesy and respect by health plan's customer service staff

### **Composite: Shared Decision Making**

- Q10/10. Doctor talked about reasons you might want to take a medicine
- Q11/11. Doctor talked about reasons you might not want to take a medicine
- Q12/12. Doctor talked about what you thought was best for you when discussing a medication

### **Rating Questions**

- Q13/13. Rating of all health care
- Q23/26. Rating of personal doctor
- Q27/30. Rating of specialist doctor
- Q42/36. Rating of health plan

### **Composite: Access to Specialized Services (Child only)**

- Q--/20. Getting special medical equipment or devices for your child
- Q--/23. Getting special therapy (physical, occupational, speech) for your child
- Q--/26. Getting treatment or counseling for your child

### **Composite: Family Centered Care: Personal Doctor Who Knows Child (Child only)**

- Q--/38. Child's personal doctor talked with you about how child is feeling, growing, behaving
- Q--/43. Child's personal doctor understands how child's health conditions affect child's day-to-day life
- Q--/44. Child's personal doctor understands how child's health conditions affect family's day-to-day life

### **Composite: Coordination of Care for Children with Chronic Conditions (Child only)**

- Q--/18. Got help contacting school and daycare from someone at health plan or doctor's office
- Q--/29. Got help coordinating care among providers from someone at health plan or doctor's office

## Comparisons, Statistical Testing, Scoring, and Weighting

In the tables, results are presented for all questionnaire items, reporting measures, and composites, by age category, race/ethnicity, health status, and gender. Significance testing was conducted between overall OHP results and plan or demographic subgroup results. Statistically significant differences were determined with binomial and t-tests, using a significance level of .05 or less. Tests were considered valid when the number of cases used to compute the score was 50 or greater and there was non-zero variation in the tested groups. For comparisons with statistically significant differences, a star (\*) is found to the right of the relevant percentage in the table.

For rating, composite, and reporting measure questions, responses grouped together as scores offer a means of comparing performance across plans and other subgroups. Scores are usually designed to capture respondents' positive experiences. Thus, in rating questions, for example, responses of 8, 9, or 10 represent a positive experience, as do responses of 'Usually' or 'Always' to questions that make up the composites and most of the reporting measures. To make these scores easily available to users, positive responses have been set apart in the banner tables and labelled as 'Nets'. A net score preceded by '#' signifies the most inclusive grouping (i.e. 8, 9, and 10), whereas a net score preceded by the label 'Score 2' represents the least inclusive grouping (i.e. 9 and 10).

Data presented in the banner books were weighted to reflect each plan's actual distribution in the total eligible population. A weight unique to each health plan and age category (adults and children) was constructed by applying the percentage of members by plan in the population to the corresponding percentages in the completed cases.

## Sample Disposition

Category	Adult		Child	
	Columbia Pacific CCO	Overall	Columbia Pacific CCO	Overall
<b>**First mailing - sent</b>	900	15300	900	15300
<b>*First mailing - usable survey returned</b>	156	3059	129	2459
<b>Second mailing - sent</b>	716	11718	736	12459
<b>*Second mailing - usable survey returned</b>	70	1039	67	1057
<b>*Phone - usable surveys</b>	91	1456	139	2502
<b>Total - usable surveys</b>	317	5554	335	6018
<b>†Ineligible: According to population criteria‡</b>	19	348	18	362
<b>†Ineligible: Deceased</b>	1	78	0	3
<b>†Ineligible: Mentally or physically unable to complete survey</b>	9	301	0	0
<b>†Ineligible: Language barrier</b>	2	77	1	39
<b>Incorrect address AND incorrect phone number</b>	53	1065	66	991
<b>Refusal/Returned survey blank</b>	53	720	56	783
<b>Nonresponse - Unavailable by mail or phone</b>	446	7157	424	7104
<b>Adjusted Response Rate</b>	<b>36.5%</b>	<b>38.3%</b>	<b>38.0%</b>	<b>40.4%</b>

\*Included in response rate numerator

†Excluded from adjusted response rate denominator

‡Population criteria: The designated respondent must be enrolled in the health plan and meet the age requirements of the survey methodology.

Note: *Adjusted Response Rate = Total Usable Surveys / Total Eligible Cases*

## Response/Non-Response Comparison

Presented below is a comparison, by age and gender within each age category, of respondents and non-respondents, all of whom were part of the random sample for the Oregon CAHPS© 2014 survey.

**Non-Respondents** are members or member proxys who decided not to participate in the study by mail or phone. This group includes two types of non-respondents:

- 1) Members who passively refused by not returning the questionnaire mailed to their household and/or not answering questions over the phone.
- 2) Members who actively refused, either by contacting DataStat or by declining to participate when DataStat attempted to reach them by phone.

The category labeled **Respondents** includes members or member proxys who completed the questionnaire either by mail or phone.

### Adult

Gender / Age	Non-Respondents	Respondents	Difference
Male	192 38.5%	116 36.6%	-1.88%
Female	307 61.5%	201 63.4%	1.88%
18-24	127 25.5%	50 15.8%	-9.68%
25-34	133 26.7%	50 15.8%	-10.88%
35-44	115 23.0%	57 18.0%	-5.07%
45-54	68 13.6%	73 23.0%	9.40%
55-64	41 8.2%	68 21.5%	13.23%
65-74	6 1.2%	16 5.0%	3.84%
75 or Older	9 1.8%	3 0.9%	-0.86%

### Child

Gender / Age	Non-Respondents	Respondents	Difference
Male	245 51.0%	171 51.0%	0.00%
Female	235 49.0%	164 49.0%	0.00%
<1, 1-3	107 22.3%	79 23.6%	1.29%
4-7	126 26.3%	85 25.4%	-0.88%
8-12	141 29.4%	93 27.8%	-1.61%
13 or older	106 22.1%	78 23.3%	1.20%

Q1 OUR RECORDS SHOW THAT YOU ARE NOW IN <HEALTH PLAN>. IS THAT RIGHT?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	OTHER	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
Q1 YES	310 100%	5403 100%	42 100%	46 100%	51 100%	69 100%	64 100%	20 100%	248 100%	1 100%	1 100%	2 100%	11 100%	30 100%	16 100%	276 100%	177 100%	115 100%	105 100%	190 100%
NOT ANSWERED	7	151	2			2	2		6					1	1	6	4	2	4	3
VALID CASES	310	5403	42	46	51	69	64	20	248	1	1	2	11	30	16	276	177	115	105	190
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%



Q3 IN THE LAST 6 MONTHS, DID YOU HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE			
Q3 YES	152 49%	2419 45%	8 19%~	27 59%~	29 57%	38 55%	33 51%	11 55%~	125 50%	1 100%~	~	~	1 50%~	7 64%~	14 50%~	8 50%~	139 50%~	76 42%*	71 62%*	46 43%	103 54%*
NO	156 51%	2914 55%	35 81%~	19 41%~	22 43%	31 45%	32 49%	9 45%~	127 50%	1 ~100%~	~	~	1 50%~	4 36%~	14 50%~	8 50%~	139 50%~	103 58%*	43 38%*	61 57%	87 46%*
NOT ANSWERED	9	220	1			2	1		2						3	1	4	2	3	2	3
VALID CASES	308	5334	43	46	51	69	65	20	252	1	1		2	11	28	16	278	179	114	107	190
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q4 IN THE LAST 6 MONTHS, WHEN YOU NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOU GET CARE AS SOON AS YOU NEEDED?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q4 NEVER	2 2%	72 3%	~	~	4%~	3%~	~	2%~	~	~	~	~	~	~	2%~	2% 2%	1 1	3%~	1%~	
SOMETIMES	13 10%	310 15%	29%~	24%~	9%~	7%~	3%~	11%~	~	~	~	~	14%~	~	11%~	8% 13%	5 8	11%~	10%~	
USUALLY	34 26%	531 26%	~	24%~	35%~	33%~	23%~	28%~	~	~	~	100%~	29%~	8%~	43%~	26%~	23 10	29%~	26%~	
ALWAYS	82 63%	1161 56%	71%~	52%~	52%~	57%~	73%~	82%~	59%~	100%~	~	~	57%~	92%~	57%~	62%~	37 41	58%~	63%~	
#ALWAYS + USUALLY (NET)	116 89%	1692 82%*	71%~	76%~	87%~	90%~	97%~	100%~	87%~	100%~	~	~	100%~	86%~	100%~	88%~	60 51	87%~	89%~	
TOP BOX SCORE	82 63%	1161 56%	71%~	52%~	52%~	57%~	73%~	82%~	59%~	100%~	~	~	57%~	92%~	57%~	62%~	37 41	58%~	63%~	
NOT ANSWERED	21	322	1	2	6	8	3	20						1	1 19	10 11	8	13		
VALID CASES	131	2074	7	25	23	30	30	11	105	1			1	7	13	7 120	66 60	38	90	
NUMBER OF RESPONDENTS	152 100%	2396 100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q3 = YES]

Q5 IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK-UP OR ROUTINE CARE AT A DOCTOR'S OFFICE OR CLINIC?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE			
Q5 YES	208 67%	3840 72%	15 36%~	31 67%~	38 75%	50 72%	49 74%	17 85%~	165 66%	1 100%	1 100%~			9 82%~	24 80%~	11 69%~	188 67%~	106 60%*	95 82%*	71 66%	131 69%	
NO	101 33%	1468 28%	27 64%~	15 33%~	13 25%	19 28%	17 26%	3 15%~	86 34%					2 100%~	2 18%~	6 20%~	5 31%~	91 33%~	72 40%*	21 18%*	36 34%	60 31%
NOT ANSWERED	8	246	2			2			3						1	1	3	3	1	2	2	
VALID CASES	309	5308	42	46	51	69	66	20	251	1	1			2	11	30	16	279	178	116	107	191
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%			2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q6 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR A CHECK-UP OR ROUTINE CARE AT A DOCTOR'S OFFICE OR CLINIC AS SOON AS YOU NEEDED?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q6 NEVER	3 2%	83 2%	~	~	6%~	~	2%~	0.7%~	~	~	~	~	22%~	9%~	1%~	2%	~	3%	0.8%	
SOMETIMES	39 21%	655 19%	47%~	33%~	12%~	14%~	17%~	20%~	21%~	~	100%~	~	22%~	14%~	36%~	20%~	22%	20%	18%	21%
USUALLY	36 19%	957 28%*	7%~	27%~	24%~	19%~	17%~	20%~	28%~	19%~	100%~	~	22%~	24%~	18%~	19%~	22%	17%	24%	17%
ALWAYS	111 59%	1742 51%*	47%~	40%~	59%~	67%~	63%~	60%~	90%~	~	~	~	33%~	62%~	36%~	60%~	54%	63%	55%	61%
#ALWAYS + USUALLY (NET)	147 78%	2699 79%	53%~	67%~	82%~	86%~	80%~	80%~	118%~	1%~	100%~	~	56%~	86%~	55%~	79%~	76%	80%	79%	78%
TOP BOX SCORE	111 59%	1742 51%*	47%~	40%~	59%~	67%~	63%~	60%~	90%~	~	~	~	33%~	62%~	36%~	60%~	54%	63%	55%	61%
NOT ANSWERED	19	401	1	4	7	3	2	15					3	18	10	8	9	9		
VALID CASES	189	3437	15	30	34	43	46	15	150	1	1		9	21	11	170	96	87	62	122
NUMBER OF RESPONDENTS	208	3838	15	31	38	50	49	17	165	1	1		9	24	11	188	106	95	71	131
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q5 = YES]

Q7 IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOU WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID YOU GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE FOR YOURSELF?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	OTH-	NOT HIS- IC	HIS- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE			
Q7 NONE	82 27%	1217 23%	23 53%~	11 24%~	14 29%~	14 20%	11 17%*	4 20%~	64 25%	~	~	1 ~ 50%~	3 27%~	10 37%~	5 31%~	73 26%~	58 32%*	18 16%*	33 31%	44 23%
1 TIME	39 13%	847 16%	7 16%~	4 9%~	5 10%~	7 10%	11 17%	3 15%~	30 12%	~	~	~	1 ~ 9%~	4 15%~	4 25%~	33 12%~	28 16%	10 9%	14 13%	23 12%
2	65 21%	1010 19%	7 16%~	14 30%~	9 18%~	15 21%	15 23%	3 15%~	54 21%	1 100%~	~	~	3 ~ 27%~	5 19%~	3 19%~	60 22%~	39 22%	22 19%	20 19%	43 23%
3	45 15%	647 12%	3 7%~	6 13%~	9 18%~	9 13%	14 22%	2 10%~	39 15%	~	~	1 ~ 50%~	3 27%~	2 7%~	2 13%~	42 15%~	27 15%	17 15%	11 10%	34 18%*
4	16 5%	427 8%*	~	5 11%~	1 2%~	4 6%	3 5%	3 15%~	14 6%	~	~	~	~	1 4%~	1 6%~	15 5%~	10 6%	5 4%	6 6%	10 5%
5 TO 9	43 14%	719 14%	2 5%~	5 11%~	7 14%~	16 23%*	8 12%	3 15%~	39 15%	1 ~100%~	~	~	1 ~ 9%~	2 7%~	4 ~ 15%~	42 ~ 15%~	14 8%*	29 25%*	18 17%	25 13%
10 OR MORE TIMES	16 5%	356 7%	1 2%~	1 2%~	4 8%~	5 7%	3 5%	2 10%~	13 5%	~	~	~	~	3 11%~	1 6%~	14 5%~	3 2%*	13 11%*	4 4%	12 6%
NOT ANSWERED	11	330	1		2	1	1		1					4	1	3	2	3	3	2
VALID CASES	306	5224	43	46	49	70	65	20	253	1	1	2	11	27	16	279	179	114	106	191
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q8 A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOU NEED A CHECK-UP, WANT ADVICE ABOUT A HEALTH PROBLEM, OR GET SICK OR HURT. IN THE LAST 6 MONTHS, DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE			
Q8 #YES	164 75%	2839 72%	10 50%~	25 71%~	26 74%~	41 76%	44 86%*	13 81%~	141 77%~	1 100%~	1 100%~			4 50%~	14 82%~	7 64%~	153 76%~	83 70%	76 82%*	57 80%	106 74%	
NO	55 25%	1080 28%	10 50%~	10 29%~	9 26%~	13 24%	7 14%*	3 19%~	43 23%~					1 100%~	4 50%~	3 18%~	4 36%~	48 24%~	36 30%	17 18%*	14 20%	38 26%
NOT ANSWERED	5	109				2	3		5							5	2	3	2	3		
VALID CASES	219	3919	20	35	35	54	51	16	184	1	1			1	8	17	11	201	119	93	71	144
NUMBER OF RESPONDENTS	224	4028	20	35	35	56	54	16	189	1	1			1	8	17	11	206	121	96	73	147
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

Q9 IN THE LAST 6 MONTHS, DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE			
Q9 YES	130 59%	2140 54%	6 32%	22 63%	23 66%	35 65%	32 60%	8 50%	109 59%	1 100%	1 100%	~ ~	~ ~	7 88%	10 59%	6 55%	120 59%	63 53%*	63 67%*	46 66%	83 57%	
NO	90 41%	1796 46%	13 68%	13 37%	12 34%	19 35%	21 40%	8 50%	76 41%	~ ~	~ ~	~ ~	1 100%	1 13%	7 41%	5 45%	82 41%	56 47%*	31 33%*	24 34%	63 43%	
NOT ANSWERED	4	92	1			2	1		4							4	2	2	3	1		
VALID CASES	220	3936	19	35	35	54	53	16	185	1	1			1	8	17	11	202	119	94	70	146
NUMBER OF RESPONDENTS	224 100%	4028 100%	20 100%	35 100%	35 100%	56 100%	54 100%	16 100%	189 100%	1 100%	1 100%			1 100%	8 100%	17 100%	11 100%	206 100%	121 100%	96 100%	73 100%	147 100%

[ASKED IF Q7 >= 1 TIME]

Q10 WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT TO TAKE A MEDICINE?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR	AMR ASIAN	NATV HAW/IND/PAC	AMR ALASK	OTHER	MULTI	HIS-IC	NOT HIS-IC	EX & VERY GOOD & POOR	FAIR & POOR	MALE	FE-MALE
Q10 NOT AT ALL	4 3%	93 4%	1 17%	1 5%	1 4%	~	1 13%	2 2%	~	~	~	~	1 14%	1 17%	3 3%	4 6%*	~	1 2%	3 4%	
A LITTLE	19 15%	327 16%	1 17%	2 9%	7 30%	2 6%	5 17%	1 13%	14 13%	~	~	~	3 43%	2 22%	3 50%	16 14%	8 13%	11 18%	7 16%	12 15%
SOME	41 33%	758 36%	2 33%	9 41%	8 35%	9 26%	11 37%	1 13%	36 34%	~	~	~	~	4 44%	1 17%	39 33%	24 39%	17 28%	14 31%	26 33%
#A LOT	62 49%	898 43%	2 33%	10 45%	7 30%	23 68%	14 47%	5 63%	54 51%	1 100%	1 100%	~	3 43%	3 33%	1 17%	59 50%	26 42%	33 54%	23 51%	39 49%
NOT ANSWERED	4	95				1	2		3					1	3	1	2	1	3	
VALID CASES	126	2076	6	22	23	34	30	8	106	1	1		7	9	6	117	62	61	45	80
NUMBER OF RESPONDENTS	130	2171	6	22	23	35	32	8	109	1	1		7	10	6	120	63	63	46	83
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME AND Q9 = YES]



Q11 WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT TO TAKE A MEDICINE?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	OTH-	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE				
Q11 NOT AT ALL	24 19%	407 20%	1 17%	5 23%	3 13%	4 12%	9 29%	1 13%	18 17%	~	~	~	~	3 43%	3 30%	1 17%	22 18%	10 16%	13 21%	5 11%	19 23%
A LITTLE	22 17%	411 20%	1 17%	3 14%	3 13%	7 21%	6 19%	1 13%	19 18%	~	~	~	~	~	2 20%	2 33%	20 17%	13 21%	9 15%	11 24%	11 13%
SOME	40 31%	704 34%	4 67%	9 41%	7 30%	7 21%	8 26%	3 38%	32 30%	1 100%	~	~	~	3 43%	3 30%	3 50%	36 30%	23 37%	16 26%	11 24%	28 34%
#A LOT	42 33%	554 27%	~	5 23%	10 43%	16 47%	8 26%	3 38%	38 36%	1 100%	~	~	~	1 14%	2 20%	~	41 34%	16 26%	24 39%	18 40%	24 29%
NOT ANSWERED	2	95				1	1		2							1	1	1	1	1	1
VALID CASES	128	2076	6	22	23	34	31	8	107	1	1			7	10	6	119	62	62	45	82
NUMBER OF RESPONDENTS	130	2171	6	22	23	35	32	8	109	1	1			7	10	6	120	63	63	46	83
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME AND Q9 = YES]

Q12 WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOU?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	OTH-	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q12 #YES	93 73%	1495 72%	4 67%	16 73%	19 86%	24 71%	20 65%	7 88%	78 74%	1 100%	1 100%	~	~	5 71%	6 60%	6 100%	84 71%	50 81%	39 64%*	31 70%	61 74%
NO	34 27%	577 28%	2 33%	6 27%	3 14%	10 29%	11 35%	1 13%	28 26%	~	~	~	~	2 29%	4 40%	~	34 29%	12 19%	22 36%*	13 30%	21 26%
NOT ANSWERED	3	99			1	1	1	3								2	1	2	2	1	
VALID CASES	127	2072	6	22	22	34	31	8	106	1	1			7	10	6	118	62	61	44	82
NUMBER OF RESPONDENTS	130	2171	6	22	23	35	32	8	109	1	1			7	10	6	120	63	63	46	83
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME AND Q9 = YES]

Q13 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR HEALTH CARE IN THE LAST 6 MONTHS?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE	FE- MALE			
Q13 WORST HEALTH CARE POSSIBLE		27 0.7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01		36 0.9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02	1 0.5%	49 1%	~	~	~	~	1 6%	1 0.5%	~	~	~	~	~	1 ~0.5%	1 0.8%	~	~	1 ~0.7%	~		
03	6 3%	75 2%	~	1 3%	1 3%	4 8%	~	5 3%	~	~	~	1 13%	~	6 3%	2 2%	4 4%	4 6%	2 1%	~		
04	6 3%	144 4%	~	1 3%	~	1 2%	2 4%	2 13%	5 3%	~	~	~	~	1 6%	6 3%	4 3%	2 2%	1 1%	5 3%		
05	18 8%	268 7%	1 5%	5 14%	1 3%	5 9%	3 6%	1 6%	14 8%	~	~	1 ~100%	2 ~12%	1 9%	16 8%	8 7%	9 10%	9 13%	8 6%		
06	20 9%	223 6%	2 10%	5 14%	1 3%	4 8%	5 9%	2 13%	14 8%	~	~	~	2 ~25%	1 6%	2 18%	17 8%	10 8%	9 10%	7 10%	12 8%	
07	23 11%	446 11%	3 15%	6 17%	6 18%	6 11%	2 4%*	~	20 11%	~	~	~	~	3 ~18%	2 18%	21 10%	16 13%	7 8%	9 13%	14 10%	
08	46 21%	874 22%	4 20%	5 14%	10 29%	8 15%	15 28%	3 19%	38 21%	1 ~100%	1 ~100%	~	~	2 ~25%	4 24%	2 18%	42 21%	21 17%	24 26%	9 13%*	37 26%*
09	26 12%	633 16%*	5 25%	2 6%	2 6%	5 9%	8 15%	2 13%	23 13%	~	~	~	~	1 6%	1 9%	24 12%	18 15%	8 9%	10 14%	15 10%	
BEST HEALTH CARE POSSIBLE	73 33%	1114 29%	5 25%	10 29%	13 38%	20 38%	18 34%	5 31%	64 35%	~	~	~	~	3 ~38%	5 29%	3 27%	68 34%	41 34%	29 32%	22 31%	50 35%
#8-10 (NET)	145 66%	2622 67%	14 70%	17 49%	25 74%	33 62%	41 77%*	10 63%	125 68%	1 ~100%	1 ~100%	~	~	5 ~63%	10 59%	6 55%	134 67%	80 66%	61 66%	41 58%	102 71%

Continued

Q13 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR HEALTH CARE IN THE LAST 6 MONTHS?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK ILND NATV	AMER OTH	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
9-10 (NET)	99 45%	1747 45%	10 50%~	12 34%~	15 44%~	25 47%	26 49%	7 44%~	87 47%~	~	~	~	~	3 38%~	6 35%~	4 36%~	92 46%~	59 49%	37 40%	32 45%	65 45%
NOT ANSWERED	5	139			1	3	1		5								5		4	2	3
VALID CASES	219	3889	20	35	34	53	53	16	184	1	1		1	8	17	11	201	121	92	71	144
NUMBER OF RESPONDENTS	224 100%	4028 100%	20 100%	35 100%	35 100%	56 100%	54 100%	16 100%	189 100%	1 100%	1 100%		1 100%	8 100%	17 100%	11 100%	206 100%	121 100%	96 100%	73 100%	147 100%
MEAN	7.98	7.86	8.25	7.49	8.35	7.85	8.28	7.44	8.05	8.00	8.00		5.00	7.63	7.76	7.82	7.99	8.07	7.85	7.72	8.12
p stat_(*=Sig @ p<=.05)		.422	~	~	~.625	.201	~	~	~	~	~	~	~	~	~	~	~	~.466	.416	.205	.168

[ASKED IF Q7 >= 1 TIME]

Q14 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS OR TREATMENT YOU NEEDED?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q14 NEVER	6 3%	106 3%	~	1 3%	1 3%	2 4%	1 2%	1 6%	5 3%	~	~	~	1 13%	~	~	6 3%	4 3%	2 2%	1 1%	5 3%	
SOMETIMES	30 14%	606 16%	3 15%	5 14%	3 9%	9 17%	6 11%	3 19%	25 13%	1 100%	~	~	1 13%	1 6%	3 27%	26 13%	18 15%	10 11%	10 14%	19 13%	
USUALLY	75 34%	1251 32%	6 30%	19 54%	12 34%	16 30%	13 24%	5 31%	59 32%	1 100%	~	~	1 100%	2 25%	9 53%	4 36%	67 33%	42 35%	30 32%	28 39%	45 31%
ALWAYS	110 50%	1927 50%	11 55%	10 29%	19 54%	26 49%	34 63%*	7 44%	97 52%	~	~	~	4 50%	7 41%	4 36%	104 51%	57 47%	51 55%	33 46%	76 52%	
#ALWAYS + USUALLY (NET)	185 84%	3178 82%	17 85%	29 83%	31 89%	42 79%	47 87%	12 75%	156 84%	1 100%	~	~	1 100%	6 75%	16 94%	8 73%	171 84%	99 82%	81 87%	61 85%	121 83%
TOP BOX SCORE	110 50%	1927 50%	11 55%	10 29%	19 54%	26 49%	34 63%*	7 44%	97 52%	~	~	~	4 50%	7 41%	4 36%	104 51%	57 47%	51 55%	33 46%	76 52%	
NOT ANSWERED	3	138				3			3						3		3		1	2	
VALID CASES	221	3890	20	35	35	53	54	16	186	1	1		1	8	17	11	203	121	93	72	145
NUMBER OF RESPONDENTS	224 100%	4028 100%	20 100%	35 100%	35 100%	56 100%	54 100%	16 100%	189 100%	1 100%	1 100%		1 100%	8 100%	17 100%	11 100%	206 100%	121 100%	96 100%	73 100%	147 100%

[ASKED IF Q7 >= 1 TIME]

Q15 A PERSONAL DOCTOR IS THE ONE YOU WOULD SEE IF YOU NEED A CHECK-UP, WANT ADVICE ABOUT A HEALTH PROBLEM, OR GET SICK OR HURT. DO YOU HAVE A PERSONAL DOCTOR?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE	
Q15 YES	238 78%	4471 84%*	25 60%~	30 65%~	39 76%	59 86%	59 89%*	18 95%~	198 79%	1 100%~	~	2 ~100%~	9 90%~	22 73%~	12 75%~	218 78%~	130 73%*	100 86%*	83 78%	150 79%
NO	68 22%	824 16%*	17 40%~	16 35%~	12 24%	10 14%	7 11%*	1 5%~	53 21%	1 ~100%~	~	1 ~ 10%~	8 27%~	4 25%~	60 22%~	48 27%*	16 14%*	24 22%	40 21%	
NOT ANSWERED	11	259	2			2	1	3				1	1	1	4	3	1	2	3	
VALID CASES	306	5295	42	46	51	69	66	19	251	1	1	2	10	30	16	278	178	116	107	190
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q16 IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOU VISIT YOUR PERSONAL DOCTOR TO GET CARE FOR YOURSELF?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q16 NONE	41 18%	737 18%	12 50%~	5 17%~	6 15%~	9 17%	4 8%*	2 13%	36 19%~	~	~	~	~	1 11%~	2 11%	1 10%~	38 18%~	29 24%*	9 10%*	16 21%	23 16%
1 TIME	38 17%	904 22%	6 25%~	2 7%~	4 10%~	10 19%	12 23%	2 13%	29 16%~	~	~	~	1 50%~	2 22%~	2 11%	3 30%~	33 16%~	23 19%	13 14%	15 19%	21 15%
2	52 23%	921 22%	4 17%~	7 24%~	9 23%~	12 22%	15 29%	5 31%	43 23%~	1 100%~	~	~	~	2 22%~	6 33%	2 20%~	49 24%~	30 25%	21 22%	17 22%	34 24%
3	31 14%	552 13%	~	7 24%~	8 21%~	7 13%	8 15%	1 6%~	25 13%~	~	~	~	1 50%~	3 33%~	2 11%	2 20%~	29 14%~	17 14%	14 15%	8 10%	23 16%
4	20 9%	381 9%	~	4 14%~	5 13%~	6 11%	4 8%	~	18 10%~	~	~	~	~	~	2 11%	~	19 9%~	9 8%	9 10%	7 9%	13 9%
5 TO 9	34 15%	484 12%	2 8%~	4 14%~	6 15%~	7 13%	8 15%	5 31%~	32 17%~	~	~	~	~	1 11%~	1 6%~	1 10%~	33 16%~	10 8%*	24 26%*	13 17%	21 15%
10 OR MORE TIMES	6 3%	164 4%	~	~	1 3%~	3 6%	1 2%	1 6%~	3 2%~	~	~	~	~	~	3 17%~	1 10%~	5 2%~	2 2%	4 4%	1 1%	5 4%
NOT ANSWERED	16	311	1	1		5	7	2	12						4	2	12	10	6	6	10
VALID CASES	222	4143	24	29	39	54	52	16	186	1			2	9	18	10	206	120	94	77	140
NUMBER OF RESPONDENTS	238	4454	25	30	39	59	59	18	198	1			2	9	22	12	218	130	100	83	150
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES]

Q17 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR EXPLAIN THINGS IN A WAY THAT WAS EASY TO UNDERSTAND?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q17 NEVER	6 3%	64 2%	~	~	2 6%	2 4%	1 2%	1 7%	5 3%	~	~	~	1 13%	~	~	6 4%	3 3%	3 4%	3 5%	3 3%	
SOMETIMES	13 7%	221 7%	2 17%	3 13%	3 9%	1 2%	4 8%	~	10 7%	1 100%	~	~	1 13%	1 6%	2 22%	11 7%	5 5%	8 9%	3 5%	10 9%	
USUALLY	32 18%	788 23%*	1 8%	9 37%	2 6%	7 16%	11 23%	2 14%	27 18%	~	~	~	1 13%	3 19%	2 22%	30 18%	15 16%	16 19%	13 21%	18 15%	
ALWAYS	130 72%	2286 68%	9 75%	12 50%	26 79%	35 78%	32 67%	11 79%	108 72%	~	~	~	2 100%	5 63%	12 75%	5 56%	121 72%	68 75%	58 68%	42 69%	86 74%
#ALWAYS + USUALLY (NET)	162 90%	3074 92%	10 83%	21 87%	28 85%	42 93%	43 90%	13 93%	135 90%	~	~	~	2 100%	6 75%	15 94%	7 78%	151 90%	83 91%	74 87%	55 90%	104 89%
TOP BOX SCORE	130 72%	2286 68%	9 75%	12 50%	26 79%	35 78%	32 67%	11 79%	108 72%	~	~	~	2 100%	5 63%	12 75%	5 56%	121 72%	68 75%	58 68%	42 69%	86 74%
NOT ANSWERED		36																			
VALID CASES	181	3360	12	24	33	45	48	14	150	1			2	8	16	9	168	91	85	61	117
NUMBER OF RESPONDENTS	181	3396	12	24	33	45	48	14	150	1			2	8	16	9	168	91	85	61	117
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES AND Q16 >= 1 TIME]



Q18 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR LISTEN CAREFULLY TO YOU?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q18 NEVER	3 2%	80 2%	~	4%~	3%~	2%~	~	1%~	~	~	~	~	13%~	~	~	2%~	2% 1%	2% 2%			
SOMETIMES	16 9%	289 9%	17%~	8%~	9%~	7%~	10%~	7%~	7%~	100%~	~	~	50%~	25%~	6%~	33%~	8%~	8% 11%	8% 9%		
USUALLY	43 24%	705 21%	25%~	29%~	18%~	13%~	35%~	21%~	25%~	~	~	~	13%~	25%~	11%~	24%~	18%* 29%	26% 23%			
ALWAYS	119 66%	2267 68%	58%~	58%~	70%~	78%~	54%~	71%~	66%~	~	~	~	50%~	50%~	69%~	56%~	66%~	73% 59%	64% 66%		
#ALWAYS + USUALLY (NET)	162 90%	2972 89%	83%~	88%~	88%~	91%~	90%~	93%~	91%~	~	~	~	50%~	63%~	94%~	67%~	90%~	90% 88%	90% 89%		
TOP BOX SCORE	119 66%	2267 68%	58%~	58%~	70%~	78%~	54%~	71%~	66%~	~	~	~	50%~	50%~	69%~	56%~	66%~	73% 59%	64% 66%		
NOT ANSWERED	55																				
VALID CASES	181	3341	12	24	33	45	48	14	150	1			2	8	16	9	168	91	85	61	117
NUMBER OF RESPONDENTS	181	3396	12	24	33	45	48	14	150	1			2	8	16	9	168	91	85	61	117
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES AND Q16 >= 1 TIME]

Q19 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SHOW RESPECT FOR WHAT YOU HAD TO SAY?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q19 NEVER	3 2%	70 2%	~	~	2 6%	1 2%	~	2 1%	~	~	~	~	1 13%	~	~	3 2%	1 1%	2 2%	2 3%	1 0.9%	
SOMETIMES	21 12%	242 7%	1 8%	4 17%	4 12%	5 11%	6 13%	1 7%	18 12%	1 100%	~	~	1 50%	1 13%	~	3 33%	18 11%	7 8%	14 16%	10 16%	11 9%
USUALLY	28 15%	541 16%	1 8%	5 21%	3 9%	5 11%	12 25%	2 14%	21 14%	~	~	~	1 13%	5 31%	~	2 22%	26 15%	13 14%	14 16%	8 13%	20 17%
ALWAYS	129 71%	2489 74%	10 83%	15 62%	24 73%	34 76%	30 63%	11 79%	109 73%	~	~	~	1 50%	5 63%	11 69%	4 44%	121 72%	70 77%	55 65%	41 67%	85 73%
#ALWAYS + USUALLY (NET)	157 87%	3030 91%	11 92%	20 83%	27 82%	39 87%	42 88%	13 93%	130 87%	~	~	~	1 50%	6 75%	16 100%	6 67%	147 88%	83 91%	69 81%*	49 80%	105 90%
TOP BOX SCORE	129 71%	2489 74%	10 83%	15 62%	24 73%	34 76%	30 63%	11 79%	109 73%	~	~	~	1 50%	5 63%	11 69%	4 44%	121 72%	70 77%	55 65%	41 67%	85 73%
NOT ANSWERED		53																			
VALID CASES	181	3343	12	24	33	45	48	14	150	1			2	8	16	9	168	91	85	61	117
NUMBER OF RESPONDENTS	181	3396	12	24	33	45	48	14	150	1			2	8	16	9	168	91	85	61	117
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES AND Q16 >= 1 TIME]

Q20 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SPEND ENOUGH TIME WITH YOU?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE		
Q20 NEVER	4 2%	102 3%	~	~	9%~	~	2%~	~	2%~	~	~	~	13%~	~	~	2%~	3%	1%	4%	7%~	~	
SOMETIMES	21 12%	343 11%	~	29%~	12%~	9%~	11%~	8%~	15%	1%	~	~	25%~	2%	2%	33%~	11%~	9%	12%	8%	13%	
USUALLY	46 26%	852 27%	25%~	29%~	24%~	21%~	32%~	17%~	36%	~	~	~	100%~	1%	1%	7%	22%~	42%	20%	23%	17%	28%
ALWAYS	105 60%	1905 60%	75%~	42%~	55%~	70%~	55%~	75%~	92%	~	~	~	50%~	4%	7%	44%~	61%~	57%	47%	56%	71%	
#ALWAYS + USUALLY (NET)	151 86%	2757 86%	100%~	71%~	79%~	91%~	87%~	92%~	128%	~	~	~	100%~	1%	5%	14%	67%~	87%~	77%	70%	50%	99%
TOP BOX SCORE	105 60%	1905 60%	75%~	42%~	55%~	70%~	55%~	75%~	92%	~	~	~	50%~	4%	7%	44%~	61%~	57%	47%	56%	71%	
NOT ANSWERED	5	195				2	1	2	4				1			4	2	2	2	2	3	
VALID CASES	176	3201	12	24	33	43	47	12	146	1			1	8	16	9	164	89	83	59	114	
NUMBER OF RESPONDENTS	181 100%	3396 100%	12 100%	24 100%	33 100%	45 100%	48 100%	14 100%	150 100%	1 100%			2 100%	8 100%	16 100%	9 100%	168 100%	91 100%	85 100%	61 100%	117 100%	

[ASKED IF Q15 = YES AND Q16 >= 1 TIME]

Q21 IN THE LAST 6 MONTHS, DID YOU GET CARE FROM A DOCTOR OR OTHER HEALTH PROVIDER BESIDES YOUR PERSONAL DOCTOR?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q21 YES	104 60%	1971 62%	2 17%	11 46%	22 69%	26 59%	31 69%	8 67%	87 60%	1 100%	~	~	1 100%	4 50%	9 60%	5 56%	96 60%	41 47%*	60 72%*	31 53%	72 64%
NO	70 40%	1225 38%	10 83%	13 54%	10 31%	18 41%	14 31%	4 33%	58 40%	~	~	~	~	4 50%	6 40%	4 44%	65 40%	46 53%*	23 28%*	28 47%	40 36%
NOT ANSWERED	7	201			1	1	3	2	5				1		1		7	4	2	2	5
VALID CASES	174	3195	12	24	32	44	45	12	145	1			1	8	15	9	161	87	83	59	112
NUMBER OF RESPONDENTS	181 100%	3396 100%	12 100%	24 100%	33 100%	45 100%	48 100%	14 100%	150 100%	1 100%			2 100%	8 100%	16 100%	9 100%	168 100%	91 100%	85 100%	61 100%	117 100%

[ASKED IF Q15 = YES AND Q16 >= 1 TIME]

Q22 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SEEM INFORMED AND UP-TO-DATE ABOUT THE CARE YOU GOT FROM THESE DOCTORS OR OTHER HEALTH PROVIDERS?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS-	AMER HAW/ PAC IND/ ALSK	MUL-	NOT HIS- PAN-	HIS- PAN-	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE	FE- MALE				
Q22 NEVER	4 4%	127 7%	~	~	~ 12%~	3%~	~	2%~	~	~	~	~	~ 11%~	1	1	3	2	2	2	2	
SOMETIMES	10 10%	264 14%	1 50%~	2 20%~	1 5%~	1 4%~	3 10%~	1 13%~	7 8%~	1 100%~	~	~	~	1 25%~	1	8	5	4	2	7	
USUALLY	22 22%	545 29%	~ 20%~	2 33%~	7 19%~	5 16%~	5 25%~	2 20%~	17 20%~	~	~	~	1 100%~	1 25%~	3 33%~	1 20%~	20 21%~	8 20%~	13 22%~	7 23%~	15 21%~
ALWAYS	66 65%	930 50%*	1 50%~	6 60%~	13 62%~	17 65%~	22 71%~	5 63%~	59 69%~	~	~	~	~ 50%~	2 56%~	5 40%~	63 67%~	25 63%~	40 68%~	20 65%~	46 66%~	
#ALWAYS + USUALLY (NET)	88 86%	1474 79%*	1 50%~	8 80%~	20 95%~	22 85%~	27 87%~	7 88%~	76 89%~	~	~	~	~ 100%~	1 75%~	3 89%~	8 60%~	3 88%~	33 83%~	53 90%~	27 87%~	61 87%~
TOP BOX SCORE	66 65%	930 50%*	1 50%~	6 60%~	13 62%~	17 65%~	22 71%~	5 63%~	59 69%~	~	~	~	~ 50%~	2 56%~	5 40%~	63 67%~	25 63%~	40 68%~	20 65%~	46 66%~	
NOT ANSWERED	2	57	1	1					2							2	1	1		2	
VALID CASES	102	1865	2	10	21	26	31	8	85	1			1	4	9	5	94	40	59	31	70
NUMBER OF RESPONDENTS	104	1922	2	11	22	26	31	8	87	1			1	4	9	5	96	41	60	31	72
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q15 = YES AND Q16 >= 1 TIME AND Q21 = YES]

Q23 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR PERSONAL DOCTOR?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER								
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	OTH-	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE										
Q23 WORST PERSONAL DOCTOR POSSIBLE	2 0.9%	44 1%	~	~	~	2%	2%	~	0.5%	~	~	~	~	~	~	5%	~	~	1%	~	2%	1	1	1%	0.7%		
01	2 0.9%	31 0.8%	~	~	3%	~	2%	~	0.5%	~	~	~	~	11%	~	~	~	~	1%	~	0.8%	1	1	1%	0.7%		
02	1 0.5%	33 0.8%	~	~	3%	~	~	~	0.5%	~	~	~	~	~	~	~	~	~	1%	~	~	1	~	~	0.7%		
03	2 0.9%	49 1%	~	~	3%	2%	~	~	1%	~	~	~	~	~	~	~	~	~	1%	~	~	2	1	1%	0.7%		
04	7 3%	91 2%	1 4%	1 3%	1 3%	2 4%	2 4%	~	3%	~	~	~	~	~	~	~	~	~	5%	~	~	6	3	4	5%	2%	
05	12 5%	232 6%	1 4%	3 10%	2 5%	2 4%	2 4%	2 14%	10 5%	1 100%	~	~	~	11%	~	~	~	~	1	11	~	9	3	4	5%	6%	
06	13 6%	158 4%	2 8%	4 14%	2 5%	3 6%	1 2%*	1 7%	10 5%	~	~	~	~	~	~	10%	2	2	11	18%	5%	8	5	7	9%	6	
07	21 10%	284 7%	4 16%	3 10%	3 8%	1 2%*	7 13%	1 7%	17 9%	~	~	~	~	22%	~	~	2	1	17	18%	8%	9	9	9	11	12%	8%
08	33 15%	633 16%	4 16%	6 21%	4 11%	9 18%	8 15%	2 14%	25 14%	~	~	~	1	1	6	30%	1	6	30	18%	15%	14	18	13	19	17%	14%
09	34 16%	737 19%	4 16%	4 14%	7 19%	7 14%	11 20%	~	16%	~	~	~	~	~	~	15%	3	3	33	16%	~	22	10	8	25	11%	18%
BEST PERSONAL DOCTOR POSSIBLE	92 42%	1651 42%	9 36%	8 28%	15 41%	25 49%	22 40%	8 57%	79 43%	~	~	~	~	44%	~	~	4	6	85	36%	42%	52	39	28	62	37%	45%
#8-10 (NET)	159 73%	3021 77%	17 68%	18 62%	26 70%	41 80%	41 75%	10 71%	134 74%	~	~	~	1	5	15	75%	6	148	55%	74%	88	67	49	106	64%	77%	

Continued

Q23 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR PERSONAL DOCTOR?

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER			
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
9-10 (NET)	126 58%	2388 61%	13 52%~	12 41%~	22 59%~	32 63%	33 60%	8 57%~	109 60%~	~	~	~	4 ~	9 45%~	4 36%~	118 59%~	74 63%	49 52%	36 47%*	87 63%*
NOT ANSWERED	19	511		1	2	8	4	4	16			1		2	1	17	12	6	7	12
VALID CASES	219	3943	25	29	37	51	55	14	182	1		1	9	20	11	201	118	94	76	138
NUMBER OF RESPONDENTS	238 100%	4454 100%	25 100%	30 100%	39 100%	59 100%	59 100%	18 100%	198 100%	1 100%		2 100%	9 100%	22 100%	12 100%	218 100%	130 100%	100 100%	83 100%	150 100%
MEAN	8.28	8.35	8.28	7.86	8.05	8.45	8.31	8.50	8.36	5.00		8.00	7.56	7.90	7.91	8.28	8.47	8.05	7.91	8.46
p stat_(*=Sig @ p<=.05)		.640	~	~	~.512	.903	~	~	~	~	~	~	~	~	~	~	~.169	.177	.061	.104

[ASKED IF Q15 = YES]

Q24 SPECIALISTS ARE DOCTORS LIKE SURGEONS, HEART DOCTORS, ALLERGY DOCTORS, SKIN DOCTORS, AND OTHER DOCTORS WHO SPECIALIZE IN ONE AREA OF HEALTH CARE. IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS TO SEE A SPECIALIST?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	NOT HIS- PAN-	HIS- PAN-	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q24 YES	104 34%	2057 40%*	4 9%~	13 28%~	19 37%	27 40%	30 47%*	9 50%~	86 35%	1 100%	1 100%~	1 ~100%	2 18%~	12 41%~	5 31%~	95 35%~	44 25%*	58 51%*	35 33%	69 37%	
NO	198 66%	3041 60%*	39 91%~	33 72%~	32 63%	41 60%	34 53%*	9 50%~	163 65%	~	~	~	~	9 82%~	17 59%~	11 69%~	180 65%~	134 75%*	56 49%*	71 67%	120 63%
NOT ANSWERED	15	457	1			3	2	2	5				1	2	1	7	3	3	3	4	
VALID CASES	302	5097	43	46	51	68	64	18	249	1	1	1	11	29	16	275	178	114	106	189	
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%



Q25 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT TO SEE A SPECIALIST AS SOON AS YOU NEEDED?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q25 NEVER	4 4%	91 5%	~	1 9%~	1 5%~	1 4%~	1 3%~	2 2%~	1 ~100%~	~	~	~	~	1 10%~	4 ~ 4%~	4 ~ 7%~	2 6%~	2 3%~			
SOMETIMES	19 19%	329 17%	2 50%~	2 18%~	2 11%~	5 21%~	5 17%~	3 33%~	17 21%~	~	~	~	~	2 20%~	1 20%~	18 20%~	7 17%~	12 22%~	8 24%~	11 17%~	
USUALLY	26 27%	546 29%	~	1 9%~	6 32%~	3 13%~	12 41%~	2 22%~	22 27%~	~	~	~	1 ~100%~	1 50%~	2 20%~	1 20%~	23 26%~	13 32%~	11 20%~	6 18%~	20 31%~
ALWAYS	49 50%	927 49%	2 50%~	7 64%~	10 53%~	15 63%~	11 38%~	4 44%~	41 50%~	1 100%~	~	~	~	1 50%~	5 50%~	3 60%~	44 49%~	21 51%~	28 51%~	18 53%~	31 48%~
#ALWAYS + USUALLY (NET)	75 77%	1473 78%	2 50%~	8 73%~	16 84%~	18 75%~	23 79%~	6 67%~	63 77%~	1 100%~	~	~	1 ~100%~	2 100%~	7 70%~	4 80%~	67 75%~	34 83%~	39 71%~	24 71%~	51 80%~
TOP BOX SCORE	49 50%	927 49%	2 50%~	7 64%~	10 53%~	15 63%~	11 38%~	4 44%~	41 50%~	1 100%~	~	~	~	1 50%~	5 50%~	3 60%~	44 49%~	21 51%~	28 51%~	18 53%~	31 48%~
NOT ANSWERED	6	107		2		3	1		4					2		6	3	3	1	5	
VALID CASES	98	1893	4	11	19	24	29	9	82	1	1		1	2	10	5	89	41	55	34	64
NUMBER OF RESPONDENTS	104	2000	4	13	19	27	30	9	86	1	1		1	2	12	5	95	44	58	35	69
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

Q26 HOW MANY SPECIALISTS HAVE YOU SEEN IN THE LAST 6 MONTHS?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q26 NONE	1 1%	66 3%*	~	~	5%~	~	~	~	1%~	~	~	~	~	~	~	1%~	1 2%~	~	~	1 2%~
1 SPECIALIST	60 59%	967 51%	4 100%~	9 75%~	10 53%~	14 54%~	18 62%~	4 44%~	47 56%~	1 100%~	~	1 ~100%~	1 50%~	9 82%~	4 80%~	53 58%~	27 64%~	31 54%~	21 60%~	39 59%~
2	23 23%	501 26%	~	2 17%~	3 16%~	7 27%~	6 21%~	4 44%~	21 25%~	1 ~100%~	~	~	1 ~50%~	~	23 ~25%~	10 24%~	13 23%~	8 23%~	15 23%~	
3	11 11%	222 12%	~	1 8%~	3 16%~	2 8%~	5 17%~	~	10 12%~	~	~	~	~	1 9%~	10 ~11%~	2 5%~	9 16%~	4 11%~	7 11%~	
4	3 3%	72 4%	~	~	1 5%~	2 8%~	~	~	3 4%~	~	~	~	~	~	3 ~3%~	1 2%~	2 4%~	2 6%~	1 2%~	
5 OR MORE SPECIALISTS	3 3%	70 4%	~	~	1 5%~	1 4%~	~	1 11%~	2 2%~	~	~	~	~	1 9%~	1 20%~	2 2%~	1 2%~	2 4%~	3 ~5%~	
NOT ANSWERED	3	103	~	1	~	1	1	~	2	~	~	~	~	1	3	2	1	~	3	
VALID CASES	101	1897	4	12	19	26	29	9	84	1	1	1	2	11	5	92	42	57	35	66
NUMBER OF RESPONDENTS	104	2000	4	13	19	27	30	9	86	1	1	1	2	12	5	95	44	58	35	69
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q24 = YES]

Q27 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOU SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE	FE- MALE				
Q27 WORST SPECIALIST POSSIBLE		10 0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~			
01	2 2%	12 0.7%	~	~	~	1 4%	1 4%	2 3%	~	~	~	~	~	~	2 2%	2 4%	1 3%	1 2%			
02	1 1%	19 1%	~	1 8%	~	~	~	~	~	~	~	~	1 9%	1 1%	~	1 2%	~	1 2%			
03	2 2%	29 2%	~	1 8%	1 6%	~	~	2 3%	~	~	~	~	~	2 2%	2 5%	~	1 3%	1 2%			
04	3 3%	30 2%	~	~	~	2 8%	1 4%	2 3%	~	~	1 100%	~	~	1 20%	2 2%	1 3%	2 4%	~	3 5%		
05	6 6%	55 3%	~	1 8%	~	1 4%	2 7%	1 11%	5 6%	~	~	~	1 50%	~	6 7%	1 3%	5 9%	2 6%	4 6%		
06	5 5%	75 4%	2 50%	2 17%	1 6%	~	~	5 6%	~	~	~	~	~	~	5 6%	3 8%	2 4%	2 6%	3 5%		
07	7 7%	144 8%	~	1 8%	1 6%	3 12%	2 7%	~	6 8%	~	~	~	~	1 9%	6 7%	2 5%	4 7%	4 13%	3 5%		
08	18 19%	332 19%	~	2 17%	4 22%	5 20%	4 15%	2 22%	15 19%	~	~	~	~	2 18%	3 60%	14 16%	9 23%	8 14%	6 19%	12 18%	
09	14 14%	332 19%	1 25%	~	2 11%	4 16%	6 22%	1 11%	13 16%	1 100%	~	~	~	~	14 16%	6 15%	8 14%	4 13%	10 15%		
BEST SPECIALIST POSSIBLE	39 40%	747 42%	1 25%	4 33%	9 50%	9 36%	11 41%	5 56%	30 38%	1 100%	~	~	1 50%	7 64%	1 20%	37 42%	15 38%	24 43%	12 38%	27 42%	
#8-10 (NET)	71 73%	1411 79%	2 50%	6 50%	15 83%	18 72%	21 78%	8 89%	58 73%	1 100%	1 100%	~	~	1 50%	9 82%	4 80%	65 73%	30 77%	40 71%	22 69%	49 75%

Continued

Q27 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOU SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST?

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AMR AS-	NATV PAC ILND	AMR IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE MALE			
9-10 (NET)	53 55%	1080 60%	2 50%~	4 33%~	11 61%~	13 52%~	17 63%~	6 67%~	43 54%~	1 100%~	1 100%~		1 ~	7 50%~	20%~	51 57%~	21 54%~	32 57%~	16 50%~	37 57%~	
NOT ANSWERED	3	31				1	2		3							2	2	1	3		
VALID CASES	97	1786	4	12	18	25	27	9	80	1	1		1	2	11	5	89	39	56	32	65
NUMBER OF RESPONDENTS	100 100%	1817 100%	4 100%	12 100%	18 100%	26 100%	29 100%	9 100%	83 100%	1 100%	1 100%		1 100%	2 100%	11 100%	5 100%	91 100%	41 100%	57 100%	35 100%	65 100%
MEAN	8.15	8.46	7.75	7.08	8.67	8.04	8.33	8.89	8.13	10.0	9.00		4.00	7.50	8.64	7.60	8.18	8.28	8.09	8.06	8.20
p stat_(*=Sig @ p<=.05)		.179	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]

Q28 IN THE LAST 6 MONTHS, DID YOU LOOK FOR ANY INFORMATION IN WRITTEN MATERIALS OR ON THE INTERNET ABOUT HOW YOUR HEALTH PLAN WORKS?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE			
Q28 YES	76 25%	1016 20%*	6 14%~	14 30%~	12 24%	26 37%*	12 18%	3 16%~	59 24%	~	~	~	~	5 45%~	9 30%~	3 19%~	69 25%~	41 23%	31 27%	26 24%	47 25%
NO	229 75%	4109 80%*	37 86%~	32 70%~	39 76%	44 63%*	53 82%	16 84%~	192 76%	1 100%~	1 100%~	~	1 ~100%~	6 55%~	21 70%~	13 81%~	209 75%~	138 77%	84 73%	81 76%	143 75%
NOT ANSWERED	12	429	1			1 1	1 1	1 1	3				1	1	1	4	2	2	2	3	
VALID CASES	305	5125	43	46	51	70	65	19	251	1	1		1	11	30	16	278	179	115	107	190
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q29 IN THE LAST 6 MONTHS, HOW OFTEN DID THE WRITTEN MATERIALS OR THE INTERNET PROVIDE THE INFORMATION YOU NEEDED ABOUT HOW YOUR HEALTH PLAN WORKS?

