ARKids 1st B

2025 Beneficiary Satisfaction Survey Results



afmc℠

ARKANSAS DEPARTMENT OF HUMAN SERVICES

ARKIDS FIRST B BENEFICIARY SATISFACTION SURVEY

2025 Beneficiary Satisfaction Survey Results

TABLE OF CONTENTS

Executive Summary 1

Survey Overview and Methodology 6

Demographics of Population, Survey Sample, and Respondents 11

ARKids First B Health Care Access 15

Composite Analysis 16

Trend Analysis 24

Comparisons with Benchmark Data 27

Demographic Analysis 31

State and Regional Analysis 40

Further Analysis of ARKids First B 45

ARKids First B Frequency Tables 48

ARKids First B Comments 73

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. It was first noted as an innovative program and later became a model for the Children's Health Insurance Program (CHIP) federal mandate. The ARKids Program provides a complete package of benefits under two options based on family income. Low-income families are eligible for ARKids First A, while ARKids First B is for children without employer-sponsored or group health insurance.[1] ARKids First B is for children who meet income requirements, who do not have employer-sponsored or group health insurance, are not privately insured, and have not been insured for at least 90 days prior to application. Children who have lost insurance involuntarily may qualify for immediate coverage. In state fiscal year (SFY) 2025, ARKids First B provided for the healthcare needs of approximately 29,000 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 set of items to better address the needs of children with chronic conditions. The goal of the Children with Chronic Conditions (CCC) item set is to identify children with chronic conditions, assess their experiences with the healthcare system, and compare their experiences to those without chronic conditions in the same plan.

The 2025 survey used the Healthcare Effectiveness Data and Information Set (HEDIS®) Consumer Assessment of Healthcare Providers and Systems (CAHPS®) 5.1H Survey with CCC Measure instrument.[2] AFMC is a National Committee for Quality Assurance (NCQA)-certified HEDIS® survey vendor. A total of 4,810 surveys were mailed to parents/guardians of children who were ARKids First B beneficiaries from July through December of 2024 (SFY 2025). Of those mailed surveys, AFMC received 680 surveys. The analyzable sample size excluded beneficiaries with invalid addresses and respondents who were found to be otherwise ineligible. One individual refused to participate by phone. After removing beneficiaries deemed ineligible (5 respondents), beneficiaries with incomplete surveys per NCQA specifications (4 respondents), and adjusting for invalid addresses (433), 671 surveys were available for analysis from an analyzable sample size of 4,372, resulting in an analyzable response rate of 15.4%. This report summarizes the 2025 ARKids First B Beneficiary Satisfaction Survey results collected from February through April of 2025.

This comprehensive analysis will assist DMS in determining which services beneficiaries use, how beneficiaries evaluate the ARKids First B program and its services, and key opportunities for improving member experiences. Additionally, survey results compared the general ARKids First B population and the ARKids First B Children with Chronic Conditions population. Further comparisons are provided with the 2024 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 are focused on the best-case scenarios and fewer respondents. However, 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).

[1] Arkansas Department of Human Services. "Are We Eligible for ARKids Coverage?" Arkansas Department of Human Services, accessed June 24, 2025. https://humanservices.arkansas.gov/divisions-shared-services/medical-services/healthcare-programs/arkids/are-we-eligible-for-arkids-coverage.

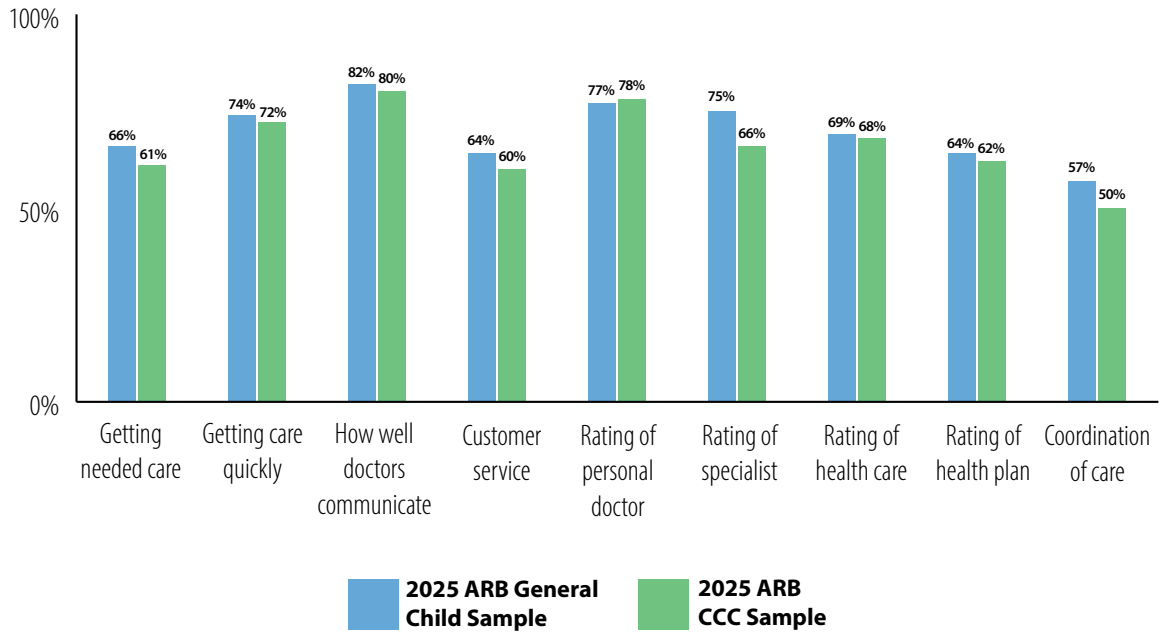
[2] HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA). CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

Table 1 and Figure 1 show the overall composite and rating percentages for the ARKids First B program for the general child respondents and the respondents identified as Children with Chronic Conditions, applying NCBD response option rates—"always" for composite components and the summary rate question, and 9 or 10 for rating questions.

TABLE 1: COMPOSITES AND RATINGS

COMPOSITES/RATINGS	GENERAL CHILD	GENERAL CHILD NCBD 2024	CHILDREN WITH CHRONIC CONDITIONS	CHILDREN WITH CHRONIC CONDITIONS NCBD 2024
Getting needed care	66%	61%	61%	56%
Getting care quickly	74%	71%	72%	69%
How well doctors communicate	82%	81%	80%	78%
Customer service	64%	66%	60%	65%
Rating of personal doctor	77%	76%	78%	74%
Rating of specialist	75%	74%	66%	70%
Rating of health care	69%	69%	68%	64%
Rating of health plan	64%	69%	62%	63%
Coordination of care	57%	59%	50%	53%

FIGURE 1.



The ARKids First B with CCC beneficiary 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**

The 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 B 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 11), ARKids First B Beneficiary Health Care Access (Page 15), Composite Analysis (Page 16), Trend Analysis (Page 24), and Comparisons with Benchmark Data (Page 27) in this report.

AFMC compared the 2025 ARKids First B survey general child sample results with the 2025 CCC sample results and the 2024 NCBD national rates.

Demographic comparisons of the general child sample of respondents had a significantly higher proportion of children ages 0–3 than the CCC sample of respondents. The proportion of parents/caregivers with a high school degree or less was significantly higher for the general child 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 2025 ARKids First B survey sample demographics were compared with the population and the demographics of the survey respondents. Based on the population data, 48.1% of survey respondents were "white," followed by 22.4% of respondents having an unknown race. A larger percentage of respondents were "male" (52.9%) than "female" (47.1%). The majority (42.9%) of respondents were from the "12–18" age group. This year's data also shows that more respondents are located in the "Northwest" region (40.4%) than any other region of the state.

Parents and caregivers of ARKids First B beneficiaries were surveyed about their satisfaction with specific aspects of the health plan. Satisfaction levels were then compared between the general child population and children with chronic conditions enrolled in ARKids First B. The proportion of beneficiaries reporting that it was "usually" or "always" easy to get prescription medicine was non-significantly higher for beneficiaries of the general child sample (94.7%) than for beneficiaries of the CCC sample (93.0%). 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 (94.7%) than the CCC sample (92.3%).

When comparing the ARKids First B 2025 survey results of the general child sample with the survey results of the CCC sample, AFMC found that for both samples, all composite measures had a positive summary rate at or higher than 81.0%. The "obtaining check-up or routine care appointment as soon as needed" component of the "getting care quickly" composite for the general child sample had a non-significantly lower positive response (86.3%) than the CCC sample (87.4%). The general child sample had a significantly higher positive response (98.8%) for the "doctors explaining things in an understandable way to your child" component of the "how well doctors communicate" composite than the CCC sample (94.7%). The general child sample had no significant difference among all rating items and the question summary rate when compared to the children with chronic conditions sample.

Questions that comprise the chronic condition measurement set are contained within the HEDIS MY 2024 CAHPS 5.1H Child with CCC Survey. The questions are used as a screening tool to identify the subset of children with chronic conditions. Based on the screening tool used during analysis, 248 beneficiaries were considered to be children with chronic conditions. Within the "functional limitations compared with others of same age" health consequence section, of the respondents that indicated that their child is limited or prevented in his or her ability to do things most children of the same age can do, 98.6% of CCC beneficiaries said that this is due to medical, behavioral, or other health conditions. Seen in the "use or need for specialized services," 96.8% of CCC beneficiaries who said their child uses or needs specialized services due to medical, behavioral, or other health conditions 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 therapy" component had the highest summary rate (82.1%) of the "access to specialized services" composite. All components of the "family centered care: personal doctor who knows child" composite had a summary rate greater than 88.0%, and the "doctors understanding how your child's condition affects your child's life" component within this composite had the highest summary rate of 96.2% when compared to all other component questions.

When the 2025 survey results for the general child sample were compared with those of the previous year (2024), there were no significant differences among all composites and rating items. The summary rate for the component "doctors explaining things in an understandable way to your child" of the composite "how well doctors communicate" was significantly higher for the 2025 beneficiaries of the general child sample (98.8%) than the 2024 sample (93.4%). The 2025 general child sample had a more favorable "rating of specialist" (83.1%) than the 2024 general child sample "rating of specialist" (81.3%), although not significant.

The 2025 ARKids First B survey results for the CCC sample were compared with those of the previous year (2024). There were no significant differences among all composites and the corresponding components. The summary rate for the composite "how well doctors communicate" was slightly higher for the 2025 beneficiaries of the CCC sample (95.9%) than the 2024 sample (94.2%), along with all the corresponding components. The 2025 CCC sample had significantly higher ratings of personal doctor (91.3%) and health care (89.3%) than the 2024 CCC sample ratings of personal doctor (84.1%) and health care (82.1%).

Comparing 2025 ARKids First B survey results for the general child sample with the 2024 NCBD national survey results, ARKids First B satisfaction of 74% was significantly higher for the "getting care, tests, or treatment" component of the "getting needed care" composite when compared to the satisfaction of 67% from the NCBD general child populations. Three of the four composites' satisfaction rates were higher, but not significantly, for the general child sample than the 2024 national rate. The satisfaction with the "rating of health plan" question was significantly lower for the 2025 general child sample results than the 2024 NCBD national results.

In 2025, the CCC sample from the ARKids First B survey results had a significantly higher score (68%) for the "getting care, tests, or treatment" component of the "getting needed care" composite when compared to the 2024 CCC NCBD national rate (60%). The component question "obtaining check-up or routine care appointments as soon as needed" of the "getting care quickly" composite was significantly higher (71%) than the 2024 national CCC measure (63%). One component of the "how well doctors communicate" composite, "doctors listening carefully to you," had a significantly higher proportion of satisfaction for the 2025 CCC sample when compared to the 2024 NCBD rate.

Comparing the 2024 ARKids First B survey results of the CCC sample with the NCBD national survey results of the CCC sample for the CCC specific composite measures, AFMC found that the "doctors answering question you had" component of the "family centered care: getting needed information" composite was significantly higher for the 2025 ARKids First B CCC sample (82%) when compared with the NCBD national rate (72%). 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 at 75% when compared to the national rate of 57%.

Survey Overview and Methodology

BACKGROUND AND SURVEY INSTRUMENT

DMS chose AFMC to conduct the 2025 ARKids First B Beneficiary Satisfaction Survey using the HEDIS MY 2024 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 actual year the sample is from. 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 B Beneficiary survey in 1998. Effective January 1, 2024, the Centers for Medicare & Medicaid Services (CMS) established mandatory annual State reporting requirements as a major step in developing a national, evidence-based system for measuring and improving 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 as applied to both systematic samples of ARKids First B and ARKids First B with CCC beneficiaries. The CCC survey includes the same composite, rating, and individual question summary rate questions included in the HEDIS MY 2024 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 presented by summary rates, which represent the percentage of respondents who chose the most positive question responses as 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 child with chronic conditions results to assess how well the program performs among 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.

CHILDREN WITH CHRONIC CONDITIONS

CAHPS[3] references the Maternal and Child Health Bureau's definition of children with chronic conditions. Their definition 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, which identifies children who are more likely to have a chronic condition. 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 identifying them as children who are more likely to have a chronic condition and who 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's population. During analysis, a survey-based screening tool is used to identify children with chronic conditions based on responses to specific questions. The screening tool contains five sections representing five different health consequences. A child is identified as having a chronic condition if all questions within at least one specific health consequence are answered as "yes." The five health consequences used in the survey-based screening tool and 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 looks at the number of complete and eligible surveys obtained during prior years to determine if oversampling is necessary to achieve the goal of 411 complete surveys or the required denominator of 100 complete responses for each survey question, as recommended by NCQA. The 2024 ARKids First B results were used to determine the oversampling rate. NCQA guidelines allow oversampling for the general population without oversampling for the CCC supplemental sample.

Following NCQA guidelines, a total sample of 4,810 ARKids First B 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 1,840 were part of the supplemental sample. A total of 680 surveys were returned, resulting in a return rate of 14.2%. Of the 4,810 beneficiaries selected, 433 were found to have an invalid address, and 5 were deemed ineligible, resulting in an analyzable sample size of 4,372. There was one individual who refused to participate by phone. After removing beneficiaries deemed ineligible (5 respondents), beneficiaries with incomplete surveys per NCQA specifications (4 respondents), and adjusting for invalid addresses (433), 671 surveys were available for analysis from an

analyzable sample size of 4,372, resulting in an analyzable response rate of 15.4%. As seen in Table 2, response rates were calculated on the entire child population, as chronic condition flags are not established until the analysis phase.

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

ARKIDS FIRST B: CHILDREN WITH CHRONIC CONDITIONS SURVEY	2025
Total mailing sent	4,810
Ineligible: According to population criteria*	5
Ineligible: Language barrier*	0
Ineligible: Mentally or physically incapacitated*	0
Ineligible: Deceased*	0
Invalid address*	433
Analyzable sample size	4,372
Eligible: Incomplete (3 of 5 questions not answered per NCQA specifications)***	4
Refusal	1
Nonresponse**	3,696
Analyzable surveys returned	671
Analyzable response rate	15.4%

** 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 2024 Volume 3 Specifications for Survey Measures*

SAMPLING FRAME

Beneficiary information was obtained from Medicaid. AFMC used a systematic sampling method as outlined in the HEDIS MY 2024 Volume 3: Specifications for Survey Measures document. NCQA guidelines also require each beneficiary to be enrolled for a minimum of six months prior to participating in the survey, 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 B primary care case management (PCCM) enrollees who were 17 years old or younger as of December 31, 2024. A beneficiary's six-month continuous enrollment began on July 1, 2024. Only one beneficiary per household was selected.

SURVEY PROCEDURE

AFMC conducted a mail-only survey as telephone numbers or emails of beneficiaries were not available. An advance letter, written on DMS letterhead and signed by the director of DMS, was mailed to the parent/caregiver of the selected child beneficiary. The letter explained the purpose of the survey, informed the recipients of its confidential

and voluntary nature, and provided instructions for requesting a Spanish or Marshallese language version of the survey. Two weeks later, each beneficiary received a packet containing a questionnaire, a postage-paid return envelope, and a cover letter. The cover letter, on DMS letterhead and signed by the director, reiterated the information in the advance letter and gave specific instructions for completing and returning the survey. Beneficiaries who did not respond received a reminder notice mailed approximately 10 days later. One month after the initial survey was sent, any beneficiary who had not returned a survey received a second survey in the mail. Approximately 10 days after the second survey, they received a second reminder notice by mail (Table 3).

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

SURVEY TIMETABLE

TABLE 3. SURVEY MAILING DATES

SURVEY MAILINGS	DATE
Advance letter	January 23, 2025
First survey	February 7, 2025
First reminder notice	February 18, 2025
Second survey	March 7, 2025
Second reminder notice	March 17, 2025
Data collection cutoff	April 10, 2025

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 7th and April 10th were included in the 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. Total excluded or disqualified surveys represented 1.5% 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 680 surveys returned, one was a Spanish-language survey, and none were Marshallese-language surveys.

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 B population. The demographic data in Table 4 is derived from the population data, not from the 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, 48.1% of 2025 ARKids First B with CCC survey respondents were "white," followed by 22.4% of respondents having an unknown race. A larger percentage of respondents were "male" (52.9%) than "female" (47.1%). The majority (42.9%) of respondents were from the "12–18" age group. This year's data also shows that more respondents are located in the "Northwest" region (40.4%) than any other region of the state.

In this summary of the HEDIS MY 2024 CAHPS 5.1H Child with CCC Survey for the ARKids First B population, demographic comparisons will be made between the general sample respondents (general child) and the child with chronic conditions respondents (CCC sample). AFMC will highlight where significant differences occur between the two groups. A z-test will be used to determine any significant differences. Table 5 and Figure 2 illustrate percentages in various demographic categories from 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 of respondents had a significantly higher proportion of children ages 0–3 than the CCC sample of respondents. The general child sample had no significant differences in the proportion of respondents' race compared to the respondents in the CCC sample. The proportion of parents/caregivers with a high school degree or less was significantly higher for the general child sample. For child's overall health status and child's mental 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 B CHILDREN WITH CHRONIC CONDITIONS SAMPLE AND POPULATION DEMOGRAPHICS

DEMOGRAPHIC	BENEFICIARIES SURVEYED	PCT. OF TOTAL	ARKIDS FIRST B POPULATION**	ANALYZABLE RESPONSES	PCT. OF TOTAL	RESPONSE RATE***
RACE AND ETHNICITY						
White	1,995	45.6%	46.3%	323	48.1%	16.2%
Black or African-American	626	14.3%	13.0%	82	12.2%	13.1%
American Indian or Alaska Native	22	0.5%	0.5%	3	0.4%	13.6%
Hispanic or Latino	471	10.8%	11.8%	74	11.0%	15.7%
Asian American	59	1.3%	1.3%	19	2.8%	32.2%
Native Hawaiian or other Pacific Islander	22	0.5%	0.9%	0	0.0%	0.0%
Multiracial	108	2.5%	2.9%	20	3.0%	18.5%
Unknown	1,069	24.5%	23.3%	150	22.4%	14.0%
Total*	**4,372**	**100.0%**	**100.0%**	**671**	**100.0%**	**15.3%**
GENDER						
Female	2,115	48.4%	49.6%	316	47.1%	14.9%
Male	2,257	51.6%	50.4%	355	52.9%	15.7%
Total*	**4,372**	**100.0%**	**100.0%**	**671**	**100.0%**	**15.3%**
AGE						
0–3	942	21.5%	17.2%	110	16.4%	11.7%
4–7	969	22.2%	23.7%	134	20.0%	13.8%
8–11	907	20.7%	23.6%	139	20.7%	15.3%
12–18	1,554	35.5%	35.5%	288	42.9%	18.5%
Total*	**4,372**	**100.0%**	**100.0%**	**671**	**100.0%**	**15.3%**
GEOGRAPHIC REGION						
Northwest	1,598	36.6%	39.0%	271	40.4%	17.0%
Northeast	813	18.6%	18.8%	110	16.4%	13.5%
Central	1,178	26.9%	25.0%	165	24.6%	14.0%
Southwest	453	10.4%	10.1%	84	12.5%	18.5%
Southeast	330	7.5%	7.1%	41	6.1%	12.4%
Total*	**4,372**	**100.0%**	**100.0%**	**671**	**100.0%**	**15.3%**

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

***ARKids First B 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 B: CHILDREN WITH CHRONIC CONDITIONS SURVEY RESPONDENTS

DEMOGRAPHIC	CATEGORY	GENERAL CHILD	CHILDREN WITH CHRONIC CONDITIONS	SIGNIFICANCE TESTING GENERAL VS. CCC
Gender	Male	52.6%	53.7%	Not Significant
	Female	47.4%	46.3%	Not Significant
Age*	0–3	16.7%	10.5%	Significantly Higher
	4–7	20.3%	19.8%	Not Significant
	8–11	19.6%	24.6%	Not Significant
	12–18	43.4%	45.2%	Not Significant
Race*	White	67.5%	68.3%	Not Significant
	Black or African-American	12.8%	17.3%	Not Significant
	Asian	4.2%	1.6%	Not Significant
	Multiracial	4.7%	5.8%	Not Significant
	Other	10.8%	7.0%	Not Significant
Parent/ caregiver's education*	High school graduate or less	44.8%	35.2%	Significantly Higher
	Some college	33.8%	41.4%	Not Significant
	College graduate or more	21.4%	23.4%	Not Significant
Overall health status*	Excellent/very good	87.3%	65.7%	Significantly Higher
	Good	10.3%	25.8%	Significantly Lower
	Fair/poor	2.4%	8.5%	Significantly Lower
Mental health status*	Excellent/very good	81.6%	53.2%	Significantly Higher
	Good	15.8%	29.4%	Significantly Lower
	Fair/poor	2.7%	17.3%	Significantly Lower

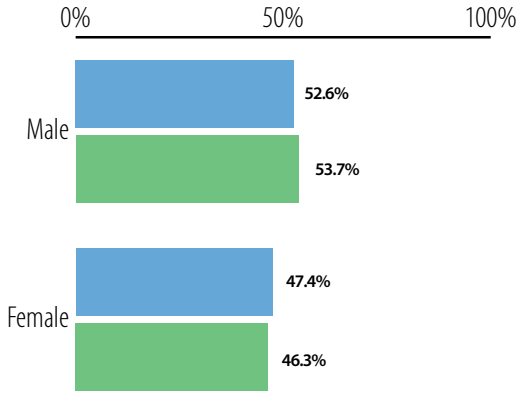
**Columns may not sum to 100% due to rounding*

FIGURE 2.

