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From the CENTERS FOR DISEASE CONTROL AND PREVENTION / National Center for Health Statistics

Access to Health Care Part 1: Children

July 1997



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Center for Health Statistics



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Access to Health Care Part 1: Children

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No. 196

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Center for Health Statistics

Hyattsville, Maryland
July 1997
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Objectives

This report presents national estimates of access to medical care and unmet health care needs for children through 17 years of age by selected sociodemographic variables including sex, age, race and/or ethnicity, family income, family structure, place of residence, and health status. In addition, the impact of children's health insurance status on access to care is described.

Methods

Data from the 1993 Access to Care and Health Insurance questionnaires of the National Health Interview Survey (NHIS) are analyzed to examine access indicators. The NHIS is a continuing household survey of the civilian noninstitutionalized population of the United States. The sample included 16,907 children from infants through 17 years of age from 24,071 households.

Results

In 1993, over 7.3 million U.S. children had at least one unmet health care need or had medical care delayed because of worry about the cost of care. These health care needs included medical care, dental care, prescription medicine, glasses, and mental health care. In addition, almost 4.2 million children lacked a regular source of health care. Factors related to access indicators included health insurance, family income, race and/or ethnicity, family structure, and place of residence. The lack of health insurance or inability to afford care was the main reason given by respondents for children lacking a regular source of medical care.

Conclusions

In the United States, millions of children do not receive needed health care services. Uninsured children and those in families with low income are at the greatest risk of having unmet health needs.

Keywords: *child health • access to care • health insurance • regular source of care • health care utilization • unmet need • uninsured*

Access to Health Care

Part 1: Children

by Gloria Simpson, M.A.; Barbara Bloom, M.P.A.; Robin A. Cohen, Ph.D.; and P. Ellen Parsons, Ph.D., M.P.H.

Introduction

The health of children depends partially on their access to health care services. Despite the improved health outlook for U.S. children in this century because of the reduction in infectious and contagious diseases, recent economic and social changes have called attention to new challenges to children's health and their need for health services. Changes in family structure, geographic mobility, and economic well-being have placed many children in need of health services resulting from conditions relating to hunger, poor housing conditions, violence, and neglect (1). Since 1975, the number of children living in poverty has doubled. In addition, today 27 percent of U.S. children live in single parent families (2). Health services and interventions are needed to deal with crises such as child abuse, which has risen to 850,000 substantiated cases a year; teen suicides, which have almost doubled since 1970; and teen homicides, which have doubled in the past decade. In addition, although the rates of many health conditions among children have remained stable, rates of respiratory conditions, especially asthma, have increased dramatically, and immunization rates for preschool children remain below recommended guidelines (2).

To meet current and emerging health needs of children, the U.S. Maternal and Child Health Bureau sponsored the development of new health care guidelines (1). These guidelines recommend health care visits for children at key developmental stages. These visits should include

physical examinations and medical intervention, observation, screening, and counseling. According to these guidelines, pediatric care, which employs preventive and health-promoting interventions, will lead to improved outcomes. These outcomes are best ensured by a "medical home," or usual source of health care that is accessible and offers continuous, comprehensive, family-centered, coordinated, and compassionate care (1).

The recent Institute of Medicine report on Access to Health Care in America defines access to health care as "the timely use of personal health services to achieve the best possible health outcomes." (3) Unfortunately, many U.S. children do not have access to this type of health care. Historically, patterns of pediatric health care utilization have varied by health insurance status, income, race and/or ethnicity, family structure, and region (4-6).

Theoretical and empirical studies of access to health care have emphasized the importance of having health insurance and a regular source of care to ensure that children have access to health services (3,7,8). According to the behavioral model of health services' use originally developed by Andersen (9) and refined over the years (5,10,11), individuals are "predisposed" to use health services according to their demographic and sociological characteristics. Having health insurance and a regular source of care constitute "enabling factors" that facilitate the use of health services—the former by providing financial access and the latter through familiarity. According to the literature, these variables are among the

strongest predictors of health service use (8).

However, site of the regular source of care has also been shown as an important factor. Not all sources of care are alike. Historically, private doctors' offices have been more likely to provide continuity of care and the health care services recommended in the new health care guidelines. Public clinics, community health centers, and hospital outpatient departments may also provide these services. However, emergency rooms, while well-equipped to provide emergency care, are not organized to provide either continuity of care or the range of services that children need (8,12).

Beginning in 1993, access to health care data has been collected routinely through the National Health Interview Survey (NHIS). This survey included measures of access to care such as regular source of care, site of that care, and reason for no regular source of care. Also, for the first time in a national survey, questions were asked about unmet needs for health care services. This report presents baseline national estimates of the number and percent of children through the age of 17 who have a regular source of care and who have unmet health needs. Usual source of care and place of care are described according to the family's sociodemographic characteristics or "predisposing" characteristics. Data are then shown by health insurance status. Some differences within health insurance categories are also described for regular source of care, but not for children with unmet health needs because the numbers for this cross classification are unreliable.

This report is the first of a three-part set of reports on access to health care in the United States for 1993. The second report covers working-aged adults (13), and the third report is on older adults age 65 years and over (14). These populations were examined separately because they have different health care needs and because health care services are organized to target the age-specified population groups.

Methods

This report on children from infants through 17 years of age uses data from the 1993 Access to Care and the 1993 Health Insurance questionnaires of the National Health Interview Survey (NHIS), a continuing household survey of the civilian noninstitutionalized population of the United States. Information was collected by personal interview with an adult in the household.

The 1993 Access to Care and the Health Insurance surveys included 16,907 children in the sample. These questionnaires were administered in the third and fourth quarters of 1993. The Access to Care survey included questions about regular source of care, place of care, reasons for no regular source of care, and difficulties in getting health services. The Health Insurance survey included questions about type of insurance, insurance costs, services covered, and reasons for no insurance coverage. *Current Estimates from the National Health Interview Survey, 1993* includes a copy of all questionnaires and a discussion of NHIS sample design, data collection, and data processing (15).

Some of the variables analyzed in this report (regular source of care and unmet need variables) have higher levels of item nonresponse than usually found in the NHIS. Missing values for these variables have been excluded from the analysis. This is equivalent to assuming that missing values are distributed the same way as the known cases in the population. The percent of cases with unknown or missing responses in the total population for the health insurance, the regular source of care, and the unmet need variables are shown in [table I](#) of [appendix I](#). Data in [table I](#) show that uninsured, poor, and minority persons were over-represented among the unknown cases. This suggests that those with missing values are probably more likely to have access problems than known cases. Excluding the missing values probably underestimates the problems children have in obtaining health care services.

Because the estimates shown in this report are based on a sample, they are subject to sampling error, which is measured by the standard error. Percents and standard errors were calculated using SUDAAN, a statistical program for survey data analysis that incorporates the NHIS sample weights and complex survey design into its estimates (16). SUDAAN uses first-order Taylor series approximations to obtain estimates of variances. Standard errors are shown in parentheses for each estimate.

A *t*-test, with a critical value of 1.96 (0.05 level), was used to test all comparisons that are discussed. Statistical tests performed were two-tailed tests with no adjustments for multiple comparisons. Terms in the text relating to differences, such as "greater" and "less," indicate that the differences are statistically significant, and terms such as "similar" or "no difference" mean that they are not significant. Lack of comment regarding the difference between any two estimates does not mean that the difference was tested and found not to be statistically significant.

Race and/or Ethnicity

In this report, a child's race and/or ethnicity was based on the respondent's description of each household member's racial and ethnic background. Children were divided into the following race and/or ethnicity categories: *White* includes white, non-Hispanic children; *Black* includes black, non-Hispanic children; and *Hispanic*, includes Hispanic children of any race. The Hispanic group was subdivided into two categories: *Mexican-American* includes Mexican-Mexicano, Mexican-American, and Chicano; and *Other Hispanic* includes Puerto Rican, Cuban, other Latin American, other Spanish, and multiple Hispanic. Children of other races who were not of Hispanic origin were included in the totals, but were not shown separately because the numbers were too small for reliable comparisons. If a respondent did not know the ethnicity of a household child, that child was considered not to be of Hispanic origin.

Health Insurance

Persons were classified into health insurance categories based on six individual questions about type of coverage (private, Medicaid, Medicare, military, Indian Health Service, and other public assistance). Because some individuals have more than one source of insurance, mutually exclusive categories were developed in order to eliminate analytical problems associated with double counting. Categories include private coverage, public coverage, other coverage, and uninsured. More information about this insurance hierarchy is in [appendix II](#).

Regular Source and Place of Care

Children were classified as having a regular or usual source of care if it was reported that they had at least one particular person or place they usually went to when sick or needed advice about health. Children with a regular source of care sought medical care in a variety of settings. These places were grouped into the following four categories:

Doctor's office—includes private doctor's offices, private doctor's clinics, HMO's, and prepaid groups;

Clinic—includes company or school health clinic and/or center; community, migrant, or rural clinic and/or center; county, city, or public county hospital outpatient clinic; and private and/or other hospital outpatient clinic;

Emergency room—includes hospital emergency rooms or departments.

Other—includes all remaining places of care (about 2 percent)—psychiatric, military, other, and unknown facilities, which were included in the total but were not shown separately.

Reason for No Regular Source of Care

When children had no regular source of care, respondents were asked to select the reason from a list of possible answers. In this report the responses were grouped into the following categories:

Doesn't need doctor.

No insurance or can not afford it.

Unavailable or inconvenient—includes previous doctor who is not available and/or has moved; does not know where to go; and no care is available and/or care is too far away and/or not convenient.

Other—includes speaking a different language, and other reasons.

Unmet Need

Respondents were asked if anyone in the family was unable to obtain needed medical services in the past 12 months. Those who answered "yes" to any of the following series of questions were classified as having an unmet need: needed medical care or surgery, but did not get it; delayed medical care because of the cost; needed dental care, prescription medicine, eyeglasses, or mental health care, but could not get it.

Results

[Tables 1–8](#) present access to care indicators by sociodemographic characteristics according to health insurance category. [Table 1](#) shows the number and percent distribution for all children with a regular source of care by sociodemographic characteristics for children with all types of insurance; [table 2](#) shows the same information for those with private insurance; [table 3](#)

shows the information for those with public insurance; and [table 4](#) shows the information for children with no insurance. [Tables 5–8](#) show the number and percent of children by place of care for the same characteristics as in [tables 1–4](#), and [table 9](#) shows data on unmet health needs for children by sociodemographic variables and health insurance status.

Regular Source of Medical Care

In 1993, 94 percent of children in the U.S. had a regular source of medical care; 6 percent (4.2 million) children had no regular source of care ([table 1](#)). Family income was an important variable associated with children having a usual source of health care ([figure 1](#)). Overall, poor children were at greater risk of not having a usual source of health care than wealthier children. The likelihood of having a regular source of care rose with family income from 89 percent for children with annual family incomes of less than \$20,000 to 98 percent for children with family incomes of \$35,000 or more. Differences in having a usual source of care by income occurred within each racial and ethnic group included in this study. For example, among Hispanics, the percent of children having a regular source of health care ranged from

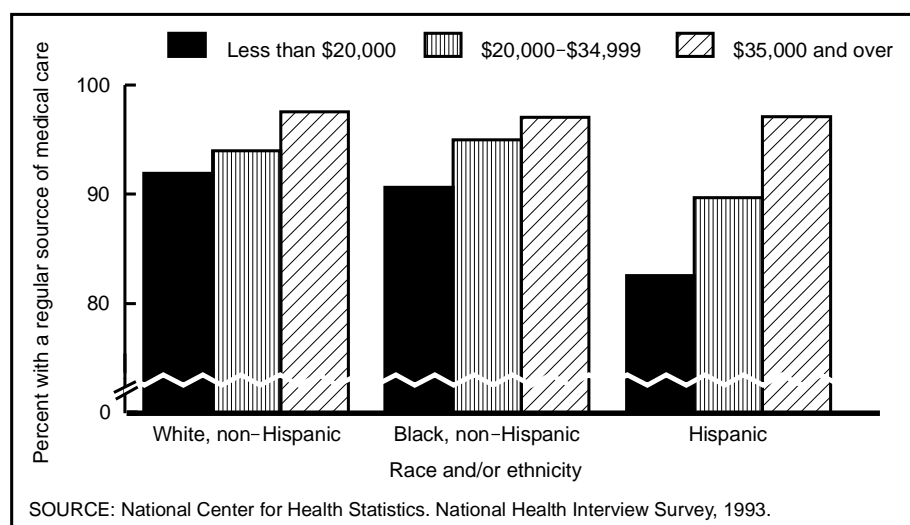


Figure 1. Percent of children 0–17 years of age with a regular source of medical care by race and/or ethnicity and family income: United States, 1993

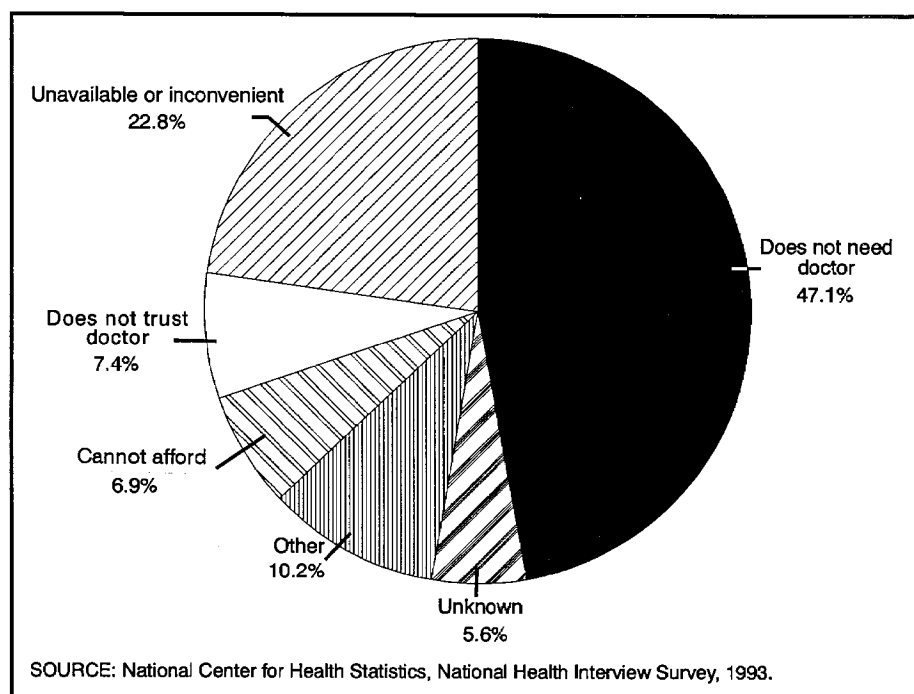


Figure 2. Percent of children 0–17 years of age with a regular source of care by type of health insurance coverage: United States, 1993

83 percent for children in families with an annual income of less than \$20,000 to 97 percent for children in families with annual incomes of \$35,000 or more.

Overall differences in having a usual source of care existed by race and ethnicity. Black and Hispanic children were less likely to have a regular source of care than white children. Eighty-six percent of Mexican-American children and 93 percent of black children had a regular source of health care compared with 95 percent of white children.

Differences in the percent of children having a usual source of care also existed by region. Children who lived in the South were less likely to have a regular source of health care than children living in the Northeast or Midwest. These percents ranged from 91 percent for young children in the South to 97 percent for those living in the Northeast.

Health insurance played an important role in children having a regular source of health care (figure 2). Seventy-nine percent of uninsured children had a regular source of care compared with 94 percent of children with public insurance and 97 of children with private insurance. When examining data on younger and older children

separately, the differences in having a regular source of health care (when measured) by health insurance status were significant for all three age categories—preschool, infant to age 4, and 5–17 years old.

Within the health insurance categories, there were significant differences among children having a usual source of care (when measured) by sociodemographic characteristics. For children who had private health insurance, there were small differences in the proportion of those with a regular source of care by income category and geographic region (table 2). Ninety-three percent of children with private insurance living below poverty had a usual source of care compared with 97 percent of those living above poverty. In terms of region, 95 percent of those with private insurance living in the South had a regular source of care versus 99 percent of those living in the Northeast.

These differences in having a usual source of care by income and region were also found for children without health insurance (table 4). The likelihood of having a regular source of care rose with income from 76 percent for children in families with annual incomes under \$20,000 to 89 percent for

children in families with annual incomes of \$35,000 or more. This pattern was similar to that found for children with private insurance; however, the differences were greater for uninsured children. There was also a significant difference among uninsured children in having a regular source of care between children living below poverty and those living above poverty (74 percent versus 83 percent). Also, among uninsured children, there were regional differences in having a regular source of care. Children living in the South and West were less likely to have a regular source of care than those living in the Midwest and Northeast (75 percent versus 85 to 89 percent).

In addition to significant differences in having a usual source of care among uninsured children by income and region, there were differences by race and/or ethnicity and place of residence. While there was no difference in having a usual source of care between black and white uninsured children, both were significantly more likely to have a usual source of care than Hispanic children. Sixty-seven percent of uninsured Hispanic children had a regular source of care compared with 82 percent of black and 84 percent of white uninsured children. In addition, uninsured children differed by place of residence in having a usual source of care. Seventy-seven percent of uninsured children living in a metropolitan statistical area (MSA) had a usual source of medical care while 85 percent of those living in a non-MSA had usual source of health care.

