ARKids 1st B

2026 Beneficiary Satisfaction Survey Results



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ARKANSAS DEPARTMENT OF HUMAN SERVICES

ARKIDS FIRST B BENEFICIARY SATISFACTION SURVEY

2026 Beneficiary Satisfaction Survey Results

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Executive Summary

Implemented in 1997, Arkansas Medicaid's ARKids First Program is one of the most successful children's healthcare programs in the United States. This innovative program became the model for the Children's Health Insurance Program (CHIP) federal mandate, providing a complete package of benefits under two options based on family income. Low-income families are eligible for Medicaid coverage under ARKids First A, while children who meet income requirements and who are not covered by employer-sponsored, group health insurance, private insurance, or have not been insured for at least 90 days prior to application are eligible for ARKids First B.[1] Children who have lost insurance involuntarily may qualify for immediate coverage. In state fiscal year (SFY) 2026, ARKids First B provided healthcare coverage for approximately 31,000 Arkansas children.

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

The Healthcare Effectiveness Data and Information Set (HEDIS®) Consumer Assessment of Healthcare Providers and Systems (CAHPS®) 5.1H Survey with CCC Measure instrument was used in 2026.[2] AFMC is a National Committee for Quality Assurance (NCQA)-certified HEDIS survey vendor. A total of 4,810 surveys were mailed to parents/guardians of children who were ARKids First B beneficiaries from July through December of 2025 (SFY 2026). Of those mailed surveys, AFMC received 718 surveys. The analyzable sample size excluded beneficiaries with invalid addresses and respondents who were found to be otherwise ineligible. After removing beneficiaries deemed ineligible (5 respondents), beneficiaries with incomplete surveys per NCQA specifications (1 respondent), refusals (2), and adjusting for invalid addresses (389), 711 surveys were available for analysis from an analyzable sample size of 4,416, resulting in an analyzable response rate of 16.1%. This report summarizes the 2026 ARKids First B Beneficiary Satisfaction Survey results collected from February through April of 2026.

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

NCBD provides the most positive response options in analysis figures. This is because NCBD considers only the most favorable outcomes or responses. As a result, the analysis figures provided by NCBD focus on the best-case scenarios and fewer respondents. AFMC provides a more comprehensive analysis by considering a wider range of positive response options ("always" and "usually" for 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 8, 2026. https://humanservices.arkansas.gov/divisions-shared-services/medical-services/healthcareprograms/arkids

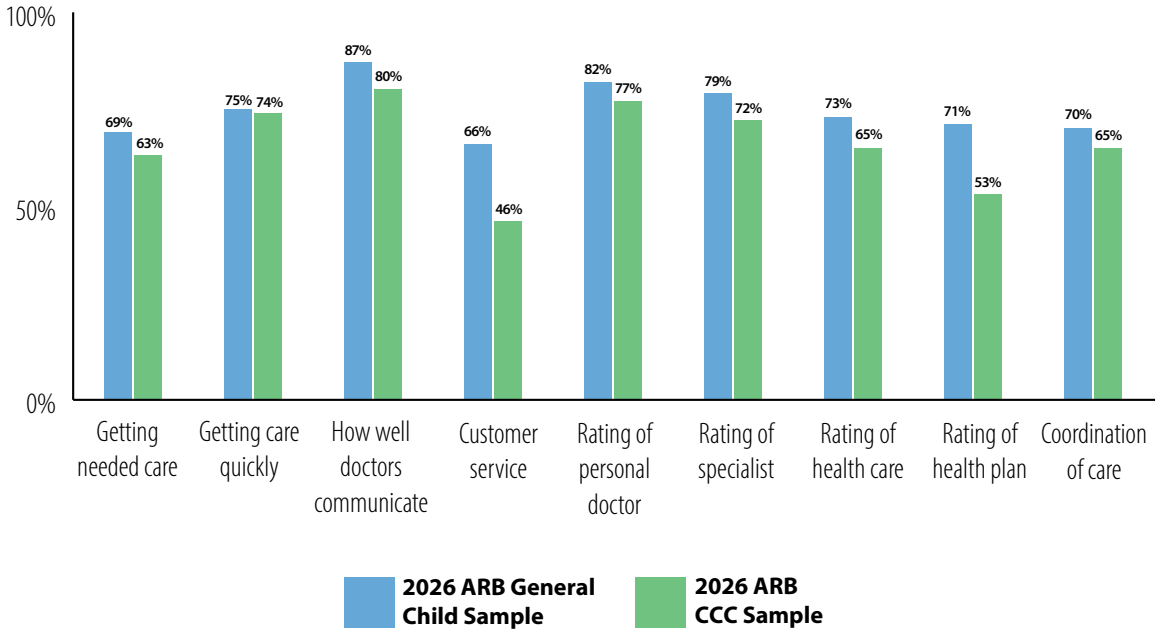
[2] HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA). CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

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

TABLE 1: COMPOSITES AND RATINGS

COMPOSITES/RATINGS	GENERAL CHILD	GENERAL CHILD NCBD 2025	CHILDREN WITH CHRONIC CONDITIONS	CHILDREN WITH CHRONIC CONDITIONS NCBD 2025
Getting needed care	69%	61%	63%	56%
Getting care quickly	75%	71%	74%	70%
How well doctors communicate	87%	80%	80%	79%
Customer service	66%	66%	46%	66%
Rating of personal doctor	82%	77%	77%	75%
Rating of specialist	79%	74%	72%	71%
Rating of health care	73%	71%	65%	65%
Rating of health plan	71%	69%	53%	63%
Coordination of care	70%	60%	65%	56%

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 12), ARKids First B Beneficiary Health Care Access (Page 16), Composite Analysis (Page 17), Trend Analysis (Page 25), and Comparisons with Benchmark Data (Page 28) in this report.

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

The 2026 ARKids First B survey sample demographics were compared to the population and the demographics of the survey respondents. Based on the population data, 42.6% of 2026 ARKids First B with CCC survey respondents were "white," followed by 29.7% of respondents having an unknown race. A larger percentage of respondents were "male" (51.8%) than "female" (48.2%). The majority (40.5%) of respondents were from the "12–18" age group. This year's data also shows that more respondents are located in the "Northwest" region (41.1%) than any other region of the state.

Demographic comparisons between the general child sample and the CCC sample showed that the general child sample had a significantly higher proportion of children ages 0–3 and a significantly lower proportion of children ages 12–18. The proportion of parents/caregivers with a high school degree or less was significantly higher for the general child sample. For the child's overall health status and the 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.

Parents/caregivers of ARKids First B beneficiaries were asked about their satisfaction with certain aspects of the health plan. A comparison was made between the general child sample and the children with chronic conditions sample on beneficiary satisfaction with the ARKids First B health plan. The proportion of beneficiaries reporting that getting prescription medicine was "usually" or "always" was non-significantly lower for beneficiaries of the general child sample (92.5%) than for beneficiaries of the CCC sample (93.3%). The proportion of beneficiaries reporting it was "usually" or "always" easy to get care, tests, or treatment was significantly higher among beneficiaries of the general child sample (94.7%) than the CCC sample (90.0%). The proportion of beneficiaries reporting that this task was "never" or "sometimes" easy was significantly lower in the general child sample than in the CCC sample.

When comparing the ARKids First B 2026 survey results for the general child sample with those of the CCC sample, AFMC found that, in both samples, all composite measures had a positive response rate of 84.6% or higher. The "getting care, tests, or treatment" component of the "getting needed care" composite had a significantly higher positive response for the general child sample than the CCC sample. The "doctors showing respect for what you had to say" component of the "how well doctors communicate" composite had a significantly higher positive response in the general child sample (99.6%) than the CCC sample (97.6%). The general child sample had higher positive responses among all rating items, but only the "rating of health plan" item was significantly higher. The question summary rate "coordination of care" had a significantly higher positive response among the general child sample than among the children with chronic conditions sample.

Questions that comprise the chronic condition measurement set are contained within the HEDIS MY 2025 CAHPS 5.1H Child with CCC Survey. The questions serve as a screening tool to identify a subset of children with chronic conditions. Based on the screening tool used in the analysis, 247 beneficiaries were identified as children with chronic conditions. Within the "functional limitations compared with others of same age" health consequence section, of the respondents who indicated that their child is limited or prevented in his or her ability to do things most children of the same age can do, 96.8% of CCC beneficiaries said that this is due to medical, behavioral, or other health conditions. In the "treatment or counseling for emotional or developmental problems" screening, 98.1% of CCC beneficiaries who reported that their child has some kind of emotional, developmental, or behavioral problem that requires treatment or counseling said that this problem 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 (79.1%) 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 90.0%, and the "doctors understanding how your child's condition affects your child's life" component within this composite had the highest summary rate of 95.5% when compared to all other component questions.

When the 2026 survey results for the general child sample were compared with those of the previous year (2025), the "doctors spending enough time with your child" component of the "how well doctors communicate" composite had a significantly higher summary rate in the 2026 general child sample (95.7%) compared to the 2025 general sample (91.4%). The 2026 general child sample had significantly more favorable rates for "rating of personal doctor" (94.5%) and "rating of health plan" (86.3%) than the 2025 general child "rating of personal doctor" (90.3%) and "rating of health plan" (80.1%). "Coordination of care" showed a significantly higher summary rate for the 2026 sample (94.7%) than in the 2025 sample (81.7%).

The 2026 ARKids First A survey results for the CCC sample were compared with those of the previous year (2025). There were no significant differences among all composites and their corresponding components. The 2026 CCC sample had non-significantly lower ratings of personal doctor (90.7%), health care (86.3%), and health plan (73.4%) than the 2025 CCC sample ratings of personal doctor (91.3%), health care (89.3%), and health plan (79.1%). "Rating of specialist" was significantly higher for the 2026 sample (87.1%) than the 2025 sample (75.6%).

Comparing 2026 ARKids First B survey results for the general child sample with the 2025 NCBD national survey results, ARKids First B satisfaction of 69% for the "getting needed care" composite and 76% for the "getting care, tests, or treatment" component of this composite was significantly higher when compared to the NCBD general child satisfaction of 61% and 67%, respectively. The "how well doctors communicate" composite and four of its five components were significantly higher in the ARKids First B general sample than in the NCBD results. All rating questions from the general sample ARKids First B 2026 survey results showed higher proportions of satisfaction than the general child sample 2025 NCBD national survey results, but only the "rating of personal doctor" proportion was significantly higher.

In 2026, the CCC sample from the ARKids First B survey results had a significantly higher score (63%) on the "getting needed care" composite than the 2025 CCC NCBD national rate (56%). The "obtaining care right away for an illness/injury/condition" component of the "getting care quickly" composite was significantly higher (84%) than the 2025 national CCC measure (75%). The "customer service" composite and one of its components, "being treated with courtesy and respect," had a significantly lower satisfaction rate in the 2026 CCC sample than in the 2025 NCBD.

Comparing the 2026 ARKids First B survey result of the CCC sample with the 2025 NCBD national survey results of the CCC sample for the CCC-specific composite measures, AFMC found that the "doctors answering questions you had" component of the "family centered care: getting needed information" composite was non-significantly higher for the 2026 ARKids First B CCC sample (79%) when compared with the NCBD national rate (74%). 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 (70%) than the national rate (60%).

Survey Overview and Methodology

BACKGROUND AND SURVEY INSTRUMENT

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

AFMC first conducted the ARKids First 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 toward developing a national, evidence-based system to measure and improve the quality of care delivered to Medicaid beneficiaries. In 2025, the Child Core Set required implementation of the CAHPS Health Plan Survey 5.1H – Child Version, including the Medicaid and Children with Chronic Conditions Supplemental Items (CPC-CH).

This report summarizes results for 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 2025 CAHPS 5.1H Without CCC Survey:

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

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

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

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

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

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

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

CHILDREN WITH CHRONIC CONDITIONS

CAHPS[3] references the Maternal and Child Health Bureau's definition of children with chronic conditions. 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, identifying those who are more likely to have a chronic condition, as determined by transactional claims data. Then, two systematic samples are drawn (first for the CAHPS 5.1H Child Survey sample [the general population] and then a supplemental sample for the CCC sample). The supplemental sample is derived from the set of members with a prescreen status code indicating they are children who are more likely to have a chronic condition and were not already selected in the general population.

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

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

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

SURVEY SIZE, SAMPLE DISPOSITION, AND RESPONSE RATE

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

Per NCQA guidelines, a total sample of 4,810 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 718 surveys were returned, resulting in a return rate of 14.9%. Of the 4,810 beneficiaries selected, 389 had invalid addresses and 5 were deemed ineligible, leaving an analyzable sample of 4,416. After omitting beneficiaries deemed ineligible (5

respondents), beneficiaries with incomplete surveys per NCQA specifications (1 respondent), and refusals (2 respondents), 711 surveys remained for analysis, yielding an analyzable response rate of 16.1%. 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	2026
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*	389
Analyzable sample size	4,416
Eligible: Incomplete (3 of 5 questions not answered per NCQA specifications)***	1
Refusal	2
Nonresponse**	3,702
Analyzable surveys returned	711
Analyzable response rate	16.1%

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

SAMPLING FRAME

Beneficiary information was obtained from Medicaid. AFMC used a systematic sampling method as outlined in the HEDIS MY 2025 Volume 3: Specifications for Survey Measures document. NCQA guidelines also require each beneficiary to be enrolled for a minimum of 6 months prior to participating in the survey, with no more than 1 enrollment gap 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, 2025. A beneficiary's six-month continuous enrollment began on July 1, 2025. Only one beneficiary per household was selected.

SURVEY PROCEDURE

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

All mail was sent in bulk with return receipt and address correction requested. Letters and surveys 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 22, 2026
First survey	February 10, 2026
First reminder notice	February 20, 2026
Second survey	March 9, 2026
Second reminder notice	March 19, 2026
Data collection cutoff	April 9, 2026

SURVEY TRACKING

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

DISQUALIFIED SURVEYS

Surveys received between February 10th and April 9th 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. Excluded or disqualified surveys accounted for 1.1% 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 718 surveys returned, 5 were in Spanish, and none were in Marshallese.

Demographics of Population, Survey Sample, and Respondents

Since AFMC follows NCQA protocol using a systematic sampling method, the survey samples should be representative of the ARKids First B population. The demographic data in Table 4 are 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, 42.6% of 2026 ARKids First B with CCC survey respondents were "white," followed by 29.7% of respondents having an unknown race. A larger percentage of respondents were "male" (51.8%) than "female" (48.2%). The majority (40.5%) of respondents were from the "12–18" age group. This year's data also shows that more respondents are located in the "Northwest" region (41.1%) than in any other region of the state.

In this summary of the HEDIS MY 2025 CAHPS 5.1H Child with CCC Survey for the ARKids First 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 whether there are significant differences. Table 5 and Figure 2 illustrate percentages across various demographic categories for parents/caregivers of general child respondents and parents/caregivers of children with chronic conditions. Demographic categories include gender, age, race, parent/caregiver's education, overall health status, and mental health status.

Demographic comparisons of the general child sample and the children with chronic conditions sample in Table 5 showed significant differences in proportions of respondents by gender. The general child sample had a significantly lower proportion of male respondents, but a significantly higher proportion of female respondents than the CCC sample. The general child sample had a significantly higher proportion of children ages 0–3 and a significantly lower proportion of children ages 12–18 than the CCC sample. The general child sample had a significantly lower proportion of respondents in the "White" race category and a significantly higher proportion in the "Other" race category than the CCC sample. The proportion of parents/caregivers with a high school degree or less was significantly higher in the general child sample, while the proportion with a college degree or more was significantly lower. For child's overall health status and child's mental health status, the general child sample saw significantly higher proportions of respondents in the "excellent/very good" category, while the proportions for both of these demographics were significantly lower for the "good" and "fair/poor" status categories.

TABLE 4. ARKIDS FIRST 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	1,923	43.5%	43.9%	303	42.6%	15.8%
Black or African American	587	13.3%	12.5%	65	9.1%	11.1%
American Indian or Alaska Native	24	0.5%	0.5%	6	0.8%	25.0%
Hispanic or Latino	483	10.9%	11.6%	104	14.6%	21.5%
Asian American	48	1.1%	1.4%	7	1.0%	14.6%
Native Hawaiian or other Pacific Islander	21	0.5%	0.8%	3	0.4%	14.3%
Multiracial	120	2.7%	2.8%	12	1.7%	10.0%
Unknown	1,210	27.4%	26.5%	211	29.7%	17.4%
Total*	**4,416**	**100.0%**	**100.0%**	**711**	**100.0%**	**16.1%**
GENDER						
Female	2,109	47.8%	49.2%	343	48.2%	16.3%
Male	2,307	52.2%	50.8%	368	51.8%	16.0%
Total*	**4,416**	**100.0%**	**100.0%**	**711**	**100.0%**	**16.1%**
AGE						
0–3	913	20.7%	18.6%	145	20.4%	15.9%
4–7	938	21.2%	23.5%	123	17.3%	13.1%
8–11	946	21.4%	23.1%	155	21.8%	16.4%
12–18	1,619	36.7%	34.8%	288	40.5%	17.8%
Total*	**4,416**	**100.0%**	**100.0%**	**711**	**100.0%**	**16.1%**
GEOGRAPHIC REGION						
Northwest	1,719	38.9%	39.8%	292	41.1%	17.0%
Northeast	818	18.5%	18.3%	125	17.6%	15.3%
Central	1,139	25.8%	25.1%	160	22.5%	14.0%
Southwest	435	9.9%	10.1%	86	12.1%	19.8%
Southeast	305	6.9%	6.7%	48	6.8%	15.7%
Total*	**4,416**	**100.0%**	**100.0%**	**711**	**100.0%**	**16.1%**

**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	48.6%	58.0%	Significantly Lower
	Female	51.4%	42.0%	Significantly Higher
Age*	0–3	22.9%	12.2%	Significantly Higher
	4–7	17.6%	17.1%	Not Significant
	8–11	19.8%	23.3%	Not Significant
	12–18	39.7%	47.3%	Significantly Lower
Race*	White	65.2%	74.8%	Significantly Lower
	Black or African American	11.8%	12.4%	Not Significant
	Asian	2.6%	1.3%	Not Significant
	Multiracial	6.0%	6.4%	Not Significant
	Other	14.4%	5.1%	Significantly Higher
Parent/ caregiver's education*	High school graduate or less	48.9%	36.3%	Significantly Higher
	Some college	33.8%	37.6%	Not Significant
	College graduate or more	17.4%	26.1%	Significantly Lower
Overall health status*	Excellent/very good	88.0%	71.4%	Significantly Higher
	Good	11.5%	23.3%	Significantly Lower
	Fair/poor	0.4%	5.3%	Significantly Lower
Mental health status*	Excellent/very good	87.0%	54.4%	Significantly Higher
	Good	11.5%	27.4%	Significantly Lower
	Fair/poor	1.5%	18.3%	Significantly Lower

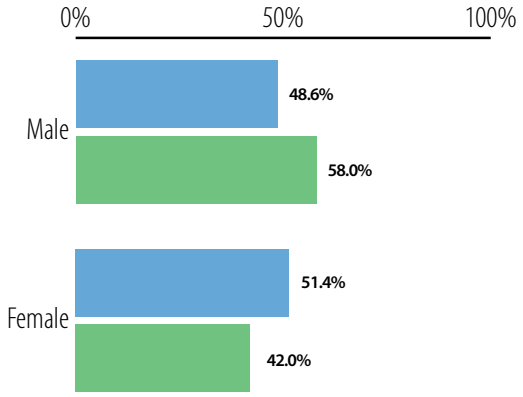
**Columns may not sum to 100% due to rounding*

FIGURE 2.