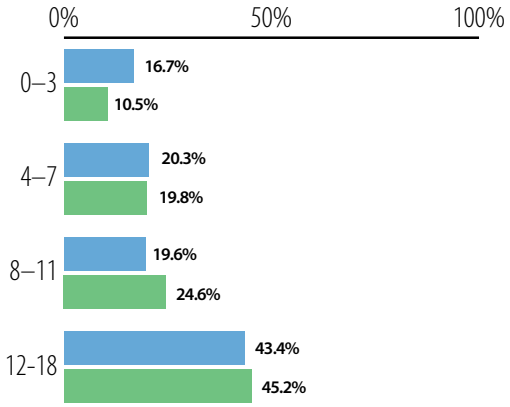
Demographics



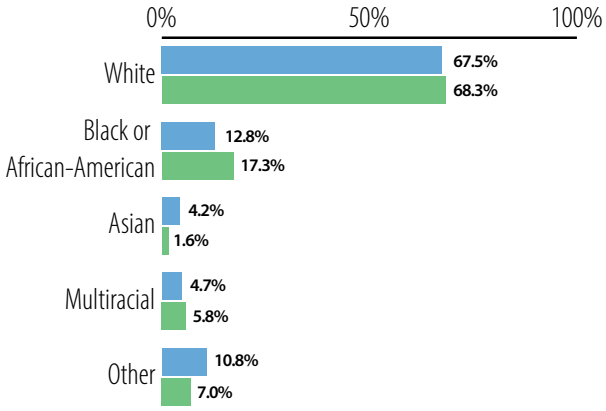
• GENDER



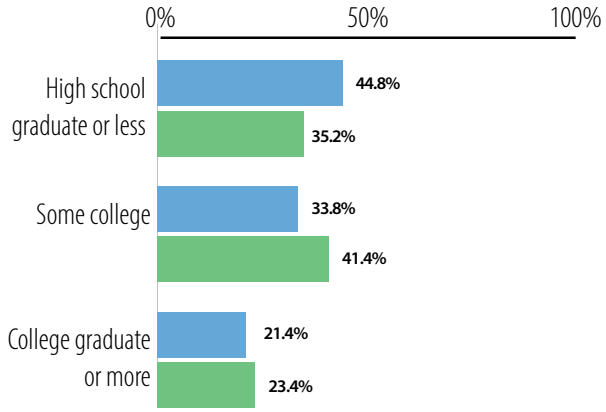
• AGE



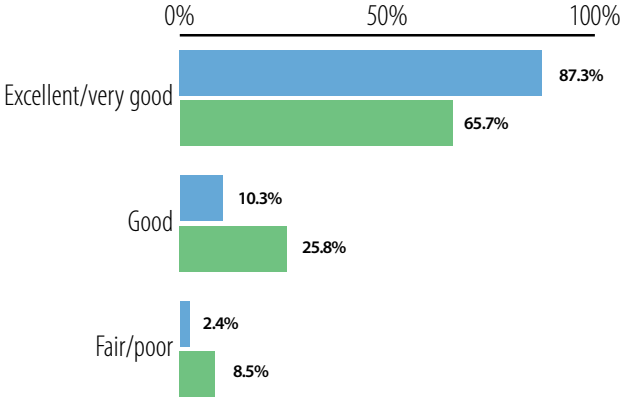
• RACE



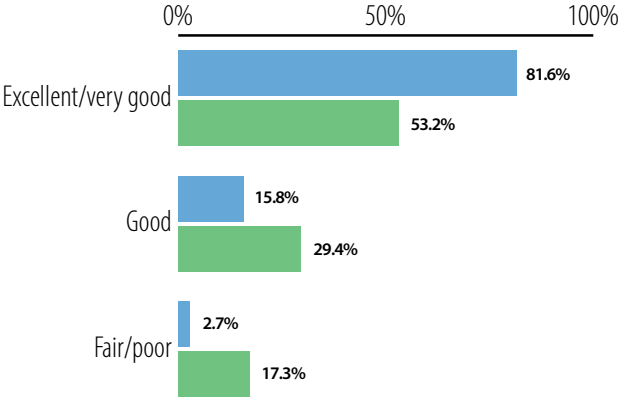
• PARENT/CAREGIVER'S EDUCATION



• OVERALL HEALTH STATUS



• MENTAL HEALTH STATUS



ARKids First B Health Care Access

Survey recipients were asked about the beneficiary's satisfaction with certain aspects of the health plan, such as setting up appointments, rating of their health care, and ease of getting appropriate care and prescription medicine. Table 6 compares the beneficiary satisfaction among the general child sample and the children with chronic conditions sample with the ARKids First B health plan.

TABLE 6. ARKIDS FIRST B: CHILDREN WITH CHRONIC CONDITIONS SATISFACTION WITH HEALTH PLANS

HEALTH CARE ACCESS AMONG GENERAL CHILDREN AND CHILDREN WITH CHRONIC CONDITIONS	2025		
	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	33 (13.8%)	24 (12.6%)	Not Significant
Usually or always	207 (86.3%)	166 (87.4%)	Not Significant
How often was it easy to get prescription medicine? (Q51)			
Never or sometimes	11 (6.0%)	14 (7.0%)	Not Significant
Usually or always	172 (94.7%)	185 (93.0%)	Not Significant
How often was it easy to get the care, tests, or treatment your child needed? (Q10)			
Never or sometimes	14 (5.3%)	15 (7.3%)	Not Significant
Usually or always	250 (94.7%)	181 (92.3%)	Not Significant
Mean rating of health care (Q9)	8.90	8.97	Not Significant

The percentage of parents/caregivers reporting that they were "usually" or "always" able to get an appointment for a check-up or routine care for their child as soon as their child needed was non-significantly lower among beneficiaries of the general child sample (86.3%) when compared to the CCC sample (87.4%). The proportion of beneficiaries reporting it was "usually" or "always" easy to get prescription medicine was non-significantly higher for beneficiaries of the general child sample (94.7%) than for beneficiaries of the CCC sample (93.0%). 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 (94.7%) than the CCC sample (92.3%). The mean rating of health care was slightly lower, but not significantly, for beneficiaries of the general child sample in the ARKids First B health plan when compared to the children with chronic conditions sample.

Composite Analysis

STANDARD COMPOSITES: GENERAL CHILD AND CHILDREN WITH CHRONIC CONDITIONS

The following section shows how the survey data differs 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 children with chronic conditions respondents. 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 the samples through a z-test, and 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 response at or higher than 81.0%. The "getting needed care" composite and all its corresponding components had a non-significantly higher positive response for the general child sample than the CCC sample. The "obtaining check-up or routine care appointment as soon as needed" component of the "getting care quickly" composite for the general child sample had a non-significantly lower positive response (86.3%) than the CCC sample (87.4%). For the "how well doctors communicate" composite and its corresponding components, the general child and CCC sample groups had positive response rates that were greater than 91.0%. The general child sample had a significantly higher positive response (98.8%) for the "doctors explaining things in an understandable way to your child" component of the "how well doctors communicate" composite than the CCC sample (94.7%). The general child sample had no significant differences among all rating items and the question summary rate when compared to the children with chronic conditions sample.

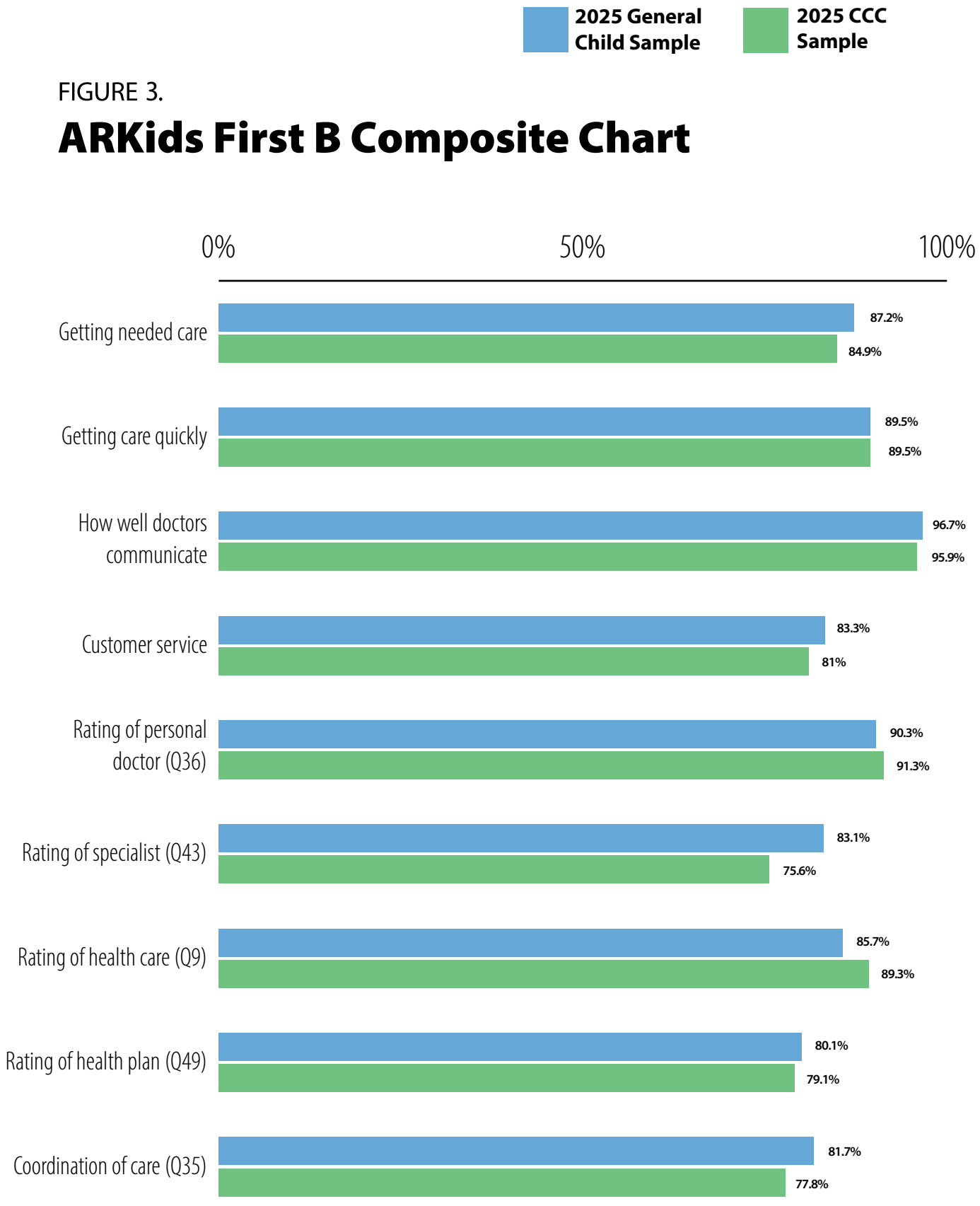
TABLE 7. STANDARD COMPOSITES AND COMPONENT QUESTIONS/RATING QUESTIONS

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		***87.2%***		***84.9%***	***Not Significant***
Q10. Getting care, tests, or treatment	264	94.7%	196	92.3%	Not Significant
Q41. Seeing a specialist	74	79.7%	89	77.5%	Not Significant
Getting care quickly		***89.5%***		***89.5%***	***Not Significant***
Q4. Obtaining care right away for an illness/ injury/condition	124	92.7%	120	91.7%	Not Significant
Q6. Obtaining check-up or routine care appointment as soon as needed	240	86.3%	190	87.4%	Not Significant
How well doctors communicate		***96.7%***		***95.9%***	***Not Significant***
Q27. Doctors explaining things in an understandable way	259	98.1%	208	97.1%	Not Significant
Q28. Doctors listening carefully to you	258	96.9%	208	97.1%	Not Significant
Q29. Doctors showing respect for what you had to say	257	98.1%	207	98.1%	Not Significant
Q31. Doctors explaining things in an understandable way to your child	172	98.8%	152	94.7%	Significantly Higher
Q32. Doctors spending enough time with your child	257	91.4%	207	92.3%	Not Significant
Customer service		***83.3%***		***81.0%***	***Not Significant***
Q45. Getting help when calling customer service	48	72.9%	42	76.2%	Not Significant
Q46. Being treated with courtesy and respect	47	93.6%	42	85.7%	Not Significant
Rating items					
Rating of personal doctor (Q36)	351	90.3%	231	91.3%	Not Significant
Rating of specialist (Q43)	71	83.1%	86	75.6%	Not Significant
Rating of health care (Q9)	265	85.7%	196	89.3%	Not Significant
Rating of health plan (Q49)	413	80.1%	244	79.1%	Not Significant
Question summary rate					
Coordination of care (Q35)	104	81.7%	126	77.8%	Not Significant

Columns may not sum to 100% due to rounding

FIGURE 3.

ARKids First B Composite Chart



CHILDREN WITH CHRONIC CONDITIONS SCREENING RESULTS

Questions that make up the chronic condition measurement set are contained within the HEDIS MY 2024 CAHPS 5.1H Child with CCC Survey. These questions are used as a screening tool to identify the subset of children with chronic conditions based on their responses.

Table 8 is specific to the children with chronic conditions sample. The screening tool contains five sections, each representing a different health consequence. A child qualifies as having a chronic condition if they answer "yes" to all questions within at least one specific health consequence. All screening sections, except for "treatment or counseling for emotional or development problems," are composed of three screener questions. Each section begins with a gate question; responding "yes" enables the respondent to proceed to the next question, while a "no" response prompts instructions to bypass the subsequent questions within that specific section on health consequences. This format also applies to the second question in each section, where a "yes" enables the respondent to proceed to the next question, while a "no" response instructs the respondent to skip it. 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, along with the percentage of respondents who answered "yes" to the question.

Based on the screening tool used during analysis, 248 beneficiaries were considered to be children with chronic conditions. As seen in Table 8, 74.5% of CCC beneficiaries answered "yes" when asked if their child currently needs or uses medicine prescribed by their doctor. Within the "functional limitations compared with others of same age" health consequence section, of the respondents that indicated that their child is limited or prevented in his or her ability to do things most children of the same age can do, 98.6% of CCC beneficiaries said that this is due to medical, behavioral, or other health conditions. For the "use or need for specialized services" screening question, 96.8% of CCC beneficiaries who said their child uses or needs specialized services due to medical, behavioral, or other health conditions said this condition has lasted or is expected to last at least 12 months.

TABLE 8. WITH CHRONIC CONDITION SCREENING TOOL

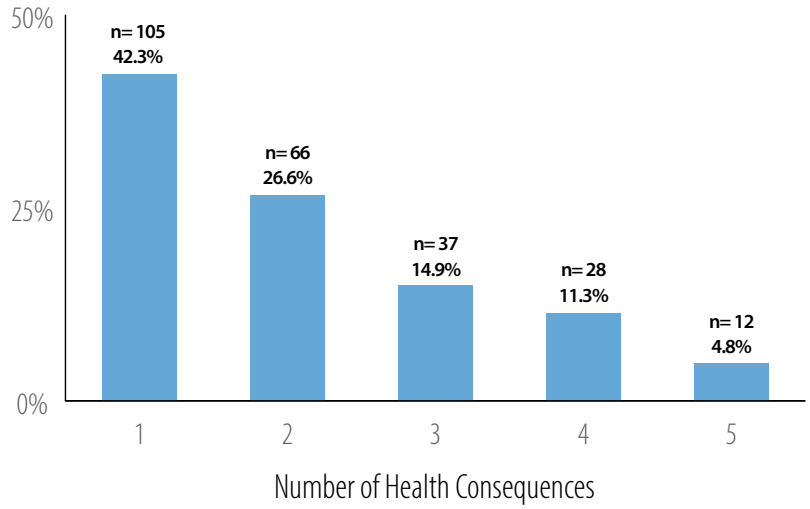
SCREENING QUESTIONS	CHILDREN WITH CHRONIC CONDITIONS	
	VALID n	POSITIVE RESPONSE RATE
Use of or need for prescription medicine		
Child currently need or use medicine prescribed by doctor (Q55)	247	74.5%
Prescribed medicine due to medical, behavioral, or other health condition (Q56)	182	97.3%
Condition lasted or expected to last at least 12 months (Q57)	177	97.7%
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)	248	47.2%
Services due to medical, behavioral, or other health condition (Q59)	117	95.7%
Condition lasted or expected to last at least 12 months (Q60)	112	99.1%
Functional limitations compared with others of same age		
Child limited or prevented in ability to do things (Q61)	248	28.2%
Limitations due to medical, behavioral, or other health condition (Q62)	69	98.6%
Condition lasted or expected to last at least 12 months (Q63)	68	98.5%
Use of or need for specialized therapies		
Child need or get special therapy (Q64)	248	31.5%
Therapies due to medical, behavioral, or other health condition (Q65)	77	80.5%
Condition lasted or expected to last at least 12 months (Q66)	62	96.8%
Treatment or counseling for emotional or development problems		
Child has emotional, developmental, or behavioral requiring treatment or counseling (Q67)	247	45.7%
Problem lasted or expected to last at least 12 months (Q68)	112	97.3%

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 three questions within a health consequence section. Each section is mutually exclusive; therefore, a respondent can be identified as part of the CCC sample based on multiple sections. **Figure 4** shows the number of beneficiaries with the number of consequences. As seen in this figure, 42.3% of the CCC sample were identified as having a child with chronic conditions because they responded affirmatively to all questions in only one health consequence section. Of the CCC sample, 57.6% answered "yes" to all questions for two or more health consequence sections.

FIGURE 4.

Number of Beneficiaries With Number of Health Consequences*



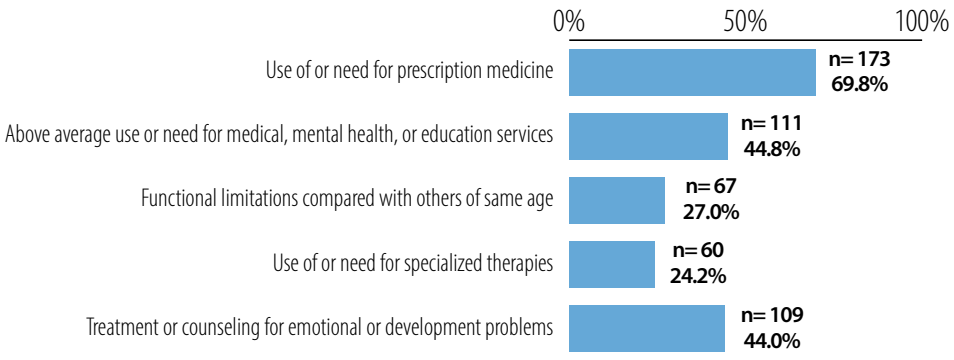
**Percentages may not sum to 100% due to rounding*

Figure 5 shows the number of respondents identified as part of 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 the figure to be independent of one another and not add up to 100.0%. Each percentage in the figure 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 (248 beneficiaries).