Place of Regular Source of Medical Care

Among children having a usual place of care, 84 percent received that care in a private doctor's office, 11 percent received it in a clinic, and 1 percent used the hospital emergency room (ER) (table 5). Important differences in usual place of care existed by race and/or ethnicity, place of residence, and family structure. Overall, among white children having a usual place of care, 92 percent used a private doctor's office compared with 67 percent of black and 70 percent of Hispanic children. Conversely, only 5 percent of

white children used a clinic while 25 percent of black and Hispanic children used clinics. However, the racial and ethnic differences for children in families with incomes over \$35,000 were not significant.

In regard to family structure, there were differences between children living with both parents and those living only with their mother. Children living with two parents were more likely to go to a private doctor than those living only with their mother (88 versus 73 percent), and less likely to go to a clinic (8 versus 22 percent).

When examining central city versus noncentral city (suburbs), children living in the central city used clinics as a regular place of care more than suburban children (20 versus 8 percent). They also used private doctors less than their suburban peers (73 versus 89 percent).

While the overall percent of children using the emergency room (ER) for a regular place of care was only 1 percent, it represented over 800,000 children. Utilization of the ER is a current concern of health care professionals not only because of the high costs, but also because use of the ER as a regular source does not result in optimal care for the child. Overall, the proportion of black children using the ER as a regular place of care was 8 times higher than that for white children. Among poor black children who had a regular place of care, 5 percent used the ER as their usual place.

Health insurance status was a key factor associated with place of usual source of care. Among children with a regular place of care, the proportion using a private doctor's office as a regular place of care was 94 percent for children with private insurance, 62 percent for those with public insurance, and 74 percent for uninsured children. Conversely, for children using a clinic as a regular place of health care, these proportions were 5 percent for children with private health insurance, 30 percent for those with public insurance, and 20 percent for uninsured children.

There were also differences by health insurance status in the

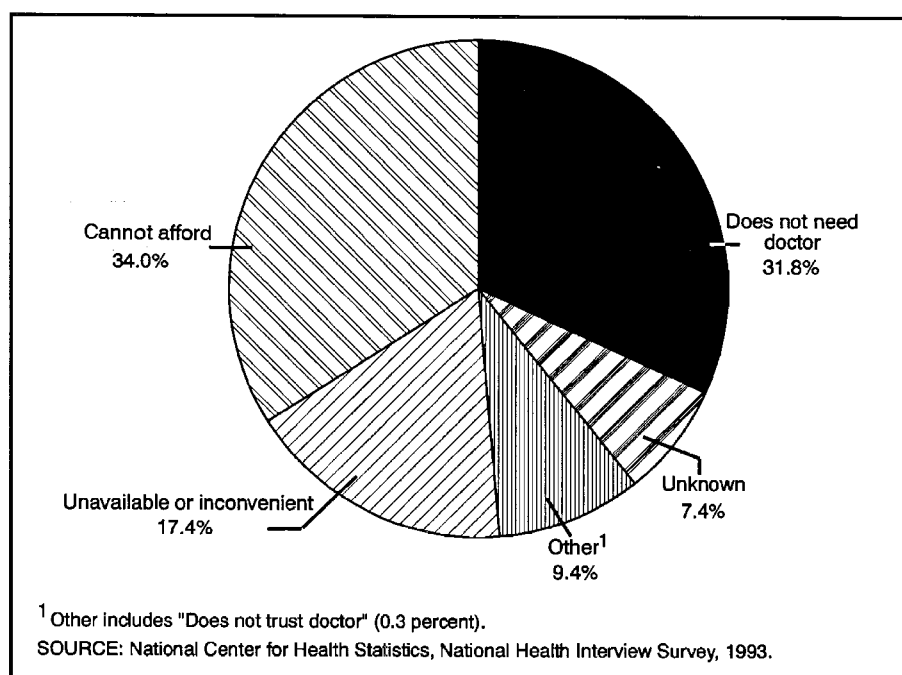


Figure 3. Reason for no regular source of care for children 0–17 years of age: United States, 1993

proportions of children using the emergency room as a regular source of care. When compared with children who had private health insurance, those with no health insurance were more than 5 times as likely to use it as a regular place of care, and children with public health insurance were approximately 10 times as likely to use the ER as a regular place for care.

Reason for No Regular Source of Medical Care

When the child had no regular source of care, the respondent was asked to select from a list of possible reasons. For 34 percent of the children, the reason given was "lack of health insurance or can't afford" (figure 3). This was followed by "Does not need a doctor" for 32 percent of the children. For 17 percent, the reason category included "Previous doctor not available," "Don't know where to go," "No care available/Care too far away, not convenient." Nine percent of the respondents had a reason other than the response categories on the list. For 7 percent of the children, the response to this question was "Don't know."

Unmet Medical Needs

In the United States, over 7.3 million children had difficulty obtaining at least one of the medical services they needed in 1993 (table 9 and figures 4 and 5). Almost 1.3 million children were unable to get needed medical care, and for 2.7 million children, medical care was delayed because of worry about the cost of care. Almost 4.2 million children were unable to get dental care, and over 800,000 went without prescription medicine and glasses. Also, according to respondents, over 270,000 children needed mental health services, but were unable to get them.

As mentioned previously, health insurance was a key factor associated with obtaining access to care. Children with no health insurance were more likely to go without services such as medical care, dental care, and prescription medicine or glasses than children with public or private health insurance. Furthermore, children with no health insurance were 6 times as likely to go without medical care than those with private insurance. Children with no health insurance were more than 4 times as likely as children with public or private insurance to have delayed getting medical care because their

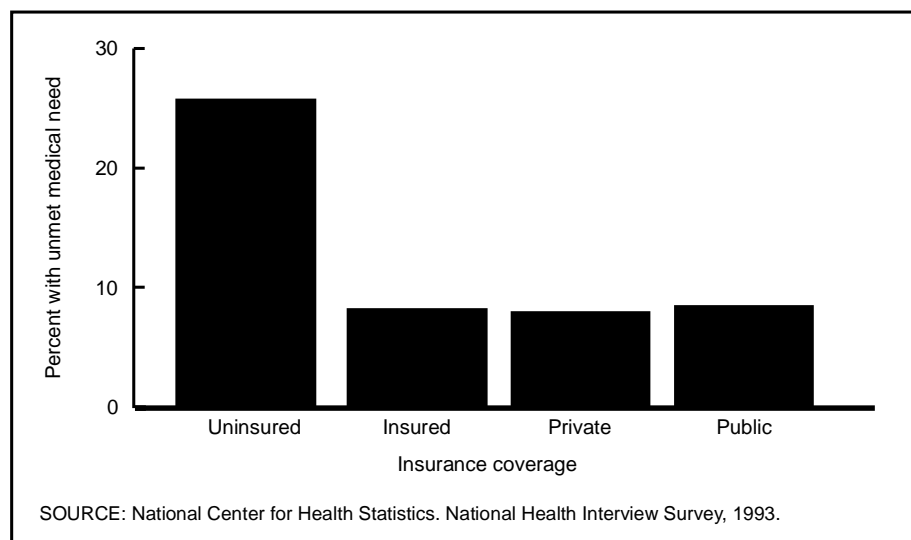


Figure 4. Percent of children 0–17 years of age with unmet health needs by health insurance status: United States, 1993

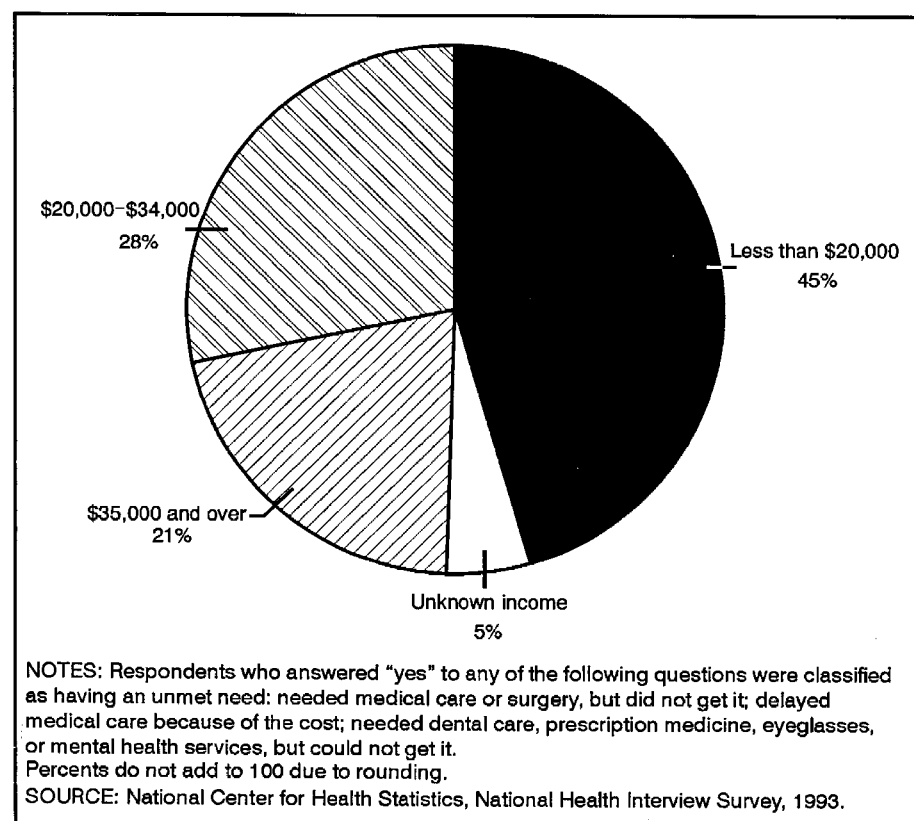


Figure 5. Percent of children 0–17 years of age with unmet health needs by family income: United States, 1993

parents were worried about cost than children with health insurance.

Children with any unmet health need are shown by health insurance status in [figure 4](#). Uninsured children were more likely to have at least one unmet health need than insured children,

25 versus 8 percent. The percent of children with at least one unmet need are shown by family income in [figure 5](#). Among these children, 45 percent lived in families with an annual income of less than \$20,000; 28 percent came from families with an annual income of \$20,000–\$35,000; and 21 percent came

from families with incomes above \$35,000.

Differences in the ability to obtain health services are shown by race and/or ethnicity in [table 9](#). For children in families earning less than \$20,000 a year, delayed medical care was reported twice as often for white children than for black children. In the higher income categories, the numbers were too small to make reliable comparisons.

Other variables that differed in terms of obtaining health care services included family structure and place of residence. Children living only with their mother had more difficulty obtaining medical care, dental care, prescription medicine, eyeglasses, and mental health care than children living with two parents. There were no significant differences in getting services between children living with two parents and those living with their mother and another adult. Also, children living in non-MSA areas were more likely to delay medical care and to not get dental care than children living in metropolitan areas.

Discussion

This report presents 1993 national estimates of the number and percent of U.S. children with restricted access to health care, including unmet health needs from the 1993 National Health Interview Survey. In 1993, over 7.3 million U.S. children (11 percent) had at least one unmet health need or had medical care delayed due to cost during the previous 12 months. These needs included medical care, dental care, prescription medicine, glasses, and mental health care. Although some of these services, such as the inability to obtain glasses, are not life-threatening, inability to obtain them can seriously impact one’s quality of life (17). In addition, 4.2 million children in the United States lacked a regular source of health care, and over 800,000 children used a hospital emergency room as a regular source of care.

As stated earlier, the Andersen and Aday model describes sociodemographic characteristics as “predisposing factors” that impact an individual’s decision to

obtain health care (7,10,11). In this study, sociodemographic variables were associated with having a usual source of care, the place of that care, and having unmet health care needs. Family income, race and/or ethnicity, place of residence, and family structure were related to access to care. Variables relating to children's unmet health care needs included family income, family structure, and urban versus nonurban place of residence. Children living with their mother as the only adult in the household had more difficulty obtaining medical care, dental care, prescription medicine, and mental health care than those living with both parents. These conclusions agree with studies of children in the National Medical Care Expenditure Survey, which revealed that in addition to health insurance status, access to care was associated with socioeconomic differences (18,19) and family structure (20).

Health insurance status, an "enabling factor" in the Andersen and Aday model, "played a major role in the ability of children to acquire health care services" (7,10,11). Compared with children who have private health insurance, children with no health insurance were 6 times more likely to go without medical services and 4 times as likely to have their care delayed. Only 79 percent of children without health insurance had a regular source of care. Children with public health insurance were almost 10 times as likely to use the hospital emergency room as a regular source of care than children with private health insurance. These findings support those of previous research on access to health care and health insurance. Health insurance status has not only been related to access to care among children in the general population (21–27), but also among children with special health needs (28) and serious injury (29). Lack of health insurance is also associated with lack of routine care (22), lower rates of immunization (24), and less access to neonatal intensive care for low birthweight infants (30).

These findings have implications for important issues in the health care delivery system. Lack of access to health care services or delayed treatment

for health problems may lead to more serious conditions and longer, more expensive treatment. For example, by the time uninsured children with ulcerative colitis and Crohn's disease received treatment, their condition was more severe and the disease was more likely to have progressed and to include anemia (31) than their health-insured counterparts.

In the Andersen and Aday model, one indicator associated with obtaining care for illness and disability and for preventive health care services for children is having a usual source of care (7,10,11). As previously stated, 6 percent, or 4.2 million, children lacked a regular source of health care. Children with a regular source of care are more likely to see a doctor and to receive prescribed medicine than those without a regular source of care (18). For children with special health needs, a regular source of care ensures continuity of care and monitoring of disease symptoms (28). For over one-third of U.S. children who did not have a usual source of care, the reason given for no regular source of care was "no insurance or can't afford." As already stated, health insurance and income were associated with all of the outcome variables, including having a usual source of care, except among Medicaid patients. Forty-five percent of children with an unmet health need lived in families with incomes of less than \$20,000 per year (figure 5). Income appears to be a more critical factor than race or ethnicity in obtaining health care; racial and ethnic differences were not significant at high-income categories.

In responding to the reason for no usual source of care, another third of the parents said the child, "Didn't need a doctor." This seems to indicate the need to educate parents about preventive care. Perhaps providers need to instruct parents about their children's needs. As previously stated, the new recommendations for child health care call for preventive checkups for a myriad of services including physical examinations and specific age-related observations and interventions. The timing of these visits vary by the child's age from six visits per year for infants

to annual visits for older children (1). At these visits, pediatricians review many aspects of the child's health including immunizations, growth, and the physical and emotional health status. These visits can also provide health education for parents. In addition, having a regular source of care may result in better physician-parent communication. The doctor may be able to dispense advice over the telephone, thereby avoiding unnecessary office or ER visits, if the child has a regular source of care and the parents have a line of communication with the doctor. Compared with children who have no usual source of care, parents of children with a regular physician are more apt to consult a physician before utilizing a hospital emergency room, resulting in more appropriate use of the ER (32).

Another issue in the provision of health services is the utilization of the ER for nonemergency care. According to survey findings, 4.6 percent of children with public insurance and 2.6 percent without health insurance used the ER as a regular place of care.

Inappropriate utilization of the ER results in high medical costs and disruptive care for the child (20). A study of community hospitals in Michigan found that the average charge for a nonurgent ER visit was \$124 while the average charge for an office visit in 1993 was \$53. Nonpayment for ER visits was 50 percent. To compensate for the high rate of nonpayment, the charges for ER visits were higher than the actual costs (33). In addition to concern about costs, the majority of physicians in the ER are not residency trained in pediatrics (12). Therefore, children using the ER as a regular source of care may not be getting continuity of care and preventive checkups. Recent efforts to reduce nonemergency visits of Medicaid patients to the ER by a system of referral to an assigned physician have not always been successful (34). Another suggestion to help alleviate this problem is to keep physicians' offices open for extended hours and to make urgent care clinics more widely available (35). A study of asthmatic children found that high use of the ER by African-American children compared with white children could not be fully

explained by poverty or inadequate health insurance. It suggested that patient-provider communications play a role in access to care. Good patient-provider communication can steer parents to other care facilities when nonurgent care or preventive care is needed (36).

While these national estimates of access to health care needs for U.S. children serve as valuable benchmarks, they may be underestimates. Some parents may not recognize their children's need for preventive health and dental or mental health care, or they may be reluctant to admit their inability to obtain health services for their children. Also, some populations of children, known to have high rates of problems obtaining health care may have been underrepresented. Homeless children and those who move frequently have poor access to health care (37,38). Homeless children are not included in the NHIS, and immigrant and highly mobile children may have been missed. Nevertheless, these findings present major concerns that need to be addressed and highlight the need for further research. Health insurance continues to be associated with the ability of children to receive health care. Other factors such as family income and place of residence also affect a child's ability to receive health care. The relationship between socioeconomic status and access to health care is complicated because it involves not only income, but personal beliefs and cultural practices (39,40). These and other potential barriers to health care for children, such as transportation, physician-parent communication, language barriers, and the availability of services in the community, are not included in this study and need to be examined (41). Continued monitoring and research in these areas will be needed to keep policy makers and health care planners informed on these issues.

