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A PROGRAM OF THE ARKANSAS DEPARTMENT OF HUMAN SERVICES,
DIVISION OF MEDICAL SERVICES

2026 Beneficiary Satisfaction Survey Results



DATA COLLECTION
AND ANALYSIS BY

afmc℠

ARKANSAS DEPARTMENT OF HUMAN SERVICES

ARKIDS FIRST A BENEFICIARY SATISFACTION SURVEY

2026 Beneficiary Satisfaction Survey Results

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Executive Summary

Implemented in 1997, Arkansas Medicaid's ARKids First Program is one of the most successful children's healthcare programs in the United States. This innovative program became the model for the Children's Health Insurance Program (CHIP) federal mandate, providing a complete package of benefits under two options based on family income. Low-income families are eligible for Medicaid coverage under ARKids First A, while children without employer-sponsored or group health insurance are eligible for ARKids First B.[1] Children covered by ARKids A are not charged deductibles, premiums, or copayments. In the state fiscal year 2026 (SFY26), ARKids First A provided healthcare coverage for approximately 260,000 Arkansas children.

The Arkansas Department of Human Services (DHS), Division of Medical Services (DMS), oversees the ARKids First program. In 2024, the ARKids First Program integrated a new survey with a Children with Chronic Conditions (CCC) item set to identify children with chronic conditions, assess their experiences with the healthcare system, and compare their experiences to those of children without chronic conditions in the same plan.

The Healthcare Effectiveness Data and Information Set (HEDIS®) Consumer Assessment of Healthcare Providers and Systems (CAHPS®) 5.1H Survey with CCC Measure instrument was used in 2026.[2] AFMC is a National Committee for Quality Assurance (NCQA)-certified HEDIS survey vendor. After sending 4,809 surveys by mail to parents/guardians of children who were ARKids First A beneficiaries during the 2025 Measurement Year (MY) from July through December (state fiscal year 2026), AFMC received 700 surveys. The analyzable sample excluded beneficiaries with invalid addresses and respondents found to be otherwise ineligible. After removing beneficiaries deemed ineligible (23 respondents), beneficiaries with incomplete surveys per NCQA specifications (4 respondents), beneficiaries refusing to participate in the survey (0 respondents), and adjusting for invalid addresses (505), 674 surveys were available for analysis from an analyzable sample size of 4,281, resulting in an analyzable response rate of 15.7%. This report summarizes the 2026 ARKids First A Beneficiary Satisfaction Survey results collected from February through April 2026.

This comprehensive analysis will assist DMS in determining which services beneficiaries use, assessing beneficiaries' evaluations of the ARKids First A program and its services, and identifying key opportunities to improve member experiences. Additionally, survey results compared the ARKids First A general sample respondents and the ARKids First A children with chronic conditions respondents. Further comparisons are provided with the 2025 National CAHPS Benchmarking Database (NCBD) national rates.

NCBD provides the most positive response options in analysis figures. This is because NCBD considers only the most favorable outcomes or responses. As a result, the analysis figures provided by NCBD focus on best-case scenarios and fewer respondents. AFMC provides a more comprehensive analysis by considering a wider range of positive response options ("always" and "usually" for the composite components and summary rate question, and 8, 9, or 10 response options for rating questions).

[1] Arkansas Department of Human Services. "Are We Eligible for ARKids Coverage?" Arkansas Department of Human Services, accessed June 8, 2026. https://humanservices.arkansas.gov/divisions-shared-services/medical-services/healthcare-programs/arkids

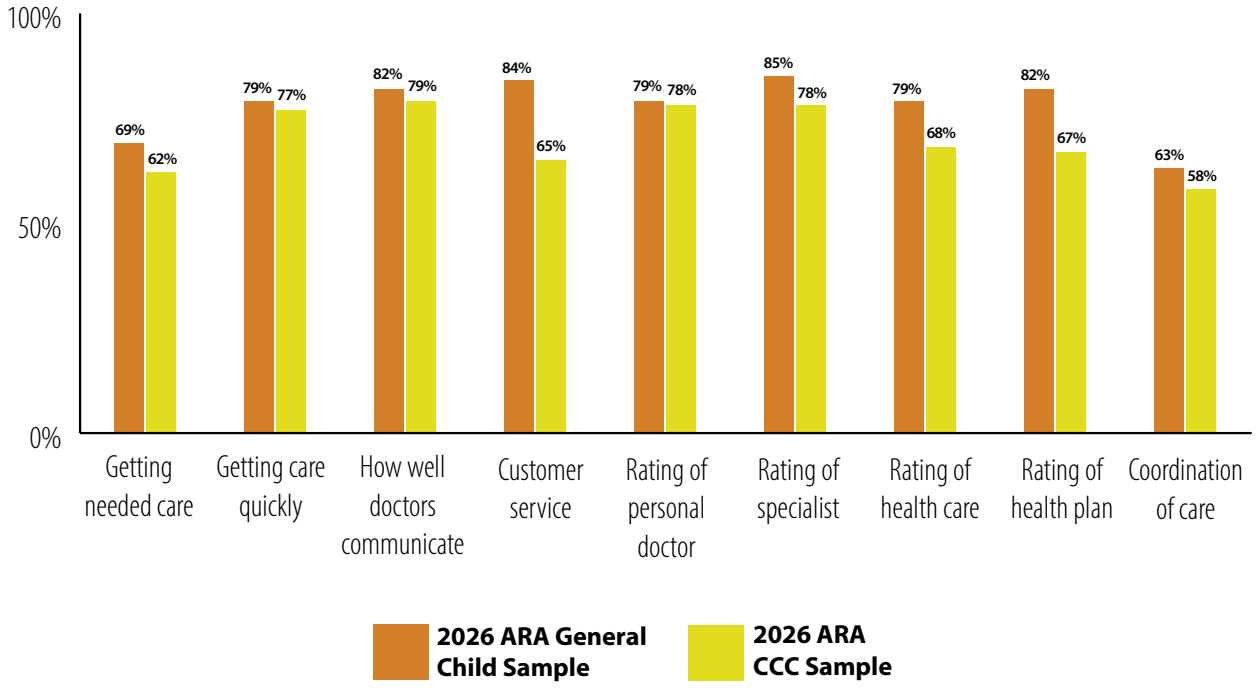
[2] HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA). CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

Table 1 shows the overall composite and rating percentages for the 2026 ARKids First A program for the general child respondents and the respondents identified as children with chronic conditions, and NCBD's 2025 results utilizing the most positive response options—"always" for composite components and the summary rate question and 9 or 10 for rating questions. Figure 1 portrays the information from 2026 ARKids First A general child respondents and the respondents identified as children with chronic conditions in chart form.

TABLE 1: COMPOSITE AND RATING PERCENTAGES

COMPOSITES/RATINGS	GENERAL CHILD	GENERAL CHILD NCBD 2025	CHILDREN WITH CHRONIC CONDITIONS	CHILDREN WITH CHRONIC CONDITIONS NCBD 2025
Getting needed care	69%	59%	62%	58%
Getting care quickly	79%	68%	77%	71%
How well doctors communicate	82%	79%	79%	80%
Customer service	84%	68%	65%	69%
Rating of personal doctor	79%	78%	78%	76%
Rating of specialist	85%	74%	78%	72%
Rating of health care	79%	70%	68%	67%
Rating of health plan	82%	72%	67%	66%
Coordination of care	63%	61%	58%	60%

FIGURE 1.



The 2026 ARKids First A Beneficiary Satisfaction Survey includes four composite measures, four rating questions, and one summary rate question.

- **Getting needed care** measures the beneficiary's ease of seeing a specialist and getting any care, tests, or treatment.
- **Getting care quickly** measures a beneficiary's access to urgent and nonurgent care in a timely manner.
- **How well doctors communicate** measures how well doctors listen, explain, spend enough time with beneficiaries, and show respect for what they have to say.
- **Customer service** measures how often beneficiaries got the help they needed and were treated with courtesy and respect by Medicaid's customer service representatives.

There are four questions with responses scaled from 0 to 10, where 0 represents the "worst possible" and 10 represents the "best possible." Categories include:

- **Rating of personal doctor**
- **Rating of specialist**
- **Rating of health care**
- **Rating of health plan**

There is one summary rate question:

- **Coordination of care** measures how often a beneficiary's personal doctor seemed informed and up-to-date about the care they got from other doctors or healthcare providers.

In the Composite Analysis section (Table 7), AFMC provides a more comprehensive analysis by considering a wider range of positive response options ("always" and "usually" for composite components and the summary rate question, and 8, 9, or 10 response options for rating questions). This means that AFMC considers a greater range of scenarios, which can lead to a more nuanced and realistic assessment with more respondents.

NOTABLE FINDINGS

The following summarizes how ARKids First A demographics, ratings, and composite scores trend over time. For the complete analysis, please refer to the sections Demographics of Population, Survey Sample, and Respondents (Page 12), ARKids First A Beneficiary Health Care Access (Page 16), Composite Analysis (Page 17), Trend Analysis (Page 25), and Comparisons with Benchmark Data (Page 29) in this report.

AFMC compared the 2026 ARKids First A survey general child sample results with the 2026 CCC sample results and the 2025 NCBD national rates.

Demographic comparisons between the general child sample and the CCC sample showed a significantly higher proportion of children ages 0–3 and a significantly lower proportion of children ages 4–7 in the general child sample than in the CCC sample. For child's overall health status and child's mental health status, the general child sample saw significantly higher proportions of respondents in the "excellent/very good" category, while the proportions for both of these demographics were significantly lower for the "good" and "fair/poor" status categories.

The 2026 ARKids First A survey sample demographics were compared to the population and the demographics of the survey respondents. Based on the population data, 47.2% of 2026 ARKids First A respondents were "white," followed by 25.4% of respondents with race unknown. A larger percentage of respondents were "male" (55.0%) than "female" (45.0%). The majority (39.8%) of respondents were from the "12–17" age group.

Parents/caregivers of ARKids First A beneficiaries were asked about their satisfaction with certain aspects of the health plan. A comparison was made between the general child sample and the children with chronic conditions sample on beneficiary satisfaction with the ARKids First A health plan. The proportion of beneficiaries reporting that getting prescription medicine was "usually" or "always" easy was significantly higher among beneficiaries in the general child sample (98.7%) than in the CCC sample (92.2%). The proportion of beneficiaries reporting it was "usually" or "always" easy to get care, tests, or treatment was non-significantly higher among beneficiaries of the general child sample (96.9%) than the CCC sample (94.8%). The mean rating of health care was significantly higher for beneficiaries of the general child sample in the ARKids First A health plan than for the children with chronic conditions sample.

When comparing the ARKids First A 2026 survey results for the general child sample with those of the CCC sample, AFMC found that, for both samples, all composite measures had a positive summary rate of 88.3% or higher. The general child sample had a more positive summary rate across all composites (excluding the "getting care quickly" composite), rating items, and the question summary rate than the children with chronic conditions sample. However, all differences were non-significant except for one. The general child sample had a significantly higher positive summary rate of 90.7% for "rating of health plan" than the CCC sample's 81.5% positive summary rate.

Questions that make up the chronic condition measurement set are contained within the HEDIS MY 2025 CAHPS 5.1H Child with CCC Survey. The questions serve as a screening tool to identify a subset of children with chronic conditions. Based on the screening tool used during analysis, 283 beneficiaries were identified as children with chronic conditions. The "use of or need for prescription medicine" health consequence section had the highest positive response rate, with all response rates being 71.5% or higher for all three questions in this section when compared to all other health consequence sections. In the "functional limitations compared with others of the same age" section, 98.0% of CCC beneficiaries reported that their child has limitations due to medical, behavioral, or other health conditions, and 100.0% said this condition has lasted or is expected to last at least 12 months.

The CCC sample has a set of composites, components, and individual items specific to this group of beneficiaries. The "getting special medical equipment or devices" component had the highest summary rate (87.5%) within the "access to specialized services" composite. All components of the "family-centered care: personal doctor who knows child" composite had a summary rate of 86.9% or greater. The "doctors answered questions you had" component within the "family-centered care: getting needed information" composite had the highest summary rate of 94.4% among all component questions.

When the 2026 survey results for the general child sample were compared with those of the previous year (2025), there were no significant differences among all composites, components,

and rating items. The 2026 general child sample had more favorable ratings of specialist (92.7%), health care (91.7%), and health plan (90.7%) than the 2025 general child sample ratings of specialist (91.9%), health care (91.6%), and health plan (86.9%).

The 2026 ARKids First A survey results for the CCC sample were compared with those of the previous year (2025). There were no significant differences among all composites, components, and rating items. The summary rate for the "getting care quickly" composite was slightly higher for the 2026 beneficiaries of the CCC sample (92.3%) than for the 2025 sample (90.8%), along with all the corresponding components.

When comparing the ARKids First A 2026 survey results for the general child sample with the 2025 NCBD national survey results, ARKids First A satisfaction was significantly higher for the "getting needed care" composite and one corresponding component question. The "getting care quickly" composite and all component questions of this composite for the ARKids First A general child sample were significantly higher than the 2025 NCBD national rate. The 2026 ARA general child sample satisfaction for the "customer service" composite and one corresponding component were significantly higher than the 2025 NCBD general child population result.

In 2026, the CCC sample from the ARKids First A survey showed a non-significant increase in satisfaction proportion for two of the four composites — "getting needed care" and "getting care quickly." The component questions comprising these two composites also showed a non-significant increase from the 2025 national CCC proportions. None of the rating questions were significantly different, but all ratings were higher for the 2026 ARKids First A CCC sample than the 2025 NCBD national CCC sample.

Comparing the 206 ARKids First A survey result of the CCC sample with the 2025 NCBD national survey results of the CCC sample for the CCC-specific composite measures, AFMC found that the ARKids First A satisfaction was significantly higher for the "getting special medical equipment or devices" and "getting therapy" component questions from the "access to specialized services" composite. The ARKids First A CCC sample had higher satisfaction (73%) for the "getting prescription medicine" component of the "access to prescription medicines" composite compared with the 2025 NCBD national CCC sample (68%), though the difference was not significant. The "doctors or staff coordinating child's care among other providers" component of the "coordination of care for children with chronic conditions" composite was significantly higher when compared to the national rates.

Survey Overview and Methodology

BACKGROUND AND SURVEY INSTRUMENT

DMS chose AFMC to conduct the 2026 ARKids First A Beneficiary Satisfaction Survey using the HEDIS MY 2025 CAHPS 5.1H with CCC Measure survey tool. NCQA's naming convention refers to "HEDIS MY ####" where "MY" refers to "Measurement Year" and #### is the performance period (year) from which the data is derived. Developed jointly by the Agency for Healthcare Research and Quality (AHRQ) and NCQA, CAHPS surveys are the most comprehensive survey tools available for assessing beneficiary experiences with their health plan. The survey was conducted using an NCQA-approved enhanced HEDIS/CAHPS protocol.

AFMC first conducted the ARKids First Beneficiary survey in 1998. It was repeated biennially until 2024. Effective January 1, 2024, the Centers for Medicare & Medicaid Services (CMS) established requirements for mandatory annual State reporting as a major step toward developing a national, evidence-based system to measure and improve the quality of care delivered to Medicaid beneficiaries. In 2024, the Child Core Set required the implementation of the CAHPS Health Plan Survey 5.1H – Child Version Including Medicaid and Children with Chronic Conditions Supplemental Items (CPC-CH).

This report summarizes results for both systematic samples of ARKids First A and ARKids First A with CCC beneficiaries. The CCC survey includes the same composite, rating, and individual question summary rate questions included in the HEDIS MY 2025 CAHPS 5.1H Child Without CCC Survey:

- Getting needed care
- Getting care quickly
- How well doctors communicate
- Customer service
- Rating personal doctor
- Rating specialist seen most often
- Rating child's health care
- Rating health plan
- Coordination of care

In addition, the survey includes the following three CCC composites that summarize satisfaction with basic components of care essential for successful treatment, management, and support of children with chronic conditions:

- Access to specialized services
- Family centered care: Personal doctor who knows child
- Coordination of care for children with chronic conditions

Question summary rates are also reported individually for two CCC items summarizing the following concepts:

- Access to prescription medicines
- Family centered care: getting needed information

In general, satisfaction is reported by summary rates, which represent the percentage of respondents who selected the most positive response options specified by NCQA ("always," 9, or 10). AFMC considers a wider range of positive response options ("always" and "usually" for composite components and the summary rate question, and 8, 9, or 10 response options for rating questions). Where applicable, the general child population results are shown alongside the results for children with chronic conditions to assess how well the program performs across the different beneficiary types.

In 2024, the National Committee for Quality Assurance (NCQA) approved the State's request to incorporate three supplemental items into the HEDIS MY 2024 CAHPS 5.1H Child with CCC Survey. These additional items were designed to assess enrollees' access to and experiences with transportation services related to healthcare utilization. NCQA also approved the State's 2025 request to add an additional question to the survey. This item asks beneficiaries how they prefer to receive important information regarding their child's health plan.

CHILDREN WITH CHRONIC CONDITIONS

CAHPS[3] references the Maternal and Child Health Bureau's definition of children with chronic conditions, which is based on consequences rather than specific conditions or diseases: "children with special health care needs are those who have a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that generally required by children."

[3] Internet Citation: CAHPS Item Set for Children with Chronic Conditions. Content last reviewed April 2022. Agency for Healthcare Research and Quality, Rockville, MD.

https://www.ahrq.gov/cahps/surveys-guidance/item-sets/children-chronic/index.html

SAMPLING PROTOCOL

Children with chronic conditions represent a small proportion of the general population of children. As part of the sampling protocol, a prescreen status code is assigned to each child in the sample frame, identifying those more likely to have a chronic condition, as determined by transactional claims data. Then, two systematic samples are drawn (first for the CAHPS 5.1H Child Survey sample [the general population] and then a supplemental sample for the CCC sample). The supplemental sample is derived from the set of members with a prescreen status code indicating they are children who are more likely to have a chronic condition and were not already selected in the general population.

The supplemental sample of children who may be more likely to have a chronic condition receives the same survey and follows the same survey protocol as the general children population. During analysis, a survey-based screening tool is used to identify children with chronic conditions based on responses to specific questions. The survey-based screening tool contains five sections representing five different health consequences. A child is identified as having a chronic condition if they answer "yes" to all questions within at least one specific health consequence. The five health consequences used in the survey-based screening tool, along

with their respective component questions, are listed below. It should be noted that respondents could be assigned a chronic condition status based on more than one health consequence section.

Use of or Need for Prescription Medicines	
Q55	Does your child currently need or use medicine prescribed by a doctor (other than vitamins)?
Q56	Is this because of any medical, behavioral, or other health condition?
Q57	Is this a condition that has lasted or is expected to last for at least 12 months?
Above-Average Use or Need for Medical, Mental Health, or Education Services	
Q58	Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?
Q59	Is this because of any medical, behavioral, or other health condition?
Q60	Is this a condition that has lasted or is expected to last for at least 12 months?
Functional Limitations Compared with Others of Same Age	
Q61	Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do?
Q62	Is this because of any medical, behavioral, or other health condition?
Q63	Is this a condition that has lasted or is expected to last for at least 12 months?
Use of or Need for Specialized Therapies	
Q64	Does your child need or get special therapy such as physical, occupational, or speech therapy?
Q65	Is this because of any medical, behavioral, or other health condition?
Q66	Is this a condition that has lasted or is expected to last for at least 12 months?
Q67	Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?
Q68	Has this problem lasted or is it expected to last for at least 12 months?

SURVEY SIZE, SAMPLE DISPOSITION, AND RESPONSE RATE

To determine the sample size, AFMC considers the number of complete and eligible surveys collected in prior years to assess whether oversampling is necessary to achieve the goal of 411 complete surveys or the required denominator of 100 complete responses per survey question, as recommended by NCQA. Last year's 2025 ARKids First A results were used to determine the oversampling rate. NCQA guidelines allow oversampling for the general population without oversampling for the CCC supplemental sample.

Per NCQA guidelines, a total sample of 4,809 beneficiaries was selected from the Arkansas Medicaid Enterprise (AME) Decision Support System (DSS) claims data using a systematic sampling methodology: 2,970 were part of the general population sample, and 1,839 were part of the supplemental sample. A total of 700 surveys were returned, resulting in a return rate of 14.6%.

Of the 4,809 beneficiaries selected, 505 had invalid addresses, and 23 were deemed ineligible, leaving an analyzable sample of 4,281. After omitting ineligible beneficiaries (23), incomplete surveys (4), and refusals (0), 674 were available for analysis, yielding an analyzable response rate of 15.7%. As shown in **Table 2**, response rates were calculated for the entire child population, as respondents were not identified within the children with chronic condition population until the analysis phase.

TABLE 2. SAMPLE SIZE, SURVEY DISPOSITION, AND RESPONSE RATE

ARKIDS FIRST A: CHILDREN WITH CHRONIC CONDITIONS SURVEY	2026
Total mailing sent	4,809
Ineligible: According to population criteria*	22
Ineligible: Language barrier*	0
Ineligible: Mentally or physically incapacitated*	0
Ineligible: Deceased*	1
Invalid address*	505
Analyzable sample size	4,281
Eligible: Incomplete (3 of 5 questions not answered per NCQA specifications)***	4
Refusal	0
Nonresponse**	3,603
Analyzable surveys returned	674
Analyzable response rate	15.7%

** Excluded from response rate denominator*
*** Does not include invalid addresses*
**** An eligible but incomplete disposition code is assigned to received surveys that have not answered at least 3 of 5 specified questions as indicated in HEDIS MY 2025 Volume 3 Specifications for Survey Measures. These surveys are not included in the analyzable surveys returned.*

SAMPLING FRAME

Beneficiary information was obtained from Medicaid. AFMC used a systematic sampling method as outlined in the HEDIS MY 2025 Volume 3: Specifications for Survey Measures document. NCQA guidelines also require each beneficiary to be enrolled for a minimum of 6 months prior to survey participation, with no more than one gap in enrollment of up to 45 days. Although NCQA defines the allowable gap as 45 days, AFMC sets this criterion at 30 days because enrollment data are reported monthly. The sampling frame consisted of all ARKids First A primary care case management (PCCM) enrollees who were 17 years old or younger as of December 31, 2025. A beneficiary's six-month continuous enrollment began on July 1, 2025. Only one beneficiary per household was selected.