According to Figure 5, the "use of or need for prescription medicine" and "above average use or need for medical, mental health or education services" health consequence sections had the highest number of respondents who answered "yes" to all questions within the section (173 respondents and 111 respondents, respectively.) "Use of or need for specialized therapies" had the lowest number of beneficiaries who answered "yes" to all section questions, with only 24.2% of the CCC sample included because of this section.

FIGURE 5.

Screening Tool Health Consequences Sections



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 make up these composites, and individual items for children with chronic conditions. Following NCBD reporting, composite summary rates are not included in the table below. Additionally, only the beneficiaries who were flagged as children with chronic conditions were included in the summary rates in Table 9.

As seen in Table 9, the "getting therapy" component had the highest summary rate (82.1%) of the "access to specialized services" composite. All components of the "family centered care: personal doctor who knows child" composite had a summary rate greater than 88.0%, and the "doctors understanding how your child's condition affects your child's life" component within this composite had the highest summary rate of 96.2% when compared to all other component questions. The "help getting special medical equipment or devices" item had a high summary rate of 68.4%, among the individual items, followed by the "help getting therapy" item with a summary rate of 67.2%.

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)	19	63.2%
Getting therapy (Q18)	67	82.1%
Getting treatment or counseling (Q21)	83	73.5%
Access to prescription medicines		
Getting prescription medicine (Q51)	199	93.0%
Family centered care: personal doctor who knows child		
Doctors talking about child's feelings, growth, or behavior (Q33)	207	88.9%
Doctors understanding how your child's condition affects your child's life (Q38)	157	96.2%
Doctors understanding how your child's condition affects your family's life (Q39)	156	92.9%
Family centered care: getting needed information		
Doctors answering questions you had (Q8)	195	93.8%
Coordination of care for children with chronic conditions		
Doctors contacting your child's school or daycare (Q13)	24	91.7%
Doctors or staff coordinating child's care among other providers (Q24)	99	74.7%
Individual items		
Help getting special medical equipment or devices (Q16)	19	68.4%
Help getting therapy (Q19)	67	67.2%
Help getting treatment or counseling (Q22)	85	62.4%
Help getting prescription medicine (Q52)	198	65.2%

Columns may not sum to 100% due to rounding

Trend Analysis

The following section contains tables and graphs that show the survey data changes over time. Specifically, **Table 10** and **Figure 6** show each composite measure, the questions that make up these composites, overall rating questions, and the summary question for the current year (2025) and the previous year (2024). Although the trending graphs show 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.

When the 2025 survey results were compared with the 2024 results, the general child sample showed no significant differences among all overall composites and rating items. The summary rate for the "doctors explaining things in an understandable way to your child" component of the "how well doctors communicate" composite was significantly higher for the 2025 beneficiaries of the general child sample (98.8%) than the 2024 sample (93.4%). The 2025 general child sample had a more favorable "rating of specialist" (83.1%) than the 2024 general child sample "rating of specialist" (81.3%), although not significant.

When comparing the 2025 survey results with the 2024 results, the CCC sample showed no significant differences among all composites and the corresponding components. The summary rate for the "how well doctors communicate" composite was slightly higher for the 2025 beneficiaries of the CCC sample (95.9%) than the 2024 sample (94.2%), along with all the corresponding components. The 2025 CCC sample had significantly higher ratings of personal doctor (91.3%) and health care (89.3%) than the 2024 CCC sample ratings of personal doctor (84.1%) and health care (82.1%).

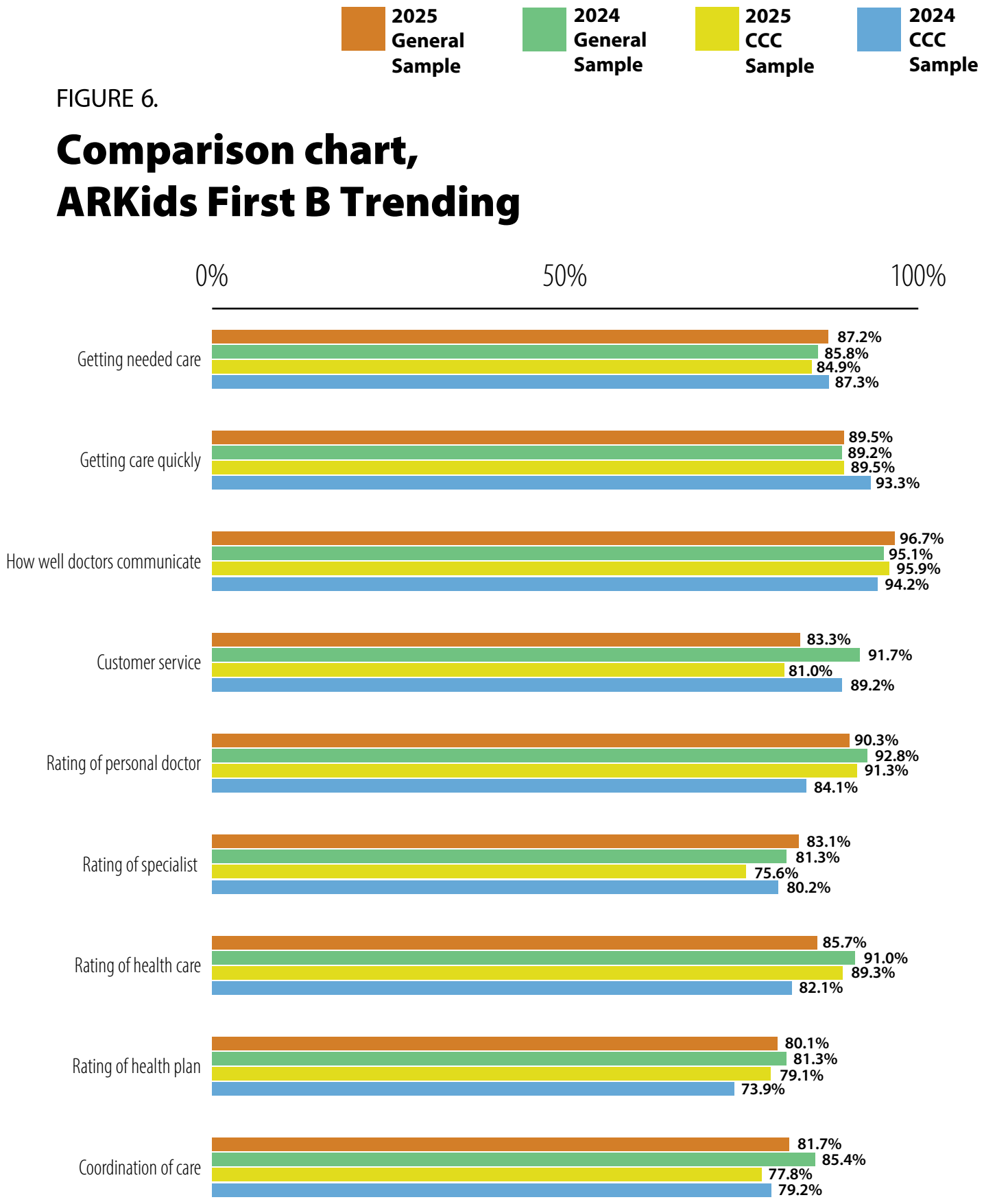
TABLE 10. ARKIDS FIRST B TRENDING TABLE

COMPOSITES/COMPONENTS AND RATING ITEMS	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITIONS		SIGNIFICANCE TESTING	
	2025	2024	2025	2024	GENERAL 2025 VS. GENERAL 2024	CCC 2025 VS. CCC 2024
Getting needed care	***87.2%***	***85.8%***	***84.9%***	***87.3%***	***Not Significant***	***Not Significant***
Q10. Getting care, tests, or treatment	94.7%	95.9%	92.3%	92.7%	Not Significant	Not Significant
Q41. Seeing a specialist	79.7%	75.8%	77.5%	81.9%	Not Significant	Not Significant
Getting care quickly	***89.5%***	***89.2%***	***89.5%***	***93.3%***	***Not Significant***	***Not Significant***
Q4. Obtaining care right away for an illness/injury/condition	92.7%	93.6%	91.7%	94.7%	Not Significant	Not Significant
Q6. Obtaining check-up or routine care appointment as soon as needed	86.3%	84.8%	87.4%	91.8%	Not Significant	Not Significant
How well doctors communicate	***96.7%***	***95.1%***	***95.9%***	***94.2%***	***Not Significant***	***Not Significant***
Q27. Doctors explaining things in an understandable way	98.1%	96.2%	97.1%	95.0%	Not Significant	Not Significant
Q28. Doctors listening carefully to you	96.9%	96.9%	97.1%	93.2%	Not Significant	Not Significant
Q29. Doctors showing respect for what you had to say	98.1%	98.1%	98.1%	96.8%	Not Significant	Not Significant
Q31. Doctors explaining things in an understandable way to your child	98.8%	93.4%	94.7%	93.6%	Significantly Higher	Not Significant
Q32. Doctors spending enough time with your child	91.4%	91.2%	92.3%	92.2%	Not Significant	Not Significant
Customer service	***83.3%***	***91.7%***	***81.0%***	***89.2%***	***Not Significant***	***Not Significant***
Q45. Getting help when calling customer service	72.9%	87.5%	76.2%	82.6%	Not Significant	Not Significant
Q46. Being treated with courtesy and respect	93.6%	95.8%	85.7%	95.7%	Not Significant	Not Significant
Rating items						
Rating of personal doctor (Q36)	90.3%	92.8%	91.3%	84.1%	Not Significant	Significantly Higher
Rating of specialist (Q43)	83.1%	81.3%	75.6%	80.2%	Not Significant	Not Significant
Rating of health care (Q9)	85.7%	91.0%	89.3%	82.1%	Not Significant	Significantly Higher
Rating of health plan (Q49)	80.1%	81.3%	79.1%	73.9%	Not Significant	Not Significant
Question summary rate						
Coordination of care (Q35)	81.7%	85.4%	77.8%	79.2%	Not Significant	Not Significant

Columns may not sum to 100% due to rounding

FIGURE 6.

Comparison chart, ARKids First B Trending



Comparisons with Benchmark Data

The NCBD website includes the latest national and regional comparison data collected by numerous organizations.[4] The rates displayed by NCBD for composite measures and their components, rating questions, and the summary rate item are displayed as whole percentages without any decimals. Therefore, in **Tables 11** and **12**, AFMC duplicated the same format when displaying ARKids First B summary rates. **Table 11** shows how ARKids First B compares with the national rates for the general child sample and the children with chronic conditions sample. The national percentages are shown in **Table 11** for comparison purposes only. **Table 12** displays the comparison of ARKids First B 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 B composites and ratings were recalculated to reflect such. For the composite and summary questions, only the response choices of "always" or "yes" were used. In the rating questions, response choices of "9" and "10" were used.

When comparing the ARKids First B 2025 survey results for the general child sample with the 2024 NCBD national survey results in **Table 11**, AFMC found the ARKids First B satisfaction of 74% was significantly higher for the "getting care, tests, or treatment" component of the "getting needed care" composite when compared to the satisfaction of 67% from the NCBD general child populations. Three of the four composites' satisfaction rates were higher for the general child sample, but not significantly, compared to the 2024 national rate. Three rating questions, "rating of personal doctor," "rating of specialist," and "rating of health care," from the general sample ARKids First B 2025 survey results had either the same proportion or a non-significantly higher proportion of satisfaction when compared with the general child sample 2024 NCBD national survey results. The satisfaction with the "rating of health plan" question was significantly lower for the 2025 general child sample results than the 2024 NCBD national results.

The CCC sample from the ARKids First B 2025 survey results in **Table 11** had a significantly higher score (68%) for the "getting care, tests, or treatment" component of the "getting needed care" composite when compared to the 2024 CCC NCBD national rate (60%). The "obtaining check-up or routine care appointments as soon as needed" component of the "getting care quickly" composite was significantly higher (71%) than the 2024 national CCC measure (63%). The "doctors listening carefully to you" component of the "how well doctors communicate" composite had a significantly higher proportion of satisfaction for the 2025 CCC sample when compared to the 2024 NCBD rate. There were no significant differences among all rating items between the 2025 CCC sample and the 2024 CCC NCBD rates.

[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.

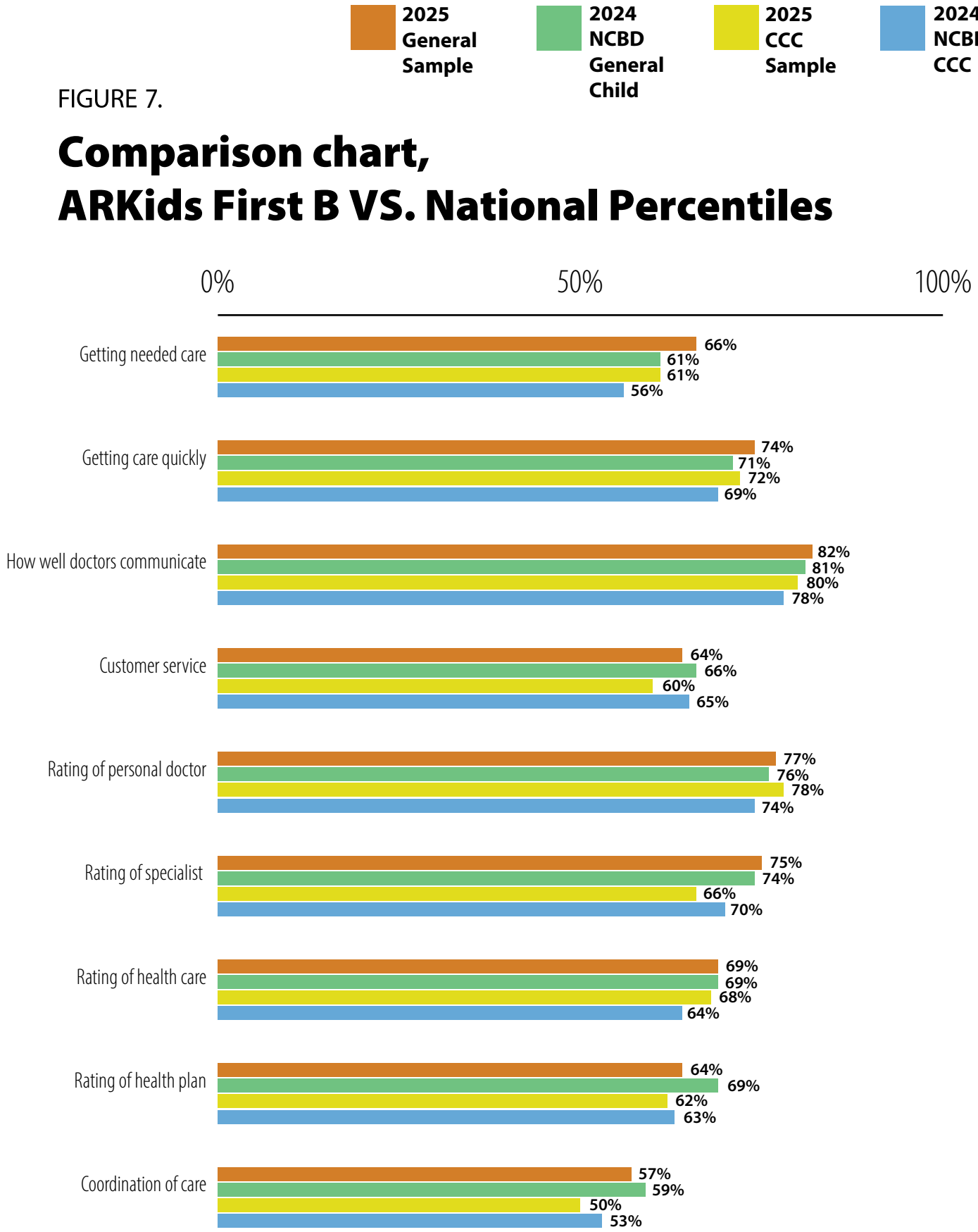
TABLE 11. COMPARISON OF ARKIDS FIRST B WITH NATIONAL PERCENTILES

COMPOSITES/COMPONENTS AND RATING ITEMS	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITIONS		SIGNIFICANCE TESTING	SIGNIFICANCE TESTING
	ARKIDS FIRST B 2025	2024 NCBD NATIONAL RATE	ARKIDS FIRST B 2025	2024 NCBD NATIONAL RATE	GENERAL VS. NATIONAL	CCC VS. NATIONAL
Getting needed care	***66%***	***61%***	***61%***	***56%***	***Not Significant***	***Not Significant***
Q10. Getting care, tests, or treatment	74%	67%	68%	60%	Significantly Higher	Significantly Higher
Q41. Seeing a specialist	58%	55%	53%	52%	Not Significant	Not Significant
Getting care quickly	***74%***	***71%***	***72%***	***69%***	***Not Significant***	***Not Significant***
Q4. Obtaining care right away for an illness/injury/condition	80%	78%	73%	75%	Not Significant	Not Significant
Q6. Obtaining check-up or routine care appointment as soon as needed	68%	64%	71%	63%	Not Significant	Significantly Higher
How well doctors communicate	***82%***	***81%***	***80%***	***78%***	***Not Significant***	***Not Significant***
Q27. Doctors explaining things in an understandable way	85%	83%	84%	81%	Not Significant	Not Significant
Q28. Doctors listening carefully to you	86%	84%	87%	80%	Not Significant	Significantly Higher
Q29. Doctors showing respect for what you had to say	88%	88%	88%	85%	Not Significant	Not Significant
Q31. Doctors explaining things in an understandable way to your child	79%	78%	72%	74%	Not Significant	Not Significant
Q32. Doctors spending enough time with your child	74%	72%	71%	71%	Not Significant	Not Significant
Customer service	***64%***	***66%***	***60%***	***65%***	***Not Significant***	***Not Significant***
Q45. Getting help when calling customer service	58%	56%	52%	53%	Not Significant	Not Significant
Q46. Being treated with courtesy and respect	70%	77%	67%	76%	Not Significant	Not Significant
Rating items						
Rating of personal doctor (Q36)	77%	76%	78%	74%	Not Significant	Not Significant
Rating of specialist (Q43)	75%	74%	66%	70%	Not Significant	Not Significant
Rating of health care (Q9)	69%	69%	68%	64%	Not Significant	Not Significant
Rating of health plan (Q49)	64%	69%	62%	63%	Significantly Lower	Not Significant
Question summary rate						
Coordination of care (Q35)	57%	59%	50%	53%	Not Significant	Not Significant

Columns may not sum to 100% due to rounding

FIGURE 7.

Comparison chart, ARKids First B VS. National Percentiles



In Table 12, when comparing the 2025 ARKids First B survey result of the CCC sample with the 2024 NCBD national survey results of the CCC sample for the CCC-specific composite measures, AFMC found that ARKids First B satisfaction was either the same or slightly higher, though not significantly, for all components of the "family centered care: personal doctor who knows child" composite than the NCBD national rate. The "doctors answering question you had" component of the "family centered care: getting needed information" composite was significantly higher for the 2025 ARKids First B CCC sample (82%) when compared with the NCBD national rate (72%). 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 (75%) when compared to the national rate (57%).