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Table 1. Percent and standard error of children 0–17 years of age with a regular source of medical care by age and selected demographic characteristics: United States, 1993

Selected demographic characteristics	All children 0–17 years	0–4 years	5–17 years
	Percent and standard error		
Total ¹	93.7(0.3)	96.3(0.4)	92.6(0.4)
Sex			
Male	93.5(0.4)	96.3(0.5)	92.3(0.5)
Female	93.9(0.4)	96.3(0.5)	93.0(0.5)
Race and/or ethnicity			
White, non-Hispanic	95.3(0.3)	97.1(0.4)	94.6(0.4)
Black, non-Hispanic	92.5(0.8)	95.5(1.1)	91.2(1.0)
Hispanic	87.1(1.1)	92.7(1.4)	84.0(1.4)
Mexican-American	86.0(1.6)	92.5(1.5)	82.2(2.1)
Other Hispanic	88.9(1.9)	93.1(2.9)	86.8(2.2)
Region			
Northeast	97.3(0.4)	97.9(0.8)	97.0(0.5)
Midwest	95.7(0.5)	96.9(0.6)	95.2(0.6)
South	90.9(0.7)	94.2(0.9)	89.5(0.8)
West	92.8(0.7)	97.1(0.5)	90.9(1.0)
Place of residence			
MSA ²	93.6(0.4)	96.3(0.4)	92.4(0.5)
Central city	92.3(0.7)	95.3(0.8)	90.9(0.8)
Noncentral city	94.4(0.4)	97.1(0.5)	93.3(0.5)
Not MSA ²	94.1(0.7)	96.1(0.8)	93.4(0.8)
Family structure			
Both parents	94.6(0.4)	96.7(0.4)	93.8(0.4)
Mother only	92.1(0.9)	95.5(1.2)	91.1(0.9)
Mother and other adult	92.1(1.3)	95.5(1.5)	89.8(2.0)
Other	83.2(2.6)	88.6(4.0)	82.1(2.8)
Family income			
Less than \$20,000	89.4(0.7)	94.0(0.8)	87.0(0.9)
\$20,000–\$34,999	93.7(0.6)	96.3(0.7)	92.6(0.7)
\$35,000 or more	97.5(0.3)	99.0(0.3)	97.0(0.4)
Race and/or ethnicity and family income			
White, non-Hispanic:			
Less than \$20,000	91.9(1.0)	94.9(1.2)	90.4(1.2)
\$20,000–\$34,999	94.0(0.7)	96.1(1.0)	93.2(0.8)
\$35,000 or more	97.6(0.3)	98.9(0.3)	97.1(0.4)
Black, non-Hispanic:			
Less than \$20,000	90.7(1.4)	94.1(1.6)	89.1(1.6)
\$20,000–\$34,999	95.0(1.5)	97.0(2.0)	94.3(1.7)
\$35,000 or more	97.0(1.1)	99.6(0.4)	96.3(1.4)
Hispanic:			
Less than \$20,000	82.5(1.7)	91.2(2.2)	77.0(2.0)
\$20,000–\$34,999	89.7(2.0)	95.5(1.7)	87.0(2.6)
\$35,000 or more	97.1(1.0)	98.5(1.1)	96.4(1.4)
Mexican-American:			
Less than \$20,000	81.7(2.5)	91.0(2.3)	75.4(3.2)
\$20,000–\$34,999	88.0(2.7)	95.6(2.0)	84.3(3.8)
\$35,000 or more	98.2(1.1)	98.7(1.4)	98.0(1.5)
Other Hispanic:			
Less than \$20,000	84.1(3.0)	91.6(4.7)	79.8(3.2)
\$20,000–\$34,999	93.0(2.7)	95.1(3.3)	92.0(3.4)
\$35,000 or more	95.8(2.0)	98.4(1.6)	94.6(2.6)

Table 1. Percent and standard error of children 0–17 years of age with a regular source of medical care by age and selected demographic characteristics: United States, 1993—Con.

Selected demographic characteristics	All children 0–17 years	0–4 years	5–17 years
Poverty index			
Percent and standard error			
At or above poverty	95.5(0.3)	97.5(0.4)	94.7(0.4)
Below poverty	88.7(0.9)	93.1(1.2)	86.4(1.2)
Health status			
Excellent, very good, good	93.7(0.3)	96.2(0.4)	92.7(0.4)
Fair or poor	92.6(2.0)	99.1(0.9)	89.6(2.8)

¹Includes children with all types of health insurance coverage including those for which health insurance coverage is unknown. Non-Hispanic persons of races other than white or black, persons with unknown income, unknown family structure, unknown poverty status, and unknown health status are included in the total but not shown separately.

²MSA is metropolitan statistical area.

NOTE: Children with unknown regular source of medical care were excluded from the analysis.

Table 2. Percent and standard error of children 0–17 years of age with private health insurance who have a regular source of medical care by age and selected demographic characteristics: United States, 1993

Selected demographic characteristics	All children 0–17 years	0–4 years	5–17 years
	Percent and standard error		
Total ¹	96.8(0.3)	98.6(0.2)	96.2(0.4)
Sex			
Male	96.6(0.4)	98.6(0.3)	95.9(0.5)
Female	97.1(0.3)	98.7(0.3)	96.5(0.4)
Race and/or ethnicity			
White, non-Hispanic	97.1(0.3)	98.6(0.3)	96.5(0.4)
Black, non-Hispanic	95.5(0.9)	98.4(1.0)	94.7(1.1)
Hispanic	96.0(1.0)	98.2(0.9)	95.0(1.4)
Mexican-American	95.4(1.5)	98.5(1.1)	94.1(2.1)
Other Hispanic	96.7(1.2)	97.9(1.6)	96.1(1.5)
Region			
Northeast	99.0(0.3)	99.9(0.1)	98.7(0.5)
Midwest	97.4(0.5)	98.5(0.4)	97.0(0.6)
South	94.8(0.7)	97.5(0.7)	93.9(0.8)
West	96.9(0.6)	98.9(0.4)	96.1(0.8)
Place of residence			
MSA ²	97.1(0.3)	98.8(0.3)	96.4(0.4)
Central city	96.9(0.6)	98.7(0.5)	96.2(0.8)
Noncentral city	97.1(0.4)	98.8(0.3)	96.5(0.5)
Not MSA ²	96.0(0.6)	98.1(0.7)	95.3(0.7)
Family structure			
Both parents	97.1(0.3)	98.7(0.3)	96.5(0.4)
Mother only	95.4(0.9)	97.8(1.5)	94.9(1.0)
Mother and other adult	96.0(1.5)	98.2(1.8)	95.1(1.9)
Other	91.8(2.3)	100.0(. . .)	90.6(2.6)
Family income			
Less than \$20,000	94.1(1.0)	97.9(0.9)	92.6(1.3)
\$20,000–\$34,999	95.8(0.6)	97.9(0.6)	95.0(0.7)
\$35,000 or more	97.9(0.3)	99.2(0.2)	97.5(0.4)
Race and/or ethnicity and family income			
White, non-Hispanic:			
Less than \$20,000	95.6(1.0)	98.2(0.9)	94.6(1.3)
\$20,000–\$34,999	95.7(0.7)	97.6(0.8)	95.0(0.8)
\$35,000 or more	97.9(0.3)	99.1(0.3)	97.4(0.4)
Black, non-Hispanic:			
Less than \$20,000	93.6(1.9)	96.3(3.3)	92.8(1.9)
\$20,000–\$34,999	96.1(1.6)	98.2(1.3)	95.4(2.1)
\$35,000 or more	97.4(1.2)	100.0(. . .)	96.6(1.6)
Hispanic:			
Less than \$20,000	88.9(4.2)	97.4(2.6)	84.2(6.2)
\$20,000–\$34,999	96.1(1.8)	98.8(1.2)	95.1(2.2)
\$35,000 or more	98.2(0.9)	99.2(0.9)	97.8(1.1)
Mexican-American:			
Less than \$20,000	85.0(6.4)	96.0(4.0)	78.3(9.6)
\$20,000–\$34,999	95.2(2.6)	97.9(2.1)	94.3(3.1)
\$35,000 or more	99.5(0.5)	100.0(. . .)	99.3(0.7)
Other Hispanic:			
Less than \$20,000	95.1(3.6)	100.0(. . .)	92.7(5.2)
\$20,000–\$34,999	97.5(2.0)	100.0(. . .)	96.5(2.8)
\$35,000 or more	96.7(1.8)	98.2(1.8)	95.9(2.2)

Table 2. Percent and standard error of children 0–17 years of age with private health insurance who have a regular source of medical care by age and selected demographic characteristics: United States, 1993—Con.

Selected demographic characteristics	All children 0–17 years	0–4 years	5–17 years
Poverty index		Percent and standard error	
At or above poverty	97.2(0.3)	98.7(0.3)	96.7(0.4)
Below poverty	92.9(1.6)	97.5(1.7)	91.2(2.1)
Health status			
Excellent, very good, good	96.8(0.3)	98.6(0.3)	96.1(0.4)
Fair or poor	98.8(0.9)	100.0(. . .)	98.3(1.2)

. . . Category not applicable.

¹Non-Hispanic persons of races other than white or black, persons with unknown income, unknown family structure, unknown poverty status, and unknown health status are included in the total but not shown separately.²MSA is metropolitan statistical area.

NOTE: Children with unknown regular source of medical care were excluded from the analysis.

Table 3. Percent and standard error of children 0–17 years of age with public health insurance who have a regular source of medical care by age and selected demographic characteristics: United States, 1993

Selected demographic characteristics	All children 0–17 years	0–4 years	5–17 years
Percent and standard error			
Total ¹	94.1(0.7)	95.9(0.7)	92.8(1.0)
Sex			
Male	93.7(0.9)	96.2(0.8)	91.8(1.3)
Female	94.5(0.8)	95.6(1.0)	93.7(1.0)
Race and/or ethnicity			
White, non-Hispanic	94.9(1.0)	96.6(1.1)	93.7(1.4)
Black, non-Hispanic	93.8(1.4)	94.3(1.6)	93.4(1.7)
Hispanic	92.8(1.6)	95.9(1.6)	89.8(2.2)
Mexican-American	94.5(1.6)	96.4(1.8)	92.0(2.3)
Other Hispanic	90.5(3.2)	95.0(3.0)	87.4(3.7)
Region			
Northeast	95.6(1.9)	94.5(2.3)	96.1(2.0)
Midwest	94.9(1.1)	96.2(1.3)	93.8(1.7)
South	93.8(1.3)	96.1(1.2)	91.9(1.9)
West	92.7(1.4)	96.0(1.4)	90.2(2.3)
Place of residence			
MSA ²	93.7(0.8)	95.7(0.8)	92.2(1.2)
Central city	94.4(1.0)	95.4(1.1)	93.6(1.3)
Noncentral city	92.5(1.4)	96.2(1.5)	89.6(2.1)
Not MSA ²	95.6(1.1)	96.6(1.2)	94.9(1.5)
Family structure			
Both parents	94.7(0.9)	96.6(0.9)	93.1(1.4)
Mother only	93.7(1.2)	95.1(1.5)	93.0(1.4)
Mother and other adult	96.6(1.2)	96.4(1.7)	96.9(1.6)
Other	89.8(3.8)	91.2(6.3)	89.4(3.9)
Family income			
Less than \$20,000	94.2(0.7)	96.1(0.8)	92.9(1.0)
\$20,000–\$34,999	90.3(2.7)	90.8(3.4)	89.8(3.4)
\$35,000 or more	100.0(. .)	100.0(. .)	100.0(. .)
Race and/or ethnicity and family income			
White, non-Hispanic:			
Less than \$20,000	95.5(1.0)	97.6(1.0)	94.1(1.5)
\$20,000–\$34,999	88.3(4.0)	88.7(5.1)	87.9(4.9)
\$35,000 or more	100.0(. .)	100.0(. .)	*100.0(. .)
Black, non-Hispanic:			
Less than \$20,000	93.5(1.5)	94.2(1.8)	93.1(1.8)
\$20,000–\$34,999	92.8(6.8)	*88.7(10.5)	*95.9(4.2)
\$35,000 or more	*100.0(. .)	*100.0(. .)	*100.0(. .)
Hispanic:			
Less than \$20,000	92.3(1.8)	95.7(1.7)	89.2(2.3)
\$20,000–\$34,999	97.3(2.7)	96.4(3.6)	*100.0(. .)
\$35,000 or more	*100.0(. .)	*100.0(. .)	*100.0(. .)
Mexican-American:			
Less than \$20,000	94.0(1.8)	96.3(2.0)	91.5(2.5)
\$20,000–\$34,999	96.5(3.5)	95.5(4.5)	*100.0(. .)
\$35,000 or more	*100.0(. .)	*100.0(. .)	*100.0(. .)
Other Hispanic:			
Less than \$20,000	89.9(3.3)	94.6(3.2)	86.9(3.8)
\$20,000–\$34,999	*100.0(. .)	*100.0(. .)	*100.0(. .)
\$35,000 or more	*100.0(. .)	*100.0(. .)	*100.0(. .)

Table 3. Percent and standard error of children 0–17 years of age with public health insurance who have a regular source of medical care by age and selected demographic characteristics: United States, 1993—Con.

Selected demographic characteristics	All children 0–17 years	0–4 years	5–17 years
Poverty index		Percent and standard error	
At or above poverty	94.1(1.3)	95.3(1.5)	93.1(1.7)
Below poverty	94.4(0.9)	96.1(1.0)	93.3(1.2)
Health status			
Excellent, very good, good	94.1(0.7)	95.8(0.8)	92.9(1.0)
Fair or poor	95.5(2.3)	98.0(1.9)	93.8(2.9)

*Figure does not meet standard of reliability or precision.

. . . Category not applicable.

¹Non-Hispanic persons of races other than white or black, persons with unknown income, unknown family structure, unknown poverty status, and unknown health status are included in the total but not shown separately.

²MSA is metropolitan statistical area.

NOTE: Children with unknown regular source of medical care are excluded from the analysis.

Table 4. Percent and standard error of children 0–17 years of age with no health insurance who have a regular source of medical care by age and selected demographic characteristics: United States, 1993

Selected demographic characteristics	All children 0–17 years	0–4 years	5–17 years
	Percent and standard error		
Total ¹	78.9(1.4)	86.3(2.1)	76.3(1.6)
Sex			
Male	78.9(1.7)	86.3(2.6)	76.3(2.0)
Female	78.9(1.6)	86.2(2.9)	76.4(1.9)
Race and/or ethnicity			
White, non-Hispanic	83.8(1.8)	87.5(2.9)	82.5(1.7)
Black, non-Hispanic	81.9(3.0)	93.4(3.1)	78.2(3.6)
Hispanic	67.0(3.2)	78.1(4.6)	62.6(4.1)
Mexican-American	67.8(3.7)	78.9(5.2)	63.5(4.9)
Other Hispanic	64.5(7.4)	75.7(10.0)	59.9(8.6)
Region			
Northeast	89.4(2.1)	93.3(3.8)	87.7(3.1)
Midwest	85.4(2.7)	86.8(4.3)	84.9(2.7)
South	75.4(2.2)	81.3(4.0)	73.4(2.4)
West	75.3(2.9)	89.8(2.5)	70.6(3.6)
Place of residence			
MSA ²	76.8(1.7)	85.9(2.3)	73.4(2.0)
Central city	73.3(2.5)	84.9(3.6)	68.3(3.0)
Noncentral city	79.8(2.2)	87.0(2.7)	77.4(2.5)
Not MSA ²	85.3(2.6)	87.4(5.0)	84.6(2.6)
Family structure			
Both parents	80.8(1.7)	85.9(2.5)	78.7(1.9)
Mother only	78.6(3.4)	91.8(4.1)	75.5(3.6)
Mother and other adult	77.5(4.4)	87.4(6.6)	73.3(6.1)
Other	62.8(5.6)	71.0(10.9)	61.5(6.2)
Family income			
Less than \$20,000	75.8(1.9)	84.1(2.8)	72.8(2.1)
\$20,000–\$34,999	83.7(2.7)	91.0(3.2)	81.0(3.3)
\$35,000 or more	88.6(2.3)	93.5(3.0)	87.0(2.7)
Race and/or ethnicity and family income			
White, non-Hispanic:			
Less than \$20,000	81.9(2.7)	83.8(4.6)	81.3(2.7)
\$20,000–\$34,999	85.7(3.1)	90.1(4.9)	84.0(3.4)
\$35,000 or more	90.1(2.4)	93.8(3.5)	88.9(2.6)
Black, non-Hispanic:			
Less than \$20,000	78.8(3.9)	91.4(4.2)	74.5(4.6)
\$20,000–\$34,999	91.1(4.3)	100.0(. . .)	88.3(5.5)
\$35,000 or more	*88.4(6.3)	*92.2(7.9)	*87.7(7.3)
Hispanic:			
Less than \$20,000	66.0(3.7)	77.5(5.3)	61.7(4.1)
\$20,000–\$34,999	70.4(5.3)	87.9(5.1)	61.8(7.9)
\$35,000 or more	*79.7(11.3)	*89.1(10.8)	*75.0(15.2)
Mexican-American:			
Less than \$20,000	67.1(4.2)	78.4(5.8)	62.9(4.7)
\$20,000–\$34,999	70.1(7.1)	*92.1(4.7)	59.1(11.2)
\$35,000 or more	*79.7(15.4)	*76.8(22.3)	*80.8(17.8)
Other Hispanic:			
Less than \$20,000	62.8(7.8)	75.0(11.2)	57.9(9.1)
\$20,000–\$34,999	*71.3(11.0)	*74.3(16.9)	*69.9(12.8)
\$35,000 or more	*79.6(15.8)	*100.0(. . .)	*65.0(25.0)

Table 4. Percent and standard error of children 0–17 years of age with no health insurance who have a regular source of medical care by age and selected demographic characteristics: United States, 1993—Con.