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		GENDER					
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	MALE	FE- MALE				
Q29 NEVER	5 7%	95 10%	~	7%~	1 8%~	1 13%~	3 ~	~	2 4%~	~	~	~	1 ~	2 25%~	~	5 8%~	4 10%~	1 4%~	3 12%~	2 5%~	
SOMETIMES	26 36%	336 35%	50%~	3 50%~	7 33%~	4 30%~	7 8%~	1 33%~	1 33%~	19 33%~	~	~	~	2 40%~	2 25%~	2 67%~	21 32%~	12 29%~	10 36%~	7 27%~	16 36%~
USUALLY	28 38%	299 31%	50%~	3 36%~	5 42%~	5 35%~	8 50%~	6 33%~	1 42%~	24 42%~	~	~	~	2 40%~	2 25%~	1 33%~	26 39%~	17 41%~	11 39%~	12 46%~	16 36%~
ALWAYS	14 19%	228 24%	~	1 7%~	2 17%~	5 22%~	5 42%~	1 33%~	12 21%~	~	~	~	~	2 25%~	2 21%~	14 21%~	8 20%~	6 21%~	4 15%~	10 23%~	
#ALWAYS + USUALLY (NET)	42 58%	526 55%	50%~	3 43%~	6 58%~	7 57%~	13 92%~	11 67%~	2 63%~	36 63%~	~	~	~	2 40%~	4 50%~	1 33%~	40 61%~	25 61%~	17 61%~	16 62%~	26 59%~
TOP BOX SCORE	14 19%	228 24%	~	1 7%~	2 17%~	5 22%~	5 42%~	1 33%~	12 21%~	~	~	~	~	2 25%~	2 21%~	14 21%~	8 20%~	6 21%~	4 15%~	10 23%~	
NOT ANSWERED	3	45				3			2					1	3		3			3	
VALID CASES	73	957	6	14	12	23	12	3	57					5	8	3	66	41	28	26	44
NUMBER OF RESPONDENTS	76	1002	6	14	12	26	12	3	59					5	9	3	69	41	31	26	47
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

Q30 IN THE LAST 6 MONTHS, DID YOU GET INFORMATION OR HELP FROM YOUR HEALTH PLAN'S CUSTOMER SERVICE?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q30 YES	80 26%	1357 27%	10 23%	12 26%	16 32%	17 25%	16 25%	5 28%	67 27%	~	~	~	~	2 18%	8 29%	3 19%	73 27%	44 25%	32 28%	27 26%	51 27%
NO	222 74%	3728 73%	33 77%	34 74%	34 68%	51 75%	49 75%	13 72%	183 73%	1 100%	1 100%	~	1 100%	9 82%	20 71%	13 81%	202 73%	134 75%	82 72%	78 74%	139 73%
NOT ANSWERED	15	469	1		1	3	1	2	4					1		3	7	3	3	4	3
VALID CASES	302	5085	43	46	50	68	65	18	250	1	1		1	11	28	16	275	178	114	105	190
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q31 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR HEALTH PLAN'S CUSTOMER SERVICE GIVE YOU THE INFORMATION OR HELP YOU NEEDED?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER	
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE	
Q31 NEVER	2 3%	46 4%	1 10%~	1 8%~	~	~	~	2 3%~	~	~	~	~	~	~	2 3%~	1 2%~	1 3%~	1 4%~	1 2%~	
SOMETIMES	15 19%	289 23%	2 20%~	2 17%~	3 19%~	1 7%~	5 33%~	12 18%~	~	~	~	~	1 50%~	1 14%~	14 20%~	8 19%~	6 20%~	5 19%~	9 19%~	
USUALLY	23 30%	401 32%	3 30%~	5 42%~	5 31%~	7 47%~	2 13%~	22 34%~	~	~	~	~	~	1 14%~	1 33%~	20 29%~	13 30%~	9 30%~	7 26%~	16 33%~
ALWAYS	37 48%	508 41%	4 40%~	4 33%~	8 50%~	7 47%~	8 53%~	5 100%~	29 45%~	~	~	~	1 50%~	5 71%~	2 67%~	34 49%~	21 49%~	14 47%~	14 52%~	22 46%~
#ALWAYS + USUALLY (NET)	60 78%	909 73%	7 70%~	9 75%~	13 81%~	14 93%~	10 67%~	5 100%~	51 78%~	~	~	~	1 50%~	6 86%~	3 100%~	54 77%~	34 79%~	23 77%~	21 78%~	38 79%~
TOP BOX SCORE	37 48%	508 41%	4 40%~	4 33%~	8 50%~	7 47%~	8 53%~	5 100%~	29 45%~	~	~	~	1 50%~	5 71%~	2 67%~	34 49%~	21 49%~	14 47%~	14 52%~	22 46%~
NOT ANSWERED	3	75				2	1	2						1		3	1	2		3
VALID CASES	77	1245	10	12	16	15	15	5	65				2	7	3	70	43	30	27	48
NUMBER OF RESPONDENTS	80	1320	10	12	16	17	16	5	67				2	8	3	73	44	32	27	51
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]



Q32 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR HEALTH PLAN'S CUSTOMER SERVICE STAFF TREAT YOU WITH COURTESY AND RESPECT?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q32 NEVER	1 1%	18 1%	~	~	1 6%	~	~	~	1 2%	~	~	~	~	~	~	1 1%	~	3 3%	1 4%	~	
SOMETIMES	8 10%	93 7%	1 10%	~	3 19%	~	2 13%	~	3 5%	~	~	~	~	1 50%	2 29%	~	6 9%	3 7%	3 10%	2 7%	4 8%
USUALLY	11 14%	288 23%*	2 20%	3 25%	~	4 27%	~	~	11 17%	~	~	~	~	~	~	~	10 14%	4 9%	6 20%	4 15%	7 15%
ALWAYS	57 74%	849 68%	7 70%	9 75%	12 75%	11 73%	13 87%	5 100%	50 77%	~	~	~	~	1 50%	5 71%	3 100%	53 76%	36 84%	20 67%	20 74%	37 77%
#ALWAYS + USUALLY (NET)	68 88%	1137 91%	9 90%	12 100%	12 75%	15 100%	13 87%	5 100%	61 94%	~	~	~	~	1 50%	5 71%	3 100%	63 90%	40 93%	26 87%	24 89%	44 92%
TOP BOX SCORE	57 74%	849 68%	7 70%	9 75%	12 75%	11 73%	13 87%	5 100%	50 77%	~	~	~	~	1 50%	5 71%	3 100%	53 76%	36 84%	20 67%	20 74%	37 77%
NOT ANSWERED	3	73				2	1		2						1		3	1	2		3
VALID CASES	77	1247	10	12	16	15	15	5	65					2	7	3	70	43	30	27	48
NUMBER OF RESPONDENTS	80	1320	10	12	16	17	16	5	67					2	8	3	73	44	32	27	51
	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

Q33 IN THE LAST 6 MONTHS, DID YOUR HEALTH PLAN GIVE YOU ANY FORMS TO FILL OUT?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q33 YES	94 31%	1535 30%	13 31%~	7 16%~	16 31%	30 43%*	16 25%	4 21%~	79 32%	~	~	~	~	18%~	24%~	7 19%~	3 30%~	82 30%~	47 27%*	42 37%	41 39%*	48 25%*
NO	209 69%	3528 70%	29 69%~	38 84%~	35 69%	40 57%*	48 75%	15 79%~	171 68%	1 100%	1 100%~	~	1 ~100%	9 82%~	22 76%~	13 81%~	194 70%~	130 73%*	73 63%	65 61%*	141 75%*	
NOT ANSWERED	14	491	2	1	1	2	1	4	4				1	2	1	6	4	2	4	2	3	4
VALID CASES	303	5063	42	45	51	70	64	19	250	1	1		1	11	29	16	276	177	115	106	189	
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%	

PQ34 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR HEALTH PLAN EASY TO FILL OUT?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
PQ34 NEVER	3 1%	53 1%	1 2%	1 2%	1 ~	1 1%	~	2 ~	0.8%	~	~	~	~	~	3%	~	2 ~	1 ~	2 0.6%	2 2%	1 0.5%	
SOMETIMES	19 6%	302 6%	2 5%	1 2%	1 2%*	9 13%*	3 5%	~	14 6%	~	~	~	~	~	7%	~	2 6%	16 6%	6 3%*	11 10%	8 8%	9 5%
USUALLY	31 10%	589 12%	6 14%	3 7%	4 8%	9 13%	5 8%	2 11%	30 12%*	~	~	~	~	~	~	~	28 10%	17 10%	12 11%	16 15%	14 8%	
ALWAYS	245 82%	4094 81%	33 79%	40 89%	46 90%*	48 72%*	56 88%	16 89%	199 81%	1 100%	1 100%	~	1 ~100%	11 ~100%	26 90%	~	15 94%	225 83%	152 86%*	86 77%	78 75%*	162 87%*
#ALWAYS + USUALLY (NET)	276 93%	4682 93%	39 93%	43 96%	50 98%*	57 85%*	61 95%	18 100%	229 93%	1 100%	1 100%	~	1 ~100%	11 ~100%	26 90%	~	15 94%	253 93%	169 96%*	98 88%*	94 90%	176 95%
TOP BOX SCORE	245 82%	4094 81%	33 79%	40 89%	46 90%*	48 72%*	56 88%	16 89%	199 81%	1 100%	1 100%	~	1 ~100%	11 ~100%	26 90%	~	15 94%	225 83%	152 86%*	86 77%	78 75%*	162 87%*
NOT ANSWERED	5	97				3	1	5									5	1	4	2	3	
VALID CASES	298	5037	42	45	51	67	64	18	245	1	1		1	11	29		16	271	176	111	104	186
NUMBER OF RESPONDENTS	303 100%	5134 100%	42 100%	45 100%	51 100%	70 100%	64 100%	19 100%	250 100%	1 100%	1 100%		1 100%	11 100%	29 100%		16 100%	276 100%	177 100%	115 100%	106 100%	189 100%

[ASKED IF Q33 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q33 = NO]

Q35 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR HEALTH PLAN?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY	HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE			
Q35 WORST HEALTH PLAN POSSIBLE	3 1%	48 1%	~	~	2%~	2%	~	0.9%	~	~	~	~	~	~	2	2	~	2%	~	1%
01	1 0.4%	36 0.7%	~	~	~	2%	~	~	~	~	~	~	3%	1	1	~	0.9%	~	0.6%	1
02	5 2%	58 1%	~	~	2%~	3%	~	6%~	0.9%	~	~	~	100%~	1	1	1	3%	~	5%~	5
03	4 1%	85 2%	1 2%~	2 5%~	~	1 2%	~	2%*	~	~	~	~	~	~	4	2	~	2%	1%	2
04	5 2%	108 2%	1 2%~	~	1 2%~	1 2%	1 2%	~	1%	~	~	~	9%~	~	4	1	~	2%~	0.6%	3
05	36 13%	486 10%	5 11%~	7 17%~	5 11%~	11 17%	6 10%	~	28	~	~	~	9%~	1	5	1	34	23	12	16
06	16 6%	314 6%	2 5%~	6 14%~	3 6%~	3 5%	2 3%	~	15	~	~	~	~	~	1	16	10	6	6	8
07	32 11%	595 12%	8 18%~	6 14%~	4 9%~	5 8%	8 13%	~	29	~	~	~	9%~	1	2	1	29	21	10	13
08	56 20%	978 20%	10 23%~	8 19%~	9 19%~	11 17%	14 23%	2 13%~	43	1	~	~	27%~	3	7	7	47	34	19	18
09	51 18%	825 17%	11 25%~	5 12%~	10 21%~	12 18%	10 17%	1 6%~	42	1	~	~	17%~	5	2	2	46	33	17	19
BEST HEALTH PLAN POSSIBLE	76 27%	1331 27%	6 14%~	8 19%~	13 28%~	16 25%	19 32%	12 75%~	64	~	~	~	36%~	4	7	5	70	43	31	23
#8-10 (NET)	183 64%	3134 64%	27 61%~	21 50%~	32 68%~	39 60%	43 72%	15 94%~	149	1	1	~	64%~	7	19	14	163	110	67	60

Continued

Q35 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR HEALTH PLAN?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE MALE		
9-10 (NET)	127 45%	2156 44%	17 39%	13 31%	23 49%	28 43%	29 48%	13 81%	106 46%	1 ~100%	1 ~	1 ~	4 ~	12 36%	12 41%	7 41%	116 45%	76 46%	48 44%	42 42%	82 46%
NOT ANSWERED	32	689	4	4	6	6	4	22				1		2		25	14	9	9	16	
VALID CASES	285	4865	44	42	47	65	60	16	232	1	1	1	11	29	17	257	167	108	100	177	
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%	
MEAN	7.75	7.79	7.70	7.33	7.85	7.35	8.23	9.19	7.86	8.00	9.00	2.00	7.45	7.55	8.12	7.77	7.97	7.50	7.73	7.82	
p stat_(*=Sig @ p<=.05)		.804	~	~	~.141	.025*		~.161	~	~	~	~	~	~	~	~	~.048*	.126	.884	.515	

Q35A IN THE LAST 6 MONTHS, DID YOU HAVE A HEALTH PROBLEM FOR WHICH YOU NEEDED SPECIAL MEDICAL EQUIPMENT, SUCH AS A CANE, A WHEELCHAIR, OR OXYGEN EQUIPMENT?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ IND/ PAC ALSK	AMER ILND NATV OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q35A YES	38 13%	908 18%*	2 5%~	3 7%~	4 8%	12 17%	13 20%	3 16%~	29 12%	1 100%~	~	~	~	3 27%~	4 13%~	5 31%~	33 12%~	6 3%*	30 26%*	11 10%	27 14%
NO	265 87%	4189 82%*	41 95%~	41 93%~	47 92%	58 83%	51 80%	16 84%~	220 88%	1 ~100%~	~	~	1 ~100%~	8 73%~	26 87%~	11 69%~	243 88%~	170 97%*	86 74%*	95 90%	162 86%
NOT ANSWERED	14	458	1	2		1	2	1	5				1	1	1	6	5	1	3	4	
VALID CASES	303	5096	43	44	51	70	64	19	249	1	1		1	11	30	16	276	176	116	106	189
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q35B IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE MEDICAL EQUIPMENT YOU NEEDED THROUGH YOUR HEALTH PLAN?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE
Q35B NEVER	11 30%	172 22%	2 67%	2 50%	4 33%	1 8%	1 33%	9 32%	1 100%				1 33%		2 40%	9 28%	2 40%	8 27%	5 50%	6 22%
SOMETIMES	7 19%	131 17%	1 50%	1 33%	1 25%	4 33%	5 18%					1 33%	1 25%	1 20%	6 19%	1 20%	6 20%	1 10%	6 22%	
USUALLY	6 16%	173 22%		1 25%	2 17%	1 8%	2 67%	4 14%				1 33%	1 25%	1 20%	5 16%	1 20%	5 17%	1 10%	5 19%	
ALWAYS	13 35%	296 38%	1 50%		6 50%	6 50%	10 36%						2 50%	1 20%	12 38%	1 20%	11 37%	3 30%	10 37%	
#ALWAYS + USUALLY (NET)	19 51%	470 61%	1 50%	1 25%	8 67%	7 58%	2 67%	14 50%				1 33%	3 75%	2 40%	17 53%	2 40%	16 53%	4 40%	15 56%	
TOP BOX SCORE	13 35%	296 38%	1 50%		6 50%	6 50%	10 36%						2 50%	1 20%	12 38%	1 20%	11 37%	3 30%	10 37%	
NOT ANSWERED	1	58				1	1							1	1	1		1		
VALID CASES	37	773	2	3	4	12	12	3	28	1			3	4	5	32	5	30	10	27
NUMBER OF RESPONDENTS	38	831	2	3	4	12	13	3	29	1			3	4	5	33	6	30	11	27
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q35A = YES]

Q35C IN THE LAST 6 MONTHS, DID YOU HAVE ANY HEALTH PROBLEMS THAT NEEDED SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	OTH-	NOT HIS- IC	HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q35C YES	40 13%	876 17%	5 12%	6 13%	6 12%	13 19%	8 12%	1 5%	33 13%	1 ~100%	~	~	~	6 19%	2 12%	38 14%	21 12%	19 17%	17 16%	23 12%
NO	265 87%	4320 83%	38 88%	40 87%	44 88%	56 81%	57 88%	19 95%	216 87%	1 100%	~	2 ~100%	11 ~100%	25 81%	15 88%	240 86%	158 88%	95 83%	90 84%	167 88%
NOT ANSWERED	12	357	1		1	2	1		5						4	2	3	2	3	
VALID CASES	305	5197	43	46	50	69	65	20	249	1	1	2	11	31	17	278	179	114	107	190
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%



Q35D IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE SPECIAL THERAPY YOU NEEDED THROUGH YOUR HEALTH PLAN?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35D NEVER	19 50%	245 32%	2 40%	3 50%	4 67%	5 42%	3 43%	1 100%	14 45%	1 ~100%	~	~	~	~	4 67%	1 50%	18 50%	9 45%	10 56%	3 19%	16 73%
SOMETIMES	8 21%	126 16%	1 20%	3 50%	~	3 25%	1 14%	~	8 26%	~	~	~	~	~	~	8 22%	4 20%	4 22%	7 44%	1 5%	
USUALLY	4 11%	150 20%	1 20%	~	1 17%	1 8%	1 14%	~	2 6%	~	~	~	~	~	2 33%	1 50%	3 8%	3 15%	1 6%	3 19%	1 5%
ALWAYS	7 18%	244 32%	1 20%	~	1 17%	3 25%	2 29%	~	7 23%	~	~	~	~	~	~	7 19%	4 20%	3 17%	3 19%	4 18%	
#ALWAYS + USUALLY (NET)	11 29%	393 51%	2 40%	~	2 33%	4 33%	3 43%	~	9 29%	~	~	~	~	~	2 33%	1 50%	10 28%	7 35%	4 22%	6 38%	5 23%
TOP BOX SCORE	7 18%	244 32%	1 20%	~	1 17%	3 25%	2 29%	~	7 23%	~	~	~	~	~	~	7 19%	4 20%	3 17%	3 19%	4 18%	
NOT ANSWERED	2	42				1	1		2							2	1	1	1	1	
VALID CASES	38	765	5	6	6	12	7	1	31	1				6	2	36	20	18	16	22	
NUMBER OF RESPONDENTS	40	807	5	6	6	13	8	1	33	1				6	2	38	21	19	17	23	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q35C = YES]

Q35E A HEALTH PROVIDER COULD BE A GENERAL DOCTOR, A SPECIALIST DOCTOR, A NURSE PRACTITIONER, A PHYSICIAN ASSISTANT, A NURSE OR ANYONE ELSE YOU WOULD SEE FOR HEALTH CARE. IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER TALK TOO FAST WHEN TALKING TO YOU?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- ILND NATV	OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q35E ALWAYS	6 2%	186 4%	~	~	4%	3%	2%	~	2%	~	~	~	~	~	3%	~	2%	0.6%	3%	2%	3%
USUALLY	7 2%	261 5%*	5%~	7%~	2%	~	~	~	2%	~	~	~	9%~	3%	6%~	2%	2%	2%	3%	1%	3%
SOMETIMES	55 18%	993 19%	14%~	27%~	20%	19%	15%	11%~	17%	100%~	~	~	9%~	29%~	18%~	18%~	18%	18%	26%*	14%*	
NEVER	233 77%	3697 72%*	81%~	67%~	74%	78%	83%	89%~	79%	~100%~	~	2	9	20	76%~	78%~	79%	76%	71%	82%*	
#NEVER + SOMETIMES (NET)	288 96%	4690 91%*	95%~	93%~	94%	97%	98%	100%~	96%	100%~	100%~	~	2	10	94%~	94%~	96%~	98%	97%	95%	
TOP BOX SCORE	233 77%	3697 72%*	81%~	67%~	74%	78%	83%	89%~	79%	~100%~	~	2	9	20	76%~	78%~	79%	76%	71%	82%*	
NOT ANSWERED	16	417	1	1	1	4	1	8							8	6	2	5	3		
VALID CASES	301	5137	43	45	50	67	66	19	246	1	1	2	11	31	17	274	175	115	104	190	
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%	

Q35F IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER INTERRUPT YOU WHEN YOU WERE TALKING?

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE		
Q35F ALWAYS	4 1%	87 2%	~	2 4%	2 4%	~	~	4 2%*	~	~	~	~	~	~	~	4 1%	2 1%	2 2%	~	4 2%	
USUALLY	7 2%	142 3%	1 2%	2 4%	~	2 3%	1 2%	5 2%	1 100%	~	~	~	1 9%	~	2 12%	4 1%	2 1%	4 4%	2 2%	5 3%	
SOMETIMES	57 19%	912 18%	7 16%	9 20%	9 18%	13 19%	13 20%	3 15%	43 17%	~	~	~	1 50%	2 18%	9 29%	2 12%	54 20%	29 16%	26 23%	21 20%	34 18%
NEVER	235 78%	4005 78%	35 81%	33 72%	39 78%	53 78%	51 78%	17 85%	196 79%	1 ~100%	~	1 ~50%	8 73%	22 71%	13 76%	214 78%	145 81%	82 72%	82 78%	148 77%	
#NEVER + SOMETIMES (NET)	292 96%	4917 96%	42 98%	42 91%	48 96%	66 97%	64 98%	20 100%	239 96%	1 ~100%	~	2 ~100%	10 91%	31 100%	15 88%	268 97%	174 98%	108 95%	103 98%	182 95%	
TOP BOX SCORE	235 78%	4005 78%	35 81%	33 72%	39 78%	53 78%	51 78%	17 85%	196 79%	1 ~100%	~	1 ~50%	8 73%	22 71%	13 76%	214 78%	145 81%	82 72%	82 78%	148 77%	
NOT ANSWERED	14	408	1		1	3	1		6						6	3	3	4	2		
VALID CASES	303	5146	43	46	50	68	65	20	248	1	1	2	11	31	17	276	178	114	105	191	
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%	

Q35G IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE A CONDESCENDING, SARCASTIC OR RUDE TONE OR MANNER WITH YOU?

			AGE					RACE					ETHNICITY		HEALTH STATUS		GENDER				
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q35G ALWAYS	8 3%	75 1%	~	3 7%	1 2%	3 4%	1 2%	~	6 2%	~	~	~	1 50%	1 9%	~	1 6%	7 3%	4 2%	4 3%	3 3%	5 3%
USUALLY	5 2%	99 2%	1 2%	~	~	3 4%	1 5%	~	4 2%	~	~	~	1 9%	~	1 6%	4 1%	2 1%	3 3%	~	5 3%*	
SOMETIMES	34 11%	596 12%	3 7%	8 17%	6 12%	6 9%	9 14%	1 5%	28 11%	1 100%	~	~	2 18%	2 6%	3 18%	30 11%	13 7%*	18 16%	11 10%	22 12%	
NEVER	257 85%	4397 85%	40 91%	35 76%	43 86%	56 82%	55 85%	18 90%	211 85%	1 ~100%	~	1 ~50%	7 64%	29 94%	12 71%	236 85%	158 89%*	91 78%*	93 87%	158 83%	
#NEVER + SOMETIMES (NET)	291 96%	4993 97%	43 98%	43 93%	49 98%	62 91%	64 98%	19 95%	239 96%	1 100%	1 100%	~	1 ~50%	9 82%	31 100%	15 88%	266 96%	171 97%	109 94%	104 97%	180 95%
TOP BOX SCORE	257 85%	4397 85%	40 91%	35 76%	43 86%	56 82%	55 85%	18 90%	211 85%	1 ~100%	~	1 ~50%	7 64%	29 94%	12 71%	236 85%	158 89%*	91 78%*	93 87%	158 83%	
NOT ANSWERED	13	387			1	3	1		5						5	4	1		2	3	
VALID CASES	304	5167	44	46	50	68	65	20	249	1	1		2	11	31	17	277	177	116	107	190
NUMBER OF RESPONDENTS	317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35H IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TELL A DOCTOR OR OTHER HEALTH PROVIDER ANYTHING, EVEN THINGS THAT YOU MIGHT NOT TELL ANYONE ELSE?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE				
Q35H #YES DEFINITELY	133 44%	2206 43%	13 30%	17 37%	22 45%	36 54%	30 45%	10 50%	111 45%	~	~	~100%	2 27%	3 42%	13 42%	7 41%	121 44%	80 45%	48 41%	48 45%	83 44%
YES SOMEWHAT	100 33%	1724 34%	18 41%	16 35%	18 37%	18 27%	21 32%	5 25%	82 33%	1 ~100%	~	~	2 18%	11 35%	11 35%	3 18%	94 34%	61 35%	35 30%	31 29%	66 35%
NO	70 23%	1181 23%	13 30%	13 28%	9 18%	13 19%	15 23%	5 25%	55 22%	1 100%	~	~	6 55%	7 23%	7 41%	61 22%	35 20%	33 28%	27 25%	41 22%	
NOT ANSWERED	14	443			2	4			6							6		5	1	3	3
VALID CASES	303	5111	44	46	49	67	66	20	248	1	1		2	11	31	17	276	176	116	106	190
NUMBER OF RESPONDENTS	317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35I IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q35I #YES DEFINITELY	189 62%	3431 67%	25 58%~	28 61%~	31 63%~	43 62%	44 67%	12 60%~	156 63%	1 ~100%~	1 ~50%~	6 55%~	19 61%~	8 47%~	176 64%~	116 66%	67 57%	64 60%	121 64%	
YES SOMEWHAT	92 30%	1348 26%	15 35%~	14 30%~	14 29%~	22 32%	16 24%	6 30%~	72 29%	1 100%~	1 ~50%~	4 36%~	11 35%~	8 47%~	79 29%~	52 30%	36 31%	32 30%	57 30%	
NO	23 8%	341 7%	3 7%~	4 9%~	4 8%~	4 6%	6 9%	2 10%~	21 8%	~	~	1 ~9%~	1 3%~	1 6%~	22 8%~	8 5%*	14 12%*	11 10%	12 6%	
NOT ANSWERED	13	434	1		2	2			5						5	5		2	3	
VALID CASES	304	5120	43	46	49	69	66	20	249	1	1	2	11	31	17	277	176	117	107	190
NUMBER OF RESPONDENTS	317	5554	44	46	51	71	66	20	254	1	1	2	11	31	17	282	181	117	109	193
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35J IN THE LAST 6 MONTHS, DID YOU FEEL A DOCTOR OR OTHER HEALTH PROVIDER ALWAYS TOLD YOU THE TRUTH ABOUT YOUR HEALTH, EVEN IF THERE WAS BAD NEWS?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q35J #YES DEFINITELY	226 74%	3907 76%	36 82%~	32 70%~	34 71%~	49 71%	51 77%	16 80%~	187 75%	~	~	1 ~ 50%~	8 73%~	23 74%~	9 53%~	210 76%~	139 79%*	80 68%	77 73%	144 75%
YES SOMEWHAT	54 18%	870 17%	5 11%~	12 26%~	8 17%~	14 20%	11 17%	2 10%~	43 17%	1 100%~	1 100%~	~	1 ~ 9%~	7 23%~	5 29%~	47 17%~	28 16%	24 21%	17 16%	36 19%
NO	24 8%	334 7%	3 7%~	2 4%~	6 13%~	6 9%	4 6%	2 10%~	19 8%	~	~	1 ~ 50%~	2 18%~	1 3%~	3 18%~	20 7%~	9 5%*	13 11%	12 11%	11 6%
NOT ANSWERED	13	443			3	2			5						5	5			3	2
VALID CASES	304	5111	44	46	48	69	66	20	249	1	1	2	11	31	17	277	176	117	106	191
NUMBER OF RESPONDENTS	317	5554	44	46	51	71	66	20	254	1	1	2	11	31	17	282	181	117	109	193
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35K IN THE LAST 6 MONTHS, DID YOU FEEL THIS PROVIDER CARED AS MUCH AS YOU DO ABOUT YOUR HEALTH?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q35K																					
#YES DEFINITELY	179 59%	3274 64%	31 70%~	20 43%~	29 60%~	45 66%	40 62%	11 55%~	150 60%	1 ~100%~	1 ~	6 ~	18 50%~	6 60%~	18 58%~	6 38%~	168 61%~	107 61%	66 57%	62 59%	115 61%
YES SOMEWHAT	83 28%	1308 25%	7 16%~	19 41%~	13 27%~	13 19%	20 31%	4 20%~	67 27%	~	~	~	2 ~	10 20%~	2 32%~	4 25%~	75 27%~	54 31%	26 22%	23 22%	56 29%
NO	39 13%	554 11%	6 14%~	7 15%~	6 13%~	10 15%	5 8%	5 25%~	31 12%	1 100%~	~	1 ~	2 50%~	3 20%~	3 10%~	6 38%~	33 12%~	14 8%*	24 21%*	20 19%*	19 10%
NOT ANSWERED	16	417			3	3	1		6				1			1	6	6	1	4	3
VALID CASES	301	5137	44	46	48	68	65	20	248	1	1		2	10	31	16	276	175	116	105	190
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%



Q35L IN THE LAST 6 MONTHS, DID YOU FEEL THIS PROVIDER REALLY CARED ABOUT YOU AS A PERSON?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35L NEVER	23 8%	281 6%	5 11%~	5 ~	4 11%~	6 6%	3 9%	20 15%~	8%	~	~	~	~	2 18%~	1 3%~	2 12%~	21 8%~	9 5%	13 11%	10 9%	13 7%
SOMETIMES	49 16%	704 14%	5 11%~	16 35%~	6 13%~	8 12%	11 17%	37 15%	1 100%~	~	~	~	1 50%~	2 18%~	6 19%~	6 35%~	42 15%~	26 15%	22 19%	25 24%*	23 12%*
USUALLY	77 26%	1231 24%	15 34%~	12 26%~	12 26%~	14 21%	17 26%	4 20%~	60 24%	~	~	~	~	2 18%~	12 39%~	3 18%~	71 26%~	50 28%	23 20%	15 14%*	59 31%*
ALWAYS	152 50%	2878 56%*	19 43%~	18 39%~	24 51%~	42 62%*	32 48%	13 65%~	130 53%	~100%~	1	~	1 50%~	5 45%~	12 39%~	6 35%~	141 51%~	91 52%	57 50%	56 53%	94 50%
#ALWAYS + USUALLY (NET)	229 76%	4109 81%	34 77%~	30 65%~	36 77%~	56 82%	49 74%	17 85%~	190 77%	~100%~	1	~	1 50%~	7 64%~	24 77%~	9 53%~	212 77%~	141 80%	80 70%*	71 67%*	153 81%*
TOP BOX SCORE	152 50%	2878 56%*	19 43%~	18 39%~	24 51%~	42 62%*	32 48%	13 65%~	130 53%	~100%~	1	~	1 50%~	5 45%~	12 39%~	6 35%~	141 51%~	91 52%	57 50%	56 53%	94 50%
NOT ANSWERED	16	461			4	3			7							7	5	2	3	4	
VALID CASES	301	5093	44	46	47	68	66	20	247	1	1		2	11	31	17	275	176	115	106	189
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q35M IN THE LAST 6 MONTHS, HOW OFTEN HAVE YOU BEEN TREATED UNFAIRLY AT A DOCTOR OR OTHER HEALTH PROVIDER'S OFFICE BECAUSE OF YOUR RACE OR ETHNICITY?

			AGE						RACE						ETHNICITY	HEALTH STATUS		GENDER			
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE		
Q35M ALWAYS	2 0.7%	72 1%	~	~	~	1% 2%	1% 2%	~0.4%	~	~	~	~	~	~	3%~	~0.4%	~	2% 2%	~		
USUALLY	1 0.3%	48 0.9%	1 2%~	~	~	~	~	~	~	~	~	~	1 9%~	~	6%~	~0.6%	~	~	1 ~0.5%		
SOMETIMES	15 5%	187 4%	1 2%~	2 4%~	4 8%~	3 4%	4 6%	~	11 4%	~	~	~	1 50%~	1 9%~	1 3%~	3 18%~	11 4%~	6 3%	8 7%	9 8%	5 3%*
NEVER	283 94%	4818 94%	42 95%~	44 96%~	44 92%~	63 94%	61 92%	20 100%~	235 95%	1 100%~	1 100%~	~	1 50%~	9 82%~	29 94%~	13 76%~	263 96%~	168 96%	106 91%	95 90%*	183 97%*
#NEVER + SOMETIMES (NET)	298 99%	5005 98%*	43 98%~	46 100%~	48 100%~	66 99%	65 98%	20 100%~	246 100%	1 100%~	1 100%~	~	2 100%~	10 91%~	30 97%~	16 94%~	274 100%~	174 99%	114 98%	104 98%	188 99%
TOP BOX SCORE	283 94%	4818 94%	42 95%~	44 96%~	44 92%~	63 94%	61 92%	20 100%~	235 95%	1 100%~	1 100%~	~	1 50%~	9 82%~	29 94%~	13 76%~	263 96%~	168 96%	106 91%	95 90%*	183 97%*
NOT ANSWERED	16	430			3	4			7							7	6	1	3	4	
VALID CASES	301	5124	44	46	48	67	66	20	247	1	1		2	11	31	17	275	175	116	106	189
NUMBER OF RESPONDENTS	317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35N IN THE LAST 6 MONTHS, HOW OFTEN HAVE YOU BEEN TREATED UNFAIRLY AT A DOCTOR OR OTHER HEALTH PROVIDER'S OFFICE BECAUSE OF THE TYPE OF HEALTH INSURANCE YOU HAVE OR BECAUSE YOU DO NOT HAVE HEALTH INSURANCE?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q35N ALWAYS	5 2%	130 3%		1 2%		2 3%		4 2%							4 1%	1 0.6%	3 3%	4 2%			
USUALLY	7 2%	191 4%			3 6%	3 4%	1 2%	5 2%					1 9%	1 3%	7 3%	3 2%	4 3%	5 5%	2 1%		
SOMETIMES	51 17%	664 13%	2 5%	9 20%	10 21%	14 20%	14 21%	2 10%	43 17%	1 100%			1 50%	1 9%	3 10%	6 38%	45 16%	23 13%*	27 23%*	15 14%	36 19%
NEVER	238 79%	4121 81%	41 95%	36 78%	35 73%	50 72%	51 77%	18 90%	197 79%	1 100%			1 50%	9 82%	26 87%	10 63%	221 80%	148 85%*	83 71%*	85 81%	149 78%
#NEVER + SOMETIMES (NET)	289 96%	4786 94%*	43 100%	45 98%	45 94%	64 93%	65 98%	20 100%	240 96%	1 100%	1 100%		2 100%	10 91%	29 97%	16 100%	266 96%	171 98%	110 94%	100 95%	185 97%
TOP BOX SCORE	238 79%	4121 81%	41 95%	36 78%	35 73%	50 72%	51 77%	18 90%	197 79%	1 100%			1 50%	9 82%	26 87%	10 63%	221 80%	148 85%*	83 71%*	85 81%	149 78%
NOT ANSWERED	16	448	1		3	2			5					1	1	5	6		4	2	
VALID CASES	301	5106	43	46	48	69	66	20	249	1	1		2	11	30	16	277	175	117	105	191
NUMBER OF RESPONDENTS	317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

Q350 IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER GIVE YOU ALL THE INFORMATION YOU WANTED ABOUT YOUR HEALTH?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q350 NEVER	24 8%	298 6%	18% 8	4% 2	8% 4	6% 4	5% 3	16% 3	9% 21	~ ~	~ ~	50% 1	9% 1	3% 1	12% 2	8% 22	7% 12	10% 12	8% 8	9% 16
SOMETIMES	41 14%	693 14%	14% 6	24% 11	13% 6	10% 7	14% 9	5% 1	14% 34	100% 1	~ ~	~ ~	18% 2	13% 4	24% 4	14% 37	12% 20	18% 21	18% 19	12% 22
USUALLY	62 21%	1328 26%*	18% 8	24% 11	19% 9	22% 15	27% 17	11% 2	20% 49	100% 1	~ ~	~ ~	27% 3	23% 7	29% 5	21% 56	20% 34	22% 26	20% 21	22% 41
ALWAYS	168 57%	2777 55%	50% 22	47% 21	60% 29	62% 43	55% 35	68% 13	58% 142	~ ~	~ ~	50% 1	45% 5	60% 18	35% 6	58% 158	62%* 107	50%* 58	55% 58	58% 108
#ALWAYS + USUALLY (NET)	230 78%	4105 81%	68% 30	71% 32	79% 38	84% 58	81% 52	79% 15	78% 191	100% 1	~ ~	50% 1	73% 8	83% 25	65% 11	78% 214	82% 141	72%* 84	75% 79	80% 149
TOP BOX SCORE	168 57%	2777 55%	50% 22	47% 21	60% 29	62% 43	55% 35	68% 13	58% 142	~ ~	~ ~	50% 1	45% 5	60% 18	35% 6	58% 158	62%* 107	50%* 58	55% 58	58% 108
NOT ANSWERED	22	459		1	3	2	2	1	8					1		9	8		3	6
VALID CASES	295	5095	44	45	48	69	64	19	246	1	1	2	11	30	17	273	173	117	106	187
NUMBER OF RESPONDENTS	317	5554	44	46	51	71	66	20	254	1	1	2	11	31	17	282	181	117	109	193
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q35P IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER ENCOURAGE YOU TO TALK ABOUT ALL YOUR HEALTH QUESTIONS OR CONCERNS?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
Q35P NEVER	46 16%	592 12%	9 20%~	5 11%~	7 15%~	10 14%	11 17%	4 21%~	41 17%~	~	~	1 ~ 50%~	3 ~ 10%~	4 24%~	42 15%~	26 15%	20 17%	20 19%	26 14%	
SOMETIMES	43 15%	825 16%	1 2%~	16 35%~	7 15%~	6 9%	11 17%	~	33 13%~	1 100%~	~	~	5 ~ 45%~	3 10%~	5 29%~	36 13%~	23 13%	17 15%	16 15%	27 14%
USUALLY	63 21%	1308 26%	11 25%~	6 13%~	6 13%~	18 26%	18 28%	4 21%~	52 21%~	~	~	~	2 ~ 18%~	9 30%~	3 18%~	60 22%~	32 18%	30 26%	22 21%	41 22%
ALWAYS	144 49%	2353 46%	23 52%~	19 41%~	28 58%~	35 51%	24 38%*	11 58%~	121 49%~	1 ~100%~	~	1 ~ 50%~	4 36%~	15 50%~	5 29%~	136 50%~	93 53%*	49 42%	47 45%	96 51%
#ALWAYS + USUALLY (NET)	207 70%	3661 72%	34 77%~	25 54%~	34 71%~	53 77%	42 66%	15 79%~	173 70%~	1 ~100%~	~	1 ~ 50%~	6 55%~	24 80%~	8 47%~	196 72%~	125 72%	79 68%	69 66%	137 72%
TOP BOX SCORE	144 49%	2353 46%	23 52%~	19 41%~	28 58%~	35 51%	24 38%*	11 58%~	121 49%~	1 ~100%~	~	1 ~ 50%~	4 36%~	15 50%~	5 29%~	136 50%~	93 53%*	49 42%	47 45%	96 51%
NOT ANSWERED	21	477			3	2	2	1	7					1		8	7	1	4	3
VALID CASES	296	5077	44	46	48	69	64	19	247	1	1	2	11	30	17	274	174	116	105	190
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q35Q IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE MEDICAL WORDS YOU DID NOT UNDERSTAND?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q35Q ALWAYS	6 2%	187 4%*	1 2%~	1 ~	1 2%~	3 1%	5 5%	5 2%	~	~	~	~	~	1 9%~	~	1 6%~	5 2%~	3 2%	3 3%	1 1%	5 3%
USUALLY	13 4%	215 4%	4 9%~	5 ~	2 10%~	1 3%	1 2%	8 3%	~	~	~	~	~	1 9%~	4 13%~	1 6%~	12 4%~	8 5%	5 4%	6 6%	6 3%
SOMETIMES	121 41%	1973 39%	20 45%~	21 46%~	22 46%~	28 41%	21 33%	4 20%~	99 40%	1 ~100%~	1 ~	4 ~	13 ~	7 41%~	111 41%~	70 40%	46 39%	46 39%	74 39%	46 44%	74 39%
NEVER	156 53%	2695 53%	19 43%~	25 54%~	20 42%~	37 54%	39 61%	15 75%~	134 54%	1 100%~	~	1 ~	5 ~	14 45%~	8 45%~	146 47%~	92 53%~	63 53%	51 54%	105 49%	105 55%
#NEVER + SOMETIMES (NET)	277 94%	4668 92%	39 89%~	46 100%~	42 88%~	65 96%	19 94%	19 95%	233 95%	1 100%~	1 100%~	2 ~100%~	9 82%~	27 87%~	15 88%~	257 94%~	162 94%	109 93%	97 93%	179 94%	179 94%
TOP BOX SCORE	156 53%	2695 53%	19 43%~	25 54%~	20 42%~	37 54%	39 61%	15 75%~	134 54%	1 100%~	~	1 ~	5 ~	14 45%~	8 45%~	146 47%~	92 53%~	63 53%	51 54%	105 49%	105 55%
NOT ANSWERED	21	484			3	3	2		8							8	8			5	3
VALID CASES	296	5070	44	46	48	68	64	20	246	1	1	2	11	31	17	274	173	117	104	190	190
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%	193 100%

Q35R WHAT IS YOUR PREFERRED LANGUAGE?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q35R ENGLISH	301 100%	4755 93%*	43 100%	46 100%	51 100%	71 100%	64 98%	20 100%	253 100%	1 100%	1 100%	2 100%	10 91%	30 100%	15 94%	281 100%	180 100%	116 99%	108 100%	191 99%
SPANISH	1 0.3%	169 3%*	~	~	~	~	1 2%~	~	~	~	~	~	~	1 9%~	~	1 6%~	~	1 0.9%~	~	1 0.5%~
SOME OTHER LANGUAGE		191 4%~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	15	438	1				1		1					1	1	1	1		1	1
VALID CASES	302	5116	43	46	51	71	65	20	253	1	1	2	11	30	16	281	180	117	108	192
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q35S HOW WELL DO YOU SPEAK ENGLISH?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE
Q35S VERY WELL		11 4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
WELL		41 17%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT WELL	1 100%	119 49%	~	~	~	~100%	~	~	~	~	~	~100%	~100%	~	~100%	~	~100%	~100%	~100%
NOT AT ALL		71 30%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		8																	
VALID CASES	1	242				1						1	1		1		1		1
NUMBER OF RESPONDENTS	1	250				1						1	1		1		1		1
	100%	100%				100%						100%	100%		100%		100%		100%

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]



Q35T IN THE LAST 6 MONTHS, WHEN YOU CALLED OR SPOKE TO SOMEONE FROM YOUR HEALTH PLAN, HOW OFTEN DID THEY SPEAK TO YOU IN YOUR PREFERRED LANGUAGE?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	NOT HIS- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE MALE		
Q35T NEVER		52 22%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	1 100%	51 22%	~	~	~	~100%	~	~	~	~	~100%	~	~100%	~	~100%	~	~100%	~
USUALLY		50 22%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS		77 34%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#ALWAYS + USUALLY (NET)		128 55%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
TOP BOX SCORE		77 34%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		20																
VALID CASES	1	230				1				1		1		1		1		1
NUMBER OF RESPONDENTS	1	250				1				1		1		1		1		1
	100%	100%				100%				100%		100%		100%		100%		100%

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]

Q35U AN INTERPRETER IS SOMEONE WHO HELPS YOU TALK WITH OTHERS WHO DO NOT SPEAK YOUR LANGUAGE. INTERPRETERS CAN INCLUDE STAFF FROM THE HEALTH PLAN OR TELEPHONE INTERPRETERS. IN THE LAST 6 MONTHS, WAS THERE ANY TIME WHEN YOU NEEDED AN INTERPRETER TO TALK WITH SOMEONE FROM YOUR HEALTH PLAN?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE
Q35U YES	1	134				1								1		1		1
	100%	58%	~	~	~	~100%	~	~	~	~	~100%	~	~100%	~	~100%	~	~100%	~100%
NO		98																
		42%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		19																
VALID CASES	1	231				1					1		1		1		1	
NUMBER OF RESPONDENTS	1	250				1					1		1		1		1	
	100%	100%				100%					100%		100%		100%		100%	

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]

Q35V IN THE LAST 6 MONTHS, DID ANYONE FROM THE HEALTH PLAN LET YOU KNOW THAT AN INTERPRETER WAS AVAILABLE FREE OF CHARGE?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE
Q35V NEVER		21 21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	1 100%	13 13%	~	~	~	1 ~100%	~	~	~	~	1 ~100%	~	1 ~100%	~	1 ~100%	~	1 ~100%	~	1 ~100%
USUALLY		16 16%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS		50 50%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#ALWAYS + USUALLY (NET)		66 66%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
TOP BOX SCORE		50 50%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		7																	
VALID CASES	1	100				1					1		1		1		1		1
NUMBER OF RESPONDENTS	1	107				1					1		1		1		1		1
	100%	100%				100%					100%		100%		100%		100%		100%

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]

Q35W IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE AN INTERPRETER PROVIDED BY YOUR HEALTH PLAN TO HELP YOU TALK WITH SOMEONE FROM THE PLAN?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE MALE	FE- MALE
Q35W NEVER		16 16%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	1 100%	27 27%	~	~	~	~100%	~	~	~	~	~100%	~	~100%	~	~100%	~	~100%	~
USUALLY		21 21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS		37 36%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		6																
VALID CASES	1	101				1				1		1		1		1		1
NUMBER OF RESPONDENTS	1	107				1				1		1		1		1		1
	100%	100%				100%				100%		100%		100%		100%		100%

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]

Q35X IN THE LAST 6 MONTHS, WHEN YOU USED AN INTERPRETER PROVIDED BY YOUR HEALTH PLAN, WHO WAS THE INTERPRETER YOU USED MOST OFTEN?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	OTH-	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	MALE	FE- MALE
Q35X A STAFF MEMBER FROM THE HEALTH PLAN		7 9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
AN INTERPRETER PROVIDED IN-PERSON BY THE HEALTH PLAN		16 21%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
A TELEPHONE INTERPRETER PROVIDED BY THE HEALTH PLAN		22 28%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMEONE ELSE PROVIDED BY THE HEALTH PLAN		7 9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
DON'T KNOW OR UNSURE		25 33%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	1	8												1			1		1
VALID CASES NUMBER OF RESPONDENTS	1	77 85 100%					1							1			1		1

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

Q35Y IN THE LAST 6 MONTHS, HOW OFTEN DID THIS INTERPRETER TREAT YOU WITH COURTESY AND RESPECT?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE
Q35Y NEVER		1 0.9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES		6 7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
USUALLY		22 26%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS	1 100%	56 66%	~	~	~	~100%	~	~	~	~	~100%	~	~100%	~	~100%	~	~100%	~100%
#ALWAYS + USUALLY (NET)	1 100%	78 92%	~	~	~	~100%	~	~	~	~	~100%	~	~100%	~	~100%	~	~100%	~100%
TOP BOX SCORE	1 100%	56 66%	~	~	~	~100%	~	~	~	~	~100%	~	~100%	~	~100%	~	~100%	~100%
VALID CASES	1	85				1					1		1		1		1	1
NUMBER OF RESPONDENTS	1 100%	85 100%				100%					100%		100%		100%		100%	100%

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35W = SOMETIMES OR USUALLY OR ALWAYS]

Q35Z USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST INTERPRETER POSSIBLE AND 10 IS THE BEST INTERPRETER POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THIS INTERPRETER?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY	HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	FE- MALE	MALE
Q35Z WORST INTERPRETER POSSIBLE		1 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
05		5 6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
06		1 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
07		7 9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
08	1 100%	19 22%	~	~	~	1 ~100%	~	~	~	~	1 ~100%	~	1 ~100%	~	1 ~100%	~	1 ~100%	~
09		15 18%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
BEST INTERPRETER POSSIBLE		37 44%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
#8-10 (NET)	1 100%	71 84%	~	~	~	1 ~100%	~	~	~	~	1 ~100%	~	1 ~100%	~	1 ~100%	~	1 ~100%	~
9-10 (NET)		52 62%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
VALID CASES	1	85				1				1		1		1		1		1
NUMBER OF RESPONDENTS	1 100%	85 100%				1 100%				1 100%		1 100%		1 100%		1 100%		1 100%
MEAN	8.00	8.74				8.00				8.00		8.00		8.00		8.00		8.00
p stat_(*=Sig @ p<=.05)		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

Q35AA IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE A FRIEND OR FAMILY MEMBER AS AN INTERPRETER WHEN YOU TALKED WITH SOMEONE FROM YOUR HEALTH PLAN?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	NOT HIS- PAN- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE
Q35AA NEVER		48 48%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	1 100%	22 22%	~	~	~	~100%	~	~	~	~	~100%	~	~100%	~	~100%	~	~100%	
USUALLY		7 7%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
ALWAYS		23 23%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NOT ANSWERED		7																
VALID CASES	1	100				1				1		1		1		1		
NUMBER OF RESPONDENTS	1	107				1				1		1		1		1		
	100%	100%				100%				100%		100%		100%		100%		

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]



Q35AB IN THE LAST 6 MONTHS, DID YOU USE FRIENDS OR FAMILY MEMBERS AS INTERPRETERS BECAUSE THAT WAS WHAT YOU PREFERRED?

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE
Q35AB NEVER		4 8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	1 100%	18 36%	~	~	~	1 ~100%	~	~	~	~	~	1 ~100%	~	1 ~100%	~	1 ~100%	~	1 ~100%
USUALLY		14 27%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
ALWAYS		15 30%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		1																
VALID CASES	1	52				1						1		1		1		1
NUMBER OF RESPONDENTS	1 100%	52 100%				1 100%						1 100%		1 100%		1 100%		1 100%

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35AA = SOMETIMES OR USUALLY OR ALWAYS]

Q36 IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL HEALTH?

	COPA TOT ADLT	OHP TOT ADLT	AGE							RACE							ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE		
Q36																						
EXCELLENT	27 9%	446 9%	11 25%~	3 7%~	4 8%	3 4%*	5 8%	1 5%~	22 9%~	~	~	~	~	1 10%~	4 13%~	1 6%~	26 9%~	27 15%~	~	9 8%	18 10%	
VERY GOOD	64 21%	1044 20%	11 25%~	15 33%~	14 28%	11 16%	4 6%*	6 30%~	56 22%~	~	~	~	~	4 40%~	1 3%~	7 44%~	56 20%~	64 35%~	~	23 21%	40 21%	
GOOD	90 30%	1716 34%	15 34%~	17 37%~	15 30%	15 21%*	21 33%	7 35%~	75 30%~	~	~	~	~	2 20%~	12 39%~	3 19%~	85 31%~	90 50%*	~	32 30%	58 31%	
FAIR	76 26%	1325 26%	6 14%~	10 22%~	7 14%*	29 41%*	19 30%	4 20%	67 27%~	1 100%~	1 100%~	~	~	~	7 23%~	3 19%~	72 26%~	76 ~	~	36 33%*	39 21%*	
POOR	41 14%	590 12%	1 2%~	1 2%~	10 20%	12 17%	14 22%	2 10%~	30 12%~	~	~	~	1 100%~	3 30%~	7 23%~	2 13%~	39 14%~	41 ~	~	8 7%*	33 18%*	
#EXCELLENT + VERY GOOD + GOOD (NET)	181 61%	3206 63%	37 84%~	35 76%~	33 66%	29 41%*	30 48%*	14 70%~	153 61%~	~	~	~	~	7 70%~	17 55%~	11 69%~	167 60%~	181 100%~	~	64 59%	116 62%	
NOT ANSWERED	19	432			1	1	3		4				1	1		4				1	5	
VALID CASES	298	5122	44	46	50	70	63	20	250	1	1		1	10	31	16	278	181	117	108	188	
NUMBER OF RESPONDENTS	317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q37 IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL MENTAL OR EMOTIONAL HEALTH?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE	
Q37 EXCELLENT	41 14%	724 14%	8 18%~	5 11%~	6 12%	11 15%	7 11%	2 10%~	33 13%~	1 ~100%~	~	~	2 ~20%~	5 16%~	1 6%~	40 14%~	29 16%	12 10%	15 14%	26 14%	
VERY GOOD	73 24%	1207 24%	7 16%~	15 33%~	15 30%	11 15%*	17 27%	7 35%~	65 26%~	1 100%~	~	~	2 ~20%~	5 16%~	4 25%~	68 24%~	59 33%*	14 12%*	23 21%	50 26%	
GOOD	85 28%	1578 31%	15 34%~	12 26%~	16 32%	16 23%	19 30%	6 30%~	71 28%~	~	~	~	1 ~10%~	10 32%~	5 31%~	78 28%~	61 34%*	23 20%*	35 32%	49 26%	
FAIR	73 24%	1184 23%	13 30%~	10 22%~	10 20%	21 30%	13 20%	5 25%~	60 24%~	~	~	~	5 ~50%~	7 23%~	4 25%~	69 25%~	29 16%*	44 38%*	24 22%	48 25%	
POOR	28 9%	395 8%	1 2%~	4 9%~	3 6%	12 17%*	8 13%	~	23 9%~	~	~	1 ~100%~	4 ~13%~	2 13%~	25 9%~	3 2%*	24 21%*	11 10%	17 9%		
#EXCELLENT + VERY GOOD + GOOD (NET)	199 66%	3509 69%	30 68%~	32 70%~	37 74%	38 54%*	43 67%	15 75%~	169 67%~	1 100%~	1 100%~	~	5 ~50%~	20 65%~	10 63%~	186 66%~	149 82%*	49 42%*	73 68%	125 66%	
NOT ANSWERED	17	466			1		2		2			1	1		2			1	3		
VALID CASES	300	5088	44	46	50	71	64	20	252	1	1	1	10	31	16	280	181	117	108	190	
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q38 HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2013?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q38 #YES	128 44%	2344 47%	13 31%~	13 29%~	16 32%	35 51%	34 53%	13 68%~	112 46%~	1 ~100%~	1 ~100%~	3 30%~	10 32%~	5 31%~	120 44%~	70 40%	55 48%	38 36%	89 48%	
NO	166 56%	2668 53%	29 69%~	32 71%~	34 68%	34 49%	30 47%	6 32%~	134 54%~	1 100%~	~	~	7 ~70%~	21 68%~	11 69%~	153 56%~	106 60%	59 52%	67 64%	98 52%
DON'T KNOW	7	137	2	1		2		1	7						7	4	3	3	4	
NOT ANSWERED	16	405			1		2		1			1	1	1	2	1		1	2	
VALID CASES	294	5013	42	45	50	69	64	19	246	1	1	1	10	31	16	273	176	114	105	187
NUMBER OF RESPONDENTS	317	5554	44	46	51	71	66	20	254	1	1	2	11	31	17	282	181	117	109	193
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q39 DO YOU NOW SMOKE CIGARETTES OR USE TOBACCO EVERY DAY, SOME DAYS, OR NOT AT ALL?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ PAC	AMER IND/ ALSK	MUL-	OTHER	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q39 EVERY DAY	96 33%	1219 24%*	10 23%~	14 31%~	19 38%	27 40%	20 31%	4 20%~	86 35%~	~	~	~	~	~	10 33%~	1 7%~	95 35%~	55 31%	40 35%	38 37%	58 31%
SOME DAYS	41 14%	519 10%	4 9%~	9 20%~	6 12%	12 18%	8 13%	1 5%~	35 14%~	1 100%~	~	~	~	1 10%~	3 10%~	3 20%~	37 13%~	21 12%	20 18%	13 13%	28 15%
NOT AT ALL	158 54%	3357 66%*	29 67%~	22 49%~	25 50%	28 42%*	36 56%	15 75%~	127 51%~	1 100%~	~	1 100%~	9 90%~	17 57%~	11 73%~	143 52%~	101 57%	54 47%	53 51%	103 54%	
DON'T KNOW	5	16	1	1	4	4	4	4	5							5	2	3	2	3	
NOT ANSWERED	17	443	1	1	2	2	2	2	1			1	1	1	2	2	2	2	3	1	
VALID CASES	295	5095	43	45	50	67	64	20	248	1	1	1	10	30	15	275	177	114	104	189	
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q40 IN THE LAST 6 MONTHS, HOW OFTEN WERE YOU ADVISED TO QUIT SMOKING OR USING TOBACCO BY A DOCTOR OR OTHER HEALTH PROVIDER IN YOUR PLAN?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ ALSK	MUL- TI	OTH-	NOT HIS- IC	HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	MALE		
Q40 NEVER	34 25%	387 21%	7 54%	4 18%	5 20%	9 24%	7 25%	2 40%	29 25%	~	~	~	~	~	4 31%	2 50%	32 25%	22 30%	12 20%	14 27%	20 24%
SOMETIMES	30 22%	442 24%	5 38%	8 36%	7 28%	6 16%	2 7%	~	27 23%	~	~	~	~	1 ~100%	2 15%	29 25%	22 22%	21 29%*	9 15%	12 24%	18 22%
USUALLY	25 19%	333 18%	~	5 23%	5 20%	8 21%	5 18%	2 40%	20 17%	1 ~100%	~	~	~	~	4 31%	1 25%	23 18%	12 16%	13 22%	8 16%	17 20%
ALWAYS	45 34%	687 37%	1 8%	5 23%	8 32%	15 39%	14 50%	1 20%	42 36%	~	~	~	~	~	3 23%	~	45 35%	18 25%*	26 43%*	17 33%	28 34%
#ALWAYS + USUALLY (NET)	70 52%	1020 55%	1 8%	10 45%	13 52%	23 61%	19 68%	3 60%	62 53%	1 ~100%	~	~	~	~	7 54%	1 25%	68 53%	30 41%*	39 65%*	25 49%	45 54%
TOP BOX SCORE	45 34%	687 37%	1 8%	5 23%	8 32%	15 39%	14 50%	1 20%	42 36%	~	~	~	~	~	3 23%	~	45 35%	18 25%*	26 43%*	17 33%	28 34%
NOT ANSWERED	3	37	1	1		1			3								3	3			3
VALID CASES	134	1849	13	22	25	38	28	5	118	1				1	13	4	129	73	60	51	83
NUMBER OF RESPONDENTS	137	1886	14	23	25	39	28	5	121	1				1	13	4	132	76	60	51	86
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q41 IN THE LAST 6 MONTHS, HOW OFTEN WAS MEDICATION RECOMMENDED OR DISCUSSED BY A DOCTOR OR HEALTH PROVIDER TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF MEDICATION ARE: NICOTINE GUM, PATCH, NASAL SPRAY, INHALER, OR PRESCRIPTION MEDICATION.