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

CCC MEASURES COMPOSITES/COMPONENTS	CHILDREN WITH CHRONIC CONDITIONS		SIGNIFICANCE TESTING
	2025	2024 NCBD NATIONAL RATE	CCC VS. NATIONAL
Access to specialized services			
Getting special medical equipment or devices (Q15)	37%	53%	Not Significant
Getting therapy (Q18)	60%	51%	Not Significant
Getting treatment or counseling (Q21)	47%	44%	Not Significant
Access to prescription medicines			
Getting prescription medicine (Q51)	68%	65%	Not Significant
Family centered care: personal doctor who knows child			
Doctors talking about child's feelings, growth, or behavior (Q33)	89%	89%	Not Significant
Doctors understanding how your child's condition affects your child's life (Q38)	96%	92%	Not Significant
Doctors understanding how your child's condition affects your family's life (Q39)	93%	89%	Not Significant
Family centered care: getting needed information			
Doctors answering questions you had (Q8)	82%	72%	Significantly Higher
Coordination of care for children with chronic conditions			
Doctors contacting your child's school or daycare (Q13)	92%	94%	Not Significant
Doctors or staff coordinating child's care among other providers (Q24)	75%	57%	Significantly Higher

**Individual items components are not available for NCBD comparison*

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 QUESTIONS 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		82.3%		88.4%		81.3%		90.2%	8.8%
Getting care quickly		96.2%		88.7%		87.7%		86.5%	9.8%
How well doctors communicate		96.6%		94.0%		97.2%		97.9%	3.9%
Customer service		96.7%		64.3%		87.5%		79.2%	32.4%
Rating of personal doctor	61	91.8%	71	91.5%	66	84.8%	139	91.4%	7.0%
Rating of specialist	11	90.9%	12	75.0%	15	66.7%	29	89.7%	24.2%
Rating of health care	50	86.0%	64	79.7%	50	86.0%	90	92.2%	12.5%
Rating of health plan	66	80.3%	81	75.3%	79	84.8%	172	82.6%	9.5%
Coordination of care	18	83.3%	26	76.9%	22	72.7%	34	91.2%	18.4%

TABLE 13B. COMPOSITES, RATINGS, AND SUMMARY QUESTIONS 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		76.4%		82.8%		83.2%		87.9%	11.5%
Getting care quickly		97.4%		91.1%		88.1%		87.5%	9.9%
How well doctors communicate		95.7%		95.2%		97.1%		95.9%	2.0%
Customer service		75.0%		75.0%		80.0%		84.2%	9.2%
Rating of personal doctor	25	88.0%	48	85.4%	56	96.4%	102	92.2%	11.0%
Rating of specialist	7	28.6%	16	87.5%	21	71.4%	42	81.0%	58.9%
Rating of health care	23	87.0%	37	89.2%	47	93.6%	89	87.6%	6.7%
Rating of health plan	25	80.0%	49	73.5%	61	86.9%	109	77.1%	13.4%
Coordination of care	15	93.3%	20	75.0%	29	75.9%	62	75.8%	18.3%

The "how well doctors communicate" composite question for the general child sample had the smallest range of 3.9 percentage points between age categories in Table 13A. The smallest range from ratings questions between age categories occurs in "rating of personal doctor" at 7.0 percentage points. The largest difference of 32.4 percentage points in responses by age category occurred in the "customer service" composite, with a high of 96.7% from the "0–3" age category compared to 64.3% from the "4–7" age category among all composites and rating questions. 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 "getting needed care" composite showed the largest composite range of 11.5 percentage points between the age categories "12–18" (87.9%) and "0–3" (76.4%). The largest range across age categories among all composites and rating questions was the "rating of specialist" rating question at 58.9 percentage points, with a high of 87.5% from the "4–7" age category and a low of 28.6% from the "0–3" age category. The "how well doctors communicate" composite had the smallest difference of 2.0 percentage points among all composites and rating questions, while the "coordination of care" summary rate question had the second largest range of 18.3 percentage points among all composites and rating questions.

TABLE 14A. COMPOSITES, RATINGS, AND SUMMARY QUESTIONS 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		87.2%		86.7%	0.6%
Getting care quickly		89.3%		89.8%	0.5%
How well doctors communicate		95.1%		97.5%	2.4%
Customer service		80.2%		84.8%	4.5%
Rating of personal doctor	146	89.0%	200	92.0%	3.0%
Rating of specialist	31	93.5%	38	78.9%	14.6%
Rating of health care	101	85.1%	161	87.0%	1.8%
Rating of health plan	178	82.0%	225	79.6%	2.5%
Coordination of care	40	87.5%	62	77.4%	10.1%

TABLE 14B. COMPOSITES, RATINGS, AND SUMMARY QUESTIONS 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		82.3%		86.4%	4.1%
Getting care quickly		87.0%		90.6%	3.5%
How well doctors communicate		95.8%		95.8%	0.1%
Customer service		83.3%		78.8%	4.5%
Rating of personal doctor	78	89.7%	149	91.9%	2.2%
Rating of specialist	31	77.4%	55	74.5%	2.9%
Rating of health care	61	90.2%	132	89.4%	0.8%
Rating of health plan	85	74.1%	155	81.3%	7.2%
Coordination of care	41	73.2%	83	79.5%	6.3%

In Table 14A, very small range values of less than 1.0 percentage points for the general child sample are found among the "getting care quickly" (0.5%) and "getting needed care" (0.6%) composite questions. The "customer service" composite question had the largest composite range of 4.5 percentage points between parent/caregiver's education level. The largest difference among all composites and rating questions in responses by parent/caregiver's education level was "rating of specialist," with a range of 14.6 percentage points. The "coordination of care" summary question had a large range of 10.1 percentage points, with a high positive measure of 87.5% from the "high school graduate or less" education category and a low positive measure of 77.4% from the "some college or more" education category.

The CCC sample composite with the smallest range in Table 14B is "how well doctors communicate" at 0.1 percentage points between parent/caregiver's education level. All rating questions had differences of less than 8.0 percentage points, with "rating of health plan" being the largest range of 7.2 percentage points, and the smallest range among rating questions being 0.8 percentage points from the "rating health care" question. "Coordination of care" had the overall second largest range at 6.3 percentage points, with a lower positive measure (73.2%) from the "high school graduate or less" education category and a higher positive measure (79.5%) from the "some college or more" education category.

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

	GENERAL CHILD				
CHILD'S GENDER	MALE		FEMALE		
COMPOSITES AND RATINGS	n	%	n	%	RANGE
Getting needed care		88.7%		87.3%	1.4%
Getting care quickly		86.3%		92.5%	6.1%
How well doctors communicate		95.9%		97.4%	1.5%
Customer service		84.1%		81.1%	3.0%
Rating of personal doctor	177	89.3%	158	91.8%	2.5%
Rating of specialist	27	81.5%	42	83.3%	1.9%
Rating of health care	130	84.6%	124	87.1%	2.5%
Rating of health plan	210	82.4%	184	77.2%	5.2%
Coordination of care	49	81.6%	52	80.8%	0.9%

TABLE 15B. COMPOSITES, RATINGS, AND SUMMARY QUESTIONS 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		86.3%		82.6%	3.6%
Getting care quickly		87.8%		91.0%	3.2%
How well doctors communicate		94.7%		97.0%	2.3%
Customer service		78.8%		84.4%	5.5%
Rating of personal doctor	120	92.5%	109	89.9%	2.6%
Rating of specialist	49	73.5%	36	77.8%	4.3%
Rating of health care	99	89.9%	95	88.4%	1.5%
Rating of health plan	131	81.7%	112	75.9%	5.8%
Coordination of care	56	76.8%	68	80.9%	4.1%

When evaluating survey results by gender for the general child sample within Table 15A, all composite and rating questions, except "getting care quickly," had small range values of less than 6.0 percentage points. The greatest range of all questions occurred in the "getting care quickly" composite, with a range of 6.1 percentage points between "male" (86.3%) and "female" (92.5%) gender categories. The "getting needed care" composite had the smallest range among composite measures of 1.4 percentage points, with a high positive measure among "male" beneficiaries (88.7%) and a low positive measure among "female" beneficiaries (87.3%). Beneficiaries in the "female" category provided higher positive measures in three of the four rating questions than respondents for "male" beneficiaries. The smallest range of 0.9 percentage points occurs in the "coordination of care" summary question, with a high positive measure in the "male" gender category (81.6%) and a lower positive measure in the "female" gender category (80.8%).

In Table 15B, the CCC sample results, by gender, had the largest composite range of 5.5 percentage points in the "customer service" composite and the smallest composite range of 2.3 percentage points in the "how well doctors communicate" composite. "Rating of health plan" had the largest difference of 5.8 percentage points, among all composites and rating questions, with a high positive measure in the "male" gender category (81.7%) and a low positive measure in the "female" gender category (75.9%). The smallest overall range of 1.5 percentage points among all questions occurs in the "rating of health care" rating question, with a high positive measure of 89.9% in the "male" gender category and a low positive measure of 88.4% in the "female" gender category.

TABLE 16A. COMPOSITES, RATINGS, AND SUMMARY QUESTIONS 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		89.1%		60.0%		86.1%	29.1%
Getting care quickly		92.0%		91.7%		78.9%	13.2%
How well doctors communicate		96.6%		95.6%		97.8%	2.3%
Customer service		78.8%		100.0%		76.8%	23.2%
Rating of personal doctor	245	90.2%	44	93.2%	54	90.7%	3.0%
Rating of specialist	51	88.2%	4	75.0%	13	69.2%	19.0%
Rating of health care	193	84.5%	33	90.9%	36	88.9%	6.5%
Rating of health plan	272	77.6%	52	78.8%	75	90.7%	13.1%
Coordination of care	73	79.5%	12	75.0%	17	94.1%	19.1%

TABLE 16B. COMPOSITES, RATINGS, AND SUMMARY QUESTIONS 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		85.0%		87.0%		81.2%	5.8%
Getting care quickly		89.4%		92.0%		86.1%	5.9%
How well doctors communicate		96.0%		98.4%		90.0%	8.4%
Customer service		90.5%		68.2%		68.8%	22.3%
Rating of personal doctor	161	93.2%	37	94.6%	28	78.6%	16.0%
Rating of specialist	62	77.4%	15	73.3%	9	66.7%	10.8%
Rating of health care	134	88.8%	33	93.9%	26	92.3%	5.1%
Rating of health plan	164	78.7%	42	83.3%	33	72.7%	10.6%
Coordination of care	90	75.6%	18	88.9%	15	73.3%	15.6%

The largest difference in responses by child's race from the general child sample in Table 16A was in the "getting needed care" composite question at 29.1 percentage points, followed by "customer service" and "coordination of care" composites at 23.2 percentage points and 19.1 percentage points, respectively. The smallest range of 2.3 percentage points occurs in the "how well doctors communicate" composite question, with a low positive measure of 95.6% in the "Black or African-American" race category and a high positive measure of 97.8% in the "Other" race category. There is a category within the child's race table where all the respondents reported the highest measure for the composite (100.0%). This positive measure is seen in the "customer service" composite question among the "Black or African-American" race category. Those identifying as "White" provided a positive measure of over 77.0% for all composites, rating questions, and the summary question. Additionally, those identifying as "Black or African-American" provided a positive measure of 75.0% or higher for all composite and rating questions, except for the "getting needed care" composite, which had a positive measure of 60.0%. Only a small number of respondents for some composites, rating, and summary rate questions (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, for the CCC sample, the "customer service" composite had the largest overall range of 22.3 percentage points, with a high positive measure of 90.5% from the "White" race category and a lower positive measure of 68.2% from the "Black or African-American" race category. The smallest range among the composite questions was 5.8 percentage points from the "getting needed care" composite, with a high positive measure of 87.0% from the "Black or African-American" race category and a low positive measure of 81.2% from the "Other" race category. The "rating of personal doctor" rating question had the second largest range among all composites, rating questions, and summary rate questions. The smallest range among all question types of 5.1 percentage points across race categories occurs in the "rating of healthcare" rating question, with positive measures of over 88.0% across all race categories. Only a small number of respondents for some composites, ratings, and summary rate questions (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 QUESTIONS 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		88.6%		79.2%		83.3%	9.4%
Getting care quickly		89.0%		92.7%		91.7%	3.7%
How well doctors communicate		97.0%		92.8%		100.0%	7.2%
Customer service		80.9%		100.0%		100.0%	19.1%
Rating of personal doctor	309	90.9%	31	80.6%	8	100.0%	19.4%
Rating of specialist	58	87.9%	10	70.0%	3	33.3%	54.6%
Rating of health care	227	87.7%	29	72.4%	7	71.4%	16.2%
Rating of health plan	356	81.5%	43	74.4%	10	50.0%	31.5%
Coordination of care	89	80.9%	12	83.3%	3	100.0%	19.1%

TABLE 17B. COMPOSITES, RATINGS, AND SUMMARY QUESTIONS 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		87.3%		82.0%		78.3%	9.0%
Getting care quickly		91.4%		89.8%		76.7%	14.7%
How well doctors communicate		97.4%		95.0%		86.7%	10.7%
Customer service		81.8%		79.4%		83.3%	3.9%
Rating of personal doctor	151	92.7%	60	91.7%	20	80.0%	12.7%
Rating of specialist	44	77.3%	30	73.3%	12	75.0%	3.9%
Rating of health care	130	90.8%	51	90.2%	15	73.3%	17.4%
Rating of health plan	161	83.9%	62	72.6%	21	61.9%	21.9%
Coordination of care	73	78.1%	40	82.5%	13	61.5%	21.0%

As seen in Table 17A, the general child sample respondents who perceive their child's overall health status as "excellent/very good" represent the largest number of respondents, where n values are 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 largest overall range of 54.6 percentage points occurs in the "rating of specialist" rating question, with a low positive measure for those who perceive their child's overall health status as "fair/poor" (33.3%) and a high positive measure for those who perceive their child's overall health status as "excellent/very good" (87.9%). The smallest range of 3.7 percentage points in responses by child's overall health status was in "getting care quickly" composite, with a high of 92.7% in the "good" overall health category and a low of 89.0% in the "excellent/very good" overall health category.

The largest difference of 21.9 percentage points in responses by child's overall health status from the CCC sample in Table 17B was in the "rating of health plan" rating question, with a high positive measure (83.9%) from those who perceive their child's overall health status as "excellent/very good" compared to a low positive measure (61.9%) from those who perceive their child's overall health status as "fair/poor." Note the small number of respondents (n<20) in the "fair/poor" overall health category, where caution should be applied to any conclusions drawn from such data. The smallest range of 3.9 percentage points is seen in the "customer service" composite question and in the "rating of specialist" rating question. The largest difference among composite questions of 14.7 percentage points occurs in the "getting care quickly" composite, with the lower positive measure from the "fair/poor" health status category (76.7%) and the higher positive measure from the "excellent/very good" health status category (91.4%). The "coordination of care" summary question had a large range of 21.0 percentage points, with a high positive measure of 82.5% from the "good" overall health category and a lower positive measure of 61.5% from the "fair/poor" overall health category.

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

	GENERAL CHILD						
CHILD'S MENTAL HEALTH STATUS	EXCELLENT/VERY GOOD		GOOD		FAIR/POOR		
COMPOSITES AND RATINGS	n	%	n	%	n	%	RANGE
Getting needed care		88.3%		86.3%		75.0%	13.3%
Getting care quickly		90.7%		87.1%		67.5%	23.2%
How well doctors communicate		97.3%		93.3%		97.1%	3.9%
Customer service		83.2%		80.0%		0.0%	3.2%
Rating of personal doctor	285	89.8%	50	92.0%	10	90.0%	2.2%
Rating of specialist	57	87.7%	10	70.0%	4	50.0%	37.7%
Rating of health care	210	86.2%	44	81.8%	6	83.3%	4.4%
Rating of health plan	330	81.5%	63	79.4%	10	50.0%	31.5%
Coordination of care	82	81.7%	16	81.3%	6	83.3%	2.1%

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

	CHILDREN WITH CHRONIC CONDITIONS						
CHILD'S MENTAL HEALTH STATUS	EXCELLENT/VERY GOOD		GOOD		FAIR/POOR		
COMPOSITES AND RATINGS	n	%	n	%	n	%	RANGE
Getting needed care		85.7%		88.5%		78.8%	9.8%
Getting care quickly		92.3%		86.6%		85.2%	7.0%
How well doctors communicate		96.2%		97.3%		92.3%	5.0%
Customer service		79.5%		77.3%		88.9%	11.6%
Rating of personal doctor	123	91.9%	68	92.6%	40	87.5%	5.1%
Rating of specialist	48	72.9%	21	85.7%	17	70.6%	15.1%
Rating of health care	105	91.4%	58	89.7%	33	81.8%	9.6%
Rating of health plan	129	82.2%	72	77.8%	43	72.1%	10.1%
Coordination of care	68	73.5%	35	88.6%	23	73.9%	15.0%

In **Table 18A**, the largest difference between mental health status categories occurs in the "rating of specialist" rating question, with a range of 37.7 percentage points, with this difference occurring between the "excellent/very good" (87.7%) and "fair/poor" (50.0%) mental health categories. This is followed by the "rating of health plan" question, with a range of 31.5 percentage points, a high positive measure (81.5%), and a low positive measure (50.0%), from the "excellent/very good" and "fair/poor" mental health status categories, respectively. The smallest range of 2.1 percentage points is from the "coordination of care" composite, followed by the "rating of personal doctor" rating question at 2.2 percentage points. Only a small number of respondents (n<20) indicated that their child's overall health status was "fair/poor" or "good" for some composite and rating questions, and caution should be exercised when making conclusions based on small numbers.

As seen in **Table 18B**, the smallest range of 5.0 percentage points occurred in the "how well doctors communicate" composite, with the positive measures being above 92.0% for each mental health status category, followed by the "rating of personal doctor" rating question with a range of 5.1 percentage points, with positive measures above 87% for each mental health status category. The largest range from the CCC sample results is 15.1 percentage points from the "rating of specialist" rating question, with a low positive measure from those who perceive their child's mental health status as "fair/poor" (70.6%) and a high positive measure from those who perceive their child's mental health status as "good" (85.7%). The second largest range is found in the "coordination of care" summary question at 15.0 percentage points, followed by the "customer service" composite at 11.6 percentage points. It is worth noting that those who perceived their child's mental health status as "fair/poor" had only one positive measure over 89.0% for any composite, rating, or summary question, which was in the "how well doctors communicate" composite (92.3%).

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:

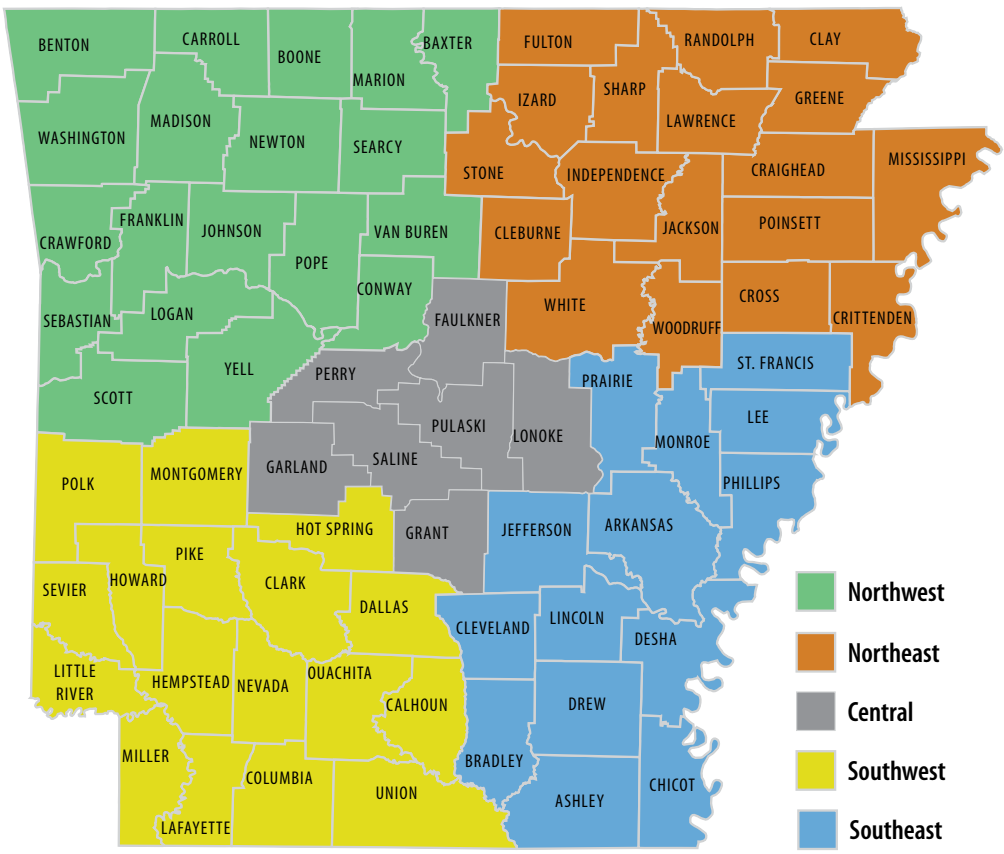
Northwest: Baxter, Benton, Boone, Carroll, Conway, Crawford, Franklin, Johnson, Logan, Madison, Marion, Newton, Pope, Scott, Searcy, Sebastian, Van Buren, Washington, and Yell counties

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," 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	GENERAL CHILD											
	CENTRAL		NORTHWEST		NORTHEAST		SOUTHWEST		SOUTHEAST		STATEWIDE	
	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN
Rating of personal doctor (Q36)	85	9.2	144	9.1	62	9.2	43	9.3	17	8.9	351	9.2
Rating of specialist (Q43)	19	8.9	28	9.0	9	8.6	12	8.9	3	9.7	71	9.0
Rating of health care (Q9)	63	9.0	105	8.9	47	8.8	36	8.8	14	8.9	265	8.9
Rating of health plan (Q49)	96	8.5	169	8.6	68	8.7	56	8.6	24	8.0	413	8.6

TABLE 19B. MEAN RATINGS - CHILDREN WITH CHRONIC CONDITIONS

MEAN RATINGS	CHILDREN WITH CHRONIC CONDITIONS											
	CENTRAL		NORTHWEST		NORTHEAST		SOUTHWEST		SOUTHEAST		STATEWIDE	
	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN
Rating of personal doctor (Q36)	60	9.1	88	9.1	39	9.5	28	9.1	16	9.4	231	9.2
Rating of specialist (Q43)	28	8.8	32	7.7	14	9.4	6	8.2	6	9.0	86	8.4
Rating of health care (Q9)	55	8.9	70	8.8	34	9.4	25	9.1	12	8.6	196	9.0
Rating of health plan (Q49)	66	8.4	93	8.6	40	8.6	28	8.8	17	7.9	244	8.5

In Table 19A, the "rating of specialist" rating question shows a small number of general child respondents, so caution should be used when interpreting results. Among this rating question, respondents from the Southeast region had a mean rating of 9.7, which was the highest rating for this region and for the "rating of specialist" rating question. The smallest mean rating of 8.0 for the "rating of health plan" rating question was found within the Southeast region. Statewide, all general child respondents had a mean rating of 8.6 or higher for all four rating questions.