Selected demographic characteristics	All children 0–17 years	0–4 years	5–17 years
Poverty index			
Percent and standard error			
At or above poverty	83.2(1.8)	90.2(2.5)	80.7(2.0)
Below poverty	73.7(2.5)	80.9(4.0)	71.2(2.8)
Health status			
Excellent, very good, good	79.0(1.4)	85.7(2.2)	76.6(1.6)
Fair or poor	74.2(7.7)	*100.0(. . .)	68.6(8.6)

* Figure does not meet standard of reliability or precision.

. . . Category not applicable.

¹Non-Hispanic persons of races other than white or black, persons with unknown income, unknown family structure, unknown poverty status, and unknown health status are included in the total but not shown separately.

²MSA is metropolitan statistical area.

NOTE: Children with unknown regular source of medical care were excluded from the analysis.

Table 5. Percent of children 0–17 years of age with a regular source of medical care by place of regular source of care and selected demographic characteristics: United States, 1993

Selected demographic characteristics	Place of regular source of care		
	Private doctor ¹	Clinic	Emergency room
	Percent and standard error		
Total ²	84.4(0.7)	11.1(0.6)	1.4(0.2)
Sex			
Male	84.1(0.8)	11.1(0.7)	1.5(0.2)
Female	84.6(0.8)	11.0(0.7)	1.3(0.2)
Age			
0–4 years	82.0(1.0)	13.3(0.9)	1.3(0.3)
5–17 years	85.4(0.7)	10.1(0.6)	1.4(0.2)
Race and/or ethnicity			
White, non-Hispanic	91.5(0.7)	5.0(0.4)	0.6(0.2)
Black, non-Hispanic	66.9(1.7)	25.3(1.8)	4.7(1.0)
Hispanic	70.0(2.2)	25.0(2.4)	*1.8(0.7)
Mexican-American	69.9(3.1)	25.3(3.4)	*1.8(0.6)
Other Hispanic	70.1(2.8)	24.6(2.7)	*1.7(1.5)
Region			
Northeast	86.3(1.4)	11.3(1.5)	*0.9(0.4)
Midwest	87.5(1.2)	10.2(1.1)	1.0(0.3)
South	83.0(1.3)	11.1(1.2)	2.3(0.5)
West	81.3(1.7)	11.7(1.2)	*1.0(0.3)
Place of residence			
MSA ³	82.9(0.8)	12.4(0.7)	1.4(0.2)
Central city	73.3(1.2)	20.2(1.3)	2.6(0.5)
Noncentral city	89.1(1.0)	7.5(0.8)	*0.6(0.2)
Not MSA ³	89.3(1.4)	6.3(1.2)	1.5(0.4)
Family structure			
Both parents	87.7(0.7)	8.0(0.6)	1.1(0.2)
Mother only	73.2(1.6)	21.5(1.5)	2.0(0.6)
Mother and other adult	72.4(2.7)	21.7(2.6)	*2.7(0.9)
Other	74.2(3.7)	19.6(3.8)	*2.9(1.0)
Family income			
Less than \$10,000	62.5(2.5)	32.2(2.4)	3.2(0.9)
\$10,000–\$19,999	72.8(1.7)	20.2(1.5)	2.9(0.7)
\$20,000–\$34,999	86.2(1.4)	8.6(0.8)	*1.1(0.4)
\$35,000–\$49,999	93.8(0.8)	3.3(0.6)	*0.6(0.2)
\$50,000 or more	94.0(0.6)	3.2(0.4)	*0.2(0.1)
Race and/or ethnicity and family income			
White, non-Hispanic:			
Less than \$20,000	84.6(1.6)	10.7(1.2)	*1.8(0.6)
\$20,000–\$34,999	90.3(1.4)	5.5(0.8)	*0.5(0.3)
\$35,000 or more	94.5(0.6)	2.7(0.3)	*0.3(0.1)
Black, non-Hispanic:			
Less than \$20,000	56.7(2.1)	34.9(2.3)	6.6(1.5)
\$20,000–\$34,999	75.9(4.1)	14.1(2.9)	*3.2(1.8)
\$35,000 or more	88.8(2.9)	*7.6(2.9)	*1.3(0.8)
Hispanic:			
Less than \$20,000	53.6(2.9)	39.6(3.2)	*2.8(1.4)
\$20,000–\$34,999	78.4(3.7)	17.8(3.3)	*1.5(1.1)
\$35,000 or more	94.4(1.6)	*2.9(1.1)	*—
Mexican-American:			
Less than \$20,000	55.2(3.5)	38.8(4.1)	*2.5(1.2)
\$20,000–\$34,999	78.0(4.2)	17.3(3.8)	*2.4(1.7)
\$35,000 or more	95.5(1.8)	*1.1(0.7)	*—

Table 5. Percent of children 0–17 years of age with a regular source of medical care by place of regular source of care and selected demographic characteristics: United States, 1993—Con.

Selected demographic characteristics	Place of regular source of care		
	Private doctor ¹	Clinic	Emergency room
Race and/or ethnicity and family income—Con.	Percent and standard error		
Other Hispanic:			
Less than \$20,000	50.7(4.9)	41.0(4.9)	*3.4(3.2)
\$20,000–\$34,999	78.9(5.7)	18.7(5.6)	*–
\$35,000 or more	93.0(2.6)	*5.1(2.2)	*–
Poverty status			
At or above poverty threshold	89.8(0.6)	6.3(0.4)	0.7(0.2)
Below poverty threshold	65.4(1.8)	28.1(1.8)	3.7(0.8)
Health status			
Excellent, very good, good	84.6(0.7)	10.9(0.6)	1.4(0.2)
Fair or poor	74.3(2.6)	20.0(2.3)	*2.8(1.2)

*Figure does not meet standard of reliability or precision.

*– Figure does not meet standard of reliability or precision and quantity zero.

¹Includes health maintenance organizations (HMO's).²Includes only children who reported a regular source of medical care. Includes children with all types of health insurance coverage including unknown coverage. Non-Hispanic persons of races other than white or black, persons with unknown income, unknown poverty status, unknown family structure, and unknown health status are included in the total but not shown separately.³MSA is metropolitan statistical area.

NOTE: Percent distribution includes other and unknown places of regular source of care but are not shown separately.

Table 6. Percent of children 0–17 years of age with private health insurance and with a regular source of medical care by place of regular source of care and selected demographic characteristics: United States, 1993

Selected demographic characteristics	Place of regular source of care		
	Private doctor ¹	Clinic	Emergency room
	Percent and standard error		
Total ²	93.8(0.4)	4.5(0.4)	0.5(0.1)
Sex			
Male	93.5(0.5)	4.5(0.4)	0.6(0.2)
Female	94.0(0.5)	4.6(0.5)	*0.3(0.1)
Age			
0–4 years	94.0(0.6)	4.7(0.5)	*0.3(0.1)
5–17 years	93.7(0.5)	4.5(0.4)	0.5(0.1)
Race and/or ethnicity			
White, non-Hispanic	95.2(0.5)	3.4(0.4)	*0.2(0.1)
Black, non-Hispanic	86.4(1.6)	9.9(1.4)	*2.2(0.7)
Hispanic	90.6(1.9)	7.7(1.7)	*0.5(0.5)
Mexican-American	91.6(2.0)	*5.8(1.7)	*0.8(0.8)
Other Hispanic	89.3(3.4)	*10.3(3.2)	*–
Region			
Northeast	94.6(0.8)	4.0(0.7)	*0.6(0.3)
Midwest	92.9(1.0)	5.7(1.0)	*0.4(0.2)
South	93.5(0.7)	4.3(0.7)	*0.7(0.3)
West	94.4(0.7)	4.0(0.6)	*0.1(0.1)
Place of residence			
MSA ³	93.8(0.4)	4.5(0.4)	0.4(0.1)
Central city	90.9(0.8)	7.1(0.8)	*1.0(0.3)
Noncentral city	95.1(0.5)	3.3(0.4)	*0.1(0.1)
Not MSA ³	93.8(1.3)	4.7(1.2)	*0.7(0.3)
Family structure			
Both parents	94.3(0.5)	4.2(0.4)	0.4(0.1)
Mother only	91.5(1.1)	6.6(1.0)	*0.2(0.2)
Mother and other adult	90.2(2.6)	7.0(2.1)	*1.6(1.5)
Other	87.2(3.1)	*9.2(3.2)	*3.0(1.4)
Family income			
Less than \$10,000	77.4(4.7)	*15.2(4.0)	*5.1(3.2)
\$10,000–\$19,999	86.6(1.9)	10.8(1.6)	*1.0(0.4)
\$20,000–\$34,999	92.4(0.9)	6.2(0.8)	*0.4(0.2)
\$35,000–\$49,999	96.3(0.6)	2.4(0.5)	*0.5(0.2)
\$50,000 or more	95.3(0.5)	3.1(0.4)	*0.2(0.1)
Race and/or ethnicity and family income			
White, non-Hispanic:			
Less than \$20,000	92.6(1.5)	5.7(1.3)	*0.3(0.3)
\$20,000–\$34,999	94.2(1.0)	4.6(0.9)	*0.1(0.1)
\$35,000 or more	96.0(0.4)	2.7(0.3)	*0.3(0.1)
Black, non-Hispanic:			
Less than \$20,000	76.5(3.6)	17.0(3.1)	*5.6(2.2)
\$20,000–\$34,999	87.0(3.1)	11.1(2.8)	*1.3(1.0)
\$35,000 or more	94.2(1.7)	*3.0(1.3)	*0.7(0.6)
Hispanic:			
Less than \$20,000	78.7(6.0)	*20.3(6.0)	*–
\$20,000–\$34,999	87.2(3.3)	*10.5(3.1)	*1.4(1.4)
\$35,000 or more	96.9(1.2)	*2.0(0.9)	*–
Mexican-American:			
Less than \$20,000	81.5(7.4)	*16.8(7.3)	*–
\$20,000–\$34,999	88.6(3.8)	*7.6(3.1)	*2.4(2.3)
\$35,000 or more	97.3(1.4)	*0.6(0.6)	*–

Table 6. Percent of children 0–17 years of age with private health insurance and with a regular source of medical care by place of regular source of care and selected demographic characteristics: United States, 1993—Con.

Selected demographic characteristics	Place of regular source of care		
	Private doctor ¹	Clinic	Emergency room
Race and/or ethnicity and family income—Con.	Percent and standard error		
Other Hispanic:			
Less than \$20,000	74.7(10.3)	*25.3(10.3)	*—
\$20,000–\$34,999	85.1(5.8)	*14.9(5.8)	*—
\$35,000 or more	96.4(1.9)	*3.6(1.9)	*—
Poverty index			
At or above poverty threshold	94.2(0.4)	4.2(0.4)	*0.3(0.1)
Below poverty threshold	84.7(2.7)	11.1(2.3)	*2.9(1.3)
Health status			
Excellent, very good, good	93.8(0.4)	4.5(0.4)	0.5(0.1)
Fair or poor	90.3(2.6)	7.6(2.1)	*0.6(0.6)

* Figure does not meet standard of reliability or precision.

*— Figure does not meet standard of reliability or precision and quantity zero.

¹Includes health maintenance organizations (HMO's).²Includes only children with private health insurance who reported a regular source of medical care. Non-Hispanic persons of races other than white or black, persons with unknown income, unknown poverty status, unknown poverty status, unknown family structure, and unknown health status are included in the total but not shown separately.³MSA is metropolitan statistical area.

NOTE: Other and unknown places of regular source of care are included in the distribution but are not shown separately.

Table 7. Percent of children 0–17 years of age with public health insurance and a regular source of medical care by place of regular source of care and selected demographic characteristics: United States, 1993

Selected demographic characteristics	Place of regular source of care		
	Private doctor ¹	Clinic	Emergency room
	Percent and standard error		
Total ²	62.4(2.0)	30.0(1.9)	4.6(0.9)
Sex			
Male	60.9(2.4)	31.2(2.2)	4.9(1.0)
Female	63.8(2.2)	28.8(2.0)	4.3(0.9)
Age			
0–4 years	62.5(2.5)	31.2(2.4)	3.2(0.8)
5–17 years	62.3(2.4)	29.1(2.3)	5.7(1.2)
Race and/or ethnicity			
White, non-Hispanic	81.0(2.3)	13.1(1.6)	*3.1(1.2)
Black, non-Hispanic	50.7(2.9)	40.3(3.2)	7.5(1.9)
Hispanic	51.4(3.3)	42.0(3.0)	*4.0(2.1)
Mexican-American	54.7(4.1)	40.8(4.0)	*3.2(1.4)
Other Hispanic	46.3(5.3)	43.9(5.2)	*5.3(4.7)
Region			
Northeast	52.3(5.4)	43.1(5.4)	*1.2(0.7)
Midwest	67.7(4.3)	27.4(4.0)	*2.9(1.3)
South	65.7(3.2)	25.8(3.1)	7.4(2.1)
West	59.5(3.4)	28.9(2.7)	*5.0(1.8)
Place of residence			
MSA ³	56.5(2.2)	36.0(2.2)	5.0(1.0)
Central city	49.1(2.6)	42.3(2.7)	5.5(1.3)
Noncentral city	69.8(3.4)	24.7(2.9)	*4.2(1.8)
Not MSA ³	85.2(3.0)	6.6(1.5)	*2.8(1.5)
Family structure			
Both parents	67.8(2.4)	24.4(2.2)	*5.0(1.5)
Mother only	58.7(2.7)	33.7(2.7)	*4.2(1.2)
Mother and other adult	57.3(5.1)	36.2(5.1)	*3.9(1.7)
Other	58.2(6.5)	*34.1(6.9)	*4.7(2.1)
Family income			
Less than \$10,000	60.8(3.1)	34.1(2.9)	*3.3(1.2)
\$10,000–\$19,999	62.9(2.9)	27.5(2.6)	*5.1(1.6)
\$20,000–\$34,999	71.4(4.8)	21.1(4.2)	*6.9(3.0)
\$35,000–\$49,999	62.9(12.4)	*30.7(13.6)	*3.2(3.4)
\$50,000 or more	*96.9(3.2)	*3.1(3.2)	*–
Race and/or ethnicity and family income			
White, non-Hispanic:			
Less than \$20,000	80.4(2.7)	13.9(1.9)	*3.0(1.3)
\$20,000–\$34,999	85.7(5.2)	*7.4(2.9)	*6.0(4.6)
\$35,000 or more	97.2(2.9)	*–	*–
Black, non-Hispanic:			
Less than \$20,000	49.7(3.0)	41.2(3.1)	7.6(2.1)
\$20,000–\$34,999	67.6(7.5)	*21.1(7.4)	*11.3(6.1)
\$35,000 or more	*42.2(16.9)	*49.6(19.1)	*5.6(6.1)
Hispanic:			
Less than \$20,000	52.0(3.8)	41.3(3.6)	*3.9(2.3)
\$20,000–\$34,999	*29.4(12.3)	*64.7(13.2)	*6.0(4.5)
\$35,000 or more	*81.1(13.0)	*18.9(13.0)	*–
Mexican-American:			
Less than \$20,000	55.7(4.8)	39.9(4.9)	*2.9(1.7)
\$20,000–\$34,999	*27.2(12.3)	*64.8(13.7)	*7.9(5.9)
\$35,000 or more	*87.9(11.6)	*12.1(11.6)	*–

Table 7. Percent of children 0–17 years of age with public health insurance and a regular source of medical care by place of regular source of care and selected demographic characteristics: United States, 1993—Con.

Selected demographic characteristics	Place of regular source of care		
	Private doctor ¹	Clinic	Emergency room
Race and/or ethnicity and family income—Con.	Percent and standard error		
Other Hispanic:			
Less than \$20,000	46.7(5.6)	43.3(5.5)	*5.2(5.0)
\$20,000–\$34,999	*35.9(26.8)	*64.1(26.8)	*—
\$35,000 or more	*64.4(31.2)	*35.6(31.2)	*—
Poverty index			
At or above poverty threshold	70.1(2.5)	23.0(2.3)	*3.8(1.2)
Below poverty threshold	60.3(2.5)	32.6(2.4)	4.4(1.1)
Health status			
Excellent, very good, good	62.0(2.1)	30.3(2.0)	4.6(0.9)
Fair or poor	65.1(4.2)	26.0(3.9)	*5.8(2.7)

*Figure does not meet standard of reliability or precision.

*— Figure does not meet standard of reliability or precision and quantity zero.

¹Includes health maintenance organizations (HMO's).

²Includes only children with public health insurance who reported a regular source of medical care. Non-Hispanic persons of races other than white or black, persons with unknown income, unknown poverty status, unknown family structure, and unknown health status are included in the total but not shown separately.

³MSA is metropolitan statistical area.

NOTE: Other and unknown places of regular source of medical care are included in the distribution but are not shown separately.