SURVEY PROCEDURE

AFMC conducted a mail-only survey using the HEDIS protocol with a mailing enhancement approved by NCQA. Following the protocol, advance letters in English, Spanish, and Marshallese, printed on DMS/DHS letterhead and bearing a State-approved generic signature, were mailed to each selected beneficiary. For the selected children, the parent or caregiver received the advanced letter. The advanced letter explained the purpose of the survey, informed recipients of its confidential and voluntary nature, and provided instructions for requesting a Spanish or Marshallese version of the survey. Two weeks later, a survey packet was mailed to the parent/caregiver of the selected member containing a questionnaire, a postage-paid return envelope, and cover letters in English, Spanish, and Marshallese. The cover letters, on DMS/DHS letterhead with an approved generic signature, reiterated the information in the advance letter and gave specific instructions for completing and returning the survey. A reminder notice was mailed 13 days later to those beneficiaries who did not respond. Approximately one month after the initial survey was sent, a second survey packet with letters in the three languages was mailed to any beneficiary who had not returned a survey. Approximately 10 days after the second survey, a second reminder notice was mailed (Table 3).

All mail was sent in bulk with return receipt and address correction requested. Letters and surveys returned as undeliverable with an address correction were re-mailed.

SURVEY TIMETABLE

TABLE 3. SURVEY MAILING DATES

SURVEY MAILINGS	DATE
Advance letter	January 20, 2026
First survey	February 4, 2026
First reminder notice	February 17, 2026
Second survey	March 5, 2026
Second reminder notice	March 16, 2026
Data collection cutoff	April 2, 2026

SURVEY TRACKING

A unique number was assigned to each member in the sample for tracking purposes only. This tracking number was used so that a second survey could be mailed to non-respondents, but not to those who had already completed and returned the survey. Beneficiary confidentiality was never compromised.

DISQUALIFIED SURVEYS

Surveys received between February 4th and April 2nd were included in the survey analysis. Surveys without any valid responses, incomplete responses per NCQA specifications, and those no longer meeting enrollment criteria were excluded from the analysis. These exclusions were based on the standard HEDIS/CAHPS protocol and recommendations. Excluded or disqualified surveys accounted for 3.9% of the total surveys received.

SPANISH AND MARSHALLESE LANGUAGE SURVEYS

AFMC translates all surveys into Spanish and Marshallese and provides either survey version to beneficiaries upon request. Of the 700 surveys returned, 6 were in Spanish and none were in Marshallese.

Demographics of Population, Survey Sample, and Respondents

Since AFMC follows NCQA protocol using a systematic sampling method, the survey samples should be representative of the ARKids First A population. The demographic data in Table 4 is derived from population data, not from survey responses. The data shows how the sample demographics compare with the population and the demographics of the survey respondents. Based on the population data, 47.2% of 2026 ARKids First A respondents were "white," followed by 25.4% of respondents with race unknown. A larger percentage of respondents were "male" (55.0%) than "female" (45.0%). The majority (39.8%) of respondents were from the "12–17" age group. This year's data also shows that more respondents were located in the "Northwest" region (37.5%) than in any other region of the state.

In this summary of the HEDIS MY 2025 CAHPS 5.1H Child with CCC Survey for the ARKids First A population, demographic comparisons will be made between the general sample respondents (general child) and respondents identified with chronic conditions (CCC sample). AFMC will highlight where significant differences occur between the two groups. A z-test will be used to determine whether there are significant differences. Table 5 and Figure 2 present percentages across various demographic categories for parents/caregivers of general child respondents and parents/caregivers of children with chronic conditions. Demographic categories include gender, age, race, parent/caregiver's education, overall health status, and mental health status.

Demographic comparisons of the general child sample and the children with chronic conditions sample in Table 5 showed no significant differences in proportions of respondents by gender. The general child sample had a significantly higher proportion of children ages 0–3 and a significantly lower proportion of children ages 4–7 than the CCC sample. Respondents of the "Black or African American" race category had a significantly lower proportion in the general child sample compared to the CCC sample. Those reported in the "Other" race category had a significantly higher proportion of respondents in the general child sample than the CCC sample. The proportion of parents/caregivers with a high school degree or less was significantly higher in the general child sample, while the proportion with some college education was significantly lower than in the CCC sample. For child's overall health status and child's mental health status, the general child sample saw significantly higher proportions of respondents in the "excellent/very good" category, while the proportions for both of these demographics were significantly lower for the "good" and "fair/poor" status categories.

TABLE 4. ARKIDS FIRST A CHILDREN WITH CHRONIC CONDITIONS SAMPLE AND POPULATION DEMOGRAPHICS

DEMOGRAPHIC	BENEFICIARIES SURVEYED	PCT. OF TOTAL	ARKIDS FIRST A POPULATION**	ANALYZABLE RESPONSES	PCT. OF TOTAL	RESPONSE RATE***
RACE AND ETHNICITY						
White	1,737	40.6%	38.0%	318	47.2%	18.3%
Black or African American	734	17.1%	18.7%	96	14.2%	13.1%
American Indian or Alaska Native	22	0.5%	0.4%	2	0.3%	9.1%
Hispanic or Latino	401	9.4%	10.3%	67	9.9%	16.7%
Asian American	52	1.2%	1.4%	5	0.7%	9.6%
Native Hawaiian or other Pacific Islander	15	0.4%	0.8%	1	0.1%	6.7%
Multiracial	106	2.5%	3.0%	14	2.1%	13.2%
Unknown	1,214	28.4%	27.3%	171	25.4%	14.1%
Total*	**4,281**	**100.0%**	**100.0%**	**674**	**100.0%**	**15.7%**
GENDER						
Female	2,016	47.1%	49.0%	303	45.0%	15.0%
Male	2,265	52.9%	51.0%	371	55.0%	16.4%
Total*	**4,281**	**100.0%**	**100.0%**	**674**	**100.0%**	**15.7%**
AGE						
0–3	1,008	23.5%	22.3%	131	19.4%	13.0%
4–7	1,014	23.7%	24.2%	133	19.7%	13.1%
8–11	879	20.5%	22.7%	142	21.1%	16.2%
12–18	1,380	32.2%	30.8%	268	39.8%	19.4%
Total*	**4,281**	**100.0%**	**100.0%**	**674**	**100.0%**	**15.7%**
GEOGRAPHIC REGION						
Northwest	1.451	33.9%	33.6%	253	37.5%	17.4%
Northeast	891	20.8%	19.9%	147	21.8%	16.5%
Central	1,167	27.3%	26.6%	154	22.8%	13.2%
Southwest	455	10.6%	11.0%	78	11.6%	17.1%
Southeast	317	7.4%	8.9%	42	6.2%	13.2%
Total*	**4,281**	**100.0%**	**100.0%**	**674**	**100.0%**	**15.7%**

**Totals may not sum to 100% due to rounding*

***ARKids First A Population is all beneficiaries who meet the enrollment criteria*

****Response Rate is a percent calculated by dividing analyzable responses by the beneficiaries surveyed*

TABLE 5. PROFILE OF ARKIDS FIRST A: CHILDREN WITH CHRONIC CONDITIONS SURVEY RESPONDENTS

DEMOGRAPHIC	CATEGORY	GENERAL CHILD	CHILDREN WITH CHRONIC CONDITIONS	SIGNIFICANCE TESTING GENERAL VS. CCC
Gender	Male	54.7%	56.4%	Not Significant
	Female	45.3%	43.6%	Not Significant
Age*	0–3	24.1%	10.6%	Significantly Higher
	4–7	15.7%	24.5%	Significantly Lower
	8–11	21.2%	22.7%	Not Significant
	12–18	39.0%	42.2%	Not Significant
Race*	White	63.0%	65.5%	Not Significant
	Black or African American	14.1%	21.0%	Significantly Lower
	Asian	1.1%	0.0%	Not Significant
	Multiracial	7.6%	7.5%	Not Significant
	Other	14.3%	6.0%	Significantly Higher
Parent/ caregiver's education*	High school graduate or less	57.4%	41.0%	Significantly Higher
	Some college	28.7%	41.0%	Significantly Lower
	College graduate or more	13.8%	18.0%	Not Significant
Overall health status*	Excellent/very good	85.0%	66.2%	Significantly Higher
	Good	13.6%	27.4%	Significantly Lower
	Fair/poor	1.3%	6.4%	Significantly Lower
Mental health status*	Excellent/very good	84.3%	51.8%	Significantly Higher
	Good	13.3%	28.7%	Significantly Lower
	Fair/poor	2.4%	19.5%	Significantly Lower

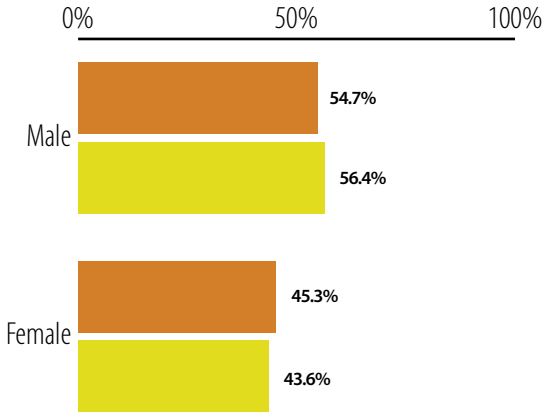
**Columns may not sum to 100% due to rounding*

FIGURE 2.

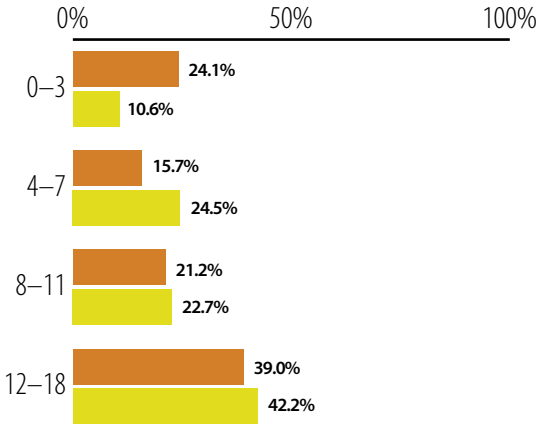
Demographics



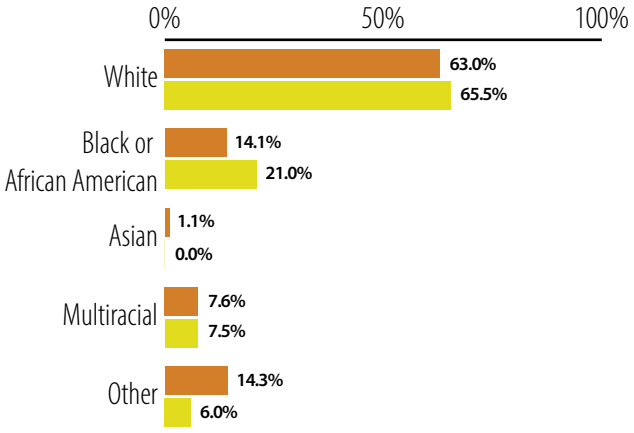
• GENDER



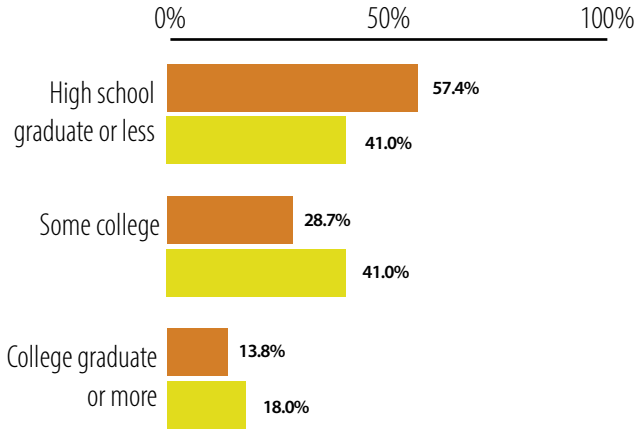
• AGE



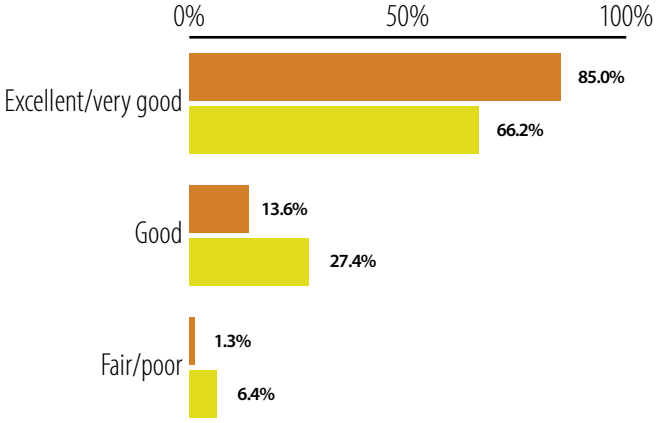
• RACE



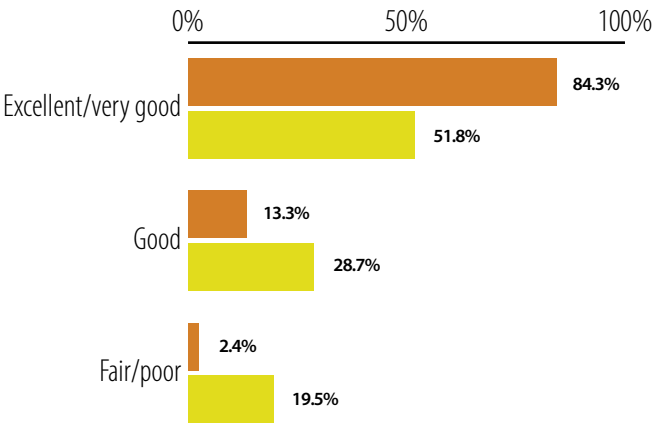
• PARENT/CAREGIVER'S EDUCATION



• OVERALL HEALTH STATUS



• MENTAL HEALTH STATUS



ARKids First A Beneficiary Health Care Access

Parents/caregivers of ARKids First A beneficiaries were asked about their satisfaction with certain aspects of the health plan, such as setting up appointments, ease of getting prescription medicine, ease of getting appropriate care that was needed, and rating of their health care. Table 6 compares the beneficiary satisfaction among the general child sample and the children with chronic conditions sample of the ARKids First A health plan.

TABLE 6. ARKIDS FIRST A: CHILDREN WITH CHRONIC CONDITIONS SATISFACTION WITH HEALTH PLAN

HEALTH CARE ACCESS AMONG GENERAL CHILDREN AND CHILDREN WITH CHRONIC CONDITIONS	2026		
	GENERAL CHILD	CHILDREN WITH CHRONIC CONDITIONS	SIGNIFICANCE TESTING
How often did you get an appointment for a check-up or routine care for your child as soon as your child needed? (Q6)			
Never or sometimes	36 (15.5%)	22 (10.0%)	Not Significant
Usually or always	197 (84.5%)	197 (90.0%)	Not Significant
How often was it easy to get prescription medicine? (Q51)			
Never or sometimes	2 (1.3%)	17 (7.8%)	Significantly Lower
Usually or always	150 (98.7%)	201 (92.2%)	Significantly Higher
How often was it easy to get the care, tests, or treatment your child needed? (Q10)			
Never or sometimes	7 (3.1%)	11 (5.2%)	Not Significant
Usually or always	222 (96.9%)	202 (94.8%)	Not Significant
Mean rating of health care (Q9)	9.26	8.86	Significantly Higher

As determined by a z-test, the general child sample (1.3%) had a significantly lower proportion of respondents reporting that it was "never" or "sometimes" easy to get prescription medicine than the CCC sample (7.8%). The proportion of beneficiaries reporting that getting prescription medicine was "usually" or "always" easy was significantly higher among beneficiaries in the general child sample (98.7%) than in the CCC sample (92.2%). The proportion of beneficiaries reporting that getting care, tests, or treatment was "usually" or "always" easy was non-significantly higher among beneficiaries in the general child sample (96.9%) than in the CCC sample (94.8%). The mean rating of health care was significantly higher for beneficiaries of the general child sample in the ARKids First A health plan when compared with the children with chronic conditions sample, as determined by a t-test.

Composite Analysis

STANDARD COMPOSITES: GENERAL CHILD AND CHILDREN WITH CHRONIC CONDITIONS

The following table shows how the survey data compares between the general child survey sample and the children with chronic conditions survey sample. **Table 7** shows each composite measure, the questions that make up these composite measures, the rating questions, and the summary question for general child respondents and for children with chronic conditions. As compared with NCBD's most positive response options, AFMC provides a more comprehensive analysis by considering a wider range of positive response options ("always" and "usually" for the component questions that comprise the composite measures and the summary rate question, and 8, 9, or 10 response options for rating questions). This greater range of scenarios can lead to a more nuanced and realistic assessment with more respondents. AFMC performs significance testing between samples using a z-test, and the highlighted results indicate whether any comparisons are significantly different. Composite questions are composed of component questions and, therefore, do not have valid n-values.

For both samples, shown in **Table 7**, all composite measures had a positive summary rate of 88.3% or higher. For the "how well doctors communicate" composite, the general child and CCC sample groups had a positive summary rate greater than 94.0%. The "being treated with courtesy and respect" component of the "customer service" composite among the general child sample had a summary rate of 100.0%, the highest summary rate of all composite and component measures. The general child sample had a more positive summary rate across all composites (excluding the "getting care quickly" composite), rating items, and the question summary rate than the children with chronic conditions sample. However, all differences were non-significant except for one. The general child sample had a significantly higher positive summary rate of 90.7% for "rating of health plan" than the CCC sample's 81.5%.

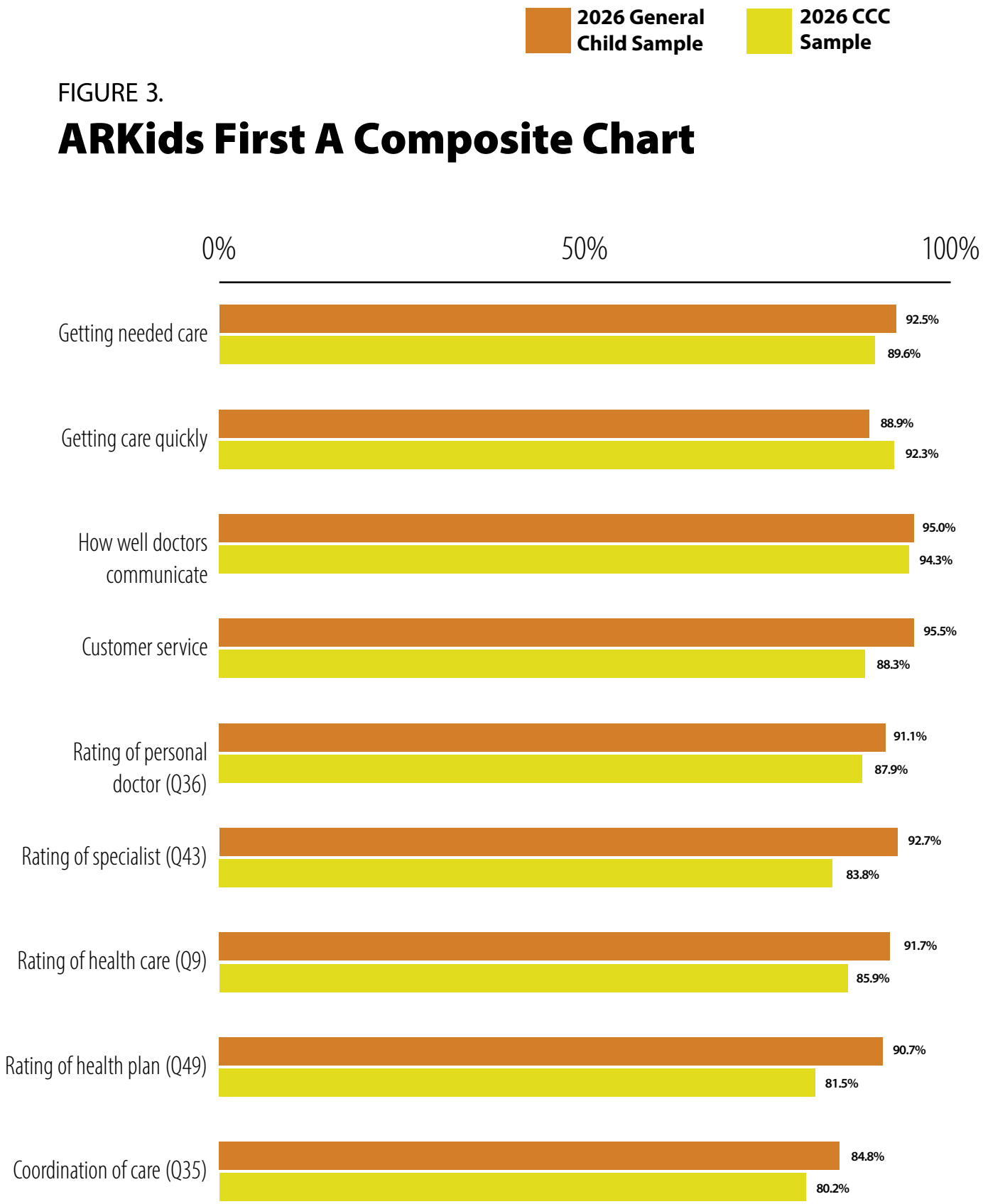
TABLE 7. STANDARD COMPOSITES AND COMPONENT QUESTIONS/RATING QUESTIONS

COMPOSITES/COMPONENTS AND RATING ITEMS	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITIONS		SIGNIFICANCE TESTING
	VALID n	SUMMARY RATE	VALID n	SUMMARY RATE	GENERAL VS. CCC
Getting needed care		***92.5%***		***89.6%***	***Not Significant***
Q10. Getting care, tests, or treatment	229	96.9%	213	94.8%	Not Significant
Q41. Seeing a specialist	59	88.1%	121	84.3%	Not Significant
Getting care quickly		***88.9%***		***92.3%***	***Not Significant***
Q4. Obtaining care right away for an illness/injury/condition	117	93.2%	111	94.6%	Not Significant
Q6. Obtaining check-up or routine care appointment as soon as needed	233	84.5%	219	90.0%	Not Significant
How well doctors communicate		***95.0%***		***94.3%***	***Not Significant***
Q27. Doctors explaining things in an understandable way	232	94.0%	223	95.5%	Not Significant
Q28. Doctors listening carefully to you	232	97.8%	223	96.0%	Not Significant
Q29. Doctors showing respect for what you had to say	230	97.8%	222	96.4%	Not Significant
Q31. Doctors explaining things in an understandable way to your child	149	94.6%	147	93.2%	Not Significant
Q32. Doctors spending enough time with your child	230	90.9%	222	90.5%	Not Significant
Customer service		***95.5%***		***88.3%***	***Not Significant***
Q45. Getting help when calling customer service	44	90.9%	51	82.4%	Not Significant
Q46. Being treated with courtesy and respect	42	100.0%	52	94.2%	Not Significant
Rating items					
Rating of personal doctor (Q36)	316	91.1%	264	87.9%	Not Significant
Rating of specialist (Q43)	55	92.7%	117	83.8%	Not Significant
Rating of health care (Q9)	229	91.7%	213	85.9%	Not Significant
Rating of health plan (Q49)	377	90.7%	276	81.5%	Significantly Higher
Question summary rate					
Coordination of care (Q35)	79	84.8%	126	80.2%	Not Significant

Columns may not sum to 100% due to rounding

FIGURE 3.