The CCC respondents in Table 19B had a rating of 9.1 or above among all regions for the "rating of personal doctor" rating question. The highest mean rating of 9.5 is "rating of personal doctor" within the Northeast region. Among all regions and for all four rating questions, the Northwest region also had the lowest rating of 7.7 for the "rating of specialist" rating question. The smallest statewide mean rating was found for the "rating of specialist" rating question, with a mean rating of 8.4, while the largest statewide mean was for the "rating of personal doctor" rating question, with a mean rating of 9.2. The "rating of specialist" rating question shows a small number of general child respondents for the Southwest and Southeast regions, so caution should be used when interpreting results.

UTILIZATION OF SERVICES

The ARKids First B 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	GENERAL CHILD											
	CENTRAL		NORTHWEST		NORTHEAST		SOUTHWEST		SOUTHEAST		STATEWIDE	
	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN
Q7. Visiting a doctor at least once, in person, by phone, or by video	98	67.3%	171	63.2%	68	69.1%	56	64.3%	23	60.9%	416	65.1%
Q7. Having three or more visits to a doctor in person, by phone, or by video	98	28.6%	171	22.2%	68	32.4%	56	26.8%	23	30.4%	416	26.4%
Q5. Seeking routine medical care	98	64.3%	175	60.0%	69	60.9%	56	57.1%	24	58.3%	422	60.7%
Q3. Seeking medical care for illness/injury	98	27.6%	173	35.8%	68	30.9%	56	21.4%	24	29.2%	419	30.8%
Q40. Visiting a specialist	99	20.2%	174	17.2%	69	14.5%	56	25.0%	24	12.5%	422	18.2%
Q26. Visiting personal doctor at least once, in person, by phone, or by video	83	73.5%	145	74.5%	62	75.8%	43	74.4%	17	82.4%	350	74.9%
Q26. Having three or more visits to a personal doctor, in person, by phone, or by video	83	14.5%	145	19.3%	62	29.0%	43	23.3%	17	29.4%	350	20.9%
Q14. Seeking special medical equipment or devices	99	1.0%	173	6.4%	69	2.9%	56	1.8%	24	0.0%	421	3.6%
*Q17. Seeking special therapy**	99	10.1%	175	10.9%	69	11.6%	56	7.1%	24	4.2%	423	9.9%
Q20. Seeking treatment or counseling	97	12.4%	175	4.6%	68	7.4%	55	1.8%	23	8.7%	418	6.7%
Q50. Getting prescription medication	96	52.1%	174	37.4%	68	55.9%	56	39.3%	24	45.8%	418	44.5%
Q44. Getting information or help from customer service	98	12.2%	174	10.9%	69	10.1%	56	12.5%	24	20.8%	421	11.9%

** Special therapy includes: speech therapy, occupational therapy, physical therapy.*

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

UTILIZATION OF SERVICES	CHILDREN WITH CHRONIC CONDITIONS											
	CENTRAL		NORTHWEST		NORTHEAST		SOUTHWEST		SOUTHEAST		STATEWIDE	
	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN
Q7. Visiting a doctor at least once, in person, by phone, or by video	66	83.3%	95	73.7%	40	85.0%	28	89.3%	17	70.6%	246	79.7%
Q7. Having three or more visits to a doctor in person, by phone, or by video	66	48.5%	95	44.2%	40	37.5%	28	46.4%	17	52.9%	246	45.1%
Q5. Seeking routine medical care	66	83.3%	96	72.9%	40	85.0%	28	78.6%	17	76.5%	247	78.5%
Q3. Seeking medical care for illness/injury	65	53.8%	96	54.2%	41	48.8%	28	46.4%	17	17.6%	247	49.8%
Q40. Visiting a specialist	66	43.9%	95	35.8%	41	34.1%	28	21.4%	17	35.3%	247	36.0%
Q26. Visiting personal doctor at least once, in person, by phone, or by video	61	90.2%	89	86.5%	40	90.0%	28	92.9%	16	93.8%	234	89.3%
Q26. Having three or more visits to a personal doctor, in person, by phone, or by video	61	41.0%	89	37.1%	40	30.0%	28	39.3%	16	37.5%	234	37.2%
Q14. Seeking special medical equipment or devices	66	9.1%	96	6.3%	41	2.4%	27	22.2%	17	0.0%	247	7.7%
Q17. Seeking special therapy*	66	21.2%	96	32.3%	41	26.8%	28	28.6%	17	23.5%	248	27.4%
Q20. Seeking treatment or counseling	66	36.4%	94	39.4%	41	29.3%	28	25.0%	17	35.3%	246	35.0%
Q50. Getting prescription medication	66	87.9%	96	71.9%	41	82.9%	28	85.7%	17	88.2%	248	80.6%
Q44. Getting information or help from customer service	66	19.7%	95	16.8%	41	17.1%	28	21.4%	17	5.9%	247	17.4%

** Special therapy includes: speech therapy, occupational therapy, physical therapy.*

Among all utilization of service questions, the general child sample had low rates, as seen in **Table 20A**. The highest statewide utilization rate was 74.9% for "visiting personal doctor at least once, in person, by phone, or by video." For this utilization of service question, the Southeast region had the highest utilization rate of 82.4% among all services and regions. The Central region had low utilization rates for all services, with rates of 73.5% or less. The "seeking special medical equipment or devices" utilization of service question had the lowest utilization rates, with a 6.4% utilization rate in the Northwest, a 2.9% utilization rate in the Northeast, a 1.8% utilization rate in the Southwest, a 1.0% utilization rate in the Central region, and a 0.0% utilization rate in the Southeast region.

As seen in **Table 20B**, in the CCC sample, "visiting personal doctor at least once, in person, by phone, or by video" had the highest statewide utilization rate of 89.3% and the highest region utilization rate in the Southeast region (93.8%). All regions had a utilization rate of 86.5% or higher for "visiting personal doctor at least once, in person, by phone, or by video." Another high statewide utilization rate of 80.6% was found for "getting prescription medication." This service had a high utilization rate in the Southeast region (88.2%), followed by the Central region (87.9%). The lowest utilization rate was for "seeking special medical equipment or devices," which had a low of 22.2% for the Southwest region and 0.0% for the Southeast region. This service also had the lowest statewide utilization rate of 7.7%. It is worth noting that the Southeast region shows a small number of CCC sample respondents (<20), so caution should be used when examining results.

Further Analysis of ARKids First B

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 (76.6%) stated that their child is currently enrolled in school or daycare. Among the general child sample, 104 respondents said their child is not in school or daycare, and 52 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, 8.2% 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 (24 respondents) who stated they needed their child's doctor to contact a school or daycare about their child's health or health care 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 use 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, has their child 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, 180 respondents answered "yes." Of respondents who stated their child got care from more than one kind of health care provider or used more than one kind of health care service, 55.0% came from the CCC sample.
- A personal doctor is the 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, 88.6% stated that their child has a personal doctor. The general child sample had only 64 respondents who stated their child does not have a personal doctor, and 12 respondents from the CCC sample who stated their child does not have a personal doctor.
- When asked if their child got care from a doctor or other health provider besides his or her personal doctor, 41.2% of the general child sample said "yes." Among the CCC sample, 61.1% of respondents said their child got care from a doctor or other health provider besides their personal doctor.

- When asked how many specialists their child had talked to in the last six months, the majority (69.3%) of respondents who see a specialist stated their child has talked to 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 three months, 6.6% of general child respondents and 67.8% of CCC respondents said "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 if their child is able to talk with doctors about their health care. They were also asked about their child's health plan; if their child's health plan gave them any forms to fill out, and how often these forms were easy to fill out.

Key Findings

- Of all respondents, 70.4% stated that their child is able to talk with doctors about their health care. Of all respondents, 84 from the general child sample and 53 from the CCC sample answered "no" when asked if their child is able to talk with doctors about their health care.
- When asked, "In the last 6 months, did your child's health plan give you any forms to fill out," 75 respondents from the general child sample and 50 respondents from the CCC sample answered "yes."
- The majority of parents/caregivers from the general sample (40.5%) and CCC sample (54.0%) responded that in the last six 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 Latin origin or descent. Questions about the parent's/caregiver's age and gender are also asked.

Key Findings

- The majority of general child (76.3%) and CCC respondents (86.5%) are not Hispanic or Latino.

- The parents/caregivers age category "35 to 44" had the highest number of respondents, with 138 parents/caregivers of children/adolescents in the general child sample and 100 parents/caregivers of children/adolescents in the CCC sample.
- The majority of parents/caregivers (86.6%) who filled out the survey are female.

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 about how often they got help with transportation when they phoned their child's health plan and how often the help with transportation for their child met their needs.

Key Findings

- The majority of respondents (99.7%) stated that in the last six months, they did not reach out to their child's health plan to get help with transportation for their child. Of the general child sample, 0 respondents and 2 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, 0 parents/caregivers of children/adolescents in the general child sample and 2 in the CCC sample responded that they "never" got the transportation help that was requested.
- Since no parents/caregivers received transportation help from their child's health plan, there are no respondents that stated that the help with transportation met their needs.

ARKids First B Frequency Tables

Q1) Our records show that your child is now in Medicaid's ARKids First B program. Is that right?						
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q1	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	412	100.0	243	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 2024 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	129	30.8	123	49.8	252	37.8
No	290	69.2	124	50.2	414	62.2

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	2	1.6	1	0.8	3	1.2
Sometimes	7	5.6	9	7.5	16	6.6
Usually	16	12.9	23	19.2	39	16.0
Always	99	79.8	87	72.5	186	76.2

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	256	60.7	194	78.5	450	67.3
No	166	39.3	53	21.5	219	32.7

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	1	0.5	2	0.5
Sometimes	32	13.3	23	12.1	55	12.8
Usually	44	18.3	31	16.3	75	17.4
Always	163	67.9	135	71.1	298	69.3

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	145	34.9	50	20.3	195	29.5
1 time	91	21.9	43	17.5	134	20.2
2	70	16.8	42	17.1	112	16.9
3	62	14.9	44	17.9	106	16.0
4	26	6.3	30	12.2	56	8.5
5 to 9	19	4.6	30	12.2	49	7.4
10 or more times	3	0.7	7	2.8	10	1.5

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	4	1.5	5	2.6	9	2.0
Sometimes	18	6.8	7	3.6	25	5.4
Usually	33	12.4	24	12.3	57	12.4
Always	211	79.3	159	81.5	370	80.3

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	0.4
1	0	0.0	0	0.0	0	0.0
2	1	0.4	0	0.0	1	0.2
3	1	0.4	1	0.5	2	0.4
4	0	0.0	0	0.0	0	0.0
5	9	3.4	3	1.5	12	2.6
6	8	3.0	4	2.0	12	2.6
7	18	6.8	12	6.1	30	6.5
8	44	16.6	41	20.9	85	18.4
9	48	18.1	36	18.4	84	18.2
10 Best health care possible	135	50.9	98	50.0	233	50.5

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	1.0	3	0.7
Sometimes	13	4.9	13	6.6	26	5.7
Usually	55	20.8	47	24.0	102	22.2
Always	195	73.9	134	68.4	329	71.5

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	317	75.3	195	78.9	512	76.6
No	104	24.7	52	21.1	156	23.4

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	5.6	24	12.5	41	8.2
No	288	94.4	168	87.5	456	91.8

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	16	94.1	22	91.7	38	92.7
No	1	5.9	2	8.3	3	7.3

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	15	3.6	19	7.7	34	5.1
No	406	96.4	228	92.3	634	94.9

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	0	0.0	4	21.1	4	12.5
Sometimes	0	0.0	3	15.8	3	9.4
Usually	2	15.4	5	26.3	7	21.9
Always	11	84.6	7	36.8	18	56.3

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	13	100.0	13	68.4	26	81.3
No	0	0.0	6	31.6	6	18.8

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	42	9.9	68	27.4	110	16.4
No	381	90.1	180	72.6	561	83.6

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	4	10.3	3	4.5	7	6.6
Sometimes	2	5.1	9	13.4	11	10.4
Usually	14	35.9	15	22.4	29	27.4
Always	19	48.7	40	59.7	59	55.7

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	26	68.4	45	67.2	71	67.6
No	12	31.6	22	32.8	34	32.4

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	28	6.7	86	35.0	114	17.2
No	390	93.3	160	65.0	550	82.8

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	1	3.7	8	9.6	9	8.2
Sometimes	7	25.9	14	16.9	21	19.1
Usually	8	29.6	22	26.5	30	27.3
Always	11	40.7	39	47.0	50	45.5

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	13	50.0	53	62.4	66	59.5
No	13	50.0	32	37.6	45	40.5

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	81	19.4	99	39.9	180	27.1
No	336	80.6	149	60.1	485	72.9

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	55	71.4	74	74.7	129	73.3
No	22	28.6	25	25.3	47	26.7

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	357	84.8	236	95.2	593	88.6
No	64	15.2	12	4.8	76	11.4

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	88	25.1	25	10.7	113	19.3
1 time	114	32.6	67	28.6	181	31.0
2	75	21.4	55	23.5	130	22.3
3	43	12.3	39	16.7	82	14.0
4	20	5.7	23	9.8	43	7.4
5 to 9	10	2.9	23	9.8	33	5.7
10 or more times	0	0.0	2	0.9	2	0.3

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	0	0.0	1	0.5	1	0.2
Sometimes	5	1.9	5	2.4	10	2.1
Usually	35	13.5	28	13.5	63	13.5
Always	219	84.6	174	83.7	393	84.2

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	1	0.5	2	0.4
Sometimes	7	2.7	5	2.4	12	2.6
Usually	29	11.2	22	10.6	51	10.9
Always	221	85.7	180	86.5	401	86.1

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	1	0.4	0	0.0	1	0.2
Sometimes	4	1.6	4	1.9	8	1.7
Usually	27	10.5	20	9.7	47	10.1
Always	225	87.5	183	88.4	408	87.9

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	173	67.3	153	74.3	326	70.4
No	84	32.7	53	25.7	137	29.6

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	0	0.0	0	0.0	0	0.0
Sometimes	2	1.2	8	5.3	10	3.1
Usually	34	19.8	35	23.0	69	21.3
Always	136	79.1	109	71.7	245	75.6

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	4	1.6	1	0.5	5	1.1
Sometimes	18	7.0	15	7.2	33	7.1
Usually	46	17.9	43	20.8	89	19.2
Always	189	73.5	148	71.5	337	72.6

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	215	83.7	184	88.9	399	86.0
No	42	16.3	23	11.1	65	14.0

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	106	41.2	127	61.1	233	50.1
No	151	58.8	81	38.9	232	49.9

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	5	4.8	6	4.8	11	4.8
Sometimes	14	13.5	22	17.5	36	15.7
Usually	26	25.0	35	27.8	61	26.5
Always	59	56.7	63	50.0	122	53.0

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	1	0.4	1	0.2
2	0	0.0	1	0.4	1	0.2
3	0	0.0	0	0.0	0	0.0
4	2	0.6	1	0.4	3	0.5
5	9	2.6	3	1.3	12	2.1
6	13	3.7	3	1.3	16	2.7
7	10	2.8	11	4.8	21	3.6
8	48	13.7	30	13.0	78	13.4
9	62	17.7	42	18.2	104	17.9
10 Best personal doctor possible	207	59.0	139	60.2	346	59.5

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	23	6.6	158	67.8	181	31.0
No	328	93.4	75	32.2	403	69.0

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	151	96.2	170	95.5
No	2	9.5	6	3.8	8	4.5

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	19	90.5	145	92.9	164	92.7
No	2	9.5	11	7.1	13	7.3

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	77	18.2	89	36.0	166	24.8
No	345	81.8	158	64.0	503	75.2

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	1	1.4	5	5.6	6	3.7
Sometimes	14	18.9	15	16.9	29	17.8
Usually	16	21.6	22	24.7	38	23.3
Always	43	58.1	47	52.8	90	55.2

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	5.2	2	2.2	6	3.6
1 specialist	62	80.5	53	59.6	115	69.3
2	10	13.0	18	20.2	28	16.9
3	0	0.0	8	9.0	8	4.8
4	1	1.3	6	6.7	7	4.2
5 or more specialists	0	0.0	2	2.2	2	1.2

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	2	2.3	2	1.3
1	0	0.0	1	1.2	1	0.6
2	1	1.4	0	0.0	1	0.6
3	0	0.0	0	0.0	0	0.0
4	1	1.4	0	0.0	1	0.6
5	2	2.8	7	8.1	9	5.7
6	2	2.8	7	8.1	9	5.7
7	6	8.5	4	4.7	10	6.4
8	6	8.5	8	9.3	14	8.9
9	12	16.9	14	16.3	26	16.6
10 Best specialist possible	41	57.7	43	50.0	84	53.5

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	50	11.9	43	17.4	93	13.9
No	371	88.1	204	82.6	575	86.1

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	2.1	1	2.4	2	2.2
Sometimes	12	25.0	9	21.4	21	23.3
Usually	7	14.6	10	23.8	17	18.9
Always	28	58.3	22	52.4	50	55.6

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	2	4.8	2	2.2
Sometimes	3	6.4	4	9.5	7	7.9
Usually	11	23.4	8	19.0	19	21.3
Always	33	70.2	28	66.7	61	68.5

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	75	17.9	50	20.2	125	18.8
No	343	82.1	197	79.8	540	81.2

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	6	8.1	1	2.0	7	5.6
Sometimes	9	12.2	8	16.0	17	13.7
Usually	29	39.2	14	28.0	43	34.7
Always	30	40.5	27	54.0	57	46.0

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	1	0.2	1	0.4	2	0.3
1	1	0.2	2	0.8	3	0.5
2	2	0.5	2	0.8	4	0.6
3	4	1.0	1	0.4	5	0.8
4	5	1.2	1	0.4	6	0.9
5	30	7.3	17	7.0	47	7.2
6	18	4.4	12	4.9	30	4.6
7	21	5.1	15	6.1	36	5.5
8	68	16.5	41	16.8	109	16.6
9	73	17.7	42	17.2	115	17.5
10 Best health plan possible	190	46.0	110	45.1	300	45.7

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	186	44.5	200	80.6	386	58.0
No	232	55.5	48	19.4	280	42.0

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	2	1.0	2	0.5
Sometimes	11	6.0	12	6.0	23	6.0
Usually	38	20.8	49	24.6	87	22.8
Always	134	73.2	136	68.3	270	70.7

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	102	56.0	129	65.2	231	60.8
No	80	44.0	69	34.8	149	39.2

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	208	49.8	53	21.4	261	39.2
Very good	157	37.6	110	44.4	267	40.1
Good	43	10.3	64	25.8	107	16.1
Fair	9	2.2	19	7.7	28	4.2
Poor	1	0.2	2	0.8	3	0.5

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	202	49.0	65	26.2	267	40.5
Very good	134	32.5	67	27.0	201	30.5
Good	65	15.8	73	29.4	138	20.9
Fair	10	2.4	35	14.1	45	6.8
Poor	1	0.2	8	3.2	9	1.4

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	67	16.0	184	74.5	251	37.7
No	352	84.0	63	25.5	415	62.3

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	18	27.7	177	97.3	195	78.9
No	47	72.3	5	2.7	52	21.1

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	173	97.7	173	88.7
No	18	100.0	4	2.3	22	11.3

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	17	4.0	117	47.2	134	20.0
No	404	96.0	131	52.8	535	80.0

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	4	25.0	112	95.7	116	87.2
No	12	75.0	5	4.3	17	12.8

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	111	99.1	111	95.7
No	4	100.0	1	0.9	5	4.3

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	9	2.1	70	28.2	79	11.8
No	411	97.9	178	71.8	589	88.2

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	2	25.0	68	98.6	70	90.9
No	6	75.0	1	1.4	7	9.1

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	67	98.5	67	95.7
No	2	100.0	1	1.5	3	4.3

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	39	9.3	78	31.5	117	17.5
No	381	90.7	170	68.5	551	82.5