Table 8. Percent of children 0–17 years of age with no health insurance who have a regular source of medical care by place of regular source of care and selected demographic characteristics: United States, 1993

Selected demographic characteristics	Place of regular source of care		
	Private doctor ¹	Clinic	Emergency room
	Percent and standard error		
Total ²	74.2(1.8)	20.1(1.8)	2.6(0.7)
Sex			
Male	75.5(2.3)	19.3(2.2)	*2.2(0.7)
Female	72.8(2.0)	21.1(1.9)	3.1(0.9)
Age			
0–4 years	73.4(2.2)	20.3(2.1)	*3.1(1.1)
5–17 years	74.5(2.1)	20.1(2.0)	2.4(0.7)
Race and/or ethnicity			
White, non-Hispanic	86.9(1.9)	8.9(1.5)	*1.7(0.7)
Black, non-Hispanic	59.2(4.3)	32.3(4.1)	*5.7(2.3)
Hispanic	54.8(4.0)	39.3(4.8)	*1.7(1.2)
Mexican-American	53.9(4.8)	40.0(5.9)	*2.1(1.5)
Other Hispanic	57.7(6.5)	*37.1(6.4)	*0.4(0.4)
Region			
Northeast	79.5(3.2)	15.0(2.3)	*2.5(1.7)
Midwest	83.1(3.3)	14.1(3.1)	*2.1(1.3)
South	72.1(3.2)	21.2(3.5)	*3.8(1.4)
West	68.5(3.3)	25.6(3.0)	*1.0(0.7)
Place of residence			
MSA ³	70.6(2.2)	24.0(2.2)	*2.1(0.7)
Central city	62.7(2.7)	28.1(2.5)	*3.4(1.5)
Noncentral city	76.6(3.2)	20.8(3.2)	*1.0(0.5)
Not MSA ³	84.0(2.8)	9.7(2.5)	*4.1(1.6)
Family structure			
Both parents	76.2(1.8)	18.1(1.8)	3.1(0.9)
Mother only	65.6(4.4)	29.6(4.7)	*1.1(0.7)
Mother and other adult	70.3(6.2)	20.4(4.6)	*2.7(1.6)
Other	81.6(5.2)	*15.6(5.0)	*—
Family income			
Less than \$10,000	62.2(4.2)	34.0(4.2)	*1.9(1.0)
\$10,000–\$19,999	69.6(3.0)	24.8(2.8)	*3.2(1.4)
\$20,000–\$34,999	79.5(3.5)	14.5(3.2)	*2.6(1.4)
\$35,000–\$49,999	90.3(3.1)	*5.0(2.2)	*2.3(1.7)
\$50,000 or more	91.9(3.9)	*4.2(2.6)	*1.0(1.0)
Race and/or ethnicity and family income			
White, non-Hispanic:			
Less than \$20,000	84.8(2.8)	12.1(2.6)	*2.3(1.2)
\$20,000–\$34,999	86.6(2.9)	9.7(2.5)	*1.2(1.1)
\$35,000 or more	91.7(2.7)	*3.7(1.8)	*1.3(1.3)
Black, non-Hispanic:			
Less than \$20,000	57.5(4.8)	34.7(4.4)	*5.3(2.9)
\$20,000–\$34,999	60.3(11.3)	*25.4(11.3)	*8.2(6.3)
\$35,000 or more	*84.7(10.2)	*11.1(7.0)	*4.3(3.3)
Hispanic:			
Less than \$20,000	45.0(4.5)	47.2(5.3)	*2.6(1.7)
\$20,000–\$34,999	72.8(8.3)	*24.3(8.3)	*—
\$35,000 or more	*92.9(5.7)	*7.1(5.7)	*—
Mexican-American:			
Less than \$20,000	44.9(4.7)	46.8(6.1)	*3.1(2.3)
\$20,000–\$34,999	73.1(9.5)	*24.7(9.4)	*—
\$35,000 or more	*96.6(3.7)	*3.4(3.7)	*—

Table 8. Percent of children 0–17 years of age with no health insurance who have a regular source of medical care by place of regular source of care and selected demographic characteristics: United States, 1993—Con.

Selected demographic characteristics	Place of regular source of care		
	Private doctor ¹	Clinic	Emergency room
Race and/or ethnicity and family income—Con.	Percent and standard error		
Other Hispanic:			
Less than \$20,000	45.3(10.6)	*48.4(10.9)	*0.6(0.6)
\$20,000–\$34,999	*71.8(14.6)	*22.8(15.8)	*—
\$35,000 or more	*87.8(11.9)	*12.2(11.9)	*—
Poverty index			
At or above poverty threshold	80.1(2.3)	14.1(2.0)	*2.1(0.8)
Below poverty threshold	65.1(3.1)	29.8(3.1)	*3.0(1.3)
Health status			
Excellent, very good, good	74.5(1.7)	20.0(1.7)	2.7(0.7)
Fair or poor	60.6(8.7)	*31.1(8.0)	*1.5(1.5)

*Figure does not meet standard of reliability or precision.

*—Figure does not meet standard of reliability or precision and quantity zero.

¹Includes health maintenance organizations (HMO's).²Includes only children with no health insurance who reported a regular source of medical care. Non-Hispanic persons of races other than white or black, persons with unknown income, unknown poverty status, unknown family structure, and unknown health status are included in the total but not shown separately.³MSA is metropolitan statistical area.

NOTE: Other and unknown places of regular source of care are included in the distribution but are not shown separately.

Table 9. Percent of children 0–17 years of age by selected unmet medical needs and selected demographic characteristics: United States, 1993

Selected demographic characteristics	Any unmet need ¹	Needed, but not able to get care	Delayed medical care due to cost	Needed dental care	Needed prescription	Needed glasses	Needed mental health care
Percent and standard error							
Total ²	10.8(0.4)	1.9(0.2)	4.1(0.2)	6.2(0.3)	1.3(0.1)	1.4(0.1)	0.4(0.1)
Sex							
Male	10.4(0.5)	2.0(0.2)	4.0(0.3)	6.1(0.4)	1.2(0.2)	1.1(0.1)	0.5(0.1)
Female	11.1(0.5)	1.9(0.2)	4.3(0.3)	6.4(0.4)	1.5(0.2)	1.7(0.2)	0.4(0.1)
Age							
0–4 years	6.2(0.4)	1.7(0.2)	2.5(0.3)	2.4(0.3)	0.9(0.2)	*0.1(0.1)	*–
5–17 years	12.6(0.5)	2.0(0.2)	4.8(0.3)	7.8(0.4)	1.5(0.2)	1.9(0.2)	0.6(0.1)
Race and/or ethnicity							
White, non-Hispanic	11.2(0.5)	1.7(0.2)	4.4(0.3)	6.5(0.4)	1.2(0.2)	1.3(0.1)	0.6(0.1)
Black, non-Hispanic	10.2(0.9)	2.3(0.4)	3.1(0.5)	5.9(0.7)	1.8(0.3)	2.0(0.4)	*0.2(0.1)
Hispanic	10.9(1.3)	2.7(0.6)	4.6(0.8)	5.8(0.8)	1.8(0.4)	1.4(0.3)	*0.3(0.1)
Mexican-American	11.9(1.8)	3.4(1.0)	5.6(1.3)	6.3(1.1)	1.6(0.4)	1.7(0.5)	*0.1(0.1)
Other Hispanic	9.0(1.3)	*1.6(0.5)	2.8(0.6)	5.0(1.1)	*2.1(0.7)	*0.9(0.4)	*0.5(0.3)
Region							
Northeast	9.3(0.6)	1.2(0.3)	3.7(0.4)	5.2(0.6)	1.0(0.2)	*1.0(0.3)	*0.5(0.3)
Midwest	9.4(0.8)	1.7(0.3)	4.2(0.5)	4.7(0.6)	1.2(0.3)	1.5(0.2)	*0.2(0.1)
South	12.6(0.9)	2.0(0.3)	4.4(0.4)	7.6(0.7)	1.7(0.3)	1.7(0.2)	*0.4(0.1)
West	10.8(0.7)	2.7(0.5)	4.1(0.5)	6.6(0.6)	1.3(0.3)	1.0(0.2)	0.7(0.2)
Place of residence							
MSA ³	10.0(0.5)	2.0(0.2)	3.8(0.3)	5.6(0.4)	1.4(0.2)	1.3(0.1)	0.5(0.1)
Central city	10.3(0.8)	2.2(0.3)	3.8(0.5)	6.1(0.6)	1.5(0.2)	1.4(0.2)	0.4(0.1)
Noncentral city	9.8(0.5)	1.8(0.3)	3.7(0.3)	5.3(0.4)	1.3(0.2)	1.2(0.2)	0.5(0.1)
Not MSA ³	13.4(0.9)	1.8(0.3)	5.4(0.4)	8.4(0.9)	1.2(0.3)	1.6(0.3)	*0.3(0.1)
Family structure							
Both parents	10.0(0.5)	1.6(0.2)	4.0(0.3)	5.8(0.4)	1.1(0.2)	1.2(0.1)	0.3(0.1)
Mother only	14.3(1.0)	3.3(0.5)	4.9(0.6)	8.1(0.8)	2.5(0.3)	2.1(0.3)	1.1(0.3)
Mother and other adult	10.2(1.5)	2.1(0.6)	4.0(0.8)	6.0(1.2)	*1.1(0.4)	*0.8(0.3)	*0.3(0.2)
Other	11.3(1.8)	*2.8(1.0)	*3.5(1.1)	5.6(1.3)	*1.0(0.5)	*2.2(0.7)	*0.8(0.5)
Family income							
Less than \$10,000	14.0(1.3)	3.4(0.7)	4.7(0.7)	7.5(1.0)	2.8(0.6)	1.7(0.4)	*0.3(0.2)
\$10,000–\$19,999	18.0(1.2)	4.2(0.6)	6.8(0.7)	11.2(1.0)	2.3(0.3)	2.6(0.5)	0.8(0.2)
\$20,000–\$34,999	13.9(1.0)	1.5(0.3)	5.3(0.6)	8.4(0.9)	1.7(0.4)	1.9(0.3)	0.7(0.2)
\$35,000–\$49,999	8.9(0.8)	1.2(0.3)	3.3(0.5)	5.0(0.7)	*0.3(0.1)	1.0(0.2)	*0.4(0.2)
\$50,000 or more	3.2(0.4)	0.7(0.1)	1.6(0.3)	1.2(0.3)	*0.2(0.1)	*0.3(0.1)	*0.2(0.1)
Race and/or ethnicity and family income							
White, non-Hispanic:							
Less than \$20,000	21.4(1.3)	4.2(0.7)	7.8(0.8)	13.3(1.1)	2.8(0.6)	2.1(0.4)	1.0(0.3)
\$20,000–\$34,999	14.8(1.2)	1.6(0.3)	6.2(0.7)	8.9(1.1)	1.6(0.5)	2.0(0.4)	*0.7(0.2)
\$35,000 or more	6.0(0.5)	0.9(0.2)	2.4(0.3)	3.0(0.4)	*0.3(0.1)	0.6(0.1)	*0.3(0.1)
Black, non-Hispanic:							
Less than \$20,000	11.5(1.3)	2.8(0.5)	3.6(0.6)	6.6(1.0)	1.9(0.4)	2.6(0.6)	*0.1(0.1)
\$20,000–\$34,999	12.1(2.2)	*1.9(0.7)	*3.2(1.3)	6.6(1.6)	*2.5(0.9)	*0.9(0.4)	*0.8(0.4)
\$35,000 or more	*4.1(1.2)	*1.2(0.7)	*0.8(0.5)	*2.7(1.1)	*–	*0.9(0.7)	*0.2(0.2)
Hispanic:							
Less than \$20,000	13.2(1.6)	4.0(1.1)	5.7(1.1)	6.6(1.2)	2.9(0.6)	1.7(0.4)	*0.4(0.2)
\$20,000–\$34,999	10.6(2.4)	*0.7(0.5)	*2.9(1.6)	7.2(1.8)	*0.7(0.5)	*2.0(0.7)	*0.4(0.3)
\$35,000 or more	6.2(1.4)	*1.8(0.8)	*4.2(1.3)	*2.3(1.0)	*0.6(0.4)	*0.2(0.2)	*–
Mexican-American:							
Less than \$20,000	14.1(2.4)	*4.7(1.6)	7.2(1.6)	7.0(1.7)	2.4(0.6)	*1.8(0.6)	*0.1(0.1)
\$20,000–\$34,999	*10.9(2.9)	*0.7(0.7)	*3.0(2.1)	6.8(1.9)	*0.7(0.7)	*2.6(1.0)	*0.3(0.3)
\$35,000 or more	*7.6(2.2)	*2.9(1.4)	*5.4(2.1)	*2.2(1.2)	*1.0(0.7)	*0.4(0.4)	*–
Other Hispanic:							
Less than \$20,000	11.6(1.8)	*2.7(1.1)	*3.1(1.1)	5.9(1.1)	*3.7(1.1)	*1.5(0.7)	*0.8(0.5)
\$20,000–\$34,999	*10.0(4.1)	*0.7(0.7)	*2.6(2.0)	*7.9(3.9)	*0.7(0.8)	*0.7(0.7)	*0.6(0.6)
\$35,000 or more	*4.5(1.9)	*0.5(0.5)	*2.7(1.2)	*2.3(1.6)	*–	*–	*–

Table 9. Percent of children 0–17 years of age by selected unmet medical needs and selected demographic characteristics: United States, 1993—Con.

Selected demographic characteristics	Any unmet need ¹	Needed, but not able to get care	Delayed medical care due to cost	Needed dental care	Needed prescription	Needed glasses	Needed mental health care
Poverty status	Percent and standard error						
At or above poverty threshold	9.7(0.4)	1.5(0.2)	3.8(0.3)	5.6(0.4)	1.0(0.1)	1.2(0.1)	0.5(0.1)
Below poverty threshold	14.7(1.1)	3.5(0.6)	5.3(0.6)	8.5(0.8)	2.4(0.4)	1.9(0.3)	*0.5(0.2)
Health insurance coverage							
Private insurance	7.9(0.4)	0.9(0.1)	2.7(0.2)	4.6(0.4)	0.7(0.1)	1.0(0.1)	*0.3(0.1)
Public insurance	8.5(0.8)	2.1(0.3)	2.2(0.4)	4.4(0.6)	1.6(0.3)	1.2(0.2)	*0.5(0.2)
Other insurance	11.9(2.1)	*2.7(1.0)	*2.3(0.8)	*6.8(2.1)	*1.0(0.5)	*2.8(1.1)	*—
Uninsured	25.7(1.4)	6.4(0.9)	12.7(1.0)	15.5(1.1)	4.0(0.5)	2.7(0.4)	0.9(0.2)
Health status							
Excellent, very good, good	10.6(0.4)	1.8(0.2)	4.0(0.2)	6.1(0.3)	1.2(0.1)	1.3(0.1)	0.4(0.1)
Fair or poor	19.6(2.5)	7.2(1.7)	8.6(1.8)	11.0(2.1)	4.7(1.2)	3.3(0.9)	*0.9(0.4)

*Figure does not meet standard of reliability or precision.

*—Figure does not meet standard of reliability or precision and quantity zero.

¹Respondents who answered yes to any of the following questions were classified as having an unmet need: needed medical care or surgery, but did not get it; delayed medical care because of cost; needed dental care, prescription medicine, eyeglasses, or mental health services, but could not get it.²Includes non-Hispanic persons of races other than white or black, persons of unknown insurance coverage, persons with unknown family structure, persons with unknown income, unknown poverty status, and unknown health status.³MSA is metropolitan statistical area.

Appendix I

Sources and Limitations of Data

Description of Survey

The estimates presented in this report are based on data from the 1993 Access to Care and the 1993 Health Insurance questionnaires of the National Health Interview Survey (NHIS). The NHIS, an ongoing survey of households in the United States, is conducted by the National Center for Health Statistics. Each week a probability sample of the civilian noninstitutionalized population of the United States is interviewed by personnel of the U.S. Bureau of the Census. Interviewers obtain information about the health and other characteristics of each member of the households included in the NHIS sample.

Response Rates

The interviewed sample for the 1993 basic health questionnaire during the third and fourth quarters of the year (July–December) consisted of 24,071 households containing 61,287 persons including 16,709 children. The household response rate for the third and fourth quarters was 94.7 percent. The data for this report was produced from a merged file of the access to care and health insurance sections. The response rate for this merged file was 93.3 percent, the proportion of persons who completed both the access to care and health insurance sections (table I). When the household response rate was multiplied by the merged file response rate, it resulted in an overall response rate of 88.4 percent.

Sampling Design and Reliability of Estimates

The NHIS sample is selected so that a national probability sample of households is interviewed each week throughout the year. A detailed discussion of the sample design is available in *Current Estimates from the National Health Interview Survey, 1993(15)*.