ARKids First A Composite Chart



CHILDREN WITH CHRONIC CONDITIONS SCREENING RESULTS

Questions that make up the chronic condition measurement set are contained within the HEDIS MY 2025 CAHPS 5.1H Child with CCC Survey. Based on responses to these questions, the questions are used as a screening tool to identify the subset of children with chronic conditions.

Table 8 is specific to the assignment of children with chronic conditions (CCC sample). The screening tool contains five sections, each representing a different health consequence. A child is identified as having a chronic condition if they answer "yes" to all questions within at least one specific health consequence. All screening sections, except "treatment or counseling for emotional or development problems," consist of three screener questions. Each section begins with a gate item question; responding "yes" enables the respondent to proceed to the next question, while a "no" response prompts instructions to bypass the following questions within that specific health consequence section. This format also applies to the second question in each section: a "yes" allows the respondent to proceed to the next question, while a "no" directs the respondent to skip the third question. For "treatment or counseling for emotional or development problems," selecting "no" for the first question leads to instructions to skip the second question in that section. Table 8 displays the number of valid CCC sample beneficiaries for each screening question and the percentage of respondents who answered "yes" to the question.

Based on the screening tool used during analysis, 283 beneficiaries were identified as children with chronic conditions. As seen in Table 8, 71.5% of CCC beneficiaries answered "yes" when asked if their child currently needs or uses medicine prescribed by their doctor. The "use of or need for prescription medicine" health consequence section had the highest positive response rate, with all response rates being 71.5% or higher for all three questions in this section when compared to all other health consequence sections. In the "functional limitations compared with others of same age" section, 98.0% of CCC beneficiaries reported that their child has limitations due to medical, behavioral, or other health conditions, and 100.0% said this condition has lasted or is expected to last at least 12 months.

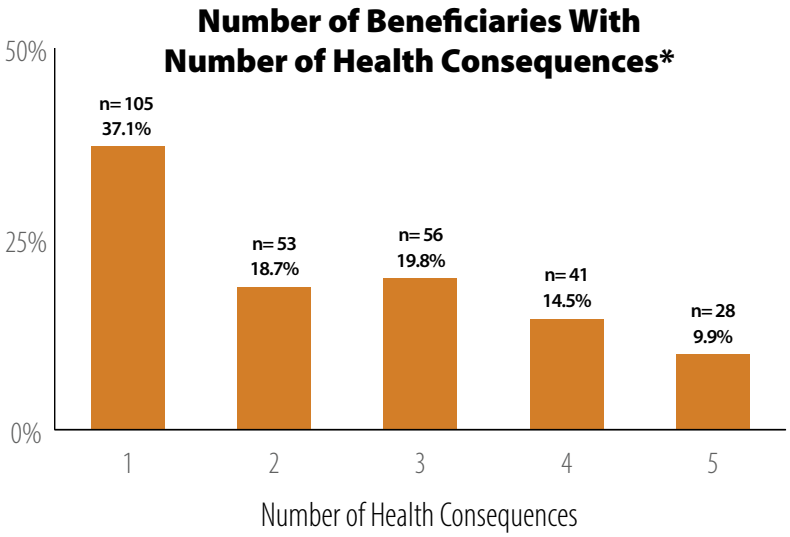
TABLE 8. WITH CHRONIC CONDITION SCREENING TOOL

SCREENING QUESTIONS	CHILDREN WITH CHRONIC CONDITIONS	
	VALID n	POSITIVE RESPONSE RATE
Use of or need for prescription medicine		
Child currently need or use medicine prescribed by doctor (Q55)	281	71.5%
Prescribed medicine due to medical, behavioral, or other health condition (Q56)	200	96.5%
Condition lasted or expected to last at least 12 months (Q57)	193	99.0%
Above average use or need for medical, mental health, or education services		
Child has above average need or use for medical care, mental health services, or educational services (Q58)	279	52.7%
Services due to medical, behavioral, or other health condition (Q59)	146	95.2%
Condition lasted or expected to last at least 12 months (Q60)	138	98.6%
Functional limitations compared with others of same age		
Child limited or prevented in ability to do things (Q61)	282	35.1%
Limitations due to medical, behavioral, or other health condition (Q62)	99	98.0%
Condition lasted or expected to last at least 12 months (Q63)	97	100.0%
Use of or need for specialized therapies		
Child need or get special therapy (Q64)	281	44.5%
Therapies due to medical, behavioral, or other health condition (Q65)	124	89.5%
Condition lasted or expected to last at least 12 months (Q66)	108	98.1%
Treatment or counseling for emotional or development problems		
Child has emotional, developmental, or behavioral requiring treatment or counseling (Q67)	281	54.8%
Problem lasted or expected to last at least 12 months (Q68)	153	100.0%

Columns may not sum to 100% due to rounding

Children with Chronic Conditions are identified as part of the CCC sample when answering "yes" to all questions within a health consequence section. Each section is mutually exclusive; therefore, a respondent can be included in the CCC sample based on multiple sections. **Figure 4** shows the number of beneficiaries with the number of consequences. As shown in this figure, 37.1% of the CCC sample were identified as having a child with chronic conditions because they responded affirmatively to all questions in only one health-consequences section. 62.9% of the CCC sample answered "yes" to all questions for two or more health consequence sections.

FIGURE 4.

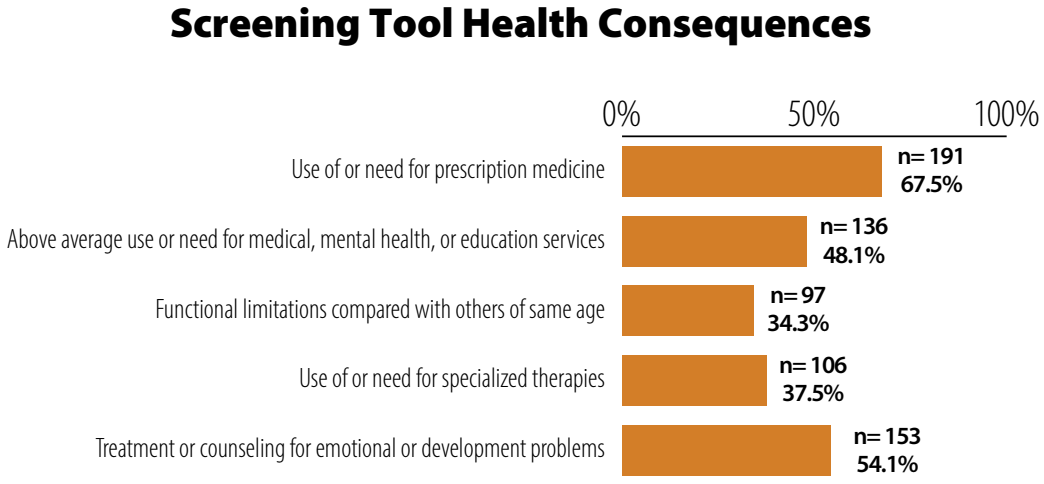


**Percentages may not sum to 100% due to rounding*

Figure 5 shows the number of respondents identified in the CCC sample during analysis. Each consequence screening section is mutually exclusive; therefore, a respondent can be included in multiple sections. This will cause the percentages in this figure to be independent of one another and not add up to 100.0%. Each percentage shows the number of beneficiaries who answered "yes" to all questions in the section, divided by the total number of beneficiaries in the CCC sample (283 beneficiaries).

According to Figure 5, the "use of or need for prescription medicine" and "treatment or counseling for emotional or development problems" health consequence sections had the highest numbers of respondents who answered "yes" to all questions within the sections (191 and 153, respectively). "Functional limitations compared to others of same age" had the lowest number of beneficiaries who answered "yes" to all section questions, with only 34.3% of the CCC sample included because of this section.

FIGURE 5.



CHILDREN WITH CHRONIC CONDITIONS SPECIFIC COMPOSITES

The CCC sample has a set of composites, components, and individual items specific to this group of beneficiaries. **Table 9** displays each CCC composite measure, the questions that comprise these composites, and the individual items for children identified with chronic conditions who responded "always" or "usually." Following NCBD reporting, summary rates are included only for CCC components, not CCC composites.

As seen in **Table 9**, the "getting special medical equipment or devices" component had the highest summary rate (87.5%) within the "access to specialized services" composite. All components of the "family-centered care: personal doctor who knows child" composite had a summary rate of 86.9% or greater. The "doctors answered questions you had" component within the "family-centered care: getting needed information" composite had the highest summary rate of 94.4% among all component questions. The "doctors contacting your child's school or daycare" component within the "coordination of care for children with chronic conditions" composite had a summary rate of 87.2%. The "help getting special medical equipment or devices" individual item had a high summary rate of 87.5%, followed by the "help getting treatment or counseling" individual item with a summary rate of 73.4%.

TABLE 9. CCC COMPOSITES AND SUMMARY RATES

COMPOSITES/COMPONENTS AND INDIVIDUAL ITEMS	CHILDREN WITH CHRONIC CONDITIONS	
	VALID n	SUMMARY RATE
Access to specialized services		
Getting special medical equipment or devices (Q15)	16	87.5%
Getting therapy (Q18)	107	80.4%
Getting treatment or counseling (Q21)	109	74.3%
Access to prescription medicines		
Getting prescription medicine (Q51)	218	92.2%
Family centered care: personal doctor who knows child		
Doctors talking about child's feelings, growth, or behavior (Q33)	221	86.9%
Doctors understanding how your child's condition affects your child's life (Q38)	180	92.8%
Doctors understanding how your child's condition affects your family's life (Q39)	181	89.5%
Family centered care: getting needed information		
Doctors answering questions you had (Q8)	214	94.4%
Coordination of care for children with chronic conditions		
Doctors contacting your child's school or daycare (Q13)	39	87.2%
Doctors or staff coordinating child's care among other providers (Q24)	122	70.5%
Individual items		
Help getting special medical equipment or devices (Q16)	16	87.5%
Help getting therapy (Q19)	107	68.2%
Help getting treatment or counseling (Q22)	109	73.4%
Help getting prescription medicine (Q52)	216	66.2%

Columns may not sum to 100% due to rounding

Trend Analysis

The following pages present tables and figures illustrating changes in survey results over time. Specifically, **Table 10** and **Figure 6** display each composite measure, the individual items comprising those composites, the rating questions, and the summary measure, with comparisons between the current year (2026) and the prior year (2025). Although the trending figure shows a visual representation of the trends, significance testing is performed with the data on the trending tables, and highlighted results indicate whether any trend comparisons are significantly different. Composite questions are composed of component questions and, therefore, do not have valid n-values.

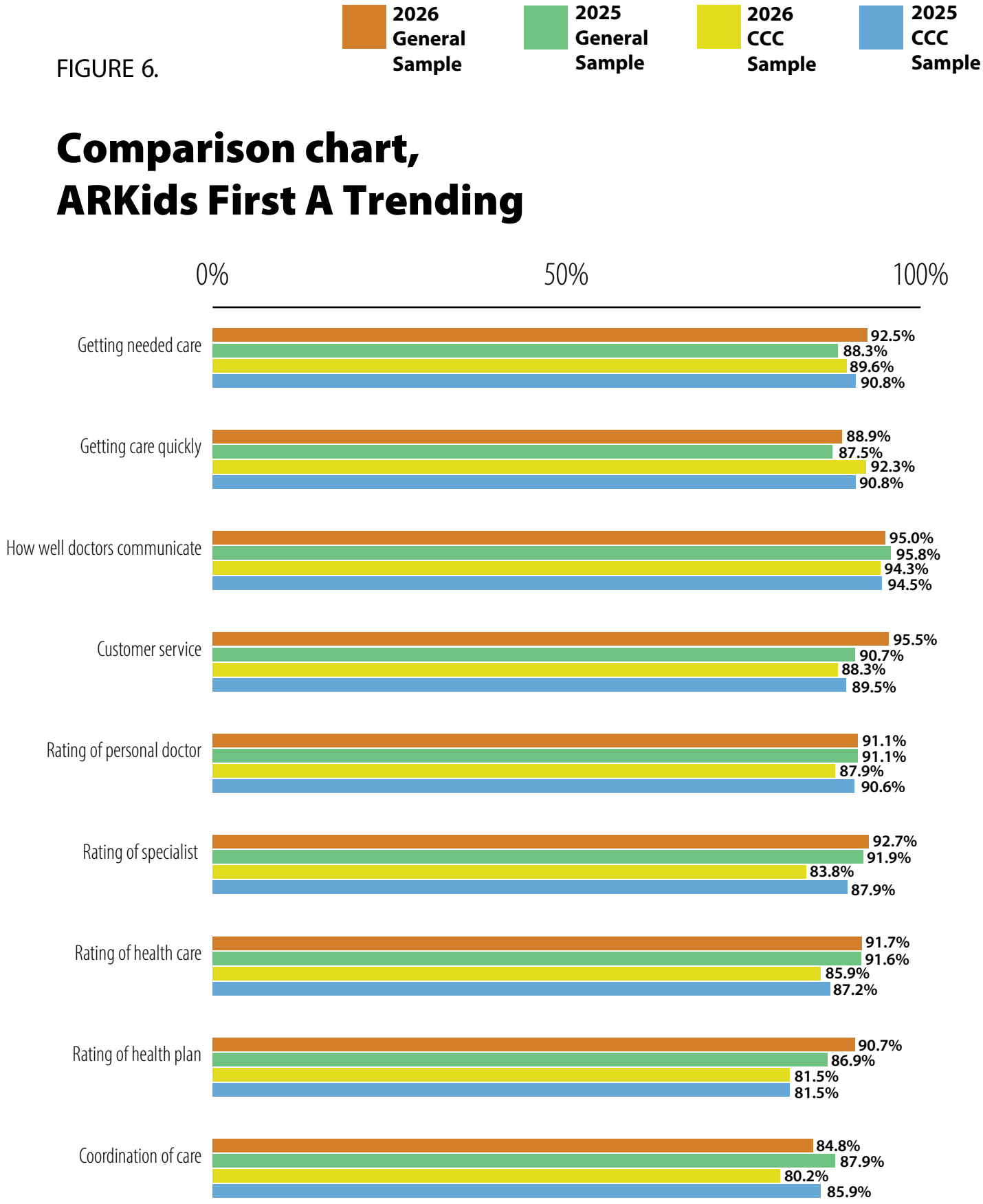
TABLE 10. ARKIDS FIRST A TRENDING TABLE

COMPOSITES/COMPONENTS AND RATING ITEMS	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITIONS		SIGNIFICANCE TESTING	
	2026	2025	2026	2025	GENERAL 2026 VS. GENERAL 2025	CCC 2026 VS. CCC 2025
Getting needed care	***92.5%***	***88.3%***	***89.6%***	***90.8%***	***Not Significant***	***Not Significant***
Q10. Getting care, tests, or treatment	96.9%	96.4%	94.8%	94.5%	Not Significant	Not Significant
Q41. Seeing a specialist	88.1%	80.3%	84.3%	87.0%	Not Significant	Not Significant
Getting care quickly	***88.9%***	***87.5%***	***92.3%***	***90.8%***	***Not Significant***	***Not Significant***
Q4. Obtaining care right away for an illness/injury/condition	93.2%	91.3%	94.6%	93.1%	Not Significant	Not Significant
Q6. Obtaining check-up or routine care appointment as soon as needed	84.5%	83.7%	90.0%	88.5%	Not Significant	Not Significant
How well doctors communicate	***95.0%***	***95.8%***	***94.3%***	***94.5%***	***Not Significant***	***Not Significant***
Q27. Doctors explaining things in an understandable way	94.0%	96.9%	95.5%	96.7%	Not Significant	Not Significant
Q28. Doctors listening carefully to you	97.8%	96.8%	96.0%	94.5%	Not Significant	Not Significant
Q29. Doctors showing respect for what you had to say	97.8%	98.4%	96.4%	95.6%	Not Significant	Not Significant
Q31. Doctors explaining things in an understandable way to your child	94.6%	95.4%	93.2%	94.2%	Not Significant	Not Significant
Q32. Doctors spending enough time with your child	90.9%	91.7%	90.5%	91.5%	Not Significant	Not Significant
Customer service	***95.5%***	***90.7%***	***88.3%***	***89.5%***	***Not Significant***	***Not Significant***
Q45. Getting help when calling customer service	90.9%	85.2%	82.4%	82.3%	Not Significant	Not Significant
Q46. Being treated with courtesy and respect	100.0%	96.3%	94.2%	96.8%	Not Significant	Not Significant
Rating items						
Rating of personal doctor (Q36)	91.1%	91.1%	87.9%	90.6%	Not Significant	Not Significant
Rating of specialist (Q43)	92.7%	91.9%	83.8%	87.9%	Not Significant	Not Significant
Rating of health care (Q9)	91.7%	91.6%	85.9%	87.2%	Not Significant	Not Significant
Rating of health plan (Q49)	90.7%	86.9%	81.5%	81.5%	Not Significant	Not Significant
Question summary rate						
Coordination of care (Q35)	84.8%	87.9%	80.2%	85.9%	Not Significant	Not Significant

Columns may not sum to 100% due to rounding

FIGURE 6.

Comparison chart, ARKids First A Trending



When the 2026 survey results were compared with those of the previous year (2025) for the general child sample, there were no significant differences across all composites, components, rating items, and the summary rate question. The summary rate for the "how well doctors communicate" composite was slightly lower for the 2026 beneficiaries of the general child sample (95.0%) than the 2025 sample (95.8%), along with all the corresponding components, except one. The 2026 general child sample had more favorable ratings of specialist (92.7%), health care (91.7%), and health plan (90.7%) than the 2025 general child sample ratings of specialist (91.9%), health care (91.6%), and health plan (86.9%).

When the 2026 survey results were compared with those of the previous year (2025) for the CCC sample, there were no significant differences across all composites, components, rating items, and the summary rate question. The summary rate for the "getting care quickly" composite was slightly higher for the 2026 beneficiaries of the CCC sample (92.3%) than for the 2025 sample (90.8%), along with all the corresponding components. The 2026 CCC sample had lower favorable ratings of personal doctor (87.9%), specialist (83.8%), and health care (85.9%) than the 2025 CCC sample ratings of personal doctor (90.6%), specialist (87.9%), and health care (87.2%).

Comparisons with Benchmark Data

The Consumer Assessment of Healthcare Providers and Systems Database (NCBD) includes the latest national and regional health plan data collected by numerous organizations.[4] The NCBD 2025 data displays composite measure, component, and rating item summary rates as percentages, with no decimal places. Therefore, in **Tables 11 and 12**, AFMC duplicated the same format when displaying NCBD and ARKids First A summary rates. **Table 11** shows how ARKids First A compares with the national rates for the general child sample and the children with chronic conditions sample. The national percentiles are shown in **Table 11** for comparison purposes only. **Table 12** displays the comparison of ARKids First A rates with the NCBD national rates for the children with chronic conditions composite measures.

All scores calculated by NCBD reflect only the most positive response; therefore, the ARKids First A composite and ratings were recalculated to reflect such. For the composite and summary questions, only the response choices "always" or "yes" were used; for the rating questions, only "9" and "10" were used.

When comparing the ARKids First A 2026 survey results for the general child sample with the 2025 NCBD national survey results in **Table 11**, AFMC found that ARKids First A satisfaction was significantly higher for the "getting needed care" composite and one corresponding component question. The "getting care quickly" composite and all component questions of this composite for the ARA general child sample were significantly higher than the 2025 NCBD national rate. For the "how well doctors communicate" composite, the "doctors spending enough time with your child" component question was significantly higher for the general child sample when compared with the 2025 NCBD national survey respondents of the general child population. The 2026 ARA general child sample satisfaction for the "customer service" composite and one corresponding component were significantly higher than the 2025 NCBD general child population result. The "rating of health care" and "rating of health plan" rating questions from the general sample ARKids First A 2026 survey results showed a significantly higher proportion of satisfaction than the general child sample 2025 NCBD national survey results.