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	4	10.5	62	80.5	66	57.4
No	34	89.5	15	19.5	49	42.6

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	60	96.8	60	92.3
No	3	100.0	2	3.2	5	7.7

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	14	3.3	113	45.7	127	19.0
No	408	96.7	134	54.3	542	81.0

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	109	97.3	109	90.1
No	9	100.0	3	2.7	12	9.9

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	0	0.0	0	0.0	0	0.0
1 year old	18	4.4	7	2.8	25	3.8
2 years old	30	7.4	7	2.8	37	5.6
3 years old	20	4.9	12	4.8	32	4.9
4 years old	18	4.4	16	6.5	34	5.2
5 years old	22	5.4	9	3.6	31	4.7
6 years old	14	3.4	13	5.2	27	4.1
7 years old	29	7.1	11	4.4	40	6.1
8 years old	18	4.4	16	6.5	34	5.2
9 years old	21	5.1	14	5.6	35	5.3
10 years old	18	4.4	11	4.4	29	4.4
11 years old	23	5.6	20	8.1	43	6.6
12 years old	22	5.4	20	8.1	42	6.4
13 years old	22	5.4	10	4.0	32	4.9
14 years old	34	8.3	21	8.5	55	8.4
15 years old	34	8.3	17	6.9	51	7.8
16 years old	28	6.9	19	7.7	47	7.2
17 years old	30	7.4	24	9.7	54	8.2
18 years old	7	1.7	1	0.4	8	1.2

Q70) Is your child male or female?						
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q70	Frequency	Percent	Frequency	Percent	Frequency	Percent
Male	212	52.6	132	53.7	344	53.0
Female	191	47.4	114	46.3	305	47.0

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	98	23.7	33	13.5	131	19.9
No, not Hispanic or Latino	316	76.3	212	86.5	528	80.1

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	274	67.5	166	68.3	440	67.8
Black or African American	52	12.8	42	17.3	94	14.5
Asian	17	4.2	4	1.6	21	3.2
Native Hawaiian or other Pacific Islander	1	0.2	2	0.8	3	0.5
American Indian or Alaska Native	5	1.2	2	0.8	7	1.1
Other	38	9.4	13	5.3	51	7.9
Multiracial	19	4.7	14	5.8	33	5.1

Q73) What is your age?						
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q73	Frequency	Percent	Frequency	Percent	Frequency	Percent
Under 18	63	15.0	32	13.0	95	14.3
18 to 24	15	3.6	9	3.7	24	3.6
25 to 34	117	27.9	50	20.3	167	25.1
35 to 44	138	32.9	100	40.7	238	35.8
45 to 54	65	15.5	45	18.3	110	16.5
55 to 64	14	3.3	7	2.8	21	3.2
65 to 74	5	1.2	2	0.8	7	1.1
75 or older	2	0.5	1	0.4	3	0.5

Q74) Are you male or female?						
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q74	Frequency	Percent	Frequency	Percent	Frequency	Percent
Male	62	14.8	27	11.0	89	13.4
Female	356	85.2	219	89.0	575	86.6

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	28	6.8	6	2.5	34	5.2
Some high school, but did not graduate	38	9.2	12	4.9	50	7.6
High school graduate or GED	118	28.7	68	27.9	186	28.4
Some college or 2-year degree	139	33.8	101	41.4	240	36.6
4-year college graduate	62	15.1	42	17.2	104	15.9
More than 4-year college degree	26	6.3	15	6.1	41	6.3

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	408	97.6	238	97.5	646	97.6
Grandparent	7	1.7	1	0.4	8	1.2
Aunt or uncle	0	0.0	1	0.4	1	0.2
Older brother or sister	2	0.5	0	0.0	2	0.3
Other relative	0	0.0	1	0.4	1	0.2
Legal guardian	1	0.2	3	1.2	4	0.6
Someone else	0	0.0	0	0.0	0	0.0

Q77) 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	
Q77	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	0	0.0	2	0.8	2	0.3
No	416	100.0	244	99.2	660	99.7

Q78) 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	
Q78	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	0	0.0	2	100.0	2	100.0
Sometimes	0	0.0	0	0.0	0	0.0
Usually	0	0.0	0	0.0	0	0.0
Always	0	0.0	0	0.0	0	0.0

Q79) 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	
Q79	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	0	0.0	0	0.0	0	0.0
Sometimes	0	0.0	0	0.0	0	0.0
Usually	0	0.0	0	0.0	0	0.0
Always	0	0.0	0	0.0	0	0.0

ARKids First B Comments

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
0-4	Very good	13-18	CCC Sample	GOOD AFTERNOON, THE SURVEY COVERED MOST COMMON AREAS. HOWEVER, I FEEL LIKE CHILDREN WITH SPECIAL NEEDS THAT HAVE ARKIDS A OR B SHOULD HAVE SOME SORT OF EXTRA COVERAGE OR LENIENCY ON WHAT IS COVERED BY ARKIDS. ** HAS ARKIDS B AND IT DOES NOT COVER A WHEELCHAIR TO ASSIST WITH NOT TO BE FULL WEIGHT BEARING AT ALL TIMES. FAMILIES THAT ARE ON ARKIDS ARE NOT ABLE TO AFFORD A 5,000 TO 10,000 DOLLARS WHEELCHAIR OUT OF POCKET. ARKIDS B WILL NOT COVER ORTHOPEDIC SERVICES IN LOCAL HOMETOWNS, WHICH PREVENTS A CHILD FROM GETTING THE CARE OR PRODUCTS THEY NEED. I FEEL THAT COVERAGE SHOULD BE REVIEWED FOR CHILDREN THAT REQUIRE EXTRA CARE DUE TO SPECIAL NEEDS OR DISABLED CHILDREN. YOU CAN REACH ME AT ** THANK YOU!
8-10	Very good	0-4	CCC Sample	WORKING ON TALKING WITH HIS DOCTOR ABOUT BEHAVIORAL ISSUES THAT I HAVE SEEN IN THE LAST FEW MONTHS. HOPING TO GET AN ANSWER TO THE ISSUES! **
8-10	Very good	0-4	CCC Sample	EVERYTHING IS GOOD. HER DENTAL DOCTOR THAT DID HER SURGERY IS SUPER GOOD SUPER KNOWLEDGEABLE; GREAT FLUENT IN SPANISH TO EXPLAIN TO MY HUSBAND ABOUT THE SURGERY. JUST THE FACT THAT THE WAITING LIST IS LONG FOR MANY MONTHS THAT'S THE THING. ** FORGOT HER LAST NAME SUPER GREAT DENTAL SURGEON. Q9) IDK WHAT TO RATE FOR DENTAL BUT IT IS ALL BACKED UP CAUSE THERE IS A WAITING LIST FOR DENTAL SURGERY AND GOT CALLED FROM PRE-K SAYING YOUR CHILD'S MOUTH IS BLEEDING AND SHE NEEDED HER TEETH DONE ASAP BUT WAS SCHEDULED WAY OUT THEY DID HELP THOUGH TO MOVE UP PCP FOR HER DENTAL BUT 1 DAY ONLY; Q10) DENTAL DOCTOR SURGEON SUPER GREAT!!; Q36) ALWAYS KNOWLEDGEABLE WITH HEALTH INFO; Q49) FOR NOW GOOD THANK GOD!! SHE STILL GETS MEDICAID AND DENTAL PERFECT.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Excellent	9-12	CCC Sample	I JUST WANT TO THANK YOU FOR EVERYTHING. THANK YOU!
5-7	Very good	5-8	General Sample	CONSISTENCY NEEDS IMPROVEMENT.
8-10	Excellent	5-8	General Sample	THANK YOU FOR YOUR SERVICES.
8-10	Excellent	5-8	General Sample	I AM BEYOND PLEASED WITH OUR MEDICAL PROVIDER. I HAVE A VERY HEALTHY 6-YEAR OLD (THIS SURVEY) AND AN OLDER TEEN IN REMISSION FROM CANCER. HE ALSO RECIEVES EXCELLENT CARE THROUGH ALL SPECIALTY DOCTORS. ONE AREA OF GROWTH NEEDED IS IN DENTAL. PROVIDERS ARE HARD TO COME BY AND QUALITY OF CARE HAS DECREASED SIGNIFICANTLY SINCE WE SWITCHED FROM OUR BELOVED DENTIST WE USED PREVIOUSLY. I HATE THAT REIMBURSMENT RATES ARE SO AWFUL THAT WE HAD TO GO FROM QUALITY/INDIVIDUALIZED DENTISTS THAT KNEW MY CHILDREN TO A CATTLE CALL FACILITY THAT HAS NO CARE ABOUT INDIVIDUALS AT ALL.
8-10	Very good	5-8	General Sample	WE ARE VERY THANKFUL FOR OUR CHILDS HEALTHCARE COVERAGE.
5-7	Very good	9-12	General Sample	I DO NOT BELIEVE I SHOULD HAVE A COPAY FOR MY DAUGHTER WHEN SEEING ANY KIND OF DOCTORS OR ANY MEDICINE SHE HAS RECEIVED. I CANNOT AFFORD COPAY PLUS PAY BILLS & FOOD IN OUR HOME WITHOUT ANY HELP THROUGH THE GOVERNMENT SYSTEM WHEN THEY SAY I MAKE TOO MUCH AND TRY TO PUT HER FATHER ON CHILD SUPPORT WHEN HE'S THERE FOR HER AND SUPPORT HER NEEDS TOO. ALSO NEED TO HAVE A BACKUP DOCTOR TOO WHEN SHE CAN'T SEE HER REGULAR DOCTOR BECAUSE OF HIS OFFICE HOURS.
8-10	Very good	0-4	CCC Sample	THANK YOU SO MUCH, WITHOUT AR KIDS INSURANCE WE WOULD'VE NEVER BEEN ABLE TO PAY FOR HER SURGERY! HER HEALTH IS SO MUCH BETTER NOW! GREAT DOCTORS & CUSTOMER SERVICE

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
5-7	Very good	13-18	CCC Sample	WHILE FILING FOR INSURANCE AND FOOD STAMPS WHEN ** DAD LOST HIS JOB I WAS PROVIDED 0 ASSISTANCE. I WAS TOLD WE NEEDED TO PROVIDE A FORM FROM HIS FORMER EMPLOYER. WE HAVE YET TO BE ABLE TO GET THIS FORM. ** WAS WITHOUT A JOB FOR 2 MONTHS. FOR 2 MONTHS EVERYTHING WAS PUT ON ME AND WHEN I TURNED TO THE STATE FOR HELP I WAS GIVEN NONE. ** LOST HIS INSURANCE AS DID I. ALL BECAUSE I COULDN'T GET ** OLD BOSS TO FILL OUT A FORM. I EXPLAINED TO HIM THE IMPORTANCE OF THE FORM EXPLAINING WE WERE GOING TO LOSE INSURANCE AND I WAS NEEDING HELP SINCE ** WAS OUT OF A JOB. SINCE I COULD NOT GET HIS BOSS TO FILL OUT THE FORM STATING HE WAS NO LONGER EMPLOYED WITH HIM I WAS NEVER GIVEN ASSISTANCE. I CALLED BOTH SNAP AND ARKIDS I WENT IN PERSON TO THE BENTON COUNTY HUMAN SERVICES BUILDING (DHS) AND HAND WRITTEN A LETTER AND STILL TO THIS DAY HAVE NOT HEARD ANYTHING. COMMUNICATION AND SUPPORT IS VERY LACKING.
8-10	Excellent	0-4	General Sample	MY SON GOES TO DAYCARE AND RECEIVES SPEECH THERAPY FOR HIS COMMUNICATION SKILLS AND I FEEL LIKE IT HAS IMPROVED HIM SO MUCH ESPECIALY BEING ABLE TO RECEIVE THESE CLASSES IN DAYCARE HAS BEEN A BLESSING IN DISGUISE BECAUSE HE WOULD HAVE FALLEN BEHIND WITHOUT ME KNOWING I APPRECIATE EVERYTHING THAT HAS BEEN PROVIDED FOR HIM TO THRIVE! I HAVE ALSO HAD TO DO A FEW MEDICAID REFERRALS FOR HIM AND HAVE NOT HAD ANY ISSUES WITH ANYTHING BEING COVERED ESPECIALLY WITH US BEING FURTHER AWAY FROM HIS PRIMARY DOCTOR!
8-10	Excellent	13-18	General Sample	I'M VERY HAPPY WITH THE HEALTHCARE THEY'VE GIVEN MY DAUGHTER. THANK YOU VERY MUCH.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
5-7	Excellent	13-18	General Sample	I FIND IT UNBELIEVABLE THAT MY SON WAS APPROVED BY ORTHODONTIST FOR BRACES BUT ONCE SENT TO MEDICAID HE WAS DENIED. SOME PARENTS ARE NOT ABLE TO AFFORD NEARLY $6,000 IN BRACES DUE TO BEING DENIED.
8-10	Very good	0-4	General Sample	THANK YOU SO MUCH FOR HEALTHCARE (HEALTH PLAN)
8-10	Very good	0-4	CCC Sample	MY SON HAS BEEN GOING TO THERAPY AT HARRISON BOONE COUNTY HOSPITAL FOR A WHILE NOW, HE'S BEEN SLOWER LEARNING THINGS THAN SOME OTHER CHILDREN HIS AGE. HIS DOCTOR REFERRED HIM TO THE HOSPITAL.
8-10	Very good	13-18	CCC Sample	SHE TAKES HYOSCYAMINE ODT FOR IRRITABLE BOWEL SYNDROME WHICH IS NOT COVERED BY HER HEALTH PLAN.
8-10	Excellent	5-8	General Sample	I FEEL THAT WE SHOULD BE ABLE TO UTILIZE URGENT CARE CLINICS WITHOUT A REFERRAL. WHEN PCP CLINICS ARE FULL OR CLOSED, OUR ONLY OPTION IS THE ER. I FEEL THAT IS A WASTE OF RESOURCES AND CAN TAKE AWAY FROM CRITICAL PATIENTS. URGENT CARE CLINICS ARE OPEN LATER AND CAN WRITE PRESCRIPTIONS OR PERFORM X RAYS.
8-10	Excellent	13-18	CCC Sample	MY CHILD TAKES MEDICINE FOR ANXIETY AND ALSO RECIEVES COUNSELING. SHE HAS COME A LONG WAY AND THE PROVIDERS SHE SEES ARE AMAZING.
5-7	Excellent	5-8	CCC Sample	PRESCRIPTION MEDICATIONS SHOULD BE NO CHARGE. ALL OF OUR OTHER FAMILYS INSURANCE COVERS GENERIC PRESCRIPTIONS AT NO COST TO US.
8-10	Very good	5-8	CCC Sample	WHY DOES AR KIDS B HAVE A COPAY WHEN A DOES NOT?

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
5-7	Very good	5-8	CCC Sample	I STRUGGLED FOR OVER A YEAR TO GET HEALTH INSURANCE FOR MY SON BUT WAS DENIED DUE TO MY INCOME BEING TOO MUCH. I JUST WANT TO SAY THAT OUR BENEIFT ELIGIBILITY SHOULD NOT BE DETERMINED BY OUR 'GROSS INCOME'. INSTEAD BECAUSE MY 'GROSS PAY' IS WHY MY SON WENT WITHOUT HEALTH INSURANCE COVERAGE FOR A FULL YEAR! I COULD NOT AFFORD TO INSURE MYSELF PLUS TWO CHIDREN WITH MY EMPLOYER AND STILL AFFORD MY BILLS, GROCERIES, GAS, SCHOOL LUNCHES, ETC. OUR 'GROSS PAY' IS NOT WHAT WE TAKE HOME AND SHOULD NOT BE USED TO DETERMINE OUR ELIGIBILITY!
8-10	Very good	9-12	CCC Sample	MY SON HAS JUVENILE IDIOPATHIC ARTHRITIS (JIA). WE SEE A RHUEMATOLOGIST VERY REGULARLY AND ALSO HAVE TO HAVE EYES CHECKED EVERY 6 MONTHS. HE GETS A HUMIRA INJECTION BI-MONTHLY, HE TAKES 6 METHOTREATE PILLS EVERY WEEK (ON SATURDAYS), AND FOLIC ACID EVERYDAY. THE HUMIRA COMES FROM A SPECIALTY PHARMACY, EVERYONE WORKS WELL TOGETHER AND WE HAVE NO PROBLEMS GETTING HIS MEDICATION. WE ARE VERY THANKFUL FOR HIS INSURANCE (AR KIDS B) AND FOR ALL THE HELP IT PROVIDES OUR FAMILY. THANK YOU SO MUCH FOR THE OPPORTUNITY TO FILL THIS SURVEY OUT!
8-10	Excellent	9-12	General Sample	THE ONLY COMPLAINT I HAVE ABOUT HIS INSURANCE IS DENTAL RELATED. HIS DENTIST AND ORTHODONTIST SAYS HE REALLY NEEDS BRACES, BUT MEDICAID WON'T PAY UNTIL HE IS 13. WE REALLY NEED HELP WITH THIS.
8-10	Very good	0-4	General Sample	MY CHILD HAS HAD MEDICAID SINCE JULY OF 2024 AND WE STILL HAVE NOT RECEIVED A MEDICAID CARD.
8-10	Excellent	13-18	General Sample	** HAS MEDICAID.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
5-7	Very good	9-12	CCC Sample	AFTER OUR LAST CHILD WAS BORN, OUR FAMILY SIZE INCREASED AND SO WE QUALIFIED FOR ARKIDS FIRST A. WE TRIED MULTIPLE TIMES AND MULTIPLE WAYS BUT IT NEVER GOT UPDATED IN THE SYSTEM. SO WE ARE STUCK IN PART B AND IT SEEMS IMPOSSIBLE TO CHANGE IT. THIS IS OUR ONLY FRUSTRATION, BUT IT IS A MAJOR PROBLEM.
5-7	Good	0-4	General Sample	THE FACT THAT HIS HEALTH PLAN HAS CHANGED SEVERAL TIMES OVER THE PAST 12 MONTHS HAS MADE GETTING HIS CARE STRESSFUL AS WELL AS COSTING US MORE. IT MAKES FOR A VERY BAD EXPERIENCE WITH HEALTHCARE COVERAGE AND IS VERY DISAPPOINTING.
8-10	Very good	5-8	CCC Sample	THE ONLY THING WE'VE HAD AN ISSUE WITH IS, SOME MEDICATIONS HAVE NOT BEEN COVERED AND THEY WERE EXPENSIVE. THE CARE HAS BEEN VERY GOOD, ESPECIALLY TREATING DIGESTIVE ISSUES.
8-10	Very good	13-18	CCC Sample	MY CHILD HAS 5 OTHER SIBLINGS THAT RELY ON THEIR ARKIDS B PLAN FOR MENTAL HEALTH APPOINTMENTS, PHYSICAL, OT, AND SPEECH THERAPY. SO JUST BECAUSE THE CHILD IN QUESTION IS ONE OF MY MORE HEALTHY KIDS ASIDE FROM THE MAJOR HELP I GET FOR HIS INHALER. I AM GRATEFUL FOR THE HELP I DO GET BECAUSE THERE IS NO WAY I COULD TAKE CARE OF THEM ADEQUATELY BECAUSE THEIR PRIMARY INSURANCE IS CRAP FOR THE STUFF THAT AFFECTS OUR DAILY LIVES.
8-10	Excellent	0-4	General Sample	THE ONLY ISSUE THAT I HAVE IS THAT HER PCP WILL NOT DO REFERRALS FOR ARKIDS. THEIR OFFICE ISN'T OPEN ON SUNDAYS OR AFTER LUNCH ON SATURDAYS. IF MY CHILD GETS SICK ON A SUNDAY OR A SATURDAY AFTERNOON I EITHER HAVE TO PAY OUT OF POCKET FOR HER TO SEE A PROVIDER AT URGENT CARE OR I HAVE TO LET HER BE SICK UNTIL MONDAY AND THEN MISS WORK TO BRING HER TO HER PCP SO THEY WILL FILE IT ON HER INSURANCE.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
5-7	Excellent	0-4	General Sample	I FEEL LIKE AS A FAMILY OF FOUR ON 1 INCOME WE SHOULD'VE BEEN ELIGIBLE TO QUALIFY FOR ARKIDS 1ST (A) WHERE DOCTORS VISIT FOR EITHER (OR BOTH) OF MY KIDS DOESN'T REQUIRE A COPAY OR MONEY OUT OF OUR POCKET FOR MEDICINES TO GET THEM WELL. OBVIOUSLY, IT GETS PAID EVERYTIME, BUT AS INFLATION CONTINUES TO CHANGE PRICES IN THIS ECONOMY, A LOT OF THE MIDDLE CLASS, AS WELL AS MY FAMILY, ARE STRUGGLING AND DOCTORS VISITS AND MEDS SHOULD NOT BE A STRESSOR. MEDICAL IS VERY IMPORTANT SO IT'LL GET PAID, BUT EXTRA STRESS ON FINANCIALS FOR SOMETHING SO NATURALLY CAUSED IS CRAZY.
8-10	Good	9-12	CCC Sample	MY DAUGHTER DEVELOPED A COMMON COLD AND NEEDED A NEBULIZER. THE MACHINE WAS APPROVED THROUGH INSURNCE, BUT NOT THE SOLUTION. WHICH IN TURN CAUSED HER HEALING PROCESS TO PROLONG AND HAD NO USE FOR THE MACHINE. FIXING THIS ISSUE WOULD HELP FAMILIES AND THOSE SICK CHILDREN TREMENDOUSLY. THANK YOU!
0-4	Very good	9-12	General Sample	I JUST WISH MORE PLACES WOULD ACCEPT THE INSURANCE.
8-10	Excellent	5-8	General Sample	I FEEL LIKE IT IS A LONG, DRAWN OUT PROCESS TO GET MY CHILDS HEALTHCARE PLAN (INSURANCE) TO PAY FOR MY CHILD TO BE TESTED FOR DYSLEXIA OR ANY SPECIFIC LEARNING DISABILITY. IF IT WASN'T AS LONG OF A PROCESS CHILDREN COULD GET THE HELP THEY NEED FASTER.
8-10	Excellent	9-12	General Sample	I AM GRATEFUL FOR MY DAUGHTER'S HEALTHCARE PLAN.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Excellent	5-8	CCC Sample	OUR OLDEST DAUGHTER BROKE HER ARM LAST YEAR, WE TOOK HER TO THE 24 HRS EMERGENCY CLINIC. THEN WE WERE POINTED TO THE NORTHWEST MEDICAL HOSPITAL IN BENTONVILLE, TO SEE A SPECIALIST. SHE GOT AN X RAY AT THE HOSPITAL. WE NEVER SAW A SPECIALIST OR CALLED FOR HER TEMPORARY CAST THAT SHE WAS WAERING, WORST SERVICE IN THIS HOSPITAL. SHOULD HAVE TOOK HER TO CHILDRENS HOSPITAL INSTEAD SO I GUESS WE'VE LEARNED OUR LESSON.
8-10	Excellent	13-18	General Sample	MY SON HAS NO PROBLEMS, BUT I AM VERY GRATEFUL FOR THE HEALTHCARE PLAN. THANK YOU
8-10	Excellent	5-8	General Sample	WE ARE VERY THANKFUL FOR HIS INSURANCE. IT HELPS SAVE ME MORE THAN YOU KNOW!
5-7	Excellent	5-8	General Sample	THANK YOU FOR MAKING THIS RESOURCE AVAILABLE. IN GENERAL WE'VE BEEN PLEASED. THE TWO DIFFICULTIES WE'VE EXPERIENCED INCLUDE 1. WELL CHILD CHECKS NOT BEING COVERED - CLINIC IS CURRENTLY WORKING ON RESUBMITTING. 2. SOME DIFFICULTY REPORTING TEMPORARY INCOME CHANGES (WHICH MAY JUST BEEN OPERATOR ERROR - AKA MY LACK OF TECH SAVINESS.
8-10	Very good	5-8	General Sample	WISH STATEMENTS WERE MORE CLEAR AND NOT SCARED THAT IT WAS A BILL. GETTING REPLACEMENT CARDS IS HARD AS WELL. MAYBE GETTING A LIST OF PLACES THAT ARE COVERED BY ARKIDS WOULD HELP.
8-10	Very good	9-12	CCC Sample	MY CHILD IS VERY HEALTHY AND AT TIMES HAVE USED SOME OF THE SERVICES LISTED BUT NOT IN THE LAST 6 MONTHS