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	COPA TOT ADULT	OHP TOT ADULT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR	GOOD & POOR	MALE	FE- MALE	
Q41 NEVER	71 53%	839 45%	10 77%	11 48%	10 42%	20 53%	13 48%	4 80%	62 52%	~	~	~	~	1 ~100%	7 64%	3 75%	67 52%	39 53%	32 55%	26 52%	45 54%
SOMETIMES	27 20%	418 23%	3 23%	5 22%	7 29%	8 21%	3 11%	1 20%	25 21%	~	~	~	~	~	2 18%	27 ~	17 23%	9 16%	12 24%	15 18%	
USUALLY	18 14%	263 14%	~	1 4%	4 17%	4 11%	9 33%	~	17 14%	~	~	~	~	1 9%	1 ~14%	18 11%	8 17%	10 17%	7 14%	11 13%	
ALWAYS	17 13%	327 18%	~	6 26%	3 13%	6 16%	2 7%	~	15 13%	1 100%	~	~	~	1 9%	1 25%	16 13%	10 14%	7 12%	5 10%	12 14%	
#ALWAYS + USUALLY (NET)	35 26%	589 32%	~	7 30%	7 29%	10 26%	11 41%	~	32 27%	1 100%	~	~	~	2 18%	1 25%	34 27%	18 24%	17 29%	12 24%	23 28%	
TOP BOX SCORE	17 13%	327 18%	~	6 26%	3 13%	6 16%	2 7%	~	15 13%	1 100%	~	~	~	1 9%	1 25%	16 13%	10 14%	7 12%	5 10%	12 14%	
NOT ANSWERED	4	39	1		1	1	1		2					2		4	2	2	1	3	
VALID CASES	133	1847	13	23	24	38	27	5	119	1				1	11	4	128	74	58	50	83
NUMBER OF RESPONDENTS	137 100%	1886 100%	14 100%	23 100%	25 100%	39 100%	28 100%	5 100%	121 100%	1 100%				1 100%	13 100%	4 100%	132 100%	76 100%	60 100%	51 100%	86 100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]

Q42 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR DOCTOR OR HEALTH PROVIDER DISCUSS OR PROVIDE METHODS AND STRATEGIES OTHER THAN MEDICATION TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF METHODS AND STRATEGIES ARE: TELEPHONE HELPLINE, INDIVIDUAL OR GROUP COUNSELING, OR CESSATION PROGRAM.

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR	MALE	FE- MALE		
Q42 NEVER	84 63%	965 52%*	11 85%~	14 61%~	13 54%~	23 62%~	15 54%~	5 100%~	73 62%~	1 100%~					1 ~100%~	8 67%~	4 100%~	80 63%~	47 64%	37 63%	33 66%	51 61%
SOMETIMES	24 18%	401 22%	2 15%~	5 22%~	8 33%~	6 16%~	3 11%~		23 19%~							1 8%~		23 18%~	15 20%	9 15%	9 18%	15 18%
USUALLY	18 14%	224 12%		2 9%~	1 4%~	7 19%~	8 29%~		15 13%~							3 25%~		18 14%~	7 9%	11 19%	6 12%	12 14%
ALWAYS	7 5%	255 14%*		2 9%~	2 8%~	1 3%~	2 7%~		7 6%~									7 5%~	5 7%	2 3%	2 4%	5 6%
#ALWAYS + USUALLY (NET)	25 19%	479 26%*		4 17%~	3 13%~	8 22%~	10 36%~		22 19%~							3 25%~		25 20%~	12 16%	13 22%	8 16%	17 20%
TOP BOX SCORE	7 5%	255 14%*		2 9%~	2 8%~	1 3%~	2 7%~		7 6%~									7 5%~	5 7%	2 3%	2 4%	5 6%
NOT ANSWERED	4	40	1		1	2			3							1		4	2	1	1	3
VALID CASES	133	1846	13	23	24	37	28	5	118	1					1	12	4	128	74	59	50	83
NUMBER OF RESPONDENTS	137	1886	14	23	25	39	28	5	121	1					1	13	4	132	76	60	51	86
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q39 = EVERY DAY OR SOME DAYS]



Q43 DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
Q43 YES	58 19%	1277 25%*	2 5%~	2 4%~	7 14%	15 21%	26 40%*	6 30%~	51 20%~	~	~	~	~	1 10%~	5 16%~	3 19%~	53 19%~	25 14%*	32 28%*	18 17%	40 21%
NO	243 81%	3806 75%*	42 95%~	44 96%~	43 86%	55 79%	39 60%*	14 70%~	202 80%~	1 100%~	1 100%~	~	1 ~100%~	9 90%~	26 84%~	13 81%~	227 81%~	156 86%*	84 72%*	89 83%	152 79%
DON'T KNOW	1	62			1				1							1		1		1	
NOT ANSWERED	15	409			1		1						1	1		1	1			1	1
VALID CASES	301	5083	44	46	50	70	65	20	253	1	1		1	10	31	16	280	181	116	107	192
NUMBER OF RESPONDENTS	317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

Q44 DO YOU HAVE A HEALTH PROBLEM OR TAKE MEDICATION THAT MAKES TAKING ASPIRIN UNSAFE FOR YOU?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE	
Q44 YES	44 16%	646 14%	1 2%	7 16%	9 20%	12 19%	10 18%	3 16%	33 14%	1 ~100%	~	~	3 30%	7 25%	1 7%	43 17%	18 11%*	26 25%*	9 9%*	35 20%*
NO	234 84%	4029 86%	41 98%	38 84%	37 80%	51 81%	47 82%	16 84%	201 86%	1 100%	~	~	7 70%	21 75%	13 93%	216 83%	153 89%*	77 75%*	92 91%*	140 80%*
DON'T KNOW	24	454	2	1	4	8	8	1	20				1	3	2	22	10	14	7	17
NOT ANSWERED	15	424				1	1						1	1	1	1			1	1
VALID CASES	278	4675	42	45	46	63	57	19	234	1	1		10	28	14	259	171	103	101	175
NUMBER OF RESPONDENTS	317	5554	44	46	51	71	66	20	254	1	1	2	11	31	17	282	181	117	109	193
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%

Q45 HAS A DOCTOR OR HEALTH PROVIDER EVER DISCUSSED WITH YOU THE RISKS AND BENEFITS OF ASPIRIN TO PREVENT HEART ATTACK OR STROKE?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
Q45 YES	99 33%	2037 40%*	8 18%~	7 15%~	20 41%~	27 39%	27 43%	8 40%~	82 33%~	~	~	~	~	3 30%~	14 47%~	4 25%~	93 34%~	53 30%	45 39%	28 26%*	71 38%*	
NO	198 67%	3086 60%*	36 82%~	39 85%~	29 59%~	42 61%	36 57%	12 60%~	168 67%~	1 100%~	1 100%~	~	~	1 100%~	7 70%~	16 53%~	12 75%~	183 66%~	125 70%	71 61%	79 74%*	117 62%*
NOT ANSWERED	20	431			2	2	3		4					1	1	1	1	6	3	1	2	5
VALID CASES	297	5123	44	46	49	69	63	20	250	1	1			1	10	30	16	276	178	116	107	188
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%			2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q46.1 ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH CHOLESTEROL

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE				
Q46.1																						
YES	COPA TOT ADLT	75	1388	1	4	12	22	27	7	61			2	4	6	5	69	31	43	24	51	
		24%	25%	2%~	9%~	24%	31%	41%*	35%~	24%	~	~	~100%~	36%~	19%~	29%~	24%~	17%*	37%*	22%	26%	
NO		242	4166	43	42	39	49	39	13	193	1	1		7	25	12	213	150	74	85	142	
		76%	75%	98%~	91%~	76%	69%	59%*	65%~	76%	100%~	100%~	~	~	64%~	81%~	71%~	76%~	83%*	63%*	78%	74%
VALID CASES		317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
NUMBER OF RESPONDENTS		317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

Q46.2 ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH BLOOD PRESSURE

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
Q46.2																						
YES	COPA TOT ADLT	86	1754	2	7	14	21	29	11	67			2	5	10	5	79	37	47	31	55	
		27%	32%	5%~	15%~	27%	30%	44%*	55%~	26%	~	~	~100%~	45%~	32%~	29%~	28%~	20%*	40%*	28%	28%	
NO		231	3800	42	39	37	50	37	9	187	1	1		6	21	12	203	144	70	78	138	
		73%	68%	95%~	85%~	73%	70%	56%*	45%~	74%	100%~	100%~	~	~	55%~	68%~	71%~	72%~	80%*	60%*	72%	72%
VALID CASES		317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
NUMBER OF RESPONDENTS		317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

Q46.3 ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: PARENT OR SIBLING WITH HEART ATTACK BEFORE THE AGE OF 60

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	MALE	FE- MALE			
Q46.3																					
YES	59 19%	899 16%	4 9%	7 15%	11 22%	16 23%	16 24%	2 10%	48 19%	~	~	~	~	1 9%	10 32%	2 12%	57 20%	24 13%*	35 30%*	16 15%	42 22%
NO	258 81%	4655 84%	40 91%	39 85%	40 78%	55 77%	50 76%	18 90%	206 81%	1 100%	1 100%	~	2 ~100%	10 91%	21 68%	15 88%	225 80%	157 87%*	82 70%*	93 85%	151 78%
VALID CASES	317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q47.1 HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A HEART ATTACK

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	MALE			
Q47.1 YES	9 3%	300 5%*	18 24	25 34	35 44	45 54	55 64	65 OVER	6 2%	1 ~	1 ~	4 ~	3 ~	6 ~	1 ~	2 ~	2 12%~	7 2%~	2 1%*	7 6%*	2 2%	7 4%
NO	308 97%	5254 95%*	44 100%~	45 100%~	50 98%~	67 98%	63 94%	20 95%	248 98%	1 100%	1 100%	1 ~	11 ~	29 ~	15 94%~	275 88%~	179 99%*	110 94%*	107 98%	186 96%		
VALID CASES	317	5554	44	46	51	71	66	20	254	1	1	2	11	31	17	282	181	117	109	193		
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%		

Q47.2 HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANGINA OR CORONARY HEART DISEASE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q47.2																					
YES	COPA TOT ADLT	18	25	35	45	55	65	10													
	OHP TOT ADLT	24	34	44	54	64	OVER	4%	~	~	~	50%	18%	6%	12%	4%	2%*	10%*	4%	6%	
		5	8	1							1	2	2	2	12	3	12	4	11		
		5%	6%	~	~	~	7%	12%*	5%~												
NO	COPA TOT ADLT	44	46	51	66	58	19	244	1	1	1	9	29	15	270	178	105	105	182		
	OHP TOT ADLT	100%	100%	100%	93%	88%*	95%~	96%	100%	100%	~	50%	82%	94%	88%	96%	98%*	90%*	96%	94%	
VALID CASES		44	46	51	71	66	20	254	1	1	2	11	31	17	282	181	117	109	193		
NUMBER OF RESPONDENTS		44	46	51	71	66	20	254	1	1	2	11	31	17	282	181	117	109	193		
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	



Q47.3 HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A STROKE

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLACK OR AFR-	ASIAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q47.3	COPA	8	2	2	3	1	7						1	1	7	3	5	3	5		
YES	TOT ADLT	295	~	~	4%	3%	5%	3%	~	~	~	~	~	3%	6%	2%	2%	4%	3%	3%	
	OHP	309	44	46	49	63	19	247	1	1		2	11	30	16	275	178	112	106	188	
NO	TOT ADLT	5259	100%	100%	96%	97%	95%	97%	100%	100%	~	100%	100%	97%	94%	98%	98%	96%	97%	97%	
	OHP	317	44	46	51	71	66	254	1	1		2	11	31	17	282	181	117	109	193	
VALID CASES	TOT ADLT	5554	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	
NUMBER OF RESPONDENTS	OHP	5554	44	46	51	71	66	254	1	1		2	11	31	17	282	181	117	109	193	
	TOT ADLT	5554	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q47.4 HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANY KIND OF DIABETES OR HIGH BLOOD SUGAR

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV AS- IAN	AMER HAW/ IND/ PAC ALSK	MUL- TI	OTH-	NOT HIS- IC	HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q47.4 YES	47 15%	1125 20%*	1 2%	1 2%	9 18%	12 17%	16 24%*	8 40%	39 15%	~	~	~100%	2 ~	5 16%	2 12%	45 16%	14 8%*	32 27%*	12 11%	34 18%	
NO	270 85%	4429 80%*	43 98%	45 98%	42 82%	59 83%	50 76%*	12 60%	215 85%	1 100%	1 100%	~	11 ~100%	26 84%	15 88%	237 84%	167 92%*	85 73%*	97 89%	159 82%	
VALID CASES	317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q48 IN THE LAST 6 MONTHS, DID YOU GET HEALTH CARE 3 OR MORE TIMES FOR THE SAME CONDITION OR PROBLEM?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q48 YES	106 35%	1783 35%	4 9%	15 33%	21 41%	30 42%	25 39%	10 50%	92 36%	~	~	~	~	4 36%	10 34%	2 13%	102 36%	38 21%*	64 55%*	35 33%	70 36%
NO	194 65%	3302 65%	39 91%	31 67%	30 59%	41 58%	39 61%	10 50%	161 64%	1 100%	1 100%	~	2 100%	7 64%	19 66%	14 88%	178 64%	140 79%*	52 45%*	72 67%	122 64%
NOT ANSWERED	17	469	1				2		1						2	1	2	3	1	2	1
VALID CASES	300	5085	43	46	51	71	64	20	253	1	1		2	11	29	16	280	178	116	107	192
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q49 IS THIS A CONDITION OR PROBLEM THAT HAS LASTED FOR AT LEAST 3 MONTHS? DO NOT INCLUDE PREGNANCY OR MENOPAUSE.

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q49 YES	89 87%	1476 87%	3 75%~	11 92%~	18 86%~	27 93%~	22 88%~	8 80%~	76 86%~	~	~	~	~	4 ~100%~	9 90%~	2 100%~	86 88%~	33 89%~	53 87%~	33 97%~	56 84%~
NO	13 13%	228 13%	1 25%~	1 8%~	3 14%~	2 7%~	3 12%~	2 20%~	12 14%~	~	~	~	~	~	1 10%~	12 ~12%~	4 11%~	8 13%~	1 3%~	11 16%~	
NOT ANSWERED	4	88	3		1				4							4	1	3	1	3	
VALID CASES	102	1703	4	12	21	29	25	10	88					4	10	2	98	37	61	34	67
NUMBER OF RESPONDENTS	106 100%	1791 100%	4 100%	15 100%	21 100%	30 100%	25 100%	10 100%	92 100%					4 100%	10 100%	2 100%	102 100%	38 100%	64 100%	35 100%	70 100%

[ASKED IF Q48 = YES]

Q50 DO YOU NOW NEED OR TAKE MEDICINE PRESCRIBED BY A DOCTOR? DO NOT INCLUDE BIRTH CONTROL.

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q50																					
YES	210 70%	3492 68%	15 35%	26 57%	31 61%	58 83%*	59 89%*	17 85%	177 70%	1 100%	1 100%	2 ~	6 55%	21 70%	9 56%	197 70%	99 55%*	105 91%*	73 68%	136 71%	
NO	91 30%	1617 32%	28 65%	20 43%	20 39%	12 17%*	7 11%*	3 15%	76 30%	~	~	~	~	5 45%	9 30%	7 44%	84 30%	80 45%*	11 9%*	35 32%	56 29%
NOT ANSWERED	16	446	1		1				1				1		1	1	2	1	1	1	
VALID CASES	301	5108	43	46	51	70	66	20	253	1	1	2	11	30	16	281	179	116	108	192	
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%	

Q51 IS THIS MEDICINE TO TREAT A CONDITION THAT HAS LASTED FOR AT LEAST 3 MONTHS? DO NOT INCLUDE PREGNANCY OR MENOPAUSE.

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
Q51 YES	201 98%	3137 94%*	15 100%	25 96%	30 100%	57 100%	57 98%	15 94%	171 98%	1 100%	1 100%	1 ~	6 50%	19 100%	9 100%	189 98%	94 98%	102 99%	70 100%	130 97%*	
NO	4 2%	193 6%*	~	1 4%	~	~	1 2%	1 6%	3 2%	~	~	~	1 50%	~	~	4 2%	2 2%	1 1%	~	4 3%	
NOT ANSWERED	5	173			1	1	1	1	3					2		4	3	2	3	2	
VALID CASES	205	3330	15	26	30	57	58	16	174	1	1		2	6	19	9	193	96	103	70	134
NUMBER OF RESPONDENTS	210 100%	3503 100%	15 100%	26 100%	31 100%	58 100%	59 100%	17 100%	177 100%	1 100%	1 100%		2 100%	6 100%	21 100%	9 100%	197 100%	99 100%	105 100%	73 100%	136 100%

[ASKED IF Q50 = YES]

NQ52 WHAT IS YOUR AGE?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHTE	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ52																					
18 TO 24	50 16%	872 16%	44 100%~	~	~	~	~	34 13%*	~	~	~	~	3 27%~	7 23%~	6 35%~	39 14%~	38 21%*	7 6%*	14 13%	31 16%	
25 TO 34	52 16%	867 16%	~100%~	46 ~	~	~	~	39 15%	1 100%~	~	~	~	2 18%~	4 13%~	3 18%~	43 15%~	36 20%*	11 9%*	15 14%	31 16%	
35 TO 44	55 17%	843 15%	~	51 ~100%~	~	~	~	42 17%	~	~	~	~	2 18%~	8 26%~	1 6%~	51 18%~	33 18%	18 15%	20 18%	32 17%	
45 TO 54	73 23%	1055 19%	~	~	71 ~100%~	~	~	63 25%	1 ~100%~	~	1 50%~	~	6 19%~	~	4 24%~	67 24%~	29 16%*	42 36%*	34 31%*	39 20%	
55 TO 64	66 21%	1061 19%	~	~	~	66 ~100%~	~	59 23%*	~	~	~	1 50%~	3 27%~	3 10%~	2 12%~	62 22%~	30 17%*	33 28%*	23 21%	43 22%	
65 TO 74	18 6%	478 9%*	~	~	~	~	~	17 85%~	16 6%	~	~	~	1 9%~	1 3%~	~	18 6%~	14 8%	4 3%	3 3%	15 8%*	
75 OR OLDER	3 0.9%	377 7%*	~	~	~	~	~	3 15%~	1 0.4%	~	~	~	~	2 6%~	1 6%~	2 0.7%~	1 0.6%	2 2%	~	2 1%	
VALID CASES	317	5554	44	46	51	71	66	20	254	1	1	~	2	11	31	17	282	181	117	109	193
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%	~	2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

[BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]

NQ53 ARE YOU MALE OR FEMALE?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE
NQ53	COPA TOT ADLT	18	25	35	45	55	65													
MALE	OHP TOT ADLT	14	15	20	34	23	2	95					4	9	8	98	65	44	109	
		32%	33%	39%	48%*	35%	10%	37%	~	~	~	~	36%	29%	47%	35%	36%	38%	100%	~
FEMALE	OHP TOT ADLT	30	31	31	37	43	18	159	1	1		2	7	22	9	184	116	73	193	
		68%	67%	61%	52%*	65%	90%	63%	100%	100%	~	100%	64%	71%	53%	65%	64%	62%	~100%	~
VALID CASES	OHP TOT ADLT	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
NUMBER OF RESPONDENTS	OHP TOT ADLT	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
		100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]



Q54 WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?

	COPA TOT ADLT	OHP TOT ADLT	AGE							RACE							ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD	FAIR & POOR	MALE	FE- MALE		
Q54 8TH GRADE OR LESS	12 4%	280 5%	~	~	2%	6%	5%	16%	8%	~	~	~	50%	9%	7%	19%	3%	5%	6%	5%	7%	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	52 17%	804 16%	8%	8%	10%	13%	13%	16%	46%	~	~	~	50%	9%	10%	13%	18%	15%	27%	24%	19%	33%
HIGH SCHOOL GRADUATE OR GED	113 38%	1985 39%	22%	18%	17%	22%	26%	37%	96%	~	~	~	27%	3%	12%	44%	38%	73%	39%	39%	74%	
SOME COLLEGE OR 2-YEAR DEGREE	112 38%	1653 32%	14%	18%	21%	28%	26%	21%	95%	1%	~	~	36%	4%	12%	19%	39%	66%	43%	38%	74%	
4-YEAR COLLEGE GRADUATE	6 2%	237 5%*	~	4%	~	3%	2%	5%	5%	1%	~	~	~	~	~	6%	1%	4%	2%	4%	2%	
MORE THAN 4-YEAR COLLEGE DEGREE	3 1%	145 3%*	~	~	2%	1%	~	5%	1%	~	~	~	18%	2%	~	~	1%	2%	1%	2%	1%	
NOT ANSWERED	19	450			1	1	2	1	3						2	1	3	4	2	2	2	
VALID CASES	298	5104	44	46	50	70	64	19	251	1	1		2	11	29	16	279	177	115	107	191	
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%	

Q55 ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
Q55																					
YES HISPANIC OR LATINO	17 6%	549 11%*	6 14%~	3 7%~	1 2%	4 6%	2 3%	1 5%	2 0.8%~	1 100%~	~	~	1 50%~	6 55%~	4 13%~	17 100%~	~	11 6%	5 4%	8 8%	9 5%
NO NOT HISPANIC OR LATINO	282 94%	4520 89%*	38 86%~	43 93%~	50 98%	66 94%	62 97%	19 95%~	248 99%~	1 ~100%~	~	~	1 50%~	5 45%~	27 87%~	282 ~100%~	~	167 94%	111 96%	98 92%	183 95%
NOT ANSWERED	18	485				1	2		4									3	1	3	1
VALID CASES	299	5069	44	46	51	70	64	20	250	1	1		2	11	31	17	282	178	116	106	192
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q56.1 WHAT IS YOUR RACE? RESPONSE: WHITE

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
Q56.1 YES	282 89%	4288 77%*	40 91%~	43 93%~	48 94%	67 94%*	62 94%	17 85%~	254 100%~						28 90%~	5 29%~	273 97%~	169 93%*	109 93%*	103 94%*	179 93%*
NO	35 11%	1266 23%*	4 9%~	3 7%~	3 6%	4 6%*	4 6%	3 15%~		1 ~100%~	1 ~100%~		2 ~100%~	11 ~100%~	3 10%~	12 71%~	9 3%~	12 7%*	8 7%*	6 6%*	14 7%*
VALID CASES	317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
NUMBER OF RESPONDENTS	317 100%	5554 100%	44 100%	46 100%	51 100%	71 100%	66 100%	20 100%	254 100%	1 100%	1 100%		2 100%	11 100%	31 100%	17 100%	282 100%	181 100%	117 100%	109 100%	193 100%

Q56.2 WHAT IS YOUR RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q56.2																					
YES	COPA TOT ADLT	5 2%	207 4%*	2 5%~	2 4%~	1 ~	1 ~	1 ~100%~	~	~	~	~	4 ~13%~	3 18%~	2 0.7%~	3 2%	2 2%	2 2%	3 2%		
NO	OHP TOT ADLT	312 98%	5347 96%*	42 95%~	44 96%~	51 100%~	70 99%	66 100%~	20 100%~	254 100%~	1 ~100%~	2 ~100%~	11 ~100%~	27 87%~	14 82%~	280 99%~	178 98%	115 98%	107 98%	190 98%	
VALID CASES		317	5554	44	46	51	71	66	20	254	1	1	2	11	31	17	282	181	117	109	193
NUMBER OF RESPONDENTS		317	5554	44	46	51	71	66	20	254	1	1	2	11	31	17	282	181	117	109	193
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.3 WHAT IS YOUR RACE? RESPONSE: ASIAN

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.3	COPA	18	25	35	45	55	65														
	TOT ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	LLND	NATV	OTHR	TI	HIS- IC	HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE		
YES	2				1		1			1				1		2		2	1		
	0.6%				~ 1%		~ 5%			~ 100%				~ 3%		~ 0.7%		~ 2%	~ 0.5%		
NO	315	44	46	51	70	66	19	254	1			2	11	30	17	280	181	115	109	192	
	99%	100%	100%	100%	99%	100%	95%	100%	100%	~		~ 100%	~ 100%	97%	~ 100%	99%	~ 100%	98%	~ 100%	99%	
VALID CASES	317	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193	
NUMBER OF RESPONDENTS	317	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q56.4 WHAT IS YOUR RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q56.4	COPA TOT ADLT	18	25	35	45	55	65													
	OHP TOT ADLT	24	34	44	54	64	OVER	WHTE	AMER	IAN	LLND	NATV	OTHR	TI	HIS- IC	HIS- IC	NOT GOOD & FAIR & POOR	MALE	FE- MALE	
YES	3	2					1							3	1	2	2	1	1	1
	0.9%	5%	~	~	~	~	5%	~	~	~	~	~	~	10%	6%	0.7%	1%	0.9%	0.9%	0.5%
NO	314	42	46	51	71	66	19	254	1	1		2	11	28	16	280	179	116	108	192
	99%	95%	~100%	~100%	~100%	~100%	95%	~100%	~100%	~100%	~	~100%	~100%	90%	94%	~99%	99%	99%	99%	99%
VALID CASES	317	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
NUMBER OF RESPONDENTS	317	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.5 WHAT IS YOUR RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER			
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE			
Q56.5	COPA	21	41	3	1	6	6	3	2				2	19	3	18	10	10	5	16		
YES	TOT ADLT	7%	7%	7%~	2%~	12%	8%	5%	10%~	~	~	~	~100%~	~ 61%~	18%~	6%~	6%	9%	5%	8%		
	OHP	296	5144	41	45	45	65	63	18	254	1	1		11	12	14	264	171	107	104	177	
NO	TOT ADLT	93%	93%	93%~	98%~	88%	92%	95%	90%~	100%~	100%~	100%~	~	~100%~	39%~	82%~	94%~	94%	91%	95%	92%	
	COPA	317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
VALID CASES	TOT ADLT	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%
NUMBER OF RESPONDENTS	OHP	317	5554	44	46	51	71	66	20	254	1	1		2	11	31	17	282	181	117	109	193
	TOT ADLT	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

Q56.6 WHAT IS YOUR RACE? RESPONSE: OTHER

		AGE							RACE							ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q56.6	COPA TOT ADLT	18	25	35	45	55	65														
YES	OHP TOT ADLT	4	5	6	2	4	3					11	13	9	15	13	10	7	17		
		8%	6%	9%~	11%~	12%	3%*	6%	15%~	~	~	~	~	~100%~	42%~	53%~	5%~	7%	9%	6%	9%
NO	OHP TOT ADLT	40	41	45	69	62	17	254	1	1	2	18	8	267	168	107	102	176			
		92%	94%	91%~	89%~	88%	97%*	94%	85%~	100%~	100%~	100%~	~	58%~	47%~	95%~	93%	91%	94%	91%	
VALID CASES	OHP TOT ADLT	44	46	51	71	66	20	254	1	1	2	11	31	17	282	181	117	109	193		
NUMBER OF RESPONDENTS	OHP TOT ADLT	44	46	51	71	66	20	254	1	1	2	11	31	17	282	181	117	109	193		
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	



Q57 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE		
Q57																					
YES	29 13%	778 19%*	3 12%~	4 14%~	3 9%~	6 11%	8 14%	4 22%~	26 13%~	~	~	~	~	~	20%~	2 20%~	27 13%~	17 13%	12 14%	15 18%	13 9%*
NO	196 87%	3221 81%*	23 88%~	24 86%~	31 91%~	50 89%	51 86%	14 78%~	173 87%~	1 ~100%~	2 ~100%~	6 ~100%~	12 80%~	8 80%~	184 87%~	116 87%	74 86%	68 82%	128 91%*		
NOT ANSWERED	1	98														1					
VALID CASES	225	3999	26	28	34	56	59	18	199	1	2	6	15	10	211	133	86	83	141		
NUMBER OF RESPONDENTS	226	4097	26	28	34	56	59	18	199	1	2	6	15	10	211	134	86	83	141		
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		

[ASKED IF SURVEY COMPLETED BY MAIL]

Q58.1 HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME.

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTHER	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q58.1																					
YES	19 66%	312 49%	1 33%	1 25%	3 100%	5 83%	4 50%	4 100%	16 62%	~	~	~	~	~	3 100%	2 100%	17 63%	11 65%	8 67%	10 67%	8 62%
NO	10 34%	325 51%	2 67%	3 75%	~	1 17%	4 50%	~	10 38%	~	~	~	~	~	10 37%	6 35%	4 33%	5 33%	5 38%		
VALID CASES	29	637	3	4	3	6	8	4	26					3	2	27	17	12	15	13	
NUMBER OF RESPONDENTS	29 100%	637 100%	3 100%	4 100%	3 100%	6 100%	8 100%	4 100%	26 100%					3 100%	2 100%	27 100%	17 100%	12 100%	15 100%	13 100%	

[ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

Q58.2 HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE.

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.2																				
YES	COPA TOT ADLT	17	2	1	2	4	3	4	14					3	2	15	10	7	8	8
	OHP TOT ADLT	277	67%	25%	67%	67%	38%	100%	54%	~	~	~	~	~100%	~100%	56%	59%	58%	53%	62%
NO	COPA TOT ADLT	12	1	3	1	2	5	12							12	7	5	7	5	
	OHP TOT ADLT	360	33%	75%	33%	33%	63%	46%	~	~	~	~	~	~	44%	41%	42%	47%	38%	
VALID CASES	COPA TOT ADLT	29	3	4	3	6	8	4	26					3	2	27	17	12	15	13
NUMBER OF RESPONDENTS	OHP TOT ADLT	637	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

Q58.3 HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME.

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	NATV HAW/ AS- PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE		
Q58.3 YES	6 21%	225 35%	1 33%	2 50%	1 33%	1 17%	1 13%	6 23%	~	~	~	~	~	~	6 22%	5 29%	1 8%	4 27%	2 15%	
NO	23 79%	412 65%	2 67%	2 50%	2 67%	5 83%	7 88%	4 100%	20 77%	~	~	~	~	3 100%	2 100%	21 78%	12 71%	11 92%	11 73%	11 85%
VALID CASES	29	637	3	4	3	6	8	4	26					3	2	27	17	12	15	13
NUMBER OF RESPONDENTS	29 100%	637 100%	3 100%	4 100%	3 100%	6 100%	8 100%	4 100%	26 100%					3 100%	2 100%	27 100%	17 100%	12 100%	15 100%	13 100%

[ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

Q58.4 HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE.

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE	
Q58.4																				
YES	COPA TOT ADLT	3	83				2	1	2				1		3		3	1	1	
		10%	13%	~	~	~	25%	25%	8%	~	~	~	33%	~	11%	~	25%	7%	8%	
NO		26	554	3	4	3	6	6	3	24			2	2	24	17	9	14	12	
		90%	87%	100%	100%	100%	75%	75%	92%	~	~	~	67%	100%	89%	100%	75%	93%	92%	
VALID CASES		29	637	3	4	3	6	8	4	26			3	2	27	17	12	15	13	
NUMBER OF RESPONDENTS		29	637	3	4	3	6	8	4	26			3	2	27	17	12	15	13	
		100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	

[ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

Q58.5 HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY.

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER	
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
Q58.5																				
YES	3 10%	59 9%	1 ~ 25%	1 ~ 17%	1 13%		3 12%							3 11%	1 6%	2 17%	2 13%	1 8%		
NO	26 90%	578 91%	3 100%	3 100%	3 100%	5 100%	7 88%	4 100%	23 88%					3 100%	2 100%	24 89%	16 94%	10 83%	13 87%	12 92%
VALID CASES	29	637	3	4	3	6	8	4	26					3	2	27	17	12	15	13
NUMBER OF RESPONDENTS	29 100%	637 100%	3 100%	4 100%	3 100%	6 100%	8 100%	4 100%	26 100%					3 100%	2 100%	27 100%	17 100%	12 100%	15 100%	13 100%

[ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

NQ13 RATING OF ALL HEALTH CARE

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ13 0-6	51 23%	821 21%	3 15%~	12 34%~	3 9%~	14 26%	10 19%	6 38%~	39 21%~	~	~	~	1 ~100%~	3 38%~	4 24%~	3 27%~	46 23%~	25 21%	24 26%	21 30%	28 19%
7-8	69 32%	1319 34%	7 35%~	11 31%~	16 47%~	14 26%	17 32%	3 19%~	58 32%~	1 100%~	1 100%~	~	~	2 25%~	7 41%~	4 36%~	63 31%~	37 31%	31 34%	18 25%	51 35%
9-10	99 45%	1746 45%	10 50%~	12 34%~	15 44%~	25 47%	26 49%	7 44%~	87 47%~	~	~	~	~	3 38%~	6 35%~	4 36%~	92 46%~	59 49%	37 40%	32 45%	65 45%
VALID CASES	219	3886	20	35	34	53	53	16	184	1	1		1	8	17	11	201	121	92	71	144
NUMBER OF RESPONDENTS	219 100%	3886 100%	20 100%	35 100%	34 100%	53 100%	53 100%	16 100%	184 100%	1 100%	1 100%		1 100%	8 100%	17 100%	11 100%	201 100%	121 100%	92 100%	71 100%	144 100%
MEAN	2.22	2.24	2.35	2.00	2.35	2.21	2.30	2.06	2.26	2.00	2.00		1.00	2.00	2.12	2.09	2.23	2.28	2.14	2.15	2.26
p stat_(*=Sig @ p<=.05)		.722	~	~	~	.904	.390	~	~	~	~	~	~	~	~	~	~	.206	.223	.430	.357

[ASKED IF Q7 >= 1 TIME]

NQ23 RATING OF PERSONAL DOCTOR

			AGE						RACE						ETHNICITY		HEALTH STATUS		GENDER		
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	FE- MALE	MALE	
NQ23 0-6	39 18%	644 16%	4 16%	8 28%	8 22%	9 18%	7 13%	3 21%	31 17%	1 100%	~	~	~	2 22%	4 20%	3 27%	36 18%	21 18%	18 19%	18 24%	21 15%
7-8	54 25%	927 23%	8 32%	9 31%	7 19%	10 20%	15 27%	3 21%	42 23%	~	~	~	1 100%	3 33%	7 35%	4 36%	47 23%	23 19%	27 29%	22 29%	30 22%
9-10	126 58%	2413 61%	13 52%	12 41%	22 59%	32 63%	33 60%	8 57%	109 60%	~	~	~	~	4 44%	9 45%	4 36%	118 59%	74 63%	49 52%	36 47%*	87 63%*
VALID CASES	219	3984	25	29	37	51	55	14	182	1			1	9	20	11	201	118	94	76	138
NUMBER OF RESPONDENTS	219 100%	3984 100%	25 100%	29 100%	37 100%	51 100%	55 100%	14 100%	182 100%	1 100%			1 100%	9 100%	20 100%	11 100%	201 100%	118 100%	94 100%	76 100%	138 100%
MEAN	2.40	2.44	2.36	2.14	2.38	2.45	2.47	2.36	2.43	1.00			2.00	2.22	2.25	2.09	2.41	2.45	2.33	2.24	2.48
p stat_(*=Sig @ p<=.05)		.366	~	~	~.574	.406	~	~	~	~	~	~	~	~	~	~	~.286	.266	.025*	.049*	

[ASKED IF Q15 = YES]



NQ27 RATING OF SPECIALIST SEEN MOST OFTEN

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ27 0-6	19 20%	230 13%	2 50%	5 42%	2 11%	4 16%	4 15%	1 11%	16 20%	~	~	~	1 100%	1 50%	1 9%	1 20%	18 20%	7 18%	12 21%	6 19%	13 20%
7-8	25 26%	475 27%	~	3 25%	5 28%	8 32%	6 22%	2 22%	21 26%	~	~	~	~	~	3 27%	3 60%	20 22%	11 28%	12 21%	10 31%	15 23%
9-10	53 55%	1078 60%	2 50%	4 33%	11 61%	13 52%	17 63%	6 67%	43 54%	1 100%	1 100%	~	~	1 50%	7 64%	1 20%	51 57%	21 54%	32 57%	16 50%	37 57%
VALID CASES	97	1782	4	12	18	25	27	9	80	1	1	~	1	2	11	5	89	39	56	32	65
NUMBER OF RESPONDENTS	97 100%	1782 100%	4 100%	12 100%	18 100%	25 100%	27 100%	9 100%	80 100%	1 100%	1 100%	~	1 100%	2 100%	11 100%	5 100%	89 100%	39 100%	56 100%	32 100%	65 100%
MEAN	2.35	2.48	2.00	1.92	2.50	2.36	2.48	2.56	2.34	3.00	3.00	~	1.00	2.00	2.55	2.00	2.37	2.36	2.36	2.31	2.37
p stat_(*=Sig @ p<=.05)		.122	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]

NQ35 RATING OF HEALTH PLAN

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	MALE	FE- MALE	
NQ35 0-6	70 25%	1152 23%	9 20%~	15 36%~	11 23%~	21 32%	9 15%*	1 6%~	54 23%	~	~	~100%~	1 27%~	3 28%~	8 28%~	2 12%~	65 25%~	36 22%	31 29%	27 27%	40 23%
7-8	88 31%	1595 32%	18 41%~	14 33%~	13 28%~	16 25%	22 37%	2 13%~	72 31%	1 100%~	~	~	~	4 36%~	9 31%~	8 47%~	76 30%~	55 33%	29 27%	31 31%	55 31%
9-10	127 45%	2187 44%	17 39%~	13 31%~	23 49%~	28 43%	29 48%	13 81%~	106 46%	~100%~	1 ~	~	~	4 36%~	12 41%~	7 41%~	116 45%~	76 46%	48 44%	42 42%	82 46%
VALID CASES	285	4933	44	42	47	65	60	16	232	1	1	1	11	29	17	257	167	108	100	177	
NUMBER OF RESPONDENTS	285 100%	4933 100%	44 100%	42 100%	47 100%	65 100%	60 100%	16 100%	232 100%	1 100%	1 100%	1 100%	11 100%	29 100%	17 100%	257 100%	167 100%	108 100%	100 100%	177 100%	
MEAN	2.20	2.21	2.18	1.95	2.26	2.11	2.33	2.75	2.22	2.00	3.00	1.00	2.09	2.14	2.29	2.20	2.24	2.16	2.15	2.24	
p stat_(*=Sig @ p<=.05)	.836		~	~	~.322	.125	~	.294	~	~	~	~	~	~	~	~	~.328	.489	.445	.321	

NQ35Z RATING OF INTERPRETER

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER	
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE
NQ35Z 0-6		6 8%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
7-8	1 100%	26 31%	~	~	~	~100%	~	~	~	~	~100%	~	~100%	~	~100%	~	~100%	~
9-10		52 62%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
VALID CASES NUMBER OF RESPONDENTS	1 100%	85 100%				1 100%				1 100%		1 100%		1 100%		1 100%		1 100%
MEAN	2.00	2.54				2.00				2.00		2.00		2.00		2.00		2.00
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

GETTING NEEDED CARE

		AGE							RACE						ETHNICITY		HEALTH STATUS		GENDER		
		18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	MALE	FE- MALE		
NPRBSEE4	NQ25	2.27	2.27	2.00	2.36	2.37	2.38	2.17	2.11	2.27	3.00	1.00	2.00	2.50	2.20	2.40	2.25	2.34	2.22	2.24	2.28
p stat_(*=Sig @ p<=.05)		.972	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4	NQ14	2.33	2.31	2.40	2.11	2.43	2.28	2.50	2.19	2.36	2.00	1.00	2.00	2.25	2.35	2.09	2.35	2.29	2.42	2.31	2.36
p stat_(*=Sig @ p<=.05)		.664	~	~	~.563	.058	~	~	~	~	~	~	~	~	~	~	~.316	.151	.681	.511	
COMPOSITE		2.30	2.29	2.20	2.24	2.40	2.33	2.34	2.15	2.31	2.50	1.00	x 2.00	2.38	2.28	2.25	2.30	2.32	2.32	2.27	2.32
p stat_(*=Sig @ p<=.05)		.929	~	~	~.888	.855	~	~	~	~	~	~	~	~	~	~	~.881	.888	.852	.804	

GETTING CARE QUICKLY

	AGE							RACE					ETHNICITY		HEALTH STATUS		GENDER				
	COPA TOT ADLT	OHP TOT ADLT	18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NCARSN4 NQ4	2.51	2.38	2.43	2.28	2.39	2.47	2.70	2.82	2.46	3.00		2.00	2.43	2.92	2.57	2.49	2.47	2.53	2.45	2.52	
p stat_(*=Sig @ p<=.05)		.046*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.493	.743	~	~	
NAPGET4 NQ6	2.37	2.29	2.00	2.07	2.41	2.53	2.43	2.40	2.39	2.00	1.00		1.89	2.48	1.91	2.39	2.30	2.44	2.34	2.39	
p stat_(*=Sig @ p<=.05)		.210	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.289	.273	.758	.653	
COMPOSITE	2.44	2.33	2.21	2.17	2.40	2.50	2.57	2.61	2.42	2.50	1.00	x	2.00	2.16	2.70	2.24	2.44	2.39	2.49	2.39	2.45
p stat_(*=Sig @ p<=.05)		.470	~	~	~	~.610	~	~	~	~	~	~	~	~	~	~	~	.698	.773	.826	.880

HOW WELL DOCTORS COMMUNICATE

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NDREXPL4 NQ17	2.61	2.60	2.58	2.38	2.64	2.71	2.56	2.71	2.62	1.00			3.00	2.38	2.69	2.33	2.62	2.66	2.55	2.59	2.62
p stat_(*=Sig @ p<=.05)		.711	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.356	.261	.743	.773
NDRLSTN4 NQ18	2.55	2.57	2.42	2.46	2.58	2.69	2.44	2.64	2.57	1.00			2.00	2.13	2.63	2.22	2.57	2.63	2.47	2.54	2.55
p stat_(*=Sig @ p<=.05)		.759	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.143	.130	.872	.883
NDRESPU4 NQ19	2.58	2.65	2.75	2.46	2.55	2.62	2.50	2.71	2.59	1.00			2.00	2.38	2.69	2.11	2.60	2.68	2.46	2.48	2.62
p stat_(*=Sig @ p<=.05)		.183	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.057	.035*	.191	.269
NDRTMEN4 NQ20	2.45	2.46	2.75	2.13	2.33	2.60	2.43	2.67	2.51	1.00			2.00	2.13	2.31	2.11	2.48	2.51	2.41	2.41	2.49
p stat_(*=Sig @ p<=.05)		.976	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.353	.446	.542	.371
COMPOSITE	2.55	2.57	2.63	2.35	2.52	2.66	2.48	2.68	2.57	1.00	x	x	2.25	2.25	2.58	2.19	2.56	2.62	2.47	2.50	2.57
p stat_(*=Sig @ p<=.05)		.926	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.725	.709	.864	.881

CUSTOMER SERVICE

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
NPBCLCS4 NQ31	2.26	2.14	2.10	2.08	2.31	2.40	2.20	3.00	2.23						2.00	2.57	2.67	2.26	2.28	2.23	2.30	2.25
p stat_(*=Sig @ p<=.05)		.194	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCSRESP NQ32	2.62	2.59	2.60	2.75	2.50	2.73	2.73	3.00	2.71						2.00	2.43	3.00	2.66	2.77	2.53	2.63	2.69
p stat_(*=Sig @ p<=.05)		.694	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
COMPOSITE	2.44	2.37	2.35	2.42	2.41	2.57	2.47	3.00	2.47	x	x	x	x	2.00	2.50	2.83	2.46	2.52	2.38	2.46	2.47	
p stat_(*=Sig @ p<=.05)		.789	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

SHARED DECISION MAKING

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	FE- MALE	
NRXWHY NQ10	2.31	2.23	2.00	2.32	1.96	2.62	2.30	2.38	2.36	3.00	3.00			1.86	2.11	1.50	2.34	2.23	2.36	2.33	2.30
p stat_(*=Sig @ p<=.05)		.245	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.230	.472	~	~
NRXWYNT NQ11	1.97	1.87	1.67	1.86	2.17	2.15	1.77	2.13	2.01	2.00	3.00			1.71	1.70	1.50	1.99	1.89	2.03	2.04	1.93
p stat_(*=Sig @ p<=.05)		.181	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.287	.407	~	~
NRXBST NQ12	2.46	2.44	2.33	2.45	2.73	2.41	2.29	2.75	2.47	3.00	3.00			2.43	2.20	3.00	2.42	2.61	2.28	2.41	2.49
p stat_(*=Sig @ p<=.05)		.787	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.067	.025*	~	~
COMPOSITE	2.25	2.18	2.00	2.21	2.29	2.39	2.12	2.42	2.28	2.67	3.00	x	x	2.00	2.00	2.00	2.25	2.24	2.22	2.26	2.24
p stat_(*=Sig @ p<=.05)		.750	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	.978	.909	~	~



GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

	COPA TOT ADLT	OHP TOT ADLT	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		GENDER				
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
PRBSEE4 Q25	77%	78%	50%	73%	84%	75%	79%	67%	77%	100%	0%	100%	100%	70%	80%	75%	83%	71%	71%	80%	
CARNES4 Q14	84%	82%	85%	83%	89%	79%	87%	75%	84%	100%	0%	100%	75%	94%	73%	84%	82%	87%	85%	83%	
AVERAGE	80.1	79.8	67.5	77.8	86.4	77.1	83.2	70.8	80.4	x	x	x	x	75.0	82.1	76.4	79.8	82.4	79.0	77.7	81.6

GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE		
CARSN4 Q4	89%	82%	71%	76%	87%	90%	97%	100%	87%	100%				100%	86%	100%	100%	88%	91%	85%	87%	89%
APGET4 Q6	78%	79%	53%	67%	82%	86%	80%	80%	79%	100%	0%				56%	86%	55%	79%	76%	80%	79%	78%
AVERAGE	83.2	80.1	62.4	71.3	84.7	88.0	88.6	90.0	82.7	x	x	x	x	70.6	92.9	77.3	83.2	83.5	82.7	82.9	83.4	

HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE		
DREXPL4 Q17	90%	92%	83%	87%	85%	93%	90%	93%	90%	0%		100%	75%	94%	78%	90%	91%	87%	90%	89%	
DRLSTN4 Q18	90%	89%	83%	88%	88%	91%	90%	93%	91%	0%		50%	63%	94%	67%	90%	90%	88%	90%	89%	
DRESPU4 Q19	87%	91%	92%	83%	82%	87%	88%	93%	87%	0%		50%	75%	100%	67%	88%	91%	81%	80%	90%	
DRTMEN4 Q20	86%	86%	100%	71%	79%	91%	87%	92%	88%	0%		100%	63%	88%	67%	87%	87%	84%	85%	87%	
AVERAGE	87.9	89.3	89.6	82.3	83.3	90.5	88.5	92.6	88.9	x	x	x	x	68.8	93.8	69.4	88.6	89.8	85.2	86.4	88.6

CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER			
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	OTH-	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	FE- MALE	FE- MALE			
PBCLCS4 Q31	78%	73%	70%	75%	81%	93%	67%	100%	78%						50%	86%	100%	77%	79%	77%	78%	79%
CSRESP Q32	88%	91%	90%	100%	75%	100%	87%	100%	94%						50%	71%	100%	90%	93%	87%	89%	92%
AVERAGE	83.1	82.1	80.0	87.5	78.1	96.7	76.7	100	86.2	x	x	x	x	x	x	78.6	100	83.6	86.0	81.7	83.3	85.4

SHARED DECISION MAKING (A LOT/YES + SOME) -- GLOBAL PROPORTION COMPOSITE

	COPA TOT ADLT	OHP TOT ADLT	AGE						RACE						ETHNIC- ITY		HEALTH STATUS		GENDER		
			18 TO 24	25 TO 34	35 TO 44	45 TO 54	55 TO 64	65 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC LLND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	FE- MALE	MALE	
RXWHY Q10	82%	80%	67%	86%	65%	94%	83%	75%	85%	100%	100%			43%	78%	33%	84%	81%	82%	82%	81%
RXWYNT Q11	64%	61%	67%	64%	74%	68%	52%	75%	65%	100%	100%			57%	50%	50%	65%	63%	65%	64%	63%
FRXBST Q12	73%	72%	67%	73%	86%	71%	65%	88%	74%	100%	100%			71%	60%	100%	71%	81%	64%	70%	74%
AVERAGE	73.0	70.8	66.7	74.2	75.2	77.5	66.5	79.2	74.6	x	x	x	x	57.1	62.6	61.1	73.2	74.7	70.1	72.4	73.0

Q1 OUR RECORDS SHOW THAT YOUR CHILD IS NOW IN <HEALTH PLAN>. IS THAT RIGHT?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC	
Q1 YES	332	5863	3	74	84	93	78	223	1	2	5	14	33	89	220	299	13	247	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
NOT ANSWERED	3	155			2		1						1	3		3		3	
VALID CASES	332	5863	3	74	84	93	78	223	1	2	5	14	33	89	220	299	13	247	85
NUMBER OF RESPONDENTS	335	6018	3	74	86	93	79	223	1	2	5	14	34	92	220	302	13	250	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q3 IN THE LAST 6 MONTHS, DID YOUR CHILD HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER				
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q3 YES	113 35%	1775 30%	2 67%~	31 42%	32 40%	25 27%	23 29%	85 38%*	~	~	~	60%~	3 7%~	1 38%~	13 24%*	22 39%*	85 34%~	101 54%~	7 32%~	77 43%	36 43%
NO	214 65%	4117 70%	1 33%~	43 58%	48 60%	66 73%	56 71%	136 62%*	1 100%~	~	~	100%~	2 40%~	2 93%~	13 62%~	21 76%*	69 61%*	133 66%~	6 46%~	166 68%	48 57%
NOT ANSWERED	8	126			6	2		2								1	2	2		7	1
VALID CASES	327	5892	3	74	80	91	79	221	1			2	5	14	34	91	218	300	13	243	84
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%			2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q4 IN THE LAST 6 MONTHS, WHEN YOUR CHILD NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOUR CHILD GET CARE AS SOON AS HE OR SHE NEEDED?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER	
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR GOOD POOR	NO CCC	CCC
Q4 NEVER		28 2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	8 8%	167 10%	~	5 17%	~	3 15%	3 4%	~	~	1 33%	3 23%	2 11%	4 5%	6 7%	1 17%	6 9%	2 6%	
USUALLY	21 20%	270 16%	~	3 10%	10 33%	4 18%	4 20%	14 18%	~	~	~	1 8%	6 32%	13 17%	18 20%	1 17%	12 17%	9 27%
ALWAYS	74 72%	1252 73%	100%	2 72%	21 67%	20 82%	18 65%	13 78%	59	2 67%	1 100%	9 69%	11 58%	61 78%	68 74%	4 67%	52 74%	22 67%
#ALWAYS + USUALLY (NET)	95 92%	1522 89%	100%	2 83%	24 100%	30 100%	22 100%	17 85%	73 96%	2 67%	1 100%	10 77%	17 89%	74 95%	86 93%	5 83%	64 91%	31 94%
TOP BOX SCORE	74 72%	1252 73%	100%	2 72%	21 67%	20 82%	18 65%	13 78%	59	2 67%	1 100%	9 69%	11 58%	61 78%	68 74%	4 67%	52 74%	22 67%
NOT ANSWERED	10	136		2	2	3	3	9					3	7	9	1	7	3
VALID CASES	103	1718	2	29	30	22	20	76	3	1	13	19	78	92	6	70	33	
NUMBER OF RESPONDENTS	113	1854	2	31	32	25	23	85	3	1	13	22	85	101	7	77	36	
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q3 = YES]