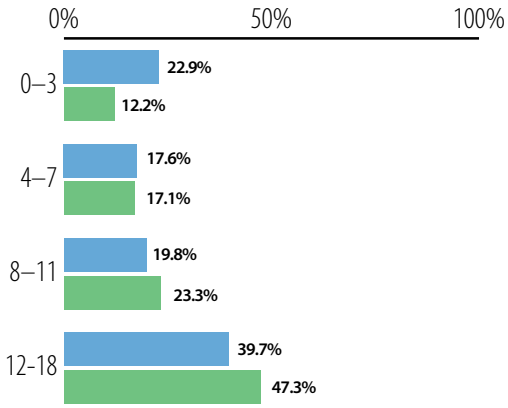
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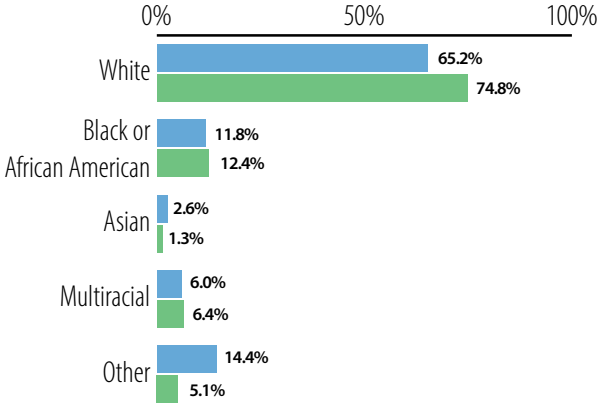
• GENDER



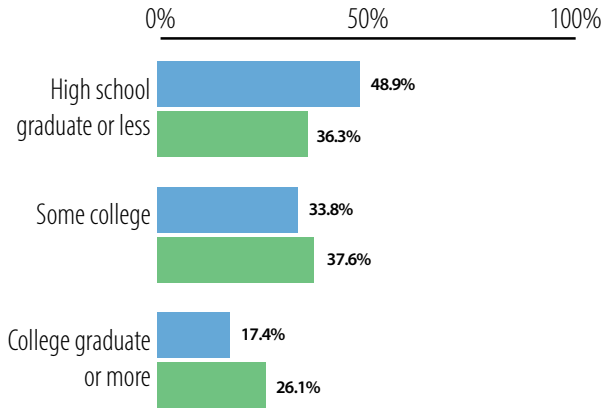
• AGE



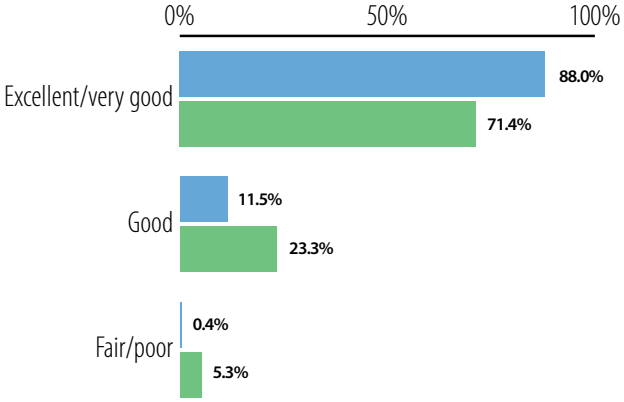
• RACE



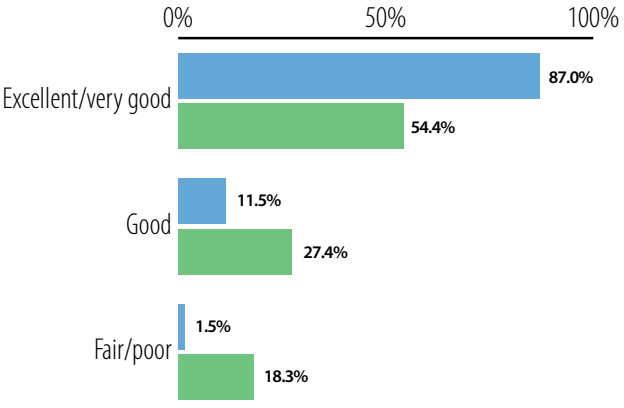
• PARENT/CAREGIVER'S EDUCATION



• OVERALL HEALTH STATUS



• MENTAL HEALTH STATUS



ARKids First B Health Care Access

Parents/caregivers of ARKids First B beneficiaries were asked about their satisfaction with certain aspects of the health plan, such as setting up appointments, ease of obtaining prescription medicine, and the appropriateness of the care needed, and their rating of their health care. Table 6 compares the beneficiary satisfaction among the general child sample and the children with chronic conditions sample of the ARKids First 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	2026		
	GENERAL CHILD	CHILDREN WITH CHRONIC CONDITIONS	SIGNIFICANCE TESTING
How often did you get an appointment for a check-up or routine care for your child as soon as your child needed? (Q6)			
Never or sometimes	51 (19.9%)	27 (13.8%)	Not Significant
Usually or always	205 (80.1%)	168 (86.2%)	Not Significant
How often was it easy to get prescription medicine? (Q51)			
Never or sometimes	15 (7.5%)	14 (6.7%)	Not Significant
Usually or always	186 (92.5%)	195 (93.3%)	Not Significant
How often was it easy to get the care, tests, or treatment your child needed? (Q10)			
Never or sometimes	15 (5.3%)	21 (10.0%)	Significantly Lower
Usually or always	269 (94.7%)	190 (90.0%)	Significantly Higher
Mean rating of health care (Q9)	9.06	8.81	Not Significant

As determined by a z-test, 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 (80.1%) than the CCC sample (86.2%). The proportion of beneficiaries reporting it was "usually" or "always" easy to get care, tests, or treatment was significantly higher among beneficiaries of the general child sample (94.7%) than the CCC sample (90.0%). The proportion of beneficiaries reporting that this task was "never" or "sometimes" easy was significantly lower in the general child sample than in the CCC sample. The mean rating of health care was slightly higher, but not significantly, for beneficiaries of the general child sample (9.06) in the ARKids First B health plan when compared to the children with chronic conditions sample (8.81), as determined by a t-test.

Composite Analysis

STANDARD COMPOSITES: GENERAL CHILD AND CHILDREN WITH CHRONIC CONDITIONS

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

For both samples shown in Table 7, all composite measures showed a positive response of 84.6% or higher. The "getting care, tests, or treatment" component of the "getting needed care" composite had a significantly higher positive response for the general child sample than the CCC sample. The "getting care quickly" composite and all the corresponding components for the general child sample had non-significantly lower positive responses than the CCC sample. From the "how well doctors communicate" composite, the "doctors showing respect for what you had to say" component had a significantly higher positive response in the general child sample (99.6%) compared to the CCC sample (97.6%). The general child sample had higher positive responses among all rating items, but only the "rating of health plan" item was significantly higher. The question summary rate "coordination of care" had a significantly higher positive response among the general child sample than among the children with chronic conditions sample.

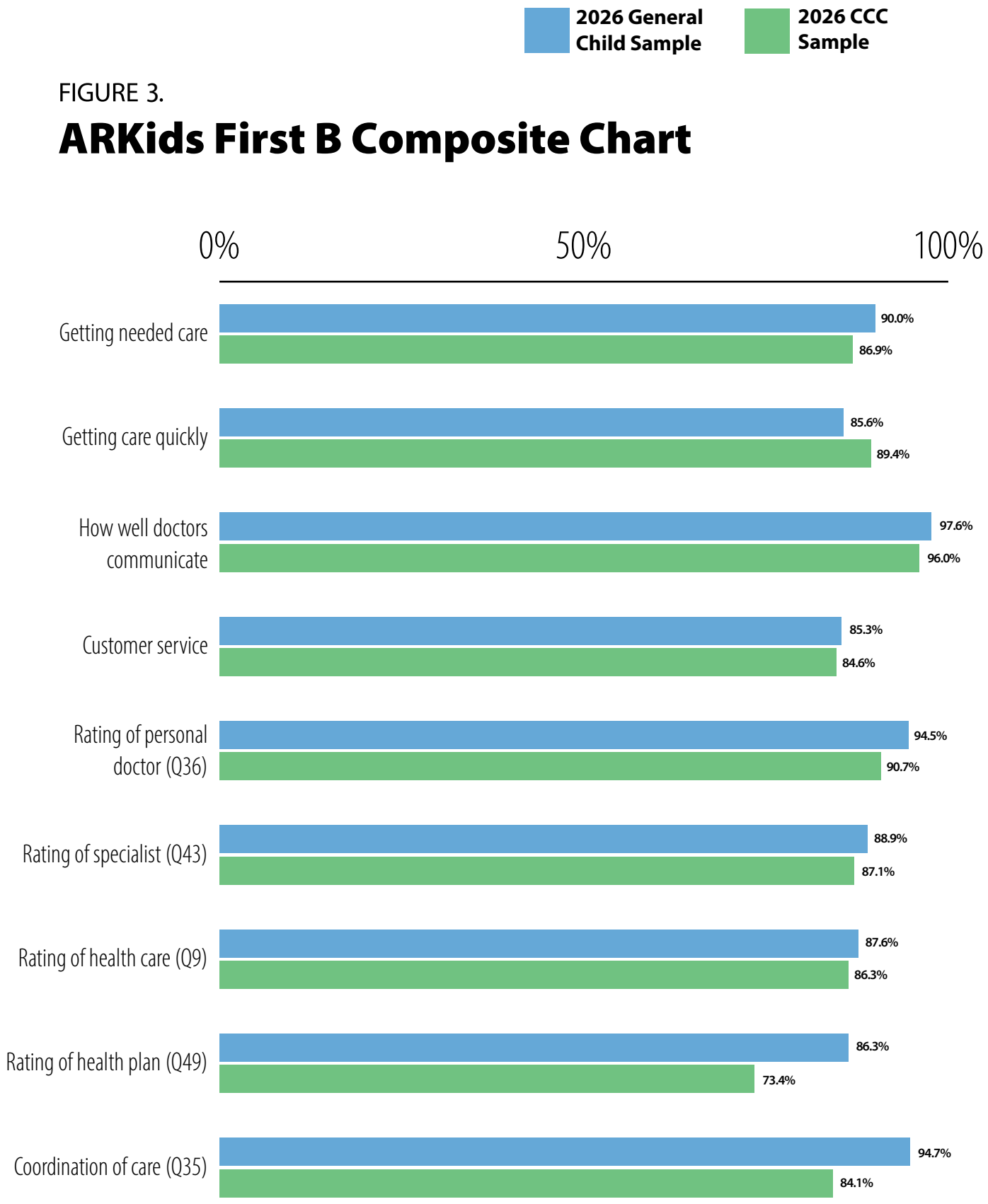
TABLE 7. STANDARD COMPOSITES AND COMPONENT QUESTIONS/RATING QUESTIONS

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		***90.0%***		***86.9%***	***Not Significant***
Q10. Getting care, tests, or treatment	284	94.7%	211	90.0%	Significantly Higher
Q41. Seeing a specialist	88	85.2%	104	83.7%	Not Significant
Getting care quickly		***85.6%***		***89.4%***	***Not Significant***
Q4. Obtaining care right away for an illness/ injury/condition	147	91.2%	95	92.6%	Not Significant
Q6. Obtaining check-up or routine care appointment as soon as needed	256	80.1%	195	86.2%	Not Significant
How well doctors communicate		***97.6%***		***96.0%***	***Not Significant***
Q27. Doctors explaining things in an understandable way	283	97.9%	205	95.1%	Not Significant
Q28. Doctors listening carefully to you	283	98.2%	205	96.6%	Not Significant
Q29. Doctors showing respect for what you had to say	282	99.6%	205	97.6%	Significantly Higher
Q31. Doctors explaining things in an understandable way to your child	186	96.8%	147	97.3%	Not Significant
Q32. Doctors spending enough time with your child	278	95.7%	203	93.6%	Not Significant
Customer service		***85.3%***		***84.6%***	***Not Significant***
Q45. Getting help when calling customer service	51	78.4%	39	76.9%	Not Significant
Q46. Being treated with courtesy and respect	51	92.2%	39	92.3%	Not Significant
Rating items					
Rating of personal doctor (Q36)	382	94.5%	226	90.7%	Not Significant
Rating of specialist (Q43)	81	88.9%	101	87.1%	Not Significant
Rating of health care (Q9)	283	87.6%	211	86.3%	Not Significant
Rating of health plan (Q49)	452	86.3%	241	73.4%	Significantly Higher
Question summary rate					
Coordination of care (Q35)	114	94.7%	107	84.1%	Significantly Higher

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 2025 CAHPS 5.1H Child with CCC Survey. Based on responses to these questions, the questions are used as a screening tool to identify the subset of children with chronic conditions.

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

Based on the screening tool used in the analysis, 247 beneficiaries were identified as children with chronic conditions. As seen in Table 8, 78.5% 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 who indicated that their child is limited or prevented in his or her ability to do things most children of the same age can do, 96.8% of CCC beneficiaries said that this is due to medical, behavioral, or other health conditions. For the "use or need for specialized services" screening section, 94.0% 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. In the "treatment or counseling for emotional or developmental problems" screening, 98.1% of CCC beneficiaries who reported that their child has some kind of emotional, developmental, or behavioral problem that requires treatment or counseling said that this problem has lasted or is expected to last at least 12 months.

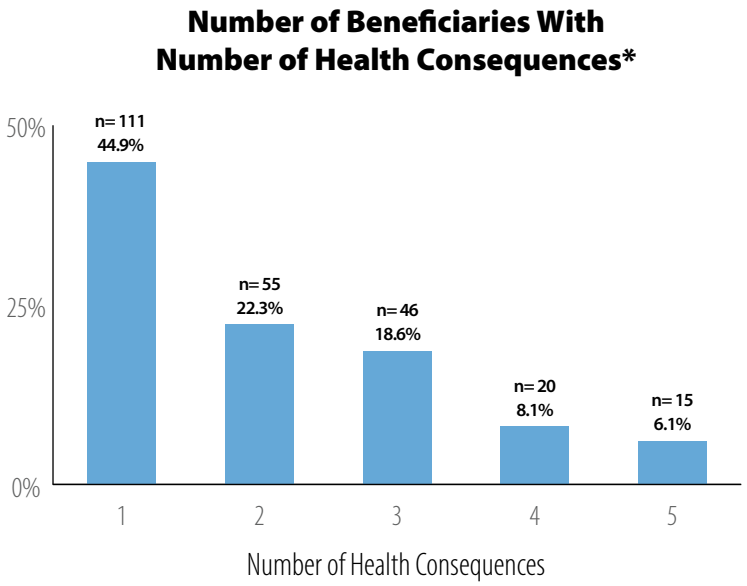
TABLE 8. WITH CHRONIC CONDITION SCREENING TOOL

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	78.5%
Prescribed medicine due to medical, behavioral, or other health condition (Q56)	194	99.0%
Condition lasted or expected to last at least 12 months (Q57)	192	97.9%
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)	245	46.9%
Services due to medical, behavioral, or other health condition (Q59)	115	95.7%
Condition lasted or expected to last at least 12 months (Q60)	110	97.3%
Functional limitations compared with others of same age		
Child limited or prevented in ability to do things (Q61)	245	25.7%
Limitations due to medical, behavioral, or other health condition (Q62)	62	96.8%
Condition lasted or expected to last at least 12 months (Q63)	58	94.8%
Use of or need for specialized therapies		
Child need or get special therapy (Q64)	246	33.3%
Therapies due to medical, behavioral, or other health condition (Q65)	79	84.8%
Condition lasted or expected to last at least 12 months (Q66)	67	94.0%
Treatment or counseling for emotional or development problems		
Child has emotional, developmental, or behavioral requiring treatment or counseling (Q67)	247	42.5%
Problem lasted or expected to last at least 12 months (Q68)	103	98.1%

Columns may not sum to 100% due to rounding

Children with Chronic Conditions are identified as part of the CCC sample when answering "yes" to all questions within the health consequence section. Each section is mutually exclusive; therefore, a respondent can be included in the CCC sample based on multiple sections. **Figure 4** shows the number of beneficiaries and the number of consequences. As shown in this figure, 44.9% of the CCC sample were identified as having a child with chronic conditions because they responded affirmatively to all questions in only one health-consequences section. Of the CCC sample, 55.1% answered "yes" to all questions for the two or more health consequence sections.

FIGURE 4.

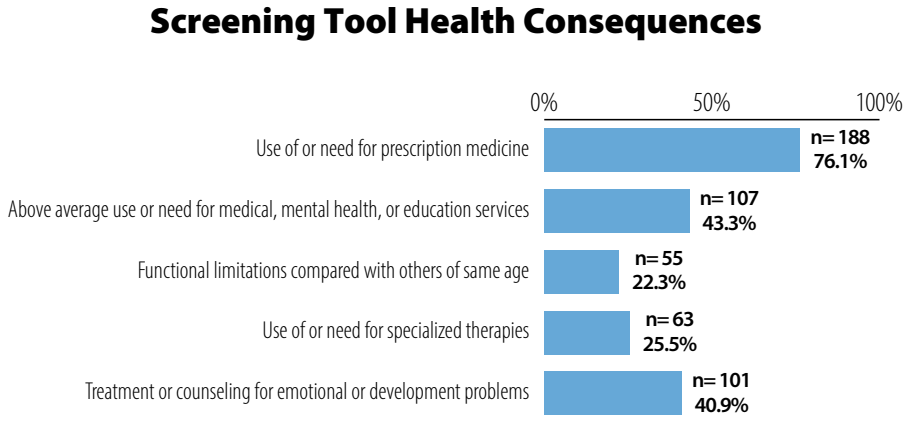


**Percentages may not sum to 100% due to rounding*

Figure 5 shows the number of respondents identified in the CCC sample during analysis. Each consequence screening section is mutually exclusive; therefore, a respondent can be included in multiple sections. This will cause the percentages in 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 (247 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 (188 respondents and 107 respondents, respectively.) "Functional limitations compared with others of same age" had the lowest number of beneficiaries who answered "yes" to all section questions, with only 22.3% of the CCC sample included because of this section.

FIGURE 5.



CHILDREN WITH CHRONIC CONDITIONS SPECIFIC COMPOSITES

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

As seen in **Table 9**, the "getting therapy" component had the highest summary rate (79.1%) 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 90.0%, and the "doctors understanding how your child's condition affects your child's life" component within this composite had the highest summary rate of 95.5% when compared to all other component questions. The "help getting special medical equipment or devices" item had a high summary rate of 75.0%, among the individual items, followed by the "help getting prescription medicine" item with a summary rate of 63.5%.