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Very good	13-18	General Sample	MY CHILD GOES TO A NEUROLOGICAL CHIROPRACTOR AFTER GETTING A CONCUSSION. WHY DID ARKIDS B NOT COVER MORE THAN $1,000 OF THIS TREATMENT? I AM SKEPTICAL OF SEEING A CHIROPRACTOR AT FIRST TO RELIEVE SOME OF THE SYMPTOMS, BUT THEY HAVE BEEN WONDERFUL AND SHE IS MAKING IMPROVMENTS NOW. THEY SEEMED TO BE LITTLE CONCERNED FOR HER CONDITION FROM OTHER PHYSICIANS.
8-10	Excellent	13-18	CCC Sample	HONESTLY I WANT TO SAY THANK YOU. IF I DID NOT HAVE THIS SERVICE, AND AT LEAST OTHERS I KNOW, THE HEALTH OF OUR CHILDREN WOULD BE LEFT TO PEOPLE TRYING TO FIGURE THINGS OUT, AND MAYBE A LOT MORE HOME REMEDIES AND POSSIBLY NO CARE GIVEN. I AM GRATEFUL THAT THE STATE CARES TO TAKE A MOMENT TO COMPLETE WHAT IT DOES FOR THE PEOPLE AND THEIR HEALTH. I AM CURIOUS ON HOW THIS INFORMATION TRULY IMPACTS AND I HOPE IN A MYSTERY GOOD WAY. THANK YOU FOR THIS SUPPORT. I AM GLAD THAT I CAN GET EASE FOR MY DAUGHTER AND HELP IS THERE. DEFINITELY DON'T TAKE YOU FOR GRANTED. PLEASE KNOW WHEN AND HOW YOU SUPPORT THE PEOPLE OF THIS TIME THAT IT MAKES A DIFFERENCE. THANK YOU ARKANSAS DHS FOR MAKING A DIFFERENCE IN NOT ONLY MY LIFE BUT MY FAMILIES AS WELL. I AM GRATEFUL OTHERS HAVE THIS OPPORTUNITY THANK YOU AGAIN. ** P.S MOTHERS AND FATHERS OF THESE CHILDREN MATTER. THEIR HEALTH MATTERS. WHEN SUPPORT IS TAKEN AWAY THAT EFFECTS THE CHILD'S HEALTH. PLEASE DON'T BE SO QUICK TO SNATCH SUPPORT.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
0-4	Excellent	0-4	General Sample	ARKIDS B IS GOOD INSURANCE BUT I ALSO DO WANT IT TO PAY (OR EVEN WITH A COPAY) FOR DAY SERVICES IN ARKIDS PEDIATRIC DAY CENTERS. MY CHILD WAS IN DAY SERVICES THROUGH ARKIDS A AND ONE DAY OUR INSURANCE SWITCHED TO B AND SHE WAS KICKED OUT. THIS WAS A GREAT CHALLENGE FOR OUR FAMILY VERY SUDDENLY, AND I WAS NOT WARNED ABOUT IT. THANK YOU FOR SENDING THIS SURVEY!
8-10	Poor	0-4	General Sample	ARKIDS HAS BEEN GREAT. DOCTORS ARE GREAT. MY ONLY COMPLAINT WOULD BE IT IS HARD TO SWITCH DOCTORS WHEN YOU MOVE TO A DIFFERENT COUNTY IN ARKANSAS. IT IS A PROCESS THAT TOOK LIKE 2 MONTHS AND HE NEEDED A DOCTOR. SO WE HAD TO USE URGENT CARE.
8-10	Good	13-18	General Sample	IT WOULD BE HELPFUL INSTEAD OF ER TO ALLOW URGENT CARE FOR AFTER HOURS OR GENERAL TESTS
8-10	Very good	0-4	General Sample	THANK YOU! SINCERELY A SINGLE STRUGGLING MOM
8-10	Very good	9-12	CCC Sample	I ASKED FOR A REFERRAL FOR FAMILY COUNSELING BUT HAVEN'T RECEIVED A CALL BACK AS OF YET. THIS WAS IN JANUARY OR POSSIBLY NOV OR DECEMBER
5-7	Excellent	5-8	General Sample	MY SON NEEDED FEEDING THERAPY, WHICH WAS COVERED BY HIS MEDICAID. THERE WAS MISCOMMUNICATION TOWARD THE END OF HIS THERAPY AND NOW WE OWE HIS THERAPY OVER $400. DURING THAT TIME THE THERAPY KEPT REASSURING US THAT HIS VISITS WOULD BE COVERED, BUT THEY WERE NOT. HOW CAN WE GET THIS FIXED?

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Excellent	0-4	CCC Sample	VERY AFFORDABLE FOR LOW INCOME FAMILIES. EVEN THOUGH THERE IS A COPAY, IT IS AFFORDABLE. THE ONLY NEGATIVE I HAVE IS WITH THE DHS OFFICE WHICH MAKES THE PROCESS COMPLICATED, I FINALLY GOT IT THROUGH MONTHS AND MONTHS AFTER REAPPLYING. FROM THEM MESSING UP ON MY PAPERWORK. I HAD NO ISSUES WITH MADISON COUNTY, AR BUT WHEN I MOVED ALL I HAVE GOTTEN IS ISSUES WITH WASHINGTON COUNTY, AR.
8-10	Very good	9-12	CCC Sample	ARKIDS IS A BLESSING TO OUR FAMILY. THANK YOU!
5-7	Good	0-4	CCC Sample	MY OTHER CHILD DOES NEED SPECIALIZED SERVICES FOR A GENETIC CONDITION. SHE NEEDS PHYSICAL THERAPY AND ANKLE FOOT ORTHOTICS. SHE HAS BEEN DENIED BOTH, BECAUSE MEDICAID REQUIRES THAT KIDS CONTINUE MEETING GOALS IN THERAPY. KIDS LIKE HER AND OTHERS WITH CONDITIONS LIKE CEREBAL PALSY, EHLER-DANLOS, SPINA BIFIDA, ETC. LOSE THEIR THERAPY SERVICES WHEN THEY ARE FINALLY UP TO PAR WHICH WITHOUT ON-GOING THERAPY LEADS TO REGRESSION, THEN MORE NEED FOR THERAPY. ALSO, AFOS ARE OFTEN NEEDED IN THESE CONDITIONS AND AUTISM FORTOE WALKING. I WAS TOLD THESE SPECIFICALLY WERE THE ONE TYPE OF BRACE NOT COVERED.
8-10	Excellent	13-18	General Sample	I APPRECIATE ARKIDS - THIS HEALTH SERVICE HAS BEEN A BLESSING TO OUR FAMILY. THANK YOU!

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
5-7	Excellent	5-8	General Sample	I HAVE HAD TO TELL THE NURSES/FRONT OFFICE WHY OUR CHILD WAS BEING SEEN! THEY HAD NO IDEA! I HAVE ALSO HAD TO PAY OUT OF POCKET SEVERAL TIMES FOR MY SICK CHILD TO BE SEEN BECAUSE THEIR OFFICE WAS TOO BUSY. ALSO, BECAUSE IT REQUIRES A REFERRAL TO BE SEEN ANYWHERE ELSE EVEN FOR SOMETHING AS SIMPLE AS A FLU TEST. WE ARE NOT THE TYPE OF PEOPLE TO 'USE' THE GOVERNMENT. HOWEVER, WE CANNOT AFFORD A PPO INSURANCE WITHOUT THE GOVERNMENT'S HELP (ONLY GOVERNMENT HELP WE GET). NOW MY CHILD IS BEING SUBJECTED TO MORE TESTING BECAUSE OF A MURMUR THATS BEING HEARD BY ONLY ONE PROVIDER MY CHILD'S WHOLE LIFE. EVEN AFTER AN EKG AND CHEST X-RAY WAS DONE. THATS TWO MORE APPOINTMENTS BEING BILLED TO MEDICAID THAT WE FEEL MAY HAVE BEEN UNNECESSARY AFTER EVERYTHING CAME BACK CLEAR. NOW WAITING FOR LAST APPOINTMENT (MAKES 3) TO SEE IF PROVIDER CAN HEAR IT STILL. IF THEY DO, WE WILL HAVE TO BE SEEN BY A CARDIOLOGIST NEXT (MAKE THAT 4 APPOINTMENTS.)
0-4	Very good		General Sample	MY CHILDS HEALTHCARE PROVIDERS ARE VERY GOOD. THE INSURANCE PROCESS HAS BEEN AWFUL THOUGH. ORIGINALLY, THE HOSPITAL SHE WAS BORN IN FILLED OUT THE PAPERWORK FOR US. AFTER 6 MONTHS IT WAS LIKE PULLING TEETH TO KEEP COVERAGE FOR MY CHILD. SOMETIMES YOU COULD GET AHOLD OF SOMEONE WILLING TO HELP, OTHER TIMES IT WAS PEOPLE WHO COULD NOT CARE LESS AND HAD NO SUGGESTIONS TO HELP. I JUST WISH THE PROCESS WAS EASIER, AND THE PEOPLE WORKING WOULD BE MORE HELPFUL.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Very good	0-4	General Sample	I BELIEVE HE HAS ARKIDS A; HOWEVER I'M NOT CERTAIN. I KNOW HE HAS ARKIDS. HE HAS SEEN HIS DOCTOR (PCP) 1-2 TIMES FOR BEING SICK IN THE LAST SIX MONTHS, ONCE FOR HIS FOUR-YEAR WELLNESS CHECK, AND ONCE DUE TO AN ACCIDENT. HE HAS ALSO SEEN AN ER DOCTOR IN THE LAST 6 MONTHS. I INCLUDED THAT AS DOCTOR VISITS IMMEDIATELY NEEDED, BUT NOT FOR SPECIALISTS.
8-10	Excellent	0-4	General Sample	THE PLAN IS GOOD FOR PRIMARY CARE, BUT UNCLEAR ABOUT THE POLICIES AND PROTOCOLS FOR URGENT CARE AND ER VISITS (OUT-OF-STATE). WHILE VISITING FAMILY IN MARYLAND, OUR DAUGHTER DEVELOPED A HIGH FEVER AND WAS INCONSOLABLE. WE WERE TURNED AWAY FROM URGENT CARE, ADVISED TO GO TO AN ER, AND NOW WE HAVE A LARGE HOSPITAL BILL SINCE THE ER DID NOT TAKE HER MEDICAID INSURANCE. RECENTLY, SHE DEVELOPED A HIGH FEVER AGAIN AND DID NOT DRINK ANYTHING ALL DAY. SINCE WE WERE HOME IN ARKANSAS, WE WENT TO URGENT CARE SINCE IT WAS NIGHT AND AFTER HOURS FOR HER PCP. WHEN WE GOT THERE, WE WERE ADVISED THAT HER PCP NEEDED TO SEND A PRIOR AUTHORIZATION IN ORDER FOR THE VISIT TO BE COVERED.
8-10	Very good	9-12	CCC Sample	ARKANSAS, SPECIFICALLY POOR, RURAL AREAS, NEED MORE/BETTER ACCESS TO MENTAL HEALTH SERVICES AND NOT JUST ACUTE OR RESIDENTIAL TREATMENT.
8-10	Excellent	0-4	General Sample	THE INITIAL PROCESS OF GETTING APPROVED WAS VERY COMPLICATED AND TEDIOUS. IT WAS SO DIFFICULT TO CONTACT A PERSON THAT COULD ACTUALLY HELP US. SINCE THEN, SERVICES HAVE BEEN GREAT!
5-7	Very good	13-18	General Sample	WOULD BE NICE IF THE DOCTOR PRESCRIBES A RX NEEDED. IT DOESN'T TAKE AN ACT OF CONGRESS FOR THEM TO GET IT.
8-10	Excellent	0-4	General Sample	GREAT COVERAGE FOR MY 3-YEAR OLD DAUGHTER! THANK YOU!

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Excellent	9-12	CCC Sample	OUR PERSONAL DOCTOR ** WITH UAMS NEIGHBORHOOD CLINIC IS AN AMAZING DOCTOR. HE IS VERY THOROUGH AND ALWAYS TAKES THE TIME TO LISTEN AND HELP WITH ANYTHING. BEST DOCTOR EVER!!!
5-7	Excellent	0-4	General Sample	THE PROCESS FOR APPLYING FOR AR MEDICAID IS DIFFICULT/CONFUSING, AND IT TAKES SEVERAL MONTHS TO RECEIVE APPROVAL/DISAPPROVAL FROM THE STATE. WAITING LENGTHY TIMES FOR AN APPROVAL IS MORE THAN JUST INCONVENIENT. ALSO, IT SHOULD BE MADE AWARE WHEN 'OPEN ENROLLMENT' IS, SO PARENTS CAN ENROLL OR UPDATE INFORMATION AS NEEDED BEFORE THE INSURANCE PLAN IS LOCKED IN FOR THE YEAR. I DID NOT RECEIVE ANY INFORMATION IN REGARD TO THIS FOR THE YEAR OF 2024, AND I NEEDED TO MAKE UPDATES TO MY CHILD'S INFO. WE ARE NOW LOCKED INTO THIS PLAN FOR THE YEAR OF 2025.
0-4	Good	13-18	General Sample	I NEED THE INSURANCE THAT SHE USED TO HAVE THAT COVERED EVERYTHING WITH NO CO-PAY OR LEFTOVER BALANCE FOR ME TO PAY.
8-10	Good	9-12	General Sample	THE AMOUNT OF TIME IT TAKES FOR DR TO PUT IN AN ORDER FOR A TEST AND IT TO BE APPROVED, THEN AN APPOINTMENT TO BE SCHEDULED. WE HAVE BEEN WAITING FOR 4 WEEKS! THAT'S RIDICULOUS.
8-10	Very good	9-12	General Sample	THANKS TO YOU TOO.
5-7	Excellent	0-4	General Sample	COPAY $5 FOR EACH MEDICINE PLUS A $10 COPAY VISIT. SOMETIMES THIS IS DIFFICULT TO PAY AS A SINGLE PARENT. I'VE PAID $35 FOR ONE VISIT PLUS MEDS.
5-7	Excellent		General Sample	PLAN DOES NOT COVER FRENECTOMIES WHICH WAS CRUCIAL TO SUPPORT MY DAUGHTER'S ABILITY TO NURSE. THE SAME APPLIES TO CHIROPRACTIC CARE FOR INFANTS.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Fair	13-18	CCC Sample	MY CHILD BEING ON THIS PLAN HAS HELPED A LOT. IF SHE WASN'T ON THIS PLAN SHE WOULD NOT GET ALL THE CARE SHE NEEDS. NOT SURE WHAT I AM GOING TO DO ONCE SHE TURNS 18. SHE HOME SCHOOLS DUE TO HER HEALTH.
	Very good	9-12	General Sample	ONLY THE HELP US SINGLE MOTHERS HAVE - THE HEALTH PLAN MY SON NEEDS IT. HE HAS A CLEFT LIP PALETE AND WE NEED ALL YOUR SUPPORT TO HAVE HEALTH PLAN FOR MY CHILD. THANK YOU!
5-7	Very good	5-8	CCC Sample	Q21) TOOK A VERY LONG TIME TO GET SET UP BUT NOW IS GREAT (TRYING SINCE AUG); Q49) THE PLAN IS FINE, A WAS BETTER OF COURSE BUT THE ISSUE IS CUSTOMER SERVICE & INABILITY TO USE ONLINE OR EVEN RESET A PASSWORD
	Good	13-18	CCC Sample	MY CHILD VISITED 2 SPECIALISTS, 1 FOR DERMATOLOGY A & RATED 10!!! THE BEST EVER! THE SECOND SPECIALIST WAS FOR GI ISSUES AND AFTER SO LONG OF A WAIT TO GET AN APPOINTMENT WAS RUSHED-DID A BUNCH OF TESTS PCP ALREADY DID & STILL HAVEN'T GOTTEN A FOLLOW UP OR CALL, OTHERWISE, HORRIBLE.
	Very good	13-18	CCC Sample	MY CHILD HAS USED SOME OCCUPATIONAL SERVICES IN THE PAST. HE NOW GOES TO THE HIGH SCHOOL FOR A SPECIAL READING PROGRAM. THIS YEAR THEY TOOK HIM OFF SPEECH THERAPY.
8-10	Excellent	9-12	General Sample	EVERYTHING IS GREAT