Q5 IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q5 YES	194 60%	3764 65%	3 100%~	51 70%*	46 58%	50 55%	44 56%	135 61%	~	~	2 ~100%~	3 75%~	6 43%~	19 56%~	53 58%	133 61%	176 59%~	10 77%~	137 57%	57 68%
Q5 NO	131 40%	2063 35%	~	22 30%*	33 42%	41 45%	35 44%	85 39%	1 100%~	~	~	1 25%~	8 57%~	15 44%~	38 42%	84 39%	122 41%~	3 23%~	104 43%	27 32%
NOT ANSWERED	10	192		1	7	2		3			1			1	3	4		9	1	
VALID CASES	325	5826	3	73	79	91	79	220	1		2	4	14	34	91	217	298	13	241	84
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%		2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q6 IN THE LAST 6 MONTHS, WHEN YOU MADE AN APPOINTMENT FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC, HOW OFTEN DID YOU GET AN APPOINTMENT AS SOON AS YOUR CHILD NEEDED?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC		
Q6 NEVER	3 2%	57 2%	~	4%~	~	~	2%~	1 0.8%	~	~	~	~	~	1 2%~	1 0.8%	2 1%~	~	2 2%	1 2%		
SOMETIMES	17 9%	442 13%	~	6%~	11%~	11%~	10%~	8%	~	~	~	1 33%~	2 40%~	~	8 17%~	9 7%	14 8%~	2 20%~	14 11%	3 6%	
USUALLY	51 28%	870 25%	50%~	16 33%~	12 26%~	8 17%~	14 34%~	34 26%	~	~	1 50%~	~	1 20%~	5 29%~	15 32%~	34 26%	46 28%~	2 20%~	32 24%	19 36%	
ALWAYS	113 61%	2092 60%	50%~	1 57%~	28 63%~	29 72%~	33 74%~	22 54%~	84 65%	~	~	1 50%~	2 67%~	2 40%~	11 65%~	23 49%~	85 66%	104 63%~	6 60%~	83 63%	30 57%
#ALWAYS + USUALLY (NET)	164 89%	2961 86%	100%~	2 90%~	44 89%~	41 89%~	41 89%~	36 88%~	118 91%	~	~	2 100%~	2 67%~	3 60%~	16 94%~	38 81%~	119 92%	150 90%~	8 80%~	115 88%	49 92%
TOP BOX SCORE	113 61%	2092 60%	50%~	1 57%~	28 63%~	29 72%~	33 74%~	22 54%~	84 65%	~	~	1 50%~	2 67%~	2 40%~	11 65%~	23 49%~	85 66%	104 63%~	6 60%~	83 63%	30 57%
NOT ANSWERED	10	259	1	2		4	3	6					1	2	6	4	10		6	4	
VALID CASES	184	3460	2	49	46	46	41	129			2	3	5	17	47	129	166	10	131	53	
NUMBER OF RESPONDENTS	194	3719	3	51	46	50	44	135			2	3	6	19	53	133	176	10	137	57	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q5 = YES]

Q7 IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOUR CHILD WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID HE OR SHE GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q7 NONE	100 31%	1770 31%	15 ~ 21%*	23 28%	33 37%	29 37%	69 32%	1 100%~	~	2 ~ 40%	5 36%~	9 26%~	31 34%	66 31%	95 32%~	2 15%~	85 36%*	15 18%*	
1 TIME	80 25%	1587 28%	14 ~ 20%	22 27%	28 31%	16 21%	48 22%	~	~ 50%	1 20%~	1 14%~	2 29%~	10 29%	26 24%	78 26%~	~	60 25%	20 24%	
2	74 23%	1212 21%	2 67%~	22 31%	17 21%	16 21%	52 24%	~	~ 20%	1 43%~	6 18%~	6 18%~	18 20%	51 24%	68 23%~	3 23%~	57 24%	17 20%	
3	39 12%	601 10%	1 33%~	9 13%	13 16%	7 8%	9 12%	29 13%	~	1 50%~	~	~ 18%	6 10%	9 13%	35 12%~	3 23%~	22 9%*	17 20%*	
4	16 5%	266 5%	7 ~ 10%	3 4%	4 4%	2 3%	10 5%	~	~ 20%	1 ~	~ 9%	3 ~	5 5%	10 5%	12 4%~	2 15%~	10 4%	6 7%	
5 TO 9	13 4%	243 4%	3 ~ 4%	3 4%	1 1%*	6 8%	9 4%	~	~ 7%	~	1 7%~	~	1 1%*	9 4%	7 2%~	3 23%~	5 2%*	8 10%*	
10 OR MORE TIMES	1 0.3%	84 1%*	1 ~ 1%~	~	~	~	1 ~0.5%~	~	~	~	~	~	1 1%~	~	1 ~0.3%~	~	1 ~ 1%~	~	
NOT ANSWERED	12	255	3	5	3	1	5						1	4	6		11	1	
VALID CASES	323	5763	3	71	81	90	78	218	1	2	5	14	34	91	216	296	13	239	84
NUMBER OF RESPONDENTS	335	6018	3	74	86	93	79	223	1	2	5	14	34	92	220	302	13	250	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q8 A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOUR CHILD NEEDED A CHECK-UP, WANTED ADVICE ABOUT A HEALTH PROBLEM, OR GOT SICK OR HURT. IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS IN YOUR CHILD?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q8 #YES	145 66%	2722 69%	3 100%	41 75%	30 54%*	41 72%	30 63%	100 68%			1 ~ 50%	3 ~ 100%	7 ~ 78%	14 ~ 56%	34 58%	103 70%	131 66%	7 64%	99 66%	46 67%
NO	74 34%	1206 31%		14 ~ 25%	26 46%*	16 28%	18 37%	46 32%			1 ~ 50%		2 ~ 22%	11 ~ 44%	25 42%	45 30%	67 34%	4 36%	51 34%	23 33%
NOT ANSWERED	4	97		1	2		1	3							1	2	3		4	
VALID CASES	219	3927	3	55	56	57	48	146			2	3	9	25	59	148	198	11	150	69
NUMBER OF RESPONDENTS	223	4024	3	56	58	57	49	149			2	3	9	25	60	150	201	11	154	69
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

Q9 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE YOUR QUESTIONS ANSWERED BY YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV PAC ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q9 NEVER	5 2%	99 3%	~	4%	~	2%	4%~	3%	~	~	~	~	~	4%~	2%	3%	3%~	~	3%	1%
SOMETIMES	13 6%	362 9%*	~	5%	2%*	7%	10%~	5%	~	~	~	~	25%~	12%~	5%	7%	7%~	~	6%	6%
USUALLY	58 27%	854 22%	~	27%	33%	18%*	31%~	26%	~	~	50%~	33%~	~	36%~	26%	27%	25%~	55%~	23%	35%
ALWAYS	142 65%	2627 67%	100%~	64%	65%	74%	54%~	66%	~	~	50%~	67%~	75%~	48%~	67%	64%	66%~	45%~	68%	58%
#ALWAYS + USUALLY (NET)	200 92%	3480 88%	100%~	91%	98%*	91%	85%~	92%	~	~	100%~	100%~	75%~	84%~	93%	91%	91%~	100%~	91%	93%
TOP BOX SCORE	142 65%	2627 67%	100%~	64%	65%	74%	54%~	66%	~	~	50%~	67%~	75%~	48%~	67%	64%	66%~	45%~	68%	58%
NOT ANSWERED	5	83		1	3		1	2					1		3	1	4		5	
VALID CASES	218	3941	3	55	55	57	48	147			2	3	8	25	57	149	197	11	149	69
NUMBER OF RESPONDENTS	223 100%	4024 100%	3 100%	56 100%	58 100%	57 100%	49 100%	149 100%			2 100%	3 100%	9 100%	25 100%	60 100%	150 100%	201 100%	11 100%	154 100%	69 100%

[ASKED IF Q7 >= 1 TIME]

Q10 IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q10 YES	63 29%	1194 30%	1 33%~	14 26%	20 35%	13 23%	15 31%~	46 32%	~	~	1 50%~	3 33%~	7 28%~	12 20%	48 32%	55 28%~	5 45%~	33 22%*	30 43%*	
Q10 NO	156 71%	2727 70%	2 67%~	40 74%	37 65%	44 77%	33 69%~	100 68%	~	~	1 50%~	3 100%~	6 67%~	18 72%~	47 80%	100 68%	143 72%~	6 55%~	117 78%*	39 57%*
NOT ANSWERED	4	102		2	1		1	3						1	2	3		4		
VALID CASES	219	3922	3	54	57	57	48	146			2	3	9	25	59	148	198	11	150	69
NUMBER OF RESPONDENTS	223	4024	3	56	58	57	49	149			2	3	9	25	60	150	201	11	154	69
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

Q11 WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT YOUR CHILD TO TAKE A MEDICINE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q11 NOT AT ALL	4 6%	40 4%	~	~	3 15%~	~	1 7%~	2 4%~	~	~	~	~	1 33%~	2 17%~	2 4%~	3 5%~	1 25%~	3 9%~	1 3%~	
A LITTLE	6 10%	110 10%	~	7%~	1 10%~	2 8%~	1 13%~	2 7%~	3 ~	~	~	~	1 33%~	1 14%~	4 33%~	2 4%~	6 11%~	1 ~	5 3%~	17%~
SOME	17 27%	287 26%	~	36%~	5 20%~	4 25%~	3 25%~	5 33%~	14 31%~	~	~	~	~	2 29%~	2 17%~	15 32%~	16 29%~	1 25%~	9 27%~	8 28%~
#A LOT	35 56%	660 60%	100%~	57%~	1 55%~	8 67%~	11 47%~	8 47%~	7 58%~	26 ~	1 ~100%~	~	1 33%~	4 57%~	4 33%~	28 60%~	30 55%~	2 50%~	20 61%~	15 52%~
NOT ANSWERED	1	40				1		1						1			1		1	
VALID CASES	62	1098	1	14	20	12	15	45		1		3	7	12	47	55	4	33	29	
NUMBER OF RESPONDENTS	63	1138	1	14	20	13	15	46		1		3	7	12	48	55	5	33	30	
	100%	100%	100%	100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q7 >= 1 TIME AND Q10 = YES]

Q12 WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT YOUR CHILD TO TAKE A MEDICINE?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER				
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
Q12																					
NOT AT ALL	13 21%	204 19%	1 100%~	1 7%~	5 25%~	1 8%~	5 33%~	10 22%~	~	~	~	~	~	2 29%~	3 25%~	10 21%~	12 22%~	1 20%~	8 24%~	5 17%~	
A LITTLE	14 22%	171 16%	~	2 14%~	4 20%~	3 23%~	5 33%~	8 17%~	~	~	~	~	~	2 67%~	3 43%~	5 42%~	9 19%~	13 24%~	1 20%~	5 15%~	9 30%~
SOME	19 30%	343 31%	~	9 64%~	2 10%~	6 46%~	2 13%~	15 33%~	~	~	~	~	~	1 33%~	1 14%~	4 33%~	14 29%~	17 31%~	1 20%~	11 33%~	8 27%~
#A LOT	17 27%	374 34%	~	2 14%~	9 45%~	3 23%~	3 20%~	13 28%~	~	~	1 100%~	~	~	~	1 14%~	15 31%~	13 24%~	2 40%~	9 27%~	8 27%~	
NOT ANSWERED		47																			
VALID CASES	63	1091	1	14	20	13	15	46		1				3	7	12	48	55	5	33	30
NUMBER OF RESPONDENTS	63	1138	1	14	20	13	15	46		1				3	7	12	48	55	5	33	30
	100%	100%	100%	100%	100%	100%	100%	100%		100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME AND Q10 = YES]



Q13 WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOUR CHILD?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER AS-	IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q13 #YES	48 76%	872 80%	1 100%~	11 79%~	14 70%~	10 77%~	12 80%~	37 80%~	~	~	1 ~100%~	3 ~100%~	4 57%~	7 58%~	39 81%~	43 78%~	3 60%~	26 79%~	22 73%~
NO	15 24%	225 20%	~	3 21%~	6 30%~	3 23%~	3 20%~	9 20%~	~	~	~	~	3 43%~	5 42%~	9 19%~	12 22%~	2 40%~	7 21%~	8 27%~
NOT ANSWERED		42																	
VALID CASES	63	1096	1	14	20	13	15	46		1		3	7	12	48	55	5	33	30
NUMBER OF RESPONDENTS	63 100%	1138 100%	1 100%	14 100%	20 100%	13 100%	15 100%	46 100%		1 100%		3 100%	7 100%	12 100%	48 100%	55 100%	5 100%	33 100%	30 100%

[ASKED IF Q7 >= 1 TIME AND Q10 = YES]

Q14 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER					
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC				
Q14 WORST HEALTH CARE POSSIBLE		4 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~				
01	1 0.5%	5 0.1%	~	2%	~	~	1 0.7%	~	~	~	~	~	~	1 0.7%	1 0.5%	~	1 0.7%	~				
02		15 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~				
03	2 0.9%	33 0.8%	~	2%	~	~	1 0.7%	1 0.7%	~	~	1 33%	~	~	1 0.7%	2 1%	~	1 0.7%	1 1%				
04	4 2%	53 1%	~	4%	~	~	2 4%	2 1%	~	~	~	~	1 11%	1 4%	2 3%	2 1%	4 2%	3 2%	1 1%			
05	5 2%	141 4%	~	2%	3 5%	~	1 2%	4 3%	~	~	~	~	~	~	4 3%	4 2%	~	5 3%	~			
06	7 3%	124 3%	~	2%	1 2%	1 2%	4 9%	6 4%	~	~	~	~	~	1 4%	7 5%	6 3%	1 9%	4 3%	3 4%			
07	18 8%	316 8%	~	11%	4 7%	4 7%	4 9%	12 8%	~	~	~	~	~	3 13%	4 7%	12 8%	16 8%	1 9%	11 7%	7 10%		
08	58 27%	886 23%	67%	27%	15 25%	14 27%	15 27%	12 26%	42 29%	~	~	1 50%	~	2 22%	7 29%	16 28%	39 27%	51 26%	3 27%	36 24%	22 32%	
09	47 22%	849 22%	~	24%	13 27%	15 27%	9 16%	10 21%	31 21%	~	~	1 50%	1 33%	1 11%	4 17%	12 21%	32 22%	45 23%	1 9%	33 22%	14 21%	
BEST HEALTH CARE POSSIBLE	74 34%	1476 38%	33%	27%	1 33%	15 33%	18 48%*	27 28%	13 32%	46 32%	~	~	~	1 33%	5 56%	8 33%	24 41%	48 33%	66 34%	5 45%	54 36%	20 29%
#8-10 (NET)	179 83%	3211 82%	100%	78%	3 85%	43 85%	47 91%*	51 74%*	35 82%	119 82%	~	~	2 100%	2 67%	8 89%	19 79%	52 90%	119 82%	162 83%	9 82%	123 83%	56 82%

Continued

Q14 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AMER AS-	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
9-10 (NET)	121 56%	2325 60%	1 33%	28 51%	33 60%	36 64%	23 49%	77 53%	~	~	1 50%	2 67%	6 67%	12 50%	36 62%	80 55%	111 57%	6 55%	87 59%	34 50%
NOT ANSWERED	7	122		1	3	1	2	4					1	2	4	6		6	1	
VALID CASES	216	3902	3	55	55	56	47	145		2	3	9	24	58	146	195	11	148	68	
NUMBER OF RESPONDENTS	223 100%	4024 100%	3 100%	56 100%	58 100%	57 100%	49 100%	149 100%		2 100%	3 100%	9 100%	25 100%	60 100%	150 100%	201 100%	11 100%	154 100%	69 100%	
MEAN	8.53	8.59	8.67	8.22	8.65	9.02	8.17	8.46		8.50	7.33	8.78	8.46	8.83	8.48	8.53	8.73	8.56	8.47	
p stat_(*=Sig @ p<=.05)		.633	~.137	.466	.001*		~.352	~	~	~	~	~	~.070	.474	~	~	~.685	.684		

[ASKED IF Q7 >= 1]

Q15 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS, OR TREATMENT YOUR CHILD NEEDED?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q15 NEVER	1 0.5%	70 2%*	~	~	2%~	~	~	~	~	~	~	~	~	~	2%~	~	1 0.5%~	~	1 0.7%~	~
SOMETIMES	19 9%	378 10%	~	4 7%	3 6%	4 7%	8 17%~	10 7%	~	~	~	1 33%~	3 33%~	3 12%~	7 12%	10 7%	18 9%~	1 9%~	13 9%	6 9%
USUALLY	76 36%	1179 30%	1 33%~	24 44%	20 37%	13 24%*	18 37%~	49 34%	~	~	1 50%~	2 67%~	2 22%~	9 36%~	24 42%	48 32%	68 35%~	5 45%~	48 33%	28 41%
ALWAYS	118 55%	2256 58%	2 67%~	26 48%	30 56%	38 69%*	22 46%~	87 60%	~	~	1 50%~	4 44%~	13 52%~	25 44%*	90 61%*	109 56%~	5 45%~	84 58%	34 50%	
#ALWAYS + USUALLY (NET)	194 91%	3435 88%	3 100%~	50 93%	50 93%	51 93%	40 83%~	136 93%	~	~	2 100%~	2 67%~	6 67%~	22 88%~	49 86%	138 93%	177 90%~	10 91%~	132 90%	62 91%
TOP BOX SCORE	118 55%	2256 58%	2 67%~	26 48%	30 56%	38 69%*	22 46%~	87 60%	~	~	1 50%~	4 44%~	13 52%~	25 44%*	90 61%*	109 56%~	5 45%~	84 58%	34 50%	
NOT ANSWERED	9	141		2	4	2	1	3						3	2	5		8	1	
VALID CASES	214	3883	3	54	54	55	48	146			2	3	9	25	57	148	196	11	146	68
NUMBER OF RESPONDENTS	223	4024	3	56	58	57	49	149			2	3	9	25	60	150	201	11	154	69
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q7 >= 1 TIME]

Q16 IS YOUR CHILD NOW ENROLLED IN ANY KIND OF SCHOOL OR DAYCARE?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC			
Q16 YES	215 67%	4005 69%	2 67%~	13 19%*	57 72%	77 87%*	66 84%*	163 74%*	1 100%~		2 ~100%~	2 40%~	8 57%~	19 56%~	46 51%*	162 75%*	201 67%~	8 62%~	146 61%*	69 84%*	
NO	105 33%	1827 31%	1 33%~	57 81%*	22 28%	12 13%*	13 16%*	56 26%*		~	~	~	3 60%~	6 43%~	15 44%~	45 49%*	54 25%*	97 33%~	5 38%~	92 39%*	13 16%*
NOT ANSWERED	15	187		4	7	4		4								1	4	4		12	3
VALID CASES	320	5831	3	70	79	89	79	219	1		2	5	14	34	91	216	298	13	238	82	
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%		2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%	

Q17 IN THE LAST 6 MONTHS, DID YOU NEED YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TO CONTACT A SCHOOL OR DAYCARE CENTER ABOUT YOUR CHILD'S HEALTH OR HEALTH CARE?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER				
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC			
Q17 YES	15 7%	460 12%*	~	~	13%	5%	7%	12 8%~	~	~	~	~	~	~	1 5%~	3 7%~	11 7%~	10 5%~	3 38%~	8 6%	7 11%
NO	188 93%	3425 88%*	100%~	100%~	87%	95%	93%	142 92%~	1 100%~	~	2 ~100%~	1 ~100%~	7 ~100%~	18 95%~	39 93%~	144 93%~	179 95%~	5 63%~	130 94%	58 89%	
NOT ANSWERED	12	235			2	4	6	9			1	1		4	7	12			8	4	
VALID CASES	203	3885	2	13	55	73	60	154	1		2	1	7	19	42	155	189	8	138	65	
NUMBER OF RESPONDENTS	215 100%	4120 100%	2 100%	13 100%	55 100%	73 100%	60 100%	154 100%	1 100%		2 100%	1 100%	7 100%	19 100%	42 100%	155 100%	189 100%	8 100%	138 100%	65 100%	

[ASKED IF Q16 = YES]

Q18 IN THE LAST 6 MONTHS, DID YOU GET THE HELP YOU NEEDED FROM YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER IN CONTACTING YOUR CHILD'S SCHOOL OR DAYCARE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR POOR	NO CCC	CCC
Q18 #YES	15	368		7	4	4	12						1	3	11	10	3	8	7
	100%	88%	~	~100%	~100%	~100%	~100%	~	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~100%	~100%
NO		51																	
		12%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		1																	
VALID CASES	15	419		7	4	4	12						1	3	11	10	3	8	7
NUMBER OF RESPONDENTS	15	420		7	4	4	12						1	3	11	10	3	8	7
	100%	100%		100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q16 = YES AND Q17 = YES]

Q19 SPECIAL MEDICAL EQUIPMENT OR DEVICES INCLUDE A WALKER, WHEELCHAIR, NEBULIZER, FEEDING TUBES, OR OXYGEN EQUIPMENT. IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET ANY SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC
Q19 YES	7 2%	202 3%	~	1%	4%	1%	3%	6	~	~	~	~	1	7	6	1	3	4
NO	315 98%	5625 97%	100%~	99%	96%	99%	97%	216	1	~	2	5	13	33	90	12	236	79
NOT ANSWERED	13	191		3	6	2	2	1				1		2	1	3	11	2
VALID CASES	322	5827	3	71	80	91	77	222	1		2	5	13	34	90	13	239	83
NUMBER OF RESPONDENTS	335 100%	6018 100%	3	74	86	93	79	223	1		2	5	14	34	92	13	250	85
			100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%



Q20 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD?

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- AMR	IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC
Q20 NEVER	1 14%	22 11%	~	~	~	~	50% 1	17% 1	~	~	~	~	~	~	14% 1	17% 1	~	33% 1	~
SOMETIMES	1 14%	27 13%	~	~	~	~	50% 1	17% 1	~	~	~	~	~	~	14% 1	~100% 1	~	~25% 1	~
USUALLY	2 29%	51 24%	~	100% 1	~	100% 1	~	33% 2	~	~	~	~	~	~	29% 2	33% 2	~	~50% 2	~
ALWAYS	3 43%	109 52%	~	~	100% 3	~	~	33% 2	~	~	~	~	100% 1	~	43% 3	50% 3	~	67% 2	25% 1
#ALWAYS + USUALLY (NET)	5 71%	160 76%	~	100% 1	100% 3	100% 1	~	67% 4	~	~	~	~	100% 1	~	71% 5	83% 5	~	67% 2	75% 3
TOP BOX SCORE	3 43%	109 52%	~	~	100% 3	~	~	33% 2	~	~	~	~	100% 1	~	43% 3	50% 3	~	67% 2	25% 1
NOT ANSWERED		12																	
VALID CASES	7	210		1	3	1	2	6					1		7	6	1	3	4
NUMBER OF RESPONDENTS	7	222		1	3	1	2	6					1		7	6	1	3	4
	100%	100%		100%	100%	100%	100%	100%					100%		100%	100%	100%	100%	100%

[ASKED IF Q19 = YES]

Q21 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q21 #YES	5 71%	178 86%	~100%	1 100%	3 100%	~50%	1 50%	4 67%	~	~	~	~	~100%	1 ~71%	5 ~71%	4 67%	1 100%	2 67%	3 75%
NO	2 29%	30 14%	~	~	~100%	1 50%	1 50%	2 33%	~	~	~	~	~	2 ~29%	2 33%	2 33%	~	1 33%	1 25%
NOT ANSWERED		14																	
VALID CASES	7	208	1	3	1	2	6						1	7	6	1	3	4	
NUMBER OF RESPONDENTS	7	222	1	3	1	2	6						1	7	6	1	3	4	
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	

[ASKED IF Q19 = YES]

Q22 IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET SPECIAL THERAPY SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY FOR YOUR CHILD?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ PAC ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q22 YES	25 8%	474 8%	~	6 8%	10 12%	4 4%	5 6%	16 7%	~	~	~	~	1 7%	5 15%	6 7%	17 8%	19 6%	5 38%	9 4%*	16 19%*	
NO	298 92%	5319 92%	100%~	92%~	88%~	96%~	94%~	205 93%	1 100%~	~	100%~	2 ~	5 ~	13 93%~	29 85%~	86 93%	201 92%	281 94%~	8 62%~	230 96%*	68 81%*
NOT ANSWERED	12	225		3	5	2	2	2							2		2		11	1	
VALID CASES	323	5793	3	71	81	91	77	221	1		2	5	14	34	92	218	300	13	239	84	
NUMBER OF RESPONDENTS	335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q23 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS THERAPY FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER					
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC		
Q23 NEVER	5 20%	60 14%	~	17%~	10%~	~	60%~	25%~	~	~	~	~	~	20%~	1	5	2	3	11%~	60%~	11%~	25%~
SOMETIMES	3 12%	71 17%	~	17%~	10%~	25%~	~	13%~	~	~	~	~	100%~	1	2	1	3	16%~	~	22%~	6%~	
USUALLY	10 40%	110 26%	~	33%~	30%~	75%~	40%~	38%~	~	~	~	~	60%~	3	2	7	8	42%~	40%~	44%~	38%~	
ALWAYS	7 28%	179 43%	~	33%~	50%~	~	~	25%~	~	~	~	~	20%~	1	2	4	6	32%~	~	22%~	31%~	
#ALWAYS + USUALLY (NET)	17 68%	289 69%	~	67%~	80%~	75%~	40%~	63%~	~	~	~	~	80%~	4	4	11	14	74%~	40%~	67%~	69%~	
TOP BOX SCORE	7 28%	179 43%	~	33%~	50%~	~	~	25%~	~	~	~	~	20%~	1	2	4	6	32%~	~	22%~	31%~	
NOT ANSWERED		24																				
VALID CASES	25	420		6	10	4	5	16					1	5	6	17	19	5	9	16		
NUMBER OF RESPONDENTS	25	444		6	10	4	5	16					1	5	6	17	19	5	9	16		
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%		

[ASKED IF Q22 = YES]

Q24 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS THERAPY FOR YOUR CHILD?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q24 #YES	18 75%	291 69%	3 ~ 60%	9 90%	3 75%	3 60%	13 87%	~	~	~	~	~	3 60%	2 33%	14 88%	14 78%	3 60%	4 44%	14 93%
NO	6 25%	132 31%	2 ~ 40%	1 10%	1 25%	2 40%	2 13%	~	~	~	~	1 100%	2 40%	4 67%	2 13%	4 22%	2 40%	5 56%	1 7%
NOT ANSWERED	1	21	1				1							1	1			1	
VALID CASES	24	423	5	10	4	5	15					1	5	6	16	18	5	9	15
NUMBER OF RESPONDENTS	25	444	6	10	4	5	16					1	5	6	17	19	5	9	16
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q22 = YES]

Q25 IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET TREATMENT OR COUNSELING FOR YOUR CHILD FOR AN EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEM?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER					
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC			
Q25 YES	35 11%	682 12%	~	3 4%*	10 12%	10 11%	12 16%	25 11%	~	~	~	~	1 7%	7 21%	5 5%*	28 13%	30 10%	4 31%	7 3%*	28 33%*		
NO	288 89%	5109 88%	100%~	3 96%*	68 88%	71 89%	81 84%	65 84%	196 89%	1 100%~	~	~	2 ~100%	5 ~100%	13 93%~	27 79%~	87 95%*	190 87%	270 90%~	9 69%~	232 97%*	56 67%*
NOT ANSWERED	12	227		3	5	2	2	2								2	2		11	1		
VALID CASES	323	5791	3	71	81	91	77	221	1			2	5	14	34	92	218	300	13	239	84	
NUMBER OF RESPONDENTS	335	6018	3	74	86	93	79	223	1			2	5	14	34	92	220	302	13	250	85	
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q26 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q26 NEVER	5 16%	90 14%	~	33%~	10%~	~	30%~	22%~	~	~	~	~	~	~	19%~	5 18%~	5 18%~	~	~	20%~
SOMETIMES	5 16%	121 19%	~	33%~	10%~	33%~	~	13%~	~	~	~	~	33%~	2 25%~	1 15%~	4 18%~	5 18%~	~	~	20%~
USUALLY	7 22%	156 24%	~	~	30%~	22%~	20%~	26%~	~	~	~	~	~	2 50%~	4 15%~	5 18%~	2 67%~	3 43%~	4 16%~	
ALWAYS	15 47%	284 44%	~	33%~	50%~	44%~	50%~	39%~	~	~	~	~	100%~	1 67%~	4 25%~	13 50%~	13 46%~	1 33%~	4 57%~	11 44%~
#ALWAYS + USUALLY (NET)	22 69%	440 68%	~	33%~	80%~	67%~	70%~	65%~	~	~	~	~	100%~	1 67%~	4 75%~	17 65%~	18 64%~	3 100%~	7 100%~	15 60%~
TOP BOX SCORE	15 47%	284 44%	~	33%~	50%~	44%~	50%~	39%~	~	~	~	~	100%~	1 67%~	4 25%~	13 50%~	13 46%~	1 33%~	4 57%~	11 44%~
NOT ANSWERED	3	25				1	2	2						1	1	2	2	1		3
VALID CASES	32	651		3	10	9	10	23					1	6	4	26	28	3	7	25
NUMBER OF RESPONDENTS	35	676		3	10	10	12	25					1	7	5	28	30	4	7	28
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]

Q27 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q27 #YES	19 59%	347 53%	~	2 100%	8 80%	6 67%	3 27%	13 57%	~	~	~	~	5 83%	3 75%	15 58%	16 57%	2 67%	3 43%	16 64%
NO	13 41%	304 47%	~	~	2 20%	3 33%	8 73%	10 43%	~	~	~	~	1 100%	1 17%	11 25%	12 43%	1 33%	4 57%	9 36%
NOT ANSWERED	3	25	1			1	1	2					1	1	2	2	1		3
VALID CASES	32	651	2	10	9	11	23						1	6	4	26	3	7	25
NUMBER OF RESPONDENTS	35	676	3	10	10	12	25						1	7	5	28	4	7	28
	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q25 = YES]



Q28 IN THE LAST 6 MONTHS, DID YOUR CHILD GET CARE FROM MORE THAN ONE KIND OF HEALTH CARE PROVIDER OR USE MORE THAN ONE KIND OF HEALTH CARE SERVICE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q28 YES	61 19%	1072 19%	2 67%	13 18%	15 19%	15 17%	16 21%	45 21%	~	~	~	~	2 14%	11 32%	12 13%	46 21%	54 18%	5 38%	31 13%*	30 36%*
NO	259 81%	4688 81%	1 33%	58 82%	66 81%	75 83%	59 79%	174 79%	1 100%	~	2 100%	5 100%	12 86%	23 68%	79 87%	170 79%	243 82%	8 62%	205 87%*	54 64%*
NOT ANSWERED	15	257		3	5	3	4	4							1	4	5		14	1
VALID CASES	320	5761	3	71	81	90	75	219	1		2	5	14	34	91	216	297	13	236	84
NUMBER OF RESPONDENTS	335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q29 IN THE LAST 6 MONTHS, DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP COORDINATE YOUR CHILD'S CARE AMONG THESE DIFFERENT PROVIDERS OR SERVICES?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER				
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q29 #YES	22 38%	609 56%*	1 50%~	3 25%~	6 43%~	6 40%~	6 40%~	16 38%~	~	~	~	~	~	3 27%~	4 33%~	16 37%~	19 37%~	1 20%~	10 33%~	12 43%~	
NO	36 62%	471 44%*	1 50%~	9 75%~	8 57%~	9 60%~	9 60%~	26 62%~	~	~	~	~	~	2 100%~	8 73%~	8 67%~	27 63%~	32 63%~	4 80%~	20 67%~	16 57%~
NOT ANSWERED	3	35		1	1		1	3								3	3		1	2	
VALID CASES	58	1080	2	12	14	15	15	42						2	11	12	43	51	5	30	28
NUMBER OF RESPONDENTS	61	1115	2	13	15	15	16	45						2	11	12	46	54	5	31	30
	100%	100%	100%	100%	100%	100%	100%	100%						100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q28 = YES]

Q30 A PERSONAL DOCTOR IS THE ONE YOUR CHILD WOULD SEE IF HE OR SHE NEEDS A CHECKUP, HAS A HEALTH PROBLEM, OR GETS SICK OR HURT. DOES YOUR CHILD HAVE A PERSONAL DOCTOR?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q30 YES	253 78%	4998 86%*	3 100%~	59 83%	65 80%	73 80%	53 69%*	175 79%	1 100%~		2 ~100%	5 ~100%	9 ~64%	28 82%~	65 71%*	176 81%	237 79%~	9 69%~	179 75%*	74 88%*
NO	70 22%	790 14%*		12 ~17%	16 20%	18 20%	24 31%*	46 21%					5 ~36%~	6 18%~	27 29%*	42 19%	63 21%~	4 31%~	60 25%*	10 12%*
NOT ANSWERED	12	230		3	5	2	2	2							2		2		11	1
VALID CASES	323	5788	3	71	81	91	77	221	1		2	5	14	34	92	218	300	13	239	84
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%		2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q31 IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOUR CHILD VISIT HIS OR HER PERSONAL DOCTOR FOR CARE?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	OTH	MUL- TI	HIS- PAN- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q31 NONE	65 27%	1324 27%	7 ~ 12%*	15 23%	26 37%*	17 35%~	44 26%	1 100%~			1 20%~	2 25%~	9 33%~	14 23%	49 29%	64 28%~	1 11%~	52 30%*	13 18%*	
1 TIME	90 37%	1651 34%	1 33%~	21 36%	27 42%	13 27%~	61 36%			1 50%~	2 40%~	2 25%~	9 33%~	25 41%	59 35%	84 37%~	2 22%~	66 38%	24 33%	
2	52 21%	1029 21%	1 33%~	17 29%	16 25%	10 14%	8 17%~	37 22%		1 50%~	1 20%~	4 50%~	2 7%~	15 25%	34 20%	50 22%~		36 21%	16 22%	
3	22 9%	462 9%	1 33%~	7 12%	5 8%	3 4%*	6 13%~	17 10%					4 ~ 15%~	5 8%	17 10%	21 9%~	1 11%~	11 6%	11 15%	
4	9 4%	201 4%		4 ~ 7%	1 2%	3 4%	1 2%~	6 4%					3 ~ 11%~	2 3%	7 4%	8 4%~	1 11%~	4 2%	5 7%	
5 TO 9	6 2%	173 4%		2 ~ 3%		1 ~ 1%	3 6%~	4 2%			1 ~ 20%~				5 ~ 3%	1 0.4%~	4 44%~	3 2%	3 4%	
10 OR MORE TIMES		32 0.6%~																		
NOT ANSWERED	9	181		1	1	2	5	6				1	1	4	5	9		7	2	
VALID CASES	244	4872	3	58	64	71	48	169	1		2	5	8	27	61	171	228	9	172	72
NUMBER OF RESPONDENTS	253	5053	3	59	65	73	53	175	1		2	5	9	28	65	176	237	9	179	74
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES]

Q31A IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING YOUR CHILD'S PERSONAL DOCTOR BECAUSE YOU SPOKE DIFFERENT LANGUAGES?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q31A ALWAYS	3 2%	68 2%	~	~	1 2%	1 2%	1 3%	1 0.8%	~	~	~	~	~	2 4%	~	2 1%	~	3 3%	~	
USUALLY	1 0.6%	51 1%	~	~	~	1 2%	~	~	~	~	~	1 17%	~	1 2%	~	1 0.6%	~	1 0.8%	~	
SOMETIMES	5 3%	288 8%*	~	2 4%	1 2%	1 2%	1 3%	2%	~	~	~	~	2 11%	2 4%	2 2%	5 3%	~	3 3%	2 3%	
NEVER	168 95%	3102 88%*	3 100%	48 96%	46 96%	42 93%	29 94%	120 97%	~	~	2 100%	4 100%	5 83%	16 89%	41 89%	119 98%*	154 95%	8 100%	111 94%	57 97%
#NEVER + SOMETIMES (NET)	173 98%	3390 97%	3 100%	50 100%	47 98%	43 96%	30 97%	123 99%	~	~	2 100%	4 100%	5 83%	18 100%	43 93%	121 100%	159 98%	8 100%	114 97%	59 100%
TOP BOX SCORE	168 95%	3102 88%*	3 100%	48 96%	46 96%	42 93%	29 94%	120 97%	~	~	2 100%	4 100%	5 83%	16 89%	41 89%	119 98%*	154 95%	8 100%	111 94%	57 97%
NOT ANSWERED	2	31		1	1			1						1	1	2		2		
VALID CASES	177	3509	3	50	48	45	31	124			2	4	6	18	46	121	162	8	118	59
NUMBER OF RESPONDENTS	179	3540	3	51	49	45	31	125			2	4	6	18	47	122	164	8	120	59
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q32 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS ABOUT YOUR CHILD'S HEALTH IN A WAY THAT WAS EASY TO UNDERSTAND?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q32 NEVER	2 1%	74 2%	~	1 2%	~	1 2%	~	2 2%	~	~	~	~	~	~	2 2%	2 1%	~	2 2%	~	
SOMETIMES	7 4%	183 5%	~	2 4%	1 2%	2 4%	2 6%	6 5%	~	~	~	1 17%	~	5 11%	2 2%	7 4%	~	5 4%	2 3%	
USUALLY	31 17%	573 16%	~	9 18%	11 22%	3 7%	8 26%	21 17%	~	~	1 50%	~	2 11%	8 17%	21 17%	29 18%	1 13%	18 15%	13 22%	
ALWAYS	138 78%	2676 76%	100%	3 76%	38 76%	37 76%	39 87%	21 68%	95 77%	~	1 50%	4 100%	5 83%	16 89%	34 72%	96 79%	125 77%	7 88%	94 79%	44 75%
#ALWAYS + USUALLY (NET)	169 95%	3249 93%	100%	3 94%	47 98%	48 93%	42 94%	29 94%	116 94%	~	2 100%	4 100%	5 83%	18 100%	42 89%	117 97%	154 94%	8 100%	112 94%	57 97%
TOP BOX SCORE	138 78%	2676 76%	100%	3 76%	38 76%	37 76%	39 87%	21 68%	95 77%	~	1 50%	4 100%	5 83%	16 89%	34 72%	96 79%	125 77%	7 88%	94 79%	44 75%
NOT ANSWERED	1	33		1				1						1		1		1		
VALID CASES	178	3507	3	50	49	45	31	124			2	4	6	18	47	121	163	8	119	59
NUMBER OF RESPONDENTS	179	3540	3	51	49	45	31	125			2	4	6	18	47	122	164	8	120	59
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q33 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR LISTEN CAREFULLY TO YOU?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q33 NEVER	2 1%	29 0.8%	~	~	~	4%~	2 0.8%	1	~	~	~	~	17%~	~	2 4%~	2	2 1%~	2	2	2
SOMETIMES	8 4%	199 6%	~	2%~	4%~	~	5 16%~	8 6%~	~	~	~	~	~	~	2 4%~	6 5%	8 5%~	~	6 5%	2 3%
USUALLY	37 21%	611 17%	1 33%~	16 32%*	9 18%~	3 7%~	8 26%~	27 22%	~	~	1 50%~	~	~	5 28%~	7 15%~	28 23%	34 21%~	2 25%~	22 18%	15 25%
ALWAYS	131 74%	2666 76%	2 67%~	33 66%	38 78%~	40 89%~	18 58%~	88 71%	~	~	1 50%~	4 100%~	5 83%~	13 72%~	36 77%~	87 72%	119 73%~	6 75%~	89 75%	42 71%
#ALWAYS + USUALLY (NET)	168 94%	3277 93%	3 100%~	49 98%	47 96%~	43 96%~	26 84%~	115 93%	~	~	2 100%~	4 100%~	5 83%~	18 100%~	43 91%~	115 95%	153 94%~	8 100%~	111 93%	57 97%
TOP BOX SCORE	131 74%	2666 76%	2 67%~	33 66%	38 78%~	40 89%~	18 58%~	88 71%	~	~	1 50%~	4 100%~	5 83%~	13 72%~	36 77%~	87 72%	119 73%~	6 75%~	89 75%	42 71%
NOT ANSWERED	1	34	1					1							1	1		1		
VALID CASES	178	3506	3	50	49	45	31	124			2	4	6	18	47	121	163	8	119	59
NUMBER OF RESPONDENTS	179	3540	3	51	49	45	31	125			2	4	6	18	47	122	164	8	120	59
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q34 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SHOW RESPECT FOR WHAT YOU HAD TO SAY?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q34 NEVER	22	0.6%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
SOMETIMES	5	152	~	~	1	1	3	5	~	~	~	~	~	~	2	3	5	~	3	2
	3%	4%			2%	2%	10%	4%							4%	3%	3%		3%	3%
USUALLY	26	469	1	10	8	2	5	19	~	~	1	~	4	6	20	25	1	16	10	
	15%	13%	33%	20%	16%	4%	16%	15%			50%		22%	13%	17%	15%	13%	14%	17%	
ALWAYS	146	2859	2	39	40	42	23	99	~	~	1	4	6	14	39	97	132	7	99	47
	82%	82%	67%	80%	82%	93%	74%	80%			50%	100%	100%	78%	83%	81%	81%	88%	84%	80%
#ALWAYS + USUALLY (NET)	172	3328	3	49	48	44	28	118	~	~	2	4	6	18	45	117	157	8	115	57
	97%	95%	100%	100%	98%	98%	90%	96%*			100%	100%	100%	100%	96%	98%	97%	100%	97%	97%
TOP BOX SCORE	146	2859	2	39	40	42	23	99	~	~	1	4	6	14	39	97	132	7	99	47
	82%	82%	67%	80%	82%	93%	74%	80%			50%	100%	100%	78%	83%	81%	81%	88%	84%	80%
NOT ANSWERED	2	38	2					2						2		2		2		
VALID CASES	177	3502	3	49	49	45	31	123			2	4	6	18	47	120	162	8	118	59
NUMBER OF RESPONDENTS	179	3540	3	51	49	45	31	125			2	4	6	18	47	122	164	8	120	59
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]



Q35 IS YOUR CHILD ABLE TO TALK WITH DOCTORS ABOUT HIS OR HER HEALTH CARE?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q35 YES	107 60%	2353 68%	7 ~ 14%	33 67%	38 84%	29 94%	76 62%	~	~ 50%	1 25%	1 67%	4 56%	10 52%	24 52%	78 64%	96 59%	6 75%	64 54%*	43 73%*
NO	70 40%	1128 32%	3 100%	42 86%	16 33%	7 16%	2 6%	47 38%	~	~ 50%	1 75%	3 33%	2 44%	8 48%	22 36%	43 41%	66 25%	2 46%*	16 27%*
NOT ANSWERED	2	60	2				2							1	1	2		2	
VALID CASES	177	3480	3	49	49	45	31	123		2	4	6	18	46	121	162	8	118	59
NUMBER OF RESPONDENTS	179	3540	3	51	49	45	31	125		2	4	6	18	47	122	164	8	120	59
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q35A IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING HIS OR HER PERSONAL DOCTOR BECAUSE THEY SPOKE DIFFERENT LANGUAGES?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q35A ALWAYS	3 3%	43 2%	~	~	1 3%	2 5%	1 1%	~	~	~	~	2 50%	~	3 13%	~	3 3%	~	3 5%	~	
USUALLY	1 1%	47 2%	~	~	1 3%	~	1 1%	~	~	~	~	~	~	1 4%	~	1 1%	~	1 2%	~	
SOMETIMES	6 6%	152 7%	~	1 14%	3 9%	1 3%	1 4%	2 3%	~	~	~	~	1 10%	3 13%	3 4%	5 5%	1 17%	3 5%	3 7%	
NEVER	93 90%	2045 89%	~	6 86%	27 84%	35 92%	25 96%	68 94%	~	~	1 100%	1 100%	2 50%	9 90%	17 71%	71 96%	83 90%	5 83%	56 89%	37 93%
#NEVER + SOMETIMES (NET)	99 96%	2197 96%	~	7 100%	30 94%	36 95%	26 100%	70 97%	~	~	1 100%	1 100%	2 50%	10 100%	20 83%	74 100%	88 96%	6 100%	59 94%	40 100%
TOP BOX SCORE	93 90%	2045 89%	~	6 86%	27 84%	35 92%	25 96%	68 94%	~	~	1 100%	1 100%	2 50%	9 90%	17 71%	71 96%	83 90%	5 83%	56 89%	37 93%
NOT ANSWERED	4	49			1		3	4							4	4		1	3	
VALID CASES	103	2287		7	32	38	26	72			1	1	4	10	24	74	92	6	63	40
NUMBER OF RESPONDENTS	107	2336		7	33	38	29	76			1	1	4	10	24	78	96	6	64	43
	100%	100%		100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q35 = YES]

Q36 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS IN A WAY THAT WAS EASY FOR YOUR CHILD TO UNDERSTAND?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q36 NEVER	2 2%	72 3%	~	~	2 6%	~	1 1%	~	~	~	~	~	~	1 4%	1 1%	2 2%	~	2 3%	~	
SOMETIMES	4 4%	148 6%	~	1 17%	~	2 5%	1 4%	~	~	~	~	~	~	2 8%	2 3%	4 4%	~	4 6%	~	
USUALLY	24 23%	454 20%	~	~	9 27%	8 21%	7 26%	18 25%	~	~	~	~	1 10%	4 17%	19 25%	21 23%	2 33%	14 22%	10 25%	
ALWAYS	74 71%	1606 70%	~	5 83%	22 67%	28 74%	19 70%	50 68%	~	~	1 100%	1 100%	4 100%	9 90%	17 71%	53 71%	66 71%	4 67%	44 69%	30 75%
#ALWAYS + USUALLY (NET)	98 94%	2060 90%	~	5 83%	31 94%	36 95%	26 96%	68 93%	~	~	1 100%	1 100%	4 100%	10 100%	21 88%	72 96%	87 94%	6 100%	58 91%	40 100%
TOP BOX SCORE	74 71%	1606 70%	~	5 83%	22 67%	28 74%	19 70%	50 68%	~	~	1 100%	1 100%	4 100%	9 90%	17 71%	53 71%	66 71%	4 67%	44 69%	30 75%
NOT ANSWERED	3	56	1			2	3							3		3			3	
VALID CASES	104	2280	6	33	38	27	73			1	1	4	10	24	75	93	6	64	40	
NUMBER OF RESPONDENTS	107	2336	7	33	38	29	76			1	1	4	10	24	78	96	6	64	43	
	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q35 = YES]

Q37 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SPEND ENOUGH TIME WITH YOUR CHILD?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q37 NEVER	4 2%	98 3%		3 6%	1 2%		2 2%						1 6%	2 4%	2 2%	4 2%		3 3%	1 2%	
SOMETIMES	15 9%	385 11%		2 4%	4 8%	3 7%	6 19%	13 11%						8 17%	6 5%*	13 8%	1 13%	11 9%	4 7%	
USUALLY	51 29%	856 25%	2 67%	14 29%	15 31%	11 24%	9 29%	33 27%			1 50%		4 67%	5 28%	18 38%	31 26%	49 30%	1 13%	31 26%	20 34%
ALWAYS	106 60%	2135 61%	1 33%	29 60%	30 61%	30 67%	16 52%	74 61%			1 50%	4 100%	2 33%	12 67%	19 40%	80 67%*	95 59%	6 75%	72 62%	34 58%
#ALWAYS + USUALLY (NET)	157 89%	2991 86%	3 100%	43 90%	45 92%	41 91%	25 81%	107 88%			2 100%	4 100%	6 100%	17 94%	37 79%	111 93%*	144 89%	7 87%	103 88%	54 92%
TOP BOX SCORE	106 60%	2135 61%	1 33%	29 60%	30 61%	30 67%	16 52%	74 61%			1 50%	4 100%	2 33%	12 67%	19 40%	80 67%*	95 59%	6 75%	72 62%	34 58%
NOT ANSWERED	3	67		3			3								3	3		3		
VALID CASES	176	3473	3	48	49	45	31	122			2	4	6	18	47	119	161	8	117	59
NUMBER OF RESPONDENTS	179	3540	3	51	49	45	31	125			2	4	6	18	47	122	164	8	120	59
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q38 IN THE LAST 6 MONTHS, DID YOUR CHILD'S PERSONAL DOCTOR TALK WITH YOU ABOUT HOW YOUR CHILD IS FEELING, GROWING, OR BEHAVING?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q38 #YES	145 82%	2956 85%	3 100%	44 88%	42 88%	33 73%	23 77%	102 82%	~	~	1 50%	3 75%	6 100%	16 89%	37 80%	101 83%	133 82%	8 100%	97 83%	48 81%
NO	31 18%	518 15%	~	6 12%	6 12%	12 27%	7 23%	22 18%	~	~	1 50%	1 25%	~	2 11%	9 20%	20 17%	29 18%	~	20 17%	11 19%
NOT ANSWERED	3	66		1	1		1	1						1	1	2		3		
VALID CASES	176	3474	3	50	48	45	30	124			2	4	6	18	46	121	162	8	117	59
NUMBER OF RESPONDENTS	179	3540	3	51	49	45	31	125			2	4	6	18	47	122	164	8	120	59
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q39 IN THE LAST 6 MONTHS, DID YOUR CHILD GET CARE FROM A DOCTOR OR OTHER HEALTH PROVIDER BESIDES HIS OR HER PERSONAL DOCTOR?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q39 YES	61 35%	1340 39%	2 67%	17 35%	16 33%	15 34%	11 37%	44 36%	~	~	1 50%	1 25%	1 17%	7 39%	19 41%	41 34%	55 34%	5 63%	34 30%*	27 46%*
Q39 NO	112 65%	2127 61%	1 33%	31 65%	32 67%	29 66%	19 63%	79 64%	~	~	1 50%	3 75%	5 83%	11 61%	27 59%	79 66%	106 66%	3 38%	80 70%*	32 54%*
NOT ANSWERED	6	73		3	1	1	1	2						1	2	3		6		
VALID CASES	173	3467	3	48	48	44	30	123			2	4	6	18	46	120	161	8	114	59
NUMBER OF RESPONDENTS	179	3540	3	51	49	45	31	125			2	4	6	18	47	122	164	8	120	59
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME]

Q40 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SEEM INFORMED AND UP-TO-DATE ABOUT THE CARE YOUR CHILD GOT FROM THESE DOCTORS OR OTHER HEALTH PROVIDERS?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER				
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & GOOD POOR	NO CCC	CCC				
Q40 NEVER	2 3%	102 8%	~	~	7%~	7%~	~	5%~	~	~	~	~	~	~	1 6%~	1 3%~	2 4%~	~	1 3%~	1 4%~	
SOMETIMES	9 15%	189 15%	~	18%~	7%~	21%~	18%~	19%~	~	~	~	~	1 ~100%~	~	2 11%~	7 18%~	9 17%~	~	7 22%~	2 7%~	
USUALLY	24 41%	353 28%*	1 50%~	5 29%~	6 40%~	6 43%~	6 55%~	17 40%~	~	~	1 ~100%~	~	~	~	3 ~43%~	6 33%~	18 45%~	22 42%~	2 40%~	10 31%~	14 52%~
ALWAYS	24 41%	630 49%	1 50%~	9 53%~	7 47%~	4 29%~	3 27%~	15 36%~	~	~	1 ~100%~	~	~	~	4 ~57%~	9 50%~	14 35%~	20 38%~	3 60%~	14 44%~	10 37%~
#ALWAYS + USUALLY (NET)	48 81%	983 77%	2 100%~	14 82%~	13 87%~	10 71%~	9 82%~	32 76%~	~	~	1 ~100%~	1 ~100%~	~	~	7 ~100%~	15 83%~	32 80%~	42 79%~	5 100%~	24 75%~	24 89%~
TOP BOX SCORE	24 41%	630 49%	1 50%~	9 53%~	7 47%~	4 29%~	3 27%~	15 36%~	~	~	1 ~100%~	~	~	~	4 ~57%~	9 50%~	14 35%~	20 38%~	3 60%~	14 44%~	10 37%~
NOT ANSWERED	2	48			1	1		2							1	1	2			2	
VALID CASES	59	1274	2	17	15	14	11	42			1	1	1	7	18	40	53	5	32	27	
NUMBER OF RESPONDENTS	61	1322	2	17	16	15	11	44			1	1	1	7	19	41	55	5	34	27	
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q39 = YES]

Q41 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S PERSONAL DOCTOR?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q41 WORST PERSONAL DOCTOR POSSIBLE		7 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01		17 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02		17 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
03		21 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
04	2 0.8%	41 0.9%	~	1 2%	~	1 2%	2 1%	~	~	~	~	~	~	2 1%	2 0.9%	~	1 0.6%	1 1%		
05	8 3%	139 3%	~	~	~	3 4%	5 10%	7 4%	~	~	~	~	~	1 2%	7 4%	8 4%	~	8 5%*	~	
06	4 2%	111 2%	~	1 2%	1 2%	2 3%	~	3 2%	~	~	~	~	~	1 4%	2 3%	2 1%	4 2%	~	2 1%	2 3%
07	22 9%	320 7%	~	8 14%	4 6%	5 7%	5 10%	16 9%	~	~	~	~	1 11%	4 15%	3 5%	18 11%	22 10%	~	15 9%	7 10%
08	54 23%	785 16%*	1 33%	15 26%	13 21%	13 19%	12 25%	37 22%	~	~	1 50%	2 40%	2 22%	9 33%	12 20%	40 23%	50 22%	3 33%	36 21%	18 25%
09	41 17%	988 21%	~	7 12%	13 21%	10 14%	11 23%	31 18%	~	~	1 50%	~	~	4 15%	9 15%	32 19%	39 17%	2 22%	28 17%	13 18%
BEST PERSONAL DOCTOR POSSIBLE	109 45%	2358 49%	2 67%	25 44%	31 50%	37 53%	14 29%	73 43%	1 100%	~	~	3 60%	6 67%	9 33%	34 56%	70 41%*	102 45%	4 44%	78 46%	31 43%
#8-10 (NET)	204 85%	4130 86%	3 100%	47 82%	57 92%*	60 86%	37 77%	141 83%	1 100%	~	~	2 100%	5 100%	8 89%	22 81%	55 90%	142 84%	9 100%	142 85%	62 86%

Continued



Q41 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S PERSONAL DOCTOR?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12 13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & POOR	NO CCC	CCC	
9-10 (NET)	150 62%	3346 70%*	2 67%~	32 56%	44 71%	47 67%	25 52%~	104 62%	1 100%~	1 ~ 50%~	3 60%~	6 67%~	13 48%~	43 70%	102 60%	141 62%~	6 67%~	106 63%	44 61%
NOT ANSWERED	13	249	2	3	3	5	6					1	4	5	10		11	2	
VALID CASES	240	4804	3	57	62	70	48	169	1	2	5	9	27	61	171	227	9	168	72
NUMBER OF RESPONDENTS	253 100%	5053 100%	3 100%	59 100%	65 100%	73 100%	53 100%	175 100%	1 100%	2 100%	5 100%	9 100%	28 100%	65 100%	176 100%	237 100%	9 100%	179 100%	74 100%
MEAN	8.82	8.87	9.33	8.75	9.11	8.94	8.31	8.75	10.0	8.50	9.20	9.22	8.59	9.10	8.71	8.80	9.11	8.82	8.83
p stat_(*=Sig @ p<=.05)		.553	~.675	.025*	.387		~.165	~	~	~	~	~	~.053	.035*	~	~	~.925	.924	