The CCC sample from the ARKids First A 2026 survey results in **Table 11** had an insignificantly higher satisfaction proportion for two of the four composites — "getting needed care" and "getting care quickly." The component questions comprising these two composites were also higher than the 2025 national CCC proportions, though not significantly. None of the rating questions were significantly different, but all ratings were higher for the 2026 ARKids First A CCC sample than the 2025 NCBD national CCC sample.

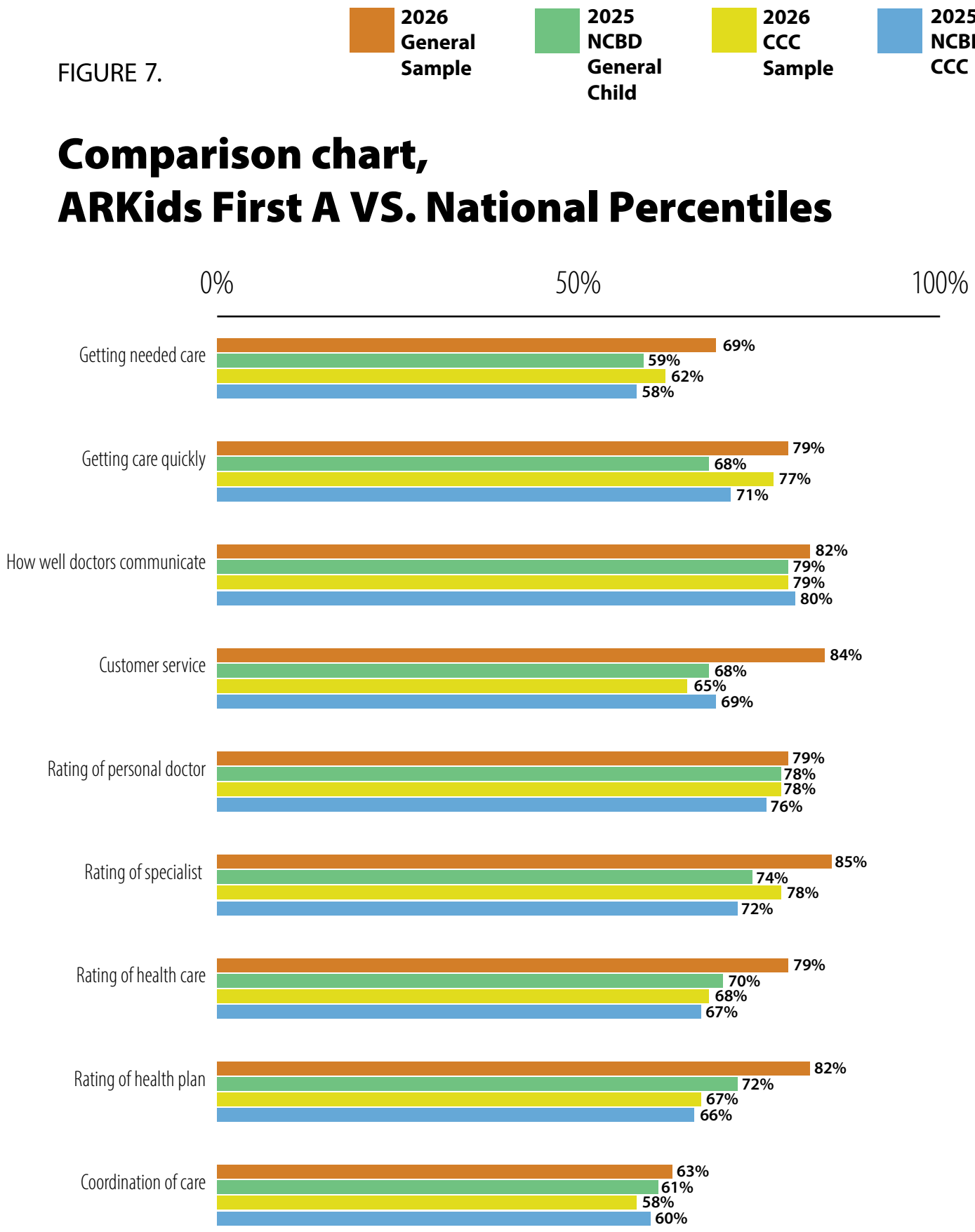
[4] Agency for Healthcare Research and Quality. "CAHPS Survey Data." Data Tools – AHRQ, accessed June 24, 2025. https://datatools.ahrq.gov/cahps/?type=tab&tab=cahpscarhps&_gl=1%2A38c8i0%2A_ga%2AOTg1MTQ4MDAzLjE3MQ.

TABLE 11. COMPARISON OF ARKIDS FIRST A WITH NATIONAL PERCENTILES

COMPOSITES/COMPONENTS AND RATING ITEMS	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITIONS		SIGNIFICANCE TESTING	
	2026	2025 NCBD NATIONAL RATE	2026	2025 NCBD NATIONAL RATE	GENERAL VS. NATIONAL	CCC VS. NATIONAL
Getting needed care	***69%***	***59%***	***62%***	***58%***	***Significantly Higher***	***Not Significant***
Q10. Getting care, tests, or treatment	78%	65%	66%	63%	Significantly Higher	Not Significant
Q41. Seeing a specialist	61%	53%	58%	54%	Not Significant	Not Significant
Getting care quickly	***79%***	***68%***	***77%***	***71%***	***Significantly Higher***	***Not Significant***
Q4. Obtaining care right away for an illness/injury/condition	88%	75%	83%	78%	Significantly Higher	Not Significant
Q6. Obtaining check-up or routine care appointment as soon as needed	70%	61%	70%	65%	Significantly Higher	Not Significant
How well doctors communicate	***82%***	***79%***	***79%***	***80%***	***Not Significant***	***Not Significant***
Q27. Doctors explaining things in an understandable way	83%	79%	78%	81%	Not Significant	Not Significant
Q28. Doctors listening carefully to you	86%	83%	82%	82%	Not Significant	Not Significant
Q29. Doctors showing respect for what you had to say	90%	87%	86%	87%	Not Significant	Not Significant
Q31. Doctors explaining things in an understandable way to your child	76%	77%	74%	76%	Not Significant	Not Significant
Q32. Doctors spending enough time with your child	73%	67%	73%	72%	Significantly Higher	Not Significant
Customer service	***84%***	***68%***	***65%***	***69%***	***Significantly Higher***	***Not Significant***
Q45. Getting help when calling customer service	77%	57%	59%	58%	Significantly Higher	Not Significant
Q46. Being treated with courtesy and respect	90%	78%	71%	81%	Not Significant	Not Significant
Rating items						
Rating of personal doctor (Q36)	79%	78%	78%	76%	Not Significant	Not Significant
Rating of specialist (Q43)	85%	74%	78%	72%	Not Significant	Not Significant
Rating of health care (Q9)	79%	70%	68%	67%	Significantly Higher	Not Significant
Rating of health plan (Q49)	82%	72%	67%	66%	Significantly Higher	Not Significant
Question summary rate						
Coordination of care (Q35)	63%	61%	58%	60%	Not Significant	Not Significant

FIGURE 7.

Comparison chart, ARKids First A VS. National Percentiles



In Table 12, when comparing the 2026 ARKids First A survey results of the CCC sample with the 2025 NCBD national survey results of the CCC sample for the CCC-specific composite measures, AFMC found the ARKids First A satisfaction was significantly higher for the "getting special medical equipment or devices" and "getting therapy" component questions from the "access to specialized services" composite. The ARKids First A CCC sample had higher satisfaction (73%) for the "getting prescription medicine" component of the "access to prescription medicines" composite than the 2025 NCBD national CCC sample (68%), though the difference was not significant. The "doctors or staff coordinating child's care among other providers" component of the "coordination of care for children with chronic conditions" composite was significantly higher than the national rates.

TABLE 12. CCC COMPOSITES COMPARISON OF ARKIDS FIRST A WITH NATIONAL PERCENTILES

CCC MEASURES COMPOSITES/COMPONENTS	CHILDREN WITH CHRONIC CONDITIONS		SIGNIFICANCE TESTING
	2026	2025 NCBD NATIONAL RATE	CCC VS. NATIONAL
Access to specialized services			
Getting special medical equipment or devices (Q15)	75%	50%	Significantly Higher
Getting therapy (Q18)	67%	50%	Significantly Higher
Getting treatment or counseling (Q21)	53%	49%	Not Significant
Access to prescription medicines			
Getting prescription medicine (Q51)	73%	68%	Not Significant
Family centered care: personal doctor who knows child			
Doctors talking about child's feelings, growth, or behavior (Q33)	87%	90%	Not Significant
Doctors understanding how your child's condition affects your child's life (Q38)	93%	94%	Not Significant
Doctors understanding how your child's condition affects your family's life (Q39)	90%	90%	Not Significant
Family centered care: getting needed information			
Doctors answering questions you had (Q8)	78%	74%	Not Significant
Coordination of care for children with chronic conditions			
Doctors contacting your child's school or daycare (Q13)	87%	91%	Not Significant
Doctors or staff coordinating child's care among other providers (Q24)	70%	61%	Significantly Higher

Columns may not sum to 100% due to rounding

Demographic Analysis

The end of each survey contains questions regarding the beneficiary's demographics. The following demographic tables show how parents/caregivers of the general population and parents/caregivers of children with chronic conditions responded to the four composite questions, the four rating questions, and the summary rate question. The demographic analysis was performed on age, parent/caregiver's education, gender, race, beneficiary's health status, and beneficiary's mental health status. Some categories have a small number of respondents (<30); caution should be exercised when drawing conclusions from small numbers. Composite questions are composed of component questions and, therefore, do not have valid n-values. Due to rounding, some range values may not be exact differences.

TABLE 13A. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY AGE CATEGORY - GENERAL CHILD

	GENERAL CHILD								
CHILD'S AGE	0–3		4–7		8–11		12–18		
COMPOSITES AND RATINGS	n	%	n	%	n	%	n	%	RANGE
Getting needed care		91.7%		78.4%		96.7%		93.1%	18.3%
Getting care quickly		88.7%		96.2%		88.1%		85.8%	10.3%
How well doctors communicate		92.7%		96.4%		92.3%		95.4%	4.1%
Customer service		100.0%		100.0%		95.0%		91.7%	8.3%
Rating of personal doctor	77	92.2%	47	93.6%	68	88.2%	118	90.7%	5.4%
Rating of specialist	12	91.7%	5	100.0%	9	100.0%	25	88.0%	12.0%
Rating of health care	61	91.8%	31	87.1%	45	91.1%	85	92.9%	5.8%
Rating of health plan	90	94.4%	60	93.3%	81	90.1%	144	87.5%	6.9%
Coordination of care	25	84.0%	10	90.0%	19	68.4%	21	95.2%	26.8%

TABLE 13B. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY AGE CATEGORY - CHILDREN WITH CHRONIC CONDITIONS

	CHILDREN WITH CHRONIC CONDITIONS								
CHILD'S AGE	0–3		4–7		8–11		12–18		
COMPOSITES AND RATINGS	n	%	n	%	n	%	n	%	RANGE
Getting needed care		86.8%		87.6%		89.9%		90.9%	4.2%
Getting care quickly		92.7%		95.5%		90.0%		91.2%	5.4%
How well doctors communicate		90.0%		94.0%		94.7%		95.8%	5.8%
Customer service		80.0%		88.9%		87.5%		93.8%	13.8%
Rating of personal doctor	27	88.9%	65	86.2%	59	88.1%	112	88.4%	2.7%
Rating of specialist	14	71.4%	25	92.0%	29	86.2%	48	81.3%	20.6%
Rating of health care	20	95.0%	54	83.3%	47	89.4%	91	83.5%	11.7%
Rating of health plan	29	79.3%	69	87.0%	63	79.4%	114	79.8%	7.6%
Coordination of care	16	75.0%	30	93.3%	28	71.4%	51	78.4%	21.9%

The "how well doctors communicate" composite question for the general child sample had the smallest range among the composite questions of 4.1 percentage points between age categories in Table 13A. The smallest range of 5.4 percentage points across rating questions by age category occurs in "rating of personal doctor," followed by "rating of health care" at 5.8 percentage points. The largest difference of 26.8 percentage points in responses by age category was in "coordination of care," with a high of 95.2% in the "12–18" age category compared to 68.4% in the "8–11" age category. Note the small numbers in some categories where caution should be applied to any conclusions drawn from such data.

In Table 13B, the CCC sample composite "customer service" showed the largest range among composite questions, at 13.8 percentage points, between the "12–18" (93.8%) and "0–3" (80.0%) age categories. The largest range across age categories among the rating questions occurred in "rating of specialist" at 20.6 percentage points. The "rating of personal doctor" question had the smallest difference among all composites and rating questions, at 2.7 percentage points. Note the small numbers in some categories where caution should be applied to any conclusions drawn from such data.

TABLE 14A. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY PARENT/CAREGIVER'S EDUCATION - GENERAL CHILD

	GENERAL CHILD				
PARENT'S EDUCATION	HIGH SCHOOL GRADUATE OR LESS		SOME COLLEGE OR MORE		
COMPOSITES AND RATINGS	n	%	n	%	RANGE
Getting needed care		91.3%		94.6%	3.2%
Getting care quickly		85.5%		93.9%	8.4%
How well doctors communicate		94.0%		96.8%	2.8%
Customer service		97.7%		91.7%	6.1%
Rating of personal doctor	166	89.8%	137	92.7%	2.9%
Rating of specialist	30	86.7%	23	100.0%	13.3%
Rating of health care	116	92.2%	104	93.3%	1.0%
Rating of health plan	210	91.0%	156	90.4%	0.6%
Coordination of care	41	78.0%	33	90.9%	12.9%

TABLE 14B. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY PARENT/CAREGIVER'S EDUCATION - CHILDREN WITH CHRONIC CONDITIONS

	CHILDREN WITH CHRONIC CONDITIONS				
PARENT'S EDUCATION	HIGH SCHOOL GRADUATE OR LESS		SOME COLLEGE OR MORE		
COMPOSITES AND RATINGS	n	%	n	%	RANGE
Getting needed care		92.1%		88.1%	4.0%
Getting care quickly		90.2%		93.2%	3.0%
How well doctors communicate		91.9%		95.2%	3.3%
Customer service		94.9%		83.9%	11.0%
Rating of personal doctor	97	86.6%	150	88.0%	1.4%
Rating of specialist	36	91.7%	74	78.4%	13.3%
Rating of health care	75	90.7%	128	82.8%	7.9%
Rating of health plan	107	87.9%	152	78.3%	9.6%
Coordination of care	41	85.4%	77	76.6%	8.7%

In Table 14A, a very small range value of 0.6 percentage points for the general child sample is found among the "rating of health plan" rating question. The "getting care quickly" composite question had the largest range among all composites of 8.4 percentage points between parents/caregivers' education level, but the "how well doctors communicate" composite's range of 2.8 percentage points was the smallest range among composite questions. The largest difference among rating questions in responses by parents/caregivers' education level was "rating of specialist," with a range of 13.3 percentage points. All rating questions in the "high school graduate or less" education category, except for "rating of health plan," had lower scores than those in the "some college or more" education category. The "coordination of care" summary question had a large range of 12.9 percentage points, with a low positive measure (78.0%) for the "high school graduate or less" education category and a high positive measure (90.9%) for the "some college or more" education category.

The CCC sample composite with the smallest range in Table 14B is "getting care quickly," at 3.0 percentage points, followed by the "how well doctors communicate" composite at 3.3 percentage points and "getting needed care" at 4.0 percentage points. The "customer service" composite range of 11.0 percentage points was the largest composite range among the parents/caregivers' education levels. Only one of the four rating questions showed a difference of less than 2.0 percentage points, with that smallest range being 1.4 percentage points for the "rating personal doctor" question. The largest range among all composites and rating questions was the "rating of specialist" question, with a range of 13.3 percentage points, followed by the "rating of health plan" question, with a range of 9.6 percentage points.

TABLE 15A. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY CHILD'S GENDER - GENERAL CHILD

	GENERAL CHILD				
CHILD'S GENDER	MALE		FEMALE		
COMPOSITES AND RATINGS	n	%	n	%	RANGE
Getting needed care		94.6%		88.0%	6.6%
Getting care quickly		86.2%		92.1%	5.8%
How well doctors communicate		94.8%		95.1%	0.4%
Customer service		94.4%		95.7%	1.2%
Rating of personal doctor	168	91.7%	142	90.1%	1.5%
Rating of specialist	35	91.4%	17	94.1%	2.7%
Rating of health care	122	94.3%	100	88.0%	6.3%
Rating of health plan	203	89.7%	169	91.7%	2.1%
Coordination of care	47	85.1%	29	86.2%	1.1%

TABLE 15B. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY CHILD'S GENDER - CHILDREN WITH CHRONIC CONDITIONS					
	CHILDREN WITH CHRONIC CONDITIONS				
CHILD'S GENDER	MALE		FEMALE		
COMPOSITES AND RATINGS	n	%	n	%	RANGE
Getting needed care		90.0%		89.0%	1.1%
Getting care quickly		90.3%		94.6%	4.3%
How well doctors communicate		95.2%		93.1%	2.0%
Customer service		83.5%		97.2%	13.8%
Rating of personal doctor	148	87.2%	115	88.7%	1.5%
Rating of specialist	60	85.0%	56	82.1%	2.9%
Rating of health care	124	85.5%	89	86.5%	1.0%
Rating of health plan	157	84.1%	118	78.0%	6.1%
Coordination of care	69	84.1%	57	75.4%	8.6%

When evaluating survey results by gender for the general child sample in Table 15A, the greatest range among composite questions occurred in the "getting needed care" composite, with a difference of 6.6 percentage points between the "male" (94.6%) and "female" (88.0%) gender categories. The "how well doctors communicate" composite had the smallest range of 0.4 percentage points, for all composites and rating questions, with a high positive measure among "female" beneficiaries (95.1%) and a lower positive measure among "male" beneficiaries (94.8%). The largest range among rating questions, 6.3 percentage points, occurs in "rating of health care," with a low positive measure in the "female" gender category (88.0%) and a higher positive measure in the "male" gender category (94.3%). Note the small numbers in some categories where caution should be applied to any conclusions drawn from such data.

In Table 15B, the CCC sample results, by gender, had the largest range of 13.8 percentage points in the "customer service" composite among all composites and rating questions, with the high positive measure in the "female" category (97.2%) and a low positive measure in the "male" category (83.5%). The smallest composite range of 1.1 percentage points was in the "getting needed care" composite. "Rating of health plan" had the largest range of 6.1 percentage points among all rating questions, with a low positive measure in the "female" gender category (78.0%) and a higher positive measure in the "male" gender category (84.1%). The second-largest range of 8.6 percentage points across all composites, rating questions, and the summary question occurs in "coordination of care," with a high positive measure in the "male" category (84.1%) and a low positive measure in the "female" category (75.4%).

TABLE 16A. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY CHILD'S RACE - GENERAL CHILD

	GENERAL CHILD						
CHILD'S RACE	WHITE		BLACK OR AFRICAN AMERICAN		OTHER		
COMPOSITES AND RATINGS	n	%	n	%	n	%	RANGE
Getting needed care		94.5%		87.5%		89.7%	7.0%
Getting care quickly		92.2%		96.6%		78.0%	18.5%
How well doctors communicate		95.4%		98.3%		92.7%	5.6%
Customer service		92.1%		100.0%		95.5%	7.9%
Rating of personal doctor	206	91.7%	34	91.2%	62	88.7%	3.0%
Rating of specialist	34	91.2%	7	100.0%	11	90.9%	9.1%
Rating of health care	143	93.0%	32	90.6%	41	92.7%	2.4%
Rating of health plan	229	91.3%	48	83.3%	83	94.0%	10.6%
Coordination of care	52	86.5%	6	100.0%	16	68.8%	31.3%

TABLE 16B. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY CHILD'S RACE - CHILDREN WITH CHRONIC CONDITIONS

	CHILDREN WITH CHRONIC CONDITIONS						
CHILD'S RACE	WHITE		BLACK OR AFRICAN AMERICAN		OTHER		
COMPOSITES AND RATINGS	n	%	n	%	n	%	RANGE
Getting needed care		88.9%		90.5%		86.4%	4.1%
Getting care quickly		92.1%		91.4%		91.4%	0.8%
How well doctors communicate		94.5%		93.2%		92.3%	2.2%
Customer service		92.1%		86.1%		75.0%	17.1%
Rating of personal doctor	165	87.3%	52	90.4%	31	83.9%	6.5%
Rating of specialist	79	78.5%	21	95.2%	11	90.9%	16.8%
Rating of health care	140	86.4%	37	86.5%	27	81.5%	5.0%
Rating of health plan	171	83.0%	53	81.1%	36	77.8%	5.3%
Coordination of care	85	80.0%	18	77.8%	16	81.3%	3.5%

The largest composite difference in responses by child's race from the general child sample in Table 16A was in the "getting care quickly" composite at 18.5 percentage points. The smallest range of 2.4 percentage points occurred in the "rating of health care" question, with the highest positive measure in the "White" race category (93.0%) and a lower positive measure in the "Black or African American" race category (90.6%). Those identifying as "White" and "Black or African American" provided a positive measure of over 82.0% for all composites, rating questions, and the summary question. The "coordination of care" summary question had the largest range at 31.3 percentage points among all questions in this table. In the "rating of specialist" rating question and "coordination of care" summary question, only a small number of respondents (n<20) indicated that their child's race was "Black or African American" or "Other," and caution should be exercised when making conclusions based on small numbers.