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)	8	62.5%
Getting therapy (Q18)	67	79.1%
Getting treatment or counseling (Q21)	93	65.6%
Access to prescription medicines		
Getting prescription medicine (Q51)	209	93.3%
Family centered care: personal doctor who knows child		
Doctors talking about child's feelings, growth, or behavior (Q33)	202	90.6%
Doctors understanding how your child's condition affects your child's life (Q38)	156	95.5%
Doctors understanding how your child's condition affects your family's life (Q39)	155	91.0%
Family centered care: getting needed information		
Doctors answering questions you had (Q8)	210	92.9%
Coordination of care for children with chronic conditions		
Doctors contacting your child's school or daycare (Q13)	22	90.9%
Doctors or staff coordinating child's care among other providers (Q24)	112	69.6%
Individual items		
Help getting special medical equipment or devices (Q16)	8	75.0%
Help getting therapy (Q19)	68	63.2%
Help getting treatment or counseling (Q22)	93	63.4%
Help getting prescription medicine (Q52)	208	63.5%

Columns may not sum to 100% due to rounding

Trend Analysis

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

When the 2026 survey results were compared with the 2025 results, the "doctors spending enough time with your child" component of the "how well doctors communicate" composite had a significantly higher summary rate in the 2026 general child sample (95.7%) compared to the 2025 general sample (91.4%). The 2026 general child sample had significantly more favorable rates for "rating of personal doctor" (94.5%) and "rating of health plan" (86.3%) than the 2025 general child "rating of personal doctor" (90.3%) and "rating of health plan" (80.1%). "Coordination of care" showed a significantly higher summary rate for the 2026 sample (94.7%) than in the 2025 sample (81.7%).

When comparing the 2026 survey results with the 2025 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 the highest summary rate among all composites in the 2026 and 2025 samples and was slightly higher for the 2026 beneficiaries of the CCC sample (96.0%) than the 2025 sample (95.9%), though not significantly. The 2026 CCC sample had non-significantly lower ratings of personal doctor (90.7%), health care (86.3%), and health plan (73.4%) than the 2025 CCC sample ratings of personal doctor (91.3%), health care (89.3%), and health plan (79.1%). "Rating of specialist" was significantly higher for the 2026 sample (87.1%) than the 2025 sample (75.6%).

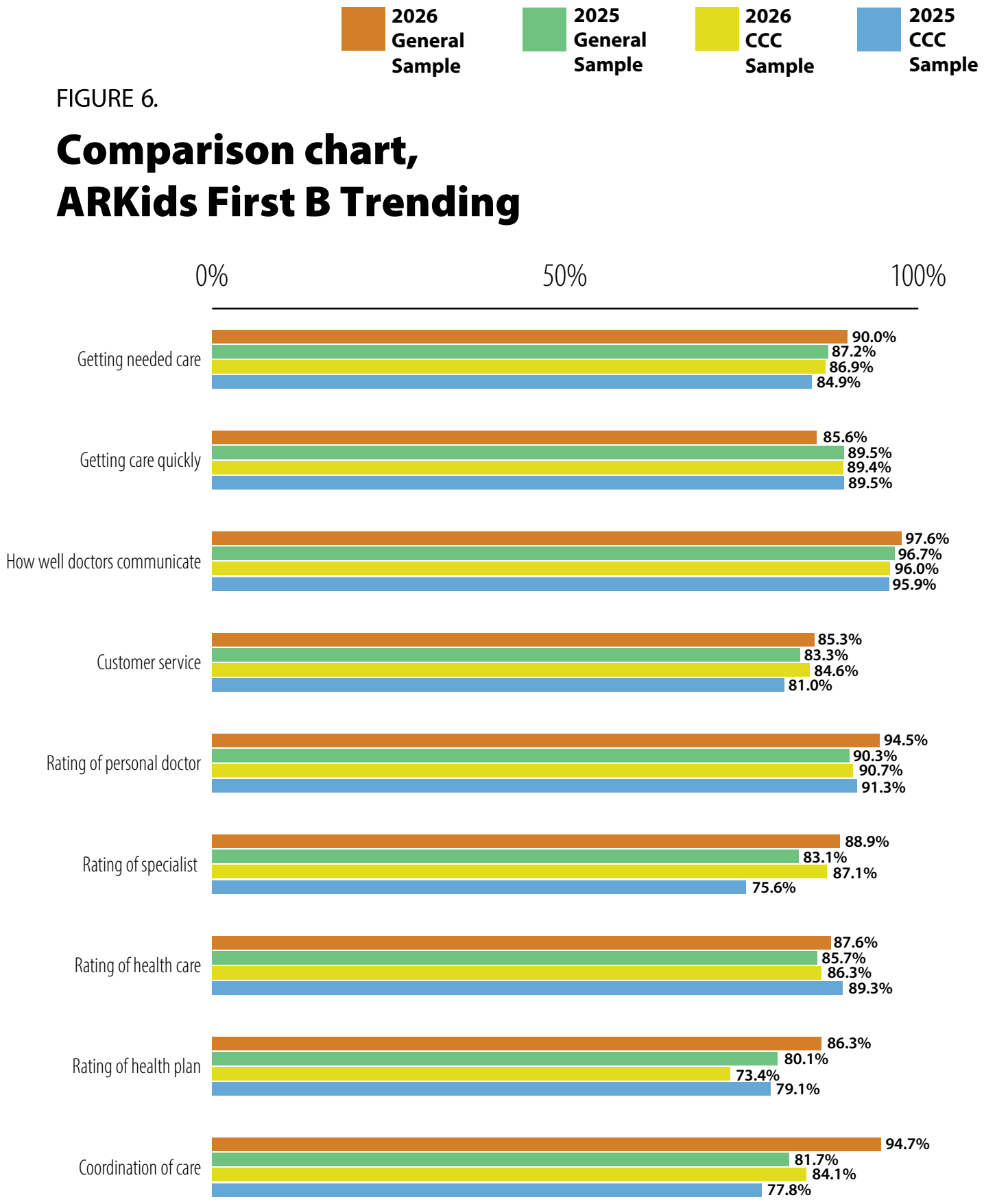
TABLE 10. ARKIDS FIRST B TRENDING TABLE

COMPOSITES/COMPONENTS AND RATING ITEMS	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITIONS		SIGNIFICANCE TESTING	
	2026	2025	2026	2025	GENERAL 2026 VS. GENERAL 2025	CCC 2026 VS. CCC 2025
Getting needed care	***90.0%***	***87.2%***	***86.9%***	***84.9%***	***Not Significant***	***Not Significant***
Q10. Getting care, tests, or treatment	94.7%	94.7%	90.0%	92.3%	Not Significant	Not Significant
Q41. Seeing a specialist	85.2%	79.7%	83.7%	77.5%	Not Significant	Not Significant
Getting care quickly	***85.6%***	***89.5%***	***89.4%***	***89.5%***	***Not Significant***	***Not Significant***
Q4. Obtaining care right away for an illness/injury/condition	91.2%	92.7%	92.6%	91.7%	Not Significant	Not Significant
Q6. Obtaining check-up or routine care appointment as soon as needed	80.1%	86.3%	86.2%	87.4%	Not Significant	Not Significant
How well doctors communicate	***97.6%***	***96.7%***	***96.0%***	***95.9%***	***Not Significant***	***Not Significant***
Q27. Doctors explaining things in an understandable way	97.9%	98.1%	95.1%	97.1%	Not Significant	Not Significant
Q28. Doctors listening carefully to you	98.2%	96.9%	96.6%	97.1%	Not Significant	Not Significant
Q29. Doctors showing respect for what you had to say	99.6%	98.1%	97.6%	98.1%	Not Significant	Not Significant
Q31. Doctors explaining things in an understandable way to your child	96.8%	98.8%	97.3%	94.7%	Not Significant	Not Significant
Q32. Doctors spending enough time with your child	95.7%	91.4%	93.6%	92.3%	Significantly Higher	Not Significant
Customer service	***85.3%***	***83.3%***	***84.6%***	***81.0%***	***Not Significant***	***Not Significant***
Q45. Getting help when calling customer service	78.4%	72.9%	76.9%	76.2%	Not Significant	Not Significant
Q46. Being treated with courtesy and respect	92.2%	93.6%	92.3%	85.7%	Not Significant	Not Significant
Rating items						
Rating of personal doctor (Q36)	94.5%	90.3%	90.7%	91.3%	Significantly Higher	Not Significant
Rating of specialist (Q43)	88.9%	83.1%	87.1%	75.6%	Not Significant	Significantly Higher
Rating of health care (Q9)	87.6%	85.7%	86.3%	89.3%	Not Significant	Not Significant
Rating of health plan (Q49)	86.3%	80.1%	73.4%	79.1%	Significantly Higher	Not Significant
Question summary rate						
Coordination of care (Q35)	94.7%	81.7%	84.1%	77.8%	Significantly Higher	Not Significant

Columns may not sum to 100% due to rounding

FIGURE 6.

Comparison chart, ARKids First B Trending



Comparisons with Benchmark Data

The Consumer Assessment of Healthcare Providers and Systems Database (NCBD) includes the latest national and regional health plan data collected by numerous organizations.[4] The NCBD 2025 data displays composite measure, component, and rating item summary rates as percentages, with no decimal places. Therefore, in **Tables 11 and 12**, AFMC duplicated the same format when displaying NCBD and ARKids First 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 percentiles 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 composite and ratings were recalculated accordingly. For the composite and summary questions, only the response choices "always" or "yes" were used; for the rating questions, only "9" and "10" were used.

When comparing the ARKids First B 2026 survey results for the general child sample with the 2025 NCBD national survey results in **Table 11**, AFMC found the ARKids First B satisfaction of 69% for the "getting needed care" composite and 76% for "getting care, tests, or treatment" component of this composite was significantly higher when compared to the NCBD general child satisfaction of 61% and 67%, respectively. The "how well doctors communicate" composite and four of its five components were significantly higher in the ARKids First B general sample than in the NCBD results. All rating questions from the general sample ARKids First B 2026 survey results showed higher proportions of satisfaction than the general child sample 2025 NCBD national survey results, but only the "rating of personal doctor" proportion was significantly higher. The satisfaction with the "coordination of care" question was significantly higher for the 2026 general child sample (70%) results than the 2025 NCBD national results (60%).

The CCC sample from the ARKids First B 2026 survey results in **Table 11** had a significantly higher score (63%) on the "getting needed care" composite than the 2025 CCC NCBD national rate (56%). The "obtaining care right away for an illness/injury/condition" component of the "getting care quickly" composite was significantly higher (84%) than the 2025 national CCC measure (75%). The "customer service" composite and one of its components, "being treated with courtesy and respect," had a significantly lower satisfaction rate in the 2026 CCC sample than in the 2025 NCBD sample. There was only one significant difference across all rating items: "rating of health plan" had a significantly lower satisfaction rate in the 2026 CCC sample (53%) than in the 2025 CCC NCBD sample (63%).

[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.

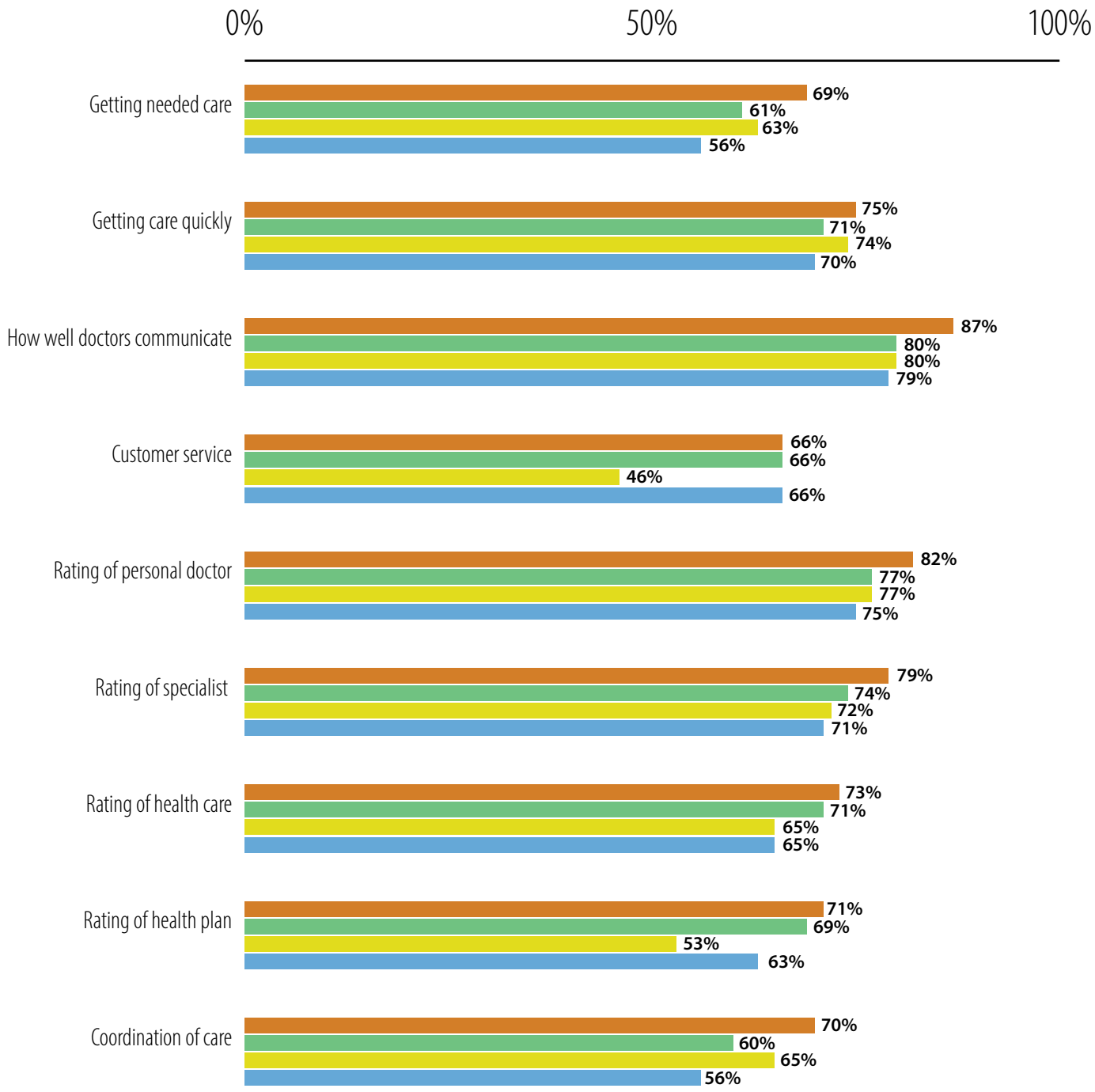
TABLE 11. COMPARISON OF ARKIDS FIRST B WITH NATIONAL PERCENTILES

COMPOSITES/COMPONENTS AND RATING ITEMS	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITIONS		SIGNIFICANCE TESTING	SIGNIFICANCE TESTING
	ARKIDS FIRST B 2026	2025 NCBD NATIONAL RATE	ARKIDS FIRST B 2026	2025 NCBD NATIONAL RATE	GENERAL VS. NATIONAL	CCC VS. NATIONAL
Getting needed care	***69%***	***61%***	***63%***	***56%***	***Significantly Higher***	***Significantly Higher***
Q10. Getting care, tests, or treatment	76%	67%	67%	61%	Significantly Higher	Not Significant
Q41. Seeing a specialist	63%	55%	60%	52%	Not Significant	Not Significant
Getting care quickly	***75%***	***71%***	***74%***	***70%***	***Not Significant***	***Not Significant***
Q4. Obtaining care right away for an illness/injury/condition	82%	78%	84%	75%	Not Significant	Significantly Higher
Q6. Obtaining check-up or routine care appointment as soon as needed	68%	63%	64%	64%	Not Significant	Not Significant
How well doctors communicate	***87%***	***80%***	***80%***	***79%***	***Significantly Higher***	***Not Significant***
Q27. Doctors explaining things in an understandable way	89%	81%	80%	81%	Significantly Higher	Not Significant
Q28. Doctors listening carefully to you	90%	84%	83%	82%	Significantly Higher	Not Significant
Q29. Doctors showing respect for what you had to say	94%	89%	86%	87%	Significantly Higher	Not Significant
Q31. Doctors explaining things in an understandable way to your child	83%	78%	79%	75%	Not Significant	Not Significant
Q32. Doctors spending enough time with your child	78%	70%	74%	72%	Significantly Higher	Not Significant
Customer service	***66%***	***66%***	***46%***	***66%***	***Not Significant***	***Significantly Lower***
Q45. Getting help when calling customer service	55%	55%	46%	54%	Not Significant	Not Significant
Q46. Being treated with courtesy and respect	76%	77%	46%	78%	Not Significant	Significantly Lower
Rating items						
Rating of personal doctor (Q36)	82%	77%	77%	75%	Significantly Higher	Not Significant
Rating of specialist (Q43)	79%	74%	72%	71%	Not Significant	Not Significant
Rating of health care (Q9)	73%	71%	65%	65%	Not Significant	Not Significant
Rating of health plan (Q49)	71%	69%	53%	63%	Not Significant	Significantly Lower
Question summary rate						
Coordination of care (Q35)	70%	60%	65%	56%	Significantly Higher	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 2026 ARKids First B survey result of the CCC sample with the 2025 NCBD national survey results of the CCC sample for the CCC-specific composite measures, AFMC found that 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 questions you had" component of the "family centered care: getting needed information" composite was non-significantly higher for the 2026 ARKids First B CCC sample (79%) when compared with the NCBD national rate (74%). 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 (70%) than the national rate (60%).