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
	Excellent	13-18	CCC Sample	MY DAUGHTER HAS A LIMB DIFFERENCE. HER RIGHT ARM IS SMALL AND SHE ONLY HAS TWO FINGERS. HER DOCTOR (OLDER MALE) KEPT REFERRNG TO IT AND MADE STATEMENTS THAT INSINUATED THAT HER ACHIEVEMENTS WOULD BE LIMITED. HOW AWFUL FOR MY DAUGHTER TO HEAR THIS! IN FACT, SHE IS VERY ACCOMPLISHED AND DOES EVERYTHING A PERSON WITH 2 TYPICAL ARMS AND HANDS DOES. SO DISAPPOINTING THAT THIS PERSON IS NOT EDUCATED ON DISABILITIES AND THAT 'BEDSIDE MANNER' IS NOT EMPHASIZED.
8-10	Excellent	9-12	CCC Sample	THE FACT THAT WHEN YOU GO TO YOUR DOCTOR YOU HAVE TO PAY A COPAY. THEN IF YOUR CHILD HAS TO GET A TEST (EX: FLU, STREP, COVID) YOU GET A LETTER FROM THE LAB EXPECTING YOU TO PAY A COPAY FOR THAT ALSO. IT'S LIKE HAVING TO DOUBLE PAY FOR ONE SERVICE. THIS IS WHY HEALTH COVERAGE ANSWER OF HOW GOOD IT IS WAS NOT A 10. IF THIS COULD BE FIXED, I WOULD THEN RATE IT AS A 10.
8-10	Excellent	5-8	General Sample	ONLY COMPLAINT WITH THE PERSONAL DOCTOR IS THAT VISITS ALWAYS FEEL RUSHED. MY CHILD HAS DIFFICULTY READING. HE GOT APPROVED FOR THE $500 READING TUTOR GRANT BUT NONE OF THE TEACHERS ARE LOCAL AND WE DON'T HAVE A COMPUTER.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Excellent	5-8	CCC Sample	MY SON NEEDS AN AT HOME NEBULIZER FOR RECURRING CROUP. BOTH HOSPITAL AND DOCTOR OFFICE REFUSED TO FILE MEDICAID TO GET HIM ONE. HIS CROUP ALWAYS LANDS HIM IN THE HOSPITAL. THEY'D RATHER ME PAY FOR HOSPITAL VISITS THAN GIVE HIM EQUIPMENT TO BE TREATED AT HOME. MEDICAID FORMS ARE VERY CONFUSING. I ALWAYS GET FORMS TO FILL OUT THAT ARE REPEATING THE SAME INFORMATION OVER AND OVER, VERY FRUSTRATING ESPECIALLY WHEN THAT INFO HAS ALREADY BEEN PROVIDED MULTIPLE TIMES. I AM APPLYING FOR TEFRA FOR MY SON TO CONTINUE HIS NEEDED THERAPIES AND I CONTNUE TO BE ASKED TO REPEAT INFORMATION.
8-10	Very good	13-18	CCC Sample	IN THE PAST, WHEN THERAPY/COUNSELING WAS NEEDED, IT DID TAKE MONTHS TO BE SEEN. I WAS TOLD ONLY ONE PLACE IN THIS AREA ACCEPTS ARKIDS. CURRENTLY, IT SEEMS TRYING TO GET HELP FROM ORTHO FOR SPORTS INJURY HAS WENT IN A CIRCLE AFTER HEARING 'ARKIDS WON'T ALLOW US TO DO...' FROM A ONE INCOME HOUSEHOLD, ARKIDS HAS SAVED ME (AND MANY OTHERS) THAT CANNOT AFFORD TO ADD A DEPENDENT TO EMPLOYER HEALTH PLANS W/ A HIGH DEDUCTIBLE. THANK YOU!
8-10	Excellent	13-18	General Sample	THANKS FOR ARKIDS, IT'S BEEN A BLESSING FOR MY SON.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Good	13-18	General Sample	** WAS DIAGNOSED WITH VON-WILA BRAND DISEASE (BLOOD DISORDER). HE HAS NOSE BLEEDS FROM TIME TO TIME. SOMETIMES MILD OTHER TIMES RATHER SEVERE. HE COPES PRETTY WELL. HE KNOWS WHAT TO DO, HE IS ALSO A WELL-ADJUSTED YOUNG MAN. HE IS CONSIDERING HIS FUTURE AND HIS OPTIONS & CAREER. WE LOST HIS MOM IN 2019, HE TOOK IT REALLY BAD BUT HE IS OK. I'M VERY PROUD OF HIM, HE MAKES GOOD GRADES, AND HAS PLENTY OF FRIENDS AND HE'S LEARNING HOW TO DRIVE. OUR EXPERIENCE WITH ARKIDS HAS BEEN GREAT, PLEASANT, AND WE AND WE ARE VERY APPRECIATIVE OF THIS PROGRAM.
8-10	Very good	5-8	CCC Sample	HE RECEIVES COUNSELING THROUGH SCHOOL SERVICES. THIS IS FOR EMOTIONAL SUPPORT.
8-10	Excellent	0-4	CCC Sample	** DEALS WITH ASTHMA AND ALLERGIES AND SHE TAKES ALBUTEROL FOR HER ASTHMA AS NEEDED. IT SHOULD BE IN THERE ABOUT LEARNING ON WHAT KIND OF DISABILITIES THE KIDS HAVE OR ASK CAN THEY DO WHAT NORMAL KIDS DO.
5-7	Very good	0-4	General Sample	** IS SUPPOSED TO BE GETTING PHYSICAL AND OCCUPATIONAL THERAPY DUE TO MUSCLE WEAKNESS. THE THERAPY FACILITY DOES NOT HAVE A SPACE FOR HER SO SHE IS ON A WAIT LIST.
8-10	Very good	9-12	CCC Sample	THANK YOU FOR THE INSURANCE. ARKIDS B HAS BEEN VERY GOOD TO US. THANK YOU!!
8-10	Good	0-4	General Sample	THANK YOU.
8-10	Very good	5-8	CCC Sample	MY CHILD HAS ARKIDS B, AND IT HAS BEEN A GREAT HEALTHCARE PLAN. SHE HAS HAD ARKIDS FOR A VERY LONG TIME AND THE QUALITY IN CARE AND HEALTHCARE COVERAGE HAS BEEN THE BEST IN THE LAST YEAR. I ALSO FEEL LIKE WORKING WITH DHS HAS BEEN MUCH EASIER WITHIN THE LAST YEAR WHICH HAS MADE LIFE MUCH EASIER AS FAR AS WORRYING ABOUT MY CHILD RECIEVING THE CARE SHE NEEDS OR MIGHT NEED.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Good	13-18	CCC Sample	THERE ARE TIMES SHE WOULD GET DENIED MEDICATIONS THAT SHE NEEDED, AND DENIED SERVICES, THAT CAME OUT OF POCKET BECAUSE MEDICAID DENIED. BUT FOR THE MOST PART, ARKIDS B HAS BEEN HELPFUL IN A LOT OF OTHER AREAS. THANK YOU FOR EVERYTHING.
5-7	Excellent	9-12	CCC Sample	REFERRAL WAS MADE BUT CLINIC NEVER SCHEDULED APPOINTMENT I BELIEVE IT WAS BECAUSE OF THE INSURANCE. BETTER COVERAGE WITH SPECIALISTS WOULD BE GREAT.
8-10	Excellent	9-12	CCC Sample	MY CHILD ONLY USES HER INSURANCE FOR ROUTINE CHECK UPS WITH HER PRIMARY DOCTOR AND FOR MEDICINE FOR BEHAVIORAL. INSURANCE IS ALSO USED FOR THE EYE DOCTOR AND DENTIST. THESE ARE USED EVERY YEAR (ROUTINE VISITS). THE DENTIST IS DUE TO BRACES AND THE INSURANCE IS GREAT AND I HAVE HAD NO PROBLEMS. THANK YOU, A LOVING MOTHER, GOD BLESS YOU ALL! GOD LOVES YOU!
8-10	Very good	5-8	CCC Sample	THE MEDICAL ISSUES I AM REFERRING TO ARE ASTHMA AND ANXIETY. HIS CURRENT COUNSELOR RELOCATED SO THERE IS CURRENTLY A GAP IN HIS TREATMENT. THERE ARE NOT ENOUGH THERAPISTS FOR HIS AGE RANGE. HIS ASTHMA IS CURRENTLY WELL MANAGED BUT HE IS GOING THROUGH MORE TESTING.
5-7	Excellent	5-8	General Sample	ANYTIME MY CHILD'S INSURANCE HAS TO BE RENEWED IT IS LIKE JUMPING THROUGH HOOPS TO KEEP COVERAGE. MAIL IN ALL THE PAPERWORK ASKED FOR, AND EVERYTIME I'M TOLD IT WAS NOT RECEIVED. YOU HAVE TO BE THE FIRST PERSON AT THE JACKSONVILLE DHS TO BE ABLE TO BE IN AND OUT, SO I TRY TO AVOID. HIRE EMPLOYEES THAT TAKE PRIDE IN HELPING OTHERS. THE DOCTORS MY CHILD HAS SEEN OVER THE YEARS HAVE DONE AN EXCELLENT JOB. IT'S DHS THAT HAS NOT HELD UP TO STANDARDS. IF WE WERE ABLE TO GET DIFFERENT INSURANCE FOR MY CHILD WE WOULD NOT DEAL WITH THE STATE.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Excellent	0-4	CCC Sample	SINCE 2024, MY SON IS PRESENTLY IN SPEECH THERAPY. WHEN HE STARTED, HE DIDN'T SPEAK MUCH IF AT ALL AND DID A LOT OF MOANING AND GROANING. 1 YEAR LATER HIS SPEECH IS IMPROVING GREATLY AND HE HARDLY DOES THE MOANING AND GROANING. I KNOW THAT HE WILL CONTINUE TO PROGRESS SO THAT HE CAN CONTINUE TO THRIVE AND ENJOY A GOOD QUALITY OF LIFE.
0-4	Fair	13-18	CCC Sample	SHE IS A TYPE 1 DIABETIC AND IS NEED OF HER SUPPLIES BUT WE CANNOT AFFORD THEM BECAUSE THE HEALTH PLAN DOES NOT COVER THEM.
5-7	Very good	9-12	General Sample	* NEEDS SPEECH THERAPY BUT WE CANNOT AFFORD IT, AND INSURANCE DOESN'T COVER IT. SHE HAS SPEECH AT SCHOOL FOR 15 MINUTES A WEEK BUT THAT IS NOT ENOUGH, WHEN SHE WAS 4-9 SHE HAD SPEECH 3 TIMES A WEEK FOR ONE HOUR. THE INSURANCE PAID FOR IT.
0-4	Excellent	0-4	General Sample	TRYING TO GET MY SON INTO SPEECH AND OCCUPATIONAL THERAPY. HE NEEDS IT. DOESN'T TALK REALLY AT ALL.
5-7	Excellent	9-12	CCC Sample	I AM HAVING ISSUES WITH HOW MY CLAIMS ARE BEING FILED. I KEEP GETTING BILLS THAT SHOULD HAVE BEEN COVERED BY MY COVERAGE BUT DIDN'T GET ACCEPTED DUE TO CLAIM BEING FILED INCORRECTLY OR MEDICAL PROVIDER TRIES TO CHARGE FOR SERVICES THAT WERE NOT PROVIDED AND WHEN I CALL CUSTOMER SERVICE TO GET THINGS SORTED, I'M OFTEN GETTING THROWN INTO QUEUE WHERE IT SEEMS NOBODY SEEMS TO KNOW WHAT TO DO & IS LACKING PROPER TRAINING.
8-10	Very good	13-18	CCC Sample	THANK YOU ARKIDS B! WE TRULY APPRECIATE YOU GUYS!

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Excellent	9-12	CCC Sample	I UNDERSTAND THAT ADHD MEDICATION IS CONSIDERED A NARCOTIC, BUT I DO NOT FEEL LIKE MY CHILD SHOULD HAVE TO GO SEE THE DOCTOR EVERY MONTH FOR US TO TELL THEM EVERYTHING HASN'T CHANGED AND THAT WE NEED A REFILL. IT IS TIME CONSUMING AND TAKES HIM AWAY FROM SCHOOL TO HAVE TO GO 30+ MINUTES TO THE DOCTOR JUST TO GET A REFILL ORDER. HOW IS HIS MISSING SCHOOL HELPING?
5-7	Good	13-18	CCC Sample	IT IS NOT EASY TO GET REFILLS ON MEDS THAT ARE CONSISTENTLY USED. HAVING TO VISIT THE DOCTOR FOR ASTHMA, ALLERGY, AND BED WETTING MEDS THAT ARE NOT NEW AND HAVE BEEN USED FOR YEARS IS VERY INCONVENIENT. IT IS ALSO HARD TO CHANGE PCPS. RECENTLY, MY SONS PHYSICIAN MOVED AND WE ABRUPTLY HAD TO CHANGE HIS PCP. THIS IS NOT AN EASY PROCESS ONLINE OR OVER THE PHONE. NEEDING REFERRALS FOR SERVICES IS NOT IDEAL EITHER. TRYING TO GET A REFERRAL IS TIME CONSUMING.
8-10	Excellent	9-12	General Sample	I HAVE TWO CHILDREN ON THE PLAN. MY ONLY CONCERN IS THAT WE RECENTLY TRIED TO SWITCH CLINICS, NONE OF WHICH HAD SPOTS OPEN FOR ARKIDS PATIENTS. WE EVENTUALLY FOUND A SOLUTION BUT I IMAGINE IT WOULD BE DIFFICULT FOR NEW PATIENTS.
5-7	Very good		General Sample	BEING ON MEDICAID B, I DO STRUGGLE TO PAY THE COPAYS. THANK YOU FOR YOUR TIME **. Q49) I CAN'T REALLY AFFORD ALL OF THE COPAYS:

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
5-7	Very good		General Sample	IT'S DIFFICULT TO KNOW HOW TO ANSWER SOME OF THIS. I'M NOT EVEN SURE WHICH, IF EITHER OF MY SONS IS ON AR KIDS, IF THEY QUALIFY, OR REALLY ANY OTHER DETAILS ABOUT AR KIDS. AFTER THEIR MOTHER PASSED IN 2022, I WAS IN SEARCH OF A WAY TO GET EVERYTHING CURRENT AND MOVED OVER TO MY NAME. HOWEVER, I WAS TOLD POINT-BLANK BY THE WOMAN ON THE PHONE THAT THERE WAS NO WAY FOR ME TO PROVE TO HER THAT MY YOUNGEST SON DID NOT LIVE IN DOVER, AR- AN ADDRESS THEY HAD NOT INHABITED FOR TWO YEARS OR MORE (WHAT HE WOULD BE DOING LIVING AT A DIFFERENT ADDRESS THAN THE ONE ON FILE FOR HIS BROTHER IS BEYOND ME). SINCE THEN, I HAVE RECIEVED NOTICES THAT THEIR AR KIDS PLAN IS: TERMINATED, RENEWED, UP FOR REVIEW, CAN BE RENEWED, ETC., ALL WITHOUT ANY ABILITY ON MY PART TO ACTUALLY DO ANYTHING, BECAUSE I CANNOT PROVE WHERE THEY LIVE (EVIDENTLY DEATH CERTIFICATES, COURT ORDERS, AND SCHOOL RECORDS DON'T COUNT). IT IS, QUITE SIMPLY, NOT WORTH MY TIME & ENERGY. I WOULD SINCERELY APPRECIATE IMMEDIATE CLOSURE OF THEIR PLANS AND TERMINATION OF ALL PARENTAL CORRSPONDENCE. HOPEFULLY OTHER CLIENTS ARE TREATED DIFFERENTLY.
8-10	Excellent	13-18	General Sample	IT IS DIFFICULT TO FIND DOCTORS WHO WILL ACCEPT A NEW PATIENT IF THEY ARE ON ARKIDS. LOCATION AREA: SHERWOOD, N.L.R, LITTLE ROCK
0-4	Good	13-18	CCC Sample	THINGS I WISHED THIS INSURANCE COVERED: BRACES FOR NON-MEDICAL REASONS, MENTAL HEALTH SERVICES (WITH MORE PROVIDER OPTIONS. WE COULDN'T FIND A DESIRED THERAPIST THAT TOOK MEDICAID), ROOT CANAL AND PORCELAIN CROWN (18 YEAR OLD WE COULDN'T FIND A DENTIST/ENDODONIST ANYWHERE CLOSE THAT ACCEPTED MEDICIAD FOR ROOT CANAL). THANKFUL FOR: COVERED GLASSES, GOOD PRESCRIPTION COSTS.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Excellent	9-12	General Sample	WE ARE VERY GRATEFUL FOR MEDICIAD AND THE INSURANCE WE ARE GIVEN. WITHOUT IT OUR FAMILY WOULD STRUGGLE TO PROVIDE INSURANCE FOR OUR CHILDREN. THANK YOU
5-7	Very good	5-8	CCC Sample	MY CHILD HAS AUTISM AND DESPERATELY NEEDS ABA SERVICES. ARKIDS B WILL NOT PAY FOR ABA SO WE HAVE NOT BEEN ABLE TO GET IT. HE IS SOMETIMES UNABLE TO GO TO SCHOOL BECAUSE HE DOESN'T HAVE THAT SUPPORT.
8-10	Very good	9-12	CCC Sample	WE ARE VERY GRATEFUL THAT WE HAVE THE ARKIDS B MEDICAL PLAN, BECAUSE OUR SON HAS ASTHMA, AND REQUIRES A DAILY INHALER & A RESUCE INHALER FOR ASTHMA ATTACKS. THESE INHALERS ARE VERY EXPENSIVE WITHOUT INSURANCE AND ARE UNAFFORDABLE WITHOUT IT. IF HE CANNOT GET THESE INHALERS, THEN HE HAS TROUBLE BREATHING, WHICH MAKES HIM UNABLE TO DO NORMAL THINGS THAT OTHER KIDS CAN DO, AND WITH NO RESCUE INHALER, HE WOULD HAVE TO GO TO THE EMERGENCY ROOM IF HE HAS AN ASTHMA ATTACK. WE ARE VERY SATISFIED WITH HIS PROVIDER. THE LOW COPAYS FOR VISITS AND PRESCRIPTIONS MEAN THAT WE CAN EASILY GET HIM THE CARE HE NEEDS. WHEN I CALLED FOR HELP UNDERSTANDING HIS MEDICAL PLAN, THE SERVICE AGENTS WERE FRIENDLY & HELPFUL. WE REALLY WANT TO SEE THIS ARKIDS B PLAN & OTHERS LIKE IT CONTINUE, BECAUSE ITS REALLY HELPFUL AND A LIFESAVER FOR US AND MANY OTHER FAMILIES. THANK YOU!
5-7	Excellent	13-18	General Sample	TO WHOM IT MAY CONCERN, BEING A SINGLE MOTHER OF TWO CHILDREN IT'S VERY DIFFICULT TO PAY ALL CO-PAYS EVERY TIME MY KIDS NEED AN APPOINTMENT. THE INCOME LIMIT NEEDS TO BE ADJUSTED. I DON'T QUALIFY FOR ANY OTHER STATE PROVIDED SERVICES LIKE SNAP, BECAUSE I 'GROSS' TOO MUCH. THE INCOME REQUIREMENTS NEED TO BE LOOKED INTO.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Very good	5-8	General Sample	HE USES EDUCATIONAL SERVICES, HE HAS A FEW VERY SLIGHT LEARNING DISABILITIES THAT SOMETIMES LEAD TO BEHAVIORAL ISSUES.
5-7	Fair	0-4	CCC Sample	EVERYTHING IS ANSWERED GREAT!
0-4	Very good	0-4	General Sample	THE ARKANSAS DEPT. OF HUMAN SERVICES NEEDS TO DO A BETTER JOB WITH THE BENEFIT RENEWAL FORM, AND ALSO ITS WEBSITE. I AM VERY ON TASK AND I CAN NEVER ACCESS THE WEBSITE. THERE SHOULD BE A MORE USER-FRIENDLY PORTAL CREATED FOR ARKIDS HEALTH PLANS. THE CURRENT WEBSITE SEEMS LAZY AND DIFFICULT TO ACCESS LIKE THEY DON'T WANT US TO BE ABLE TO GET DONE WHAT WE NEED IN A TIMELY MANNER.

AFMC DEVELOPED THIS MATERIAL UNDER CONTRACT WITH THE ARKANSAS DEPARTMENT OF HUMAN SERVICES, DIVISION OF MEDICAL SERVICES. WE ARE NOT PROVIDING LEGAL OR PROFESSIONAL MEDICAL ADVICE. WE MAKE NO WARRANTY, EXPRESSED OR IMPLIED, ON ANY SUBJECT INCLUDING COMPLETENESS AND FITNESS OF THE INFORMATION FOR ANY PURPOSE. THE INFORMATION PRESENTED IN THIS MATERIAL IS CONSISTENT WITH DHS POLICY AS OF SEPTEMBER 2017. IF ANY ARKANSAS DHS POLICY CHANGES MADE AFTER SEPTEMBER 2017 ARE INCONSISTENT WITH THIS MATERIAL, THE POLICY CONTROLS. ARKANSAS DHS IS IN COMPLIANCE WITH TITLES VI AND VII OF THE CIVIL RIGHTS ACT. REVISED JUNE 2025.

afmc℠

ARKANSAS DEPARTMENT OF HUMAN SERVICES