In Table 16B, the CCC "customer service" sample composite had the largest range by race of 17.1 percentage points, with a low positive measure from those identifying as "Other" (75.0%) and a high positive measure from those identifying as "White" (92.1%). The smallest range across race categories occurs in "getting care quickly" at 0.8 percentage points, with positive measures being 91.4% or higher across all race categories. Those identifying as "White," "Black or African American," and "Other" provided a positive measure of 75.0% or higher for all composites, rating questions, and the summary question. In one rating question and the "coordination of care" summary question, only a small number of respondents (n<20) indicated that their child's race was "Black or African American" or "Other," and caution should be exercised when making conclusions based on small numbers.

TABLE 17A. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY CHILD'S OVERALL HEALTH STATUS - GENERAL CHILD

	GENERAL CHILD						
CHILD'S OVERALL HEALTH STATUS	EXCELLENT/VERY GOOD		GOOD		FAIR/POOR		
COMPOSITES AND RATINGS	n	%	n	%	n	%	RANGE
Getting needed care		91.5%		92.8%		100.0%	8.5%
Getting care quickly		90.5%		83.9%		0.0%	90.5%
How well doctors communicate		96.2%		89.1%		86.7%	9.5%
Customer service		95.6%		90.0%		100.0%	10.0%
Rating of personal doctor	268	93.3%	37	78.4%	3	66.7%	26.6%
Rating of specialist	39	97.4%	11	72.7%	2	100.0%	27.3%
Rating of health care	185	92.4%	33	87.9%	4	75.0%	17.4%
Rating of health plan	318	93.1%	50	82.0%	5	20.0%	73.1%
Coordination of care	65	87.7%	7	71.4%	2	50.0%	37.7%

TABLE 17B. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY CHILD'S OVERALL HEALTH STATUS - CHILDREN WITH CHRONIC CONDITIONS

	CHILDREN WITH CHRONIC CONDITIONS						
CHILD'S OVERALL HEALTH STATUS	EXCELLENT/VERY GOOD		GOOD		FAIR/POOR		
COMPOSITES AND RATINGS	n	%	n	%	n	%	RANGE
Getting needed care		91.7%		91.3%		66.6%	25.1%
Getting care quickly		95.7%		88.9%		78.4%	17.3%
How well doctors communicate		96.4%		91.6%		82.9%	13.6%
Customer service		85.1%		96.9%		80.0%	16.9%
Rating of personal doctor	174	90.2%	70	85.7%	18	72.2%	18.0%
Rating of specialist	68	91.2%	38	76.3%	11	63.6%	27.5%
Rating of health care	141	90.8%	57	78.9%	14	64.3%	26.5%
Rating of health plan	183	84.7%	75	74.7%	17	76.5%	10.0%
Coordination of care	79	84.8%	38	76.3%	9	55.6%	29.3%

As seen in Table 17A, the general child sample respondents who perceive their child's overall health status as "excellent/very good" constitute the largest group, with n values provided. Those who perceive their child's overall health status as "fair/poor" have exceptionally small n values. Thus, a comparison between health status categories should be viewed with caution. The "getting needed care" and "customer service" composites had the highest positive measures across all health status categories, at 90.0% or higher, compared with the other composites. The largest range overall of 90.5 percentage points occurs in the "getting care quickly" composite, with a low positive measure for those who perceive their child's overall health status as "fair/poor" (0.0%) and a high positive measure for those who perceive their child's overall health status as "excellent/very good" (90.5%). The smallest range of 8.5 percentage points in responses by child's overall health status was in "getting needed care," with the highest measure in the "fair/poor" overall health category (100.0%) and the lowest measure in the "excellent/very good" overall health category (91.5%).

The largest difference in responses from the CCC sample, in Table 17B, by child's overall health status was in the "coordination of care" summary question at 29.3 percentage points, with a high positive measure (84.8%) from those who perceive their child's overall health status as "excellent/very good" and a low positive measure (55.6%) from those who perceive their child's overall health status as "fair/poor." The smallest overall range of 10.0 percentage points is from the "rating of health plan" question, with positive measures for each health status of over 74%. The composite with the largest difference of 25.1 percentage points occurs in the "getting needed care," with the lower positive measure from the "fair/poor" health status category (66.6%) and the higher positive measure from the "excellent/very good" health status category (91.7%). The largest range among the rating questions of 27.5 percentage points occurs in the "rating of specialist" question. Only a small number of respondents (n<20) indicated that their child's overall health status was "fair/poor," and caution should be exercised when making conclusions based on small numbers.

TABLE 18A. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY CHILD'S OVERALL MENTAL HEALTH STATUS - GENERAL CHILD

	GENERAL CHILD						
CHILD'S OVERALL MENTAL HEALTH STATUS	EXCELLENT/VERY GOOD		GOOD		FAIR/POOR		
COMPOSITES AND RATINGS	n	%	n	%	n	%	RANGE
Getting needed care		91.7%		92.1%		100.0%	8.3%
Getting care quickly		89.4%		87.5%		41.7%	47.7%
How well doctors communicate		95.2%		92.2%		93.3%	3.0%
Customer service		95.5%		91.7%		100.0%	8.3%
Rating of personal doctor	265	93.2%	32	78.1%	8	75.0%	18.2%
Rating of specialist	41	95.1%	8	87.5%	2	100.0%	12.5%
Rating of health care	187	93.0%	31	87.1%	4	75.0%	18.0%
Rating of health plan	310	93.9%	49	75.5%	9	77.8%	18.4%
Coordination of care	67	88.1%	7	57.1%	2	50.0%	38.1%

TABLE 18B. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY CHILD'S OVERALL MENTAL HEALTH STATUS - CHILDREN WITH CHRONIC CONDITIONS

	CHILDREN WITH CHRONIC CONDITIONS						
CHILD'S OVERALL MENTAL HEALTH STATUS	EXCELLENT/VERY GOOD		GOOD		FAIR/POOR		
COMPOSITES AND RATINGS	n	%	n	%	n	%	RANGE
Getting needed care		90.6%		92.5%		82.5%	10.0%
Getting care quickly		92.8%		93.7%		88.9%	4.7%
How well doctors communicate		95.6%		95.9%		88.5%	7.4%
Customer service		98.0%		73.3%		86.4%	24.7%
Rating of personal doctor	135	92.6%	75	88.0%	53	75.5%	17.1%
Rating of specialist	62	87.1%	32	87.5%	23	69.6%	17.9%
Rating of health care	113	90.3%	60	86.7%	40	72.5%	17.8%
Rating of health plan	145	84.1%	77	85.7%	54	68.5%	17.2%
Coordination of care	67	83.6%	39	84.6%	20	60.0%	24.6%

In Table 18A, all ranges from the general sample for children's overall mental health were high, with ranges greater than 12.0 percentage points, except for the "getting needed care," "how well doctors communicate," and "customer service" composites. The largest difference between mental health status categories occurs in the "getting care quickly" composite, with a range of 47.7 percentage points between the "excellent/very good" (89.4%) and "fair/poor" (41.7%) categories. This is followed by a range of 38.1 percentage points in the "coordination of care" summary question, with a high positive measure (88.1%) and a low positive measure (50.0%), from the "excellent/very good" and "fair/poor" mental health status categories, respectively. The smallest range of 3.0 percentage points is from the "how well doctors communicate" composite, with a high positive measure from those who perceive their child's mental health as "excellent/very good" (95.2%) and a low positive measure from those who perceive their child's mental health as "good" (92.2%). For several questions, only a small number of respondents (n<20) indicated that their child's overall mental health status was "fair/poor" or "good," and caution should be exercised when making conclusions based on small numbers.

As shown in Table 18B, the smallest range of 4.7 percentage points is observed in the "getting care quickly" composite, with the positive measures exceeding 88.0% across all mental health status categories. The largest range from the CCC sample results is 24.7 percentage points from the "customer service" composite, with a low positive measure from those who perceive their child's mental health status as "good" (73.3%) and a high positive measure from those who perceive their child's mental health status as "excellent/very good" (98.0%). The second-largest range, 24.6 percentage points, is found in the "coordination of care" summary question, followed by 17.9 percentage points for the "rating of specialist" question. It is worth noting that those who perceived their child's mental health status as "fair/poor" did not have positive measures over 88.9% for any composite, rating, or summary question.

State and Regional Analysis

Overall mean ratings and utilization of services are further reported by geographic regions of the state. The map below shows the five regions and the counties that comprise them.

GEOGRAPHICAL REGIONS:

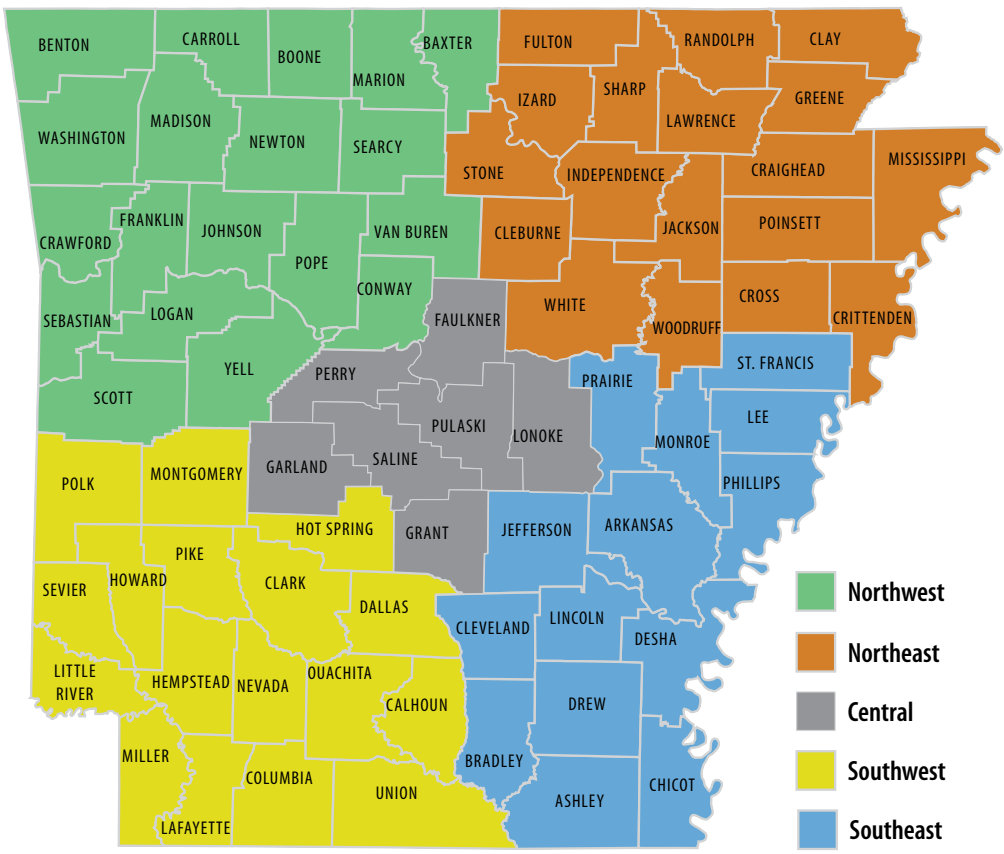
Northwest: Baxter, Benton, Boone, Carroll, Conway, Crawford, Franklin, Johnson, Logan, Madison, Marion, Newton, Pope, Scott, Searcy, Sebastian, Van Buren, Washington, and Yell counties

Northeast: Clay, Cleburne, Craighead, Crittenden, Cross, Fulton, Greene, Independence, Izard, Jackson, Lawrence, Mississippi, Poinsett, Randolph, Sharp, Stone, White, and Woodruff counties

Central: Faulkner, Garland, Grant, Lonoke, Perry, Pulaski, and Saline counties

Southwest: Calhoun, Clark, Columbia, Dallas, Hempstead, Hot Spring, Howard, Lafayette, Little River, Miller, Montgomery, Nevada, Ouachita, Pike, Polk, Sevier, and Union counties

Southeast: Arkansas, Ashley, Bradley, Chicot, Cleveland, Desha, Drew, Jefferson, Lee, Lincoln, Monroe, Phillips, Prairie, and St. Francis counties



OVERALL MEAN RATINGS

The overall mean ratings are based on individual questions that ask beneficiaries to rate their personal doctor, specialist, health care, and health plan on a scale of 0–10, where 0 represents the "worst possible" rating and 10 represents the "best possible" rating. Tables 19A and 19B display the mean ratings by region compared with the statewide mean and the number of beneficiaries who responded to the question. Some regions have a small number of responses. Caution should be applied when interpreting results.

TABLE 19A. MEAN RATINGS - GENERAL CHILD

MEAN RATINGS	CENTRAL		NORTHWEST		NORTHEAST		SOUTHWEST		SOUTHEAST		STATEWIDE	
	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN
Rating of personal doctor (Q36)	60	9.4	113	9.2	77	9.2	47	9.1	19	9.5	316	9.3
Rating of specialist (Q43)	17	9.4	13	9.1	7	9.0	14	9.4	4	10.0	55	9.3
Rating of health care (Q9)	46	9.3	80	9.1	45	9.3	38	9.2	20	9.6	229	9.3
Rating of health plan (Q49)	71	9.2	142	9.2	82	9.5	55	9.3	27	9.2	377	9.3

TABLE 19B. MEAN RATINGS - CHILDREN WITH CHRONIC CONDITIONS

MEAN RATINGS	CENTRAL		NORTHWEST		NORTHEAST		SOUTHWEST		SOUTHEAST		STATEWIDE	
	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN
Rating of personal doctor (Q36)	72	9.2	101	9.0	56	9.1	22	8.8	13	8.5	264	9.0
Rating of specialist (Q43)	31	8.9	45	9.1	25	8.7	12	8.2	4	10.0	117	8.9
Rating of health care (Q9)	64	8.8	81	8.9	43	8.9	19	8.6	6	9.5	213	8.9
Rating of health plan (Q49)	79	9.0	103	8.7	58	8.3	22	8.0	14	8.4	276	8.6

In Table 19A, the "rating of specialist" question shows a small number of general child respondents, so caution should be used when interpreting results. The highest mean rating of 10.0 was for "rating of specialist" from the Southeast region. This is followed by a high mean rating of 9.6 found for the "rating of health care" question for the Southeast region. Statewide, all general child respondents had a mean rating of 9.3 or higher for all four rating questions.

The CCC respondents in Table 19B had a rating of 8.6 or higher across all regions for the "rating of health care" question. The highest mean rating of 10.0 occurred for "rating of specialist" for the Southeast region. This region has a small number of respondents for the "rating of specialist" question, so caution should be used when interpreting these results. The Central region had high ratings for the four rating questions, with mean ratings all being at or above 8.8. The smallest statewide mean rating is found for the "rating of health plan" rating question, with a mean rating of 8.6.

UTILIZATION OF SERVICES

The ARKids First A questionnaire contained several questions about whether beneficiaries used various health care services in the last six months. **Tables 20A and 20B** present the number and percentage of respondents who responded to the utilization questions.

TABLE 20A. UTILIZATION OF SERVICES - GENERAL CHILD

UTILIZATION OF SERVICES	CENTRAL		NORTHWEST		NORTHEAST		SOUTHWEST		SOUTHEAST		STATEWIDE	
	n	%	n	%	n	%	n	%	n	%	n	%
Q7. Visiting a doctor at least once, in person, by phone, or by video	71	64.8%	139	58.3%	83	55.4%	56	67.9%	28	71.4%	377	61.3%
Q7. Having three or more visits to a doctor in person, by phone, or by video	71	16.9%	139	18.7%	83	28.9%	56	32.1%	28	32.1%	377	23.6%
Q5. Seeking routine medical care	73	58.9%	143	67.1%	85	56.5%	56	64.3%	28	60.7%	385	62.3%
Q3. Seeking medical care for illness/injury	73	38.4%	144	31.9%	86	26.7%	56	32.1%	27	29.6%	386	31.9%
Q40. Visiting a specialist	72	25.0%	142	9.2%	88	8.0%	56	30.4%	28	14.3%	386	15.3%
Q26. Visiting personal doctor at least once, in person, by phone, or by video	59	78.0%	116	75.0%	74	60.8%	48	83.3%	19	78.9%	316	73.7%
Q26. Having three or more visits to a personal doctor, in person, by phone, or by video	59	15.3%	116	25.0%	74	24.3%	48	35.4%	19	26.3%	316	24.7%
Q14. Seeking special medical equipment or devices	73	2.7%	141	0.7%	88	1.1%	52	5.8%	28	7.1%	382	2.4%
Q17. Seeking special therapy*	72	22.2%	141	14.2%	88	10.2%	55	16.4%	28	10.7%	384	14.8%
Q20. Seeking treatment or counseling	69	10.1%	140	5.0%	87	5.7%	54	1.9%	28	10.7%	378	6.1%
Q50. Getting prescription medication	71	38.0%	143	35.7%	87	40.2%	56	51.8%	27	44.4%	384	40.1%
Q44. Getting information or help from customer service	73	12.3%	142	8.5%	87	14.9%	53	20.8%	28	10.7%	383	12.5%

** Special therapies include speech therapy, occupational therapy, and physical therapy.*

TABLE 20B. UTILIZATION OF SERVICES - CHILDREN WITH CHRONIC CONDITIONS

UTILIZATION OF SERVICES	CENTRAL		NORTHWEST		NORTHEAST		SOUTHWEST		SOUTHEAST		STATEWIDE	
	n	%	n	%	n	%	n	%	n	%	n	%
Q7. Visiting a doctor at least once, in person, by phone, or by video	80	80.0%	104	78.8%	57	77.2%	21	90.5%	14	42.9%	276	77.9%
Q7. Having three or more visits to a doctor in person, by phone, or by video	80	43.8%	104	49.0%	57	38.6%	21	52.4%	14	14.3%	276	43.8%
Q5. Seeking routine medical care	80	85.0%	105	79.0%	59	81.4%	21	76.2%	14	71.4%	279	80.6%
Q3. Seeking medical care for illness/injury	81	34.6%	106	43.4%	59	42.4%	22	54.5%	14	28.6%	282	40.8%
Q40. Visiting a specialist	80	45.0%	106	43.4%	59	44.1%	22	54.5%	13	30.8%	280	44.3%
Q26. Visiting personal doctor at least once, in person, by phone, or by video	72	81.9%	98	83.7%	56	94.6%	22	86.4%	13	76.9%	261	85.4%
Q26. Having three or more visits to a personal doctor, in person, by phone, or by video	72	25.0%	98	36.7%	56	39.3%	22	40.9%	13	15.4%	261	33.3%
Q14. Seeking special medical equipment or devices	80	8.8%	104	4.8%	58	5.2%	22	4.5%	14	0.0%	278	5.8%
*Q17. Seeking special therapy**	81	46.9%	104	36.5%	59	37.3%	22	27.3%	14	35.7%	280	38.9%
Q20. Seeking treatment or counseling	80	48.8%	105	33.3%	58	46.6%	21	33.3%	14	14.3%	278	39.6%
Q50. Getting prescription medication	81	79.0%	107	75.7%	59	79.7%	22	81.8%	14	57.1%	283	77.0%
Q44. Getting information or help from customer service	79	15.2%	105	14.3%	59	27.1%	22	27.3%	14	21.4%	279	18.6%

** Special therapies include speech therapy, occupational therapy, and physical therapy.*

Among all service utilization questions, the general child sample had low rates overall, as shown in Table 20A, with all utilization rates being below 84.0% across all regions for all services. The highest statewide utilization rate was 73.7% for "visiting personal doctor at least once, in person, by phone, or by video." For this service utilization question, the Southwest region had the highest utilization rate at 83.3% among all services and regions. The Northeast region generally had low utilization rates across all services, with utilization rates of 60.8% or lower. The "seeking special medical equipment or devices" utilization of services question had the lowest utilization rates: 2.7% in the Central region, 1.1% in the Northeast, and 0.7% in the Northwest.

The CCC sample, as seen in **Table 20B**, had a high statewide utilization rate of 85.4% for "visiting a personal doctor at least once, in person, by phone, or by video." This service had a high utilization rate seen among the Northeast region (94.6%), followed by the Southwest region (86.4%). "Seeking routine medical care" had the second-highest statewide utilization rate (80.6%), with the highest in the Central region (85.0%). All regions, excluding one, had a utilization rate of 77.2% or higher for "Visiting a doctor at least once, in person, by phone, or by video." The lowest utilization rate for this service, 42.9%, is found in the Southeast region.

Further Analysis of ARKids First A

SCHOOL OR DAYCARE REPORTED (QUESTIONS 11 AND 12)

Parents/caregivers of children/adolescents were asked if their child is enrolled in school or daycare and if they have needed their child's doctor to contact a school or daycare about their child's health or health care.

Key Findings

- The majority of respondents (74.2%) stated that their child is currently enrolled in school or daycare. Among the general child sample, 121 respondents said their child is not in school or daycare, and 50 respondents among the CCC sample also stated their child does not attend school or daycare.
- Of the respondents who stated their child is in school or daycare, 12.2% stated they needed their child's doctor to contact a school or daycare about their child's health or health care. The majority of respondents who stated they needed their child's doctor to contact a school or daycare about their child's health or health care (40 respondents) are among the CCC sample.

HEALTH CARE SERVICES REPORTED (QUESTIONS 23, 25, 34, AND 42)

Parents/caregivers of children/adolescents were asked throughout the survey about the types of providers and services their child has received. Specifically, they were asked if their child used care from more than one kind of health care provider or used more than one kind of health care service, if their child has a personal doctor, if they received care from a doctor or health provider besides their personal doctor, and how many specialists, if any, their child has talked to.