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

CCC MEASURES COMPOSITES/COMPONENTS	CHILDREN WITH CHRONIC CONDITIONS		SIGNIFICANCE TESTING
	2026	2025 NCBD NATIONAL RATE	CCC VS. NATIONAL
Access to specialized services			
Getting special medical equipment or devices (Q15)	38%	54%	Not Significant
Getting therapy (Q18)	58%	47%	Not Significant
Getting treatment or counseling (Q21)	41%	46%	Not Significant
Access to prescription medicines			
Getting prescription medicine (Q51)	72%	66%	Not Significant
Family centered care: personal doctor who knows child			
Doctors talking about child's feelings, growth, or behavior (Q33)	91%	90%	Not Significant
Doctors understanding how your child's condition affects your child's life (Q38)	96%	94%	Not Significant
Doctors understanding how your child's condition affects your family's life (Q39)	91%	91%	Not Significant
Family centered care: getting needed information			
Doctors answering questions you had (Q8)	79%	74%	Not Significant
Coordination of care for children with chronic conditions			
Doctors contacting your child's school or daycare (Q13)	91%	92%	Not Significant
Doctors or staff coordinating child's care among other providers (Q24)	70%	60%	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 QUESTION BY AGE CATEGORY - GENERAL CHILD

	GENERAL CHILD								
CHILD'S AGE	0–3		4–7		8–11		12–18		
COMPOSITES AND RATINGS	n	%	n	%	n	%	n	%	RANGE
Getting needed care		92.5%		91.5%		84.2%		90.8%	8.3%
Getting care quickly		87.4%		86.9%		81.8%		85.3%	5.7%
How well doctors communicate		96.9%		96.6%		99.6%		97.9%	3.0%
Customer service		91.7%		86.4%		70.8%		88.9%	20.8%
Rating of personal doctor	93	94.6%	65	90.8%	74	98.6%	146	93.8%	7.9%
Rating of specialist	16	93.8%	14	92.9%	16	87.5%	35	85.7%	8.0%
Rating of health care	77	88.3%	50	80.0%	50	92.0%	103	88.3%	12.0%
Rating of health plan	103	88.3%	81	82.7%	89	85.4%	174	86.8%	5.6%
Coordination of care	33	90.9%	18	100.0%	22	95.5%	41	95.1%	9.1%

TABLE 13B. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY AGE CATEGORY - CHILDREN WITH CHRONIC CONDITIONS									
	CHILDREN WITH CHRONIC CONDITIONS								
CHILD'S AGE	0–3		4–7		8–11		12–18		RANGE
COMPOSITES AND RATINGS	n	%	n	%	n	%	n	%	
Getting needed care		97.4%		76.6%		83.2%		88.3%	20.7%
Getting care quickly		94.2%		87.7%		91.3%		87.6%	6.6%
How well doctors communicate		97.3%		99.4%		90.7%		97.0%	8.7%
Customer service		75.0%		87.8%		66.7%		91.0%	24.3%
Rating of personal doctor	29	89.7%	37	97.3%	52	84.6%	107	91.6%	12.7%
Rating of specialist	17	94.1%	16	100.0%	11	81.8%	57	82.5%	18.2%
Rating of health care	29	82.8%	35	94.3%	47	80.9%	98	86.7%	13.4%
Rating of health plan	30	63.3%	42	73.8%	54	75.9%	113	74.3%	12.6%
Coordination of care	17	76.5%	22	95.5%	19	73.7%	49	85.7%	21.8%

The "how well doctors communicate" composite question for the general child sample had the smallest range of 3.0 percentage points between age categories in Table 13A. The smallest range in ratings questions across age categories occurs for "rating of health plan," at 5.6 percentage points. The largest difference in responses by age category was 20.8 percentage points in the "customer service" composite, with a high of 91.7% from the "0–3" age category compared to 70.8% from the "8–11" age category. Note the small numbers in some categories where caution should be applied to any conclusions drawn from such data.

In Table 13B, the CCC sample "customer service" composite showed the largest range across all question types, at 24.3 percentage points, between the age categories "12–18" (91.0%) and "8–11" (66.7%). The smallest range across age categories among all composites and rating questions was the "getting care quickly" composite, at 6.6 percentage points, with a high of 94.2% in the "0–3" age category and a low of 87.6% in the "12–18" age category. The "rating of specialist" question had the largest difference among rating questions, at 18.2 percentage points, with a high positive measure of 100.0% in the "4–7" age category and a low measure of 81.8% in the "8–11" age category. Note the small numbers in some categories where caution should be applied to any conclusions drawn from such data.

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

	GENERAL CHILD				
PARENT'S EDUCATION	HIGH SCHOOL GRADUATE OR LESS		SOME COLLEGE OR MORE		
COMPOSITES AND RATINGS	n	%	n	%	RANGE
Getting needed care		87.7%		91.9%	4.2%
Getting care quickly		81.5%		89.4%	7.9%
How well doctors communicate		95.9%		98.7%	2.8%
Customer service		82.6%		86.4%	3.8%
Rating of personal doctor	164	93.9%	198	94.4%	0.5%
Rating of specialist	29	89.7%	49	87.8%	1.9%
Rating of health care	114	86.8%	156	88.5%	1.6%
Rating of health plan	207	85.5%	219	87.7%	2.2%
Coordination of care	46	91.3%	63	96.8%	5.5%

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

	CHILDREN WITH CHRONIC CONDITIONS				
PARENT'S EDUCATION	HIGH SCHOOL GRADUATE OR LESS		SOME COLLEGE OR MORE		
COMPOSITES AND RATINGS	n	%	n	%	RANGE
Getting needed care		89.3%		86.3%	3.0%
Getting care quickly		88.0%		89.7%	1.8%
How well doctors communicate		95.2%		96.4%	1.1%
Customer service		85.7%		85.4%	0.3%
Rating of personal doctor	76	90.8%	138	92.8%	2.0%
Rating of specialist	30	86.7%	63	88.9%	2.2%
Rating of health care	67	88.1%	133	86.5%	1.6%
Rating of health plan	85	77.6%	143	72.7%	4.9%
Coordination of care	26	80.8%	77	85.7%	4.9%

In Table 14A, small composite range values of less than 4.0 percentage points are observed for the general child sample in the "how well doctors communicate" (2.8 percentage points) and "customer service" (3.8 percentage points) composite questions. The "getting care quickly" composite question had the largest overall range of 7.9 percentage points across parents' and caregivers' education levels. The smallest difference among all composites and rating questions in responses by parents/caregivers' education level was "rating of personal doctor," with a range of 0.5 percentage points. The "coordination of care" summary question showed a large range of 5.5 percentage points, with a low positive measure of 91.3% in the "high school graduate or less" education category and a high positive measure of 96.8% in the "some college or more" education category.

The CCC sample composite with the smallest range across all question types in Table 14B is "customer service," at 0.3 percentage points, with measures above 85% in both parent/caregiver education level categories. All rating questions had differences of 2.2 percentage points or less, except for "rating of health plan," which had the largest range of 4.9 percentage points. "Coordination of care" also had the largest range, 4.9 percentage points, with a lower positive measure (80.8%) in the "high school graduate or less" education category and a higher positive measure (85.7%) in the "some college or more" education category.

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

	GENERAL CHILD				
CHILD'S GENDER	MALE		FEMALE		
COMPOSITES AND RATINGS	n	%	n	%	RANGE
Getting needed care		89.8%		90.1%	0.3%
Getting care quickly		84.4%		86.8%	2.4%
How well doctors communicate		98.3%		96.9%	1.4%
Customer service		86.4%		85.7%	0.6%
Rating of personal doctor	182	96.2%	193	93.3%	2.9%
Rating of specialist	38	86.8%	43	90.7%	3.9%
Rating of health care	138	89.1%	140	86.4%	2.7%
Rating of health plan	214	87.4%	228	85.5%	1.9%
Coordination of care	57	94.7%	56	94.6%	0.1%

TABLE 15B. COMPOSITES, RATINGS, AND SUMMARY QUESTION BY CHILD'S GENDER - CHILDREN WITH CHRONIC CONDITIONS

	CHILDREN WITH CHRONIC CONDITIONS				
CHILD'S GENDER	MALE		FEMALE		
COMPOSITES AND RATINGS	n	%	n	%	RANGE
Getting needed care		86.9%		86.9%	0.0%
Getting care quickly		90.1%		88.1%	2.0%
How well doctors communicate		95.6%		96.8%	1.1%
Customer service		93.5%		73.3%	20.1%
Rating of personal doctor	131	87.8%	93	95.7%	7.9%
Rating of specialist	55	85.5%	44	88.6%	3.2%
Rating of health care	122	86.1%	88	86.4%	0.3%
Rating of health plan	138	76.8%	101	69.3%	7.5%
Coordination of care	64	79.7%	42	92.9%	13.2%

When evaluating survey results by gender for the general child sample in Table 15A, all composite and rating questions had small ranges of less than 4.0 percentage points. The greatest range of all questions occurred in the "rating of specialist" composite, with a range of 3.9 percentage points between "male" (86.8%) and "female" (90.7%) gender categories. The "getting needed care" composite had the smallest range among the composite measures at 0.3 percentage points, with a high positive score among "female" beneficiaries (90.1%) and a low positive score among "male" beneficiaries (89.8%). The smallest range across all question types, 0.1 percentage points, occurs in the "coordination of care" summary question, with a high positive measure in the "male" gender category (94.7%) and a lower positive measure in the "female" gender category (94.6%).

In Table 15B, the CCC sample results, by gender and across all question types, had the largest range of 20.1 percentage points in the "customer service" composite and the smallest range of 0.0 percentage points in the "getting needed care". "Rating of personal doctor" had the largest rating question difference of 7.9 percentage points, with a high positive measure in the "female" gender category (95.7%) and a low positive measure in the "male" gender category (87.8%). The second-largest overall range of 13.2 percentage points among all questions occurs in the "coordination of care" question, with a high positive measure of 92.9% in the "female" gender category and a low positive measure of 79.7% in the "male" gender category.

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

	GENERAL CHILD						
CHILD'S RACE	WHITE		BLACK OR AFRICAN AMERICAN		OTHER		
COMPOSITES AND RATINGS	n	%	n	%	n	%	RANGE
Getting needed care		94.0%		84.8%		80.9%	13.1%
Getting care quickly		88.4%		82.6%		80.6%	7.8%
How well doctors communicate		97.9%		97.3%		96.1%	1.8%
Customer service		76.2%		100.0%		88.9%	23.8%
Rating of personal doctor	239	94.1%	41	100.0%	75	90.7%	9.3%
Rating of specialist	57	86.0%	10	100.0%	9	88.9%	14.0%
Rating of health care	187	88.8%	32	87.5%	49	83.7%	5.1%
Rating of health plan	272	87.1%	50	86.0%	97	84.5%	2.6%
Coordination of care	73	97.3%	14	92.9%	20	90.0%	7.3%

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

	CHILDREN WITH CHRONIC CONDITIONS						
CHILD'S RACE	WHITE		BLACK OR AFRICAN AMERICAN		OTHER		
COMPOSITES AND RATINGS	n	%	n	%	n	%	RANGE
Getting needed care		88.3%		85.0%		86.9%	3.3%
Getting care quickly		91.0%		84.5%		86.0%	6.5%
How well doctors communicate		97.1%		93.0%		92.2%	4.9%
Customer service		87.8%		70.8%		80.0%	17.0%
Rating of personal doctor	159	93.7%	27	81.5%	28	89.3%	12.2%
Rating of specialist	76	88.2%	7	100.0%	9	88.9%	11.8%
Rating of health care	155	89.0%	19	84.2%	25	76.0%	13.0%
Rating of health plan	172	71.5%	27	74.1%	29	89.7%	18.1%
Coordination of care	84	85.7%	6	66.7%	12	83.3%	19.0%

The largest difference in responses by child's race from the general child sample in Table 16A was in the "customer service" composite question at 23.8 percentage points. The smallest overall range of 1.8 percentage points occurs in the "how well doctors communicate" composite question, with a low positive measure of 96.1% in the "Other" race category and a high positive measure of 97.9% in the "White" race category. Among the "Black or African American" race category, all the respondents reported the highest measure, 100.0%, for a composite and two rating questions: "customer service," "rating of personal doctor," and "rating of specialist." Respondents across all three race categories reported positive scores of over 80.0% for all composites, rating questions, and the summary rate question. Only a small number of

respondents for some composites, ratings, and the summary rate question (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 composite range of 17.0 percentage points. The smallest overall range was 3.3 percentage points for the "getting needed care" composite, with a high positive measure of 88.3% for the "White" race category and a low positive measure of 85.0% for the "Black or African American" race category. The "rating of health plan" question had the second-largest range, 18.1 percentage points, among all composites, rating questions, and the summary rate question. The largest overall range across all question types, 19.0 percentage points, occurs in the "coordination of care" question, with a high positive measure of 85.7% in the "White" race category and a low positive measure of 66.7% in the "Black or African American" race category. Only a small number of respondents for some composites, ratings, and the summary rate question (n<20) indicated that their child's race was "Black or African American" or "Other," and caution should be exercised when making conclusions based on small numbers.

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

	GENERAL CHILD						
CHILD'S OVERALL HEALTH STATUS	EXCELLENT/VERY GOOD		GOOD		FAIR/POOR		
COMPOSITES AND RATINGS	n	%	n	%	n	%	RANGE
Getting needed care		91.1%		83.8%		100.0%	16.2%
Getting care quickly		85.9%		88.0%		50.0%	38.0%
How well doctors communicate		97.2%		100.0%		100.0%	2.8%
Customer service		86.0%		91.7%		-	5.6%
Rating of personal doctor	338	94.4%	39	94.9%	2	100.0%	5.6%
Rating of specialist	71	88.7%	7	100.0%	1	100.0%	11.3%
Rating of health care	252	89.7%	27	74.1%	1	0.0%	89.7%
Rating of health plan	395	87.3%	52	80.8%	2	0.0%	87.3%
Coordination of care	98	93.9%	14	100.0%	0	-	6.1%

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

	CHILDREN WITH CHRONIC CONDITIONS						
CHILD'S OVERALL HEALTH STATUS	EXCELLENT/VERY GOOD		GOOD		FAIR/POOR		
COMPOSITES AND RATINGS	n	%	n	%	n	%	RANGE
Getting needed care		89.6%		83.9%		66.5%	23.2%
Getting care quickly		91.6%		86.8%		69.4%	22.2%
How well doctors communicate		97.4%		94.3%		86.5%	10.9%
Customer service		87.5%		85.4%		75.0%	12.5%
Rating of personal doctor	158	94.3%	54	83.3%	12	75.0%	19.3%
Rating of specialist	60	88.3%	33	84.8%	8	87.5%	3.5%
Rating of health care	151	89.4%	49	83.7%	11	54.5%	34.9%
Rating of health plan	170	76.5%	57	71.9%	13	38.5%	38.0%
Coordination of care	65	84.6%	32	78.1%	9	100.0%	21.9%

As seen in Table 17A, the general child sample respondents who perceive their child's overall health status as "excellent/very good" constitute the largest group, for which n values are provided. Those who perceive their child's overall health status as "fair/poor" have exceptionally small n values, and those with "good" health status have small n values for specific questions. Thus, a comparison between health status categories should be viewed with caution. The largest overall range of 89.7 percentage points occurs in the "rating of health care" question, with a low positive measure for those who perceive their child's overall health status as "fair/poor" (0.0%) and a high positive measure for those who perceive their child's overall health status as "excellent/very good" (89.7%). The smallest overall range of 2.8 percentage points in responses by child's overall health status was in "how well doctors communicate" composite, with a high of 100.0% in the "good" and "fair/poor" overall health categories and a low of 97.2% in the "excellent/very good" overall health category.

The largest difference of 38.0 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 (76.5%) from those who perceive their child's overall health status as "excellent/very good" compared to a low positive measure (38.5%) 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 3.5 percentage points is seen in the "rating of specialist" question, with the lower positive measure from the "good" health status category (84.8%) and the higher positive measure from the "excellent/very good" health status category (88.3%). The "coordination of care" summary question showed a large range of 21.9 percentage points, with a high positive measure of 100.0% from the "fair/poor" overall health category and a lower positive measure of 78.1% from the "good" overall health category.

TABLE 18A. COMPOSITES, RATINGS, AND SUMMARY QUESTION 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		90.9%		88.3%		100.0%	11.7%
Getting care quickly		86.3%		83.9%		100.0%	16.1%
How well doctors communicate		97.4%		98.6%		100.0%	2.6%
Customer service		84.8%		87.5%		-	2.7%
Rating of personal doctor	332	94.9%	40	90.0%	5	100.0%	10.0%
Rating of specialist	72	88.9%	5	100.0%	3	100.0%	11.1%
Rating of health care	244	88.5%	30	86.7%	6	66.7%	21.9%
Rating of health plan	388	86.3%	50	88.0%	6	83.3%	4.7%
Coordination of care	99	93.9%	12	100.0%	2	100.0%	6.1%

TABLE 18B. COMPOSITES, RATINGS, AND SUMMARY QUESTION 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		90.1%		87.1%		75.2%	14.9%
Getting care quickly		92.9%		87.7%		80.1%	12.9%
How well doctors communicate		97.3%		95.1%		94.0%	3.3%
Customer service		85.9%		90.9%		87.5%	5.0%
Rating of personal doctor	118	93.2%	61	93.4%	42	81.0%	12.5%
Rating of specialist	53	90.6%	29	89.7%	18	77.8%	12.8%
Rating of health care	115	91.3%	58	82.8%	35	74.3%	17.0%
Rating of health plan	129	82.9%	63	63.5%	44	61.4%	21.6%
Coordination of care	52	92.3%	31	77.4%	21	81.0%	14.9%

In **Table 18A**, the largest difference between mental health status categories occurs in the "rating of health care" rating question, with a range of 21.9 percentage points, with this difference occurring between the "excellent/very good" (88.5%) and "fair/poor" (66.7%) mental health categories. This is followed by the "getting care quickly" composite, with a range of 16.1 percentage points, a high positive measure (100.0%), and a low positive measure (83.9%), from the "fair/poor" and "good" mental health status categories, respectively. The smallest range, 2.6 percentage points, is from the "how well doctors communicate" composite, followed by the "customer service" composite at 2.7 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 3.3 percentage points occurred in the "how well doctors communicate" composite, with the positive measures being 94.0% or higher for each mental health status category, followed by the "customer service" composite with a range of 5.0 percentage points, with positive measures above 85% for each mental health status category. The largest range from the CCC sample results is 21.6 percentage points from the "rating of health plan" rating question, with a low positive measure from those who perceive their child's mental health status as "fair/poor" (61.4%) and a high positive measure from those who perceive their child's mental health status as "excellent/very good" (82.9%). The second-largest range is found in the "rating of health care" question at 17.0 percentage points, followed by the "getting needed care" composite and "coordination of care" summary rate at 14.9 percentage points. A small number of respondents (n<20) indicated that their child's overall health status was "fair/poor" for some questions, and caution should be exercised when making conclusions based on small numbers.