Table I. Percent of children 0–17 years of age with unknown insurance coverage, regular source of medical care, and unmet medical need by selected demographic characteristics: United States, 1993

Selected demographic characteristics	Unknown insurance coverage	Unknown regular source of medical care	Unknown unmet medical need
Total	6.7	7.2	7.7
Sex			
Male	6.6	7.0	7.8
Female	6.9	7.3	7.6
Age			
0–4 years	7.0	7.5	8.2
5–17 years	6.6	7.0	7.5
Race and/or ethnicity			
White, non-Hispanic	5.3	5.8	6.0
Black, non-Hispanic	9.2	9.4	10.5
Hispanic	7.9	8.3	9.0
Mexican-American	7.7	8.2	8.8
Other Hispanic	8.2	8.3	9.5
Other, non-Hispanic	12.8	13.5	14.7
Region			
Northeast	5.5	6.5	6.5
Midwest	4.0	4.4	4.8
South	9.9	10.1	11.1
West	5.8	6.2	6.7
Place of residence			
MSA ¹	6.9	7.4	8.0
Central city	8.7	8.9	9.6
Non-central city	5.8	6.5	6.9
Not MSA ¹	6.0	6.2	6.7
Family structure			
Both parents	6.1	6.6	7.0
Mother only	9.1	8.8	10.0
Mother and other adult	7.0	7.6	8.4
Other	9.4	11.1	10.6
Unknown	37.3	37.3	37.3
Family income			
Less than \$20,000	7.8	7.6	8.7
\$20,000–\$34,999	3.7	4.2	4.7
\$35,000 or more	3.6	4.3	4.4
Unknown	24.4	25.4	25.9
Race and/or ethnicity and family income			
White, non-Hispanic:			
Less than \$20,000	5.7	5.6	6.3
\$20,000–\$34,999	3.2	3.6	4.0
\$35,000 or more	3.4	4.1	4.1
Unknown	20.3	21.1	22.0
Black, non-Hispanic:			
Less than \$20,000	9.7	9.5	10.9
\$20,000–\$34,999	4.8	4.4	6.1
\$35,000 or more	4.4	6.4	6.3
Unknown	26.7	27.2	27.5
Hispanic:			
Less than \$20,000	8.1	7.7	9.4
\$20,000–\$34,999	4.2	5.6	5.5
\$35,000 or more	4.9	5.1	5.1
Unknown	22.6	24.9	23.8

Table I. Percent of children 0–17 years of age with unknown insurance coverage, regular source of medical care, and unmet medical need by selected demographic characteristics: United States, 1993—Con.

Selected demographic characteristics	Unknown insurance coverage	Unknown regular source of medical care	Unknown unmet medical need
Race and/or ethnicity and family income—Con.			
Mexican American:			
Less than \$20,000	7.5 ↗	7.0 ↗	8.4
\$20,000–\$34,999	5.3 ↗	7.0 ↗	6.9
\$35,000 or more	7.0 ↗	7.4 ↗	7.4
Unknown	17.4↗	21.2↗	19.3
Other Hispanic:			
Less than \$20,000	9.1 ↗	8.9 ↗	11.3
\$20,000–\$34,999	2.0 ↗	2.9 ↗	2.7
\$35,000 or more	2.2 ↗	2.2 ↗	2.2
Unknown	30.5↗	30.5↗	30.5
Insurance coverage			
Private . . . . .	... ↗	0.6 ↗	1.1
Public . . . . .	... ↗	0.7 ↗	1.4
Other . . . . .	... ↗	0.8 ↗	4.6
Uninsured . . . . .	... ↗	2.4 ↗	1.3
Unknown . . . . .	... ↗	93.7↗	97.4
Regular source of medical care			
Has regular source	0.4 ↗	... ↗	1.5
Does not have a regular source	1.0 ↗	... ↗	1.9
Unknown	88.0↗	...↗	88.4
Unmet medical need			
Has unmet need	0.3 ↗	0.5 ↗	...
Does not have unmet need	0.2 ↗	1.0 ↗	...
Unknown	85.0↗	82.2↗	...
Poverty index			
At or above poverty	5.2 ↗	5.7 ↗	6.2
Below poverty	5.9 ↗	6.1 ↗	6.7
Unknown	24.3↗	24.0↗	25.6
Health status			
Excellent, very good, good	6.6 ↗	7.0 ↗	7.6
Fair or poor	9.9 ↗	9.8 ↗	10.5
Unknown	10.7↗	11.7↗	12.7

... Category not applicable

¹MSA is metropolitan statistical area.

The population estimates for 1993 are inflated to national population controls by age, race and/or ethnicity, and sex. The population controls are based on the 1980 census and are carried forward to 1993. Therefore, the estimates in this report may differ from 1990 census results brought forward to the survey date. Population controls incorporating 1990 census results will be used for survey estimation in later survey years.

Appendix II

Definition of Terms

Health Insurance Terms

A health insurance hierarchy of five mutually exclusive categories was developed for this report. (In previous NHIS reports health insurance was not classified this way, which may have caused some double counting of individuals.) Persons were classified into health insurance categories based on six questions about type of coverage (private, Medicaid, Medicare, military,

Indian Health Service, and other public assistance). A child with more than one type of health insurance, such as private and military coverage, was assigned to the first appropriate category in the hierarchy listed below:

Private coverage—includes children who have any comprehensive private insurance plan (includes HMO's and PPO's) or persons who have a hospitalization plan, only.

Public coverage—includes children who do not have private coverage, but who have Medicaid and/or other public assistance programs including various state plans.

Other coverage—includes children who do not have private or public coverage, but who have any type of military coverage including CHAMPUS, CHAMP-VA, or other military, Indian Health Service, and Medicare for persons under 65 years of age. It does not include persons who have been previously classified as having private or public coverage.

Uninsured—includes children who responded “no” to all six of the insurance questions. Those who responded “no” to any four or five questions and responded “don’t know” to the remaining questions were classified as uninsured. Children with a single service plan only (for example, a dental plan) other than a hospitalization plan, were also classified as uninsured.

Unknown—includes any remaining respondents.

Demographic and Health Status Terms

Metropolitan statistical area (MSA)—The definition and titles of MSA's are established by the U.S. Office of Management and Budget with the advice of the Federal Committee on Metropolitan Statistical Areas. The metropolitan population in this report is based on MSA's as defined in the 1980 census and does not include any subsequent additions or changes.

Family income—Each family member is classified according to the total family income. The income

recorded is the sum of all income received by household members related to each other by blood, adoption, or marriage in the 12-month period preceding the week of interview. Income from all sources (for example, wages, salaries, rents from property, pensions, government payments, and help from relatives) is included. Unrelated individuals are classified according to their own incomes.

Health status—The categories related to this concept result from asking the respondent, “Would you say _____’s health is excellent, very good, good, fair, or poor?” It is based on a respondent’s opinion and not directly on any clinical evidence.

Appendix III

Questionnaire Items and Flash Cards

Section AC – ACCESS TO CARE		PERSON 1	RT 70
{The next questions are about medical care.}			3-4
1a. Is there a particular person or place that -- USUALLY goes to when -- is sick or needs advice about -- health?		1a.	5
b. Is there ONE of those places that -- goes to MOST OFTEN when -- is sick or needs advice about -- health?		b.	6
HAND CARD FR1. Read categories if telephone interview.			7-8
2. Which of these is the MAIN reason -- does not have a usual source of medical care? Mark (X) only one.		2.	
		01 <input type="checkbox"/> Two or more usual doctors/places (AC1) 02 <input type="checkbox"/> Doesn't need a doctor 03 <input type="checkbox"/> Doesn't like/trust/ believe in doctors 04 <input type="checkbox"/> Doesn't know where to go 05 <input type="checkbox"/> Previous doctor is not available/ moved 06 <input type="checkbox"/> No insurance/ Can't afford it 07 <input type="checkbox"/> Speak a different language 08 <input type="checkbox"/> No care available/ Care too far away, not convenient 09 <input type="checkbox"/> Other – Specify <u>z</u> 99 <input type="checkbox"/> DK	(4)
ITEM AC1	Refer to question 1a above.	AC 1	9
3. Is there ONE of those places that -- goes to MOST OFTEN when -- is sick or needs advice about -- health?		3.	10
		1 <input type="checkbox"/> Yes (5 on page 10) 2 <input type="checkbox"/> No } (AC2) 9 <input type="checkbox"/> DK	
ITEM AC2	Refer to ago.	AC 2	11
		1 <input type="checkbox"/> Under age 18 (12 on page 14) 2 <input type="checkbox"/> 18 or older (13 on page 14)	
Notes			

Section AC - ACCESS TO CARE - Continued		PERSON 1
4a. At ANY time in the past 12 months DID -- have a place that -- went to for medical care?	4a. <div> <input type="checkbox"/> Yes (4b) <input type="checkbox"/> No } (1a for NP, or <input type="checkbox"/> DK } 14 on page 14) </div>	12
b. What kind of place was it — a clinic, a health center, a hospital, a doctor's office, or some other place?	b. <div> <input type="checkbox"/> Doctor's office or private clinic <input type="checkbox"/> Company or school health clinic/center <input type="checkbox"/> Community/migrant/rural clinic/center <input type="checkbox"/> County/city/public hospital outpatient clinic <input type="checkbox"/> Private/other hospital outpatient clinic <input type="checkbox"/> Hospital emergency room <input type="checkbox"/> HMO (Health Maintenance Organization)/Prepaid group <input type="checkbox"/> Psychiatric hospital or clinic <input type="checkbox"/> VA hospital or clinic <input type="checkbox"/> Military health care facility <input type="checkbox"/> Some other place -- Specify <u> </u> <input type="checkbox"/> DK </div>	13-14
c. If -- needed medical care NOW, would -- go to that (place in 4b)?	c. <div> <input type="checkbox"/> Yes (13 on page 14) <input type="checkbox"/> No (4d) <input type="checkbox"/> DK (13 on page 14) </div>	15
<p><i>HAND CARD FR2. Read categories if telephone interview.</i></p> d. What is the MAIN reason -- would not use that place for medical care NOW?	d. <div> <input type="checkbox"/> Changed residence/moved <input type="checkbox"/> Changed jobs <input type="checkbox"/> Employer changed insurance coverage <input type="checkbox"/> Former usual source left area <input type="checkbox"/> Owed money to former usual source <input type="checkbox"/> Dissatisfied with former source/liked new source better <input type="checkbox"/> Medical care needs changed <input type="checkbox"/> Former usual source stopped taking insurance/coverage <input type="checkbox"/> Other - Specify <u> </u> <input type="checkbox"/> DK </div>	16-17
Notes		

Section AC - ACCESS TO CARE - Continued		PERSON 1	
5a. What kind of place is it — a clinic, a health center, a hospital, a doctor's office, or some other place?		5a.	18-19 <input type="checkbox"/> 01 Doctor's office or private clinic <input type="checkbox"/> 02 Company or school health clinic/center <input type="checkbox"/> 03 Community/migrant/rural clinic/center <input type="checkbox"/> 04 County/city/public/county hospital outpatient clinic <input type="checkbox"/> 05 Private/other hospital outpatient clinic <input type="checkbox"/> 06 Hospital emergency room <input type="checkbox"/> 07 HMO (Health Maintenance Organization)/Prepaid group <input type="checkbox"/> 08 Psychiatric hospital or clinic <input type="checkbox"/> 09 VA hospital or clinic <input type="checkbox"/> 10 Military health care facility <input type="checkbox"/> 98 Some other place — Specify <u> </u> <input type="checkbox"/> 99 DK
b. Is there a particular person -- usually sees when -- goes there?		b.	20 <input type="checkbox"/> 1 Yes (6) <input type="checkbox"/> 2 No } (AC3) <input type="checkbox"/> 9 DK
ITEM AC3	Refer to age.	AC 3	21 <input type="checkbox"/> 1 Under age 18 (8 on page 12) <input type="checkbox"/> 2 18 or older (13 on page 14)
6a. Is that person a doctor or nurse or some other health professional? Probe for type of health professional.		6a.	22 <input type="checkbox"/> 1 Doctor (6b) <input type="checkbox"/> 2 Nurse <input type="checkbox"/> 3 Nurse practitioner <input type="checkbox"/> 4 Physician's assistant <input type="checkbox"/> 5 Chiropractor <input type="checkbox"/> 6 Other — Specify <u> </u> } (AC4) <input type="checkbox"/> 9 DK
b. Is this doctor a general practitioner or family doctor who treats a variety of illnesses and gives preventive care or is he or she a specialist who mainly treats just one type of health problem?		b.	23 <input type="checkbox"/> 1 Family doctor/general practitioner/internist/pediatrician <input type="checkbox"/> 2 Obstetrician/gynecologist <input type="checkbox"/> 3 Other specialist <input type="checkbox"/> 9 DK
ITEM AC4	Refer to age.	AC 4	24 <input type="checkbox"/> 1 Under age 18 (7) <input type="checkbox"/> 2 18 or older (13 on page 14)
7. When was the last time -- went to the (place in 5a) for ANY kind of medical care? (This is the (place in 5a) that -- usually goes to for medical care.)		7.	25 <input type="checkbox"/> 1 Less than 3 months ago (8 on page 12) <input type="checkbox"/> 2 At least 3 months, but less than 6 months ago <input type="checkbox"/> 3 At least 6 months, but less than 1 year ago <input type="checkbox"/> 4 At least 1 year, but less than 2 years ago <input type="checkbox"/> 5 Two or more years ago <input type="checkbox"/> 9 DK (9 on page 12) } (AC5)

Section AC – ACCESS TO CARE – Continued		PERSON 1	
8. Thinking about the last time -- visited the (place in 5a), were you satisfied with – a. The waiting time to get an appointment? <hr/> b. The waiting time to see the doctor? <hr/> c. The way your questions were answered? <hr/> d. Your ability to get all the care you thought -- needed? <hr/> e. The overall care -- received?		8. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK <hr/> a. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 3 <input type="checkbox"/> Doesn't apply 9 <input type="checkbox"/> DK <hr/> b. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK <hr/> c. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK <hr/> d. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK <hr/> e. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK	26 27 28 29 30
ITEM AC5	Refer to 5b.	AC 5 1 <input type="checkbox"/> "Yes" in 5b (9a) 2 <input type="checkbox"/> All other (9b)	31
9a. Is the (person in 6a) the person -- usually sees when -- needs routine or preventive medical care? (This is the (person in 6a) that -- usually goes to for medical care.) <hr/> b. Is the (place in 5a) the place -- usually goes to when -- needs routine or preventive medical care? (This is the (place in 5a) that -- usually goes to for medical care.)		9a. 1 <input type="checkbox"/> Yes (10) 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK } (9b) <hr/> b. 1 <input type="checkbox"/> Yes (11) 2 <input type="checkbox"/> No (12 on page 14) 9 <input type="checkbox"/> DK (13 on page 14)	32 33
10. Is that (person in 6a) – a. Able to provide for most of -- needs when -- is sick? <hr/> b. Able to make referrals to other health professionals when needed by --? <hr/> c. Able to provide care or arrange care for -- on evenings or weekends when -- is sick? <hr/> d. Able to provide advice about family concerns, such as stress?		10. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK <hr/> a. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK <hr/> b. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK <hr/> c. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK <hr/> d. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK } (13 on page 14)	34 35 36 37
11. Is the (place in 5a) – a. Able to provide for most of -- needs when -- is sick? <hr/> b. Able to make referrals to other health professionals when needed by --? <hr/> c. Able to provide care or arrange care for -- on evenings or weekends when -- is sick? <hr/> d. Able to provide advice about family concerns, such as stress?		11. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK <hr/> a. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK <hr/> b. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK <hr/> c. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK <hr/> d. 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK } (13 on page 14)	38 39 40 41

Section AC – ACCESS TO CARE – Continued		PERSON 1
12. Is there a particular person or place that -- USUALLY goes to when -- has a minor health problem or needs routine or preventive medical care?	12.	<div>42</div> 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK
13. During the past 3 months, how many times did -- see ANY doctor or other health professional?	13.	<div>43</div> 0 <input type="checkbox"/> None 1 <input type="checkbox"/> Once or twice 2 <input type="checkbox"/> 3-9 times 3 <input type="checkbox"/> 10 times or more 9 <input type="checkbox"/> DK
14a. At any time in the past 12 months did anyone in the family CHANGE the place to which he or she USUALLY goes for routine medical care?	14a.	<div>44</div> 1 <input type="checkbox"/> Yes (14b) 2 <input type="checkbox"/> No 9 <input type="checkbox"/> DK
b. Who is this? Mark (X) "Changed usual source" box in person's column.	b.	<div>45</div> 1 <input type="checkbox"/> Changed usual source
c. Anyone else? <input type="checkbox"/> Yes (Reask 14b and c) <input type="checkbox"/> No HAND CARD FR2. Read categories if telephone interview. Ask for each person marked in 14b.		<div>46-47</div>
d. The LAST time this happened, what was the MAIN reason -- changed -- USUAL source of care? Mark (X) only one.	d.	01 <input type="checkbox"/> Changed residence/moved 02 <input type="checkbox"/> Changed jobs 03 <input type="checkbox"/> Employer changed insurance coverage 04 <input type="checkbox"/> Former usual source left area 05 <input type="checkbox"/> Owed money to former usual source 06 <input type="checkbox"/> Dissatisfied with former source or liked new source better 07 <input type="checkbox"/> Medical care needs changed 08 <input type="checkbox"/> Former usual source stopped taking insurance/coverage 98 <input type="checkbox"/> Other – Specify <input checked="" type="checkbox"/> 99 <input type="checkbox"/> DK
Notes		