Key Findings

- When asked if their child got care from more than one kind of health care provider or used more than one kind of health care service, 188 respondents answered "yes." Of respondents who stated that their child received care from more than one type of health care provider or used more than one type of health care service, 67.0% came from the CCC sample.
- A personal doctor is one a child would talk to if he or she needs a check-up, has a health problem, or gets sick or hurt. Of all respondents, 89.1% stated that their child has a personal doctor. Of the general child sample, only 57 respondents reported that their child does not have a personal doctor, and 16 respondents from the CCC sample reported that their child does not have a personal doctor.
- When asked whether their child received care from a doctor or other health provider besides their personal doctor, 35.4% of the general child sample said "yes." Among the CCC sample, 57.0% of respondents reported that their child received care from a doctor or other health provider besides their personal doctor.
- When asked how many specialists their child had spoken with in the last 6 months, the majority (57.2%) of respondents who see a specialist reported that their child had spoken with only one specialist.

REPORTED CONDITIONS LASTING MORE THAN 3 MONTHS (QUESTION 37)

Parents/caregivers of children/adolescents were asked if any medical, behavioral, or other health conditions have lasted more than 3 months.

Key Findings

- When asked if their child has any medical, behavioral, or other health conditions that have lasted for more than 3 months, 6.9% of general child respondents and 69.1% of CCC respondents answered "yes."

CHILD'S PERSONAL DOCTOR AND HEALTH PLAN (QUESTIONS 30, 47, AND 48)

Parents/caregivers of children/adolescents were asked about their personal doctor, including whether their child was able to talk with their doctor about their health care. They were also asked about their child's health plan, whether it provided any forms to fill out, and how often those forms were easy to complete.

Key Findings

- Of all respondents, 67.8% reported that their child was able to talk with doctors about his or her health care. Of the general child sample, 73 respondents and 71 CCC respondents answered "no" when asked if their child is able to talk with doctors about his or her health care.
- When asked, "In the last 6 months, did your child's health plan give you any forms to fill out?" 56 respondents from the general child sample and 65 respondents from the CCC sample answered "yes."
- The majority of parents/caregivers from the general sample (59.3%) and CCC sample (43.1%) responded that in the last 6 months, the forms from their child's health plan were "always" easy to fill out.

PARENT AND CHILD DEMOGRAPHICS (QUESTIONS 71, 73, AND 74)

Parents/caregivers of children/adolescents were asked about their demographics and their child's demographics. This includes asking if their child is of Hispanic or Latino origin or descent. Questions about the parent's/caregiver's age and gender are also asked.

Key Findings

- The majority of general child (73.9%) and CCC respondents (87.5%) are not Hispanic or Latino.
- The parent/caregiver age category "35 to 44" had the highest number of respondents, with 121 parents/caregivers of children/adolescents in the general child sample and 100 in the CCC sample.
- The majority of parents/caregivers (86.7%) who completed the survey were female.

PREFERRED METHOD OF COMMUNICATION (QUESTION 77)

Parents/caregivers of children/adolescents were asked how they prefer to receive important information from their child's health plan.

Key Findings

- When asked how they prefer to receive important information from their child's health plan, a majority of respondents, 74.9%, answered, "by mail."

TRANSPORTATION (QUESTIONS 77, 78, AND 79)

Parents/caregivers of children/adolescents were asked whether they reached out to their child's health plan to get help with transportation to doctors' offices, clinics, or pharmacies. They were also asked how often they got help with transportation when they phoned their child's health plan, and how often that help met their child's needs.

Key Findings

- The majority of respondents (98.2%) stated that in the last 6 months, they did not reach out to their child's health plan for help with transportation for their child. Of the general child sample, four respondents and 8 CCC respondents answered "yes" when asked if they had phoned their child's health plan to get transportation help.
- Of all the respondents who stated they phoned their child's health plan to get help with transportation, three of the parents/caregivers of children/adolescents in the general child sample and four parents/caregivers of children/adolescents in the CCC sample responded that they "always" got the transportation help that was requested.
- Most parents/caregivers who received transportation assistance from their child's health plan reported that the help with transportation always met their needs (70.0%).

ARKids First A Frequency Tables

	Q1) Our records show that your child is now in Medicaid's ARKids First A program. Is that right?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q1	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	380	100.0	275	100.0	655	100.0
No	0	0.0	0	0.0	0	0.0

Question 2 ("What is the name of your child's health plan?") does not require a frequency table because it is a conditional, open-ended question used to verify plan coverage. Per HEDIS MY 2025 QAP guidance, respondents who answer "No" or leave Question 1 blank may still be eligible for analysis if plan coverage can be confirmed.

	Q3) In the last 6 months, did your child have an illness, injury, or condition that needed care right away?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q3	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	123	31.9	115	40.8	238	35.6
No	263	68.1	167	59.2	430	64.4

	Q4) In the last 6 months, when your child needed care right away, how often did your child get care as soon as he or she needed?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q4	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	0	0.0	0	0.0	0	0.0
Sometimes	8	6.8	6	5.4	14	6.1
Usually	6	5.1	13	11.7	19	8.3
Always	103	88.0	92	82.9	195	85.5

	Q5) In the last 6 months, did you make any in person, phone, or video appointments for a check-up or routine care for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q5	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	240	62.3	225	80.6	465	70.0
No	145	37.7	54	19.4	199	30.0

	Q6) In the last 6 months, how often did you get an appointment for a check-up or routine care for your child as soon as your child needed?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q6	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	1	0.4	0	0.0	1	0.2
Sometimes	35	15.0	22	10.0	57	12.6
Usually	35	15.0	43	19.6	78	17.3
Always	162	69.5	154	70.3	316	69.9

	Q7) In the last 6 months, not counting the times your child went to an emergency room, how many times did he or she get health care in person, by phone, or by video?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q7	Frequency	Percent	Frequency	Percent	Frequency	Percent
None	146	38.7	61	22.1	207	31.7
1 time	71	18.8	45	16.3	116	17.8
2	71	18.8	49	17.8	120	18.4
3	40	10.6	36	13.0	76	11.6
4	25	6.6	33	12.0	58	8.9
5 to 9	19	5.0	44	15.9	63	9.6
10 or more times	5	1.3	8	2.9	13	2.0

	Q8) In the last 6 months, how often did you have your questions answered by your child's doctors or other health providers?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q8	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	3	1.3	4	1.9	7	1.6
Sometimes	12	5.3	8	3.7	20	4.5
Usually	34	14.9	35	16.4	69	15.6
Always	179	78.5	167	78.0	346	78.3

	Q9) Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your child's health care in the last 6 months?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q9	Frequency	Percent	Frequency	Percent	Frequency	Percent
0 Worst health care possible	1	0.4	1	0.5	2	0.5
1	0	0.0	0	0.0	0	0.0
2	0	0.0	0	0.0	0	0.0
3	0	0.0	1	0.5	1	0.2
4	0	0.0	0	0.0	0	0.0
5	2	0.9	7	3.3	9	2.0
6	4	1.7	8	3.8	12	2.7
7	12	5.2	13	6.1	25	5.7
8	30	13.1	38	17.8	68	15.4
9	38	16.6	44	20.7	82	18.6
10 Best health care possible	142	62.0	101	47.4	243	55.0

	Q10) In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q10	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	1	0.4	2	0.9	3	0.7
Sometimes	6	2.6	9	4.2	15	3.4
Usually	44	19.2	61	28.6	105	23.8
Always	178	77.7	141	66.2	319	72.2

	Q11) Is your child now enrolled in any kind of school or daycare?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q11	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	262	68.4	230	82.1	492	74.2
No	121	31.6	50	17.9	171	25.8

	Q12) In the last 6 months, did you need your child's doctors or other health providers to contact a school or daycare center about your child's health or health care?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q12	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	17	6.8	40	18.2	57	12.2
No	232	93.2	180	81.8	412	87.8

	Q13) In the last 6 months, did you get the help you needed from your child's doctors or other health providers in contacting your child's school or daycare?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q13	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	17	100.0	34	87.2	51	91.1
No	0	0.0	5	12.8	5	8.9

	Q14) Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last 6 months, did you get or try to get any special medical equipment or devices for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q14	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	9	2.4	16	5.8	25	3.8
No	373	97.6	262	94.2	635	96.2

	Q15) In the last 6 months, how often was it easy to get special medical equipment or devices for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q15	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	2	22.2	1	6.3	3	12.0
Sometimes	1	11.1	1	6.3	2	8.0
Usually	0	0.0	2	12.5	2	8.0
Always	6	66.7	12	75.0	18	72.0

	Q16) Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q16	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	5	55.6	14	87.5	19	76.0
No	4	44.4	2	12.5	6	24.0

	Q17) In the last 6 months, did you get or try to get special therapy, such as physical, occupational, or speech therapy for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q17	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	57	14.8	109	38.9	166	25.0
No	327	85.2	171	61.1	498	75.0

	Q18) In the last 6 months, how often was it easy to get this therapy for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q18	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	1	1.8	6	5.6	7	4.3
Sometimes	6	10.9	15	14.0	21	13.0
Usually	8	14.5	14	13.1	22	13.6
Always	40	72.7	72	67.3	112	69.1

	Q19) Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q19	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	34	60.7	73	68.2	107	65.6
No	22	39.3	34	31.8	56	34.4

	Q20) In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q20	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	23	6.1	110	39.6	133	20.3
No	355	93.9	168	60.4	523	79.7

	Q21) In the last 6 months, how often was it easy to get this treatment or counseling for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q21	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	2	9.1	9	8.3	11	8.4
Sometimes	3	13.6	19	17.4	22	16.8
Usually	3	13.6	23	21.1	26	19.8
Always	14	63.6	58	53.2	72	55.0

	Q22) Did anyone from your child's health plan, doctor's office, or clinic help you get this treatment or counseling for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q22	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	11	52.4	80	73.4	91	70.0
No	10	47.6	29	26.6	39	30.0

	Q23) In the last 6 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q23	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	62	16.5	126	45.7	188	28.8
No	314	83.5	150	54.3	464	71.2

	Q24) In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q24	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	40	65.6	86	70.5	126	68.9
No	21	34.4	36	29.5	57	31.1

	Q25) A personal doctor is the one your child would talk to if he or she needs a check-up, has a health problem or gets sick or hurt. Does your child have a personal doctor?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q25	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	329	85.2	266	94.3	595	89.1
No	57	14.8	16	5.7	73	10.9

	Q26) In the last 6 months, how many times did your child have an in person, phone, or video visit with his or her personal doctor?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q26	Frequency	Percent	Frequency	Percent	Frequency	Percent
None	83	26.3	38	14.6	121	21.0
1 time	95	30.1	68	26.1	163	28.2
2	60	19.0	68	26.1	128	22.2
3	38	12.0	46	17.6	84	14.6
4	21	6.6	24	9.2	45	7.8
5 to 9	16	5.1	15	5.7	31	5.4
10 or more times	3	0.9	2	0.8	5	0.9

	Q27) In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q27	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	2	0.9	3	1.3	5	1.1
Sometimes	12	5.2	7	3.1	19	4.2
Usually	26	11.2	38	17.0	64	14.1
Always	192	82.8	175	78.5	367	80.7

	Q28) In the last 6 months, how often did your child's personal doctor listen carefully to you?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q28	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	1	0.4	2	0.9	3	0.7
Sometimes	4	1.7	7	3.1	11	2.4
Usually	28	12.1	32	14.3	60	13.2
Always	199	85.8	182	81.6	381	83.7

	Q29) In the last 6 months, how often did your child's personal doctor show respect for what you had to say?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q29	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	2	0.9	1	0.5	3	0.7
Sometimes	3	1.3	7	3.2	10	2.2
Usually	18	7.8	22	9.9	40	8.8
Always	207	90.0	192	86.5	399	88.3

	Q30) Is your child able to talk with doctors about his or her health care?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q30	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	154	67.8	149	67.7	303	67.8
No	73	32.2	71	32.3	144	32.2

	Q31) In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for your child to understand?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q31	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	1	0.7	3	2.0	4	1.4
Sometimes	7	4.7	7	4.8	14	4.7
Usually	28	18.8	28	19.0	56	18.9
Always	113	75.8	109	74.1	222	75.0

	Q32) In the last 6 months, how often did your child's personal doctor spend enough time with your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q32	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	5	2.2	3	1.4	8	1.8
Sometimes	16	7.0	18	8.1	34	7.5
Usually	40	17.4	39	17.6	79	17.5
Always	169	73.5	162	73.0	331	73.2

	Q33) In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q33	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	194	84.3	192	86.9	386	85.6
No	36	15.7	29	13.1	65	14.4

	Q34) In the last 6 months, did your child get care from a doctor or other health provider besides his or her personal doctor?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q34	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	81	35.4	126	57.0	207	46.0
No	148	64.6	95	43.0	243	54.0

	Q35) In the last 6 months, how often did your child's personal doctor seem informed and up-to-date about the care your child got from these doctors or other health providers?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q35	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	2	2.5	4	3.2	6	2.9
Sometimes	10	12.7	21	16.7	31	15.1
Usually	17	21.5	28	22.2	45	22.0
Always	50	63.3	73	57.9	123	60.0

	Q36) Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q36	Frequency	Percent	Frequency	Percent	Frequency	Percent
0 Worst personal doctor possible	0	0.0	0	0.0	0	0.0
1	0	0.0	2	0.8	2	0.3
2	0	0.0	2	0.8	2	0.3
3	0	0.0	2	0.8	2	0.3
4	1	0.3	2	0.8	3	0.5
5	7	2.2	7	2.7	14	2.4
6	7	2.2	6	2.3	13	2.2
7	13	4.1	11	4.2	24	4.1
8	38	12.0	27	10.2	65	11.2
9	48	15.2	48	18.2	96	16.6
10 Best personal doctor possible	202	63.9	157	59.5	359	61.9

	Q37) Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 months?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q37	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	22	6.9	181	69.1	203	35.1
No	295	93.1	81	30.9	376	64.9

	Q38) Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q38	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	19	90.5	167	92.8	186	92.5
No	2	9.5	13	7.2	15	7.5

	Q39) Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your family's day-to-day life?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q39	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	18	85.7	162	89.5	180	89.1
No	3	14.3	19	10.5	22	10.9

	Q40) Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did you make any appointments for your child with a specialist?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q40	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	59	15.3	124	44.3	183	27.5
No	327	84.7	156	55.7	483	72.5

	Q41) In the last 6 months, how often did you get appointments for your child with a specialist as soon as he or she needed?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q41	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	2	3.4	4	3.3	6	3.3
Sometimes	5	8.5	15	12.4	20	11.1
Usually	16	27.1	32	26.4	48	26.7
Always	36	61.0	70	57.9	106	58.9

	Q42) How many specialists has your child talked to in the last 6 months?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q42	Frequency	Percent	Frequency	Percent	Frequency	Percent
None	4	6.8	3	2.5	7	3.9
1 specialist	40	67.8	63	52.1	103	57.2
2	14	23.7	34	28.1	48	26.7
3	1	1.7	17	14.0	18	10.0
4	0	0.0	3	2.5	3	1.7
5 or more specialists	0	0.0	1	0.8	1	0.6

	Q43) We want to know your rating of the specialist your child talked to most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q43	Frequency	Percent	Frequency	Percent	Frequency	Percent
0 Worst specialist possible	0	0.0	0	0.0	0	0.0
1	0	0.0	0	0.0	0	0.0
2	0	0.0	1	0.9	1	0.6
3	0	0.0	1	0.9	1	0.6
4	1	1.8	1	0.9	2	1.2
5	1	1.8	6	5.1	7	4.1
6	1	1.8	6	5.1	7	4.1
7	1	1.8	4	3.4	5	2.9
8	4	7.3	7	6.0	11	6.4
9	11	20.0	28	23.9	39	22.7
10 Best specialist possible	36	65.5	63	53.8	99	57.6

	Q44) In the last 6 months, did you get information or help from customer service at your child's health plan?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q44	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	48	12.5	52	18.6	100	15.1
No	335	87.5	227	81.4	562	84.9

	Q45) In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q45	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	1	2.3	1	2.0	2	2.1
Sometimes	3	6.8	8	15.7	11	11.6
Usually	6	13.6	12	23.5	18	18.9
Always	34	77.3	30	58.8	64	67.4

	Q46) In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q46	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	0	0.0	0	0.0	0	0.0
Sometimes	0	0.0	3	5.8	3	3.2
Usually	4	9.5	12	23.1	16	17.0
Always	38	90.5	37	71.2	75	79.8

	Q47) In the last 6 months, did your child's health plan give you any forms to fill out?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q47	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	56	14.7	65	23.3	121	18.3
No	325	85.3	214	76.7	539	81.7

	Q48) In the last 6 months, how often were the forms from your child's health plan easy to fill out?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q48	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	2	3.7	4	6.2	6	5.0
Sometimes	5	9.3	12	18.5	17	14.3
Usually	15	27.8	21	32.3	36	30.3
Always	32	59.3	28	43.1	60	50.4

	Q49) Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your child's health plan?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q49	Frequency	Percent	Frequency	Percent	Frequency	Percent
0 Worst health plan possible	2	0.5	1	0.4	3	0.5
1	0	0.0	3	1.1	3	0.5
2	0	0.0	4	1.4	4	0.6
3	1	0.3	3	1.1	4	0.6
4	3	0.8	4	1.4	7	1.1
5	3	0.8	9	3.3	12	1.8
6	10	2.7	9	3.3	19	2.9
7	16	4.2	18	6.5	34	5.2
8	34	9.0	41	14.9	75	11.5
9	54	14.3	46	16.7	100	15.3
10 Best health plan possible	254	67.4	138	50.0	392	60.0

	Q50) In the last 6 months, did you get or refill any prescription medicines for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q50	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	154	40.1	218	77.0	372	55.8
No	230	59.9	65	23.0	295	44.2

	Q51) In the last 6 months, how often was it easy to get prescription medicines for your child through his or her health plan?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q51	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	0	0.0	0	0.0	0	0.0
Sometimes	2	1.3	17	7.8	19	5.1
Usually	14	9.2	42	19.3	56	15.1
Always	136	89.5	159	72.9	295	79.7

	Q52) Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q52	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	85	57.4	143	66.2	228	62.6
No	63	42.6	73	33.8	136	37.4

	Q53) In general, how would you rate your child's overall health?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q53	Frequency	Percent	Frequency	Percent	Frequency	Percent
Excellent	203	53.3	74	26.3	277	41.8
Very good	121	31.8	112	39.9	233	35.2
Good	52	13.6	77	27.4	129	19.5
Fair	5	1.3	13	4.6	18	2.7
Poor	0	0.0	5	1.8	5	0.8

	Q54) In general, how would you rate your child's overall mental or emotional health?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q54	Frequency	Percent	Frequency	Percent	Frequency	Percent
Excellent	191	50.9	58	20.6	249	37.9
Very good	125	33.3	88	31.2	213	32.4
Good	50	13.3	81	28.7	131	19.9
Fair	8	2.1	48	17.0	56	8.5
Poor	1	0.3	7	2.5	8	1.2

	Q55) Does your child currently need or use medicine prescribed by a doctor (other than vitamins)?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q55	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	50	13.1	201	71.5	251	37.9
No	331	86.9	80	28.5	411	62.1

	Q56) Is this because of any medical, behavioral, or other health condition?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q56	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	9	19.6	193	96.5	202	82.1
No	37	80.4	7	3.5	44	17.9

	Q57) Is this a condition that has lasted or is expected to last for at least 12 months?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q57	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	0	0.0	191	99.0	191	95.0
No	8	100.0	2	1.0	10	5.0

	Q58) Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q58	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	10	2.6	147	52.7	157	23.8
No	371	97.4	132	47.3	503	76.2

	Q59) Is this because of any medical, behavioral, or other health condition?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q59	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	3	33.3	139	95.2	142	91.6
No	6	66.7	7	4.8	13	8.4

	Q60) Is this a condition that has lasted or is expected to last for at least 12 months?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q60	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	0	0.0	136	98.6	136	96.5
No	3	100.0	2	1.4	5	3.5

	Q61) Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q61	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	6	1.6	99	35.1	105	15.8
No	377	98.4	183	64.9	560	84.2

	Q62) Is this because of any medical, behavioral, or other health condition?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q62	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	1	16.7	97	98.0	98	93.3
No	5	83.3	2	2.0	7	6.7

	Q63) Is this a condition that has lasted or is expected to last for at least 12 months?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q63	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	0	0.0	97	100.0	97	99.0
No	1	100.0	0	0.0	1	1.0

	Q64) Does your child need or get special therapy such as physical, occupational, or speech therapy?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q64	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	48	12.6	125	44.5	173	26.1
No	334	87.4	156	55.5	490	73.9

	Q65) Is this because of any medical, behavioral, or other health condition?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q65	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	5	11.4	111	89.5	116	69.0
No	39	88.6	13	10.5	52	31.0

	Q66) Is this a condition that has lasted or is expected to last for at least 12 months?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q66	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	0	0.0	106	98.1	106	95.5
No	3	100.0	2	1.9	5	4.5

	Q67) Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q67	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	5	1.3	154	54.8	159	24.1
No	375	98.7	127	45.2	502	75.9

	Q68) Has this problem lasted or is it expected to last for at least 12 months?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q68	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	0	0.0	153	100.0	153	98.7
No	2	100.0	0	0.0	2	1.3

	Q69) What is your child's age?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q69	Frequency	Percent	Frequency	Percent	Frequency	Percent
Less than 1 year old	18	4.7	2	0.7	20	3.0
1 year old	24	6.3	5	1.8	29	4.4
2 years old	34	8.9	9	3.2	43	6.5
3 years old	16	4.2	14	5.0	30	4.5
4 years old	17	4.5	19	6.7	36	5.4
5 years old	14	3.7	13	4.6	27	4.1
6 years old	14	3.7	19	6.7	33	5.0
7 years old	15	3.9	18	6.4	33	5.0
8 years old	18	4.7	18	6.4	36	5.4
9 years old	23	6.0	13	4.6	36	5.4
10 years old	19	5.0	22	7.8	41	6.2
11 years old	21	5.5	11	3.9	32	4.8
12 years old	15	3.9	16	5.7	31	4.7
13 years old	26	6.8	17	6.0	43	6.5
14 years old	30	7.9	16	5.7	46	6.9
15 years old	17	4.5	24	8.5	41	6.2
16 years old	29	7.6	24	8.5	53	8.0
17 years old	29	7.6	16	5.7	45	6.8
18 years old	3	0.8	6	2.1	9	1.4