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:

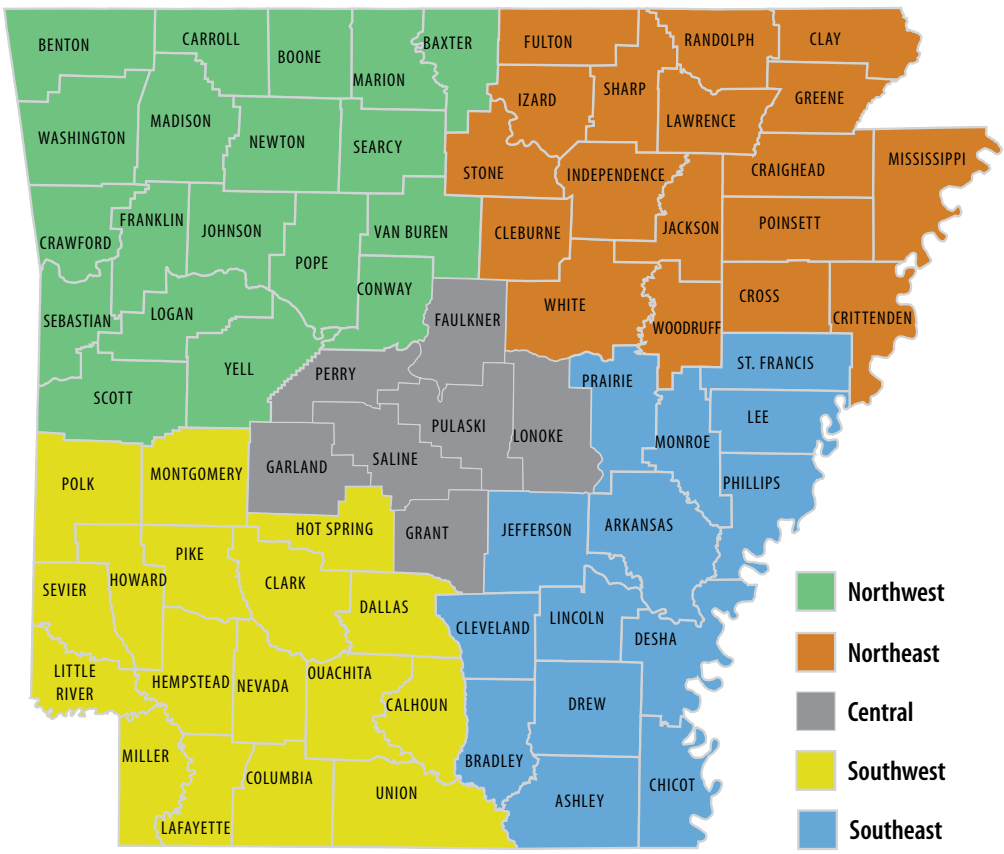
Northwest: Baxter, Benton, Boone, Carroll, Conway, Crawford, Franklin, Johnson, Logan, Madison, Marion, Newton, Pope, Scott, Searcy, Sebastian, Van Buren, Washington, and Yell counties

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." **Tables 19A and 19B** display the mean ratings by region relative to the statewide mean, along with 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

	GENERAL CHILD											
	CENTRAL		NORTHWEST		NORTHEAST		SOUTHWEST		SOUTHEAST		STATEWIDE	
MEAN RATINGS	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN
Rating of personal doctor (Q36)	79	9.4	156	9.2	72	9.3	47	9.6	28	9.3	382	9.3
Rating of specialist (Q43)	19	8.8	25	9.3	19	9.4	10	9.5	8	8.9	81	9.2
Rating of health care (Q9)	64	9.1	108	9.1	55	8.9	33	9.3	23	8.7	283	9.1
Rating of health plan (Q49)	94	9.0	196	8.9	77	9.1	52	8.8	33	8.3	452	8.9

TABLE 19B. MEAN RATINGS - CHILDREN WITH CHRONIC CONDITIONS

	CHILDREN WITH CHRONIC CONDITIONS											
	CENTRAL		NORTHWEST		NORTHEAST		SOUTHWEST		SOUTHEAST		STATEWIDE	
MEAN RATINGS	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN	n	MEAN
Rating of personal doctor (Q36)	57	9.3	87	9.1	40	9.3	31	8.9	11	9.3	226	9.2
Rating of specialist (Q43)	29	9.2	35	8.7	21	9.4	11	8.9	5	9.4	101	9.1
Rating of health care (Q9)	59	8.7	78	8.7	37	9.2	28	8.5	9	9.3	211	8.8
Rating of health plan (Q49)	62	8.3	93	8.3	41	8.3	31	7.7	14	8.8	241	8.3

In **Table 19A**, the "rating of specialist" question shows a small number of general child respondents, so caution should be used when interpreting results. Among all respondents who answered this question, respondents from the Southwest region had the highest mean rating of 9.5 for the "rating of specialist" question. The smallest mean rating of 8.3 for the "rating of health plan" rating question was found within the Southeast region. Statewide, all general child respondents had a mean rating of 8.9 or higher for all four rating questions.

The CCC respondents in **Table 19B** had a rating of 8.9 or above among all regions for the "rating of personal doctor" question. The highest mean rating of 9.4 is "rating of specialist" within the Northeast and Southeast regions. Across all regions and all four rating questions, the Southwest region also had the lowest rating of 7.7 for the "rating of health plan" question. The smallest statewide mean rating was for the "rating of health plan" question, at 8.3, while the largest was for the "rating of personal doctor" question, at 9.2. The Southwest and Southeast regions have few CCC sample respondents for specific rating questions, 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 numbers and percentages of respondents who answered 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	95	67.4%	190	57.9%	80	68.8%	52	67.3%	34	67.6%	451	63.6%
Q7. Having three or more visits to a doctor in person, by phone, or by video	95	20.0%	190	24.7%	80	32.5%	52	15.4%	34	29.4%	451	24.4%
Q5. Seeking routine medical care	96	63.5%	195	51.8%	81	61.7%	55	61.8%	34	52.9%	461	57.3%
Q3. Seeking medical care for illness/injury	95	35.8%	196	30.1%	81	32.1%	55	27.3%	34	47.1%	461	32.5%
Q40. Visiting a specialist	95	21.1%	196	14.3%	81	24.7%	54	20.4%	34	26.5%	460	19.1%
Q26. Visiting personal doctor at least once, in person, by phone, or by video	82	75.6%	155	69.7%	70	77.1%	46	84.8%	30	73.3%	383	74.4%
Q26. Having three or more visits to a personal doctor, in person, by phone, or by video	82	14.6%	155	16.8%	70	25.7%	46	10.9%	30	30.0%	383	18.3%
Q14. Seeking special medical equipment or devices	95	2.1%	196	2.0%	81	1.2%	52	0.0%	33	0.0%	457	1.5%
*Q17. Seeking special therapy**	95	12.6%	197	10.7%	82	7.3%	52	1.9%	34	5.9%	460	9.1%
Q20. Seeking treatment or counseling	95	7.4%	195	3.6%	81	8.6%	51	2.0%	34	2.9%	456	5.0%
Q50. Getting prescription medication	96	49.0%	195	37.9%	82	48.8%	54	40.7%	34	58.8%	461	44.0%
Q44. Getting information or help from customer service	95	12.6%	196	11.2%	82	12.2%	55	9.1%	34	5.9%	462	11.0%

** 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	63	93.7%	92	85.9%	43	86.0%	31	90.3%	12	75.0%	241	88.0%
Q7. Having three or more visits to a doctor in person, by phone, or by video	63	54.0%	92	45.7%	43	37.2%	31	51.6%	12	33.3%	241	46.5%
Q5. Seeking routine medical care	63	84.1%	93	79.6%	42	83.3%	31	83.9%	14	71.4%	243	81.5%
Q3. Seeking medical care for illness/injury	63	42.9%	95	41.1%	43	34.9%	31	38.7%	14	42.9%	246	40.2%
Q40. Visiting a specialist	64	48.4%	95	38.9%	43	48.8%	31	35.5%	14	35.7%	247	42.5%
Q26. Visiting personal doctor at least once, in person, by phone, or by video	57	87.7%	88	89.8%	40	97.5%	31	90.3%	12	75.0%	228	89.9%
Q26. Having three or more visits to a personal doctor, in person, by phone, or by video	57	31.6%	88	27.3%	40	25.0%	31	38.7%	12	33.3%	228	29.8%
Q14. Seeking special medical equipment or devices	63	4.8%	95	3.2%	43	0.0%	31	3.2%	13	15.4%	245	3.7%
Q17. Seeking special therapy*	63	28.6%	94	34.0%	43	27.9%	30	23.3%	13	7.7%	243	28.8%
Q20. Seeking treatment or counseling	63	39.7%	95	41.1%	43	48.8%	30	26.7%	13	15.4%	244	38.9%
Q50. Getting prescription medication	64	89.1%	93	82.8%	43	86.0%	31	90.3%	14	85.7%	245	86.1%
Q44. Getting information or help from customer service	63	19.0%	95	18.9%	43	16.3%	31	12.9%	14	7.1%	246	17.1%

** 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**, with utilization rates below 85.0% across all regions and services. The highest statewide utilization rate was 74.4% for "visiting personal doctor at least once, in person, by phone, or by video." For this service utilization question, the Southwest region had the highest utilization rate at 84.8% among all services and regions. The Northwest region generally had low utilization rates across all services, ranging from 69.7% or less. The "seeking special medical equipment or devices" utilization of service question had the lowest utilization rates: 2.1% in the Central, 2.0% in the Northwest, 1.2% in the Northeast, 0.0% in the Southwest, and 0.0% in the Southeast.

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 89.9% and the highest region utilization rate in the Northeast region (97.5%). Another high statewide utilization rate of 88.0% was found for "visiting personal doctor at least once, in person, by phone, or by video." This service had a high utilization rate in the Central region (93.7%), followed by the Southwest region (90.3%). All regions had a utilization rate of 82.8% or higher for "getting prescription medication." The lowest utilization rate was for "seeking special medical equipment or devices," which was 3.2% in the Northwest and Southwest regions and 0.0% in the Northeast region. This service also had the lowest statewide utilization rate of 3.7%. 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 (73.6%) stated that their child is currently enrolled in school or daycare. Among the general child sample, 147 respondents said their child is not in school or daycare, and 39 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, 6.7% 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 (22) who stated they needed their child's doctor to contact a school or daycare about their child's health or health care are in the CCC sample.

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

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

Key Findings

- When asked if their child got care from more than one kind of health care provider or used more than one kind of health care service, 209 respondents answered "yes." Of respondents who stated that their child received care from more than one type of health care provider or used more than one type of health care service, 54.1% 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, 89.6% stated that their child has a personal doctor. The general child sample included only 62 respondents who stated that their child does not have a personal doctor, and 11 respondents from the CCC sample also stated that their child does not have a personal doctor.
- When asked whether their child received care from a doctor or other health provider besides their personal doctor, 40.6% of the general child sample said "yes." Among the CCC sample, 54.0% of respondents reported that their child received care from a doctor or other health provider besides their personal doctor.

- When asked how many specialists their child had spoken with in the last 6 months, the majority (70.5%) of respondents who see a specialist reported that their child had spoken with only one specialist.

REPORTED CONDITIONS LASTING MORE THAN 3 MONTHS (QUESTION 37)

Parents/caregivers of children/adolescents were asked if any medical, behavioral, or other health conditions had 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, 7.6% of general child respondents and 69.8% 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, whether it provided any forms to fill out, and how often those forms were easy to complete.

Key Findings

- Of all respondents, 69.8% stated that their child is able to talk with doctors about their health care. Of all respondents, 91 from the general child sample and 56 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," 93 respondents from the general child sample and 59 respondents from the CCC sample answered "yes."
- The majority of parents/caregivers from the general sample (49.5%) and CCC sample (47.3%) 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 parents'/caregivers' age and gender were also asked.

Key Findings

- The majority of general child (69.9%) and CCC respondents (84.2%) are not Hispanic or Latino.

- The parents/caregivers age category "35 to 44" had the highest number of respondents, with 149 in the general child sample and 102 in the CCC sample.
- The majority of parents/caregivers (87.6%) who filled out the survey are female.

PREFERRED METHOD OF COMMUNICATION (QUESTION 77)

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

Key Findings

- When asked how they prefer to receive important information from their child's health plan, a majority of respondents, 72.9%, answered, "by mail."

TRANSPORTATION (QUESTIONS 77, 78, AND 79)

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

Key Findings

- The majority of respondents (99.1%) 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, 3 respondents and 3 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, 1 parent/caregiver of children/adolescents in the general child sample and 3 in the CCC sample responded that they "never" got the transportation help that was requested.
- Only parents/caregivers of the general child sample received transportation help from their child's health plan. One respondent stated that the transportation assistance "always" met their needs, and another stated that it "usually" 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	455	100.0	244	100.0	699	100.0
No	0	0.0	0	0.0	0	0.0

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

	Q3) In the last 6 months, did your child have an illness, injury, or condition that needed care right away?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q3	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	150	32.5	99	40.2	249	35.2
No	311	67.5	147	59.8	458	64.8

	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	1	0.7	1	1.1	2	0.8
Sometimes	12	8.2	6	6.3	18	7.4
Usually	14	9.5	8	8.4	22	9.1
Always	120	81.6	80	84.2	200	82.6

	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	264	57.3	198	81.5	462	65.6
No	197	42.7	45	18.5	242	34.4

	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	2	0.8	1	0.5	3	0.7
Sometimes	49	19.1	26	13.3	75	16.6
Usually	31	12.1	43	22.1	74	16.4
Always	174	68.0	125	64.1	299	66.3

	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	164	36.4	29	12.0	193	27.9
1 time	98	21.7	37	15.4	135	19.5
2	79	17.5	63	26.1	142	20.5
3	68	15.1	46	19.1	114	16.5
4	25	5.5	31	12.9	56	8.1
5 to 9	16	3.5	25	10.4	41	5.9
10 or more times	1	0.2	10	4.1	11	1.6

	Q8) In the last 6 months, how often did you have your questions answered by your child's doctors or other health providers?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q8	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	3	1.1	2	1.0	5	1.0
Sometimes	18	6.4	13	6.2	31	6.3
Usually	30	10.6	29	13.8	59	12.0
Always	232	82.0	166	79.0	398	80.7

	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	0	0.0	0	0.0	0	0.0
1	0	0.0	1	0.5	1	0.2
2	1	0.4	1	0.5	2	0.4
3	1	0.4	1	0.5	2	0.4
4	3	1.1	2	0.9	5	1.0
5	4	1.4	4	1.9	8	1.6
6	7	2.5	7	3.3	14	2.8
7	19	6.7	13	6.2	32	6.5
8	42	14.8	45	21.3	87	17.6
9	43	15.2	38	18.0	81	16.4
10 Best health care possible	163	57.6	99	46.9	262	53.0

	Q10) In the last 6 months, how often was it easy to get the care, tests, or treatment your child needed?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q10	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	2	0.7	1	0.5	3	0.6
Sometimes	13	4.6	20	9.5	33	6.7
Usually	53	18.7	49	23.2	102	20.6
Always	216	76.1	141	66.8	357	72.1

	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	313	68.0	206	84.1	519	73.6
No	147	32.0	39	15.9	186	26.4

	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	12	4.0	22	10.9	34	6.7
No	291	96.0	180	89.1	471	93.3

	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	10	90.9	20	90.9	30	90.9
No	1	9.1	2	9.1	3	9.1

	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	7	1.5	9	3.7	16	2.3
No	450	98.5	236	96.3	686	97.7

	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	1	14.3	1	12.5	2	13.3
Sometimes	1	14.3	2	25.0	3	20.0
Usually	0	0.0	2	25.0	2	13.3
Always	5	71.4	3	37.5	8	53.3

	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	3	42.9	6	75.0	9	60.0
No	4	57.1	2	25.0	6	40.0

	Q17) In the last 6 months, did you get or try to get special therapy, such as physical, occupational, or speech therapy for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q17	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	42	9.1	70	28.8	112	15.9
No	418	90.9	173	71.2	591	84.1

	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	2	4.9	5	7.5	7	6.5
Sometimes	5	12.2	9	13.4	14	13.0
Usually	11	26.8	14	20.9	25	23.1
Always	23	56.1	39	58.2	62	57.4

	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	28	70.0	43	63.2	71	65.7
No	12	30.0	25	36.8	37	34.3

	Q20) In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q20	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	23	5.0	95	38.9	118	16.9
No	433	95.0	149	61.1	582	83.1

	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	4	18.2	15	16.1	19	16.5
Sometimes	1	4.5	17	18.3	18	15.7
Usually	4	18.2	23	24.7	27	23.5
Always	13	59.1	38	40.9	51	44.3

	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	59.1	59	63.4	72	62.6
No	9	40.9	34	36.6	43	37.4

	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	96	20.9	113	46.1	209	29.7
No	363	79.1	132	53.9	495	70.3

	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	58	63.0	78	69.6	136	66.7
No	34	37.0	34	30.4	68	33.3

	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	398	86.5	234	95.5	632	89.6
No	62	13.5	11	4.5	73	10.4

	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	98	25.6	23	10.1	121	19.8
1 time	126	32.9	63	27.6	189	30.9
2	89	23.2	74	32.5	163	26.7
3	35	9.1	33	14.5	68	11.1
4	23	6.0	23	10.1	46	7.5
5 to 9	10	2.6	11	4.8	21	3.4
10 or more times	2	0.5	1	0.4	3	0.5

	Q27) In the last 6 months, how often did your child's personal doctor explain things about your child's health in a way that was easy to understand?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q27	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	2	0.7	3	1.5	5	1.0
Sometimes	4	1.4	7	3.4	11	2.3
Usually	26	9.2	31	15.1	57	11.7
Always	251	88.7	164	80.0	415	85.0

	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	0	0.0	2	1.0	2	0.4
Sometimes	5	1.8	5	2.4	10	2.0
Usually	22	7.8	28	13.7	50	10.2
Always	256	90.5	170	82.9	426	87.3

	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	0	0.0	0	0.0	0	0.0
Sometimes	1	0.4	5	2.4	6	1.2
Usually	17	6.0	24	11.7	41	8.4
Always	264	93.6	176	85.9	440	90.3

	Q30) Is your child able to talk with doctors about his or her health care?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q30	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	191	67.7	149	72.7	340	69.8
No	91	32.3	56	27.3	147	30.2

	Q31) In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for your child to understand?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q31	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	1	0.5	2	1.4	3	0.9
Sometimes	5	2.7	2	1.4	7	2.1
Usually	26	14.0	27	18.4	53	15.9
Always	154	82.8	116	78.9	270	81.1

	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	1	0.4	3	1.5	4	0.8
Sometimes	11	4.0	10	4.9	21	4.4
Usually	49	17.6	40	19.7	89	18.5
Always	217	78.1	150	73.9	367	76.3

	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	246	88.8	183	90.6	429	89.6
No	31	11.2	19	9.4	50	10.4

	Q34) In the last 6 months, did your child get care from a doctor or other health provider besides his or her personal doctor?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q34	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	115	40.6	109	54.0	224	46.2
No	168	59.4	93	46.0	261	53.8

	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	3	2.6	5	4.7	8	3.6
Sometimes	3	2.6	12	11.2	15	6.8
Usually	28	24.6	20	18.7	48	21.7
Always	80	70.2	70	65.4	150	67.9

	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	2	0.9	2	0.3
1	1	0.3	0	0.0	1	0.2
2	0	0.0	2	0.9	2	0.3
3	2	0.5	0	0.0	2	0.3
4	2	0.5	1	0.4	3	0.5
5	4	1.0	2	0.9	6	1.0
6	4	1.0	4	1.8	8	1.3
7	8	2.1	10	4.4	18	3.0
8	48	12.6	30	13.3	78	12.8
9	68	17.8	29	12.8	97	16.0
10 Best personal doctor possible	245	64.1	146	64.6	391	64.3

	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	29	7.6	157	69.8	186	30.5
No	355	92.4	68	30.2	423	69.5

	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	27	93.1	149	95.5	176	95.1
No	2	6.9	7	4.5	9	4.9

	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	27	93.1	141	91.0	168	91.3
No	2	6.9	14	9.0	16	8.7

	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	88	19.1	105	42.5	193	27.3
No	372	80.9	142	57.5	514	72.7

	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	1.1	4	3.8	5	2.6
Sometimes	12	13.6	13	12.5	25	13.0
Usually	20	22.7	25	24.0	45	23.4
Always	55	62.5	62	59.6	117	60.9

	Q42) How many specialists has your child talked to in the last 6 months?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q42	Frequency	Percent	Frequency	Percent	Frequency	Percent
None	4	4.5	4	3.8	8	4.1
1 specialist	72	81.8	64	61.0	136	70.5
2	10	11.4	26	24.8	36	18.7

	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
3	2	2.3	7	6.7	9	4.7
4	0	0.0	2	1.9	2	1.0
5 or more specialists	0	0.0	2	1.9	2	1.0