[ASKED IF Q30 = YES]

Q42 DOES YOUR CHILD HAVE ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS THAT HAVE LASTED FOR MORE THAN 3 MONTHS?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q42 YES	62 26%	1181 24%		8 ~ 14%*	9 15%*	22 31%	23 48%~	49 29%						1 11%~	11 41%~	8 13%*	53 31%*	52 23%~	8 89%~	9 5%*	53 74%*
NO	178 74%	3655 76%	3 100%~	49 86%*	53 85%*	48 69%	25 52%~	121 71%	1 100%~		2 ~100%~	5 ~100%~	8 89%~	16 59%~	53 87%*	118 69%*	175 77%~	1 11%~	159 95%*	19 26%*	
NOT ANSWERED	13	217		2	3	3	5	5						1	4	5	10		11	2	
VALID CASES	240	4836	3	57	62	70	48	170	1		2	5	9	27	61	171	227	9	168	72	
NUMBER OF RESPONDENTS	253 100%	5053 100%	3 100%	59 100%	65 100%	73 100%	53 100%	175 100%	1 100%		2 100%	5 100%	9 100%	28 100%	65 100%	176 100%	237 100%	9 100%	179 100%	74 100%	

[ASKED IF Q30 = YES]

Q43 DOES YOUR CHILD'S PERSONAL DOCTOR UNDERSTAND HOW THESE MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS AFFECT YOUR CHILD'S DAY-TO-DAY LIFE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q43 #YES	56 92%	1018 86%	6 ~ 75%	9 ~ 100%	20 ~ 91%	21 ~ 95%	45 92%					1 ~ 100%	10 91%	7 88%	49 92%	47 90%	8 100%	7 88%	49 92%
NO	5 8%	160 14%	2 ~ 25%		2 ~ 9%	1 5%	4 8%						1 9%	1 13%	4 8%	5 10%		1 13%	4 8%
NOT ANSWERED	1	36				1												1	
VALID CASES	61	1178	8	9	22	22	49					1	11	8	53	52	8	8	53
NUMBER OF RESPONDENTS	62	1214	8	9	22	23	49					1	11	8	53	52	8	9	53
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q30 = YES AND Q42 = YES]

Q44 DOES YOUR CHILD'S PERSONAL DOCTOR UNDERSTAND HOW YOUR CHILD'S MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS AFFECT YOUR FAMILY'S DAY-TO-DAY LIFE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC
Q44 #YES	54 92%	992 85%	6 ~ 86%	9 ~ 100%	19 ~ 90%	20 ~ 91%	43 91%	~	~	~	~	1 ~ 100%	10 91%	6 86%	48 92%	46 92%	7 88%	7 88%	47 92%
NO	5 8%	179 15%	1 ~ 14%	~	2 ~ 10%	2 9%	4 9%	~	~	~	~	~	1 9%	1 14%	4 8%	4 8%	1 13%	1 13%	4 8%
NOT ANSWERED	3	43	1		1	1	2							1	1	2		1	2
VALID CASES	59	1171	7	9	21	22	47					1	11	7	52	50	8	8	51
NUMBER OF RESPONDENTS	62 100%	1214 100%	8 100%	9 100%	22 100%	23 100%	49 100%					1 100%	11 100%	8 100%	53 100%	52 100%	8 100%	9 100%	53 100%

[ASKED IF Q30 = YES AND Q42 = YES]

Q45 SPECIALISTS ARE DOCTORS LIKE SURGEONS, HEART DOCTORS, ALLERGY DOCTORS, SKIN DOCTORS, AND OTHER DOCTORS WHO SPECIALIZE IN ONE AREA OF HEALTH CARE. IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR YOUR CHILD TO SEE A SPECIALIST?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER				
			<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q45 YES	32 10%	817 14%*	1 33%~	4 6%	11 14%	8 9%	8 10%	21 9%	~	~	~	~	2 14%~	5 15%~	10 11%	22 10%	25 8%~	6 46%~	12 5%*	20 24%*	
NO	285 90%	4882 86%*	2 67%~	66 94%	67 86%	81 91%	69 90%	202 91%	1 100%~	~	~	2 ~100%	5 ~100%	12 86%~	29 85%~	80 89%	198 90%	275 92%~	7 54%~	221 95%*	64 76%*
NOT ANSWERED	18	319		4	8	4	2								2		2		17	1	
VALID CASES	317	5699	3	70	78	89	77	223	1			2	5	14	34	90	220	300	13	233	84
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%			2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q46 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR YOUR CHILD TO SEE A SPECIALIST AS SOON AS YOU NEEDED?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC
Q46 NEVER	7 23%	42 5%	~	25%~	18%~	25%~	29%~	20%~	~	~	~	~	~	60%~	10%~	29%~	25%~	17%~	9%~	30%~
SOMETIMES	2 6%	149 19%	~	~	~	~	29%~	5%~	~	~	~	~	50%~	~	10%~	5%~	4%~	17%~	~	10%~
USUALLY	7 23%	195 25%	100%~	25%~	27%~	25%~	~	20%~	~	~	~	~	~	~	50%~	10%~	25%~	~	36%~	15%~
ALWAYS	15 48%	401 51%	~	50%~	55%~	50%~	43%~	55%~	~	~	~	~	50%~	40%~	30%~	57%~	46%~	67%~	55%~	45%~
#ALWAYS + USUALLY (NET)	22 71%	596 76%	100%~	75%~	82%~	75%~	43%~	75%~	~	~	~	~	50%~	40%~	80%~	67%~	71%~	67%~	91%~	60%~
TOP BOX SCORE	15 48%	401 51%	~	50%~	55%~	50%~	43%~	55%~	~	~	~	~	50%~	40%~	30%~	57%~	46%~	67%~	55%~	45%~
NOT ANSWERED	1	26					1	1							1	1			1	
VALID CASES	31	787	1	4	11	8	7	20					2	5	10	21	24	6	11	20
NUMBER OF RESPONDENTS	32	813	1	4	11	8	8	21					2	5	10	22	25	6	12	20
	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

Q47 HOW MANY SPECIALISTS HAS YOUR CHILD SEEN IN THE LAST 6 MONTHS?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q47 NONE	5	60		2	1	2		4						1	1	4	4			5
	17%	8%	~	50%	9%	29%	~	20%	~	~	~	~	~	25%	10%	20%	17%	~	~	25%
1 SPECIALIST	19	510	1	2	5	5	6	12					2	1	8	11	15	4	10	9
	63%	64%	~100%	~50%	~45%	~71%	~86%	~60%	~	~	~	~	~100%	~25%	~80%	~55%	~65%	~67%	~100%	~45%
2	3	153			3			2						1	1	2	3			3
	10%	19%	~	~	27%	~	~	10%	~	~	~	~	~	25%	10%	10%	13%	~	~	15%
3	3	36			2		1	2						1		3	1	2		3
	10%	5%	~	~	18%	~	~	10%	~	~	~	~	~	25%	~	15%	4%	33%	~	15%
4		16																		
		2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
5 OR MORE SPECIALISTS		17																		
		2%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED	2	21				1	1	1						1		2	2			2
VALID CASES	30	792	1	4	11	7	7	20					2	4	10	20	23	6	10	20
NUMBER OF RESPONDENTS	32	813	1	4	11	8	8	21					2	5	10	22	25	6	12	20
	100%	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q45 = YES]

Q48 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOUR CHILD SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q48 WORST SPECIALIST POSSIBLE		3 0.4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
01		2 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
02		1 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
03		2 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
04	1 4%	5 0.6%	~	~	~	17%	~	~	~	~	50%	~	11%	~	6%	~	~	1 7%		
05	3 13%	22 3%	1 100%	~	~	33%	3 21%	~	~	~	~	~	11%	2 14%	2 11%	1 20%	1 11%	2 14%		
06		34 5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
07	1 4%	53 8%	~	~	10%	~	~	~	~	~	33%	~	1 7%	1 6%	~	~	~	1 7%		
08	1 4%	121 17%	~	~	10%	~	~	~	~	~	~	~	1 11%	~	1 6%	~	~	1 11%		
09	6 26%	144 20%	~	1 100%	4 40%	1 20%	~	2 14%	~	~	~	~	1 50%	1 33%	4 44%	2 14%	6 33%	~	3 33%	3 21%
BEST SPECIALIST POSSIBLE	11 48%	324 45%	~	~	40%	4 80%	3 50%	9 64%	~	~	~	~	33%	1 22%	2 64%	9 39%	7 80%	4 44%	4 50%	7 50%

Continued



Q48 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOUR CHILD SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLK OR AFR-	AMER IAN	NATV HAW/ ILND	AMER IND/ NATV	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
#8-10 (NET)	18 78%	589 83%	1	9	5	3	11					1	2	7	11	14	4	8	10
			~100%	90%	~100%	50%	79%	~	~	~	~	50%	67%	78%	79%	78%	80%	89%	71%
9-10 (NET)	17 74%	468 66%	1	8	5	3	11					1	2	6	11	13	4	7	10
			~100%	80%	~100%	50%	79%	~	~	~	~	50%	67%	67%	79%	72%	80%	78%	71%
NOT ANSWERED	2	9	1			1	2							2	1	1	1	1	
VALID CASES	23	712	1	1	10	5	6	14				2	3	9	14	18	5	9	14
NUMBER OF RESPONDENTS	25	721	1	2	10	5	7	16				2	3	9	16	19	6	10	15
	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%
MEAN	8.61	8.75	5.00	9.00	9.10	9.80	7.33	8.79				6.50	8.67	8.11	8.93	8.50	9.00	8.89	8.43
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]

Q49 IN THE LAST 6 MONTHS, DID YOU GET INFORMATION OR HELP FROM CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC			
Q49 YES	73 23%	1474 26%	1 33%	20 29%	13 16%	22 25%	17 22%	48 22%	1 100%	~	~	~	7 50%	4 12%	27 30%	45 20%	71 24%	2 15%	56 24%	17 20%	
NO	245 77%	4149 74%	2 67%	50 71%	66 84%	67 75%	60 78%	175 78%	~	~	100%	2 100%	5 100%	7 50%	30 88%	64 70%	175 80%	230 76%	11 85%	177 76%	68 80%
NOT ANSWERED	17	395		4	7	4	2								1		1		17		
VALID CASES	318	5623	3	70	79	89	77	223	1			2	5	14	34	91	220	301	13	233	85
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%			2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q50 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN GIVE YOU THE INFORMATION OR HELP YOU NEEDED?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC
Q50 NEVER	2 3%	37 3%	~	~	1 9%	1 5%	1 2%	~	~	~	~	~	~	1 4%	1 2%	2 3%	~	2 4%	~
SOMETIMES	8 12%	224 17%	~	1 5%	4 18%	3 19%	5 11%	~	~	~	~	1 14%	~	3 12%	5 12%	8 12%	~	5 9%	3 19%
USUALLY	17 25%	391 30%	~	4 21%	2 18%	7 32%	4 25%	10 22%	~	~	~	3 43%	1 25%	8 31%	9 21%	15 22%	2 100%	12 23%	5 31%
ALWAYS	42 61%	645 50%	100%	1 74%	14 73%	8 45%	10 56%	9 64%	1 100%	~	~	3 43%	3 75%	14 54%	27 64%	42 63%	~	34 64%	8 50%
#ALWAYS + USUALLY (NET)	59 86%	1037 80%	100%	1 95%	18 91%	10 77%	17 81%	13 87%	1 100%	~	~	6 86%	4 100%	22 85%	36 86%	57 85%	2 100%	46 87%	13 81%
TOP BOX SCORE	42 61%	645 50%	100%	1 74%	14 73%	8 45%	10 56%	9 64%	1 100%	~	~	3 43%	3 75%	14 54%	27 64%	42 63%	~	34 64%	8 50%
NOT ANSWERED	4	44		1	2		1	3						1	3	4		3	1
VALID CASES	69	1297	1	19	11	22	16	45	1			7	4	26	42	67	2	53	16
NUMBER OF RESPONDENTS	73	1341	1	20	13	22	17	48	1			7	4	27	45	71	2	56	17
	100%	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

Q51 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE STAFF AT YOUR CHILD'S HEALTH PLAN TREAT YOU WITH COURTESY AND RESPECT?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	WHTE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER HAW/ IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q51 NEVER	1 1%	31 2%	~	~	8%~	~	~	2%~	~	~	~	~	~	~	1 2%~	1 2%~	~	1 2%~	~	
SOMETIMES	2 3%	120 9%*	~	~	8%~	~	~	~	~	~	~	~	1 14%~	2 8%~	2 3%~	~	1 2%~	1 6%~	~	
USUALLY	14 21%	278 21%	~	11%~	17%~	30%~	27%~	19%~	~	~	~	~	2 29%~	1 25%~	6 23%~	8 20%~	13 20%~	1 50%~	9 18%~	5 31%~
ALWAYS	50 75%	871 67%	100%~	89%~	67%~	70%~	67%~	79%~	100%~	~	~	~	4 57%~	3 75%~	18 69%~	31 78%~	49 75%~	1 50%~	40 78%~	10 63%~
#ALWAYS + USUALLY (NET)	64 96%	1149 88%*	100%~	100%~	83%~	100%~	93%~	98%~	100%~	~	~	~	6 86%~	4 100%~	24 92%~	39 98%~	62 95%~	2 100%~	49 96%~	15 94%~
TOP BOX SCORE	50 75%	871 67%	100%~	89%~	67%~	70%~	67%~	79%~	100%~	~	~	~	4 57%~	3 75%~	18 69%~	31 78%~	49 75%~	1 50%~	40 78%~	10 63%~
NOT ANSWERED	6	41		1	1	2	2	5							1	5	6		5	1
VALID CASES	67	1300	1	19	12	20	15	43	1				7	4	26	40	65	2	51	16
NUMBER OF RESPONDENTS	73	1341	1	20	13	22	17	48	1				7	4	27	45	71	2	56	17
	100%	100%	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q49 = YES]

Q52 IN THE LAST 6 MONTHS, DID YOUR CHILD'S HEALTH PLAN GIVE YOU ANY FORMS TO FILL OUT?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC	
Q52 YES	76 25%	1596 29%	1 33%~	21 32%	22 29%	21 24%	11 14%*	48 22%	1 100%~		1 ~ 50%~	1 20%~	9 69%~	8 24%~	31 36%*	43 20%*	73 25%~	3 23%~	57 25%	19 23%
NO	234 75%	3983 71%	2 67%~	45 68%	54 71%	67 76%	66 86%*	169 78%		~	~ 50%~	4 80%~	4 31%~	26 76%~	56 64%*	173 80%*	220 75%~	10 77%~	170 75%	64 77%
NOT ANSWERED	25	439		8	10	5	2	6				1		5	4	9		23	2	
VALID CASES	310	5579	3	66	76	88	77	217	1		2	5	13	34	87	216	293	13	227	83
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%		2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

PQ53 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR CHILD'S HEALTH PLAN EASY TO FILL OUT?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR- AMER	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
PQ53 NEVER		65 1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
SOMETIMES	12 4%	282 5%	~	3 5%	5 7%	3 3%	1 1%	8 4%	~	~	~	~	2 15%	~	8 9%*	4 2%*	12 4%~	~	9 4%	3 4%
USUALLY	26 8%	520 9%	~	7 11%	4 5%	9 10%	6 8%	14 6%	~	~	1 50%~	1 20%~	2 15%~	5 15%~	10 12%	15 7%	24 8%~	2 15%~	16 7%	10 12%
ALWAYS	271 88%	4656 84%	3 100%~	56 85%	67 88%	75 86%	70 91%	194 90%	1 100%~	~	1 50%~	4 80%~	9 69%~	29 85%~	68 79%*	197 91%*	256 88%~	11 85%~	201 89%	70 84%
#ALWAYS + USUALLY (NET)	297 96%	5175 94%*	3 100%~	63 95%	71 93%	84 97%	76 99%	208 96%	1 100%~	~	2 100%~	5 100%~	11 85%~	34 100%~	78 91%*	212 98%*	280 96%~	13 100%~	217 96%	80 96%
TOP BOX SCORE	271 88%	4656 84%	3 100%~	56 85%	67 88%	75 86%	70 91%	194 90%	1 100%~	~	1 50%~	4 80%~	9 69%~	29 85%~	68 79%*	197 91%*	256 88%~	11 85%~	201 89%	70 84%
NOT ANSWERED	1	67				1	1	1						1		1		1		
VALID CASES	309	5523	3	66	76	87	77	216	1		2	5	13	34	86	216	292	13	226	83
NUMBER OF RESPONDENTS	310 100%	5590 100%	3 100%	66 100%	76 100%	88 100%	77 100%	217 100%	1 100%		2 100%	5 100%	13 100%	34 100%	87 100%	216 100%	293 100%	13 100%	227 100%	83 100%

[ASKED IF Q52 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q52 = NO]

Q54 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S HEALTH PLAN?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER					
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC				
Q54 WORST HEALTH PLAN POSSIBLE		18 0.3%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~				
01	1 0.3%	11 0.2%	~	1%	~	~	1 0.5%	~	~	~	~	~	1 ~0.5%	1 ~0.3%	~	1 ~0.4%	~					
02		27 0.5%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~					
03	3 1%	40 0.7%	~	1%	~	1%	1 1%	~	~	~	~	~	3 1%	3 1%	~	3 1%	~					
04	8 3%	53 0.9%	~	1%	3%	1%	3 4%	4 2%	~	~	~	1 7%	2 6%	3 3%	5 2%	8 3%	4 2%	4 5%				
05	15 5%	288 5%	~	3%	4%	2%	8 11%*	12 5%	~	~	1 20%	1 3%	1 1%*	12 6%	14 5%	1 8%	11 5%	4 5%				
06	13 4%	265 5%	~	1%	3%	2%	7 9%	8 4%	~	~	~	~	4 12%	1 1%*	11 5%	13 4%	~	6 3%	7 8%			
07	26 8%	565 10%	~	9%	9%	8%	6 8%	21 10%	~	~	~	~	5 15%	4 4%	21 10%	23 8%	3 23%	16 7%	10 12%			
08	61 19%	980 18%	~	16%	19%	22%	16 21%	47 21%	~	~	1 50%	4 29%	5 15%	13 14%	48 22%*	59 20%	2 15%	40 18%	21 25%			
09	71 23%	1008 18%*	67%	23%	21%	24%	16 21%	46 21%	~	~	1 50%	2 40%	3 21%	7 21%	26 29%	43 20%	67 23%	2 15%	56 25%	15 18%		
BEST HEALTH PLAN POSSIBLE	115 37%	2334 42%	33%	30%	43%	40%	34 39%	19 25%*	77 35%	1 100%	~	~	2 40%	6 43%	9 27%	42 47%*	72 33%	109 37%	5 38%	91 40%*	24 28%*	
#8-10 (NET)	247 79%	4322 77%	100%	83%	79%	85%	74 67%*	51 78%	170 78%	1 100%	~	~	2 100%	4 80%	13 93%	21 64%	81 90%*	163 75%*	235 79%	9 69%	187 82%*	60 71%*

Continued

Q54 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S HEALTH PLAN?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
9-10 (NET)	186 59%	3342 60%	3 100%	46 67%	47 60%	55 63%	35 46%*	123 56%	1 100%	~	1 50%	4 80%	9 64%	16 48%	68 76%*	115 53%*	176 59%	7 54%	147 64%*	39 46%*
NOT ANSWERED	22	430		5	8	6	3	4					1	2	4	5		22		
VALID CASES	313	5588	3	69	78	87	76	219	1		2	5	14	33	90	216	297	13	228	85
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%		2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%
MEAN	8.48	8.52	9.33	8.67	8.56	8.72	7.91	8.41	10.0		8.50	8.60	8.79	8.03	8.99	8.31	8.47	8.46	8.61	8.13
p stat_(*=Sig @ p<=.05)		.657	~	.326	.606	.119	.001*	.245	~	~	~	~	~	~	.000*	.008*	~	~	.030*	.029*



Q55 IN THE LAST 6 MONTHS, DID YOU GET OR REFILL ANY PRESCRIPTION MEDICINES FOR YOUR CHILD?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER		
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q55 YES	129 41%	2224 39%	1 33%~	28 41%	35 44%	29 33%	36 47%	97 44%	~	~100%~	2 20%~	1 21%~	3 53%~	18 32%*	29 45%*	99 39%~	118 77%~	10 28%*	64 75%*	
NO	188 59%	3434 61%	2 67%~	41 59%	44 56%	60 67%	41 53%	125 56%	1 100%~	~	~	4 80%~	11 79%~	16 47%~	62 68%*	120 55%*	182 61%~	3 23%~	21 72%*	25%*
NOT ANSWERED	18	359		5	7	4	2	1							1	1	2		18	
VALID CASES	317	5659	3	69	79	89	77	222	1		2	5	14	34	91	219	300	13	232	85
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%		2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q56 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET PRESCRIPTION MEDICINES FOR YOUR CHILD THROUGH HIS OR HER HEALTH PLAN?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q56 NEVER	1 0.8%	36 2%	~	~	~	3%	1	1%	~	~	~	~	~	1	1	1	2%	~		
SOMETIMES	11 9%	208 9%	~	3 11%	3 9%	2 7%	3 9%	7 7%	~	~	~	1 33%	2 12%	3 11%	8 8%	10 9%	1 10%	6 10%	5 8%	
USUALLY	41 33%	522 24%*	~	10 36%	9 27%	8 28%	14 41%	31 33%	~	~	1 50%	~	6 35%	8 30%	33 34%	37 32%	4 40%	19 30%	22 35%	
ALWAYS	72 58%	1443 65%	1 100%	15 54%	21 64%	18 62%	17 50%	55 59%	~	~	1 50%	1 100%	2 67%	9 53%	16 59%	55 57%	66 58%	5 50%	37 59%	35 56%
#ALWAYS + USUALLY (NET)	113 90%	1964 89%	1 100%	25 89%	30 91%	26 90%	31 91%	86 91%	~	~	2 100%	1 100%	2 67%	15 88%	24 89%	88 91%	103 90%	9 90%	56 89%	57 92%
TOP BOX SCORE	72 58%	1443 65%	1 100%	15 54%	21 64%	18 62%	17 50%	55 59%	~	~	1 50%	1 100%	2 67%	9 53%	16 59%	55 57%	66 58%	5 50%	37 59%	35 56%
NOT ANSWERED	4	47			2		2	3					1	2	2	4		2	2	
VALID CASES	125	2208	1	28	33	29	34	94			2	1	3	17	27	97	114	10	63	62
NUMBER OF RESPONDENTS	129	2255	1	28	35	29	36	97			2	1	3	18	29	99	118	10	65	64
	100%	100%	100%	100%	100%	100%	100%	100%			100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

Q57 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET YOUR CHILD'S PRESCRIPTION MEDICINES?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q57 #YES	64	1308	1	13	18	17	15	47				1	8	15	49	59	4	36	28
	52%	61%	100%~	48%~	56%~	59%~	44%~	51%~	~	~	~	33%~	47%~	54%~	52%~	53%~	40%~	57%	47%
NO	59	853		14	14	12	19	45		2	1	2	9	13	45	53	6	27	32
	48%	39%	~	52%~	44%~	41%~	56%~	49%~	~	~100%~	~100%~	67%~	53%~	46%~	48%~	47%~	60%~	43%	53%
NOT ANSWERED	6	94		1	3		2	5					1	1	5	6		2	4
VALID CASES	123	2161	1	27	32	29	34	92		2	1	3	17	28	94	112	10	63	60
NUMBER OF RESPONDENTS	129	2255	1	28	35	29	36	97		2	1	3	18	29	99	118	10	65	64
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q55 = YES]

Q58 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL HEALTH?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/PAC	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q58 EXCELLENT	125 40%	2291 40%	1 33%	29 43%	39 49%*	31 35%	25 32%	92 42%	~	~	~	60% 43%	6 38%	13 38%	32 36%	91 42%	125 41%	~	107 46%*	18 21%*
VERY GOOD	118 37%	2006 35%	2 67%	27 40%	21 27%*	38 43%	30 39%	83 38%	1 100%	~	2 100%	1 20%	4 29%	12 35%	28 31%	86 39%	118 39%	~	83 36%	35 42%
GOOD	59 19%	1106 20%	~	10 15%	16 20%	17 19%	16 21%	37 17%	~	~	~	~	4 29%	5 15%	27 30%*	31 14%*	59 20%	~	37 16%	22 26%
FAIR	11 3%	239 4%	~	2 3%	3 4%	2 2%	4 5%	7 3%	~	~	~	1 20%	~	3 9%	2 2%	9 4%	~	11 85%	4 2%*	7 8%*
POOR	2 0.6%	17 0.3%	~	~	~	~	2 3%	1 0.5%	~	~	~	~	~	1 3%	1 1%	1 0.5%	~	2 15%	~	2 2%
#EXCELLENT + VERY GOOD + GOOD (NET)	302 96%	5403 95%	3 100%	66 97%	76 96%	86 98%	71 92%	212 96%	1 100%	~	2 100%	4 80%	14 100%	30 88%	87 97%	208 95%	302 100%	~	227 98%*	75 89%*
NOT ANSWERED	20	359		6	7	5	2	3							2	2			19	1
VALID CASES	315	5659	3	68	79	88	77	220	1		2	5	14	34	90	218	302	13	231	84
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%		2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q59 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL MENTAL OR EMOTIONAL HEALTH?

	AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHT	AFR-AMER	AS-IAN	NATV HAW/PAC	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q59 EXCELLENT	142 45%	2506 44%	1 33%~	44 64%*	43 54%	39 44%	15 20%*	98 44%	1 100%~	~	~	4 80%~	6 46%~	12 36%~	44 49%	94 43%	137 46%~	3 23%~	126 54%*	16 20%*
VERY GOOD	88 28%	1630 29%	2 67%~	18 26%	19 24%	23 26%	26 35%	61 27%	~	~	2 100%~	1 20%~	4 31%~	10 30%~	28 31%	59 27%	86 29%~	2 15%~	66 28%	22 27%
GOOD	62 20%	1044 18%	~	5 7%*	13 16%	21 24%	23 31%*	47 21%	~	~	~	~	3 23%~	4 12%~	15 17%	46 21%	59 20%~	2 15%~	38 16%*	24 29%*
FAIR	18 6%	420 7%	~	2 3%	3 4%	6 7%	7 9%	14 6%	~	~	~	~	~	4 12%~	1 1%*	16 7%*	14 5%~	4 31%~	3 1%*	15 18%*
POOR	5 2%	74 1%	~	~	2 2%	~	3 4%	2 0.9%	~	~	~	~	~	3 9%~	2 2%	3 1%	3 1%~	2 15%~	~	5 6%~
#EXCELLENT + VERY GOOD + GOOD (NET)	292 93%	5181 91%	3 100%~	67 97%*	75 94%	83 93%	64 86%	206 93%	1 100%~	~	2 100%~	5 100%~	13 100%~	26 79%~	87 97%*	199 91%	282 94%~	7 54%~	230 99%*	62 76%*
NOT ANSWERED	20	344		5	6	4	5	1						1	1	2	2	3	17	3
VALID CASES	315	5674	3	69	80	89	74	222	1		2	5	13	33	90	218	299	13	233	82
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%		2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q60 DOES YOUR CHILD CURRENTLY NEED OR USE MEDICINE PRESCRIBED BY A DOCTOR (OTHER THAN VITAMINS)?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q60 YES	71 22%	1197 21%		11 ~ 16%	10 12%*	20 22%	30 39%*	59 26%*	~	~	~	2 ~ 14%*	10 29%*	9 10%*	62 28%*	61 20%*	9 69%*	15 6%*	56 66%*
NO	248 78%	4478 79%	3 100%*	59 84%	70 88%*	69 78%	47 61%*	164 74%*	1 100%*	2 ~ 100%*	5 ~ 100%*	12 86%*	24 71%*	83 90%*	158 72%*	241 80%*	4 31%*	219 94%*	29 34%*
NOT ANSWERED	16	343		4	6	4	2											16	
VALID CASES	319	5675	3	70	80	89	77	223	1	2	5	14	34	92	220	302	13	234	85
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%	2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q61 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
Q61 YES	60	945		8	7	15	30	49				2	9	8	52	50	9	5	55
	88%	79%*	~	89%~	78%~	75%~	100%~	88%~	~	~	~	100%~	90%~	89%~	88%~	86%~	100%~	42%~	98%~
NO	8	248		1	2	5		7					1	1	7	8		7	1
	12%	21%*	~	11%~	22%~	25%~	~	12%~	~	~	~	~	10%~	11%~	12%~	14%~	~	58%~	2%~
NOT ANSWERED	3	41		2	1			3							3	3		3	
VALID CASES	68	1192		9	9	20	30	56				2	10	9	59	58	9	12	56
NUMBER OF RESPONDENTS	71	1233		11	10	20	30	59				2	10	9	62	61	9	15	56
	100%	100%		100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q60 = YES]

Q62 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q62 YES	55 95%	867 92%	7 ~ 88%	7 ~100%	14 ~100%	27 93%	44 94%	~	~	~	~	2 ~100%	9 ~100%	7 100%	48 94%	45 94%	9 ~100%	55 ~100%	
NO	3 5%	75 8%	1 ~ 13%	~	~	2 7%	3 6%	~	~	~	~	~	~	3 6%	3 6%	~	3 ~100%	~	
NOT ANSWERED	2	13			1	1	2							1	1	2		2	
VALID CASES	58	942	8	7	14	29	47				2	9	7	51	48	9	3	55	
NUMBER OF RESPONDENTS	60	955	8	7	15	30	49				2	9	8	52	50	9	5	55	
	100%	100%	100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q60 = YES AND Q61 = YES]



Q63 DOES YOUR CHILD NEED OR USE MORE MEDICAL CARE, MORE MENTAL HEALTH SERVICES, OR MORE EDUCATIONAL SERVICES THAN IS USUAL FOR MOST CHILDREN OF THE SAME AGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD	FAIR & POOR	NO CCC	CCC	
Q63 YES	54 17%	872 15%	~	5 7%*	13 16%	18 20%	18 23%	43 19%	~	~	~	~	1 7%~	10 29%~	8 9%*	46 21%*	45 15%~	9 69%~	3 1%*	51 60%*
NO	263 83%	4772 85%	100%~	3 93%*	64 84%	67 80%	70 77%	59 81%	1 100%~	~	2 ~100%	5 ~100%	13 93%~	24 71%~	83 91%*	173 79%*	256 85%~	4 31%~	229 99%*	34 40%*
NOT ANSWERED	18	374		5	6	5	2	2						1	1	1		18		
VALID CASES	317	5644	3	69	80	88	77	221	1		2	5	14	34	91	219	301	13	232	85
NUMBER OF RESPONDENTS	335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q64 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
Q64 YES	50 94%	716 83%*	~100%	5 83%	10 83%	17 94%	18 100%	39 93%	~	~	~	~100%	1 100%	10 100%	7 88%	43 96%	41 93%	9 100%	1 50%	49 96%
NO	3 6%	150 17%*	~	~	2 17%	1 6%	~	3 7%	~	~	~	~	~	~	1 13%	2 4%	3 7%	~	1 50%	2 4%
NOT ANSWERED	1	15			1		1								1		1		1	
VALID CASES	53	866		5	12	18	18	42				1	10	8	45	44	9	2	51	
NUMBER OF RESPONDENTS	54	881		5	13	18	18	43				1	10	8	46	45	9	3	51	
	100%	100%		100%	100%	100%	100%	100%				100%	100%	100%	100%	100%	100%	100%	100%	

[ASKED IF Q63 = YES]

Q65 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q65 YES	49	679	5	10	17	17	38					1	10	7	42	40	9		49
	98%	96%	~100%	~100%	~100%	~94%	~97%	~	~	~	~	~100%	~100%	~100%	~98%	~98%	~100%	~	~100%
NO	1	29				1	1							1	1			1	
	2%	4%	~	~	~	~6%	~3%	~	~	~	~	~	~	~2%	~2%	~	~	~100%	~
NOT ANSWERED		17																	
VALID CASES	50	708	5	10	17	18	39					1	10	7	43	41	9	1	49
NUMBER OF RESPONDENTS	50	725	5	10	17	18	39					1	10	7	43	41	9	1	49
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q63 = YES AND Q64 = YES]

Q66 IS YOUR CHILD LIMITED OR PREVENTED IN ANY WAY IN HIS OR HER ABILITY TO DO THE THINGS MOST CHILDREN OF THE SAME AGE CAN DO?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q66 YES	45 14%	674 12%	~	3 4%*	12 15%	15 17%	15 20%	34 15%	~	1 50%~	1 ~	8 24%~	8 9%	37 17%*	38 13%~	7 54%~	12 5%*	33 39%*	
NO	272 86%	4980 88%	100%~	3 96%*	67 85%	67 83%	74 80%	189 85%	1 100%~	1 ~	5 100%~	12 92%~	26 76%~	82 91%	183 83%*	262 87%~	6 46%~	221 95%*	51 61%*
NOT ANSWERED	18	364		4	7	4	3				1		2		2		17	1	
VALID CASES	317	5654	3	70	79	89	76	223	1	2	5	13	34	90	220	300	13	233	84
NUMBER OF RESPONDENTS	335	6018	3	74	86	93	79	223	1	2	5	14	34	92	220	302	13	250	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q67 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION?

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q67 YES	32	505		2	7	11	12	25					7	5	27	26	6		32
	73%	79%	~	67%	64%	73%	80%	76%	~	~	~	~	88%	63%	75%	70%	86%	~	97%
NO	12	133		1	4	4	3	8		1		1	1	3	9	11	1	11	1
	27%	21%	~	33%	36%	27%	20%	24%	~	100%	~	100%	13%	38%	25%	30%	14%	100%	3%
NOT ANSWERED	1	30			1			1							1	1		1	
VALID CASES	44	638		3	11	15	15	33		1		1	8	8	36	37	7	11	33
NUMBER OF RESPONDENTS	45	668		3	12	15	15	34		1		1	8	8	37	38	7	12	33
	100%	100%		100%	100%	100%	100%	100%		100%		100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q66 = YES]

Q68 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS?

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q68 YES	32	510	2	7	11	12	25					7	5	27	26	6		32	
	100%	96%	~100%	~100%	~100%	~100%	~100%	~	~	~	~	~100%	~100%	~100%	~100%	~100%	~	~100%	~
NO		19																	
		4%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NOT ANSWERED		5																	
VALID CASES	32	529	2	7	11	12	25					7	5	27	26	6		32	
NUMBER OF RESPONDENTS	32	534	2	7	11	12	25					7	5	27	26	6		32	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%		100%	

[ASKED IF Q66 = YES AND Q67 = YES]

Q69 DOES YOUR CHILD NEED OR GET SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC		
Q69 YES	34 11%	583 10%	~	6 9%	14 18%*	8 9%	6 8%	28 13%	~	~	~	~	1 7%	3 9%	7 8%	26 12%	29 10%	5 38%	13 6%*	21 25%*	
NO	279 89%	5081 90%	100%~	3 91%	64 82%*	63 91%	80 92%	69 87%	1 100%~	~	2 ~100%	5 ~100%	13 93%~	31 91%~	83 92%	190 88%	268 90%~	8 62%~	216 94%*	63 75%*	
NOT ANSWERED	22	354		4	9	5	4	4							2	4	5		21	1	
VALID CASES	313	5664		3	70	77	88	75	219	1		2	5	14	34	90	216	297	13	229	84
NUMBER OF RESPONDENTS	335 100%	6018 100%	100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%		2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q70 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION?

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q70 YES	17	317		2	9	3	3	15					1	4	13	14	3	17	
	55%	61%	~	33%	75%	43%	50%	56%	~	~	~	~	33%	80%	52%	54%	60%	81%	
NO	14	205		4	3	4	3	12					2	1	12	12	2	10	4
	45%	39%	~	67%	25%	57%	50%	44%	~	~	~	~	67%	20%	48%	46%	40%	100%	19%
NOT ANSWERED	3	42			2	1		1						2	1	3		3	
VALID CASES	31	522		6	12	7	6	27					3	5	25	26	5	10	21
NUMBER OF RESPONDENTS	34	564		6	14	8	6	28					1	7	26	29	5	13	21
	100%	100%		100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q69 = YES]



Q71 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS?

	AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q71 YES	16	315	2	9	2	3	14					1	4	12	13	3	16	
	94%	96%	~100%	~100%	67%	~100%	93%	~	~	~	~	~100%	~100%	92%	93%	~100%	~94%	
NO	1	14				1	1							1	1		1	
	6%	4%	~	~	~	33%	7%	~	~	~	~	~	~	8%	7%	~	6%	
NOT ANSWERED		6																
VALID CASES	17	330	2	9	3	3	15					1	4	13	14	3	17	
NUMBER OF RESPONDENTS	17	336	2	9	3	3	15					1	4	13	14	3	17	
	100%	100%	100%	100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	

[ASKED IF Q69 = YES AND Q70 = YES]

Q72 DOES YOUR CHILD HAVE ANY KIND OF EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEMS FOR WHICH HE OR SHE NEEDS OR GETS TREATMENT OR COUNSELING?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV ILND	AMER IND/ ALSK	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q72 YES	49 16%	799 14%	~	4 6%*	13 17%	12 14%	20 26%*	40 18%*	~	~	1 50%~	2 15%~	6 18%~	9 10%*	40 18%*	43 14%~	6 46%~	5 2%*	44 52%*	
NO	266 84%	4843 86%	100%~	3 94%*	66 83%	65 86%	76 74%*	181 82%*	1 100%~	~	1 50%~	5 100%~	11 85%~	28 82%~	82 90%*	178 82%*	256 86%~	7 54%~	226 98%*	40 48%*
NOT ANSWERED	20	376		4	8	5	3	2				1		1	2	3		19	1	
VALID CASES	315	5642	3	70	78	88	76	221	1		2	5	13	34	91	218	299	13	231	84
NUMBER OF RESPONDENTS	335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q73 HAS THIS PROBLEM LASTED OR IS IT EXPECTED TO LAST FOR AT LEAST 12 MONTHS?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC
Q73 YES	42 91%	744 94%	~100%	77%	92%	100%	34 89%	~	1 100%	2 ~100%	5 100%	5 71%	37 95%	38 93%	4 80%	42 98%		
NO	4 9%	48 6%	~	23%	8%	~	4 11%	~	~	~	~	~	2 29%	2 5%	3 7%	1 20%	3 100%	1 2%
NOT ANSWERED	3	31		1		2	2					1	2	1	2	1	2	1
VALID CASES	46	793		3	13	12	18	38		1	2	5	7	39	41	5	3	43
NUMBER OF RESPONDENTS	49	824		4	13	12	20	40		1	2	6	9	40	43	6	5	44
	100%	100%		100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF Q72 = YES]

NQ74 WHAT IS YOUR CHILD'S AGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ74																					
LESS THAN 1 YEAR OLD	3 0.9%	27 0.4%	3 100%	~	~	~	~	2 0.9%	~	~	~	~	~	1 3%	2 2%	1 0.5%	3 1%	~	3 1%	~	
1 TO 3 YEARS OLD	74 22%	1125 19%	~	74 ~100%	~	~	~	47 21%	~	~	~	3 60%	3 21%	7 21%	24 26%	42 19%	66 22%	2 15%	64 26%*	10 12%*	
4 TO 7 YEARS OLD	86 26%	1651 27%	~	~	86 ~100%	~	~	53 24%	~	~	~	~	5 36%	10 29%	27 29%	52 24%	76 25%	3 23%	72 29%*	14 16%*	
8 TO 12 YEARS OLD	93 28%	1813 30%	~	~	~	93 ~100%	~	67 30%	1 100%	~	~	1 50%	1 20%	4 29%	4 12%	23 25%	64 29%	86 28%	2 15%	68 27%	25 29%
13 OR OLDER	79 24%	1402 23%	~	~	~	79 ~100%	~	54 24%	~	~	~	1 50%	1 20%	2 14%	12 35%	16 17%	61 28%*	71 24%	6 46%	43 17%*	36 42%*
VALID CASES	335	6018	3	74	86	93	79	223	1			2	5	14	34	92	220	302	13	250	85
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%			2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

[BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]

NQ75 IS YOUR CHILD MALE OR FEMALE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
NQ75																				
MALE	169 50%	3120 52%	2 67%	34 46%	42 49%	46 49%	45 57%	105 47%	~	~	~	20%	10 71%	22 65%	40 43%	116 53%	151 50%	7 54%	124 50%	45 53%
FEMALE	166 50%	2898 48%	1 33%	40 54%	44 51%	47 51%	34 43%	118 53%	1 100%	~	2 100%	4 80%	4 29%	12 35%	52 57%	104 47%	151 50%	6 46%	126 50%	40 47%
VALID CASES	335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%		2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

[BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]

Q76 IS YOUR CHILD OF HISPANIC OR LATINO ORIGIN OR DESCENT?

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE						ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	OTHR	MUL- TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
Q76 HISPANIC OR LATINO	92 29%	2443 43%*	2 67%~	24 36%	27 34%	23 26%	16 21%*	31 14%*	~	~	~	33%~	1 93%~	13 93%~	11 33%~	92 100%~	~	87 29%~	3 23%~	80 35%*	12 14%*
NOT HISPANIC OR LATINO	220 71%	3183 57%*	1 33%~	42 64%	52 66%	64 74%	61 79%*	192 86%*	1 100%~	~	~	100%~	2 67%~	2 7%~	1 67%~	22 67%~	220 100%~	208 71%~	10 77%~	147 65%*	73 86%*
NOT ANSWERED	23	391		8	7	6	2						2		1			7		23	
VALID CASES	312	5627	3	66	79	87	77	223	1			2	3	14	33	92	220	295	13	227	85
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%			2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q77.1 WHAT IS YOUR CHILD'S RACE? RESPONSE: WHITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q77.1 YES	257	3921	3	54	63	71	66	223					34	42	214	242	12	176	81	
	77%	65%*	100%~	73%	73%	76%	84%	100%~	~	~	~	~	~100%~	46%*	97%*	80%~	92%~	70%*	95%*	
NO	78	2097		20	23	22	13		1		2	5	14		6	60	1	74	4	
	23%	35%*	~	27%	27%	24%	16%	~100%~	~	~100%~	~100%~	~100%~	~	~	54%*	3%*	20%~	8%~	30%*	5%*
VALID CASES	335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85
NUMBER OF RESPONDENTS	335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q77.2 WHAT IS YOUR CHILD'S RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q77.2	COPA TOT CHLD																		
YES	8 2%	320 5%*	1 ~	2 1%	2 2%	3 4%	1 ~100%	~	~	~	~	7 21%	2 2%	6 3%	7 2%	1 8%	5 2%	3 4%	
NO	327 98%	5698 95%*	3 100%	73 99%	84 98%	91 98%	76 96%	223 100%	~	2 ~100%	5 100%	14 100%	27 79%	90 98%	214 97%	295 98%	12 92%	245 98%	82 96%
VALID CASES	335	6018	3	74	86	93	79	223	1	2	5	14	34	92	220	302	13	250	85
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%	2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%



Q77.3 WHAT IS YOUR CHILD'S RACE? RESPONSE: ASIAN

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	HIS- IC	NOT GOOD & POOR	VERY FAIR & POOR	NO CCC	CCC			
Q77.3	COPA TOT CHLD	2																			
YES	OHP TOT CHLD	238																			
		0.6%	~	~	2%	~	~	~	~	~	~	6%	~	~0.9%	0.7%	~	~0.4%	1%			
NO	COPA TOT CHLD	333	3	74	84	93	79	223	1			2	5	14	32	92	218	300	13	249	84
	OHP TOT CHLD	5780																			
		99%	100%	100%	98%	100%	100%	100%	100%	~	~	100%	100%	100%	94%	100%	99%	99%	100%	100%	99%
VALID CASES	COPA TOT CHLD	335	3	74	86	93	79	223	1			2	5	14	34	92	220	302	13	250	85
NUMBER OF RESPONDENTS	OHP TOT CHLD	6018																			
		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q77.4 WHAT IS YOUR CHILD'S RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER							
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC							
Q77.4	COPA TOT CHLD																								
YES	OHP TOT CHLD	7	104		3	2			2		5	1	6	7			5	2							
		2%	2%	~	~	3%	2%	3%	~	~	~100%	~	~	15%	~	1%	3%	2%	~	~	2%	2%			
NO		328	5914	3	74	83	91	77	223	1		5	14	29	91	214	295	13	245	83					
		98%	98%	100%	~100%	~	97%	98%	97%	100%	~100%	~	~	100%	~100%	~	85%	~	99%	97%	98%	~100%	~	98%	98%
VALID CASES		335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85				
NUMBER OF RESPONDENTS		335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85				
		100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

Q77.5 WHAT IS YOUR CHILD'S RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
Q77.5	COPA TOT CHLD																		
YES	20 6%	339 6%	7 ~	3 9%	2 3%	8 2%*			5 ~100%		15 ~ 44%	3 3%	15 7%	16 5%	4 31%	14 6%	6 7%		
NO	315 94%	5679 94%	3 100%	67 91%	83 97%	91 98%*	71 90%	223 100%	1 100%	2 ~100%	14 ~100%	19 56%	89 97%	205 93%	286 95%	9 69%	236 94%	79 93%	
VALID CASES	335	6018	3	74	86	93	79	223	1	2	5	14	34	92	220	302	13	250	85
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%	2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q77.6 WHAT IS YOUR CHILD'S RACE? RESPONSE: OTHER

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	HIS- PAN- IC	NOT GOOD & POOR	VERY FAIR & POOR	NO CCC	CCC		
Q77.6	COPA TOT CHLD																			
	OHP TOT CHLD																			
YES	26 8%	629 10%	1 33%	7 9%	7 8%	5 5%	6 8%				14 ~100%	12 35%	23 25%	2 0.9%*	25 8%	1 8%	20 8%	6 7%		
NO	309 92%	5389 90%	2 67%	67 91%	79 92%	88 95%	73 92%	223 100%	1 100%		2 ~100%	5 100%		22 ~65%	69 75%*	218 99%*	277 92%	12 92%	230 92%	79 93%
VALID CASES	335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%		2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q78 WHAT IS YOUR AGE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/PAC ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q78 UNDER 18	12 4%	209 4%	~	2 3%	2 3%	6 7%	2 3%	8 4%	~	~	~	~	~	5 5%	7 3%	12 4%	~	10 4%	2 2%		
18 TO 24	20 6%	307 5%	~	17 25%*	3 4%	~	~	15 7%	~	~	~	1 25%*	2 14%*	2 6%*	8 9%	12 6%	18 6%*	2 15%*	15 7%	5 6%	
25 TO 34	102 32%	2087 37%	100%*	3 46%*	32 49%*	39 24%*	21 24%*	7 9%*	68 31%	~	~	~	2 50%*	6 43%*	11 32%*	37 40%	61 28%*	97 32%*	3 23%*	86 37%*	16 19%*
35 TO 44	108 34%	2042 36%	~	14 20%*	24 30%	38 43%*	32 42%	75 34%	~	~	1 50%*	~	5 36%*	12 35%*	29 32%	79 36%	103 34%*	4 31%*	72 31%	36 42%	
45 TO 54	46 15%	708 13%	~	3 4%*	6 8%*	14 16%	23 30%*	34 15%	1 100%*	~	1 50%*	~	1 7%*	5 15%*	11 12%	35 16%	45 15%*	1 8%*	30 13%	16 19%	
55 TO 64	19 6%	233 4%	~	1 1%*	4 5%	7 8%	7 9%	15 7%	~	~	~	1 25%*	~	3 9%*	1 1%*	17 8%*	18 6%*	1 8%*	13 6%	6 7%	
65 TO 74	6 2%	39 0.7%	~	~	1 1%	2 2%	3 4%	5 2%	~	~	~	~	~	1 3%*	1 1%	5 2%	4 1%*	2 15%*	3 1%	3 4%	
75 OR OLDER	2 0.6%	12 0.2%	~	~	~	~	2 3%	2 0.9%	~	~	~	~	~	~	~	2 0.9%	2 0.7%*	~	1 0.4%*	1 1%	
NOT ANSWERED	20	382		5	7	5	3	1				1			2	3		20			
VALID CASES	315	5636	3	69	79	88	76	222	1		2	4	14	34	92	218	299	13	230	85	
NUMBER OF RESPONDENTS	335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q79 ARE YOU MALE OR FEMALE?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- Whte	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
Q79																				
MALE	48 15%	691 12%		10 ~ 14%	7 9%*	14 16%	17 23%	30 14%	~	~	~	3 ~ 21%	6 18%	16 18%	31 14%	47 16%~		37 16%	11 13%	
FEMALE	265 85%	4976 88%	3 100%~	59 86%	72 91%*	73 84%	58 77%	192 86%	1 100%~		2 ~100%	4 ~100%	11 79%~	27 82%~	75 82%	187 86%	250 84%~	13 100%~	192 84%	73 87%
NOT ANSWERED	22	352		5	7	6	4	1			1		1	1	2	5		21	1	
VALID CASES	313	5666	3	69	79	87	75	222	1		2	4	14	33	91	218	297	13	229	84
NUMBER OF RESPONDENTS	335 100%	6018 100%	3 100%	74 100%	86 100%	93 100%	79 100%	223 100%	1 100%		2 100%	5 100%	14 100%	34 100%	92 100%	220 100%	302 100%	13 100%	250 100%	85 100%

Q80 WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	GOOD & POOR	NO CCC	CCC	
Q80																					
8TH GRADE OR LESS	29 9%	729 13%*	~	4 6%	8 10%	8 9%	9 12%	9 4%*	~	~	~	~	29%~	6%~	25%* 2%*	4%~	27%~ 9%~	1%~ 8%~	26%* 11%*	3%* 4%*	
SOME HIGH SCHOOL BUT DID NOT GRADUATE	39 12%	659 12%	~	11 16%	8 10%	15 17%	5 7%*	24 11%	~	~	~	20%~	7%~	3%~	24%* 7%*	16%~	37%~ 13%~	2%~ 15%~	31%* 14%	8%* 10%	
HIGH SCHOOL GRADUATE OR GED	106 34%	1741 31%	~	26 38%	27 35%	27 31%	26 34%	76 34%	~	~	50%~	1%~ 40%~	2%~ 40%~	8%~ 7%~	12%~ 45%~	25%* 36%*	80%~	99%~ 33%~	6%~ 46%~	79%* 34%	27%* 32%
SOME COLLEGE OR 2-YEAR DEGREE	106 34%	1785 32%	33%~	1 28%	19 32%	25 31%	27 45%*	34 38%*	1 100%~	~	~	~	2%~ 40%~	1%~ 7%~	15%~ 45%~	15%* 41%*	90%~	102%~ 34%~	3%~ 23%~	69%* 30%*	37%* 44%*
4-YEAR COLLEGE GRADUATE	26 8%	395 7%	67%~	2 10%	7 8%	6 8%	11 12%	22 10%	~	~	50%~	1%~	~	~	2%~ 6%~	3%* 3%*	23%*	25%~ 8%~	~	18% 8%	8% 10%
MORE THAN 4-YEAR COLLEGE DEGREE	7 2%	239 4%*	~	1 1%	4 5%	~	2 3%	6 3%	~	~	~	~	~	~	1%~ 3%~	~	7%* 3%*	6%~ 2%~	1%~ 8%~	6% 3%	1% 1%
NOT ANSWERED	22	471		6	8	5	3	1						1	3		6		21	1	
VALID CASES	313	5547	3	68	78	88	76	222	1		2	5	14	33	89	220	296	13	229	84	
NUMBER OF RESPONDENTS	335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85	
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	

Q81 HOW ARE YOU RELATED TO THE CHILD?

			AGE					RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR WHITE	AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/PAC ALSK	OTHR	MUL-TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC
Q81																				
MOTHER OR FATHER	284 91%	5300 95%*	3 100%	69 100%	72 91%	80 91%	60 83%*	196 90%	1 100%		2 100%	5 100%	14 100%	27 82%	87 96%*	191 89%*	270 92%	10 77%	212 93%	72 87%
GRANDPARENT	12 4%	137 2%	~	~	4 5%	3 3%	5 7%	8 4%	~	~	~	~	~	4 12%	2 2%	10 5%	11 4%	1 8%	9 4%	3 4%
AUNT OR UNCLE	4 1%	36 0.6%	~	~	1 1%	1 1%	2 3%	3 1%	~	~	~	~	~	1 3%	1 1%	3 1%	3 1%	1 8%	2 0.9%	2 2%
OLDER BROTHER OR SISTER		4 0.1%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
OTHER RELATIVE	1 0.3%	6 0.1%	~	~	~	~	1 1%	1 0.5%	~	~	~	~	~	~	~	1 0.5%	1 0.3%	~	~	1 1%
LEGAL GUARDIAN	3 1%	77 1%	~	~	~	1 1%	2 3%	2 0.9%	~	~	~	~	~	1 3%	1 1%	2 0.9%	3 1%	~	3 1%	~
SOMEONE ELSE	7 2%	44 0.8%	~	~	2 3%	3 3%	2 3%	7 3%	~	~	~	~	~	~	~	7 3%	6 2%	1 8%	2 0.9%	5 6%
NOT ANSWERED	24	415		5	7	5	7	6						1	1	6	8		22	2
VALID CASES	311	5603	3	69	79	88	72	217	1		2	5	14	33	91	214	294	13	228	83
NUMBER OF RESPONDENTS	335	6018	3	74	86	93	79	223	1		2	5	14	34	92	220	302	13	250	85
	100%	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%



Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY?

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q82 YES	4	157		1		3		3						2	2	4		4	
	2%	5%*	~	2%~	~	6%	~	2%	~	~	~	~	~	4%	1%	2%~	~	3%*	~
NO	191	3319	3	45	42	47	54	139		1	4	5	15	50	136	181	6	137	54
	98%	95%*	100%~	98%~	100%~	94%	100%~	98%	~	~100%	~100%	~100%	~100%	96%	99%	98%~	100%~	97%*	100%~
NOT ANSWERED	1	40			1			1							1	1		1	
VALID CASES	195	3476	3	46	42	50	54	142		1	4	5	15	52	138	185	6	141	54
NUMBER OF RESPONDENTS	196	3516	3	46	43	50	54	143		1	4	5	15	52	139	186	6	142	54
	100%	100%	100%	100%	100%	100%	100%	100%		100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL]

Q83.1 HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME.

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC
Q83.1 YES	4	68		1		3		3						2	2	4		4	
	100%	57%	~	100%	~	100%	~	100%	~	~	~	~	~	100%	100%	100%	~	100%	~
NO		51																	
		43%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
VALID CASES	4	119		1		3		3						2	2	4		4	
NUMBER OF RESPONDENTS	4	119		1		3		3						2	2	4		4	
	100%	100%		100%		100%		100%						100%	100%	100%		100%	

[ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

Q83.2 HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE.

		AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC CCC
Q83.2	COPA TOT CHLD														
YES	2 50%	52 44%	~	~	~ 67%	2 67%	~	~	~	~	~	2 ~100%	2 50%	2 50%	~
NO	2 50%	67 56%	~100%	1 ~ 33%	1 ~ 33%	1 33%	~	~	~	~	~	2 ~100%	2 50%	2 50%	~
VALID CASES	4	119	1	3	3	3						2 2	4	4	
NUMBER OF RESPONDENTS	4 100%	119 100%	1 100%	3 100%	3 100%	3 100%						2 2 100% 100%	4 100%	4 100%	

[ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

Q83.3 HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME.

		AGE					RACE					ETHNICITY	HEALTH STATUS	CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC
Q83.3															
YES	COPA TOT CHLD	9													
	OHP TOT CHLD	7%	~	~	~	~	~	~	~	~	~	~	~	~	~
NO		4	1	3		3								4	4
		110	~100%	~100%		~100%	~	~	~	~	~	~	~	~100%	~100%
	100%	93%												100%	100%
VALID CASES		4	1	3		3								4	4
NUMBER OF RESPONDENTS		4	1	3		3								4	4
	100%	100%	100%	100%		100%								100%	100%

[ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

Q83.4 HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE.

			AGE					RACE					ETHNIC- ITY	HEALTH STATUS	CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC
Q83.4 YES	1 25%	31 26%	~	1 100%	~	~	~	1 33%	~	~	~	~	~	1 50%	1 25%	1 25%	~	~
NO	3 75%	88 74%	~	~	~	3 100%	2 67%	~	~	~	~	~	1 50%	2 100%	3 75%	3 75%	~	~
VALID CASES	4	119		1		3	3						2	2	4	4		4
NUMBER OF RESPONDENTS	4 100%	119 100%		1 100%		3 100%	3 100%						2 100%	2 100%	4 100%	4 100%		4 100%

[ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

Q83.5 HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY.

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER	
		<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC
Q83.5																	
YES	COPA TOT CHLD	11															
	OHP TOT CHLD	9%	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NO		4	1		3	3						2	2	4		4	
		100%	~100%	~	~100%	~100%	~	~	~	~	~	~100%	~100%	~100%	~	~100%	~
VALID CASES		4	1		3	3						2	2	4		4	
NUMBER OF RESPONDENTS		4	1		3	3						2	2	4		4	
		100%	100%		100%	100%						100%	100%	100%		100%	

[ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

NQ14 RATING OF ALL CHILD'S HEALTH CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ14 0-6	19 9%	375 10%		6 ~ 11%	4 7%	1 2%*	8 17%	14 10%	~	~	1 ~ 33%	1 11%	2 8%	2 3%*	15 10%	17 9%	1 9%	14 9%	5 7%	
7-8	76 35%	1202 31%	2 67%	21 ~ 38%	18 33%	19 34%	16 34%	54 37%	~	~	1 50%	2 ~ 22%	10 42%	20 34%	51 35%	67 34%	4 36%	47 32%	29 43%	
9-10	121 56%	2325 60%	1 33%	28 ~ 51%	33 60%	36 64%	23 49%	77 53%	~	~	1 50%	2 67%	6 67%	12 50%	36 62%	80 55%	111 57%	6 55%	87 59%	34 50%
VALID CASES	216	3902	3	55	55	56	47	145			2	3	9	24	58	146	195	11	148	68
NUMBER OF RESPONDENTS	216 100%	3902 100%	3 100%	55 100%	55 100%	56 100%	47 100%	145 100%			2 100%	3 100%	9 100%	24 100%	58 100%	146 100%	195 100%	11 100%	148 100%	68 100%
MEAN	2.47	2.50	2.33	2.40	2.53	2.62	2.32	2.43			2.50	2.33	2.56	2.42	2.59	2.45	2.48	2.45	2.49	2.43
p stat_(*=Sig @ p<=.05)		.542		~.345	.463	.022*		~.220	~	~	~	~	~	~.092	.367		~	~	.481	.479

[ASKED IF Q7 >= 1 TIME]

NQ41 RATING OF CHILD'S PERSONAL DOCTOR

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ41 0-6	14 6%	353 7%	~	2 4%	1 2%*	5 7%	6 12%	12 7%	~	~	~	~	1 4%	3 5%	11 6%	14 6%	~	11 7%	3 4%	
7-8	76 32%	1106 23%*	33%~	1 40%	23 27%	17 26%	18 35%~	17 31%	~	~	1 50%~	2 40%~	3 33%~	13 48%~	15 25%	58 34%	72 32%~	3 33%~	51 30%	25 35%
9-10	150 62%	3349 70%*	67%~	2 56%	32 71%	44 67%	47 52%~	25 62%	1 100%~	~	1 50%~	3 60%~	6 67%~	13 48%~	43 70%	102 60%	141 62%~	6 67%~	106 63%	44 61%
VALID CASES	240	4809	3	57	62	70	48	169	1	2	5	9	27	61	171	227	9	168	72	
NUMBER OF RESPONDENTS	240 100%	4809 100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
MEAN	2.57	2.62	2.67	2.53	2.69	2.60	2.40	2.54	3.00	2.50	2.60	2.67	2.44	2.66	2.53	2.56	2.67	2.57	2.57	
p stat_(*=Sig @ p<=.05)		.159	~.550	.032*	.592		~.354	~	~	~	~	~	~.171	.151		~	~	~.962	.962	

[ASKED IF Q30 = YES]



NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER		
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	GOOD & FAIR & POOR	NO CCC	CCC
NQ48 0-6	4 17%	69 10%	1 100%	~	~	~	3 50%	3 21%	~	~	~	1 50%	~	2 22%	2 14%	3 17%	1 20%	1 11%	3 21%
7-8	2 9%	173 25%	~	~	2 20%	~	~	~	~	~	~	~	1 33%	1 11%	1 7%	2 11%	~	1 11%	1 7%
9-10	17 74%	464 66%	~	1 100%	8 80%	5 100%	3 50%	11 79%	~	~	~	1 50%	2 67%	6 67%	11 79%	13 72%	4 80%	7 78%	10 71%
VALID CASES	23	706	1	1	10	5	6	14				2	3	9	14	18	5	9	14
NUMBER OF RESPONDENTS	23 100%	706 100%	1 100%	1 100%	10 100%	5 100%	6 100%	14 100%				2 100%	3 100%	9 100%	14 100%	18 100%	5 100%	9 100%	14 100%
MEAN	2.57	2.56	1.00	3.00	2.80	3.00	2.00	2.57				2.00	2.67	2.44	2.64	2.56	2.60	2.67	2.50
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~

[ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]

NQ54 RATING OF CHILD'S HEALTH PLAN

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & POOR	FAIR & POOR	NO CCC	CCC	
NQ54 0-6	40 13%	702 13%	~	9%	12%	7%*	25%*	13%	~	~	~	20%~	7%~	21%~	6%*	15%	13%~	8%~	11%	18%
7-8	87 28%	1548 28%	~	25%	28%	30%	29%	31%*	~	~	50%~	~	29%~	30%~	19%*	32%*	28%~	38%~	25%*	36%*
9-10	186 59%	3348 60%	100%~	67%	60%	63%	46%*	56%	100%~	~	50%~	80%~	64%~	48%~	76%*	53%*	59%~	54%~	64%*	46%*
VALID CASES	313	5598	3	69	78	87	76	219	1	2	5	14	33	90	216	297	13	228	85	
NUMBER OF RESPONDENTS	313 100%	5598 100%	3 100%	69 100%	78 100%	87 100%	76 100%	219 100%	1 100%	2 100%	5 100%	14 100%	33 100%	90 100%	216 100%	297 100%	13 100%	228 100%	85 100%	
MEAN	2.47	2.47	3.00	2.58	2.49	2.56	2.21	2.43	3.00	2.50	2.60	2.57	2.27	2.70	2.38	2.46	2.46	2.54	2.28	
p stat_(*=Sig @ p<=.05)	.879		~.135	.764	.136	.000*	.216	~	~	~	~	~	~	~.000*	.002*	~	~	~.008*	.008*	

GETTING NEEDED CARE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-AMER	AS-IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC	
NPRBSEE4 NQ46	2.19	2.27	2.00	2.25	2.36	2.25	1.86	2.30					2.00	1.80	2.10	2.24	2.17	2.33	2.45	2.05
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~
NCARNES4 NQ15	2.46	2.47	2.67	2.41	2.48	2.62	2.29	2.53			2.50	1.67	2.11	2.40	2.30	2.54	2.46	2.36	2.48	2.41
p stat_(*=Sig @ p<=.05)	.871		~	.505	.758	.032*		~	.034*	~	~	~	~	~	~	.044*.010*	~	~	~	.486 .484
COMPOSITE	2.33	2.37	2.33	2.33	2.42	2.43	2.07	2.41	x	x	2.50	1.67	2.06	2.10	2.20	2.39	2.31	2.35	2.47	2.23
p stat_(*=Sig @ p<=.05)	.590		~	.981	.450	.398		~	.076	~	~	~	~	~	~	.302 .196	~	~	~	.007*.396

GETTING CARE QUICKLY

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR-	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
NCARSN4 NQ4	2.64	2.61	3.00	2.55	2.67	2.82	2.50	2.74			2.33	3.00	2.46	2.47	2.73	2.67	2.50	2.66	2.61	
p stat_(*=Sig @ p<=.05)	.699		~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NAPGET4 NQ6	2.51	2.46	2.50	2.47	2.52	2.61	2.41	2.57		2.50	2.33	2.00	2.59	2.30	2.58	2.53	2.40	2.51	2.49	
p stat_(*=Sig @ p<=.05)	.404		~	~	~	~	~	.089	~	~	~	~	~	~	.036*	~	~	.847	.846	
COMPOSITE	2.57	2.54	2.75	2.51	2.59	2.71	2.46	2.65	x	x	2.50	2.33	2.50	2.39	2.66	2.60	2.45	2.58	2.55	
p stat_(*=Sig @ p<=.05)	.764		~	.747	.909	.469	~	.238	~	~	~	~	~	~	.290	.203	~	~	.876	.887

HOW WELL DOCTORS COMMUNICATE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK NATV	MUL-THI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD & FAIR	POOR	NO CCC	CCC	
NDREXPL4 NQ32	2.72	2.69	3.00	2.70	2.73	2.80	2.61	2.70			2.50	3.00	2.67	2.89	2.62	2.76	2.71	2.88	2.73	2.71
p stat_(*=Sig @ p<=.05)	.435		~.710		~	~	~	.358	~	~	~	~	~	~	.255		~	~	.824	.823
NDRLSTN4 NQ33	2.68	2.70	2.67	2.64	2.73	2.84	2.42	2.64		2.50	3.00	2.67	2.72	2.68	2.67	2.67	2.75	2.68	2.68	
p stat_(*=Sig @ p<=.05)	.726		~.546		~	~	~	.098	~	~	~	~	~	~	.729		~	~	.976	.976
NDRESPU4 NQ34	2.80	2.77	2.67	2.80	2.80	2.91	2.65	2.76		2.50	3.00	3.00	2.78	2.79	2.78	2.78	2.88	2.81	2.76	
p stat_(*=Sig @ p<=.05)	.397		~	~	~	~	~	.109	~	~	~	~	~	~	.587		~	~	.517	.514
NDRTMEN4 NQ37	2.49	2.48	2.33	2.50	2.53	2.58	2.32	2.48		2.50	3.00	2.33	2.61	2.19	2.61	2.48	2.63	2.50	2.49	
p stat_(*=Sig @ p<=.05)	.738		~	~	~	~	~	.748	~	~	~	~	~	~	.004*		~	~	.969	.969
COMPOSITE	2.67	2.66	2.67	2.66	2.70	2.78	2.50	2.65	x	x	2.50	3.00	2.67	2.75	2.57	2.70	2.66	2.78	2.68	2.66
p stat_(*=Sig @ p<=.05)	.916		~.955		~	~	~	.803	~	~	~	~	~	~	.784		~	~	.956	.956

CUSTOMER SERVICE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHITE	BLCK OR AFR-	AMER IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC		
NPBCLCS4 NQ50	2.46	2.30	3.00	2.68	2.64	2.23	2.38	2.51	3.00			2.29	2.75	2.38	2.50	2.48	2.00	2.51	2.31	
p stat_(*=Sig @ p<=.05)		.077	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
NCSRESP NQ51	2.70	2.55	3.00	2.89	2.50	2.70	2.60	2.77	3.00			2.43	2.75	2.62	2.75	2.71	2.50	2.75	2.56	
p stat_(*=Sig @ p<=.05)		.034*	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	
COMPOSITE	2.58	2.43	3.00	2.79	2.57	2.46	2.49	2.64	3.00	x	x	x	2.36	2.75	2.50	2.62	2.59	2.25	2.63	2.44
p stat_(*=Sig @ p<=.05)		.487	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	

SHARED DECISION MAKING

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC			
NRXWHY NQ11	2.40	2.46	3.00	2.50	2.30	2.58	2.27	2.47		3.00	1.67	2.43	1.83	2.51	2.38	2.25	2.48	2.31		
p stat_(*=Sig @ p<=.05)		.525	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NRXWYNT NQ12	1.84	2.00	1.00	1.93	2.00	1.92	1.53	1.89		3.00	1.33	1.43	1.33	1.92	1.78	2.00	1.88	1.80		
p stat_(*=Sig @ p<=.05)		.130	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NRXBST NQ13	2.52	2.59	3.00	2.57	2.40	2.54	2.60	2.61		3.00	3.00	2.14	2.17	2.62	2.56	2.20	2.58	2.47		
p stat_(*=Sig @ p<=.05)		.542	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.26	2.35	2.33	2.33	2.23	2.35	2.13	2.32	x	x	3.00	x	2.00	2.00	1.78	2.35	2.24	2.15	2.31	2.19
p stat_(*=Sig @ p<=.05)		.743	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		

ACCESS TO SPECIALIZED SERVICES

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- AMER	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR POOR	NO CCC	CCC			
NEZMDEQ NQ20	2.14	2.28	2.00	3.00	2.00	1.00	2.00					3.00	2.14		2.33	1.00	2.33	2.00		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NEZTHP NQ23	1.96	2.11	2.00	2.30	1.75	1.40	1.88				1.00	2.00	2.00	1.88	2.05	1.40	1.89	2.00		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
NEZTC NQ26	2.16	2.11	1.67	2.30	2.11	2.20	2.04				3.00	2.33	2.00	2.15	2.11	2.33	2.57	2.04		
p stat_(*=Sig @ p<=.05)			~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		
COMPOSITE	2.09	2.17	x	1.89	2.53	1.95	1.53	1.97	x	x	x	x	2.00	2.44	2.00	2.06	2.16	1.58	2.26	2.01
p stat_(*=Sig @ p<=.05)		.528	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~	~		



GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
PRBSEE4 Q46	71%	76%	100%	75%	82%	75%	43%	75%				50%	40%	80%	67%	71%	67%	91%	60%	
CARNES4 Q15	91%	88%	100%	93%	93%	93%	83%	93%		100%	67%	67%	88%	86%	93%	90%	91%	90%	91%	
AVERAGE	80.8	82.1	100	83.8	87.2	83.9	63.1	84.1	x	x	x	66.7	66.7	64.0	83.0	80.0	80.6	78.8	90.7	75.6

GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
CARSN4 Q4	92%	89%	100%	83%	100%	100%	85%	96%			67%	100%	77%	89%	95%	93%	83%	91%	94%	
APGET4 Q6	89%	86%	100%	90%	89%	89%	88%	91%		100%	67%	60%	94%	81%	92%	90%	80%	88%	92%	
AVERAGE	90.7	87.1	x	86.3	94.6	94.6	86.4	93.8	x	x	x	66.7	60.0	85.5	85.2	93.6	91.9	81.7	89.6	93.2

HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

	COPA TOT CHLD	OHP TOT CHLD	AGE					RACE					ETHNIC- ITY		HEALTH STATUS		CCC SCREENER			
			<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK NATV	MUL- OTHR TI	HIS- IC	NOT HIS- PAN- IC	EX & VERY GOOD & GOOD	FAIR & POOR	NO CCC	CCC		
DREXPL4 Q32	95%	93%	100%	94%	98%	93%	94%			100%	100%	83%	100%	89%	97%	94%	100%	94%	97%	
DRLSTN4 Q33	94%	93%	100%	98%	96%	96%	93%			100%	100%	83%	100%	91%	95%	94%	100%	93%	97%	
DRESPU4 Q34	97%	95%	100%	100%	98%	98%	96%			100%	100%	100%	100%	96%	98%	97%	100%	97%	97%	
DRTMEN4 Q37	89%	86%	100%	90%	92%	91%	88%			100%	100%	100%	94%	79%	93%	89%	87%	88%	92%	
AVERAGE	93.9	91.8	100	95.4	95.9	94.4	87.1	92.5	x	x	x	100	91.7	98.6	88.8	95.6	93.7	96.9	93.2	95.3

CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

		AGE						RACE						ETHNICITY		HEALTH STATUS		CCC SCREENER		
COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	WHT	BLK OR AFR-AMER	AS-IAN	NATV HAW/ILND	AMER IND/ALSK	MUL-OTHR	TI	HIS-PAN-IC	NOT HIS-PAN-IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC	
PBCLCS4 Q50	86%	80%	100%	95%	91%	77%	81%	87%	100%			86%	100%	85%	86%	85%	100%	87%	81%	
CSRESP Q51	96%	88%	100%	100%	83%	100%	93%	98%	100%			86%	100%	92%	98%	95%	100%	96%	94%	
AVERAGE	90.5	84.1	x	97.4	87.1	88.6	87.3	92.2	x	x	x	x	85.7	100	88.5	91.6	90.2	x	91.4	87.5

SHARED DECISION MAKING (A LOT/YES + SOME) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ PAC ILND	AMER IND/ ALSK	MUL- OTHR TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC			
RXWHY Q11	84%	86%	100%	93%	75%	92%	80%	89%		100%		33%	86%	50%	91%	84%	75%	88%	79%	
RXWYNT Q12	57%	66%	0%	79%	55%	69%	33%	61%		100%		33%	29%	33%	60%	55%	60%	61%	53%	
FRXBST Q13	76%	80%	100%	79%	70%	77%	80%	80%		100%		100%	57%	58%	81%	78%	60%	79%	73%	
AVERAGE	72.4	77.2	x	83.3	66.7	79.3	64.4	76.7	x	x	x	x	55.6	57.1	47.2	77.7	72.1	65.0	75.8	68.7

ACCESS TO SPECIALIZED SERVICES (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- PAN- IC	NOT HIS- PAN- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
EZMDEQ Q20	71%	76%	100%	100%	100%	0%	67%					100%		71%	83%	0%	67%	75%		
EZTHP Q23	68%	69%	67%	80%	75%	40%	63%				0%	80%	67%	65%	74%	40%	67%	69%		
EZTC Q26	69%	68%	33%	80%	67%	70%	65%				100%	67%	75%	65%	64%	100%	100%	60%		
AVERAGE	69.4	70.9	x	50.0	86.7	70.8	55.0	64.8	x	x	x	x	x	73.3	70.8	67.2	73.8	70.0	77.8	67.9

PERSONAL DOCTOR WHO KNOWS CHILD (YES) -- GLOBAL PROPORTION COMPOSITE

			AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER			
	COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD & FAIR & POOR	NO CCC	CCC		
DRTLKU Q38	82%	85%	100%	88%	88%	73%	77%	82%		50%	75%	100%	89%	80%	83%	82%	100%	83%	81%	
DRUNCON Q43	92%	86%		75%	100%	91%	95%	92%				100%	91%	88%	92%	90%	100%	88%	92%	
DRUNFAM Q44	92%	85%		86%	100%	90%	91%	91%				100%	91%	86%	92%	92%	88%	88%	92%	
AVERAGE	88.6	85.4	100	82.9	95.8	84.9	87.7	88.5	x	x	x	75.0	100	90.2	84.5	89.4	88.2	95.8	86.0	88.7

CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

		AGE					RACE					ETHNICITY		HEALTH STATUS		CCC SCREENER				
COPA TOT CHLD	OHP TOT CHLD	<1	1-3	4-7	8-12	13 AND OVER	BLCK OR AFR- WHT	AS- IAN	NATV HAW/ ILND	AMER IND/ ALSK	MUL- OTHR	TI	HIS- IC	NOT HIS- IC	EX & VERY GOOD &	FAIR & POOR	NO CCC	CCC		
HELPCONT Q18	100%	88%		100%	100%	100%	100%					100%	100%	100%	100%	100%	100%	100%		
HLPCOORD Q29	38%	56%	50%	25%	43%	40%	38%				0%	27%	33%	37%	37%	20%	33%	43%		
AVERAGE	69.0	72.1	x	25.0	71.4	70.0	70.0	69.0	x	x	x	x	x	27.3	66.7	68.6	68.6	60.0	66.7	71.4



INDEX OF ADULT TABLES

PAGE	QUESTION	TITLE
1. INTRODUCTION		
1	Q1	OUR RECORDS SHOW THAT YOU ARE NOW IN <HEALTH PLAN>. IS THAT RIGHT?
2. YOUR HEALTH CARE IN THE LAST 6 MONTHS		
2	Q3	IN THE LAST 6 MONTHS, DID YOU HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?
3	Q4	IN THE LAST 6 MONTHS, WHEN YOU NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOU GET CARE AS SOON AS YOU NEEDED? [ASKED IF Q3 = YES]
4	Q5	IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK-UP OR ROUTINE CARE AT A DOCTOR'S OFFICE OR CLINIC?
5	Q6	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR A CHECK-UP OR ROUTINE CARE AT A DOCTOR'S OFFICE OR CLINIC AS SOON AS YOU NEEDED? [ASKED IF Q5 = YES]
6	Q7	IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOU WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID YOU GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE FOR YOURSELF?
7	Q8	A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOU NEED A CHECK-UP, WANT ADVICE ABOUT A HEALTH PROBLEM, OR GET SICK OR HURT. IN THE LAST 6 MONTHS, DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS? [ASKED IF Q7 >= 1 TIME]
8	Q9	IN THE LAST 6 MONTHS, DID YOU AND A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE? [ASKED IF Q7 >= 1 TIME]
9	Q10	WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q9 = YES]
10	Q11	WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q9 = YES]
11	Q12	WHEN YOU TALKED ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOU? [ASKED IF Q7 >= 1 TIME AND Q9 = YES]
12	Q13	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR HEALTH CARE IN THE LAST 6 MONTHS? [ASKED IF Q7 >= 1 TIME]
13	Q14	IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS OR TREATMENT YOU NEEDED? [ASKED IF Q7 >= 1 TIME]

PAGE QUESTION TITLE

3. YOUR PERSONAL DOCTOR

- 14 Q15 A PERSONAL DOCTOR IS THE ONE YOU WOULD SEE IF YOU NEED A CHECK-UP, WANT ADVICE ABOUT A HEALTH PROBLEM, OR GET SICK OR HURT. DO YOU HAVE A PERSONAL DOCTOR?
- 15 Q16 IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOU VISIT YOUR PERSONAL DOCTOR TO GET CARE FOR YOURSELF? [ASKED IF Q15 = YES]
- 16 Q17 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR EXPLAIN THINGS IN A WAY THAT WAS EASY TO UNDERSTAND? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
- 17 Q18 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR LISTEN CAREFULLY TO YOU? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
- 18 Q19 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SHOW RESPECT FOR WHAT YOU HAD TO SAY? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
- 19 Q20 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SPEND ENOUGH TIME WITH YOU? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
- 20 Q21 IN THE LAST 6 MONTHS, DID YOU GET CARE FROM A DOCTOR OR OTHER HEALTH PROVIDER BESIDES YOUR PERSONAL DOCTOR? [ASKED IF Q15 = YES AND Q16 >= 1 TIME]
- 21 Q22 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR PERSONAL DOCTOR SEEM INFORMED AND UP-TO-DATE ABOUT THE CARE YOU GOT FROM THESE DOCTORS OR OTHER HEALTH PROVIDERS? [ASKED IF Q15 = YES AND Q16 >= 1 TIME AND Q21 = YES]
- 22 Q23 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR PERSONAL DOCTOR? [ASKED IF Q15 = YES]

4. GETTING HEALTH CARE FROM SPECIALISTS

- 23 Q24 SPECIALISTS ARE DOCTORS LIKE SURGEONS, HEART DOCTORS, ALLERGY DOCTORS, SKIN DOCTORS, AND OTHER DOCTORS WHO SPECIALIZE IN ONE AREA OF HEALTH CARE. IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS TO SEE A SPECIALIST?
- 24 Q25 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT TO SEE A SPECIALIST AS SOON AS YOU NEEDED? [ASKED IF Q24 = YES]
- 25 Q26 HOW MANY SPECIALISTS HAVE YOU SEEN IN THE LAST 6 MONTHS? [ASKED IF Q24 = YES]
- 26 Q27 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOU SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST? [ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]

PAGE QUESTION TITLE

5. YOUR HEALTH PLAN

27 Q28 IN THE LAST 6 MONTHS, DID YOU LOOK FOR ANY INFORMATION IN WRITTEN MATERIALS OR ON THE INTERNET ABOUT HOW YOUR HEALTH PLAN WORKS?

28 Q29 IN THE LAST 6 MONTHS, HOW OFTEN DID THE WRITTEN MATERIALS OR THE INTERNET PROVIDE THE INFORMATION YOU NEEDED ABOUT HOW YOUR HEALTH PLAN WORKS? [ASKED IF Q28 = YES]

29 Q30 IN THE LAST 6 MONTHS, DID YOU GET INFORMATION OR HELP FROM YOUR HEALTH PLAN'S CUSTOMER SERVICE?

30 Q31 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR HEALTH PLAN'S CUSTOMER SERVICE GIVE YOU THE INFORMATION OR HELP YOU NEEDED? [ASKED IF Q30 = YES]

31 Q32 IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR HEALTH PLAN'S CUSTOMER SERVICE STAFF TREAT YOU WITH COURTESY AND RESPECT? [ASKED IF Q30 = YES]

32 Q33 IN THE LAST 6 MONTHS, DID YOUR HEALTH PLAN GIVE YOU ANY FORMS TO FILL OUT?

33 PQ34 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR HEALTH PLAN EASY TO FILL OUT? [ASKED IF Q33 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q33 = NO]

34 Q35 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR HEALTH PLAN?

35 Q35A IN THE LAST 6 MONTHS, DID YOU HAVE A HEALTH PROBLEM FOR WHICH YOU NEEDED SPECIAL MEDICAL EQUIPMENT, SUCH AS A CANE, A WHEELCHAIR, OR OXYGEN EQUIPMENT?

36 Q35B IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE MEDICAL EQUIPMENT YOU NEEDED THROUGH YOUR HEALTH PLAN? [ASKED IF Q35A = YES]

37 Q35C IN THE LAST 6 MONTHS, DID YOU HAVE ANY HEALTH PROBLEMS THAT NEEDED SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?

38 Q35D IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE SPECIAL THERAPY YOU NEEDED THROUGH YOUR HEALTH PLAN? [ASKED IF Q35C = YES]

39 Q35E A HEALTH PROVIDER COULD BE A GENERAL DOCTOR, A SPECIALIST DOCTOR, A NURSE PRACTITIONER, A PHYSICIAN ASSISTANT, A NURSE OR ANYONE ELSE YOU WOULD SEE FOR HEALTH CARE. IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER TALK TOO FAST WHEN TALKING TO YOU?

40 Q35F IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER INTERRUPT YOU WHEN YOU WERE TALKING?

41 Q35G IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE A CONDESCENDING, SARCASTIC OR RUDE TONE OR MANNER WITH YOU?

PAGE	QUESTION	TITLE
42	Q35H	IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TELL A DOCTOR OR OTHER HEALTH PROVIDER ANYTHING, EVEN THINGS THAT YOU MIGHT NOT TELL ANYONE ELSE?
43	Q35I	IN THE LAST 6 MONTHS, DID YOU FEEL YOU COULD TRUST A DOCTOR OR OTHER HEALTH PROVIDER WITH YOUR MEDICAL CARE?
44	Q35J	IN THE LAST 6 MONTHS, DID YOU FEEL A DOCTOR OR OTHER HEALTH PROVIDER ALWAYS TOLD YOU THE TRUTH ABOUT YOUR HEALTH, EVEN IF THERE WAS BAD NEWS?
45	Q35K	IN THE LAST 6 MONTHS, DID YOU FEEL THIS PROVIDER CARED AS MUCH AS YOU DO ABOUT YOUR HEALTH?
46	Q35L	IN THE LAST 6 MONTHS, DID YOU FEEL THIS PROVIDER REALLY CARED ABOUT YOU AS A PERSON?
47	Q35M	IN THE LAST 6 MONTHS, HOW OFTEN HAVE YOU BEEN TREATED UNFAIRLY AT A DOCTOR OR OTHER HEALTH PROVIDER'S OFFICE BECAUSE OF YOUR RACE OR ETHNICITY?
48	Q35N	IN THE LAST 6 MONTHS, HOW OFTEN HAVE YOU BEEN TREATED UNFAIRLY AT A DOCTOR OR OTHER HEALTH PROVIDER'S OFFICE BECAUSE OF THE TYPE OF HEALTH INSURANCE YOU HAVE OR BECAUSE YOU DO NOT HAVE HEALTH INSURANCE?
49	Q35O	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER GIVE YOU ALL THE INFORMATION YOU WANTED ABOUT YOUR HEALTH?
50	Q35P	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER ENCOURAGE YOU TO TALK ABOUT ALL YOUR HEALTH QUESTIONS OR CONCERNS?
51	Q35Q	IN THE LAST 6 MONTHS, HOW OFTEN DID A DOCTOR OR OTHER HEALTH PROVIDER USE MEDICAL WORDS YOU DID NOT UNDERSTAND?
52	Q35R	WHAT IS YOUR PREFERRED LANGUAGE?
53	Q35S	HOW WELL DO YOU SPEAK ENGLISH? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]
54	Q35T	IN THE LAST 6 MONTHS, WHEN YOU CALLED OR SPOKE TO SOMEONE FROM YOUR HEALTH PLAN, HOW OFTEN DID THEY SPEAK TO YOU IN YOUR PREFERRED LANGUAGE? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]
55	Q35U	AN INTERPRETER IS SOMEONE WHO HELPS YOU TALK WITH OTHERS WHO DO NOT SPEAK YOUR LANGUAGE. INTERPRETERS CAN INCLUDE STAFF FROM THE HEALTH PLAN OR TELEPHONE INTERPRETERS. IN THE LAST 6 MONTHS, WAS THERE ANY TIME WHEN YOU NEEDED AN INTERPRETER TO TALK WITH SOMEONE FROM YOUR HEALTH PLAN? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE]
56	Q35V	IN THE LAST 6 MONTHS, DID ANYONE FROM THE HEALTH PLAN LET YOU KNOW THAT AN INTERPRETER WAS AVAILABLE FREE OF CHARGE? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]
57	Q35W	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE AN INTERPRETER PROVIDED BY YOUR HEALTH PLAN TO HELP YOU TALK WITH SOMEONE FROM THE PLAN? ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]
58	Q35X	IN THE LAST 6 MONTHS, WHEN YOU USED AN INTERPRETER PROVIDED BY YOUR HEALTH PLAN, WHO WAS THE INTERPRETER YOU USED MOST OFTEN? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]
59	Q35Y	IN THE LAST 6 MONTHS, HOW OFTEN DID THIS INTERPRETER TREAT YOU WITH COURTESY AND RESPECT? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35W = SOMETIMES OR USUALLY OR ALWAYS]
60	Q35Z	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST INTERPRETER POSSIBLE AND 10 IS THE BEST INTERPRETER POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THIS INTERPRETER? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

PAGE	QUESTION	TITLE
61	Q35AA	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU USE A FRIEND OR FAMILY MEMBER AS AN INTERPRETER WHEN YOU TALKED WITH SOMEONE FROM YOUR HEALTH PLAN? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES]
62	Q35AB	IN THE LAST 6 MONTHS, DID YOU USE FRIENDS OR FAMILY MEMBERS AS INTERPRETERS BECAUSE THAT WAS WHAT YOU PREFERRED? [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND Q35AA = SOMETIMES OR USUALLY OR ALWAYS]
6. ABOUT YOU		
63	Q36	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL HEALTH?
64	Q37	IN GENERAL, HOW WOULD YOU RATE YOUR OVERALL MENTAL OR EMOTIONAL HEALTH?
65	Q38	HAVE YOU HAD EITHER A FLU SHOT OR FLU SPRAY IN THE NOSE SINCE JULY 1, 2013?
66	Q39	DO YOU NOW SMOKE CIGARETTES OR USE TOBACCO EVERY DAY, SOME DAYS, OR NOT AT ALL?
67	Q40	IN THE LAST 6 MONTHS, HOW OFTEN WERE YOU ADVISED TO QUIT SMOKING OR USING TOBACCO BY A DOCTOR OR OTHER HEALTH PROVIDER IN YOUR PLAN? [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
68	Q41	IN THE LAST 6 MONTHS, HOW OFTEN WAS MEDICATION RECOMMENDED OR DISCUSSED BY A DOCTOR OR HEALTH PROVIDER TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF MEDICATION ARE: NICOTINE GUM, PATCH, NASAL SPRAY, INHALER, OR PRESCRIPTION MEDICATION. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
69	Q42	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR DOCTOR OR HEALTH PROVIDER DISCUSS OR PROVIDE METHODS AND STRATEGIES OTHER THAN MEDICATION TO ASSIST YOU WITH QUITTING SMOKING OR USING TOBACCO? EXAMPLES OF METHODS AND STRATEGIES ARE: TELEPHONE HELPLINE, INDIVIDUAL OR GROUP COUNSELING, OR CESSATION PROGRAM. [ASKED IF Q39 = EVERY DAY OR SOME DAYS]
70	Q43	DO YOU TAKE ASPIRIN DAILY OR EVERY OTHER DAY?
71	Q44	DO YOU HAVE A HEALTH PROBLEM OR TAKE MEDICATION THAT MAKES TAKING ASPIRIN UNSAFE FOR YOU?
72	Q45	HAS A DOCTOR OR HEALTH PROVIDER EVER DISCUSSED WITH YOU THE RISKS AND BENEFITS OF ASPIRIN TO PREVENT HEART ATTACK OR STROKE?
73	Q46.1	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH CHOLESTEROL
74	Q46.2	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: HIGH BLOOD PRESSURE
75	Q46.3	ARE YOU AWARE THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: PARENT OR SIBLING WITH HEART ATTACK BEFORE THE AGE OF 60
76	Q47.1	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A HEART ATTACK
77	Q47.2	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANGINA OR CORONARY HEART DISEASE
78	Q47.3	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: A STROKE
79	Q47.4	HAS A DOCTOR EVER TOLD YOU THAT YOU HAVE ANY OF THE FOLLOWING CONDITIONS? RESPONSE: ANY KIND OF DIABETES OR HIGH BLOOD SUGAR

PAGE	QUESTION	TITLE
80	Q48	IN THE LAST 6 MONTHS, DID YOU GET HEALTH CARE 3 OR MORE TIMES FOR THE SAME CONDITION OR PROBLEM?
81	Q49	IS THIS A CONDITION OR PROBLEM THAT HAS LASTED FOR AT LEAST 3 MONTHS? DO NOT INCLUDE PREGNANCY OR MENOPAUSE. [ASKED IF Q48 = YES]
82	Q50	DO YOU NOW NEED OR TAKE MEDICINE PRESCRIBED BY A DOCTOR? DO NOT INCLUDE BIRTH CONTROL.
83	Q51	IS THIS MEDICINE TO TREAT A CONDITION THAT HAS LASTED FOR AT LEAST 3 MONTHS? DO NOT INCLUDE PREGNANCY OR MENOPAUSE. [ASKED IF Q50 = YES]
84	NQ52	WHAT IS YOUR AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
85	NQ53	ARE YOU MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
86	Q54	WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?
87	Q55	ARE YOU OF HISPANIC OR LATINO ORIGIN OR DESCENT?
88	Q56.1	WHAT IS YOUR RACE? RESPONSE: WHITE
89	Q56.2	WHAT IS YOUR RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN
90	Q56.3	WHAT IS YOUR RACE? RESPONSE: ASIAN
91	Q56.4	WHAT IS YOUR RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
92	Q56.5	WHAT IS YOUR RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE
93	Q56.6	WHAT IS YOUR RACE? RESPONSE: OTHER
94	Q57	DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]
95	Q58.1	HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
96	Q58.2	HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
97	Q58.3	HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
98	Q58.4	HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]
99	Q58.5	HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY. [ASKED IF SURVEY COMPLETED BY MAIL AND Q57 = YES]

PAGE QUESTION TITLE

8. RATINGS

100 NQ13 RATING OF ALL HEALTH CARE [ASKED IF Q7 >= 1 TIME]  
101 NQ23 RATING OF PERSONAL DOCTOR [ASKED IF Q15 = YES]  
102 NQ27 RATING OF SPECIALIST SEEN MOST OFTEN [ASKED IF Q24 = YES AND Q26 >= 1 SPECIALIST]  
103 NQ35 RATING OF HEALTH PLAN  
104 NQ35Z RATING OF INTERPRETER [ASKED IF Q35R = SPANISH OR SOME OTHER LANGUAGE AND Q35U = YES AND 35W = SOMETIMES OR USUALLY OR ALWAYS]

9. COMPOSITES

105 GETTING NEEDED CARE  
106 GETTING CARE QUICKLY  
107 HOW WELL DOCTORS COMMUNICATE  
108 CUSTOMER SERVICE  
109 SHARED DECISION MAKING

10. GLOBAL PROPORTION COMPOSITES

110 GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
111 GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
112 HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
113 CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
114 SHARED DECISION MAKING (A LOT/YES + SOME) -- GLOBAL PROPORTION COMPOSITE

INDEX OF CHILD TABLES

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1. INTRODUCTION		
1	Q1	OUR RECORDS SHOW THAT YOUR CHILD IS NOW IN <HEALTH PLAN>. IS THAT RIGHT?
2. YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS		
2	Q3	IN THE LAST 6 MONTHS, DID YOUR CHILD HAVE AN ILLNESS, INJURY, OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE?
3	Q4	IN THE LAST 6 MONTHS, WHEN YOUR CHILD NEEDED CARE RIGHT AWAY, HOW OFTEN DID YOUR CHILD GET CARE AS SOON AS HE OR SHE NEEDED? [ASKED IF Q3 = YES]
4	Q5	IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC?
5	Q6	IN THE LAST 6 MONTHS, WHEN YOU MADE AN APPOINTMENT FOR A CHECK UP OR ROUTINE CARE FOR YOUR CHILD AT A DOCTOR'S OFFICE OR CLINIC, HOW OFTEN DID YOU GET AN APPOINTMENT AS SOON AS YOUR CHILD NEEDED? [ASKED IF Q5 = YES]
6	Q7	IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES YOUR CHILD WENT TO AN EMERGENCY ROOM, HOW MANY TIMES DID HE OR SHE GO TO A DOCTOR'S OFFICE OR CLINIC TO GET HEALTH CARE?
7	Q8	A HEALTH PROVIDER IS THE PERSON YOU WOULD SEE IF YOUR CHILD NEEDED A CHECK-UP, WANTED ADVICE ABOUT A HEALTH PROBLEM, OR GOT SICK OR HURT. IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT SPECIFIC THINGS YOU COULD DO TO PREVENT ILLNESS IN YOUR CHILD? [ASKED IF Q7 >= 1 TIME]
8	Q9	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE YOUR QUESTIONS ANSWERED BY YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER? [ASKED IF Q7 >= 1 TIME]
9	Q10	IN THE LAST 6 MONTHS, DID YOU AND YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT STARTING OR STOPPING A PRESCRIPTION MEDICINE FOR YOUR CHILD? [ASKED IF Q7 >= 1 TIME]
10	Q11	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT WANT YOUR CHILD TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
11	Q12	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, HOW MUCH DID A DOCTOR OR OTHER HEALTH PROVIDER TALK ABOUT THE REASONS YOU MIGHT NOT WANT YOUR CHILD TO TAKE A MEDICINE? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
12	Q13	WHEN YOU TALKED ABOUT YOUR CHILD STARTING OR STOPPING A PRESCRIPTION MEDICINE, DID A DOCTOR OR OTHER HEALTH PROVIDER ASK YOU WHAT YOU THOUGHT WAS BEST FOR YOUR CHILD? [ASKED IF Q7 >= 1 TIME AND Q10 = YES]
13	Q14	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH CARE POSSIBLE AND 10 IS THE BEST HEALTH CARE POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE ALL YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS? [ASKED IF Q7 >= 1]
14	Q15	IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THE CARE, TESTS, OR TREATMENT YOUR CHILD NEEDED? [ASKED IF Q7 >= 1 TIME]



- 15 Q16 IS YOUR CHILD NOW ENROLLED IN ANY KIND OF SCHOOL OR DAYCARE?
- 16 Q17 IN THE LAST 6 MONTHS, DID YOU NEED YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER TO CONTACT A SCHOOL OR DAYCARE CENTER ABOUT YOUR CHILD'S HEALTH OR HEALTH CARE? [ASKED IF Q16 = YES]
- 17 Q18 IN THE LAST 6 MONTHS, DID YOU GET THE HELP YOU NEEDED FROM YOUR CHILD'S DOCTOR OR OTHER HEALTH PROVIDER IN CONTACTING YOUR CHILD'S SCHOOL OR DAYCARE? [ASKED IF Q16 = YES AND Q17 = YES]

3. SPECIALIZED SERVICES

- 18 Q19 SPECIAL MEDICAL EQUIPMENT OR DEVICES INCLUDE A WALKER, WHEELCHAIR, NEBULIZER, FEEDING TUBES, OR OXYGEN EQUIPMENT. IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET ANY SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD?
- 19 Q20 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD? [ASKED IF Q19 = YES]
- 20 Q21 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET SPECIAL MEDICAL EQUIPMENT OR DEVICES FOR YOUR CHILD? [ASKED IF Q19 = YES]
- 21 Q22 IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET SPECIAL THERAPY SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY FOR YOUR CHILD?
- 22 Q23 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS THERAPY FOR YOUR CHILD? [ASKED IF Q22 = YES]
- 23 Q24 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS THERAPY FOR YOUR CHILD? [ASKED IF Q22 = YES]
- 24 Q25 IN THE LAST 6 MONTHS, DID YOU GET OR TRY TO GET TREATMENT OR COUNSELING FOR YOUR CHILD FOR AN EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEM?
- 25 Q26 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD? [ASKED IF Q25 = YES]
- 26 Q27 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE OR CLINIC HELP YOU GET THIS TREATMENT OR COUNSELING FOR YOUR CHILD? [ASKED IF Q25 = YES]
- 27 Q28 IN THE LAST 6 MONTHS, DID YOUR CHILD GET CARE FROM MORE THAN ONE KIND OF HEALTH CARE PROVIDER OR USE MORE THAN ONE KIND OF HEALTH CARE SERVICE?
- 28 Q29 IN THE LAST 6 MONTHS, DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP COORDINATE YOUR CHILD'S CARE AMONG THESE DIFFERENT PROVIDERS OR SERVICES? [ASKED IF Q28 = YES]

PAGE	QUESTION	TITLE
4. YOUR CHILD'S PERSONAL DOCTOR		
29	Q30	A PERSONAL DOCTOR IS THE ONE YOUR CHILD WOULD SEE IF HE OR SHE NEEDS A CHECKUP, HAS A HEALTH PROBLEM, OR GETS SICK OR HURT. DOES YOUR CHILD HAVE A PERSONAL DOCTOR?
30	Q31	IN THE LAST 6 MONTHS, HOW MANY TIMES DID YOUR CHILD VISIT HIS OR HER PERSONAL DOCTOR FOR CARE? [ASKED IF Q30 = YES]
31	Q31A	IN THE LAST 6 MONTHS, HOW OFTEN DID YOU HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING YOUR CHILD'S PERSONAL DOCTOR BECAUSE YOU SPOKE DIFFERENT LANGUAGES? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
32	Q32	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS ABOUT YOUR CHILD'S HEALTH IN A WAY THAT WAS EASY TO UNDERSTAND? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
33	Q33	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR LISTEN CAREFULLY TO YOU? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
34	Q34	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SHOW RESPECT FOR WHAT YOU HAD TO SAY? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
35	Q35	IS YOUR CHILD ABLE TO TALK WITH DOCTORS ABOUT HIS OR HER HEALTH CARE? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
36	Q35A	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD HAVE A HARD TIME SPEAKING WITH OR UNDERSTANDING HIS OR HER PERSONAL DOCTOR BECAUSE THEY SPOKE DIFFERENT LANGUAGES? [ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q35 = YES]
37	Q36	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR EXPLAIN THINGS IN A WAY THAT WAS EASY FOR YOUR CHILD TO UNDERSTAND? [ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q35 = YES]
38	Q37	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SPEND ENOUGH TIME WITH YOUR CHILD? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
39	Q38	IN THE LAST 6 MONTHS, DID YOUR CHILD'S PERSONAL DOCTOR TALK WITH YOU ABOUT HOW YOUR CHILD IS FEELING, GROWING, OR BEHAVING? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
40	Q39	IN THE LAST 6 MONTHS, DID YOUR CHILD GET CARE FROM A DOCTOR OR OTHER HEALTH PROVIDER BESIDES HIS OR HER PERSONAL DOCTOR? [ASKED IF Q30 = YES AND Q31 >= 1 TIME]
41	Q40	IN THE LAST 6 MONTHS, HOW OFTEN DID YOUR CHILD'S PERSONAL DOCTOR SEEM INFORMED AND UP-TO-DATE ABOUT THE CARE YOUR CHILD GOT FROM THESE DOCTORS OR OTHER HEALTH PROVIDERS? [ASKED IF Q30 = YES AND Q31 >= 1 TIME AND Q39 = YES]
42	Q41	USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST PERSONAL DOCTOR POSSIBLE AND 10 IS THE BEST PERSONAL DOCTOR POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S PERSONAL DOCTOR? [ASKED IF Q30 = YES]
43	Q42	DOES YOUR CHILD HAVE ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS THAT HAVE LASTED FOR MORE THAN 3 MONTHS? [ASKED IF Q30 = YES]
44	Q43	DOES YOUR CHILD'S PERSONAL DOCTOR UNDERSTAND HOW THESE MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS AFFECT YOUR CHILD'S DAY-TO-DAY LIFE? [ASKED IF Q30 = YES AND Q42 = YES]
45	Q44	DOES YOUR CHILD'S PERSONAL DOCTOR UNDERSTAND HOW YOUR CHILD'S MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS AFFECT YOUR FAMILY'S DAY-TO-DAY LIFE? [ASKED IF Q30 = YES AND Q42 = YES]

PAGE QUESTION TITLE

5. GETTING HEALTH CARE FROM SPECIALISTS

46 Q45 SPECIALISTS ARE DOCTORS LIKE SURGEONS, HEART DOCTORS, ALLERGY DOCTORS, SKIN DOCTORS, AND OTHER DOCTORS WHO SPECIALIZE IN ONE AREA OF HEALTH CARE. IN THE LAST 6 MONTHS, DID YOU MAKE ANY APPOINTMENTS FOR YOUR CHILD TO SEE A SPECIALIST?

47 Q46 IN THE LAST 6 MONTHS, HOW OFTEN DID YOU GET AN APPOINTMENT FOR YOUR CHILD TO SEE A SPECIALIST AS SOON AS YOU NEEDED? [ASKED IF Q45 = YES]

48 Q47 HOW MANY SPECIALISTS HAS YOUR CHILD SEEN IN THE LAST 6 MONTHS? [ASKED IF Q45 = YES]

49 Q48 WE WANT TO KNOW YOUR RATING OF THE SPECIALIST YOUR CHILD SAW MOST OFTEN IN THE LAST 6 MONTHS. USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST SPECIALIST POSSIBLE AND 10 IS THE BEST SPECIALIST POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE THAT SPECIALIST? [ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]

6. YOUR CHILD'S HEALTH PLAN

50 Q49 IN THE LAST 6 MONTHS, DID YOU GET INFORMATION OR HELP FROM CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN?

51 Q50 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE AT YOUR CHILD'S HEALTH PLAN GIVE YOU THE INFORMATION OR HELP YOU NEEDED? [ASKED IF Q49 = YES]

52 Q51 IN THE LAST 6 MONTHS, HOW OFTEN DID CUSTOMER SERVICE STAFF AT YOUR CHILD'S HEALTH PLAN TREAT YOU WITH COURTESY AND RESPECT? [ASKED IF Q49 = YES]

53 Q52 IN THE LAST 6 MONTHS, DID YOUR CHILD'S HEALTH PLAN GIVE YOU ANY FORMS TO FILL OUT?

54 PQ53 IN THE LAST 6 MONTHS, HOW OFTEN WERE THE FORMS FROM YOUR CHILD'S HEALTH PLAN EASY TO FILL OUT? [ASKED IF Q52 = YES. RESPONSE OF 'ALWAYS' PADDED WITH Q52 = NO]

55 Q54 USING ANY NUMBER FROM 0 TO 10, WHERE 0 IS THE WORST HEALTH PLAN POSSIBLE AND 10 IS THE BEST HEALTH PLAN POSSIBLE, WHAT NUMBER WOULD YOU USE TO RATE YOUR CHILD'S HEALTH PLAN?

PAGE QUESTION TITLE

7. PRESCRIPTION MEDICINES

56 Q55 IN THE LAST 6 MONTHS, DID YOU GET OR REFILL ANY PRESCRIPTION MEDICINES FOR YOUR CHILD?

57 Q56 IN THE LAST 6 MONTHS, HOW OFTEN WAS IT EASY TO GET PRESCRIPTION MEDICINES FOR YOUR CHILD THROUGH HIS OR HER HEALTH PLAN? [ASKED IF Q55 = YES]

58 Q57 DID ANYONE FROM YOUR CHILD'S HEALTH PLAN, DOCTOR'S OFFICE, OR CLINIC HELP YOU GET YOUR CHILD'S PRESCRIPTION MEDICINES? [ASKED IF Q55 = YES]

8. ABOUT YOUR CHILD AND YOU

- 59 Q58 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL HEALTH?
- 60 Q59 IN GENERAL, HOW WOULD YOU RATE YOUR CHILD'S OVERALL MENTAL OR EMOTIONAL HEALTH?
- 61 Q60 DOES YOUR CHILD CURRENTLY NEED OR USE MEDICINE PRESCRIBED BY A DOCTOR (OTHER THAN VITAMINS)?
- 62 Q61 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q60 = YES]
- 63 Q62 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q60 = YES AND Q61 = YES]
- 64 Q63 DOES YOUR CHILD NEED OR USE MORE MEDICAL CARE, MORE MENTAL HEALTH SERVICES, OR MORE EDUCATIONAL SERVICES THAN IS USUAL FOR MOST CHILDREN OF THE SAME AGE?
- 65 Q64 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q63 = YES]
- 66 Q65 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q63 = YES AND Q64 = YES]
- 67 Q66 IS YOUR CHILD LIMITED OR PREVENTED IN ANY WAY IN HIS OR HER ABILITY TO DO THE THINGS MOST CHILDREN OF THE SAME AGE CAN DO?
- 68 Q67 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q66 = YES]
- 69 Q68 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q66 = YES AND Q67 = YES]
- 70 Q69 DOES YOUR CHILD NEED OR GET SPECIAL THERAPY, SUCH AS PHYSICAL, OCCUPATIONAL, OR SPEECH THERAPY?
- 71 Q70 IS THIS BECAUSE OF ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITION? [ASKED IF Q69 = YES]
- 72 Q71 IS THIS A CONDITION THAT HAS LASTED OR IS EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q69 = YES AND Q70 = YES]
- 73 Q72 DOES YOUR CHILD HAVE ANY KIND OF EMOTIONAL, DEVELOPMENTAL, OR BEHAVIORAL PROBLEMS FOR WHICH HE OR SHE NEEDS OR GETS TREATMENT OR COUNSELING?
- 74 Q73 HAS THIS PROBLEM LASTED OR IS IT EXPECTED TO LAST FOR AT LEAST 12 MONTHS? [ASKED IF Q72 = YES]
- 75 NQ74 WHAT IS YOUR CHILD'S AGE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 76 NQ75 IS YOUR CHILD MALE OR FEMALE? [BASED ON SURVEY RESPONSE OR ON SAMPLE DATA IF RESPONSE NOT GIVEN]
- 77 Q76 IS YOUR CHILD OF HISPANIC OR LATINO ORIGIN OR DESCENT?
- 78 Q77.1 WHAT IS YOUR CHILD'S RACE? RESPONSE: WHITE
- 79 Q77.2 WHAT IS YOUR CHILD'S RACE? RESPONSE: BLACK OR AFRICAN-AMERICAN
- 80 Q77.3 WHAT IS YOUR CHILD'S RACE? RESPONSE: ASIAN
- 81 Q77.4 WHAT IS YOUR CHILD'S RACE? RESPONSE: NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
- 82 Q77.5 WHAT IS YOUR CHILD'S RACE? RESPONSE: AMERICAN INDIAN OR ALASKA NATIVE
- 83 Q77.6 WHAT IS YOUR CHILD'S RACE? RESPONSE: OTHER
- 84 Q78 WHAT IS YOUR AGE?
- 85 Q79 ARE YOU MALE OR FEMALE?