	Q70) Is your child male or female?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q70	Frequency	Percent	Frequency	Percent	Frequency	Percent
Male	208	54.7	159	56.4	367	55.4
Female	172	45.3	123	43.6	295	44.6

	Q71) Is your child of Hispanic or Latino origin or descent?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q71	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes, Hispanic or Latino	99	26.1	34	12.5	133	20.4
No, not Hispanic or Latino	280	73.9	238	87.5	518	79.6

	Q72) What is your child's race? Mark one or more.					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q72	Frequency	Percent	Frequency	Percent	Frequency	Percent
White	233	63.0	175	65.5	408	64.1
Black or African American	52	14.1	56	21.0	108	17.0
Asian	4	1.1	0	0.0	4	0.6
Native Hawaiian or other Pacific Islander	1	0.3	2	0.7	3	0.5
American Indian or Alaska Native	2	0.5	3	1.1	5	0.8
Other	50	13.5	11	4.1	61	9.6
Multiracial	28	7.6	20	7.5	48	7.5

	Q73) What is your age?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q73	Frequency	Percent	Frequency	Percent	Frequency	Percent
Under 18	57	15.0	34	12.6	91	14.0
18 to 24	23	6.0	7	2.6	30	4.6
25 to 34	76	19.9	53	19.6	129	19.8
35 to 44	121	31.8	100	37.0	221	33.9
45 to 54	51	13.4	39	14.4	90	13.8
55 to 64	34	8.9	23	8.5	57	8.8
65 to 74	15	3.9	12	4.4	27	4.1
75 or older	4	1.0	2	0.7	6	0.9

	Q74) Are you male or female?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q74	Frequency	Percent	Frequency	Percent	Frequency	Percent
Male	59	15.4	28	10.3	87	13.3
Female	324	84.6	243	89.7	567	86.7

	Q75) What is the highest grade or level of school that you have completed?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q75	Frequency	Percent	Frequency	Percent	Frequency	Percent
8th grade or less	26	6.9	9	3.4	35	5.5
Some high school, but did not graduate	41	10.9	27	10.2	68	10.6
High school graduate or GED	149	39.6	73	27.4	222	34.6
Some college or 2-year degree	108	28.7	109	41.0	217	33.8
4-year college graduate	38	10.1	25	9.4	63	9.8
More than 4-year college degree	14	3.7	23	8.6	37	5.8

	Q76) How are you related to the child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q76	Frequency	Percent	Frequency	Percent	Frequency	Percent
Mother or father	327	89.8	226	90.0	553	89.9
Grandparent	26	7.1	22	8.8	48	7.8
Aunt or uncle	3	0.8	1	0.4	4	0.7
Older brother or sister	1	0.3	0	0.0	1	0.2
Other relative	0	0.0	1	0.4	1	0.2
Legal guardian	5	1.4	1	0.4	6	1.0
Someone else	2	0.5	0	0.0	2	0.3

	Q77) How do you prefer to receive important information from your child's health plan?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q77	Frequency	Percent	Frequency	Percent	Frequency	Percent
By mail	213	73.4	142	77.2	355	74.9
By phone call	15	5.2	11	6.0	26	5.5
By text message	34	11.7	17	9.2	51	10.8
By email	28	9.7	14	7.6	42	8.9

	Q78) Some health plans help with transportation for your child to get to doctors' offices, clinics, or pharmacies. In the last 6 months, did you phone your child's health plan to get help with transportation for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q78	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	4	1.0	8	2.9	12	1.8
No	378	99.0	264	97.1	642	98.2

	Q79) In the last 6 months, when you phoned your child's health plan to get help with transportation, how often did you get it?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q79	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	0	0.0	1	14.3	1	9.1
Sometimes	1	25.0	2	28.6	3	27.3
Usually	0	0.0	0	0.0	0	0.0
Always	3	75.0	4	57.1	7	63.6

	Q80) In the last 6 months, how often did the help with transportation for your child meet your needs?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q80	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	0	0.0	1	16.7	1	10.0
Sometimes	0	0.0	2	33.3	2	20.0
Usually	0	0.0	0	0.0	0	0.0
Always	4	100.0	3	50.0	7	70.0

ARKids First A Comments

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Excellent	9-12	CCC Sample	** AT ** IN SALEM, ARKANSAS, IS THE FIRST AND ONLY MEDICAL PROVIDER THAT TRULY LISTENS TO LEARN AND INQUIRES ABOUT MY CHILDREN. 100% RECOMMENDED! THANK YOU!
0-4	Good	0-4	CCC Sample	** CURRENT DOCTOR ** SEEMS TO BE A BIT DISMISSIVE AND JUST OVERALL NOT A GOOD FIT.
8-10	Excellent	5-8	General Sample	** HAS BEEN GROWING GREY/WHITE HAIR SINCE SHE WAS 2 YRS OLD. I DON'T KNOW IF THIS IS NORMAL.
8-10	Very good	0-4	CCC Sample	** HAS NEVER RECEIVED HIS NEW ARKIDS CARD BY MAIL AS PROMISED BY THE REPRESENTATIVE ON 1/2026. OUR ADDRESS IS **
8-10	Excellent	0-4	General Sample	** IS IN SPEECH THERAPY RIGHT NOW WHICH IS HELPING SO MUCH. SHE HAS PROBLEMS FORMING WORDS.
8-10	Very good	5-8	General Sample	** RECEIVES SPEECH THERAPY BECAUSE SHE COULD NOT SAY CERTAIN LETTERS, THIS WAS AT THE BEGINNING 3 YEARS AGO. IN THE LAST 6 MONTHS, SHE CONTINUED RECEIVING SPEECH THERAPY BECAUSE SHE CANNOT JOIN CONSONANTS WHEN READING. WITH THERAPIES, SHE WILL OVERCOME THAT, AND SHE IS IMPROVING HER READING. THIS THERAPY BEGAN BECAUSE THE DENTIST OBSERVED THAT THE TONGUE OF ** IS SHORT, AND FOR THAT REASON, SHE COULD NOT SAY WORDS CORRECTLY.
8-10	Fair	9-12	CCC Sample	** WAS NOT VERY COOPERATIVE. THEY CANCELED OUR APPOINTMENT BECAUSE THEIR AUTOMATED SYSTEM FAILED TO WORK PROPERLY, AND SHE IS STILL WAITING FOR AN APPOINTMENT ON APRIL 23 AT 1:00. THE ONE THEY CANCELED WAS JANUARY 13, 2026.
8-10	Very good	13-18	CCC Sample	**HAS ADHD AND CHIARI MALFORMATION 1 WITH SYRINGOMYELIA.
	Excellent	13-18	CCC Sample	ALL OF HER DOCTORS, THERAPISTS, AND COUNSELORS SHE HAS HAD HAVE BEEN EXCELLENT IN EVERY WAY BESIDES ONE PLACE, AND THAT WAS ** IN CONWAY ARKANSAS. THEY LIED TO ME AND NEVER NOTIFIED ME OR KEPT IN CONTACT; I TELL ANYONE DO NOT GO THERE. AND I THINK THEY NEED TO BE WATCHED. IT IS NOT A GOOD PLACE FOR CHILDREN. SOMETHING NEEDS TO BE DONE WITH THE PLACE.
5-7	Excellent	9-12	General Sample	ALL THESE QUESTIONS MADE ME REALIZE HOW LUCKY I AM TO HAVE A HEALTHY KID. THANK YOU FOR HELP KEEPING HIM HEALTHY **
8-10	Very good	13-18	General Sample	ARKIDS HAS BEEN A LIFESAVER FOR MY DAUGHTER. I APRRECIATE YOU!

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Excellent	13-18	CCC Sample	ARKIDS INSURANCE HAS SERVED MY GRANDSON VERY WELL, WE COULDN'T ASK FOR BETTER COVERAGE! I ONLY WISH AN INSURANCE PLAN THAT IS LOW COST WOULD BE AVAILABLE FOR HIM AS HE GETS OLDER AND IS A COLLEGE STUDENT.
5-7	Good	13-18	CCC Sample	BETTER CLARIFICATION CONCERNING HER APPOINTMENTS. SPECIFICALLY LEAVING VOICEMAILS AND/OR TEXT MESSAGES. PEOPLE DON'T ANSWER THEIR PHONES IF THEY DON'T KNOW THE NUMBER. THANK YOU.
8-10	Good	5-8	CCC Sample	CHILD HAS DOWN SYNDROME AND HEART ISSUES.
8-10	Excellent	0-4	CCC Sample	COULD DO BETTER WITH COVERAGE OF TESTING. MY SON IS LEVEL 3 AUTISM. SOME OF HIS TESTING AND APPOINTMENTS ARE NOT BEING COVERED OR PARTIALLY COVERED.
8-10	Fair	9-12	General Sample	DR. ** SHE IS THE BEST, AND I REFER PEOPLE TO HER; SHE HEARS AND TALK TO YOU LIKE FAMILY AND WILL LET KIDS KNOW ABOUT WHAT NEEDS TO BE DONE. WE LOVE HER SO MUCH AND THANKS FOR THIS SERVICE GOD BLESS. **
8-10	Good	13-18	CCC Sample	EXCELLENT PROGRAM TO MAKE SURE CHILDREN ARE TAKEN CARE OF MEDICALLY. THEY DESERVE TO HAVE THE BEST CARE AS QUICKLY AS POSSIBLE. PARENTS PRAY FOR THIS AND ARE SAD WHEN TRYING VERY HARD TO PROVIDE FINANCIALLY.
5-7	Very good	13-18	CCC Sample	GETTING ORTHODONTIC CARE HAS BEEN A PROBLEM. PLAN APPROVED ONLY TOP TEETH GETTING BRACES, WHILE THE BOTTOM TEETH ARE NEEDED TO CORRECT THE TEETH IN HER MOUTH.
8-10	Very good	0-4	General Sample	HAVING MEDICAID HAS BEEN AN ABSOLUTE BLESSING WHILE THIS SPECIFIC CHILD RECEIVES LIMITED SERVICES. I DO HAVE A 2-YEAR OLD WHO HAS RECURRING NEEDS DUE TO PERSONAL COMPLICATIONS. MEDICAID HAS HELPED RECEIVE THE SERVICES WITH HIM AND GIVEN THE FREEDOM OF STRESS GROWING, I CAN OBTAIN CARE WHEN NEEDED WITH SUCH RESPONSIVE AND HELPFUL CARE. MY OTHER CHILD ** RECEIVED ENT VISITS, EAR TUBES, THICKENER, EVALUATIONS FOR LARYNGOMALACIA, PHYSICAL THERAPY, AND BRACES TO ASSIST HER WALKING. I'M SO THANKFUL FOR THIS SERVICE BEING ACCESSIBLE TO OUR FAMILY.
8-10	Very good	13-18	CCC Sample	HE HAS ASTHMA.
8-10	Good	13-18	CCC Sample	HE HAS BEHAVIOURAL PROBLEMS AND EMOTIONAL EPISODES.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Very good	0-4	CCC Sample	HE HAS STARTED SCHOOL, AND THIS WILL HELP ME GET EVERYTHING HE NEEDS TO BE A BETTER ADULT. IF INSURANCE WON'T COVER IT, THERE WILL BE A PROGRAM THAT WILL. ** WILL PROVIDE FOR THE COMMUNITY
8-10	Good	13-18	CCC Sample	HE IS STILL IN SCHOOL. HE IS ON MEDICINE FOR ADHD AND SLEEPING AT NIGHT.
8-10	Very good	13-18	General Sample	HE TURNED 18 ON JANUARY **. HE IS STILL ENROLLED IN HOME SCHOOL AND IS IN 12TH GRADE.
8-10	Very good	13-18	General Sample	HEALTH PLAN IS GOOD. ** FULLY UNDERSTANDS DENTAL OR VISION BENEFITS. IT WOULD BE GREAT IF AN EOC HANDBOOK WOULD BE SENT OUT EACH YEAR AUTOMATICALLY. THIS WAY, WE COULD REVIEW AND KNOW WHAT EXACTLY OUR BENEFITS ARE. THANK YOU.
8-10	Good	0-4	CCC Sample	HEALTHCARE PLAN IS GOOD. WE HAVE HAD NO ISSUES WITH COVERAGE OR CARE, BUT THE RENEWAL PROCESS CAN BE TEDIOUS/REDUNDANT. AN AUTOMATED PROCESS WOULD BE NICE OR LONGER ELIGIBILITY. FOR EXAMPLE, INSTEAD OF EVERY 6M/1 YEAR MAYBE EVERY 3 YEARS
8-10	Excellent	13-18	General Sample	HER DOCTOR HELPED BY ORDERING THE MEDICINE FROM THE PHARMACY. NO ONE BUT MYSELF AND HER PLAN PAYS FOR MEDICATION.
5-7	Very good	5-8	CCC Sample	HOPE YOU PROVIDE FREE MEDICAID SERVICES FOR ALL THE KIDS WHO HAVE DISABILITY REGARDLESS OF WHAT INCOME THEY MAKE IN THEIR HOUSEHOLD.
8-10	Very good	5-8	CCC Sample	I AM GRATEFUL FOR ARKIDS. TO KNOW I CAN TAKE MY KIDS AND NOT WORRY ABOUT BEING IN SEVERE DEBT IS A BLESSING.
8-10	Good	13-18	CCC Sample	I AM THE LEGAL GUARDIAN AND AUNT TO THIS CHILD. IT HAS BEEN A STRUGGLE TO FINANCIALLY DO THIS. I AM VERY THANKFUL TO NOT HAVE TO WORRY ABOUT HIS HEALTH COVERAGE. IT WOULD HAVE BEEN IMPOSSIBLE TO AFFORD CARE FOR HIM. THANK YOU.
5-7	Very good	0-4	CCC Sample	I BELIEVE ** PCPS SHOULD BE EASIER TO CONTACT AND EASIER TO TALK TO. MY CHILD'S PCP IS NOT VERY PROFESSIONAL; Q64) CURRENTLY ON WAIT LIST.
5-7	Fair	5-8	CCC Sample	I BELIEVE THAT A 2-YR WAIT FOR AN AUTISM SPECIALIST IS RIDICULOUS JUST BECAUSE MY CHILD HAS MEDICAID-ARKIDS. SOMETHING SHOULD BE DONE ABOUT THIS. THANKS

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8-10	Very good	13-18	CCC Sample	I CAN NO LONGER GET THE ASTHMA INHALER THAT WORKS BEST FOR BOTH OF MY CHILDREN. MY OLDEST USED IT FOR MANY YEARS. IT HAS TAKEN A SIGNIFICANT TOLL ON BOTH OF MY GIRLS' HEALTH AND MY OWN STRESS LEVELS FINDING A NEW ONE THAT WORKS. STILL DOESN'T WORK AS WELL. I SHOULD NOT HAVE TO GUINEA PIG MY KIDS BECAUSE SOME NEW PHARMACEUTICAL COMPANY IS OFFERING THE STATE BETTER KICK BACKS! OTHER THAN THAT, I AM VERY GREATFUL FOR THE PROGRAM. MY OLDEST HAS HAD SOME HEALTH ISSUES THAT ARE NOW MOSTLY RESOLVED BECAUSE WE HAD ACCESS TO SPECIALISTS I WOULD NOT HAVE BEEN ABLE TO AFFORD ON MY OWN.
8-10	Very good		General Sample	I CAN ONLY THANK YOU FOR EVERYTHING THE HELP YOU HAVE GIVEN ME AND CONTINUE TO GIVE ME FOR MY SON. SINCERELY **
8-10	Excellent	13-18	General Sample	I HAVE BEEN VERY HAPPY WITH ARKIDS. SHE IS 13; WE HAVE BEEN HER LEGAL GUARDIANS SINCE SHE WAS 3. IT HAS BEEN A RELIEF TO KNOW THAT HER MEDICAL NEEDS ARE COVERED WHEN SHE'S BEEN SICK. I HAVEN'T HAD MUCH OPPORTUNITY TO INTERACT WITH THE STATE OTHER THAN RE-ENROLLING HER WHEN THE STATE ROLLED BACK MEDICAL PLANS AND TOOK HER OFF THE ROLL. THIS IS A NECESSARY VITAL PROGRAM.
8-10	Very good	9-12	General Sample	I ONLY HAVE ONE COMPLAINT. THE LAST THREE YEARS FOR THE SUMMER, EBT FOR ** HAS NOT BEEN RECEIVED. YES, I WENT AND MADE CALLS SINCE THE INFORMATION CHANGED; THEY SAID IT WAS ON FILE, AND I WOULD RECEIVE THE EBT IN A TIMELY MANNER. WE HAVE NOT RECEIVED ONE YET. HIS BROTHER ** HAS RECEIVED HIS EVERY SUMMER THEY HAVE BEEN ISSUED, AND YES, WE ALL LIVE IN THE SAME HOUSEHOLD TOGETHER. PLEASE RESPOND WITH A SOLUTION. THANK YOU . ** ** **
8-10	Very good	5-8	CCC Sample	I THINK THE SURVEY NEEDS MORE QUESTIONS ON THE DAYCARES AND SCHOOL SIDE OF THINGS.
8-10	Very good	5-8	CCC Sample	I WASN'T VERY SURE ON THE MEDICAL EQUIPMENT PART. SHE USES ADVAIR INHALERS DAILY. NO ISSUES ON GETTING THEM BUT STILL WAITING FOR AN APPOINTMENT WITH A SPECIALIST FOR ASHTMA
5-7	Excellent	13-18	General Sample	I WISH DOCTORS THAT WERE HOLISTIC AND FOCUSED ON WHOLE FOODS AND NATURAL MEDICINE WERE AVAILABLE UNDER ARKIDS.
			General Sample	I WOULD LIKE HER TO HAVE THIS INSURANCE AGAIN THIS YEAR AS SHE RECEIVES SPEECH THERAPY AND REGULARLY USES INHALERS FOR ASTHMA.

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0-4	Good	13-18	CCC Sample	IF A PARENT HOME SCHOOLS THEIR CHILDREN, CAN THEY GET FOOD STAMPS TO HELP FEED THEIR CHILDREN?
8-10	Very good	0-4	General Sample	IF MY LOCAL DHS OFFICE WOULD ENTER OUR STUFF CORRECTLY, I'D HAVE NO ISSUES. THE RENEWAL FORM HAD OLD JOBS (THEY DID REMOVE) BUT HAD THE PAY AND/OR PAY PERIOD WRONG. TOLD ME LAST YEAR MY SON'S INSURANCE WOULD GO OUT FEBRUARY THIS YEAR, DID THE RENEWAL PACKET AND HE STILL QUALIFIED.
8-10	Fair	13-18	CCC Sample	IT IS DIFFICULT TO GET HEALTHCARE AFTER HOURS AT URGENT CARE BECAUSE THEY NEED A REFERRAL FROM THE PRIMARY CARE DOCTOR. THE ONLY PLACE AVAILABLE IS THE ER.
8-10	Very good	0-4	General Sample	IT IS VERY COMPLICATED TO GET PROMPT APPOINTMENTS WITH SPECIALISTS
8-10	Excellent	0-4	General Sample	I'M HAPPY OVERALL WITH MY CHILD'S MEDICAID.
8-10	Very good	13-18	General Sample	JUST SOMETHING I THINK IS VERY IMPORTANT IS URGENT CARE SERVICES. IF YOU HAVE TO TAKE YOUR CHILD TO URGENT CARE BECAUSE IT'S AFTER HOURS, IT SHOULD BE COVERED BY ARKIDS. IT SHOULD NOT HAVE TO BE AN ER VISIT. IT IS CHEAPER FOR THE INSURANCE COMPANY THAT WAY.
	Very good	13-18	CCC Sample	MEDICAID HAS BEEN A TRUE BLESSING FOR THE HEALTH OF MY CHILDREN. WE ARE VERY GRATEFUL FOR IT AND HAVE HAD WONDERFUL DOCTORS IN THIS AREA OF ARKANSAS. ** BROTHER HAS CEREBRAL PALSY, AND THE PASSE SYSTEM IS ANOTHER STORY.
5-7	Good	13-18	CCC Sample	MY ** HAS TROUBLE SLEEPING. EVERY MONTH I HAVE TO CALL THE DOCTORS FOR A REFILL; Q10) MY CHILD NEEDS TO GET BETTER DENTAL CARE; Q15) HAVEN'T ASK FOR EQUIPMENT; Q17) SHE HAS SPEECH THERAPY; Q20) I ASKED FOR REFERRALS
8-10	Very good	0-4	CCC Sample	MY CHILD HAS ADHD AND IS ALSO BEING TESTED FOR AUTISM.
8-10	Very good	0-4	CCC Sample	MY CHILD HAS AUTISM. HE RECEIVES PT, OT, SPEECH THERAPY, AND DEVELOPMENTAL THERAPY. HE HAS MADE GREAT STRIDES BEING IN THESE THERAPIES.
8-10	Excellent	5-8	CCC Sample	MY CHILD HAS DOWN SYNDROME.
	Good	13-18	CCC Sample	MY CHILD WAS COVERED BY BLUE CROSS BLUE SHIELD INSURANCE. WE DID NOT USE AR KIDS. WE LOST PRIVATE INSURANCE OCTOBER 2025. WE HAVE NOT USED THE AR KIDS YET.