	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	1	1.0	1	0.5
1	0	0.0	0	0.0	0	0.0
2	0	0.0	0	0.0	0	0.0
3	0	0.0	1	1.0	1	0.5
4	1	1.2	0	0.0	1	0.5
5	1	1.2	1	1.0	2	1.1
6	0	0.0	3	3.0	3	1.6
7	7	8.6	7	6.9	14	7.7
8	8	9.9	15	14.9	23	12.6
9	18	22.2	10	9.9	28	15.4
10 Best specialist possible	46	56.8	63	62.4	109	59.9

	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	51	11.0	42	17.1	93	13.1
No	411	89.0	204	82.9	615	86.9

	Q45) In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q45	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	3	5.9	3	7.7	6	6.7
Sometimes	8	15.7	6	15.4	14	15.6
Usually	12	23.5	12	30.8	24	26.7
Always	28	54.9	18	46.2	46	51.1

	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	1	2.0	0	0.0	1	1.1
Sometimes	3	5.9	3	7.7	6	6.7
Usually	8	15.7	18	46.2	26	28.9
Always	39	76.5	18	46.2	57	63.3

	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	93	20.3	59	24.0	152	21.6
No	365	79.7	187	76.0	552	78.4

	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	3	3.3	2	3.6	5	3.4
Sometimes	12	13.2	12	21.8	24	16.4
Usually	31	34.1	15	27.3	46	31.5
Always	45	49.5	26	47.3	71	48.6

	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	0	0.0	1	0.1
1	0	0.0	1	0.4	1	0.1
2	1	0.2	5	2.1	6	0.9
3	2	0.4	2	0.8	4	0.6
4	9	2.0	5	2.1	14	2.0
5	12	2.7	15	6.2	27	3.9
6	7	1.5	14	5.8	21	3.0
7	30	6.6	22	9.1	52	7.5
8	70	15.5	49	20.3	119	17.2
9	85	18.8	27	11.2	112	16.2
10 Best health plan possible	235	52.0	101	41.9	336	48.5

	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	203	44.0	211	86.1	414	58.6
No	258	56.0	34	13.9	292	41.4

	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	2	1.0	3	1.4	5	1.2
Sometimes	13	6.5	11	5.3	24	5.9
Usually	21	10.4	44	21.1	65	15.9
Always	165	82.1	151	72.2	316	77.1

	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	124	62.3	132	63.5	256	62.9
No	75	37.7	76	36.5	151	37.1

	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	226	49.2	67	27.3	293	41.6
Very good	178	38.8	108	44.1	286	40.6
Good	53	11.5	57	23.3	110	15.6
Fair	2	0.4	12	4.9	14	2.0
Poor	0	0.0	1	0.4	1	0.1

	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	251	55.3	59	24.5	310	44.6
Very good	144	31.7	72	29.9	216	31.1
Good	52	11.5	66	27.4	118	17.0
Fair	7	1.5	35	14.5	42	6.0
Poor	0	0.0	9	3.7	9	1.3

	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	64	13.8	194	78.5	258	36.3
No	400	86.2	53	21.5	453	63.7

	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	16	25.4	192	99.0	208	80.9
No	47	74.6	2	1.0	49	19.1

	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	188	97.9	188	91.3
No	14	100.0	4	2.1	18	8.7

	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	5	1.1	115	46.9	120	17.0
No	455	98.9	130	53.1	585	83.0

	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	1	20.0	110	95.7	111	92.5
No	4	80.0	5	4.3	9	7.5

	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	107	97.3	107	96.4
No	1	100.0	3	2.7	4	3.6

	Q61) Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q61	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	6	1.3	63	25.7	69	9.8
No	456	98.7	182	74.3	638	90.2

	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	0	0.0	60	96.8	60	90.9
No	4	100.0	2	3.2	6	9.1

	Q63) Is this a condition that has lasted or is expected to last for at least 12 months?			
	CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q63	Frequency	Percent	Frequency	Percent
Yes	55	94.8	55	94.8
No	3	5.2	3	5.2

	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	8.4	82	33.3	121	17.0
No	425	91.6	164	66.7	589	83.0

	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	3	7.9	67	84.8	70	59.8
No	35	92.1	12	15.2	47	40.2

	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	63	94.0	63	91.3
No	2	100.0	4	6.0	6	8.7

	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	8	1.7	105	42.5	113	15.9
No	456	98.3	142	57.5	598	84.1

	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	101	98.1	101	91.8
No	7	100.0	2	1.9	9	8.2

	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	5	1.1	0	0.0	5	0.7
1 year old	32	7.0	7	2.9	39	5.5
2 years old	34	7.4	10	4.1	44	6.3
3 years old	34	7.4	13	5.3	47	6.7
4 years old	28	6.1	10	4.1	38	5.4
5 years old	25	5.4	12	4.9	37	5.3
6 years old	16	3.5	10	4.1	26	3.7
7 years old	12	2.6	10	4.1	22	3.1
8 years old	24	5.2	20	8.2	44	6.3
9 years old	17	3.7	13	5.3	30	4.3
10 years old	30	6.5	11	4.5	41	5.8
11 years old	20	4.4	13	5.3	33	4.7
12 years old	20	4.4	14	5.7	34	4.8
13 years old	27	5.9	11	4.5	38	5.4
14 years old	33	7.2	19	7.8	52	7.4
15 years old	31	6.8	30	12.2	61	8.7
16 years old	33	7.2	17	6.9	50	7.1
17 years old	30	6.5	22	9.0	52	7.4
18 years old	8	1.7	3	1.2	11	1.6

	Q70) Is your child male or female?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q70	Frequency	Percent	Frequency	Percent	Frequency	Percent
Male	220	48.6	142	58.0	362	51.9
Female	233	51.4	103	42.0	336	48.1

	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	133	30.1	37	15.8	170	25.1
No, not Hispanic or Latino	309	69.9	197	84.2	506	74.9

	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	281	65.2	175	74.8	456	68.6
Black or African American	51	11.8	29	12.4	80	12.0
Asian	11	2.6	3	1.3	14	2.1
Native Hawaiian or other Pacific Islander	3	0.7	1	0.4	4	0.6
American Indian or Alaska Native	3	0.7	1	0.4	4	0.6
Other	56	13.0	10	4.3	66	9.9
Multiracial	26	6.0	15	6.4	41	6.2

	Q73) What is your age?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q73	Frequency	Percent	Frequency	Percent	Frequency	Percent
Under 18	71	15.9	35	14.8	106	15.5
18 to 24	21	4.7	0	0.0	21	3.1
25 to 34	107	23.9	44	18.6	151	22.1
35 to 44	149	33.3	102	43.2	251	36.7
45 to 54	86	19.2	40	16.9	126	18.4
55 to 64	8	1.8	11	4.7	19	2.8
65 to 74	5	1.1	4	1.7	9	1.3
75 or older	0	0.0	0	0.0	0	0.0

	Q74) Are you male or female?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q74	Frequency	Percent	Frequency	Percent	Frequency	Percent
Male	59	13.3	25	10.6	84	12.4
Female	385	86.7	211	89.4	596	87.6

	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	31	7.1	5	2.1	36	5.4
Some high school, but did not graduate	26	5.9	17	7.3	43	6.4
High school graduate or GED	157	35.8	63	26.9	220	32.7
Some college or 2-year degree	148	33.8	88	37.6	236	35.1
4-year college graduate	47	10.7	37	15.8	84	12.5
More than 4-year college degree	29	6.6	24	10.3	53	7.9

	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	432	97.1	226	97.0	658	97.1
Grandparent	8	1.8	3	1.3	11	1.6
Aunt or uncle	0	0.0	0	0.0	0	0.0
Older brother or sister	0	0.0	0	0.0	0	0.0
Other relative	1	0.2	0	0.0	1	0.1
Legal guardian	3	0.7	3	1.3	6	0.9
Someone else	1	0.2	1	0.4	2	0.3

	Q77) How do you prefer to receive important information from your child's health plan?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q77	Frequency	Percent	Frequency	Percent	Frequency	Percent
By mail	266	76.9	107	64.5	373	72.9
By phone call	4	1.2	6	3.6	10	2.0
By text message	43	12.4	28	16.9	71	13.9
By email	33	9.5	25	15.1	58	11.3

	Q78) Some health plans help with transportation for your child to get to doctors' offices, clinics, or pharmacies. In the last 6 months, did you phone your child's health plan to get help with transportation for your child?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q78	Frequency	Percent	Frequency	Percent	Frequency	Percent
Yes	3	0.7	3	1.3	6	0.9
No	445	99.3	232	98.7	677	99.1

	Q79) In the last 6 months, when you phoned your child's health plan to get help with transportation, how often did you get it?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q79	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	1	33.3	3	100.0	4	66.7
Sometimes	1	33.3	0	0.0	1	16.7
Usually	0	0.0	0	0.0	0	0.0
Always	1	33.3	0	0.0	1	16.7

	Q80) In the last 6 months, how often did the help with transportation for your child meet your needs?					
	GENERAL CHILD		CHILDREN WITH CHRONIC CONDITION		TOTAL	
Q80	Frequency	Percent	Frequency	Percent	Frequency	Percent
Never	0	0.0	0	0.0	0	0.0
Sometimes	0	0.0	0	0.0	0	0.0
Usually	1	50.0	0	0.0	1	50.0
Always	1	50.0	0	0.0	1	50.0

ARKids First B Comments

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Very good	9-12	General Sample	** HAD DENTAL SURGERY ON FEB 19TH. EVERYONE TREATED HER WELL AND ANSWERED ALL OUR QUESTIONS EVEN WITH THE COMPLICATIONS SHE HAD THAT ENDED WITH HER SPENDING THE NIGHT AT **.
8-10	Very good	13-18	CCC Sample	** HAS AUTISM BUT HAS EXCELLED EXTREMELY WITH EDUCATION AND HELP FROM DOCTORS AND THERAPIST.
8-10	Poor	0-4	CCC Sample	** HAS BEEN HAVING SEIZURES STARTING AT AGE 6 MO. HE IS 19 MO. OLD, HE WAS DIAGNOSED AT ONE YEAR OLD WITH DRAVET SYNDROME. HE HAS HAD MANY SEIZURES SINCE THEN. HIS NEUROLOGIST IS DR ** AT ** HOSPITAL. WE ARE IN CONTACT WITH DRAVET SYNDROME FOUNDATION TO LEARN HOW TO DEAL WITH THIS VERY SERIOUS DIAGNOSIS. SOME CHILDREN DO NOT MAKE IT TO ADULTHOOD. ** IS NOW ON MEDICAID THROUGH SOCIAL SECURITY (SSI); WE HAVE A CONTACT THERE. HE WAS ON ARKIDS FIRST B FOR ONE MONTH DUE TO A MISTAKE OR WRONG INFO; BEFORE THAT, HE WAS ON ARKIDS MEDICAID A. ** CANNOT SAY BUT ONE WORD, HE'S IN THERAPY, ALL OF THEM. HE WILL ALWAYS HAVE SEIZURES ACCORDING TO DR. **; Q42) CHILD CANNOT TALK, SAYS ONE WORD, HAS DRAVET SYNDROME SEIZURES
8-10	Excellent	9-12	CCC Sample	** HAS DIAGNOSES OF AUTISM LEVEL 1 ADHD
5-7	Very good	0-4	General Sample	** IS MY CHILD. THAT DOES NOT GET EASY. MY OTHER SON WHO IS 8 HAS HEALTH ISSUES. IT IS HARD TO GET ALL OF THE MEDICATION HIS DOCTOR PRESCRIBES. IT IS ALSO HARD TO GET THE INSURANCE TO PAY FOR CERTAIN MEDICATIONS. THIS PACKET SURVEY SHOULD INCLUDE ALL PEOPLE IN THE HOUSEHOLD.
8-10	Excellent	0-4	General Sample	** SHOULD BE COVERED BY INSURANCE.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Very good	0-4	CCC Sample	65) ** WAS EVALUATED ON HIS RISK FOR AUTISM AT 2 YEARS OLD, AND HE RECEIVED OCCUPATIONAL, PHYSICAL, AND SPEECH THERAPY SINCE THEN. HOWEVER, HE SHOULD BE SCREENED FOR AUTISM AT 3 YEARS OLD TO SEE IF THIS BEHAVIOR WAS SIMPLY A DEVELOPMENTAL DELAY OR AN AUTISM DIAGNOSIS. WE ARE WAITING FOR THIS EVALUATION SCREENING AS HE IS STRUGGLING MORE SO WITH HIS SPEECH DELAY.
0-4	Very good	9-12	CCC Sample	A PRESCRIPTION OF HIS IS NOT COVERED BECAUSE IT IS NOT IN A CAPSULE. HE NEEDS ORTHOTICS BUT THEY ARE NOT COVERED UNDER ARKIDS B; ARKIDS A COVERS THEM BUT NOT B. HE NEEDS TO BE TESTED FOR AUTISM, HOWEVER FINDING A PLACE THAT TAKES ARKIDS AND COVERS ALL THE TESTING HAS BEEN HARD.
8-10	Good	5-8	CCC Sample	AREAS ABOUT NUTRITION FOR CHILDREN, DENTAL CARE AND VISION CARE.
5-7	Very good	13-18	CCC Sample	ARKIDS B HAS BEEN BENEFICIAL BUT THE ONLY DRAWBACK IS THAT SHE CANNOT GO TO ANY AFTER HOURS CLINIC WITHOUT A REFERRAL WHICH SHE CANNOT GET AFTER HOURS.
0-4	Good	0-4	CCC Sample	COULD FILL THIS OUT DIFFERENTLY FOR EACH CHILD AND FOR EACH DOCTOR WE'VE SEEN IF YOU NEEDED. WOULD BE OPEN TO MORE SURVEYS OR FURTHER QUESTIONS; Q7) CHAT QUESTIONS ANSWERED; Q9) WE JUST MOVED PROVIDERS
8-10	Good	5-8	CCC Sample	DENTISTRY WAS NOT COVERED IN THE SURVEY BUT IS COVERED BY ARKIDS.
5-7	Very good	0-4	General Sample	DHS IS THE WORST! CUSTOMER SERVICE IS TRASH. HOLD TIMES ARE INSANE!! NO ONE WANTS TO HELP YOU OR ANSWER QUESTIONS. PLEASE DO BETTER!

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Very good	0-4	General Sample	DURING THE ICE STORM, MY DAUGHTER WAS RUNNING 100-101 FEVER THAT WE COULDN'T GET DOWN. HER USUAL CLINIC IN HAMPTON WAS CLOSED, AND IT WASN'T AN EMERGENCY TO WHERE SHE NEEDED TO GO TO THE EMERGENCY ROOM AND WASTE TIME AND MONEY. WE WEREN'T SURE WHERE TO TAKE HER, SO WE TOOK HER TO ** IN WARREN. SHE NEEDED MEDICAL ATTENTION DUE TO BREATHING, AS WELL. IN THIS INSTANCE, WE DIDN'T KNOW WHAT OUR OTHER OPTION WAS AND WHERE TO TAKE HER. OUR DAUGHTER IS QUICK TO HAVE UTI'S AND CONSTIPATION. HAVING HER INSURANCE IS A BLESSING. WITHOUT IT, I JUST DON'T KNOW WHAT WE WOULD DO. THANK YOU. Q24) CLINIC WASN'T OPEN; HAD TO GO SOMEWHERE ELSE.
5-7	Very good	13-18	CCC Sample	EASIER WAY TO GET TRANSPORTATION FOR APPOINTMENTS AND MILEAGE.
8-10	Excellent	0-4	General Sample	EVERYTHING IS WELL
8-10	Excellent	0-4	General Sample	FOR IMMUNIZATION, I WISH THE ARKIDS B PLAN STILL COVERED HIS IMMUNIZATION SHOT AT THE DOCTOR'S OFFICE. I HAVE TO GO TO THE LOCAL HEALTH DEPARTMENT. THIS WOULD BE CONVENIENT FOR MY SCHEDULE. THIS WOULD HELP WITH TAKING OFF FROM WORK. I AM USUALLY ABLE TO SCHEDULE HIS CHECK-UP (WELLNESS CHECK) AND IMMUNIZATION APPOINTMENT ON THE SAME DAY, BUT THE LAST FEW TIMES, I HAD TO SCHEDULE ON DIFFERENT DAYS.
8-10	Good	13-18	CCC Sample	FOR THE MEDICAL CONDITION THAT MY CHILD HAS, HE TAKES MEDICATION AND IS LIMITED BY HIS ASTHMA.
8-10	Excellent	9-12	CCC Sample	HE WAS DIAGNOSED WITH MIGRAINES.
8-10	Excellent	13-18	General Sample	HEALTHCARE FOR CHILDREN IS ESSENTIAL. I AM VERY THANKFUL MY CHILDREN HAVE ALWAYS HAD ACCESS TO DOCTORS ETC. BECAUSE OF ARKIDS 1ST!
8-10	Very good	13-18	CCC Sample	I ** AM HER GRANDFATHER AND WE ALSO ADOPTED HER

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Very good	0-4	CCC Sample	I AM SO THANKFUL FOR ARKIDS! AS A SINGLE MOM OF TWO, I COULD NOT BE HAPPIER! THANKS **; Q26) GI ISSUES REPEATED UNDER THE AGE OF 1; Q27) WITH HIS IPAD ALWAYS!! PUSHED VACCINATIONS; Q29) QUESTIONED ME ON VACCINATIONS A LOT; Q41) I HAD TO ASK AFTER 4 VISITS; Q42) ENT AND ** HOSPITAL (THEY WERE AMAZING!); Q46) I HAVE SEEN THEM TREAT PEOPLE HORRIBLY, DEPENDS ON THE DAY THAT YOU CALL OR GO TO DHS; Q49) IT HAS COVERED ALMOST ALL COSTS; WE ARE FINANCIALLY STRUGGLING AND THANKFUL!; Q77) BY MAIL 1ST BY TEXT MESSAGE 2ND
8-10	Good	13-18	General Sample	I AM VERY GLAD AND SATISFIED WITH THE WAY THE DOCTORS TAKE CARE OF MY CHILD'S HEALTH.
8-10	Very good	5-8	CCC Sample	I FIND IT HARD FOR MY CHILD TO RECEIVE CARE IF IT IS ON THE WEEKENDS SINCE ARKIDS REQUIRES A REFERRAL FROM YOUR PCP, AND THEY AREN'T OPEN ON WEEKENDS. I WISH MORE FEEDBACK ON THAT COULD BE COVERED.
5-7	Very good	5-8	CCC Sample	I HAVE HAD MANY PROBLEMS WITH MEDICAID TERMINATING MY CHILD'S COVERAGE UNEXPECTEDLY FOR NO REASON. UPON CALLING, WE LEARN THAT MY CHILD IS 'ELIGIBLE' BUT NOT ENROLLED. THIS IS A HUGE PROBLEM AND HAS HAPPENED MORE THAN ONCE. FOR A MEDICALLY NEEDY CHILD NOT TO BE ABLE TO REFILL PERSCRIPTION MEDICATIONS THAT KEEP THEM HEALTHY, THIS PROBLEM IS EVEN BIGGER. I AM FRUSTRATED WITH ARKANSAS MEDICAID SYSTEM'S LACK OF ORGANIZATION AND VERY POOR ATTENTION TO DETAIL IN GETTING THESE MATTERS UNDER CONTROL. THESE ISSUES SHOULD NOT HAPPEN IN THE FIRST PLACE. ANOTHER BIG PROBLEM IS SEVERAL GLITCHES ON YOUR ACCESS ARKANSAS WEBPAGE CAUSING HUGE PROBLEMS WHEN APPLYING FOR MEDICAID. IT SHOULD NOT BE THIS DIFFICULT.