Section AC – ACCESS TO CARE – Continued		PERSON 1
15a. Sometimes people have difficulties in getting medical care when they need it. During the past 12 months, was there any time when someone in the family needed medical care or surgery, but did not get it?	15a.	<div>48</div> <div>1 <input type="checkbox"/> Yes (15b)</div> <div>2 <input type="checkbox"/> No } (16)</div> <div>9 <input type="checkbox"/> DK }</div>
b. Who didn't get needed care? <i>Mark (X) "Didn't get care" box in person's column.</i>	b.	<div>49</div> <div>1 <input type="checkbox"/> Didn't get care</div>
c. Anyone else? <input type="checkbox"/> Yes (Reask 15b and c) <input type="checkbox"/> No <i>Ask 15d and e for each person marked in 15b.</i>		<div>50-51</div>
d. The LAST time -- did not get the care -- needed, what was the MAIN reason -- didn't get care? <i>Mark (X) only one.</i>	d.	<div>50-51</div> <div>01 <input type="checkbox"/> Could not afford it</div> <div>02 <input type="checkbox"/> No insurance</div> <div>03 <input type="checkbox"/> Doctor did not accept Medicaid/insurance plan</div> <div>04 <input type="checkbox"/> Not serious enough</div> <div>05 <input type="checkbox"/> Wait too long in clinic/office</div> <div>06 <input type="checkbox"/> Difficulty getting an appointment</div> <div>07 <input type="checkbox"/> Doesn't like/trust/believe in doctors</div> <div>08 <input type="checkbox"/> No doctor available</div> <div>09 <input type="checkbox"/> Didn't know where to go</div> <div>10 <input type="checkbox"/> No way to get there</div> <div>11 <input type="checkbox"/> Hours not convenient</div> <div>12 <input type="checkbox"/> Speak a different language</div> <div>13 <input type="checkbox"/> Health of another family member interfered</div> <div>98 <input type="checkbox"/> Other – Specify <u> </u></div> <div>99 <input type="checkbox"/> DK</div> <div>(15d for NP with 15b marked)</div> <div>(15e)</div>
e. At ANY TIME during the past 12 months was lack of insurance or money A reason why -- did not get the medical care -- needed?	e.	<div>52</div> <div>1 <input type="checkbox"/> Yes</div> <div>2 <input type="checkbox"/> No</div> <div>9 <input type="checkbox"/> DK</div>
16a. During the past 12 months, has anyone in the family delayed seeking medical care because of worry about the cost?	16a.	<div>53</div> <div>1 <input type="checkbox"/> Yes (16b)</div> <div>2 <input type="checkbox"/> No } (17)</div> <div>9 <input type="checkbox"/> DK }</div>
b. Who delayed getting needed care? <i>Mark (X) "Delayed getting care" box in person's column.</i>	b.	<div>54</div> <div>1 <input type="checkbox"/> Delayed getting care</div>
c. Anyone else? <input type="checkbox"/> Yes (Reask 16b and c) <input type="checkbox"/> No		
17a. During the past 12 months, was there any time when someone in the family needed dental care but could not get it?	17a.	<div>55</div> <div>1 <input type="checkbox"/> Yes (17b)</div> <div>2 <input type="checkbox"/> No } (18 on page 18)</div> <div>9 <input type="checkbox"/> DK }</div>
b. Who is this? <i>Mark (X) "Didn't get dental care" box in person's column.</i>	b.	<div>56</div> <div>1 <input type="checkbox"/> Didn't get dental care</div>
c. Anyone else? <input type="checkbox"/> Yes (Reask 17b and c) <input type="checkbox"/> No		
Notes		

Section AC – ACCESS TO CARE – Continued		PERSON 1	
18a. During the past 12 months, was there any time when someone in the family needed prescription medicines but could not get them?		18a.	<div>1 <input type="checkbox"/> Yes (18b)</div> <div>2 <input type="checkbox"/> No } (19)</div> <div>9 <input type="checkbox"/> DK }</div>
b. Who is this? Mark (X) "Didn't get prescription" box in person's column.		b.	<div>1 <input type="checkbox"/> Didn't get prescription</div>
c. Anyone else? <input type="checkbox"/> Yes (Reask 18b and c) <input type="checkbox"/> No			
19a. During the past 12 months, was there any time when someone in the family needed eyeglasses but could not get them?		19a.	<div>1 <input type="checkbox"/> Yes (19b)</div> <div>2 <input type="checkbox"/> No } (20)</div> <div>9 <input type="checkbox"/> DK }</div>
b. Who is this? Mark (X) "Didn't get eyeglasses" box in person's column.		b.	<div>1 <input type="checkbox"/> Didn't get eyeglasses</div>
c. Anyone else? <input type="checkbox"/> Yes (Reask 19b and c) <input type="checkbox"/> No			
20a. During the past 12 months, was there any time when someone in the family needed mental health care but could not get it?		20a.	<div>1 <input type="checkbox"/> Yes (20b)</div> <div>2 <input type="checkbox"/> No } (Item AC6)</div> <div>9 <input type="checkbox"/> DK }</div>
b. Who is this? Mark (X) "Didn't get mental health care" box in person's column.		b.	<div>1 <input type="checkbox"/> Didn't get mental health care</div>
c. Anyone else? <input type="checkbox"/> Yes (Reask 20b and c) <input type="checkbox"/> No (Item AC6)			
ITEM AC6	About how often did the respondent appear to answer the questions in Access to Care accurately?	AC 6	<div>1 <input type="checkbox"/> All the time</div> <div>2 <input type="checkbox"/> Most of the time</div> <div>3 <input type="checkbox"/> Some of the time</div> <div>4 <input type="checkbox"/> Rarely or never</div> <div>9 <input type="checkbox"/> DK</div>
ITEM AC7	About how often did the respondent appear to answer the questions in Access to Care honestly?	AC 7	<div>1 <input type="checkbox"/> All the time</div> <div>2 <input type="checkbox"/> Most of the time</div> <div>3 <input type="checkbox"/> Some of the time</div> <div>4 <input type="checkbox"/> Rarely or never</div> <div>9 <input type="checkbox"/> DK</div>
ITEM AC8	Enter the person number of the respondent. If more than one, enter the person number of the one who answered the most questions.	AC 8	<div>Person number</div>
CONTINUE WITH SECTION FA			
Notes			

Section FA – HEALTH CARE COVERAGE		PERSON 1		RT 71
				3-4
ITEM FA1	Refer to Household composition. Mark (X) for each person including those deleted in the HIS-1.	FA 1	<input type="checkbox"/> Civilian <input type="checkbox"/> AF living at home <input type="checkbox"/> Deleted	5
<p>The next questions are about health insurance coverage and the kinds and amounts of income that people receive. For this family, that includes (read names, including Armed Forces members living at home).</p> <p>The answers to these questions will add greatly to our knowledge about the health problems of the American people, the types of health care they receive, and whether they can afford the care that they need. The information will help in planning health care services and finding ways to lower costs of care.</p> <p>There are several government programs that provide medical care or help pay medical bills.</p> <p>People covered by Medicare have a card that looks like this. SHOW MEDICARE CARD.</p>				
1a. In (month), was anyone in the family, that is (read names), covered by Medicare?		1a.	<input type="checkbox"/> Yes (1b) <input type="checkbox"/> No <input type="checkbox"/> DK } (2 on page 22)	6
b. Who was covered? Mark (X) "Medicare" box in person's column.		b.	<input type="checkbox"/> Medicare (Enter "Cov" on HIS-1.)	7
c. Anyone else? <input type="checkbox"/> Yes (Reask 1b and c) <input type="checkbox"/> No Ask 1d–g as appropriate for each person with "Medicare" in 1b.		d.	H.I.C. Number _ _ _ _ _ () () <input type="checkbox"/> Part A – Hospital only <input type="checkbox"/> Part B – Medical only <input type="checkbox"/> Both Part A & Part B <input type="checkbox"/> Card N.A.	8-18
d. May I please see the Medicare card(s) for -- (and --) to determine the type of coverage and to record the Health Insurance Claim Number. This number is needed to allow Medicare records to be easily and accurately located and identified for statistical research purposes. Providing the Health Insurance Claim Number is voluntary and collected under the authority of the Public Health Service Act. Whether the number is given or not, there will be no effect on benefits and no identifying information will be given to any other government or non-government agency. Read if necessary: The Public Health Service Act is Title 42, United States Code, Section 242k. Transcribe the number, then mark (X) the appropriate box. Ask 1e–g for each person with "Card N.A." in 1d.		e.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK	20
e. Was -- covered by Part A, that part of Medicare that pays for hospital bills?		f.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK	21
f. Was -- covered by Part B, that part of Medicare that pays for doctor's bills? Read if necessary: This is the Part B Medicare plan for which -- or some agency or program must pay a certain amount each month.				
ITEM FA2	Refer to age.	FA 2	<input type="checkbox"/> Under age 67 (1g) <input type="checkbox"/> Age 67 or older (NP)	22
g. How long has -- been covered by Medicare?		g.	<input type="checkbox"/> Less than 6 months <input type="checkbox"/> 6 months, but less than 1 year <input type="checkbox"/> 1 year, but less than 2 years <input type="checkbox"/> 2 years or more <input type="checkbox"/> DK	23
Notes				

Section FA – HEALTH CARE COVERAGE – Continued		PERSON 1	
<p>There is a program called Medicaid that pays for health care for persons in need. In this State it is also called (State name).</p> <p>2a. Does anyone in the family NOW have a Medicaid or (state name) card?</p> <p>b. Who is this? Mark (X) "Has card" box in person's column.</p> <p>c. Anyone else? <input type="checkbox"/> Yes (Reask 2b and c) <input type="checkbox"/> No Ask 2d for each person with "Has card" box marked in 2b.</p> <p>d. May I please see -- (and --) card(s)? Mark (X) appropriate box in person's column. Record expiration date for each Medicaid card seen.</p>		<p>1 <input type="checkbox"/> Yes (2b) 24</p> <p>2 <input type="checkbox"/> No } (3)</p> <p>9 <input type="checkbox"/> DK }</p>	
		<p>b. 25</p> <p>1 <input type="checkbox"/> Has card</p>	
		<p>d. 26</p> <p>1 <input type="checkbox"/> Medicaid card seen Expiration date <input type="text"/> 27-28 (Month) <input type="text"/> 29-30 (Day)</p> <p>2 <input type="checkbox"/> No card seen</p> <p>8 <input type="checkbox"/> Other card seen – Specify <input type="text"/></p>	
<p>3a. In (month), was anyone in the family covered by Medicaid?</p> <p>b. Who was covered? Mark (X) "Medicaid" box in person's column.</p> <p>c. Anyone else? <input type="checkbox"/> Yes (Reask 3b and c) <input type="checkbox"/> No Ask 3d for each person with "Medicaid" box marked in 3b.</p> <p>d. How long has -- had Medicaid coverage?</p>		<p>3a. 31</p> <p>1 <input type="checkbox"/> Yes (3b)</p> <p>2 <input type="checkbox"/> No } (4)</p> <p>9 <input type="checkbox"/> DK }</p>	
		<p>b. 32</p> <p>1 <input type="checkbox"/> Medicaid (Enter "Cov" on HIS-1.)</p>	
		<p>d. 33</p> <p>1 <input type="checkbox"/> Less than 6 months</p> <p>2 <input type="checkbox"/> 6 months, but less than a year</p> <p>3 <input type="checkbox"/> 1 year, but less than 2 years</p> <p>4 <input type="checkbox"/> 2 years, but less than 5 years</p> <p>5 <input type="checkbox"/> 5 years or more</p> <p>6 <input type="checkbox"/> On and off for less than 2 years</p> <p>7 <input type="checkbox"/> On and off for 2 years, but less than 5 years</p> <p>8 <input type="checkbox"/> On and off for 5 years or more</p> <p>9 <input type="checkbox"/> DK</p>	
<p>ITEM FA3</p>	<p>Refer to household composition and question 3a.</p>	<p>FA3 34</p> <p>1 <input type="checkbox"/> Single person family and "Yes" in 3a (5)</p> <p>2 <input type="checkbox"/> Other (4)</p>	
<p>4a. During the past 12 months, has anyone in the family received health care that has been or will be paid for by Medicaid or (state name)?</p> <p>b. Who received this care in the past 12 months? Mark (X) "Received Medicaid care" box in person's column.</p> <p>c. Anyone else? <input type="checkbox"/> Yes (Reask 4b and c) <input type="checkbox"/> No</p>		<p>4a. 35</p> <p>1 <input type="checkbox"/> Yes (4b)</p> <p>2 <input type="checkbox"/> No } (5)</p> <p>9 <input type="checkbox"/> DK }</p>	
		<p>b. 36</p> <p>1 <input type="checkbox"/> Received Medicaid care</p>	
<p>5a. In (month), was anyone in the family covered by any OTHER public assistance program (other than Medicaid) that pays for health care? Do NOT include use of public or free clinics if that is the only source of care.</p> <p>b. Who was covered? Mark (X) "Public assistance" box in person's column.</p> <p>c. Anyone else? <input type="checkbox"/> Yes (Reask 5b and c) <input type="checkbox"/> No</p>		<p>5a. 37</p> <p>1 <input type="checkbox"/> Yes (5b)</p> <p>2 <input type="checkbox"/> No } (6)</p> <p>9 <input type="checkbox"/> DK }</p>	
		<p>b. 38</p> <p>1 <input type="checkbox"/> Public assistance (Enter "Cov" on HIS-1.)</p>	

Section FA - HEALTH CARE COVERAGE - Continued		PERSON 1
6a. In (month), was anyone in the family covered by military health care, including armed forces retirement benefits, the VA (Department of Veterans' Affairs), CHAMPUS, or CHAMP-VA?	6a. 1 <input type="checkbox"/> Yes (6b) 2 <input type="checkbox"/> No } (7) 9 <input type="checkbox"/> DK }	39
b. Was this CHAMPUS or CHAMP-VA? <i>Read if necessary: CHAMPUS is a program of medical care for dependents of active or retired military personnel. CHAMP-VA is medical insurance for dependents or survivors of disabled veterans.</i>	b. 1 <input type="checkbox"/> Yes (6c) 2 <input type="checkbox"/> No (6f) 9 <input type="checkbox"/> DK (6e)	40
c. Who was covered by CHAMPUS or CHAMP-VA? <i>Mark (X) "CHAMPUS/CHAMP-VA" box in person's column.</i>	c. 1 <input type="checkbox"/> CHAMPUS/CHAMP-VA (Enter "Cov" on HIS-1.)	41
d. Anyone else? <input type="checkbox"/> Yes (Reask 6c and d) <input type="checkbox"/> No		
e. In (month), was anyone in the family covered by any other military health care, including armed forces retirement benefits or the VA (Department of Veterans' Affairs)?	e. 1 <input type="checkbox"/> Yes (6f) 2 <input type="checkbox"/> No } (7) 9 <input type="checkbox"/> DK }	42
f. Who was covered by other military health care? <i>Mark (X) "Military" box in person's column.</i>	f. 1 <input type="checkbox"/> Military (Enter "Cov" on HIS-1.)	43
g. Anyone else? <input type="checkbox"/> Yes (Reask 6f and g) <input type="checkbox"/> No		
7a. In (month), was anyone in the family covered by the Indian Health Service?	7a. 1 <input type="checkbox"/> Yes (7b) 2 <input type="checkbox"/> No } (8) 9 <input type="checkbox"/> DK }	44
b. Who was covered? <i>Mark (X) "IHS" box in person's column.</i>	b. 1 <input type="checkbox"/> IHS (Enter "Cov" on HIS-1.)	45
c. Anyone else? <input type="checkbox"/> Yes (Reask 7b and c) <input type="checkbox"/> No		
8a. (Not counting the government health programs we just mentioned,) In (month) was anyone in the family covered by a private health insurance plan? <i>Read if necessary: Besides government programs, people also get health insurance through their job or union, through other private groups, or directly from an insurance company. A variety of types of plans are available, including health maintenance organizations (HMOs).</i>	8a. 1 <input type="checkbox"/> Yes (8b) 2 <input type="checkbox"/> No } (8 on page 34) 9 <input type="checkbox"/> DK }	46
b. It's important that we have the complete and accurate name of each health insurance plan. What is the COMPLETE name of the plan? If "DK", probe: Do you have something with the plan name on it? <i>Record up to 4 plan names in Sec. FB, Table H.I. Then ask 8c.</i>		
c. In (month), was anyone in the family covered by any OTHER private health insurance plan?	c. 1 <input type="checkbox"/> Yes (Reask 8b and c) 2 <input type="checkbox"/> No (Section FB)	47
Notes		