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0-4	Very good	13-18	CCC Sample	MY CHILDS 'OTHER' MEDICAL CONDITION OTHER THAN REGULAR CHECK-UPS IS PLAQUE PSORIASIS. SHE HAS HAD THIS CONDITION ALL HER LIFE AND HAS BEEN ON MEDICATION.
8-10	Very good		CCC Sample	MY DAUGHTER HAS CRANIOSTIMOSIS. IT HAS NOT AFFECTED HER YET, BUT SHE MAY HAVE SOME DENTAL ISSUES SHOW UP.
8-10	Very good	13-18	CCC Sample	MY DAUGTHER'S HEALTH CARE PLAN IS OVERALL VERY GOOD. BUT SOMETIMES IT'S DIFFICULT TO GET REFERRALS FOR SERVICES SUCH AS FOR HER MENTAL HEALTH OR ANXIETY. PLUS, IT'S A LITTLE TEDIOUS TO HAVE TO GET THE REFERRAL FROM HER PCP YEARLY, INSTEAD OF IT JUST STAYING ON FILE. IT BECOMES A LITTLE COMPLICATED TO GET WITHOUT MAKING AN APPOINTMENT, AND I FEEL LIKE I SHOULDN'T HAVE TO MAKE HER AN APPOINTMENT JUST TO GET A REFERRAL WE'VE ALREADY GOTTEN PREVIOUSLY. ALSO, HER INSURANCE SOMETIMES DOESN'T WANT TO COVER CERTAIN MEDICATIONS HER MENTAL HEALTH CARE DOCTORS/THERAPIST PRESCRIBE TO HER. OTHER THAN THAT, WE ARE OVERALL HAPPY WITH HER INSURANCE. THANK YOU!
8-10	Very good	9-12	CCC Sample	MY GRANDDAUGHTER HAS ADHD. OTHERWISE SHE IS VERY HEALTHY.
	Good	13-18	General Sample	MY GRANDDAUGHTER WAS SEEING A SPECIALIST FOR HER TUMMY. HE RELEASED HER. NOW SHE WILL HAVE AN OB DOCTOR. SHE IS SEEING A THERAPIST.
8-10	Excellent	13-18	CCC Sample	MY SON ** HAS AN A.D.H.D. PROBLEM. HE WAS DIAGNOSED AT THE AGE OF 7 YEARS OLD. HE TAKES MEDICATION FOR IT, AND IT IS AMAZING THE CHANGE IT MADE FOR HIM.
5-7	Excellent	13-18	CCC Sample	MY SON HAD TO HAVE SEVERAL BABY TEETH EXTRACTED SO HIS MEDICAL DR. WASN'T INVOLVED AND THAT'S WHY HE WOULDN'T HAVE BEEN 'UP-TO-DATE' (QUESTION #35), TO MY KNOWLEDGE. WE HAVEN'T SEEN HIM SINCE THE SURGERY. HE MAY KNOW, BUT THERE WAS NO 'I DON'T KNOW' OR 'NOT APPLICABLE' BOX. ALSO, I WISH WE HAD MORE OPTIONS FOR ORTHODONTIC CARE. MY SON'S INSURANCE ISN'T ACCEPTED AT MOST ORTHOS NEAR US. GETTING A DENTIST IS ALSO VERY CHALLENGING AS A NEW PATIENT LONG WAITS FOR MEDICAID. HOWEVER, WE ARE GRATEFUL FOR THE SERVICES.
8-10	Very good	13-18	CCC Sample	MY SON HAS AUTISM, AND HE WAS AN IEP IN HIS SCHOOL.
8-10	Good	5-8	CCC Sample	MY SON HAS BEEN DIAGNOSED WITH ADHD AND IS ON MEDICINE!

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8-10	Good	0-4	CCC Sample	ONLY COMPLAINTS I HAVE ARE DUE DATES WHEN TURNING IN RENEWAL OR NEEDED PAPERWORK. THEY ARE UNREALISTIC WHEN YOU HAVE TO WAIT FOR OTHER PARTIES TO FILL OUT PAPERS AS WELL. OUTSIDE OF THAT, WE HAVE BEEN MORE THAN GREATFUL FOR THIS COVERAGE.
8-10	Very good	13-18	CCC Sample	OUR INSURANCE FOR ** IS AMAZING! WE WOULDN'T CHANGE ANYTHINIG. HER PROVIDERS ARE GREAT TOO.
5-7	Poor	5-8	CCC Sample	OUR PROVIDERS TRIED MULTIPLE TIMES TO GET OUR SON INTO ** IN BENTON. TWO DIFFERENT PRIOR AUTHORIZATIONS AND 1 APPEAL WAS DENIED. THE REASON WE WERE GIVEN WAS HE WAS TOO YOUNG (PER THE 7/2025 LAW), BUT THERE IS A SEPARATE PROGRAM THAT HELPS WITH PEDIATRIC NEURO CASES THAT DOES NOT FALL UNDER THIS LAW. WE FEEL AS THOUGH INSURANCE SAW HIS AGE, WHERE IT WAS COMING FROM, AND AUTOMATICALLY DENIED IT WITHOUT READING WHAT IT WAS ABOUT. VERY FRUSTRATING BECAUSE I FEEL LIKE MY CHILD IS BEING FAILED AND CANNOT GET THE HELP HE NEEDS! PLEASE, IF ANYONE CAN HELP. PLEASE REACH OUT TO ME!!!
8-10	Very good	0-4	General Sample	PLEASE ALL QUESTIONS IN SPANISH, THANK YOU
0-4	Excellent	5-8	CCC Sample	PLEASE CREATE SPECIFIC RENEWAL PAPERWORK. THERE IS ALWAYS A CHALLENGE RENEWING THIS DUE TO THE DIFFERENCE IN REQUIRED DOCUMENTS. IF THE PAPERWORK WAS MORE STRAIGHTFORWARD THEN THIS WOULD BE A SIMPLE PROCESS. ALSO, PLEASE ADJUST THE AUTO-GENERATED DATES ON ALL MEDICAID PAPERWORK THAT IS MAILED. BY THE TIME I RECEIVE IT, I ONLY HAVE LESS THAN A WEEK BEFORE 'COVERAGE IS DROPPED' OR 'A CLAIM IS DENIED.' IT IS VERY DISAPPOINTING TO SEE THAT THE PAPERWORK WAS GENERATED 2 WEEKS PRIOR AND I AM THE ONE LEFT SCRAMBLING. PLEASE CORRECT THIS.
8-10	Excellent	0-4	General Sample	Q 55) SHE NEEDS MEDS BECAUSE SHE HAS RHINOVIRUS FEBRUARY 1-7TH
8-10	Excellent	5-8	General Sample	Q17 AND Q64) REFERRING TO QUESTION #17: I DO NOT UNDERSTAND WHICH ONE TO CHECK BECAUSE THE CHILD RECEIVES SPECIAL THERAPY SUCH AS PHYSICAL, SPEECH, AND OCCUPATIONAL AT HIS SCHOOL. I DO NOT KNOW THE CORRECT CHECK BOX TO MARK. THIS EXTENDS TO QUESTION #64 AS WELL. THE CHILD'S SCHOOL THERAPIST MAY HAVE THE CORRECT ANSWERS. SORRY, THANK YOU ** **
8-10	Excellent	0-4	General Sample	Q18) HAS NOT BEEN EVALUATED YET

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8-10	Excellent	5-8	CCC Sample	Q27) THEY LOST THEIR SHOT RECORD SO SHE HAD THE SAME SHOT TWICE. Q32) THE PHYSICIAN WAS IN THE ROOM 0 MINS LAST VISIT; MY CHILD ONLY SAW A NURSE; Q40) ASKED FOR REFERRAL. HAVEN'T HEARD BACK.
8-10	Very good	9-12	CCC Sample	Q30) HE HAS LEVEL 3 AUTISM. I SPEAK FOR HIM
8-10	Very good	5-8	General Sample	Q34) HE WAS IN THE HOSPITAL AFTER GETTING TONSILS OUT
8-10	Excellent	13-18	General Sample	Q36) MY PCP HAS MOVED; THE URGENT CARE DOC FROM TOWN IS NOW OUR PCP, AND HE HAS NOT YET SEEN MY CHILD FOR A CHECKUP, JUST URGENT CARE; Q44) WILL CALL ON MONDAY; Q45) MY SON'S URGENT CARE BILL WASN'T PAID; Q49) OTHER THAN MOST RECENT CHARGES.
8-10	Very good	9-12	CCC Sample	Q52) DAUGHTER IS ON ADDERALL FOR ADHD. HER DOCTOR CALLS IN PRESCRIPTION WHEN NEEDED
8-10	Very good	0-4	General Sample	Q77) SPANISH PLEASE
5-7	Excellent	0-4	General Sample	REFERRAL NEEDED FOR URGENT CARE COVERAGE FROM PCP. THIS WAS FOR A FLU TEST DURING WINTER WEATHER, AND THE PCP WAS STILL CLOSED.
8-10	Excellent	13-18	General Sample	SERVICE WITH A SMILE =)
8-10	Excellent	13-18	General Sample	SHE HAS ONLY BEEN FOR AN EAR CHECK. OTHER THAN THAT, JUST TEETH CLEANED.
8-10	Good	5-8	CCC Sample	SOME OF THE MEDICATIONS THE DOCTORS WANTED TO USE ARE NOT COVERED BY MEDICAID, AND THE ALTERNATIVES USED HAVE NOT BEEN VERY GOOD AND HAVE HAD LOTS OF SIDE EFFECTS.
8-10	Very good	5-8	CCC Sample	SOMETIMES IT IS HARD TO GO TO A WALK-IN CLINIC OR URGENT CARE PLACES BECAUSE OF THE REFERRAL REQUIREMENT. I JUST WANTED TO POINT OUT IT'S SOMETIMES SCARY AND DIFFICULT WHEN YOU NEED HELP FAST. ALSO, TRAVELING OUT OF STATE IS HARD BECAUSE THE HEALTH PLAN ONLY WORKS IN ARKANSAS.
8-10	Excellent	9-12	CCC Sample	SON HAS ADHD.
8-10	Poor	9-12	CCC Sample	THANK YOU FOR ALL THE HELP YOU PROVIDE TO OUR FAMILY. THANK YOU FOR HELPING US TRY TO SAVE OUR SON.
8-10	Good	0-4	General Sample	THANK YOU FOR CONSIDERING US. WE ARE HAPPY WITH THE SERVICE

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8-10	Very good	0-4	General Sample	THANK YOU FOR THE GOOD COVERAGE THAT MEANS SO MUCH FOR OUR LITTLE FAMILY
8-10	Good	13-18	CCC Sample	THANK YOU FOR THE HEALTH CARE PLAN YOU OFFER MY SON; WITHOUT IT, HE WOULDN'T GET THE CARE HE NEEDS. **
0-4	Fair	13-18	General Sample	THANK YOU!
8-10	Excellent	0-4	General Sample	THANKS
8-10	Good	5-8	General Sample	THANKS!
5-7	Good	5-8	CCC Sample	THE CHILD HAS ADHD. HE HAS PROBLEMS WITH ATTENTION.
5-7	Good	5-8	CCC Sample	THE LACK OF COORDINATION BETWEEN MY CHILD'S PERSONAL DOCTOR AND ANY SPECIALIST WE'VE SEEN IS ABSURD! WE WERE REFERRED TO THE ENT BY THE PERSONAL DOCTOR TO CHECK IF HER ADENOIDS NEEDED REMOVAL. IT IS IN HER CHART THAT THEY WERE REMOVED 2 YEARS AGO! ALSO, **'S GI CLINIC WAS AWFUL WITH COMMUNICATION BEFORE, DURING, AND AFTER MY DAUGHTER'S 3-DAY STAY FOR A BOWEL CLEARING. I WAS BEYOND UPSET WITH THE LACK OF CLEAR COMMUNICATION OR EVEN ANY COMMUNICATION. I DID NOT KNOW UNTIL WE'D BEEN THERE 24 HOURS THAT WE'D BE STAYING 2 MORE NIGHTS, AND THEY THEN TOLD ME I SHOULD HAVE KNOWN BECAUSE IT IS STANDARD. I HADN'T PREPARED FOR MORE THAN 24 HOURS AND WE LIVE 3 HOURS AWAY FROM THE HOSPITAL.
5-7	Good	13-18	CCC Sample	THE ONLY CONCERN WE HAVE IS THERE ARE VERY FEW PROVIDERS FOR MENTAL HEALTH AND EVEN FEWER QUALIFIED PROVIDERS. THERE ARE JUST NOT MANY MEDICAID-ACCEPTING MENTAL HEALTH PROVIDERS.
8-10	Fair	13-18	CCC Sample	THE ONLY THING I WOULD CHANGE ABOUT ARKIDS IS THAT I SHOULD BE ABLE TO TAKE THEM TO AN URGENT CARE WITHOUT A REFERRAL, ESPECIALLY ON A WEEKEND OR EVENING. THE STATE IS PAYING A LOT MORE FOR AN EMERGENCY ROOM TRIP THAN AN URGENT CARE TRIP.
8-10	Fair	5-8	CCC Sample	THE PROBLEM IS THAT, WHILE I WAS ON THIS INSURANCE, I WAS CUT OFF WITH NO NOTIFICATION PRIOR TO LOSING INSURANCE. I AM A DIABETIC, AND I WENT TO THE DOCTOR TO LEARN I HAD NO COVERAGE. THEN GOT A LETTER DATED 10 DAYS AFTER I LOST COVERAGE THAT I WAS LOSING COVERAGE.

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8-10	Excellent	13-18	CCC Sample	THE SERVICE MEDICAID PROVIDES IS WONDERFUL. I AM VERY THANKFUL FOR THIS PROGRAM. I DO WISH THAT THE INCOME STANDARD WAS HIGHER SO MORE PEOPLE WHO NEED IT COULD QUALIFY.
8-10	Excellent	13-18	CCC Sample	THE WORST PART OF THE PLAN IS THAT IT IS IN STATE ONLY. WE DO TRAVEL OUT OF STATE SOMETIMES. WHEN WE DO, THERE IS NO HEALTHCARE FOR THEM WITH AR KIDS.
0-4	Fair	9-12	CCC Sample	THIS IS AN ADOPTED CHILD, ADOPTED THROUGH THE STATE. HIS MEDICAID DOES NOT COVER ALL NEEDS AS IT SHOULD. HE HAS PROBLEMS DUE TO HIS BIOLOGICAL MOM'S CHOICES, AND WE STILL CAN'T GET HIM QUALIFIED FOR ALL THAT NEEDS TO BE ADDRESSED. HE'S NOT 'BAD ENOUGH' IN ALL AREAS, SO HE FALLS IN THE CRACKS FOR SERVICES.
5-7	Good	9-12	General Sample	THIS IS MY GRANDDAUGHTER THAT LIVES WITH ME. I HAVE GUARDIANSHIP.
8-10	Excellent	0-4	CCC Sample	UNABLE TO RECEIVE ARA THERAPY DUE TO LIMITED AMOUNT OF CARE PROVIDERS IN THE JONESBORO AREA. MANY CHILDREN WON'T BEGIN SCHOOL UNTIL AGE 5 OR KINDERGARTEN.
8-10	Excellent	0-4	General Sample	WE ARE FORTUNATE NOT TO NEED VERY MUCH HEALTH CARE AT ALL FOR OUR KIDS, SO OUR HEALTH CARE PLAN IS NOT A BIG PART OF OUR LIFE. WE APPRECIATE HAVING CONTINUITY OF CARE COVERED BY MEDICAID/ARKIDS 1ST, SO EACH YEAR WE SEE THE SAME DR. AT WELL CHECKS. I TRUST HIM TO ADVISE ME ON ANY ISSUES. THEY GIVE THE KIDS THEIR IMMUNIZATIONS. I CAN'T SPEAK TO HOW THE SYSTEM WORKS FOR THOSE WITH MORE COMPLEX HEALTH CARE NEEDS. LUCKILY. WE HAVEN'T HAD TO SEE THE DR. FOR ANYTHING MORE THAN A FEVER/TICK BITE/YEARLY CHECK-UP SO FAR. THANKS FOR WHAT Y'ALL DO. BEST, **
8-10	Very good	13-18	General Sample	WE ARE IN NORTHWEST ARKANSAS. DOCTORS HERE ARE WONDERFUL, BUT THERE AREN'T ENOUGH PEDIATRIC DENTISTS OR ALLERGISTS/IMMUNOLOGISTS

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8-10	Very good	9-12	CCC Sample	WE ARE REALLY THANKFUL. HEALTHCARE, SPEECH, AND OT HAVE BEEN FUNDED WITHOUT A PROBEM OVER THE MANY YEARS FOR MY SPECIAL NEEDS SON. THE AREAS THAT NEED IMPROVEMENT WOULD BE THE EASE OF COMMUNICATIN WITH A PERSON WHEN I HAVE QUESTIONS. TRYING TO FIND THE CORRECT PHONE NUMBER OR EMAIL AND THE CORRECT PERSON TO ANSWER THE QUESTIONS HAVE BEEN CHALLENGING. ALSO, GETTING ABA SERVICES HAVE GOTTEN MORE CHALLENGING OVER THE PAST FEW YEARS. ABA BEHAVIOURAL THERAPY HAS BEEN SUCH A BLESSING FOR OUR ASD CHILD AND OUR FAMILY. ABA THERAPY HAS BEEN SUCH A BENEFIT FOR US, AND WE WISH IT WOULD BE EASIER TO GET FUNDING.
0-4	Good	13-18	CCC Sample	WE HAVE BEEN WAITING FOR SURGERY FOR ** SINCE 2024 ** HAS HIP DISCPLACE IN BOTH HIPS, HE TRIPS OVER HIS LEFT FOOT ALL THE TIME. STILL HAVE NOT HEARD WHEN. HE ALSO HAS ADHD , HAD IT SINCE HE WAS 4 YRS OLD, 20 MG 1 X DAY, CAN'T GET THAT EITHER. HE HAS TROUBLE FOCUSING ON HIS SCHOOL WORK. HE IS ALSO EASY TO ANGER. FIRST TIME I HAVE HAD PROBLEMS GETTING THE MEDICINE. NOT A HAPPY CAMPER IN VAN BUREN, AR.
8-10	Excellent	0-4	General Sample	WE HAVE HAD NO ISSUES THUS FAR! APPRECIATE EVERYTHING THAT IS DONE TO HELP
5-7	Very good	0-4	CCC Sample	WE HAVE LONG WAITS TO GET IN WITH SPECIALISTS, SOMETIMES 4-6 MONTHS. PRIMARY CARE IS FAST. MOST OF OUR ISSUES WE ENCOUNTER COME FROM PEOPLE IN MEDICARE DENYING EQUIPMENT. WE CAN USUALLY GET IT APPROVED WITH DOCTOR'S HELP.
8-10	Very good	0-4	General Sample	WE LOVE THIS HEALTH PLAN. IT HAS HELPED US SO MUCH. WITH IT, MY DAUGHTER CAN GET MEDICAL HELP SHE NEEDS. THE ONLY PROBLEM WE HAVE HAD IS TROUBLE GETTING A DOCTOR ASSIGNED THAT WILL SEE HER AGE GROUP. WE HAVE HAD A COUPLE OF DOCTORS THAT AREN'T PEDIATRIC DOCTORS ANYMORE AS WELL, SO THE LIST PROBABLY NEEDS UPDATED. WE ARE THANKFUL TO BE ABLE TO HAVE THIS HEALTH PLAN FOR OUR DAUGHTER.
5-7	Fair	9-12	General Sample	WE NEED MORE DOCTORS FOR THE COMMUNITY AREA. THE APPOINTMENTS TAKE SO LONG AND ARE SOMETIMES MORE THAN A WEEK'S WAIT. SOMETIMES THERE IS NOT AN APPOINTMENT WHEN WE NEED THE DOCTOR TO CHECK OUR CHILDREN THE MOMENT THEY GET SICK AND SOMETIMES WE HAVE TO TAKE THEM TO THE HOSPITAL. THANK YOU FOR EVERYTHING.
8-10	Very good	13-18	CCC Sample	WE SHOULD HAVE MORE BENEFITIS FOR ORTHODONTIST, OVERALL GOOD PLAN.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Excellent	5-8	CCC Sample	WE TRAVEL FOR WORK, AND WE WISH WE COULD GET A PCP WHERE WE ARE LOCATED. WE TRAVEL AND STAY IN LITTLE ROCK EVERY WEEK. RIGHT NOW, WE TRAVEL 2 1/2 HOURS BACK AND FORTH FOR CARE. THANK YOU FOR LETTING US FILL THIS OUT!!
5-7	Very good	5-8	CCC Sample	WHILE THIS SURVEY FOCUSED ON DOCTORS' HELP, I WISH IT ALSO ASKED QUESTIONS IN REGARD TO HOW MUCH BIG WORK, ADVOCATING, SACRIFICE, AND SO MUCH MORE THAT THE PARENTS HAVE TO DO IN ORDER TO GET SERVICES FOR OUR CHILDREN. YES, DOCTORS HELP OUT OR POINT YOU IN THE DIRECTION YOU NEED TO GO, BUT IT IS LITERALLY ON THE PARENT TO KEEP PUSHING, CALLING, EMAILING, GOING TO DIFFERENT PLACES, AND HAVING TO GO MANY DIFFERENT ROUTES TO FIGHT FOR OUR KIDS. I'M FOREVER GRATEFUL FOR ALL THE RESOURCES, BUT IT SHOULDN'T BE SO HARD TO GET SERVICES FOR SPECIAL NEEDS CHILDREN. Q19) I WOULD SAY YES AND NO BECAUSE A LOT FALLS ON THE PARENT. DOCTORS/NURSES GUIDE YOU BUT A LOT OF BIG WORK AND ADVOCATING ON PARENTS' END.

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