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8-10	Excellent	5-8	General Sample	I HAVE NEVER HAD ANY ISSUE WITH MY CHILD'S COVERAGE UNTIL 3/16/26. SHE WAS DENIED A MEDICALLY NECESSARY DENTAL PROCEDURE DUE TO MEDICAID NOT BELIEVING IT IS MEDICALLY NECESSARY. I SPENT OVER AN HOUR ON THE PHONE WITH SEVERAL DIFFERENT PEOPLE AND NO ONE COULD UNDERSTAND WHY COVERAGE WAS DENIED TO MY CHILD. I HAVE ASKED THE DENTAL OFFICE TO RESUBMIT THE PA FORM FOR THE PROCEDURE. HOPEFULLY, IT WILL BE ACCEPTED THIS TIME BECAUSE IF SHE DOES NOT RECEIVE THE PROCEDURE SHE NEEDS, IT COULD CAUSE LOTS OF DENTAL PROBLEMS IN THE FUTURE AND COULD POTENTIALLY LEAD TO BRACES! THANKS, **
8-10	Excellent	0-4	General Sample	I HAVE NEVER RECEIVED A MEDICAID CARD FOR MY SON
8-10	Excellent	0-4	General Sample	I HAVE NO ISSUES WITH MY SON'S HEALTH COVERAGE. IT IS HARD TO FIND A DR. THAT WILL ACCEPT THEM BECAUSE THEY ARE LIMITED, BUT WE FINALLY FOUND ONE AND THEY ARE GOOD. THANK YOU.
8-10	Excellent	0-4	General Sample	I HAVE RECEIVED BILLS FOR MEDICAL CARE THAT MEDICAID REFUSES TO COVER. THESE INCLUDE MEDICAL APPOINTMENTS WITH MY PERSONAL PHYSICIAN AND ANOTHER HEALTHCARE PROVIDER.
5-7	Very good	5-8	General Sample	I JUST WANTED TO ADD MY CHILD HAS SEEN A 'SPECIALIST' FREQUENTLY IN THE LAST 6 MONTHS DUE TO A BROKEN ARM. OTHERWISE, SHE'S HEALTHY. =)
8-10	Very good	5-8	General Sample	I JUST WANTED TO BE CLEAR THAT ON QUESTION 37 IT ASKS IF MY CHILD HAS ANY MEDICAL, BEHAVIORAL, OR OTHER HEALTH CONDITIONS. SHE DOES GET EAR TUBES ALMOST YEARLY; IN BETWEEN GETTING THEM, SHE IS HEALTHY. I WAS JUST UNSURE IF IT WAS A YES, OR A NO.
	Excellent	0-4	General Sample	I NEVER GOT MY CHILD'S ** MEDICAID CARD

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
0-4	Excellent	9-12	General Sample	I THINK IT WOULD BE GREAT IF ARKIDS HAD PART A & B TOGETHER INSTEAD OF SEPARATE.
5-7	Good	5-8	CCC Sample	I THINK THAT 0-18 YEARS OF AGE SHOULDN'T HAVE TO PAY COPAY FOR ANY REASON JUST MY OPINION.
5-7	Good	9-12	General Sample	I THINK THERE SHOULD NOT BE A COST FOR HER MEDS OR DOCTORS VISITS.
8-10	Good	5-8	General Sample	I WISH I DIDN'T HAVE TO PAY FOR THE COPAY EVERY TIME MY CHILD GOES TO DOCTOR. SOMETIMES I DON'T HAVE MONEY TO PAY DOCTOR OR PAY FOR ANY MEDS.
5-7	Good	13-18	CCC Sample	I WISH MORE PROVIDERS ACCEPTED THE INSURANCE (ESPECIALLY COUNSELING), BUT THANK YOU FOR ALL THE GREAT COVERAGE FOR DOCTORS AND MEDS!
5-7	Very good	9-12	CCC Sample	I WOULD LIKE FOR HIM TO RECEIVE SPEECH THERAPY AND OCCUPATIONAL THERAPY.
8-10	Excellent	0-4	CCC Sample	I'M ON HOLD WAITING FOR A SPECIALIST TO KNOW IF HE'S AUTISTIC.
0-4	Good	13-18	General Sample	IN THE AREA WE LIVE IN, IT'S HARD TO FIND A DOCTOR THAT ACCEPTS HER INSURANCE. MOST TIMES, WE GET ON A WAITING LIST AND NEVER HEAR BACK. SINCE WE'VE HAD THE INSURANCE, WE HAVEN'T USED IT BECAUSE WE DON'T HAVE A PROVIDER/REASON TO. IN MO, WE WENT EVERY YEAR FOR CHECK-UPS PLUS DENTIST AND EYE CHECK-UPS, I JUST WISH THERE WERE MORE RESOURCES FOR HELP FINDING A PROVIDER FOR HER.
5-7	Good	5-8	CCC Sample	IN THE LAST 6 MONTHS, CHILD HAS BEEN HAVING WHAT SEEM TO BE ABSENT SEIZURES. WE HAVE NOT YET FIGURED THIS OUT, BUT WE DO HAVE UPCOMING APPOINTMENTS IN FEBRUARY AND THEN AUGUST TO SEE A NEUROLOGIST. IF THEY SEE ANYTHING DURING EEG, I ASSUME HE WILL SEE A NEUROLOGIST MUCH SOONER THAN AUGUST. CHILD DOES NEED DENTAL EXPANSION; I WISH THERE WAS COVERAGE FOR THIS.

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5-7	Very good	5-8	General Sample	INCOME LIMITS ARE WAY TOO LOW. POVERTY LINE IS AROUND 70K A YEAR FOR A FAMILY OF 4. YOU KNOW THE LIMITS. MORE PEOPLE NEED HELP!
	Very good	13-18	CCC Sample	IT IS HARD TO FIND A PROVIDER SPECIALIZED IN KIDS' MENTAL HEALTH/BEHAVIORAL HEALTH WHO TAKES MEDICAID SINCE THE INSURANCE PAYS TOO LITTLE FOR THEIR SERVICES. ALSO, MOST OF THE PROVIDERS ARE NOT TRAINED IN STRATEGIES TO HELP THE PARENTS TO DEAL WITH BURNOUT OR PARENTING STRATEGIES.
0-4	Very good	13-18	General Sample	IT IS VERY DIFFICULT TO GET CARE FROM DOCTORS IN OUR AREA. WE HAVE A FAMILY DOCTOR BUT HE'S ACTUALLY A NURSE BECAUSE IT'S SO HARD TO GET ANY OTHER DOCTOR.
8-10	Good	9-12	General Sample	JUST AN OBSERVATION, SOMETIMES I RECEIVE EMAILS THAT MY SON'S INSURANCE IS CANCELED AND THEN THAT IT IS REACTIVATED, AND THAT CONFUSES ME A LITTLE.
5-7	Excellent	9-12	General Sample	JUST LET THE PARENTS KNOW THEY WILL START BEING CHARGED FOR VISITS OR GETTING MEDS. I WAS NOT INFORMED AND SHOCKED WHEN I HAD TO PAY FOR TAKING HIM TO THE DR. AND THE ER AND FOR GETTING HIS MEDS FILLED AS WELL.
5-7	Excellent	5-8	CCC Sample	LACK OF COMMUNICATION AND EXECUTION FOR REFERRALS FOR SPECIALIZED TREATMENT/CARE.
0-4	Very good	13-18	CCC Sample	LAST YEAR, MY PLAN CHANGED TO ARKIDS B FROM ARKIDS A. THERE WAS NEVER ANY TYPE OF COMMUNICATION SENT OUT EXPRESSING THE CHANGE. THE NEW PLAN HAS A CO-PAY. IT WOULD HAVE BEEN HELPFUL TO KNOW THE INFORMATION FOR THE NEW PLAN PRIOR TO THE CHANGE.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Very good	13-18	General Sample	MEDICAID HAS ALWAYS BEEN A GREAT HEALTH PLAN AND HAS COVERED PROCEDURES FOR MY SON. RECENTLY, HE SAW HIS DENTIST WHO RECOMMENDED BRACES. AT THE EVALUATION, HE SCORED HIGH ENOUGH TO GET BRACES, BUT MEDICAID DENIED PAYMENT BECAUSE ACCORDING TO THEM, HIS SCORES ARE NOT HIGH ENOUGH. HOW DOES SOMEONE WHO HAD NO CONTACT WITH MY SON KNOW HE DOES NOT NEED THE BRACES?
5-7	Very good	13-18	CCC Sample	MY CHILD HAS A BIRTH DEFECT THAT CAUSES HEARING IMPAIRMENT. ARKIDS B HAS NO PLAN OR HELP FOR THIS AT ALL, APART FROM DIAGNOSIS. GETTING HER HEARING AIDS HAS BEEN A REAL STRUGGLE.
0-4	Very good	5-8	CCC Sample	MY CHILD HAS ADHD/ADD AND THE INSURANCE WILL NOT COVER THERAPY BECAUSE SHE WILL NEVER BE CURED, BUT THERAPY WOULD HELP HER MANAGE.
8-10	Excellent	0-4	General Sample	MY CHILD HAS AN APPOINTMENT WITH A NEUROLOGIST TO GET A FEW ANSWERS, SO SOME QUESTIONS WERE COMPLICATED TO ANSWER.
8-10	Good	0-4	CCC Sample	MY CHILD REALLY NEEDS SPEECH THERAPY AND MOTOR SKILLS. I HAVE BEEN WAITING SINCE SEPTEMBER FOR MY CHILD TO GET TESTED FOR POSSIBLE AUTISM. HOWEVER, I'M STILL WAITING AND THE PROCESS OF HIS SPEECH DELAY HAS BEEN VERY SLOW. HE ALSO HAS PROBLEMS WITH HIS SLEEP SINCE HE WAS BORN. I HAVE TRIED EVERYTHING TO STABILIZE HIM, BUT I HAVEN'T GOT ANY LUCK. I HAVE MENTIONED THIS SITUATION TO DOCTORS, BUT I HAVENT RECEIVED ANY HELP WITH IT. I'M VERY WORRIED BECAUSE HE WILL SOON HAVE TO START SCHOOL, AND HE'S NOT NEARLY READY FOR IT. I NEED HELP WITH THESE ISSUES. THANK YOU FOR YOUR TIME.

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5-7	Very good	13-18	CCC Sample	MY CHILD RECEIVES COUNSELING FOR ANXIETY, DEPRESSION, MAYBE PTSD AND IS PROBABLY ON THE AUTISM SPECTRUM. THERE AREN'T ENOUGH TESTING FACILITIES FOR ASD, ADHD, ETC. WHO ACCEPT ARKIDS MEDICAID A OR B. THESE TESTS ARE VERY EXPENSIVE. IF I CAN'T GET MY CHILD TESTED, IT MAKES IT HARD TO GET SPECIAL TREATMENT FROM SCHOOL, I.E. LIKE WEARING HEADPHONES FOR SENSORY ISSUES.
8-10	Very good	0-4	CCC Sample	MY CHILD RECEIVES THERAPY THROUGH THE PUBLIC SCHOOL SYSTEM.
8-10	Very good	0-4	General Sample	MY CHILD WAS SUGGESTED TO RECEIVE SPEECH THERAPY FOR SWALLOWING/FOOD ISSUES BY HIS PRIMARY CARE PHYSICIAN. THOUGH THE DOCTOR WAS PROMPT AT THE APPOINTMENT, NO ONE EVER CONTACTED US OR HIS SCHOOL TO FURTHER/INITIATE THE TREATMENT. MY HUSBAND AND I CALLED AGAIN TO REMIND THAT TREATMENT HAD NOT BEGUN, BUT NEVER GOT A RESPONSE.
8-10	Excellent	9-12	General Sample	MY CHILD'S INSURANCE IS GREAT; HOWEVER, EVERY TIME I HAVE GOTTEN LETTERS IN THE MAIL FROM THEM, IT IS ALWAYS HARD TO UNDERSTAND, AND WHEN I GO TO OUR LOCAL OFFICE, I DON'T GET MUCH HELP. I USUALLY HAVE TO CALL ELSEWHERE TO GET HELP.
5-7	Good	13-18	General Sample	MY CHILD'S PCP WAS NOT THE BEST. WE HAD USED THIS DOCTOR SINCE BIRTH, BUT THINGS JUST GOT UNBEARALBLE: A FRACTURED FOOT UNCARED FOR BY DR., A RUPTURED OVARIAN CYST AND ANOTHER ONE ON THE OPPOSITE SIDE, AND A TRIP TO THE ER AND THEN CHANGED PCP. DR. WANTED TO DO BLOODWORK ONLY. NEW DOCTOR IS MORE CONCERNED AND SET UP A VISIT WITH A SPECIALIST, MUCH HAPPIER WITH THE CARE OF THE NEW PCP

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Very good	0-4	CCC Sample	MY CHILD'S PERSONAL DOCTOR TOLD US ON HIS LAST CHECK THAT SHE WAS GOING TO HAVE A SPECIALIST CLINIC CONTACT US FOR A SPEECH THERAPY, BUT WE WERE NEVER CONTACTED BY ANYONE ABOUT IT, SO I THINK THIS MIGHT BE SOMETHING THEY CAN IMPROVE ON. OTHER THAN THAT, I REALLY THINK EVERYONE DOES A GREAT JOB.
8-10	Excellent	9-12	General Sample	MY DAUGHTER AND I HAVE NO COMPLAINTS WITH HER INSURANCE. SHE IS IN PERFECT HEALTH.
8-10	Very good	13-18	CCC Sample	MY DAUGHTER HAS ASTHMA FOR WHICH HER PERSONAL DOCTOR HAS PRESCRIBED AN INHALER. SHE NEEDED TO SEE A NEUROLOGIST FOR MIGRAINES AND A TREATMENT PLAN. WE WERE SEEN QUICKLY BY ** HOSPITAL AND NOW HAVE A TREATMENT PLAN. THE ONLY PROBLEM WE HAVE IS SHE NEEDS TO BE EVALUATED FOR ADHD. HER PRIMARY CARE DOCTOR AND I HAVE DONE OUR PART, BUT WE HAVE NOT RECEIVED A CALL BACK FROM THE CLINIC SHE WAS REFERRED TO FOR THE EVALUATION.
5-7	Very good	0-4	CCC Sample	MY DAUGHTER HAS DOWN SYNDROME, AND SHE WAS SWAPPED FROM ARKIDS A TO ARKIDS B. NOW SHE CAN NOT GET THE FULL SERVICES SHE NEEDS FOR HER THERAPIES. WE ARE ALSO HAVING TO PAY OUT OF POCKET FOR MORE THINGS. PEOPLE KEEP SAYING SHE SHOULD BE FULLY COVERED BECAUSE SHE HAS DOWN SYNDROME, BUT WHEN I CALL AND ASK ABOUT IT, ALL I GET TOLD IS THAT IT IS BASED OFF OUR INCOME. LIKE WE CHOSE FOR HER TO BE BORN LIKE THAT. WE'RE GREATFUL FOR WHAT LITTLE HELP WE GET, BUT SOMETIMES IT'S STRESSFUL AND WEARS ON THE WHOLE FAMILY. WE JUST WANT WHAT'S BEST FOR HER AND FOR HER TO GET THE MOST OUT OF LIFE.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10		5-8	CCC Sample	MY DAUGHTER HAS VERY BAD SEASONAL ALLERGIES, WHICH CAUSES HER TO NEED MED REFILLS OFTEN AND SKIN ALLERGIES. SHE USES THE MEDICATION ON DAILY BASIS BUT IS STILL ABLE TO PERFORM AS OTHER KIDS OF HER AGE. THANK YOU FOR CONDUCTING THIS SURVEY
8-10	Very good	13-18	CCC Sample	MY HUSBAND AND I ARE 80 AND 89 YEARS OLD. WE ARE HER MATERNAL GREAT-GRAND PARENTS. WE ADOPTED HER IN 2015 AND HAVE HAD HER SINCE 4 MONTHS.
8-10	Excellent	0-4	General Sample	MY HUSBAND AND I ARE INCREDIBLY GRATEFUL FOR THE HEALTHCARE PROVIDED FOR OUR DAUGHTER! THANK YOU FOR ALL THAT YOU DO!
8-10	Excellent	13-18	General Sample	MY NAME IS ** MOTHER OF **. I WOULD LIKE TO THANK YOU FOR ALL THE HELP YOU HAVE PROVIDED TO MY CHILDREN. IT HAS BEEN A GREAT HELP FOR ME, BLESSINGS FOR YOU ALL AND THANK YOU SO MUCH. **
5-7	Excellent	5-8	General Sample	MY ONLY COMPLAINT IS WHEN THEY MAY NEED TO BE SEEN ON A WEEKEND AT AN URGENT CARE. THEY NEED A REFERRAL FOR THIS, BUT YOU CAN'T GET ONE BECAUSE THE PCP IS CLOSED.
8-10	Very good	0-4	CCC Sample	MY SON HAS A SEVERE EXPRESSIVE SPEECH DELAY AND A VERY WEAK IMMUNE SYSTEM. WITHOUT ARKIDS B, US GETTING HIM THE HELP AND MEDICATIONS HE NEEDS WOULD NOT BE POSSIBLE. THANK YOU!
8-10	Excellent	5-8	CCC Sample	MY SON HAS SPEECH AND BEHAVIOURAL PROBLEMS AND SEES MANY DOCTORS AND SPECIALISTS BECAUSE OF THIS. HE NEEDS TO KEEP SEEING THEM OR THERE IS NO WAY HE WOULD BE ABLE TO STAY IN SCHOOL! THANK YOU!
8-10	Very good	13-18	CCC Sample	MY SON IS A PATIENT AT ** IN BRYANT. HE IS ASSIGNED TO DR. **. WE HAVE NOT SEEN THIS DOCTOR, BUT WE HAVE SEEN OTHERS WITHIN THE CLINIC.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Very good	5-8	CCC Sample	MY SON WAS HOSPITALIZED LAST APRIL (2025) FOR ASTHMA AT ** IN SPRINGDALE, AR, AND THE CARE HE RECEIVED WAS AMAZING! THE STAFF AND DOCTORS WERE WONDERFUL AND WE FELT LIKE THEY CARED DEEPLY ABOUT WHAT THEY WERE DOING. WE WERE VERY PLEASED AND THANKFUL. IN THE END, HIS CARE WAS PAID FOR AND THAT MADE OUR LIVES SO MUCH EASIER IN SO MANY WAYS, VERY THANKFUL FOR AR KIDS!!!
5-7	Excellent	0-4	CCC Sample	MY SON'S SPECIALISTS ARE FOR AN EGG ALLERGY AND FOR HIS ECZEMA. HE ALSO HAD AN EMERGENCY VISIT TO THE HOSPITAL FOR A DOG BITE, SO HE HAS CHECKUPS WITH AN EAR/NOSE/THROAT SPECIALIST FOR HIS SCAR. HIS INSURANCE PLAN IS SAYING IT WON'T COVER HIS VISITS TO THE EAR/NOSE/THROAT SPECIALIST.
8-10	Good	13-18	CCC Sample	NEED MORE HOURS FOR THERAPY