86 Q80 WHAT IS THE HIGHEST GRADE OR LEVEL OF SCHOOL THAT YOU HAVE COMPLETED?

87 Q81 HOW ARE YOU RELATED TO THE CHILD?

88 Q82 DID SOMEONE HELP YOU COMPLETE THIS SURVEY? [ASKED IF SURVEY COMPLETED BY MAIL]

89 Q83.1 HOW DID THAT PERSON HELP YOU? RESPONSE: READ THE QUESTIONS TO ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

90 Q83.2 HOW DID THAT PERSON HELP YOU? RESPONSE: WROTE DOWN THE ANSWERS I GAVE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

91 Q83.3 HOW DID THAT PERSON HELP YOU? RESPONSE: ANSWERED THE QUESTIONS FOR ME. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

92 Q83.4 HOW DID THAT PERSON HELP YOU? RESPONSE: TRANSLATED THE QUESTIONS INTO MY LANGUAGE. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

93 Q83.5 HOW DID THAT PERSON HELP YOU? RESPONSE: HELPED IN SOME OTHER WAY. [ASKED IF SURVEY COMPLETED BY MAIL AND Q82 = YES]

PAGE QUESTION TITLE

9. RATINGS

94 NQ14 RATING OF ALL CHILD'S HEALTH CARE [ASKED IF Q7 >= 1 TIME]

95 NQ41 RATING OF CHILD'S PERSONAL DOCTOR [ASKED IF Q30 = YES]

96 NQ48 RATING OF SPECIALIST CHILD SAW MOST OFTEN [ASKED IF Q45 = YES AND Q47 >= 1 SPECIALIST]

97 NQ54 RATING OF CHILD'S HEALTH PLAN

10. COMPOSITES

98 GETTING NEEDED CARE

99 GETTING CARE QUICKLY

100 HOW WELL DOCTORS COMMUNICATE

101 CUSTOMER SERVICE

102 SHARED DECISION MAKING

103 ACCESS TO SPECIALIZED SERVICES

11. GLOBAL PROPORTION COMPOSITES

104 GETTING NEEDED CARE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

105 GETTING CARE QUICKLY (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

106 HOW WELL DOCTORS COMMUNICATE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

107 CUSTOMER SERVICE (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE

108 SHARED DECISION MAKING (A LOT/YES + SOME) -- GLOBAL PROPORTION COMPOSITE  
109 ACCESS TO SPECIALIZED SERVICES (ALWAYS + USUALLY) -- GLOBAL PROPORTION COMPOSITE  
110 PERSONAL DOCTOR WHO KNOWS CHILD (YES) -- GLOBAL PROPORTION COMPOSITE  
111 CARE COORDINATION (YES) -- GLOBAL PROPORTION COMPOSITE

Your privacy is protected. All information that would let someone identify you or your family will be kept private. The research staff will not share your personal information with anyone without your OK.

You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the cover of this survey. This number is **ONLY** used to let us know if you returned the survey so we don't have to send you reminders.

If you want to know more about this study, please call 1-888-506-5136 (or, for the hearing-impaired, call 1-888-631-2097).

**SURVEY INSTRUCTIONS**

- Please be sure to fill the response circle completely. Use only black or blue ink or dark pencil to complete the survey.

Correct  
Mark 

Incorrect  
Marks



- You are sometimes told to skip over some questions in the survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

1. Our records show that you are now in the Oregon Health Plan. Is that right?

- Yes → *Go to Question 3*
- No

2. What is the name of your health plan? (Please print)

\_\_\_\_\_

## YOUR HEALTH CARE IN THE LAST 6 MONTHS

These questions ask about your own health care. Do not include care you got when you stayed overnight in a hospital. Do not include the times you went for dental care visits.

3. In the last 6 months, did you have an illness, injury, or condition that needed care right away in a clinic, emergency room, or doctor's office?

- Yes
- No → *Go to Question 5*

4. In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?

- Never
- Sometimes
- Usually
- Always

5. In the last 6 months, did you make any appointments for a check-up or routine care at a doctor's office or clinic?

- Yes
- No → *Go to Question 7*

6. In the last 6 months, how often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?

- Never
- Sometimes
- Usually
- Always

7. In the last 6 months, not counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself?

- None → *Go to Question 15*
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

8. In the last 6 months, did you and a doctor or other health provider talk about specific things you could do to prevent illness?

- Yes
- No

9. In the last 6 months, did you and a doctor or other health provider talk about starting or stopping a prescription medicine?

- Yes
- No → *Go to Question 13*

10. When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want to take a medicine?

- Not at all
- A little
- Some
- A lot



11. When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might not want to take a medicine?

- Not at all
- A little
- Some
- A lot

12. When you talked about starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for you?

- Yes
- No

13. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?

- |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |             |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-------------|
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| 0                     | 1                     | 2                     | 3                     | 4                     | 5                     | 6                     | 7                     | 8                     | 9                     | 10                    |             |
| Worst                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | Best        |
| Health Care           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | Health Care |
| Possible              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | Possible    |

14. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?

- Never
- Sometimes
- Usually
- Always

## YOUR PERSONAL DOCTOR

15. A personal doctor is the one you would see if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?

- Yes
- No → *Go to Question 24*

16. In the last 6 months, how many times did you visit your personal doctor to get care for yourself?

- None → *Go to Question 23*
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

17. In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?

- Never
- Sometimes
- Usually
- Always

18. In the last 6 months, how often did your personal doctor listen carefully to you?

- Never
- Sometimes
- Usually
- Always

19. In the last 6 months, how often did your personal doctor show respect for what you had to say?

- Never
- Sometimes
- Usually
- Always

20. In the last 6 months, how often did your personal doctor spend enough time with you?

- Never
- Sometimes
- Usually
- Always

21. In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor?

- Yes
- No → *Go to Question 23*

22. In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?

- Never
- Sometimes
- Usually
- Always

23. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?

- 0    1    2    3    4    5    6    7    8    9    10  
 Worst Personal Doctor Possible                      Best Personal Doctor Possible

## GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, do not include dental visits or care you got when you stayed overnight in a hospital.

24. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you make any appointments to see a specialist?

- Yes
- No → *Go to Question 28*

25. In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed?

- Never
- Sometimes
- Usually
- Always

26. How many specialists have you seen in the last 6 months?

- None → *Go to Question 28*
- 1 specialist
- 2
- 3
- 4
- 5 or more specialists

27. We want to know your rating of the specialist you saw most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

- 0    1    2    3    4    5    6    7    8    9    10  
 Worst Specialist Possible                      Best Specialist Possible



## YOUR HEALTH PLAN

The next questions ask about your experience with your health plan.

28. In the last 6 months, did you look for any information in written materials or on the Internet about how your health plan works?

- Yes
- No → *Go to Question 30*

29. In the last 6 months, how often did the written materials or the Internet provide the information you needed about how your health plan works?

- Never
- Sometimes
- Usually
- Always

30. In the last 6 months, did you get information or help from your health plan's customer service?

- Yes
- No → *Go to Question 33*

31. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?

- Never
- Sometimes
- Usually
- Always

32. In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect?

- Never
- Sometimes
- Usually
- Always

33. In the last 6 months, did your health plan give you any forms to fill out?

- Yes
- No → *Go to Question 35*

34. In the last 6 months, how often were the forms from your health plan easy to fill out?

- Never
- Sometimes
- Usually
- Always

35. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

- |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
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| 0                     | 1                     | 2                     | 3                     | 4                     | 5                     | 6                     | 7                     | 8                     | 9                     | 10                    |
| Worst                 |                       |                       |                       |                       | Best                  |                       |                       |                       |                       |                       |
| Health Plan           |                       |                       |                       |                       | Health Plan           |                       |                       |                       |                       |                       |
| Possible              |                       |                       |                       |                       | Possible              |                       |                       |                       |                       |                       |

35a. In the last 6 months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, or oxygen equipment?

- Yes
- No → *Go to Question 35c*

35b. In the last 6 months, how often was it easy to get the medical equipment you needed through your health plan?

- Never
- Sometimes
- Usually
- Always



**35c. In the last 6 months, did you have any health problems that needed special therapy, such as physical, occupational, or speech therapy?**

- Yes
- No → *Go to Question 35e*

**35d. In the last 6 months, how often was it easy to get the special therapy you needed through your health plan?**

- Never
- Sometimes
- Usually
- Always

### CULTURAL COMPETENCY

The following questions ask about how much you think your doctor or other health provider respects your beliefs, attitudes, language and behavior.

A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse or anyone else you would see for health care.

**35e. In the last 6 months, how often did a doctor or other health provider talk too fast when talking to you?**

- Never
- Sometimes
- Usually
- Always

**35f. In the last 6 months, how often did a doctor or other health provider interrupt you when you were talking?**

- Never
- Sometimes
- Usually
- Always

**35g. In the last 6 months, how often did a doctor or other health provider use a condescending, sarcastic or rude tone or manner with you?**

- Never
- Sometimes
- Usually
- Always

**35h. In the last 6 months, did you feel you could tell a doctor or other health provider anything, even things that you might not tell anyone else?**

- Yes, definitely
- Yes, somewhat
- No

**35i. In the last 6 months, did you feel you could trust a doctor or other health provider with your medical care?**

- Yes, definitely
- Yes, somewhat
- No

**35j. In the last 6 months, did you feel a doctor or other health provider always told you the truth about your health, even if there was bad news?**

- Yes, definitely
- Yes, somewhat
- No

**35k. In the last 6 months, did you feel this provider cared as much as you do about your health?**

- Yes, definitely
- Yes, somewhat
- No

35l. In the last 6 months, did you feel this provider really cared about you as a person?

- Never
- Sometimes
- Usually
- Always

35m. In the last 6 months, how often have you been treated unfairly at a doctor or other health provider's office because of your race or ethnicity?

- Never
- Sometimes
- Usually
- Always

35n. In the last 6 months, how often have you been treated unfairly at a doctor or other health provider's office because of the type of health insurance you have or because you do not have health insurance?

- Never
- Sometimes
- Usually
- Always

### HEALTH LITERACY

The following questions ask about how much you think your doctor or other health provider helps you understand the information and services you need to make decisions about your health.

35o. In the last 6 months, how often did a doctor or other health provider give you all the information you wanted about your health?

- Never
- Sometimes
- Usually
- Always

35p. In the last 6 months, how often did a doctor or other health provider encourage you to talk about all your health questions or concerns?

- Never
- Sometimes
- Usually
- Always

35q. In the last 6 months, how often did a doctor or other health provider use medical words you did not understand?

- Never
- Sometimes
- Usually
- Always

### INTERPRETER SERVICES

35r. What is your preferred language?

- English → *Go to Question 36*
- Spanish
- Some other language

35s. How well do you speak English?

- Very well
- Well
- Not well
- Not at all

35t. In the last 6 months, when you called or spoke to someone from your health plan, how often did they speak to you in your preferred language?

- Never
- Sometimes
- Usually
- Always



**35u. An interpreter is someone who helps you talk with others who do not speak your language. Interpreters can include staff from the health plan or telephone interpreters.**

**In the last 6 months, was there any time when you needed an interpreter to talk with someone from your health plan?**

- Yes
- No → **Go to Question 36**

**35v. In the last 6 months, did anyone from the health plan let you know that an interpreter was available free of charge?**

- Never
- Sometimes
- Usually
- Always

**35w. In the last 6 months, how often did you use an interpreter provided by your health plan to help you talk with someone from the plan?**

- Never → **Go to Question 35aa**
- Sometimes
- Usually
- Always

**35x. In the last 6 months, when you used an interpreter provided by your health plan, who was the interpreter you used most often?**

- A staff member from the health plan
- An interpreter provided in-person by the health plan
- A telephone interpreter provided by the health plan
- Someone else provided by the health plan
- Don't know or unsure

**35y. In the last 6 months, how often did this interpreter treat you with courtesy and respect?**

- Never
- Sometimes
- Usually
- Always

**35z. Using any number from 0 to 10, where 0 is the worst interpreter possible and 10 is the best interpreter possible, what number would you use to rate this interpreter?**

- |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 0                     | 1                     | 2                     | 3                     | 4                     | 5                     | 6                     | 7                     | 8                     | 9                     | 10                    |
| Worst                 |                       |                       |                       |                       |                       |                       |                       | Best                  |                       |                       |
| Interpreter           |                       |                       |                       |                       |                       |                       |                       | Interpreter           |                       |                       |
| Possible              |                       |                       |                       |                       |                       |                       |                       | Possible              |                       |                       |

**35aa. In the last 6 months, how often did you use a friend or family member as an interpreter when you talked with someone from your health plan?**

- Never → **Go to Question 36**
- Sometimes
- Usually
- Always

**35ab. In the last 6 months, did you use friends or family members as interpreters because that was what you preferred?**

- Never
- Sometimes
- Usually
- Always

## ABOUT YOU

36. In general, how would you rate your overall health?

- Excellent
- Very Good
- Good
- Fair
- Poor

37. In general, how would you rate your overall mental or emotional health?

- Excellent
- Very Good
- Good
- Fair
- Poor

38. Have you had either a flu shot or flu spray in the nose since July 1, 2013?

- Yes
- No
- Don't know

39. Do you now smoke cigarettes or use tobacco every day, some days, or not at all?

- Every day
- Some days
- Not at all → *Go to Question 43*
- Don't know → *Go to Question 43*

40. In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?

- Never
- Sometimes
- Usually
- Always

41. In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.

- Never
- Sometimes
- Usually
- Always

42. In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.

- Never
- Sometimes
- Usually
- Always

43. Do you take aspirin daily or every other day?

- Yes
- No
- Don't know

44. Do you have a health problem or take medication that makes taking aspirin unsafe for you?

- Yes
- No
- Don't know

45. Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke?

- Yes
- No

◆

46. Are you aware that you have any of the following conditions? Mark all that apply.

- High cholesterol
- High blood pressure
- Parent or sibling with heart attack before the age of 60

47. Has a doctor ever told you that you have any of the following conditions? Mark all that apply.

- A heart attack
- Angina or coronary heart disease
- A stroke
- Any kind of diabetes or high blood sugar

48. In the last 6 months, did you get health care 3 or more times for the same condition or problem?

- Yes
- No → *Go to Question 50*

49. Is this a condition or problem that has lasted for at least 3 months? Do not include pregnancy or menopause.

- Yes
- No

50. Do you now need or take medicine prescribed by a doctor? Do not include birth control.

- Yes
- No → *Go to Question 52*

51. Is this medicine to treat a condition that has lasted for at least 3 months? Do not include pregnancy or menopause.

- Yes
- No

◆

52. What is your age?

- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 or older

53. Are you male or female?

- Male
- Female

54. What is the highest grade or level of school that you have completed?

- 8th grade or less
- Some high school, but did not graduate
- High school graduate or GED
- Some college or 2-year degree
- 4-year college graduate
- More than 4-year college degree

55. Are you of Hispanic or Latino origin or descent?

- Yes, Hispanic or Latino
- No, Not Hispanic or Latino

56. What is your race? Mark one or more.

- White
- Black or African-American
- Asian
- Native Hawaiian or other Pacific Islander
- American Indian or Alaska Native
- Other (Please print)

---

57. Did someone help you complete this survey?

- Yes → *Go to Question 58*
- No → *Thank you. Please return the completed survey in the postage-paid envelope.*



◆ \_\_\_\_\_ ◆  
**58. How did that person help you? Mark one or more.**

- Read the questions to me
  - Wrote down the answers I gave
  - Answered the questions for me
  - Translated the questions into my language
  - Helped in some other way  
(Please print)
- \_\_\_\_\_

**THANK YOU**

**Thanks again for taking the time to complete this survey! Your answers are greatly appreciated.**

**When you are done, please use the enclosed prepaid envelope to mail the survey to:**

**DataStat, 3975 Research Park Drive, Ann Arbor, MI 48108**





448-12



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CTYAD

Your privacy is protected. All information that would let someone identify you or your family will be kept private. The research staff will not share your personal information with anyone without your OK.

You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the cover of this survey. This number is **ONLY** used to let us know if you returned the survey so we don't have to send you reminders.

If you want to know more about this study, please call 1-888-506-5136 (or, for the hearing-impaired, call 1-888-631-2097).

**SURVEY INSTRUCTIONS**

- Please be sure to fill the response circle completely. Use only black or blue ink or dark pencil to complete the survey.

Correct  
Mark 

Incorrect  
Marks



- You are sometimes told to skip over some questions in the survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

- Yes → *Go to Question 1*
- No

↓ **START HERE** ↓

Please answer the questions for the child listed on the envelope. Please do not answer for any other children.

1. Our records show that your child is now in the Oregon Health Plan. Is that right?
  - Yes → *Go to Question 3*
  - No
2. What is the name of your child's health plan? (Please print)

\_\_\_\_\_

**YOUR CHILD'S HEALTH CARE  
IN THE LAST 6 MONTHS**

These questions ask about your child's health care. Do not include care your child got when he or she stayed overnight in a hospital. Do not include the times your child went for dental care visits.

- 3. In the last 6 months, did your child have an illness, injury, or condition that needed care right away in a clinic, emergency room, or doctor's office?  
 Yes  
 No → *Go to Question 5*
  
- 4. In the last 6 months, when your child needed care right away, how often did your child get care as soon as he or she needed?  
 Never  
 Sometimes  
 Usually  
 Always
  
- 5. In the last 6 months, did you make any appointments for a check-up or routine care for your child at a doctor's office or clinic?  
 Yes  
 No → *Go to Question 7*
  
- 6. In the last 6 months, when you made an appointment for a check-up or routine care for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed?  
 Never  
 Sometimes  
 Usually  
 Always

- 7. In the last 6 months, not counting the times your child went to an emergency room, how many times did he or she go to a doctor's office or clinic to get health care?  
 None → *Go to Question 16*  
 1 time  
 2  
 3  
 4  
 5 to 9  
 10 or more times
  
- 8. In the last 6 months, did you and your child's doctor or other health provider talk about specific things you could do to prevent illness in your child?  
 Yes  
 No
  
- 9. In the last 6 months, how often did you have your questions answered by your child's doctor or other health provider?  
 Never  
 Sometimes  
 Usually  
 Always
  
- 10. In the last 6 months, did you and your child's doctor or other health provider talk about starting or stopping a prescription medicine for your child?  
 Yes  
 No → *Go to Question 14*
  
- 11. When you talked about your child starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want your child to take a medicine?  
 Not at all  
 A little  
 Some  
 A lot



12. When you talked about your child starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might not want your child to take a medicine?
- Not at all
  - A little
  - Some
  - A lot
13. When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?
- Yes
  - No
14. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?
- 
- 0 1 2 3 4 5 6 7 8 9 10
- Worst Health Care Possible Best Health Care Possible
15. In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?
- Never
  - Sometimes
  - Usually
  - Always
16. Is your child now enrolled in any kind of school or daycare?
- Yes
  - No → **Go to Question 19**

17. In the last 6 months, did you need your child's doctor or other health provider to contact a school or daycare center about your child's health or health care?
- Yes
  - No → **Go to Question 19**
18. In the last 6 months, did you get the help you needed from your child's doctor or other health provider in contacting your child's school or daycare?
- Yes
  - No

**SPECIALIZED SERVICES**

19. Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment.
- In the last 6 months, did you get or try to get any special medical equipment or devices for your child?
- Yes
  - No → **Go to Question 22**
20. In the last 6 months, how often was it easy to get special medical equipment or devices for your child?
- Never
  - Sometimes
  - Usually
  - Always
21. Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?
- Yes
  - No



22. In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

- Yes
- No → *Go to Question 25*

23. In the last 6 months, how often was it easy to get this therapy for your child?

- Never
- Sometimes
- Usually
- Always

24. Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?

- Yes
- No

25. In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

- Yes
- No → *Go to Question 28*

26. In the last 6 months, how often was it easy to get this treatment or counseling for your child?

- Never
- Sometimes
- Usually
- Always

27. Did anyone from your child's health plan, doctor's office, or clinic help you get this treatment or counseling for your child?

- Yes
- No

28. In the last 6 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

- Yes
- No → *Go to Question 30*

29. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

- Yes
- No

### **YOUR CHILD'S PERSONAL DOCTOR**

30. A personal doctor is the one your child would see if he or she needs a checkup, has a health problem or gets sick or hurt. Does your child have a personal doctor?

- Yes
- No → *Go to Question 45*

31. In the last 6 months, how many times did your child visit his or her personal doctor for care?

- None → *Go to Question 41*
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

31a. In the last 6 months, how often did you have a hard time speaking with or understanding your child's personal doctor because you spoke different languages?

- Never
- Sometimes
- Usually
- Always

32. In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?

- Never
- Sometimes
- Usually
- Always

33. In the last 6 months, how often did your child's personal doctor listen carefully to you?

- Never
- Sometimes
- Usually
- Always

34. In the last 6 months, how often did your child's personal doctor show respect for what you had to say?

- Never
- Sometimes
- Usually
- Always

35. Is your child able to talk with doctors about his or her health care?

- Yes
- No → **Go to Question 37**

35a. In the last 6 months, how often did your child have a hard time speaking with or understanding his or her personal doctor because they spoke different languages?

- Never
- Sometimes
- Usually
- Always

36. In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for your child to understand?

- Never
- Sometimes
- Usually
- Always

37. In the last 6 months, how often did your child's personal doctor spend enough time with your child?

- Never
- Sometimes
- Usually
- Always

38. In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

- Yes
- No

39. In the last 6 months, did your child get care from a doctor or other health provider besides his or her personal doctor?

- Yes
- No → **Go to Question 41**

40. In the last 6 months, how often did your child's personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers?

- Never
- Sometimes
- Usually
- Always



41. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?

0 1 2 3 4 5 6 7 8 9 10

Worst Personal Doctor Possible                      Best Personal Doctor Possible

42. Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 months?

- Yes
- No → **Go to Question 45**

43. Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?

- Yes
- No

44. Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your family's day-to-day life?

- Yes
- No

## GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, do not include dental visits or care your child got when he or she stayed overnight in a hospital.

45. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you make any appointments for your child to see a specialist?

- Yes
- No → **Go to Question 49**

46. In the last 6 months, how often did you get an appointment for your child to see a specialist as soon as you needed?

- Never
- Sometimes
- Usually
- Always

47. How many specialists has your child seen in the last 6 months?

- None → **Go to Question 49**
- 1 specialist
- 2
- 3
- 4
- 5 or more specialists



48. We want to know your rating of the specialist your child saw most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

0 1 2 3 4 5 6 7 8 9 10

Worst Specialist Possible                      Best Specialist Possible

**YOUR CHILD'S HEALTH PLAN**

The next questions ask about your experience with your child's health plan.

49. In the last 6 months, did you get information or help from customer service at your child's health plan?

Yes  
 No → *Go to Question 52*

50. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?

Never  
 Sometimes  
 Usually  
 Always

51. In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?

Never  
 Sometimes  
 Usually  
 Always

52. In the last 6 months, did your child's health plan give you any forms to fill out?

Yes  
 No → *Go to Question 54*

53. In the last 6 months, how often were the forms from your child's health plan easy to fill out?

Never  
 Sometimes  
 Usually  
 Always

54. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child's health plan?

0 1 2 3 4 5 6 7 8 9 10

Worst Health Plan Possible                      Best Health Plan Possible

**PRESCRIPTION MEDICINES**

55. In the last 6 months, did you get or refill any prescription medicines for your child?

Yes  
 No → *Go to Question 58*

56. In the last 6 months, how often was it easy to get prescription medicines for your child through his or her health plan?

Never  
 Sometimes  
 Usually  
 Always



57. Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?

- Yes
- No

**ABOUT YOUR CHILD AND YOU**

58. In general, how would you rate your child's overall health?

- Excellent
- Very good
- Good
- Fair
- Poor

59. In general, how would you rate your child's overall mental or emotional health?

- Excellent
- Very good
- Good
- Fair
- Poor

60. Does your child currently need or use medicine prescribed by a doctor (other than vitamins)?

- Yes
- No → *Go to Question 63*

61. Is this because of any medical, behavioral, or other health condition?

- Yes
- No → *Go to Question 63*

62. Is this a condition that has lasted or is expected to last for at least 12 months?

- Yes
- No

63. Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

- Yes
- No → *Go to Question 66*

64. Is this because of any medical, behavioral, or other health condition?

- Yes
- No → *Go to Question 66*

65. Is this a condition that has lasted or is expected to last for at least 12 months?

- Yes
- No

66. Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do?

- Yes
- No → *Go to Question 69*

67. Is this because of any medical, behavioral, or other health condition?

- Yes
- No → *Go to Question 69*

68. Is this a condition that has lasted or is expected to last for at least 12 months?

- Yes
- No

69. Does your child need or get special therapy such as physical, occupational, or speech therapy?

- Yes
- No → *Go to Question 72*



70. Is this because of any medical, behavioral, or other health condition?

- Yes
- No → *Go to Question 72*

71. Is this a condition that has lasted or is expected to last for at least 12 months?

- Yes
- No

72. Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?

- Yes
- No → *Go to Question 74*

73. Has this problem lasted or is it expected to last for at least 12 months?

- Yes
- No

74. What is your child's age?

- Less than 1 year old

YEARS OLD (write in)

75. Is your child male or female?

- Male
- Female

76. Is your child of Hispanic or Latino origin or descent?

- Yes, Hispanic or Latino
- No, Not Hispanic or Latino

77. What is your child's race? Mark one or more.

- White
- Black or African-American
- Asian
- Native Hawaiian or other Pacific Islander
- American Indian or Alaska Native
- Other (Please print)

78. What is your age?

- Under 18
- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 or older

79. Are you male or female?

- Male
- Female

80. What is the highest grade or level of school that you have completed?

- 8th grade or less
- Some high school, but did not graduate
- High school graduate or GED
- Some college or 2-year degree
- 4-year college graduate
- More than 4-year college degree

81. How are you related to the child?

- Mother or father
- Grandparent
- Aunt or uncle
- Older brother or sister
- Other relative
- Legal guardian
- Someone else

82. Did someone help you complete this survey?

- Yes → **Go to Question 83**
- No → **Thank you. Please return the completed survey in the postage-paid envelope.**

83. How did that person help you? Mark one or more.

- Read the questions to me
  - Wrote down the answers I gave
  - Answered the questions for me
  - Translated the questions into my language
  - Helped in some other way  
(Please print)
- 

## THANK YOU

Thanks again for taking the time to complete this survey! Your answers are greatly appreciated.

When you are done, please use the enclosed prepaid envelope to mail the survey to:

**DataStat, 3975 Research Park Drive, Ann Arbor, MI 48108**







Sus respuestas a esta encuesta son completamente confidenciales. Toda información que pueda identificarle a usted o a su familia se mantendrá privada. El personal de investigación no divulgará su información personal sin su permiso.

Usted puede elegir si quiere contestar este cuestionario o no. Si decide no participar, esto no afectará los beneficios que usted recibe. El número en la cubierta de este cuestionario sirve para saber que ya envió su respuesta y que no hay que enviarle recordatorios.

Si quiere recibir más información acerca de este estudio, llame al 1-888-506-5136 (o, para personas con problemas de audición, llame al 1-888-631-2097).

**INSTRUCCIONES PARA EL CUESTIONARIO**

- ▶ Por favor llene el círculo de su respuesta completamente. Use solamente tinta NEGRA o AZUL para completar la encuesta.

Marca  
Correcta ●

Marca  
Incorrecta   

- ▶ A veces hay que saltarse alguna pregunta del cuestionario. Cuando esto ocurra, verá una flecha con una nota que le indicará cuál es la siguiente pregunta a la que tiene que pasar. Por ejemplo:

- Sí → *Pase a la Pregunta 1*
- No

↓ **COMIENCE AQUI** ↓

1. Nuestros registros muestran que usted está ahora con Oregon Health Plan. ¿Es correcta esta información?

- Sí → *Pase a la pregunta 3*
- No

2. ¿Cómo se llama su plan de salud? (Por favor escriba en letra de molde)

\_\_\_\_\_

## LA ATENCIÓN MÉDICA QUE USTED RECIBIÓ EN LOS ÚLTIMOS 6 MESES

Estas preguntas son acerca de la atención médica que usted ha recibido. **No** incluya la atención que recibió cuando pasó la noche hospitalizado. **No** incluya las consultas al dentista.

3. En los últimos 6 meses, ¿tuvo usted una enfermedad, lesión, o problema de salud para el cual necesitó atención inmediata en una clínica, en una sala de emergencia o en un consultorio médico?
- Sí  
 No → *Pase a la pregunta 5*
4. En los últimos 6 meses, cuando usted necesitó atención inmediata, ¿con qué frecuencia lo atendieron tan pronto como lo necesitaba?
- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre
5. En los últimos 6 meses, ¿hizo alguna cita para un chequeo o una consulta regular en un consultorio médico o en una clínica?
- Sí  
 No → *Pase a la pregunta 7*
6. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita para un chequeo o una consulta regular en un consultorio médico o en una clínica tan pronto como la necesitaba?
- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

7. En los últimos 6 meses, sin contar las veces en que fue a una sala de emergencia, ¿cuántas veces fue a un consultorio médico o a una clínica para recibir atención médica para usted mismo?
- Ninguna vez → *Pase a la pregunta 15*  
 1 vez  
 2  
 3  
 4  
 5 a 9  
 10 veces o más
8. En los últimos 6 meses, ¿hablaron usted y un doctor u otro profesional médico sobre cosas específicas que usted podría hacer para prevenir enfermedades?
- Sí  
 No
9. En los últimos 6 meses, ¿hablaron usted y un doctor u otro profesional médico sobre comenzar o suspender una medicina recetada?
- Sí  
 No → *Pase a la pregunta 13*
10. Cuando hablaron de comenzar o suspender una medicina recetada, ¿qué tanto habló un doctor u otro profesional médico sobre las razones por las que tal vez quiera tomar una medicina?
- Para nada  
 Un poco  
 Algo  
 Mucho





19. En los últimos 6 meses, ¿con qué frecuencia su doctor personal demostró respeto por lo que usted tenía que decir?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

20. En los últimos 6 meses, ¿con qué frecuencia su doctor personal pasó suficiente tiempo con usted?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

21. En los últimos 6 meses, ¿lo atendió algún doctor u otro profesional médico además de su doctor personal?

- Sí
- No → *Pase a la pregunta 23*

22. En los últimos 6 meses, ¿con qué frecuencia parecía su doctor personal estar informado y al día acerca de la atención que usted había recibido de estos doctores u otros profesionales médicos?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

23. Usando un número del 0 al 10, el 0 siendo el peor doctor personal posible y el 10 el mejor doctor personal posible, ¿qué número usaría para calificar a su doctor personal?

- 
- 0 1 2 3 4 5 6 7 8 9 10
- El peor doctor personal posible                      El mejor doctor personal posible

## LA ATENCIÓN MÉDICA QUE RECIBÍ DE ESPECIALISTAS

Al contestar las siguientes preguntas no incluya las veces que fue a ver al dentista ni la atención que recibió cuando pasó la noche hospitalizado.

24. Los especialistas son doctores que se especializan en un área de la medicina. Pueden ser cirujanos, doctores especialistas en el corazón, las alergias, la piel y otras áreas. En los últimos 6 meses, ¿hizo alguna cita con un especialista?

- Sí
- No → *Pase a la pregunta 28*

25. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita con un especialista tan pronto como usted la necesitaba?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

26. ¿Cuántos especialistas ha visto en los últimos 6 meses?

- Ninguno → *Pase a la pregunta 28*
- 1 especialista
- 2
- 3
- 4
- 5 especialistas o más

27. Queremos saber cómo califica al especialista al que fue con más frecuencia en los últimos 6 meses. Usando un número del 0 al 10, el 0 siendo el peor especialista posible y el 10 el mejor especialista posible, ¿qué número usaría para calificar al especialista?

○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○  
 0 1 2 3 4 5 6 7 8 9 10  
 El peor especialista posible El mejor especialista posible

**SU PLAN DE SALUD**

Las siguientes preguntas se refieren a su experiencia con su plan de salud.

28. En los últimos 6 meses, ¿buscó alguna información en materiales escritos o en la Internet sobre cómo funciona su plan de salud?

○ Sí  
 ○ No → *Pase a la pregunta 30*

29. En los últimos 6 meses, ¿con qué frecuencia encontró la información que usted necesitaba sobre como funciona su plan de salud en materiales escritos o en la Internet?

○ Nunca  
 ○ A veces  
 ○ La mayoría de las veces  
 ○ Siempre

30. En los últimos 6 meses, ¿recibió información o ayuda de parte del servicio al cliente de su plan de salud?

○ Sí  
 ○ No → *Pase a la pregunta 33*

31. En los últimos 6 meses, ¿con qué frecuencia el servicio al cliente de su plan de salud le dio la información o ayuda que usted necesitaba?

○ Nunca  
 ○ A veces  
 ○ La mayoría de las veces  
 ○ Siempre

32. En los últimos 6 meses, ¿con qué frecuencia el personal de servicio al cliente de su plan de salud le trató con cortesía y respeto?

○ Nunca  
 ○ A veces  
 ○ La mayoría de las veces  
 ○ Siempre

33. En los últimos 6 meses, ¿le dio su plan de salud algún formulario para que lo llenara?

○ Sí  
 ○ No → *Pase a la pregunta 35*

34. En los últimos 6 meses, ¿con qué frecuencia fueron fáciles de llenar los formularios de su plan de salud?

○ Nunca  
 ○ A veces  
 ○ La mayoría de las veces  
 ○ Siempre

35. Usando un número del 0 al 10, el 0 siendo el peor plan de salud posible y el 10 el mejor plan de salud posible, ¿qué número usaría para calificar su plan de salud?

○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○  
 0 1 2 3 4 5 6 7 8 9 10  
 El peor plan de salud posible El mejor plan de salud posible



## CAPACIDAD CULTURAL

Las siguientes preguntas son sobre cuánto usted piensa que su doctor u otro proveedor de salud respeta sus creencias, actitudes, lenguaje y comportamiento.

Un proveedor de salud puede ser un doctor generalista, un doctor especialista, una enfermera practicante, un asistente médico, una enfermera o cualquiera que usted vería para cuidado de salud.

**35e. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud habló muy rápido cuando le habló a usted?**

- Nunca
- A veces
- La mayoría de las veces
- Siempre

**35f. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud le interrumpió cuando usted estaba hablando?**

- Nunca
- A veces
- La mayoría de las veces
- Siempre

**35g. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud uso un tono condesendiente, sarcástico o grosero con usted?**

- Nunca
- A veces
- La mayoría de las veces
- Siempre

**35a. En los últimos 6 meses, ¿tuvo usted un problema de salud para el cuál necesitó equipo especial, tal como un bastón, silla de rueda, o equipo de oxígeno?**

- Sí
- No → *Pase a la pregunta 35c*

**35b. En los últimos 6 meses, ¿con qué frecuencia fue facil para usted conseguir el equipo médico que usted necesitaba a través de su plan de salud?**

- Nunca
- A veces
- La mayoría de las veces
- Siempre

**35c. En los últimos 6 meses, ¿tuvo usted un problema de salud para el cuál necesitó terapia especial, tal como terapia física, ocupacional o terapia del habla?**

- Sí
- No → *Pase a la pregunta 35e*

**35d. En los últimos 6 meses, ¿con qué frecuencia fue facil para usted conseguir la terapia especial que usted necesitaba a través de su plan de salud?**

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35h. En los últimos 6 meses, ¿sintió usted que le podía decir a su doctor u otro proveedor de salud cualquier cosa, hasta cosas que tal vez no le diría a otra persona?

- Sí, definitivamente
- Sí, algo
- No

35i. En los últimos 6 meses, ¿sintió usted que podría confiar en el doctor u otro proveedor de salud con su cuidado médico?

- Sí, definitivamente
- Sí, algo
- No

35j. En los últimos 6 meses, ¿sintió usted que un doctor u otro proveedor de salud siempre le decía la verdad sobre su salud, aun si fueran malas noticias?

- Sí, definitivamente
- Sí, algo
- No

35k. En los últimos 6 meses, ¿sintió usted que este proveedor se preocupó tanto por usted como se preocupa usted de su propia salud?

- Sí, definitivamente
- Sí, algo
- No

35l. En los últimos 6 meses, ¿sintió usted que a este proveedor realmente le preocupaba usted como persona?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35m. En los últimos 6 meses, ¿con qué frecuencia le trataron injustamente en el consultorio de un doctor u otro proveedor de salud por su raza o etnicidad?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35n. En los últimos 6 meses, ¿con qué frecuencia le trataron injustamente en el consultorio de un doctor u otro proveedor de salud por el tipo de seguro de salud que tiene o porque no tiene seguro de salud?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

### COMPRESIÓN DE INFORMACIÓN DE SALUD

Las siguientes preguntas son sobre cuanto piensa usted que su doctor u otro proveedores de salud le ayudan a entender la información y servicios que usted necesita para tomar decisiones sobre su salud.

35o. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud le dieron toda la información que usted quería sobre su salud?

- Nunca
- A veces
- La mayoría de las veces
- Siempre



35p. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud le animó a usted a hablar sobre todas sus preguntas o inquietudes de su salud?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35q. En los últimos 6 meses, ¿con qué frecuencia un doctor u otro proveedor de salud uso palabras médicas que usted no entendió?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

### SERVICIOS DE INTÉRPRETE

35r. ¿Qué idioma prefiere hablar usted?

- Inglés → *Pase a la Pregunta 36*
- Español
- Otro idioma

35s. ¿Qué tan bien habla inglés?

- Muy bien
- Bien
- No muy bien
- Para nada

35t. En los últimos 6 meses, cuando llamó o habló con alguien de su plan de salud, ¿con qué frecuencia hablaban con usted en su idioma de preferencia?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35u. Un intérprete es una persona que le ayuda a hablar con otras personas que no hablan su idioma. Los intérpretes pueden ser empleados del plan de salud o intérpretes por teléfono.

Durante los últimos 6 meses, ¿necesitó alguna vez a un intérprete para hablar con alguien de su plan de salud?

- Sí
- No → *Pase a la Pregunta 36*

35v. En los últimos 6 meses, ¿le dijo alguna persona de su plan de salud que un intérprete estaba disponible de forma gratuita?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35w. En los últimos 6 meses, ¿con qué frecuencia usó un intérprete del plan de salud para que le ayudara a hablar con alguien del plan?

- Nunca → *Pase a la Pregunta 35aa*
- A veces
- La mayoría de las veces
- Siempre

35x. En los últimos 6 meses, cuando usó un intérprete que le ofreció su plan de salud, ¿quién fue el intérprete que usó con más frecuencia?

- Un empleado o personal del plan de salud
- Un intérprete que me ofreció el plan de salud que me ayudó en persona
- Un intérprete que me ofreció el plan de salud que me ayudó por teléfono
- Otra persona que me ofreció el plan de salud
- No sé o no estoy seguro

35y. En los últimos 6 meses, ¿con qué frecuencia le trataba con cortesía y respeto este intérprete?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35z. Usando cualquier número del 0 al 10, donde 0 siendo el peor intérprete posible y el 10 el mejor intérprete posible, ¿qué número usaría para calificar a este intérprete?

- |                            |                       |                       |                       |                       |                       |                             |                       |                       |                       |                       |
|----------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/>      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 0                          | 1                     | 2                     | 3                     | 4                     | 5                     | 6                           | 7                     | 8                     | 9                     | 10                    |
| El peor intérprete posible |                       |                       |                       |                       |                       | El mejor intérprete posible |                       |                       |                       |                       |

35aa. En los últimos 6 meses, ¿con qué frecuencia usó a un amigo o familiar como intérprete cuando habló con alguien de su plan de salud?

- Nunca → *Pase a la Pregunta 36*
- A veces
- La mayoría de las veces
- Siempre

35ab. En los últimos 6 meses, ¿usó a amigos o familiares como intérpretes porque usted lo prefería así?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

### ACERCA DE USTED

36. En general, ¿cómo calificaría toda su salud?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

37. En general, ¿cómo calificaría toda su salud mental o emocional?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

38. Desde el 1 de julio del 2013, ¿le han puesto la vacuna para la influenza o gripe ya sea en inyección o con un rociador o spray nasal?

- Sí
- No
- No sé

39. Actualmente, ¿fuma cigarrillos o usa tabaco todos los días, algunos días o nunca?

- Todos los días
- Algunos días
- No fumo en absoluto → *Pase a la pregunta 43*
- No sé → *Pase a la pregunta 43*

40. En los últimos 6 meses, ¿qué tan seguido le aconsejó un médico u otro proveedor de cuidado médico de su seguro que dejara de fumar o usar tabaco?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

41. En los últimos 6 meses, ¿qué tan seguido le recomendó, o habló con, un médico o proveedor de cuidado médico sobre medicamentos para ayudarlo(a) a dejar de fumar o usar tabaco? Ejemplos de medicamentos son: chicle o goma de mascar con nicotina, parche, rociador o aerosol nasal, inhalador o medicamentos con receta.

- Nunca
- A veces
- La mayoría de las veces
- Siempre

42. En los últimos 6 meses, ¿qué tan seguido le ofreció o habló con su médico o proveedor de cuidado médico sobre métodos y estrategias, aparte de medicamentos, para ayudarlo(a) a dejar de fumar o usar tabaco? Ejemplos de métodos y estrategias son: una línea telefónica de ayuda, consejería individual o terapia de grupo o un programa para dejar de fumar.

- Nunca
- A veces
- La mayoría de las veces
- Siempre

43. ¿Toma aspirina todos los días o un día sí y otro día no?

- Sí
- No
- No sé

44. ¿Tiene algún problema de salud o toma algún medicamento que hace que sea peligroso para usted tomar aspirina?

- Sí
- No
- No sé

45. ¿Ha hablado alguna vez un médico o proveedor de cuidado médico con usted acerca de los riesgos y beneficios de la aspirina para prevenir un infarto o un derrame cerebral?

- Sí
- No

46. Que usted sepa, ¿tiene alguna de las siguientes enfermedades? Marque todas las que aplican.

- Colesterol alto
- Presión sanguínea alta (hipertensión arterial)
- Padres o hermanos que hayan tenido un infarto antes de los 60 años

47. ¿Alguna vez le ha dicho un médico que usted tiene alguna de las siguientes enfermedades? Marque todas las que aplican.

- Un infarto
- Angina de pecho o cardiopatía coronaria
- Un derrame cerebral
- Algún tipo de diabetes o niveles altos de azúcar en la sangre

48. En los últimos 6 meses, ¿ha ido a ver a un doctor o a otro profesional médico 3 veces o más por la misma enfermedad o problema?

- Sí
- No → *Pase a la pregunta 50*

49. ¿Se trata de una enfermedad o problema que ha durado al menos 3 meses? No incluya el embarazo ni la menopausia.

- Sí
- No



50. ¿Necesita o toma ahora alguna medicina recetada por un doctor? **No** incluya anticonceptivos.

- Sí
- No → **Pase a la pregunta 52**

51. ¿Esta medicina es para tratar una enfermedad o problema que ha durado al menos 3 meses? **No** incluya el embarazo ni la menopausia.

- Sí
- No

52. ¿Qué edad tiene?

- 18 a 24 años
- 25 a 34
- 35 a 44
- 45 a 54
- 55 a 64
- 65 a 74
- 75 años o más

53. ¿Es usted hombre o mujer?

- Hombre
- Mujer

54. ¿Cuál es el grado o nivel escolar más alto que usted ha completado?

- 8 años de escuela o menos
- 9 a 12 años de escuela, pero sin graduarse
- Graduado de la escuela secundaria (high school), Diploma de escuela secundaria, preparatoria, o su equivalente (o GED)
- Algunos cursos universitarios o un título universitario de un programa de 2 años
- Título universitario de 4 años
- Título universitario de más de 4 años

55. ¿Es usted de origen o ascendencia hispana o latina?

- Sí, hispano o latino
- No, ni hispano ni latino

56. ¿A qué raza pertenece? Marque una o más.

- Blanca
- Negra o afroamericana
- Asiática
- Nativo de Hawái o de otras islas del Pacífico
- Indígena americano o nativo de Alaska
- Otra (Por favor use letra de molde)

57. ¿Le ayudó alguien a completar esta encuesta?

- Sí → **Pase a la pregunta 58**
- No → **Gracias. Por favor, devuelva esta encuesta en el sobre con el porte o franqueo pagado.**

58. ¿Cómo le ayudó a usted esta persona? Marque una o más.

- Me leyó las preguntas
- Anotó las respuestas que le di
- Contestó las preguntas por mí
- Tradujo las preguntas a mi idioma
- Me ayudó de otra forma (Por favor use letra de molde)

**¡Gracias nuevamente por tomar el tiempo de completar el cuestionario! Sus respuestas son sumamente apreciadas.**

**Cuando haya terminado, por favor envíe la encuesta en el sobre con el porte pagado a:**

**DataStat, 3975 Research Park Dr, Ann Arbor, MI 48108**



Sus respuestas a esta encuesta son completamente confidenciales. Toda información que pueda identificarle a usted o a su familia se mantendrá privada. El personal de investigación no divulgará su información personal sin su permiso.

Usted puede elegir si quiere contestar este cuestionario o no. Si decide no participar, esto no afectará los beneficios que usted recibe. El número en la cubierta de este cuestionario sirve para saber que ya envió su respuesta y que no hay que enviarle recordatorios.

Si quiere recibir más información acerca de este estudio, llame al 1-888-506-5136 (o, para personas con problemas de audición, llame al 1-888-631-2097).

**INSTRUCCIONES PARA EL CUESTIONARIO**

- Por favor llene el círculo de su respuesta completamente. Use solamente tinta NEGRA o AZUL para completar la encuesta.

Marca  
Correcta ●

Marca  
Incorrecta   

- A veces hay que saltarse alguna pregunta del cuestionario. Cuando esto ocurra, verá una flecha con una nota que le indicará cuál es la siguiente pregunta a la que tiene que pasar. Por ejemplo:

● Sí → *Pase a la Pregunta 1*  
○ No

↓ **COMIENCE AQUI** ↓

Por favor conteste las preguntas para el niño cuyo nombre está anotado en el sobre. No las conteste para ningún otro niño.

1. Nuestros registros muestran que su niño está ahora con Oregon Health Plan. ¿Es correcta esta información?

○ Sí → *Pase a la pregunta 3*  
○ No

2. ¿Cómo se llama el plan de salud de su niño? (Por favor escriba en letra de molde)

\_\_\_\_\_

**LA ATENCIÓN MÉDICA QUE  
RECIBIÓ  
SU NIÑO EN LOS ÚLTIMOS 6 MESES**

Estas preguntas son acerca de la atención médica que ha recibido su niño. **No** incluya la atención que recibió su niño cuando pasó la noche hospitalizado. **No** incluya las consultas de su niño con el dentista.

3. En los últimos 6 meses, ¿tuvo su niño una enfermedad, lesión, o problema de salud para el cual **necesitó atención inmediata** en una clínica, en una sala de emergencia o en un consultorio médico?
- Sí  
 No → *Pase a la pregunta 5*
4. En los últimos 6 meses, cuando su niño **necesitó atención inmediata**, ¿con qué frecuencia atendieron a su niño tan pronto como él o ella lo necesitaba?
- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre
5. En los últimos 6 meses, ¿hizo alguna cita para un **chequeo o una consulta regular** para su niño en un consultorio médico o en una clínica?
- Sí  
 No → *Pase a la pregunta 7*
6. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita para un **chequeo o una consulta regular** para su niño en un consultorio médico o en una clínica tan pronto como su niño la necesitaba?
- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre

7. En los últimos 6 meses, **sin** contar las veces en que su niño fue a una sala de emergencia, ¿cuántas veces fue su niño a un consultorio médico o a una clínica para que lo atendieran?
- Ninguna vez → *Pase a la pregunta 16*  
 1 vez  
 2  
 3  
 4  
 5 a 9  
 10 veces o más
8. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre cosas específicas que usted podría hacer para prevenir que su niño se enferme?
- Sí  
 No
9. En los últimos 6 meses, ¿con qué frecuencia le contestaron sus preguntas los doctores u otros profesionales médicos de su niño?
- Nunca  
 A veces  
 La mayoría de las veces  
 Siempre
10. En los últimos 6 meses, ¿hablaron usted y el doctor u otro profesional médico de su niño sobre comenzar o suspender una medicina recetada?
- Sí  
 No → *Pase a la pregunta 14*

11. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿qué tanto habló un doctor u otro profesional médico sobre las razones por las que tal vez usted quiera que su niño tome una medicina?

- Para nada
- Un poco
- Algo
- Mucho

12. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿qué tanto habló un doctor u otro profesional médico sobre las razones por las que tal vez usted no quiera que su niño tome una medicina?

- Para nada
- Un poco
- Algo
- Mucho

13. Cuando hablaron de comenzar o suspender una medicina recetada para su niño, ¿le preguntó un doctor u otro profesional médico sobre lo que usted creía que sería lo mejor para su niño?

- Sí
- No

14. Usando un número del 0 al 10, el 0 siendo la peor atención médica posible y el 10 la mejor atención médica posible, ¿qué número usaría para calificar toda la atención médica que su niño ha recibido en los últimos 6 meses?

- |                                 |                       |                       |                       |                       |                                  |                       |                       |                       |                       |                       |
|---------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| <input type="radio"/>           | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 0                               | 1                     | 2                     | 3                     | 4                     | 5                                | 6                     | 7                     | 8                     | 9                     | 10                    |
| La peor atención médica posible |                       |                       |                       |                       | La mejor atención médica posible |                       |                       |                       |                       |                       |

15. En los últimos 6 meses, ¿con qué frecuencia le fue fácil conseguir la atención, las pruebas o el tratamiento que su niño necesitaba?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

16. ¿Está matriculado actualmente su niño en algún tipo de escuela o guardería/cuidado infantil?

- Sí
- No → *Pase a la pregunta 19*

17. En los últimos 6 meses, ¿necesitó que los doctores o los otros profesionales médicos de su niño se pusieran en contacto con una escuela o guardería acerca de la salud o la atención médica de su niño?

- Sí
- No → *Pase a la pregunta 19*

18. En los últimos 6 meses, ¿consiguió la ayuda de los doctores o los otros profesionales médicos de su niño que necesitaba para ponerse en contacto con la escuela o guardería de su niño?

- Sí
- No

**SERVICIOS ESPECIALIZADOS**

19. En el equipo o dispositivo médico especial se incluye un andador, silla de ruedas, nebulizador, tubos de alimentación o equipo de oxígeno.

En los últimos 6 meses, ¿consiguió o intentó conseguir algún equipo o dispositivo médico especial para su niño?

- Sí
- No → *Pase a la pregunta 22*



20. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir equipo o dispositivos médicos especiales para su niño?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

21. ¿Alguien del plan de salud, del consultorio médico o clínica de su niño le ayudó a conseguir el equipo o dispositivos médicos especiales para su niño?

- Sí
- No

22. En los últimos 6 meses, ¿consiguió o intentó conseguir terapia especial para su niño tal como terapia física, ocupacional o del habla?

- Sí
- No → *Pase a la pregunta 25*

23. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir esta terapia para su niño?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

24. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir esta terapia para su niño?

- Sí
- No

25. En los últimos 6 meses, ¿consiguió o intentó conseguir tratamiento o consejería para su niño, para un problema emocional, de desarrollo o de comportamiento?

- Sí
- No → *Pase a la pregunta 28*

26. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir este tratamiento o consejería para su niño?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

27. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir este tratamiento o consejería para su niño?

- Sí
- No

28. En los últimos 6 meses, ¿recibió su niño atención de más de un tipo de profesional médico, o usó más de un tipo de servicio de salud?

- Sí
- No → *Pase a la pregunta 30*

29. En los últimos 6 meses, ¿alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a coordinar la atención médica de su niño entre estos profesionales o servicios diferentes?

- Sí
- No

### **EL DOCTOR PERSONAL DE SU NIÑO**

30. El doctor personal es aquel a quien su niño va si necesita un chequeo, quiere pedir consejo sobre un problema de salud, está enfermo o lastimado. ¿Tiene su niño un doctor personal?

- Sí
- No → *Pase a la pregunta 45*

31. En los últimos 6 meses, ¿cuántas veces fue su niño a ver a su doctor personal para recibir atención médica?

- Ninguna vez → **Pase a la pregunta 41**
- 1 vez
- 2
- 3
- 4
- 5 a 9
- 10 veces o más

31a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil hablar o entender al doctor personal de su niño porque hablaban idiomas diferentes?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

32. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le explicó las cosas sobre la salud de su niño de una manera fácil de entender?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

33. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le escuchó a usted con atención?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

34. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño demostró respeto por lo que usted tenía que decir?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

35. ¿Su niño puede hablar con los doctores sobre su atención médica?

- Sí
- No → **Pase a la pregunta 37**

35a. En los últimos 6 meses, ¿con qué frecuencia se le hizo difícil a su niño hablar o entender a su doctor personal porque ellos hablaban idiomas diferentes?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

36. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño le explicó las cosas a su niño de una manera fácil de entender?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

37. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño pasó suficiente tiempo con su niño?

- Nunca
- A veces
- La mayoría de las veces
- Siempre



38. En los últimos 6 meses, ¿habló el doctor personal de su niño con usted sobre cómo su niño se estaba sintiendo, estaba creciendo o se estaba comportando?

- Sí
- No

39. En los últimos 6 meses, ¿atendió a su niño algún doctor o un otro profesional médico además de su doctor personal?

- Sí
- No → *Pase a la pregunta 41*

40. En los últimos 6 meses, ¿con qué frecuencia el doctor personal de su niño parecía estar informado y al día acerca de la atención que su niño había recibido de estos doctores o de otros profesionales médicos?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

41. Usando un número del 0 al 10, el 0 siendo el peor doctor personal posible y el 10 el mejor doctor personal posible, ¿qué número usaría para calificar al doctor personal de su niño?

- 
- 0 1 2 3 4 5 6 7 8 9 10
- El peor doctor personal posible                      El mejor doctor personal posible

42. ¿Tiene su niño alguna condición médica, de comportamiento u otra condición de salud que ha durado por más de 3 meses?

- Sí
- No → *Pase a la pregunta 45*

43. ¿El doctor o enfermera personal de su niño entiende cómo estas condiciones médicas, de comportamiento u otras condiciones de salud afectan la vida cotidiana de su niño?

- Sí
- No

44. ¿El doctor o enfermera personal de su niño entiende cómo estas condiciones médicas, de comportamiento u otras condiciones de salud afectan la vida cotidiana de su familia?

- Sí
- No

### LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS

Al contestar las siguientes preguntas no incluya las veces que su niño fue a ver al dentista ni la atención que recibió cuando pasó la noche hospitalizado.

45. Los especialistas son doctores que se especializan en un área de la medicina. Pueden ser cirujanos, doctores especialistas en el corazón, las alergias, la piel y otras áreas. En los últimos 6 meses, ¿hizo alguna cita para su niño con un especialista?

- Sí
- No → *Pase a la pregunta 49*

46. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita con un especialista para su niño tan pronto como él o ella la necesitaba?

- Nunca
- A veces
- La mayoría de las veces
- Siempre



47. ¿Cuántos especialistas ha visto su niño en los últimos 6 meses?
- Ninguno → *Pase a la pregunta 49*
  - 1 especialista
  - 2
  - 3
  - 4
  - 5 especialistas o más

48. Queremos saber cómo califica al especialista al que su niño fue con más frecuencia en los últimos 6 meses. Usando un número del 0 al 10, el 0 siendo el peor especialista posible y el 10 el mejor especialista posible, ¿qué número usaría para calificar a ese especialista?

○	○	○	○	○	○	○	○	○	○	○
0	1	2	3	4	5	6	7	8	9	10
El peor especialista posible					El mejor especialista posible					

**EL PLAN DE SALUD DE SU NIÑO**

Las siguientes preguntas se refieren a su experiencia con el plan de salud de su niño.