Section FB – PRIVATE PLAN AND COVERAGE DETAIL		PERSON 1	RT 72 3-4
TABLE H.I. – PLAN 1			
PLAN 1 NAME			5-6
<p>Now, I am going to ask some questions about the plan(s) you just told me about, (starting with (plan name).)</p> <p>1a. Who was covered under this plan?</p> <p>Mark (X) "Private insurance" box in person's column.</p> <p>b. Anyone else? <input type="checkbox"/> Yes (Reask 1a and b) <input type="checkbox"/> No</p>		<p>1a. <input type="checkbox"/> Private insurance (Enter "Cov" on HIS-1)</p>	7
<p>2. In whose name is this plan?</p> <p>Mark (X) "In name" box in person's column.</p>		<p>2. <input type="checkbox"/> In name <input type="checkbox"/> Person not in household</p>	8
<p>3a. Was this plan originally obtained through the workplace, that is through a present or former employer or union?</p> <p>If "Yes", probe for employer or union.</p>	<p><input type="checkbox"/> Employer <input type="checkbox"/> Union <input type="checkbox"/> Through workplace, but DK whether employer or union <input type="checkbox"/> No <input type="checkbox"/> DK</p>	(3b)	9
<p>b. Does the employer or union currently pay for all, some, or none of the cost of premiums for this health insurance plan?</p> <p>Read if necessary: The cost of the plan refers to the premiums, which are regular payments for health insurance coverage only, not for health care services. Frequently, these payments are made by payroll deduction.</p>	<p><input type="checkbox"/> All (5) <input type="checkbox"/> Some <input type="checkbox"/> None <input type="checkbox"/> DK</p>	(4)	10
<p>4. In (month), how much did [you/your family] spend for health insurance premiums for (plan name)? Please include payroll deductions for premiums.</p>		<p><input type="checkbox"/> Zero <input type="checkbox"/> \$1 – \$9 <input type="checkbox"/> \$10 – \$19 <input type="checkbox"/> \$20 – \$49 <input type="checkbox"/> \$50 – \$99 <input type="checkbox"/> \$100 – \$199 <input type="checkbox"/> \$200 – \$499 <input type="checkbox"/> \$500 or more <input type="checkbox"/> DK</p>	11
<p>5a. Does this plan pay for a variety of health care services or does it pay for ONLY ONE type of service or care?</p>		<p><input type="checkbox"/> Variety of services (6) <input type="checkbox"/> Only one type of service/care (5b) <input type="checkbox"/> DK (6)</p>	12
<p>b. What type of service or care does the plan pay for?</p> <p>Mark (X) only one type of service.</p>		<p>01 <input type="checkbox"/> Accidents 02 <input type="checkbox"/> AIDS care 03 <input type="checkbox"/> Cancer treatment 04 <input type="checkbox"/> Catastrophic care 05 <input type="checkbox"/> Dental care 06 <input type="checkbox"/> Disability insurance (cash payments when unable to work for health reasons) 07 <input type="checkbox"/> Hospice care 08 <input type="checkbox"/> Hospitalization-only 09 <input type="checkbox"/> Long term care (nursing home care) 10 <input type="checkbox"/> Prescriptions 11 <input type="checkbox"/> Vision care 98 <input type="checkbox"/> Other – Specify _____ 99 <input type="checkbox"/> DK</p>	13-14
		GO TO 1a FOR NEXT HI PLAN; IF NO OTHER HI PLAN, GO TO 8a	
Notes			

PERSON 2		PERSON 3		PERSON 4		PERSON 5	
RT 72 3-4		RT 72 3-4		RT 72 3-4		RT 72 3-4	
7		7		7		7	
1a. <input type="checkbox"/> Private insurance (Enter "Cov" on HIS-1)		1a. <input type="checkbox"/> Private insurance (Enter "Cov" on HIS-1)		1a. <input type="checkbox"/> Private insurance (Enter "Cov" on HIS-1)		1a. <input type="checkbox"/> Private insurance (Enter "Cov" on HIS-1)	
8		8		8		8	
2. <input type="checkbox"/> In name		2. <input type="checkbox"/> In name		2. <input type="checkbox"/> In name		2. <input type="checkbox"/> In name	
6a. Is (plan name) an HMO (Health Maintenance Organization) or IPA (Individual Practice Association), or is it some other kind of plan? <i>Read if necessary: Health Maintenance Organizations, or HMO's and Individual Practice Associations, or IPA's, are plans whose members are required to use only those health care providers who work for or in association with the HMO or IPA. Sometimes there is an option to permit use of providers not associated with the Plan, but usually at greater cost to the enrollee. Generally, members do not have to submit claims for costs of medical care services.</i>				<input type="checkbox"/> HMO/ IPA <input type="checkbox"/> Other <input type="checkbox"/> DK			
b. Under this plan can you choose ANY doctor or MUST you choose one from a specific group or list of doctors?				<input type="checkbox"/> Any doctor (6c) <input type="checkbox"/> Select from group/list (6d) <input type="checkbox"/> DK (7)			
c. Do you have the option of choosing a doctor from a preferred or select list at lower cost to you?				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK			
d. If you select a doctor who is not in the plan, will (plan name) pay for any part of the cost?				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK			
<i>Ask if family has at least one person under the age of 18.</i> 7a. Does (plan name) pay for any of the costs of well child care, that is visits when a child is NOT sick, but needs a check-up or immunization?				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK			
<i>Ask if family has at least one female over the age of 39.</i> b. Does this plan pay for any part of the cost for mammograms? <i>Read if necessary: A mammogram is an x-ray taken only of the breasts by a machine that presses the breast against a plate.</i>				<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK			
GO TO 1a FOR NEXT PLAN; IF NO OTHER PLAN GO TO 8a							
Notes							

Section FB – PRIVATE PLAN AND COVERAGE DETAIL – Continued		PERSON 1	
8a. In the past 2 years, has anyone in the family been denied coverage, or had restricted or limited coverage, (under [this plan/any of the plans you just told me about]) because he or she already had a particular health condition, sometimes called a pre-existing condition?	8a. 69 1 <input type="checkbox"/> Yes (8b) 2 <input type="checkbox"/> No } (9) 9 <input type="checkbox"/> DK }		
b. Who is this? <i>Mark (X) "Pre-existing condition" box in person's column.</i>	b. 70 1 <input type="checkbox"/> Pre-existing condition		
c. Anyone else? <input type="checkbox"/> Yes (Reask 8b and c) <input type="checkbox"/> No <input type="checkbox"/> DK			
9a. In the past 2 years, has anyone in the family applied for health insurance and not been able to get it?	9a. 71 1 <input type="checkbox"/> Yes (9b) 2 <input type="checkbox"/> No } (10) 9 <input type="checkbox"/> DK }		
b. Who is this? <i>Mark (X) "Turned down" box in person's column.</i>	b. 72 1 <input type="checkbox"/> Turned down		
c. Anyone else? <input type="checkbox"/> Yes (Reask 9b and c) <input type="checkbox"/> No <input type="checkbox"/> DK <i>Ask for each person with "Turned down" box marked in 9b.</i>			
d. Why was -- unable to get that health insurance? Anything else? <i>Mark (X) all that apply.</i>	d. <div style="display: flex; justify-content: space-between;"> <div> 1 <input type="checkbox"/> Because of pre-existing condition, as cancer or diabetes 2 <input type="checkbox"/> Because of health risk(s), such as smoking or overweight 3 <input type="checkbox"/> Because of work, such as construction worker, beautician, farm worker 4 <input type="checkbox"/> Because premiums were too high 8 <input type="checkbox"/> Other – Specify <input checked="" type="checkbox"/> </div> <div style="text-align: right;"> 73 74 75 76 77 </div> </div> 9 <input type="checkbox"/> DK 78		
10a. In the past two years or so, has anyone in the family decided to stay in one job rather than take another job mainly because of reasons related to health insurance?	10a. 79 1 <input type="checkbox"/> Yes (10b) 2 <input type="checkbox"/> No } (FB1) 9 <input type="checkbox"/> DK }		
b. Who is this? <i>Mark (X) "Stayed in job" box in person's column.</i>	b. 80 1 <input type="checkbox"/> Stayed in job		
c. Anyone else? <input type="checkbox"/> Yes (Reask 10b and c) <input type="checkbox"/> No <input type="checkbox"/> DK			
ITEM FB1 <i>Refer to age and Wa/Wb in HIS-1.</i> <i>Mark (X) first appropriate box.</i>	FB 1 81 1 <input type="checkbox"/> 70+ (NP) 2 <input type="checkbox"/> Wa/Wb marked (Check Item FB2) 8 <input type="checkbox"/> Other (NP)		
ITEM FB2 <i>Refer to 2 for ALL plans in HI.</i>	FB 2 82 1 <input type="checkbox"/> Any "In name" (NP) 8 <input type="checkbox"/> Other (11)		
11. Was health insurance offered by -- employer?	11. 83 1 <input type="checkbox"/> Yes } (NP) 2 <input type="checkbox"/> No } 9 <input type="checkbox"/> DK }		
ITEM FB3 <i>Refer to Age and "Cov." on HIS-1.</i> <i>Mark (X) first appropriate box.</i>	FB 3 84 1 <input type="checkbox"/> Covered (13) 2 <input type="checkbox"/> Not covered, under 65 } (12) 3 <input type="checkbox"/> Not covered, 65+ }		
If no other persons in the family, Skip to 14 on page 40			

Section FB – PRIVATE PLAN AND COVERAGE DETAIL – Continued		RT 85
		3-4
<p><i>HAND CARD FR4. Read each category if telephone interview. If "Not covered 65 and over," include "or Medicare".</i></p> <p>12a. Many people do not have health insurance for various reasons. Which of these statements describes why -- is not covered by any health insurance (or Medicare)?</p> <p>Anything else?</p> <p><i>Mark (X) all that apply.</i></p>		<p>12a.</p> <p>01 <input type="checkbox"/> Job layoff/loss/unemployment 5-6</p> <p>02 <input type="checkbox"/> Wasn't offered by employer 7-8</p> <p>03 <input type="checkbox"/> Not eligible because part time worker 9-10</p> <p>04 <input type="checkbox"/> Family coverage not offered by employer 11-12</p> <p>05 <input type="checkbox"/> Benefits from former employer ran out 13-14</p> <p>06 <input type="checkbox"/> Can't obtain because of poor health, illness, or age 15-16</p> <p>07 <input type="checkbox"/> Too expensive/Can't afford 17-18</p> <p>08 <input type="checkbox"/> Dissatisfied with previous insurance 19-20</p> <p>09 <input type="checkbox"/> Don't believe in insurance 21-22</p> <p>10 <input type="checkbox"/> Have usually been healthy, haven't needed insurance 23-24</p> <p>11 <input type="checkbox"/> Covered by some other plan 25-26</p> <p>12 <input type="checkbox"/> Too old for coverage under family plans 27-28</p> <p>13 <input type="checkbox"/> Free/inexpensive source of care readily available 29-30</p> <p>98 <input type="checkbox"/> Other reason – Specify <i>z</i> 31-32</p> <p>99 <input type="checkbox"/> DK (12c) 33-34</p> <p>35-36</p>
<p><i>Ask if more than one box is marked in 12a, otherwise transcribe number of box marked without asking.</i></p> <p>b. What is the MAIN reason -- was not covered in (month) by any health insurance (or Medicare)?</p> <p><i>Record number from Card FR4.</i></p> <p>c. When was the LAST time -- had health insurance?</p>		<p>b. Main reason _____</p> <p>c.</p> <p>1 <input type="checkbox"/> Less than 6 months ago</p> <p>2 <input type="checkbox"/> 6 months ago, but less than 1 year ago } (12d)</p> <p>3 <input type="checkbox"/> 1 year ago, but less than 3 years ago</p> <p>4 <input type="checkbox"/> 3 or more years ago } (FB3 for NP)</p> <p>5 <input type="checkbox"/> Never had health insurance</p> <p>9 <input type="checkbox"/> DK (12e)</p> <p>37</p>
<p><i>HAND CARD FR5. Read categories if telephone interview.</i></p> <p>d. What was the MAIN reason -- stopped being covered by health insurance?</p> <p><i>Mark (X) only one.</i></p>		<p>d.</p> <p>01 <input type="checkbox"/> Lost job or changed employers</p> <p>02 <input type="checkbox"/> Spouse/parent lost job or changed employers</p> <p>03 <input type="checkbox"/> Death of spouse or parent</p> <p>04 <input type="checkbox"/> Became divorced or separated</p> <p>05 <input type="checkbox"/> Became ineligible because of age</p> <p>06 <input type="checkbox"/> Employer stopped offering coverage</p> <p>07 <input type="checkbox"/> Cut back to part time</p> <p>08 <input type="checkbox"/> Benefits from employer/former employer ran out</p> <p>98 <input type="checkbox"/> Other – Specify <i>z</i></p> <p>99 <input type="checkbox"/> DK</p> <p>38-39</p>
<p>e. At the time that -- stopped being covered by health insurance, did -- try to find some other type of health insurance?</p>		<p>e.</p> <p>1 <input type="checkbox"/> Yes (12f)</p> <p>2 <input type="checkbox"/> No } (FB3 for NP)</p> <p>9 <input type="checkbox"/> DK</p> <p>40</p>
<p>f. What was the MAIN reason -- was unable to find some other type of health insurance?</p>		<p>f.</p> <p>1 <input type="checkbox"/> Could not afford</p> <p>2 <input type="checkbox"/> Was rejected</p> <p>8 <input type="checkbox"/> Other reason – Specify <i>z</i> } (FB3 for NP)</p> <p>9 <input type="checkbox"/> DK</p> <p>41</p>

Section FB – PRIVATE PLAN AND COVERAGE DETAIL – Continued		PERSON 1	
13a. In the past 12 months, was there any time that -- did NOT have ANY health insurance or coverage?		13a.	<div>42</div> <div> <input type="checkbox"/> Yes (13b) <input type="checkbox"/> No <input type="checkbox"/> DK </div> <div>(FB3 for NP)</div>
b. In how many of the past 12 months was -- without coverage?		b.	<div>43</div> <div> <input type="checkbox"/> 1 month or less <input type="checkbox"/> 2–3 months <input type="checkbox"/> 4–6 months <input type="checkbox"/> More than 6 months <input type="checkbox"/> DK </div>
<p><i>HAND CARD FR5. Read each category if telephone interview.</i></p> c. What was the MAIN reason -- was without coverage?		c.	<div>44-45</div> <div> <input type="checkbox"/> 01 Lost job or changed employers <input type="checkbox"/> 02 Spouse/parent lost job or changed employers <input type="checkbox"/> 03 Death of spouse or parent <input type="checkbox"/> 04 Became divorced or separated <input type="checkbox"/> 05 Became ineligible because of age <input type="checkbox"/> 06 Employer stopped offering coverage <input type="checkbox"/> 07 Cut back to part time <input type="checkbox"/> 08 Benefits from employer/ former employer ran out <input type="checkbox"/> 98 Other – Specify <input checked="" type="checkbox"/> <input type="checkbox"/> 99 DK </div> <div>(FB 3 for NP)</div>
<p><i>HAND CARD FR6. Read each category if telephone interview.</i></p> 14. During the past 12 months, about how much did [you/your family] spend for medical care? Do NOT include the cost of over-the-counter remedies, the cost of health insurance premiums, or any costs for which you expect to be reimbursed.		14.	<div>46</div> <div> <input type="checkbox"/> 1 Zero <input type="checkbox"/> 2 Less than \$500 <input type="checkbox"/> 3 \$500 – \$1999 <input type="checkbox"/> 4 \$2,000 – \$2,999 <input type="checkbox"/> 5 \$3,000 – \$4,999 <input type="checkbox"/> 6 \$5,000 or more <input type="checkbox"/> 9 DK </div>
ITEM FB4	About how often did the Respondent appear to answer the questions in Sections FA and FB accurately?	FB 4	<div>47</div> <div> <input type="checkbox"/> 1 All the time <input type="checkbox"/> 2 Most of the time <input type="checkbox"/> 3 Some of the time <input type="checkbox"/> 4 Rarely or never <input type="checkbox"/> 9 DK </div>
ITEM FB5	About how often did the Respondent appear to answer the questions in Sections FA and FB honestly?	FB 5	<div>48</div> <div> <input type="checkbox"/> 1 All the time <input type="checkbox"/> 2 Most of the time <input type="checkbox"/> 3 Some of the time <input type="checkbox"/> 4 Rarely or never <input type="checkbox"/> 9 DK </div>
ITEM FB6	Enter the person number of the Respondent. If more than one, enter the person number of the one who answered the most questions in Sections FA and FB.	FB 6	<div>49-50</div> <div> Person number _____ </div>
Notes			

CARD FR1

01. Two or more usual doctors/places
02. Doesn't need a doctor
03. Doesn't like/trust/believe in doctors
04. Doesn't know where to go
05. Previous doctor is not available/moved
06. No insurance/Can't afford it
07. Speak a different language
08. No care available/Care too far away, not convenient
98. Other (Specify)

Explicacion
(SP)
FR1

(Cut along broken lines)

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CARD FR2

01. Changed residence/moved
02. Changed jobs
03. Employer changed insurance coverage
04. Former usual source left area
05. Owed money to former usual source
06. Dissatisfied with former source/liked new source better
07. Medical care needs changed
08. Former usual source stopped taking insurance/coverage
98. Other (Specify)

HIS-501 (1992) (5-1-93)

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MEDICARE

Health Insurance	
SOCIAL SECURITY ACT	
NAME OF BENEFICIARY JOHN Q. PUBLIC	
CLAIM NUMBER 000-00-0000-A	SEX MALE
IS ENTITLED TO HOSPITAL INSURANCE 7-1-66 MEDICAL INSURANCE 7-1-66	
SIGN HERE <i>John Q. Public</i>	

FR2
Medicare

(Cut along broken lines)

HIS-501 (1992) (5-1-93)

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STATE NAMES FOR MEDICAID

MEDI — CAL

California

MEDI — KAN

Kansas

HEALTH CARE COST CONTAINMENT SYSTEM (HCCCS)

Arizona

MEDICAL ASSISTANCE

All other States

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