49. En los últimos 6 meses, ¿recibió información o ayuda de parte del servicio al cliente del plan de salud de su niño?
- Sí
  - No → *Pase a la pregunta 52*

50. En los últimos 6 meses, ¿con qué frecuencia el servicio al cliente del plan de salud de su niño le dio la información o ayuda que usted necesitaba?
- Nunca
  - A veces
  - La mayoría de las veces
  - Siempre

51. En los últimos 6 meses, ¿con qué frecuencia el personal de servicio al cliente del plan de salud de su niño le trató con cortesía y respeto?
- Nunca
  - A veces
  - La mayoría de las veces
  - Siempre

52. En los últimos 6 meses, ¿le dio el plan de salud de su niño algún formulario para llenar?
- Sí
  - No → *Pase a la pregunta 54*

53. En los últimos 6 meses, ¿con qué frecuencia fueron fáciles de llenar los formularios del plan de salud de su niño?
- Nunca
  - A veces
  - La mayoría de las veces
  - Siempre

54. Usando un número del 0 al 10, el 0 siendo el peor plan de salud posible y el 10 el mejor plan de salud posible, ¿qué número usaría para calificar al plan de salud de su niño?

○	○	○	○	○	○	○	○	○	○	○
0	1	2	3	4	5	6	7	8	9	10
El peor plan de salud posible					El mejor plan de salud posible					

**MEDICINAS RECETADAS**

55. En los últimos 6 meses, ¿consiguió alguna medicina recetada o renovó una receta para una medicina recetada para su niño?
- Sí
  - No → *Pase a la pregunta 58*



56. En los últimos 6 meses, ¿con qué frecuencia fue fácil conseguir medicinas recetadas para su niño a través de su plan de salud?

- Nunca
- A veces
- La mayoría de las veces
- Siempre

57. ¿Alguien del plan de salud, consultorio médico o clínica de su niño le ayudó a conseguir las medicinas recetadas para su niño?

- Sí
- No

### ACERCA DE USTED Y DE SU NIÑO

58. En general, ¿cómo calificaría toda la salud de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

59. En general, ¿cómo calificaría toda la salud mental o emocional de su niño?

- Excelente
- Muy buena
- Buena
- Regular
- Mala

60. ¿Actualmente necesita o usa su niño una medicina recetada por un doctor (aparte de vitaminas)?

- Sí
- No → *Pase a la pregunta 63*

61. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 63*

62. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

63. ¿Necesita o usa su niño más servicios médicos, de salud mental o educativos de lo que es normal para la mayoría de los niños de la misma edad?

- Sí
- No → *Pase a la pregunta 66*

64. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 66*

65. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

66. ¿Está su niño limitado o impedido de alguna manera en su habilidad de hacer lo que pueden hacer la mayoría de los niños de la misma edad?

- Sí
- No → *Pase a la pregunta 69*

67. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 69*

68. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

69. ¿Necesita o recibe su niño terapia especial, tal como terapia física, ocupacional o del habla?

- Sí
- No → *Pase a la pregunta 72*

70. ¿Es esto debido a alguna condición médica, de comportamiento u otra condición de salud?

- Sí
- No → *Pase a la pregunta 72*

71. ¿Es ésta una condición que ha durado o que se espera que dure por lo menos 12 meses?

- Sí
- No

72. ¿Tiene su niño algún problema emocional, de desarrollo o de comportamiento, para el cual necesita o recibe tratamiento o consejería?

- Sí
- No → *Pase a la pregunta 74*

73. ¿Ha durado este problema o se espera que dure por lo menos 12 meses?

- Sí
- No

74. ¿Qué edad tiene su niño?

- Menos de un año

AÑOS (escriba la respuesta)

75. ¿Es su niño de sexo masculino o femenino?

- Masculino
- Femenino

76. ¿Es su niño de origen o ascendencia hispana o latina?

- Sí, hispano o latino
- No, ni hispano ni latino

77. ¿A qué raza pertenece su niño? Marque una o más.

- Blanca
- Negra o afroamericana
- Asiática
- Nativo de Hawái o de otras islas del Pacífico
- Indígena americano o nativo de Alaska
- Otra (Por favor use letra de molde)

78. ¿Qué edad tiene usted?

- Menos de 18 años
- 18 a 24
- 25 a 34
- 35 a 44
- 45 a 54
- 55 a 64
- 65 a 74
- 75 años o más

79. ¿Es usted hombre o mujer?

- Hombre
- Mujer

80. ¿Cuál es el grado o nivel escolar más alto que usted ha completado?

- 8 años de escuela o menos
- 9 a 12 años de escuela, pero sin graduarse
- Graduado de la escuela secundaria (high school), Diploma de escuela secundaria, preparatoria, o su equivalente (o GED)
- Algunos cursos universitarios o un título universitario de un programa de 2 años
- Título universitario de 4 años
- Título universitario de más de 4 años

◆

**81. ¿Qué relación tiene con el niño?**

- Madre o padre
- Abuelo o abuela
- Tía o tío
- Hermano o hermana mayor
- Otro familiar
- Tutor legal del niño
- Otra persona

**82. ¿Le ayudó alguien a completar esta encuesta?**

- Sí → ***Pase a la pregunta 83***
- No → ***Gracias. Por favor, devuelva esta encuesta en el sobre con el porte o franqueo pagado.***

**83. ¿Cómo le ayudó a usted esta persona? Marque una o más.**

- Me leyó las preguntas
  - Anotó las respuestas que le di
  - Contestó las preguntas por mí
  - Tradujo las preguntas a mi idioma
  - Me ayudó de otra forma (Por favor use letra de molde)
- 

**¡Gracias nuevamente por tomar el tiempo de completar el cuestionario! Sus respuestas son sumamente apreciadas.**

**Cuando haya terminado, por favor envíe la encuesta en el sobre con el porte pagado a:**

**DataStat, 3975 Research Park Drive, Ann Arbor, MI 48108**

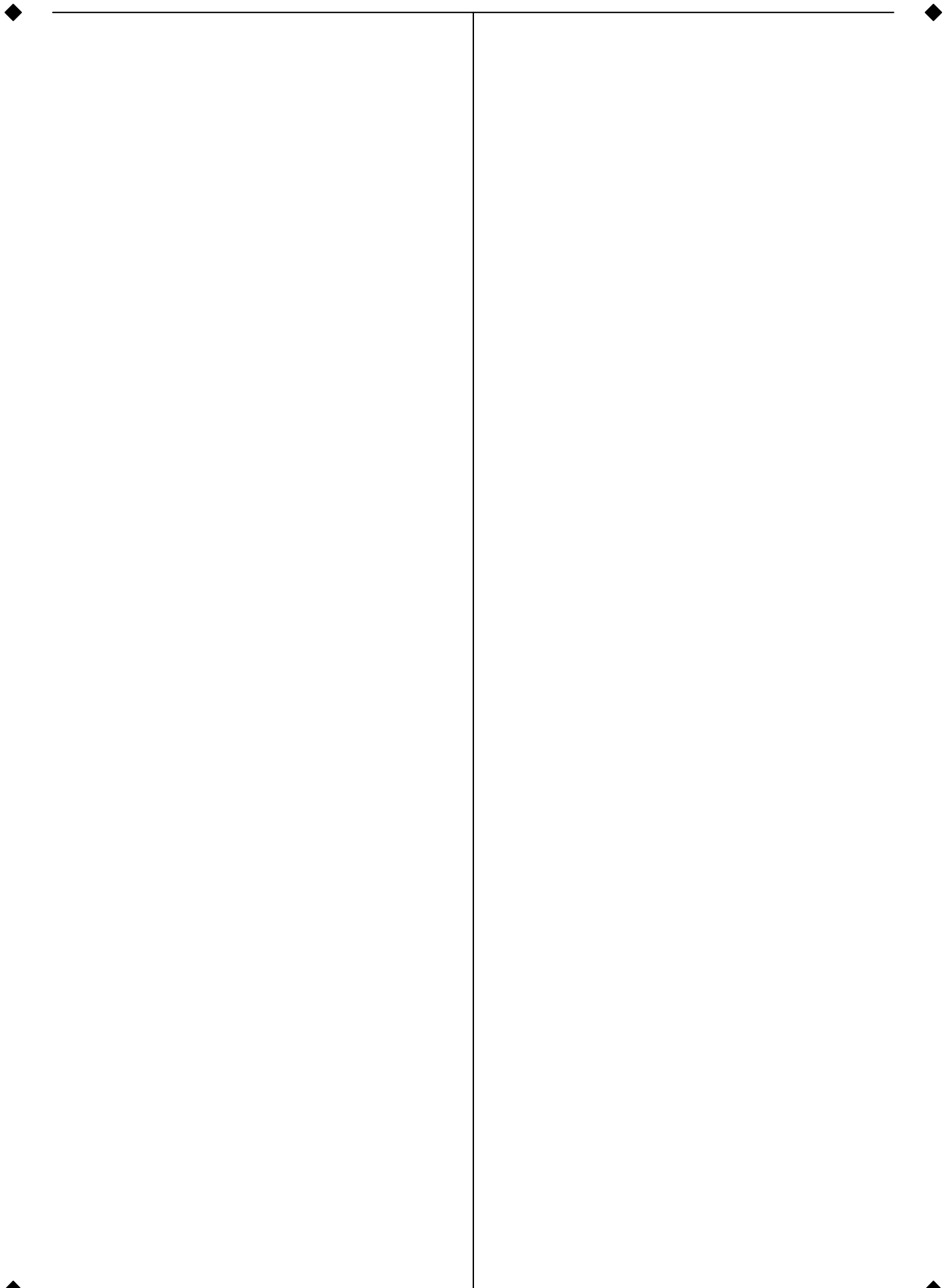


451-11



11

CTYSCCCC



DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE [NAMED  
RESPONDENT

PHONE NUMBER ---> (###) ### - ####

(IWER: THIS IS NOT A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control. May I please speak with [MEMBER FIRST NAME] [MEMBER LAST NAME]?

(IF NEEDED: "We are conducting an important study to find out how satisfied people are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary, and will not affect your health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET

## MAIL.SCREEN

MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN  
THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been lost in the mail. And since the deadline for mailing surveys has passed, we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT

IF MAIL.SCREEN = 1, GO TO RE.INTRO  
RETURN TO COVERSHEET

## RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED  
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied people are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will not affect your health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people about their health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS



SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

- 1. MALE
- 2. FEMALE

SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

- 1. Spanish
- 2. English

MEMBER

1. / MEMBER

Our records show that you are now in Oregon Health Plan. Is that right?

("DK" NOT ALLOWED)

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF Oregon Health Plan, ENTER "2".)

- 1. YES --> CK.PLMSTCR
- 2. NO

NPLNAME

2. / NPLNAME

What is the name of your health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS Oregon Health Plan]

(IF R SAYS SOMETHING CLOSE TO Oregon Health Plan, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

- 1. EXACT MATCH -----> CK.PLMSTCR
- 2. POSSIBLE MATCH -----> PLNAME
- 3. NOT A MATCH -----> PLNAME
- 4. [RESPONDENT] NO LONGER INSURED -----> NO.INSUR
- 5. [RESPONDENT] INSURED BY MEDICAID BUT DOESN'T ----> CK.PLMSTCR  
KNOW PLAN NAME
- 6. [RESPONDENT] INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

\_\_\_\_\_

CK.PLMSTCR:

-----

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your own health care. When you answer these questions, please do NOT include dental visits or care you got when you stayed overnight in a hospital.

INCARE

3. / INCARE

In the last 6 months, did you have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

- 1. YES
- 2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

4. / CARSN4

In the last 6 months, when you NEEDED CARE RIGHT AWAY, how often did you get care as soon as you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

APMAKE4

5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic?

- 1. YES
- 2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

APGET4

6. / APGET4

In the last 6 months, when you made an appointment for a CHECK-UP OR ROUTINE CARE at a doctor's office or clinic, how often did you get an appointment as soon as you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

OFCTIM4

7. / OFCTIM4

In the last 6 months, NOT counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself?

(IWER: IF NECESSARY: "Your best estimate would be fine.")

(IWER: IF NEEDED CLARIFY: "Please don't include dental care you received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE,
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE <05 THEN GO TO PRSNLD4  
IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE >05 THEN GO TO CHSCHL

PRVENT5

8. / PRVENT5

A health provider is the person you would see if you need a check-up, want advice about a health problem, or get sick or hurt.

In the last 6 months, did you and a doctor or other health provider talk about specific things you could do to prevent illness?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RXSTP

9. / RXSTP

In the last 6 months, did you and a doctor or other health provider talk about starting or stopping a prescription medicine?

- 1. YES
- 2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

RXWHY

10. / RXWHY

When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want to take a medicine? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXWYNT

11. / RXWYNT

When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might NOT want to take a medicine? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXBST

12. / RXBST

When you talked about starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for you?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

13. / RTALLCR

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?

(IF NEEDED: "Please do not include any dental care you may have received.")

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
HEALTH CARE										HEALTH CARE
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED

CARNES4

14. / CARNES4

In the last 6 months, how often was it easy to get the care, tests, or treatment you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PRSNLD4

15. / PRSNLD4

A personal doctor is the one you would see if you need a check-up, want advice about a health problem, or get sick or hurt.

Do you have a personal doctor?

- 1. YES
- 2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

## DRTMS

16. / DRTMS

In the last 6 months, how many times did you visit your personal doctor to get care for yourself?

(IF NEEDED: "Your best estimate would be fine.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE, -----> RATEDR4
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

## DREXPL4

17. / DREXPL4

In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## DRLSTN4

18. / DRLSTN4

In the last 6 months, how often did your personal doctor listen carefully to you? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRESPU4

19. / DRESPU4

In the last 6 months, how often did your personal doctor show respect for what you had to say? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

20. / DRTMEN4

In the last 6 months, how often did your personal doctor spend enough time with you? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DIFFDR

21. / DIFFDR

In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor?

- 1. YES
- 2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

DRINFO

22. / DRINFO

In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

23. / RATEDR4

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
PERSONAL										PERSONAL
DOCTOR POSSIBLE										DOCTOR POSSIBLE

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include dental visits or care you got when you stayed overnight in a hospital.

NDSPDR4

24. / NDSPDR4

SPECIALISTS are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you make any appointments to see a specialist?

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS, "Does my (type of specialist) count?", CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

- 1. YES
- 2. NO -----> INTRO.PLAN

DK/REFUSAL/NOT ASCERTAINED --> INTRO.PLAN



PRBSEE4

25. / PRBSEE4

In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

26. / SPDRS

How many specialists have you seen in the last 6 months?

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say you've seen...")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> INTRO.PLAN
- 1. 1 SPECIALIST,
- 2. 2,
- 3. 3,
- 4. 4, OR
- 5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

27. / RTSPDR4

We want to know your rating of the specialist you saw most often in the last 6 months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

- |            |    |    |    |    |    |    |    |    |    |            |
|------------|----|----|----|----|----|----|----|----|----|------------|
| 00         | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 10         |
| WORST      |    |    |    |    |    |    |    |    |    | BEST       |
| SPECIALIST |    |    |    |    |    |    |    |    |    | SPECIALIST |
| POSSIBLE   |    |    |    |    |    |    |    |    |    | POSSIBLE   |

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN

INTRO.PLAN

Now I'm going to ask you some questions about your experience with your health plan.

LOOMAT4

28. / LOOMAT4

In the last 6 months, did you look for any information in written materials or on the Internet about how your health plan works?

- 1. YES
- 2. NO -----> CLCSR4

DK/REFUSAL/NOT ASCERTAINED --> CLCSR4

UNDINF4

29. / UNDINF4

In the last 6 months, how often did the written materials OR the Internet provide the information you needed about how your health plan works? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CLCSR4

30. / CLCSR4

In the last 6 months, did you get information or help from [your health plan's customer service/customer service at 's health plan] ?

- 1. YES
- 2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4

31. / PBCLCS4

In the last 6 months, how often did your health plan's customer service give you the information or help you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP

32. / CSRESP

In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4

33. / PLPRWK4

In the last 6 months, did your health plan give you any forms to fill out?

- 1. YES
- 2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --> RTPLEXP

PBPLPW4

34. / PBPLPW4

In the last 6 months, how often were the forms from your health plan easy to fill out? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

35. / RTPLEXP

Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
HEALTH PLAN										HEALTH PLAN
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HPMDEQ

35a. / HPMDEQ

In the last 6 months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, or oxygen equipment?

(READ LIST)

- 1. YES
- 2. NO -----> POSTHP

DK/REFUSAL/NOT ASCERTAINED

EZMDHP

35b. / EZMDHP

In the last 6 months, how often was it easy to get the medical equipment you needed through your health plan?

(READ LIST)

- 1. NEVER
- 2. SOMETIMES
- 3. USUALLY
- 4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

POSTHP

35c. / POSTHP

In the last 6 months, did you have any health problems that needed special therapy, such as physical, occupational, or speech therapy?

(READ LIST)

- 1. YES
- 2. NO -----> INTRO.DTLKTF

DK/REFUSAL/NOT ASCERTAINED

EZPOST

35d. / EZPOST

In the last 6 months, how often was it easy to get the special therapy you needed through your health plan? Would you say...

- 1. NEVER
- 2. SOMETIMES
- 3. USUALLY
- 4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

INTRO.DTLKTF

INTRO.DTLKTF

The following questions ask about how much you think your doctor or other health provider respects your beliefs, attitudes, language and behavior.

DTLKTF

35e. / DTLKTF

A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse or anyone else you would see for health care.

In the last 6 months, how often did a doctor or other health provider talk too fast when talking to you? Would you say..

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY,
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

DINTER

35f. / DINTER

In the last 6 months, how often did a doctor or other health provider interrupt you when you were speaking?

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

DRRUDE

35g. / DRRUDE

In the last 6 months, how often did a doctor or other health provider use a condescending, sarcastic, or rude tone or manner with you?

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

DRTELL

35h. / DRTELL

In the last 6 months, did you feel you could tell a doctor or other health provider anything, even things that you might not tell anyone else? Would you say...

(READ LIST)

1. YES, DEFINITELY
2. YES, SOMEWHAT OR
3. NO

DK/REFUSAL/NOT ASCERTAINED

DTRUST

35i. / DTRUST

In the last 6 months, did you feel you could trust a doctor or other health provider with your medical care? Would you say...

(READ LIST)

1. YES, DEFINITELY
2. YES, SOMEWHAT OR
3. NO

DK/REFUSAL/NOT ASCERTAINED

DTRUTH

35j. / DTRUTH

In the last 6 months, did you feel a doctor or other health provider always told you the truth about your health, even if there was bad news? Would you say...

(READ LIST)

1. YES, DEFINITELY
2. YES, SOMEWHAT OR
3. NO

DK/REFUSAL/NOT ASCERTAINED

DCAREH

35k. / DCAREH

In the last 6 months, did you feel this provider cared as much as you do about your health? Would you say...

(READ LIST)

1. YES, DEFINITELY
2. YES, SOMEWHAT OR
3. NO

DK/REFUSAL/NOT ASCERTAINED

DCAREP

35l. / DCAREP

In the last 6 months, did you feel this provider cared about you as a person? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

UNFETH

35m. / UNFETH

In the last 6 months, how often have you been treated unfairly at a doctor or other health provider's office because of your race or ethnicity? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

UNFINS

35n. / UNFINS

In the last 6 months, how often have you been treated unfairly at a doctor or other health provider's office because of the type of health insurance you have or because you do not have health insurance? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

INTRO.ALLINF

INTRO.ALLINF

The following questions ask about how much you think your doctor or other health provider helps you understand the information and services you need to make decisions about your health.

ALLINF

35o. / ALLINF

In the last 6 months, how often did a doctor or other health provider give you all the information you wanted about your health? Would you say..

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

TLKQS

35p. / TLKQS

In the last 6 months, how often did a doctor or other health provider encourage you to talk about all your health questions or concerns? Would you say..

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

DMEDW

35q. / DMEDW

In the last 6 months, how often did a doctor or other health provider use medical words you did not understand? Would you say..

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

PRFLANG

35r. / PRFLANG

What is your preferred language? Would you say..

(READ LIST)

1. ENGLISH, -----> HLTSTA4
2. SPANISH, or
3. SOME OTHER LANGUAGE

DK/REFUSAL/NOT ASCERTAINED



SPKENG

35s. / SPKENG

How well do you speak English? Would you say...

(READ LIST)

- 1. VERY WELL,
- 2. WELL,
- 3. NOT WELL, or
- 4. NOT AT ALL

DK/REFUSAL/NOT ASCERTAINED

DSPKPRF

35t. / DSPKPRF

In the last 6 months, when you called or spoke to someone from your health plan, how often did they speak your preferred language? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

NDINTRP

35u. / NDIRTRP

An interpreter is someone who helps you talk with others who do not speak your language. Interpreters can include staff from the health plan or telephone interpreters.

In the last 6 months, was there any time when you needed an interpreter to talk with someone from your health plan?

- 1. YES
- 2. NO -----> HLTSTA4

DK/REFUSAL/NOT ASCERTAINED

FRTRAN

35v. / FRTRAN

In the last 6 months, did anyone from the health plan let you know that an interpreter was available free of charge? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

INTROFC

35w. / INTROFC

In the last 6 months, how often did you use an interpreter provided by your health plan to help you talk with someone from the plan? Would you say..

(READ LIST)

- 1. NEVER, -----> INTRFRD
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

MOTRAN

35x. / MOTRAN

In the last 6 months, when you used an interpreter provided by your health plan, who was it? Was it..

(READ LIST)

- 1. A STAFF MEMBER FROM THE HEALTH PLAN
- 2. AN INTERPRETER PROVIDED IN-PERSON BY THE HEALTH PLAN
- 3. A TELEPHONE INTERPRETER PROVIDED BY THE HEALTH PLAN
- 4. SOMEONE ELSE PROVIDED BY THE HEALTH PLAN
- 5. DON'T KNOW OR UNSURE

REFUSAL/NOT ASCERTAINED

CRTRAN

35y. / CRTRAN

In the last 6 months, how often did this interpreter treat you with courtesy and respect? Would you say..

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

RATEINT

35z. / RATEINT

Using any number from 0 to 10, where 0 is the worst interpreter possible and 10 is the best interpreter possible, what number would you use to rate this interpreter?

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
INTERPRETER										INTERPRETER
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## INTRFRD

35aa. / INTRFRD

In the last 6 months, how often did you use a friend or family member as an interpreter when you talked with someone from your health plan? Would you say...

(READ LIST)

1. NEVER, -----> HLTSTA4
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

## FRDPREF

35ab. / FRDPREF

In the last 6 months, did you use friends or family members as interpreters because that was what you preferred? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, or
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

## HLTSTA4

36. / HLTSTA4

In general, how would you rate your overall health? Would you say it is...

(READ LIST)

1. EXCELLENT,
2. VERY GOOD,
3. GOOD,
4. FAIR, OR
5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

37. / MNTLSTAT

In general, how would you rate your overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

- 1. EXCELLENT,
- 2. VERY GOOD,
- 3. GOOD,
- 4. FAIR, OR
- 5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

FLUSHOTQ

38. / FLUSHOTQ

Have you had either a flu shot or flu spray in the nose since July 1, 2013?

- 1. YES
- 2. NO
- 3. DON'T KNOW
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

NOWSMOK

39. / NOWSMOK

Do you now smoke cigarettes or use tobacco...

(READ LIST)

- 1. EVERY DAY,
- 2. SOME DAYS, OR
- 3. NOT AT ALL? -----> ASPDAY
- 4. DON'T KNOW (DO NOT READ) -----> ASPDAY
- 9. REFUSAL/NOT ASCERTAINED (DO NOT READ) --> ASPDAY

ADVQUIT9

40. / ADVQUIT9

In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## PATCH9

41. / PATCH9

In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication. Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## WILLPWR9

42. / WILLPWR9

In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program. Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## ASPDAY

43. / ASPDAY

Do you take aspirin daily or every other day?

(IF NEEDED: "Would you say YES or NO?")

(IWER: If the R asks about whether a particular medication or Brand name is considered aspirin, you may provide the following clarification:

Aspirin: Bayer and Bufferin

Not Aspirin: Tylenol, Motrin, Aleve, Advil, ibuprofen and acetaminophen)

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPUSF

44. / ASPUSF

Do you have a health problem or take medication that makes taking aspirin unsafe for you?

(IF NEEDED: "Would you say YES or NO?")

1. YES
2. NO
3. DON'T KNOW
9. REFUSAL/NOT ASCERTAINED (DO NOT READ)

ASPPRV

45. / ASPPRV

Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.AWCOND

INTRO.AWCOND

When I read the following list, please tell me if you are aware that you have any of these conditions.

PHAWCD.(1-3)

46.(1-3) / PHAWCD.(1-3)

[First,/(Next/How About...)]

1. "High cholesterol"
2. "High blood pressure"
3. "Parent or sibling who had a heart attack before the age of 60"?

(IWER IF NECESSARY: "Are you aware that you have this condition?")

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.DRCOND

INTRO.DRCOND

When I read the following list, please tell me if a doctor has ever told you that you have any of these conditions.

PHDRCD.(1-4)

47.(1-4) / PHDRCD.(1-4)

[First,/(Next/How About...)]

- 1. "A heart attack"
- 2. "Angina or coronary heart disease"
- 3. "A stroke"
- 4. "Any kind of diabetes or high blood sugar"?

(IWER IF NECESSARY: "Has a doctor ever told you that you have this condition?")

[FOR PHDRCD.2: (IWER IF NEEDED, CLARIFY: Angina pectoris (an-JYE-nuh or AN-jin-uh PECK-ter-iss) is severe pain in the chest associated with insufficient blood supply to the heart.)]

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

SMPROB

48. / SMPROB

[I have just a few more questions.]

In the last 6 months, did you get health care 3 or more times for the same condition or problem?

- 1. YES
- 2. NO -----> TKMED

DK/REFUSAL/NOT ASCERTAINED

PRBLST

49. / PRBLST

Is this a condition or problem that has lasted for at least 3 months? [Please do NOT include pregnancy or menopause.]

[IWER IF NEEDED, CLARIFY: Menopause (men-ne-paws) is the time in a woman's life when she stops having menstrual periods. It is sometimes called 'the change of life' or 'the change'.)]

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

## TKMED

50. / TKMED

Do you now need or take medicine prescribed by a doctor? [Please do NOT include birth control.]

1. YES
2. NO -----> QAGE4

DK/REFUSAL\NOT ASCERTAINED

## TRTCOND

51. / TRTCOND

Is this medicine to treat a condition that has lasted for at least three months? Please do NOT include pregnancy or menopause.

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

52. / QAGE4

What is your age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your last birthday.")

(READ LIST IF NEEDED, "Are you...")

1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## QGENDER

53. / QGENDER

(IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

(ASK IF NECESSARY, "Are you male or female?")

1. MALE
2. FEMALE



## EDUCAT

54. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?  
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## LATINO

55. / LATINO

Are you of Hispanic or Latino origin or descent?

1. YES / HISPANIC OR LATINO
2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

## INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your race. I must ask you about all categories in case more than one applies.

## PQRACE3.(1-6)

56.(1-6) / PQRACE3.(1-6)

[(Are you)]

1. "White"
2. "Black or African-American"
3. "Asian"
4. "Native Hawaiian or other Pacific Islander"
5. "American Indian or Alaska Native"
6. "Some other race"?

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY RACE?" SAY  
"We ask about your race for demographic purposes only.  
We want to be sure that the people we survey accurately represent the  
racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC"  
or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

QRACE3.OTH / QRACE3.OTH  
(What is your race?)

---

ALL.DONE  
THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

EDIT.FLG  
(IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH  
EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:

- 1) QUESTION NUMBER(S)
  - 2) WHAT WAS ENTERED
  - 3) WHAT NEEDS TO BE CHANGED
- 

CK.END.EDIT  
LANG.DID

LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...

1. ENGLISH,
2. SPANISH OR
3. BOTH?

END.SCREEN

COVERSHEET NOT NEEDED

I may need to contact you again later, but today we are only interviewing members of Oregon Health Plan, so those are all the questions I have. Thank you very much for your help.

( RC = [RC%] )

RETURN TO COVERSHEET

TRANS.SCRN

INTERVIEWER: YOU HAVE INDICATED THAT YOU HAVE A SPANISH SPEAKER OR A HOUSEHOLD WITH A LANGUAGE PROBLEM.

1. IF THIS COVERSHEET SHOULD BE MOVED TO THE SPANISH PROJECT ENTER "1"
2. IF THIS WAS AN ERROR, TYPE "2" TO GO BACK

WHAT.LANG

INTERVIEWER: WHAT LANGUAGE DO YOU THINK THEY SPEAK IN THIS HOUSEHOLD?

---

DK

GOOD.BYE

INTERVIEWER: [THIS ID HAS BEEN TRANSFERRED TO THE SPANISH PROJECT/THIS ID IS NOT ELIGIBLE FOR TRANSFER TO THE SPANISH PROJECT. THIS ID WILL BE CODED AS A LANGUAGE PROBLEM]

[( RC = 80 )/( RC = 63 )]

## DIAL.SCREEN

DS. INTERVIEWER: YOU MAY DO THE INTERVIEW WITH ONLY THE PARENT OR GUARDIAN WHO KNOWS MOST ABOUT [MEMBER NAME]'S HEALTH CARE]

PHONE NUMBER ---> (###) ### - ####

(IWER: THIS IS A PROXY INTERVIEW.)

Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control. May I please speak with the person who knows the most about [NAME OF CHILD]'s health care]?

(IF NEEDED: "We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.")

(IF NEEDED: "The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

01. CONTINUE
02. ALREADY COMPLETED AND MAILED SURVEY BACK
03. NEW PHONE NUMBER
04. REFUSAL
05. APPOINTMENT
06. NEVER HEARD OF R
07. KNOWS R BUT HAS NO NEW NUMBER FOR R
08. RNA, ANS MACH, RETURN TO COVERSHEET
09. LANGUAGE PROBLEM -- SPEAKS SPANISH
10. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH

IF DIAL.SCREEN = 01, GO TO RE.INTRO

IF DIAL.SCREEN = 02, GO TO MAIL.SCREEN

IF DIAL.SCREEN = 03, ENTER NEW NUMBER ON COVERSHEET AND RE-DIAL

RETURN TO COVERSHEET

## MAIL.SCREEN

MS. INTERVIEWER: WE STILL NEED TO CONDUCT A TELEPHONE INTERVIEW EVEN  
THOUGH R SAYS THEY'VE SENT BACK THE MAIL SURVEY.

I'm sorry, but we haven't received your survey back -- it may have been lost in the mail. And since the deadline for mailing surveys has passed, we're now in the telephone phase of this study. May I continue?

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

1. CONTINUE
2. REFUSAL BECAUSE ALREADY COMPLETED AND MAILED SURVEY BACK
3. REFUSAL
4. APPOINTMENT

IF MAIL.SCREEN = 1, GO TO RE.INTRO  
RETURN TO COVERSHEET

## RE.INTRO

RE.INTRO. (INTERVIEWER: READ PARENS TEXT IF R ISN'T PERSON WHO ANSWERED  
PHONE OR HAS NOT HEARD IT YET.)

(Hello, I'm calling on behalf of Oregon Health Plan. Portions of this call may be monitored and recorded for quality control.)

We are conducting an important study to find out how satisfied families are with Oregon Health Plan. The results of the study will help Oregon Health Plan improve the care they provide and will also help consumers when they choose health care plans.

The interview is completely confidential and voluntary, and will not affect your child's health care or benefits in any way.

(IF R ASKS: "How long will this take?", EXPLAIN: "The questions should take about 12-15 minutes to answer.")

(IF NEEDED: "This is purely a research study -- we are polling people about their child's health and health care.")

(IF R SAYS THEY WILL DO THE MAIL SURVEY AND SEND IT BACK or THEY WOULD LIKE ANOTHER SURVEY MAILED TO THEM, EXPLAIN: "I'm sorry, but the deadline for mailing surveys has passed and we're now in the telephone phase of this study. May I continue?")

("DK" NOT ALLOWED)

1. CONTINUE
2. APPOINTMENT
3. REFUSAL
4. LANGUAGE PROBLEM -- SPEAKS SPANISH
5. LANGUAGE PROBLEM -- DOESN'T SPEAK ENGLISH OR SPANISH
6. R - DOES NOT WANT TO BE RECORDED (VOLUNTEERED)
7. RETURN TO CS

SEX

SEX. (IWER: RECORD RESPONDENT'S SEX, 'DK' NOT ALLOWED)

- 1. MALE
- 2. FEMALE

SPAN.VAR

(IWER: ENTER LANGUAGE TO BE USED DURING INTERVIEW)

("DK" NOT ALLOWED)

- 1. Spanish
- 2. English

MEMBER

1. / MEMBER

[I will be asking you about [NAME OF CHILD]'s health care. Please answer these questions based on the experiences you have had in getting health care for [NAME OF CHILD], and NOT on any experiences you may have had getting care for yourself or other members of your family.]

Our records show that your child is now in Oregon Health Plan. Is that right?

("DK" NOT ALLOWED)

(IWER: IF R SAYS "LEFT PLAN" OR "SWITCHED PLANS" OR "NO LONGER INSURED" ENTER "2". IF R IS NOT SURE IF HE/SHE IS PART OF OREGON HEALTH PLAN, ENTER "2".)

- 1. YES --> CK.PLMSTCR
- 2. NO

NPLNAME

2. / NPLNAME

What is the name of your child's health plan?

("DK" NOT ALLOWED)

[ENTER 1 IF R SAYS OREGON HEALTH PLAN]

(IF R SAYS SOMETHING CLOSE TO OREGON HEALTH PLAN, ENTER "2")

(IF R NOT SURE OF PLAN NAME, ENTER "2")

- 1. EXACT MATCH -----> CK.PLMSTCR
- 2. POSSIBLE MATCH -----> PLNAME
- 3. NOT A MATCH -----> PLNAME
- 4. CHILD NO LONGER INSURED -----> NO.INSUR
- 5. CHILD INSURED BY MEDICAID BUT DOESN'T ----> CK.PLMSTCR  
KNOW PLAN NAME
- 6. CHILD INSURED BUT NOT BY MEDICAID -----> NO.INSUR

PLNAME

2a. / PLNAME

(IWER: ENTER NAME OF HEALTH PLAN)

(VERIFY SPELLING BEFORE CONTINUING)

\_\_\_\_\_

CK.PLMSTCR:

-----

IF NPLNAME = NOT A MATCH (3), GO TO END.SCREEN

INTRO.INCARE

INTRO.INCARE

Now I'm going to ask you some questions about your child's health care. When you answer these questions, please do NOT include dental visits or care your child got when [he/she] stayed overnight in a hospital.

INCARE

3. / INCARE

In the last 6 months, did your child have an illness, injury, or condition that NEEDED CARE RIGHT AWAY in a clinic, emergency room, or doctor's office?

- 1. YES
- 2. NO -----> APMAKE4

DK/REFUSAL/NOT ASCERTAINED --> APMAKE4

CARSN4

4. / CARSN4

In the last 6 months, when your child NEEDED CARE RIGHT AWAY, how often did your child get care as soon as [he/she] needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## APMAKE4

5. / APMAKE4

In the last 6 months, did you make any appointments for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic?

1. YES
2. NO -----> OFCTIM4

DK/REFUSAL/NOT ASCERTAINED --> OFCTIM4

## APGET4

6. / APGET4

In the last 6 months, when you made an appointment for a CHECK-UP OR ROUTINE CARE for your child at a doctor's office or clinic, how often did you get an appointment as soon as your child needed? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

## OFCTIM4

7. / OFCTIM4

In the last 6 months, NOT counting the times your child went to an emergency room, how many times did [he/she] go to a doctor's office or clinic to get health care?

(IWER: IF NECESSARY: "Your best estimate would be fine.")

(IWER: IF NEEDED CLARIFY: "Please don't include dental care your child received.")

(IWER: IF NEEDED CLARIFY, "Please include ALL doctor visits including those for routine, regular care and for an illness or injury.")

(READ LIST IF NEEDED: "Would you say...")

0. NONE,
1. 1 TIME,
2. 2,
3. 3,
4. 4,
5. 5 TO 9, OR
6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE <05 THEN GO TO PRSNLD4  
IF OFCTIM4=0 OR DK/REFUSAL AND QNAIRE >05 THEN GO TO CHSCHL



PRVENT5

8. / PRVENT5

In the last 6 months, did you and your child's doctor or other health provider talk about specific things you could do to prevent illness in your child?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

OFTQUES

9. / OFTQUES

In the last 6 months, how often did you have your questions answered by your child's doctors or other health providers? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXSTP

10. / RXSTP

In the last 6 months, did you and your child's doctor or other health provider talk about starting or stopping a prescription medicine for your child?

- 1. YES
- 2. NO -----> RTALLCR

DK/REFUSAL/NOT ASCERTAINED --> RTALLCR

RXWHY

11. / RXWHY

When you talked about your child starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want your child to take a medicine? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXWYNT

12. / RXWYNT

When you talked about your child starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might NOT want your child to take a medicine? Would you say...

(READ LIST)

- 1. NOT AT ALL,
- 2. A LITTLE,
- 3. SOME, OR
- 4. A LOT?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RXBST

13. / RXBST

When you talked about your child starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for your child?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

RTALLCR

14. / RTALLCR

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?

(IF NEEDED: "Please do not include any dental care your child may have received.")

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
HEALTH CARE										HEALTH CARE
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED

CARNES4

15. / CARNES4

In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHSCHL

16. / CHSCHL

Is your child now enrolled in any kind of school or daycare?

- 1. YES
- 2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

CONTSCHL

17. / CONTSCHL

In the last 6 months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?

- 1. YES
- 2. NO -----> MEDEQUIP

DK/REFUSAL/NOT ASCERTAINED --> MEDEQUIP

HELPCONT

18. / HELPCONT

In the last 6 months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MEDEQUIP

19. / MEDEQUIP

Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

- 1. YES
- 2. NO -----> SPCTHY

DK/REFUSAL/NOT ASCERTAINED --> SPCTHY

EZMDEQ

20. / EZMDEQ

In the last 6 months, how often was it easy to get special medical equipment or devices for your child? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPMDEQ

21. / HELPMDEQ

Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

SPCTHY

22. / SPCTHY

In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

- 1. YES
- 2. NO -----> TCPBLM

DK/REFUSAL/NOT ASCERTAINED --> TCPBLM

EZTHP

23. / EZTHP

In the last 6 months, how often was it easy to get this therapy for your child? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTHP

24. / HELPTHP

Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

TCPBLM

25. / TCPBLM

In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

- 1. YES
- 2. NO -----> PLUSCARE

DK/REFUSAL/NOT ASCERTAINED --> PLUSCARE

EZTC

26. / EZTC

In the last 6 months, how often was it easy to get this treatment or counseling for your child? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPTC

27. / HELPTC

Did anyone from your child's health plan, doctor's office, or clinic help you get this treatment or counseling for your child?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLUSCARE

28. / PLUSCARE

In the last 6 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

- 1. YES
- 2. NO -----> PRSNLD4

DK/REFUSAL/NOT ASCERTAINED --> PRSNLD4

HLPCOORD

29. / HLPCOORD

In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

PRSNLD4

30. / PRSNLD4

A personal doctor is the one your child would see if [he/she] needs a check-up, has a health problem, or gets sick or hurt.

Does your child have a personal doctor?

- 1. YES
- 2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRTMS

31. / DRTMS

In the last 6 months, how many times did your child visit [his/her] personal doctor for care ?

(IF NEEDED: "Your best estimate would be fine.")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> RATEDR4
- 1. 1 TIME,
- 2. 2,
- 3. 3,
- 4. 4,
- 5. 5 TO 9, OR
- 6. 10 OR MORE TIMES?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

PBDRNG

31a. /PBDRNG

In the last 6 months, how often did you have a hard time speaking with or understanding your child's personal doctor because you spoke different languages? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY,
- 4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

DREXPL4

32. / DREXPL4

In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRLSTN4

33. / DRLSTN4

In the last 6 months, how often did your child's personal doctor listen carefully to you?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRESPU4

34. / DRESPU4

In the last 6 months, how often did your child's personal doctor show respect for what you had to say?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

CABLTLK

35. / CABLTLK

Is your child able to talk with doctors about [his/her] health care?

- 1. YES
- 2. NO -----> DRTMEN4

DK/REFUSAL/NOT ASCERTAINED --> DRTMEN4

CPBDRLN

35a. / CPBDRLN

In the last 6 months, how often did your child have a hard time speaking with or understanding his or her personal doctor because they spoke different languages? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS

DK/REFUSAL/NOT ASCERTAINED

CDREXPL

36. / CDREXPL

In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for YOUR CHILD to understand? Would you say...

(READ LIST)

1. NEVER
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTMEN4

37. / DRTMEN4

In the last 6 months, how often did your child's personal doctor spend enough time with your child ? Would you say...

(READ LIST)

1. NEVER,
2. SOMETIMES,
3. USUALLY, OR
4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

DRTLKU

38. / DRTLKU

In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)



DIFFDR

39. / DIFFDR

In the last 6 months, did your child get care from a doctor or other health provider besides [his/her] personal doctor?

- 1. YES
- 2. NO -----> RATEDR4

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> RATEDR4

DRINFO

40. / DRINFO

In the last 6 months, how often did your child's personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RATEDR4

41. / RATEDR4

Using ANY NUMBER FROM 0 TO 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
PERSONAL										PERSONAL
DOCTOR POSSIBLE										DOCTOR POSSIBLE

DK/REFUSAL/NOT ASCERTAINED

COND3MO

42. / COND3MO

Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 MONTHS?

(IWER: "We are looking for a condition that the child CURRENTLY HAS that has lasted for more than 3 months." )

- 1. YES
- 2. NO -----> INTRO.SPDR

DK/REFUSAL/NOT ASCERTAINED --> INTRO.SPDR

DRUNCON

43. / DRUNCON

Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

DRUNFAM

44. / DRUNFAM

Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your FAMILY'S day-to-day life?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

INTRO.SPDR

INTRO.SPDR

Now I'm going to ask you some questions about specialists. When you answer these questions, please do NOT include dental visits or care your child got when (he/she) stayed overnight in a hospital.

NDSPDR4

45. / NDSPDR4

SPECIALISTS are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you make any appointments for your child to see a specialist?

(CLARIFY IF NEEDED: "Specialists are doctors who specialize in one area of health care. Please include all doctors you consider to be specialists, but do not include any dental visits.")

(IWER: IF RESPONDENT ASKS, "Does a (type of specialist) count?", CLARIFY, "I don't have any information about that, so please just interpret it however it seems best to you.")

(CLARIFY IF NEEDED: "You can interpret this question however it seems best to you.")

- 1. YES
- 2. NO -----> INTRO.PLAN

DK/REFUSAL/NOT ASCERTAINED --> INTRO.PLAN

PRBSEE4

46. / PRBSEE4

In the last 6 months, how often did you get an appointment for your child to see a specialist as soon as you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, OR
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

SPDRS

47. / SPDRS

How many specialists has your child seen in the last 6 months?

(CLARIFY IF NEEDED: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Would you say your child has seen...")

(READ LIST IF NEEDED: "Would you say...")

- 0. NONE, -----> INTRO.PLAN
- 1. 1 SPECIALIST,
- 2. 2,
- 3. 3,
- 4. 4, OR
- 5. 5 OR MORE SPECIALISTS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ) --> INTRO.PLAN

RTSPDR4

48. / RTSPDR4

We want to know your rating of the specialist your child saw most often in the last 6 months.

Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

(Clarify if necessary: "Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.")

- |            |    |    |    |    |    |    |    |    |    |            |
|------------|----|----|----|----|----|----|----|----|----|------------|
| 00         | 01 | 02 | 03 | 04 | 05 | 06 | 07 | 08 | 09 | 10         |
| WORST      |    |    |    |    |    |    |    |    |    | BEST       |
| SPECIALIST |    |    |    |    |    |    |    |    |    | SPECIALIST |
| POSSIBLE   |    |    |    |    |    |    |    |    |    | POSSIBLE   |

DK/REFUSAL/NOT ASCERTAINED

INTRO.PLAN  
INTRO.PLAN

Now I'm going to ask you some questions about your experience with your child's health plan.

CLCSR4  
49. / CLCSR4

In the last 6 months, did you get information or help from customer service at your child's health plan?

- 1. YES
- 2. NO -----> PLPRWK4

DK/REFUSAL/NOT ASCERTAINED --> PLPRWK4

PBCLCS4  
50. / PBCLCS4

In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CSRESP  
51. / CSRESP

In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PLPRWK4  
52. / PLPRWK4

In the last 6 months, did your child's health plan give you any forms to fill out?

- 1. YES
- 2. NO -----> RTPLEXP

DK/REFUSAL/NOT ASCERTAINED --> RTPLEXP

PBPLPW4

53. / PBPLPW4

In the last 6 months, how often were the forms from your child's health plan easy to fill out? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

RTPLEXP

54. / RTPLEXP

Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child's health plan?

00	01	02	03	04	05	06	07	08	09	10
WORST										BEST
HEALTH PLAN										HEALTH PLAN
POSSIBLE										POSSIBLE

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHPRES

55. / CHPRES

In the last 6 months, did you get or refill any prescription medicines for your child?

- 1. YES
- 2. NO -----> HLTSTA4

DK/REFUSAL/NOT ASCERTAINED --> HLTSTA4

EZPRES

56. / EZPRES

In the last 6 months, how often was it easy to get prescription medicines for your child through [his/her] health plan? Would you say...

(READ LIST)

- 1. NEVER,
- 2. SOMETIMES,
- 3. USUALLY, or
- 4. ALWAYS?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

HELPPRES

57. / HELPPRES

Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

HLTSTA4

58. / HLTSTA4

In general, how would you rate your child's overall health? Would you say it is...

(READ LIST)

- 1. EXCELLENT,
- 2. VERY GOOD,
- 3. GOOD,
- 4. FAIR, OR
- 5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

MNTLSTAT

59. / MNTLSTAT

In general, how would you rate your child's overall MENTAL OR EMOTIONAL health? Would you say it is...

(READ LIST)

- 1. EXCELLENT,
- 2. VERY GOOD,
- 3. GOOD,
- 4. FAIR, OR
- 5. POOR?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CUSEMED

60. / CUSEMED

Other than vitamins, does your child currently need or use medicine prescribed by a doctor?

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDA

61. / WHYMEDA

Is this because of any medical, behavioral, or other health condition?

- 1. YES
- 2. NO -----> MOREMED

DK/REFUSAL/NOT ASCERTAINED --> MOREMED

WHYMEDB

62. / WHYMEDB

Is this a condition that has lasted or is expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

MOREMED

63. / MOREMED

Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREA

64. / WHYMOREA

Is this because of any medical, behavioral, or other health condition?

- 1. YES
- 2. NO -----> LIMITED

DK/REFUSAL/NOT ASCERTAINED --> LIMITED

WHYMOREB

65. / WHYMOREB

Is this a condition that has lasted or is expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

LIMITED

66. / LIMITED

Is your child limited or prevented in any way in [his/her] ability to do the things most children of the same age can do?

- 1. YES
- 2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMA

67. / WHYLIMA

Is this because of any medical, behavioral, or other health condition?

- 1. YES
- 2. NO -----> SPECTHP

DK/REFUSAL/NOT ASCERTAINED --> SPECTHP

WHYLIMB

68. / WHYLIMB

Is this a condition that has lasted or is expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

SPECTHP

69. / SPECTHP

Does your child need or get special therapy such as physical, occupational, or speech therapy?

- 1. YES
- 2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS

WHYSTA

70. / WHYSTA

Is this because of any medical, behavioral, or other health condition?

- 1. YES
- 2. NO -----> CHCOUNS

DK/REFUSAL/NOT ASCERTAINED --> CHCOUNS



WHYSTB

71. / WHYSTB

Is this a condition that has lasted or is expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

CHCOUNS

72. / CHCOUNS

Does your child have any kind of emotional, developmental, or behavioral problem for which [he/she] needs or gets treatment or counseling?

- 1. YES
- 2. NO -----> CAGE

DK/REFUSAL/NOT ASCERTAINED --> CAGE

TIMCOUNA

73. / TIMCOUNA

Has this problem lasted or is it expected to last for at least 12 months?

- 1. YES
- 2. NO

DK/REFUSAL/NOT ASCERTAINED

CAGE

74. / CAGE

I have just a few more questions.

What is YOUR CHILD'S age?

(IWER: ENTER 00 IF LESS THAN 1 YEAR OLD)

(IWER: IF NEEDED CLARIFY, "Please answer based on your child's age as of their last birthday.")

\_\_\_ ENTER CHILD'S AGE

DK/REFUSAL/NOT ASCERTAINED

IF CAGE<19 THEN GO TO CGENDER

CAGE.CK

74a. / CAGE.CK

I have entered that [NAME OF CHILD] is [CAGE]. Is that correct?

("DK" NOT ALLOWED)

- 1. YES-AGE ENTERED CORRECTLY
- 2. NO-CORRECT AGE -----> CAGE

CGENDER

75. / CGENDER

(IF NEEDED: "Is your child male or female?")

- 1. MALE
- 2. FEMALE

REFUSAL/NOT ASCERTAINED

LATINO

76. / LATINO

Is your child of Hispanic or Latino origin or descent?

- 1. YES / HISPANIC OR LATINO
- 2. NO / NOT HISPANIC OR LATINO

DK/REFUSAL/NOT ASCERTAINED

INTRO.RACE

INTRO.RACE

I am going to read a list of race categories. For each category, please say YES or NO if it describes your child's race. I must ask you about all categories in case more than one applies.

PQRACE3.(1-6)

77.(1-6) / PQRACE3.(1-6)

[Is your child)]

- 1. "White"
- 2. "Black or African-American"
- 3. "Asian"
- 4. "Native Hawaiian or other Pacific Islander"
- 5. "American Indian or Alaska Native"
- 6. "Some other race"?

(IWER: IF R REPLIES "WHY ARE YOU ASKING ABOUT MY CHILD'S RACE?" SAY  
"We ask about your child's race for demographic purposes only.  
We want to be sure that the people we survey accurately represent the  
racial diversity of managed care enrollees in this country.")

(IWER: If R answers with a category not listed here, such as "HISPANIC"  
or "AMERICAN" or "MIXED RACE", probe using the category "OTHER".)

1. YES
2. NO

DK/REFUSAL/NOT ASCERTAINED

QRACE3.OTH / QRACE3.OTH  
(What is your child's race?)

---

PAGE  
78. / PAGE

Now I have a few questions about you. What is YOUR age?

(IWER: IF NEEDED CLARIFY, "Please answer based on your age as of your  
last birthday.")

(READ IF NEEDED, "Are you...")

0. UNDER 18,
1. 18 TO 24,
2. 25 TO 34,
3. 35 TO 44,
4. 45 TO 54,
5. 55 TO 64,
6. 65 TO 74, OR
7. 75 OR OLDER?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

PGENDER  
79. / PGENDER

(IWER: ENTER RESPONDENT'S SEX. "DK" NOT ALLOWED.)

(IWER: IF NECESSARY ASK, "Are you male or female?")

1. MALE
2. FEMALE

EDUCAT

80. / EDUCAT

What is the highest grade or level of school that you have COMPLETED?  
Did you complete...

(IWER: IF R SAYS HE/SHE HAD NON-ACADEMIC TRAINING, SUCH AS TRADE  
SCHOOL, PROBE: "Did you receive a high school diploma or GED?")

(IWER: ACADEMIC TRAINING BEYOND A HIGH SCHOOL DIPLOMA THAT DOES NOT  
LEAD TO A BACHELORS DEGREE, SHOULD BE CODED "4". IF R WENT TO BUSINESS  
SCHOOL OR GOT A 3-YEAR NURSING DEGREE, ENTER "4")

(IWER: IF R OFFERS MORE THAN ONE RESPONSE, FOR EXAMPLE: "SOME HIGH  
SCHOOL OR GED", ENTER THE HIGHEST NUMBER THAT APPLIES.)

(READ LIST)

1. 8TH GRADE OR LESS,
2. SOME HIGH SCHOOL, BUT DID NOT GRADUATE,
3. HIGH SCHOOL GRADUATE OR GED,
4. SOME COLLEGE OR 2-YEAR DEGREE,
5. 4-YEAR COLLEGE GRADUATE, OR
6. MORE THAN A 4-YEAR COLLEGE DEGREE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

CHRELT

81. / CHRELT

How are you related to the child?

(READ IF NEEDED: "Are you the ...")

1. MOTHER OR FATHER,
2. GRANDPARENT,
3. AUNT OR UNCLE,
4. OLDER BROTHER OR SISTER,
5. OTHER RELATIVE,
6. LEGAL GUARDIAN, OR
7. SOMEONE ELSE?

DK/REFUSAL/NOT ASCERTAINED (DO NOT READ)

ALL.DONE

THANKS.SCREEN.

Those are all the questions I have.

Thank you for taking part in this important interview.

Have a nice (day/evening). Good bye.

RETURN TO COVERSHEET

EDIT.FLG

(IWER: DO YOU NEED TO TYPE AN EDIT?)

1. YES
2. NO

IF EDIT.FLG = 2 THEN GO TO CK.END.EDIT

EDIT.OTH

EDIT.OTH. (IWER: PLEASE TYPE YOUR EDIT-BE SPECIFIC-INCLUDE:

- 1) QUESTION NUMBER(S)
  - 2) WHAT WAS ENTERED
  - 3) WHAT NEEDS TO BE CHANGED
- 

CK.END.EDIT

LANG.DID

LANG.DID. IWER: DID YOU DO THIS INTERVIEW IN...

1. ENGLISH,
2. SPANISH OR
3. BOTH?

END.SCREEN

COVERSHEET NOT NEEDED

I may need to contact you again later, but today we are only interviewing members of Oregon Health Plan, so those are all the questions I have. Thank you very much for your help.

( RC = [RC%] )

RETURN TO COVERSHEET

TRANS.SCRN

INTERVIEWER: YOU HAVE INDICATED THAT YOU HAVE A SPANISH SPEAKER OR  
A HOUSEHOLD WITH A LANGUAGE PROBLEM.

1. IF THIS COVERSHEET SHOULD BE MOVED TO THE SPANISH PROJECT  
ENTER "1"
2. IF THIS WAS AN ERROR, TYPE "2" TO GO BACK

WHAT.LANG

INTERVIEWER: WHAT LANGUAGE DO YOU THINK THEY SPEAK IN THIS HOUSEHOLD?

---

DK

GOOD.BYE

INTERVIEWER: [THIS ID HAS BEEN TRANSFERRED TO THE SPANISH PROJECT/THIS ID IS  
NOT ELIGIBLE FOR TRANSFER TO THE SPANISH PROJECT. THIS ID WILL BE CODED AS  
A LANGUAGE PROBLEM]

[( RC = 80 )/( RC = 63 )]