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Good	13-18	CCC Sample	OK, MY CHILD HAS RECENTLY HAD PROBLEMS. HE WAS UNRESPONSIVE FOR 3 1/2 HOURS. STARTED WITH HEADACHES, NOW IT IS FULL BODY PAIN! WE WENT TO THE PCP; HE SAID HE DID NOT KNOW. HE CAN PUT IN A REFERRAL TO NEURO; NOTHING HAPPENED. HE SENT A REFERRAL TO A THERAPIST; THAT NEVER WENT ANYWHERE. WE HAVE BEEN TO ** IN NWA (3) TIMES AND ** FORT SMITH (3) TIMES. THEY GAVE HIM SOME PAIN MEDS THAT DID NOT WORK. ** EVEN SAID WE DON'T KNOW; WE CANNOT HELP HIM. TRANSFERRED US TO ** (LITTLE ROCK) AND THAT IS WHERE WE FINALLY FOUND ANSWERS. THE ER DOCTOR DID NOT GIVE US ANY HOPE WHATSOEVER! BUT HE DID CALL NEURO FOR US. WE SAW A NEURO DOCTOR IN THE ER, 3 IN FACT. DID SOME TESTING IN THE ROOM AND FOUND OUT IT WAS 'AMPS'. HE SAW SOMEONE FROM THE PAIN CLINIC IN THE ROOM; HE HAS AN APPOINTMENT NEXT MONTH WITH OVER 60 DAYS WAIT. HE HAS BEEN ON 3 DIFFERENT PAIN MEDS - NONE WORK. HE LIVES WITH A PAIN LEVEL OF 7-10. SPIKES ARE 9 OR 10'S. NORMAL IS REALLY AT 8. BUT REALLY GOOD DAYS ARE 7. HE CANNOT MOVE, SPEAK, OR EAT WITHOUT PAIN. THE PCP'S NURSE TOLD US IF HE WAS IN PAIN THAT BAD TO GO TO THE ER-THE ONE AT ** IF POSSIBLE. THE NURSE IS BETTER THAN THE DOCTOR! ** IS THE PLACE THAT IS GETTING US APPOINTMENTS WITH SPECIALISTS, NOT THE PCP. WE ARE STILL WAITING FOR SOME SPECIALISTS TO CONTACT US. WHEN WE HAVE THINGS FIGURED OUT, OUR PCP WILL BE CHANGED. HE DOES NOT CARE - EVEN SHUT THE DOOR IN MY FACE AND LEFT US IN THE ROOM WAITING AND ACTED LIKE HE WAS GETTING US PAPERS. Q28) IF SOME OTHER ADULT WAS IN THE ROOM WITH ME! I AM THE MOM!; Q29) IF ANOTHER ADULT WAS WITH ME. ESPECIALLY MALE!
8-10	Very good	5-8	CCC Sample	OUR GRANDCHILD HAS AUTISM LEVEL 3. HE IS 8 YEARS OLD. HE DOES NOT TALK, IS NOT POTTY TRAINED, AND SEES A PSYCHIATRIST.

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
	Very good	13-18	CCC Sample	OUR LOCAL DHS OFFICE ISN'T READILY AVAILABLE TO ANSWER QUESTIONS OR CONCERNS BY PHONE ABOUT MEDICAID/ARKIDS. THEY DO NOT ANSWER THE PHONE, AND WHEN THEY DO, IT IS AUTOMATED AND SENDS YOU TO A VOICEMAIL; A PHONE CALL IS NEVER RETURNED. IN PERSON, THEY CANNOT ANSWER QUESTIONS OR CONCERNS REGARDING RENEWALS. SEVERAL YEARS IN A ROW, MY CHILDREN'S ARKIDS COVERAGE HAS BEEN INACTIVE DUE TO FORMS THAT WERE SUPPOSED TO BE SENT IN THE MAIL NEVER ARRIVING. NO MESSAGES ON ACCESS ARKANSAS TO LOOK FOR THEM EITHER. MY CHILDREN HAD TO GO WITHOUT MEDICAL CARE BECAUSE I WASN'T AWARE IT NEEDED TO BE RENEWED. I WAS TOLD FORMS WERE SENT, BUT THEY NEVER CAME. IT WASN'T AN ISOLATED INCIDENT; IT HAPPENED SEVERAL YEARS IN A ROW.
8-10	Very good	9-12	General Sample	OVERALL, WE HAVE BEEN HAPPY WITH OUR CHILD'S HEALTH PLAN. SHE DOES SEE A DENTIST AND EYE DOCTOR (ALTHOUGH NOT IN THE LAST SIX MONTHS). WE ARE CURRENTLY IN BETWEEN PRIMARY CARE DOCTORS AS HER DOCTOR QUIT ACCEPTING MEDICAID IN NOVEMBER 2025. SHE TAKES NO MEDICATION AND DOES NOT UTILIZE SPECIAL SERVICES. WE HOPE TO FIND A NEW PCP SOON. THANKS!
8-10	Very good	9-12	CCC Sample	OVERALL, WE'RE PRETTY HAPPY WITH THE ARKIDS B PLAN. OUR SON HAS ASTHMA, WHICH REQUIRES INHALERS TO CONTROL, AND THEY ARE EXPENSIVE AND OFTEN NOT COVERED BY OTHER INSURANCE. THE ARKIDS B PLAN MAKES IT SO WE CAN EASILY AFFORD HIS INHALERS AND OTHER HEALTH CARE HE NEEDS. IF HE DOES NOT HAVE HIS INHALERS, HE CAN'T RUN OR PLAY LIKE THE OTHER KIDS AND HAS TO SIT OUT OF ACTIVITIES, AND HE CAN'T GET THE EXERCISE HE NEEDS. WE ARE SO GLAD THIS PLAN IS AVAILABLE AND HOPE IT CONTINUES!

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
0-4	Excellent	5-8	General Sample	PHONE LINES ARE TERRIBLE FOR MEDICAID. YOU SHOULD GET MORE CALL TECHNICIANS.
8-10	Excellent	5-8	General Sample	Q19) SCHOOL; Q26) 2 OR 3 NOT SURE; Q42) SPEECH AT SCHOOL
8-10	Very good		CCC Sample	Q22) SETUP VIA THE SCHOOL AND HER PRIMARY; Q40) SHE HAS STANDING THERAPY EVERY 2 WEEKS; Q54) MY CHILD HAS ADD AND OCD DIAGNOSES AND IS STARTING THERAPY ABOUT BODY IMAGE ISSUES; Q78) WOULD LOVE THIS.
8-10	Good	0-4	CCC Sample	Q26) WE ALWAYS END UP HAVING TO SEE THE NURSE PRACTITIONER UNDER OUR DOCTOR; Q32) ALWAYS SEE NP.
8-10	Excellent	5-8	General Sample	Q34) HAD TO HAVE X-RAYS AT THE HOSPITAL.
8-10	Very good	0-4	CCC Sample	Q37 (ALLERGIES) SINUSES AND INHALER FOR WHEEZING AND NORMALLY FROM ALLERGIES. WE ALSO GOT THE LETTER THAT WE ARE MOVING BACK TO ARKIDS A 4/1/26. Q1 ASKED ABOUT ARKIDS B, WE ARE ON ARKIDS B UNTIL MARCH 31ST, 2026.
5-7	Fair	5-8	CCC Sample	Q4) HOSPITAL
8-10	Excellent		General Sample	Q49) SO GRATEFUL TRULY!
5-7	Good	5-8	CCC Sample	Q60) HEART DEFECTS
8-10	Very good	5-8	CCC Sample	Q77) ALL OF THEM DOESN'T MATTER, WHICHEVER ONE IS OK
		9-12	General Sample	Q9) ARKANSAS HAS ONE OF THE WORST HEALTHCARE IN THE USA: 99TH PLACE; Q10) HAVE TO BEG; Q18) TOOK ALMOST 5 MONTHS; Q19) I PERSONALLY HAD TO CALL; Q41) HAD TO CALL MANY TIMES; Q46) WORST CUSTOMER SERVICE
8-10	Very good	0-4	General Sample	Q9) THEY SOMETIMES DON'T LISTEN TO CONCERNS AND JUST GIVE HER A PLACEBO TO MAKE IT SEEM LIKE THEY ARE DOING THEIR JOB; Q49) BASED ON HOW THEY TREAT/LOOK AT US FOR HAVING MEDICAID; Q50) I DIDN'T KNOW MEDICAID COVERED HER MEDS; Q52) PAID OOP FOR HER ANEMIC MEDS AND SICKNESS MEDS

Level of Satisfaction with Health Plan	Overall Health Status	Child's Age Group	Population	Comments
8-10	Excellent	0-4	CCC Sample	QUESTION 52 I AM READING IT AS, THEY PAID FOR IT, SO THAT'S WHY I ANSWERED NO.
8-10	Fair	13-18	CCC Sample	SHE HAS EPILEPSY AND TAKES PRESCRIBED MEDICATION DAILY. SHE IS CURRENTLY SEEING A NEUROLOGIST AND IS GOING TO AN ADOLESCENT CLINIC. SHE HAS ALSO BEEN DIAGNOSED WITH DYSLEXIA.
5-7	Excellent	13-18	General Sample	SWABS FOR COVID, INFLUENZA, AND STREP ARE ALWAYS DECLINED WHEN EOB COMES IN FOLLOWING A DOCTOR VISIT. THE VISIT IS COVERED, BUT NOTHING ELSE SEEMS TO BE.
8-10	Very good	9-12	General Sample	THANK YOU FOR ALL YOU DO FOR FAMILIES LIKE US!!
8-10	Good	13-18	General Sample	THANK YOU FOR ASKING!
8-10	Excellent	0-4	General Sample	THANK YOU FOR EVERYTHING! YOUR HELP IS APPRECIATED MORE THAN YOU KNOW. AS A SINGLE MOTHER, TIMES ARE TOUGH. KNOWING HIS HEALTH IS TAKEN CARE OF IS SO IMPORTANT. THANK YOU!
8-10	Excellent	9-12	General Sample	THANK YOU FOR MY CHILD'S ARKIDS
8-10	Excellent	5-8	General Sample	THANK YOU FOR SHOWING CONCERN FOR MY GRANDSON'S HEALTH.
8-10	Good	9-12	General Sample	THANK YOU FOR YOUR KINDNESS AND RESPECT TO HUMANITY.
8-10	Good	9-12	CCC Sample	THANK YOU VERY MUCH FOR THE SERVICES THAT ** RECEIVES. IT HELPS GREATLY
8-10	Excellent	0-4	CCC Sample	THANK YOU!
	Very good	9-12	General Sample	THANKS TO ARKIDS INSURANCE ** WAS ABLE TO RECEIVE THE HELP SHE NEEDED FOR HER MENTAL HEALTH.
0-4	Fair	9-12	CCC Sample	THE CONCERN ABOUT PAYING CO-PAYS FOR DOCTOR VISITS AND PRESCRIPTIONS IS A BIG CONCERN FOR ME, AS I AM A SINGLE PARENT AND DON'T ALWAYS HAVE THE MONEY FOR MY SON TO GO TO THE DOCTOR WHEN HE REALLY NEEDS TO GO.

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8-10	Good	5-8	CCC Sample	THE MAJOR PART OF ** VISITS AND APPOINTMENTS IS DUE TO A BIRTH DEFECT IN HER FOOT WHICH WAS SURGICALLY FIXED. NOW IN PT TO REGAIN STRENGTH.
5-7	Good	9-12	CCC Sample	THE MAJORITY OF OUR ISSUES WITH MEDICAID COME INTO PLAY WHEN WE NEED AN X-RAY, ADHD MEDS, AND URGENT CARE FOR AN EMERGENCY BECAUSE THEY WANT A REFERRAL BEFORE THEY WILL SEE US AND OUR DOCTOR'S OFFICE IS USUALLY CLOSED RESULTING IN US HAVING TO GO TO THE ER. WE SELF PAY FOR ADHD MEDS WHICH ARE A BIT PRICEY BECAUSE IT REQUIRES PRE-AUTHORIZATION AND STILL GETS DENIED A LOT. WITH X-RAYS, THEY ALWAYS TRY TO MAKE SOMEONE ELSE RESPONSIBLE AND IT BECOMES A HOT MESS.
8-10	Good	0-4	CCC Sample	THE OCCUPATIONAL AND SPEECH THERAPY ARE HELPING MY DAUGHTER TO BE ABLE TO FUNCTION LIKE OTHER KIDS HER AGE. SHE'S NOT SUPER BEHIND BUT DOES NEED HELP. SHE HAS SENSORY ISSUES AND A TONGUE TIE THAT HAVE REQUIRED SOME HELP. THANK YOU.
8-10	Very good	0-4	General Sample	THE ONLY OTHER HEALTH PROVIDER/DOCTOR SHE HAS SEEN IS THE DENTIST.
8-10	Very good	5-8	General Sample	THE THERAPY MY CHILD RECEIVES IS PLAY THERAPY AND HAS FOR MANY YEARS.
8-10	Very good	13-18	CCC Sample	THIS SURVEY MAY BE TOO LONG AND TOO COMPLEX FOR A LARGE PORTION OF GUARDIANS.

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5-7	Good	13-18	CCC Sample	TO WHOM IT MAY CONCERN: WHEN CIRCUMSTANCES CHANGE INCOME-WISE, THERE SHOULD NOT BE A LAPSE IN COVERAGE; THIS CAUSES KIDS TO GO WITHOUT MEDICATION BECAUSE PARENTS/GUARDIANS ARE UNABLE TO PAY CO-PAYS. IT DOES CAUSE CHILDREN THAT RELY ON THE MEDICATION FOR THEIR HEALTH TO HAVE INCREASED DOCTORS VISITS WHICH IS DREADFUL FOR PARENTS TRYING TO MAKE ENDS MEET AS IT IS. THANKS FOR YOUR TIME.
8-10	Very good	13-18	CCC Sample	WE APPRECIATE THE INSURANCE FOR SURE, THANK YOU ARKIDS
8-10	Excellent	5-8	General Sample	WE ARE VERY BLESSED TO BE ABLE TO HAVE THIS INSURANCE FOR OUR CHILDREN. WE HAVE ZERO COMPLAINTS.
8-10	Very good	13-18	General Sample	WE ARE VERY SATISFIED WITH OUR MEDICAL COVERAGE AND VERY THANKFUL FOR HAVING THIS SERVICE. OUR PCP IS FANTASTIC AS WELL AS HIS STAFF AT THE ** CLINIC. ALSO, OUR PHARMACY OF CHOICE, ** PHARMACY, IS TOP NOTCH!
8-10	Very good	13-18	General Sample	WE FEEL SO VERY BLESSED THAT ** HAS ARKIDS B. SHE WAS HAVING SEVERE BACK PAIN DUE TO HER EXTRA LARGE BREAST, AND WE WOULD HAVE NEVER BEEN ABLE TO AFFORD TO HELP HER HAVE THE SURGERY SHE NEEDED IF NOT FOR THE HELP OF ARKIDS B! THANK YOU SO VERY MUCH! ALSO, SHE HAS HAD A RECURRING PAINFUL CYST ON HER TAILBONE THAT HAS REQUIRED ER VISITS TO LASER AND DRAIN, FOLLOWED BY LASER TREATMENTS TO TRY TO PREVENT IT FROM COMING BACK, AND WE ARE SO THANKFUL FOR ARKIDS B FOR HELPING WITH THOSE MEDICAID EXPENSES TOO! YOU GUYS ARE THE BEST! WE ALSO ABSOLUTELY LOVE ** HOSPITAL IN SPRINGDALE! WE ARE SO THANKFUL THEY ARE THERE! THEY HAVE HELPED US SO VERY MUCH WITH ALL 3 OF OUR CHILDREN!

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8-10	Excellent	13-18	General Sample	WE HAVE BEEN VERY THANKFUL FOR THE SERVICES THIS PLAN HAS COVERED. MY DAUGHTER HAD A TORN MENISCUS IN FEB 2025 THAT REQUIRED SURGERY. THIS WOULD HAVE BEEN FINANCIALLY DEVASTATING WITHOUT ASSISTANCE. LIKEWISE, JUST 4 WEEKS AGO SHE HAD THE FLU AND STREP AND WAS LOSING OXYGEN CAPACITY RAPIDLY. SHE NEEDED TO BE TAKEN TO ** HOSPITAL BY AMBULANCE AND RECEIVE BREATHING TREATMENTS. I AM SO THANKFUL THAT THIS PROGRAM WAS ABLE TO ASSIST WITH THAT. PER HER DOCTOR DURING AN EXAM, SHE NEEDS AN EVALUATION FROM AN ENT. WE HAVE BEEN WAITING FOR ALMOST 1 YEAR FOR AN APPOINTMENT. THAT IS PARTIALLY MY FAULT IN CONFUSING THE REFERRAL APPOINTMENT PROCESS, BUT I WOULD SAY THAT ONE OF THE DRAWBACKS OF THE PROGRAM IS SPECIALIST SCHEDULING. THANK YOU!
8-10	Good	13-18	CCC Sample	WE HAVE CHANGED PCP IN THE LAST SIX MONTHS.
8-10	Excellent	0-4	General Sample	WE HAVE LOVED USING ARKIDS B AND HAVE HAD NOTHING BUT GREAT EXPERIENCES!
8-10	Excellent	0-4	CCC Sample	WE HAVE NEVER HAD A PROBLEM BEING SEEN OR GETTING SERVICES WHEN NEEDED. ARKIDS HAS BEEN SUCH A GREAT SUPPORT FOR OUR FAMILY
8-10	Excellent	5-8	CCC Sample	WE LOVE OUR CHILD'S CURRENT DOCTOR **. SHE'S EXCEPTIONAL, BUT IN THE LAST 6 MONTHS, SHE HAS NOT BEEN HIS PCP. WE SWITCHED TO HER RECENTLY, BUT HIS PREVIOUS DOCTOR ** WITH ** VAN BUREN DID NOT PROVIDE GOOD CARE OR EMPATHY NOR DID HER STAFF AT THE OFFICE. WE ARE GLAD TO HAVE FOUND A GOOD DOCTOR NOW THOUGH.
	Excellent	13-18	General Sample	WE NEVER USED IT ENOUGH BUT FOR SINUS MEDICATION.

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0-4	Excellent	9-12	General Sample	WHEN I HAVE NEEDED TO VISIT THE OFFICE FOR PAPERWORK OR OTHER QUESTIONS, THE PERSONNEL HAVE BEEN VERY RUDE. I HAVE CALLED AND GOTTEN DIFFERENT ANSWERS, THEN WHEN I WENT INTO THE OFFICE, THEY SEEMED VERY INDIFFERENT AND UNCONCERNED WITH OUR NEEDS. ALSO, THIS INSURANCE IS RARELY ACCEPTED, AND IT IS NOT AN EASY TASK ALWAYS FINDING DOCTORS TO TAKE IT. THIS IS NOT EVERYONE'S FIRST CHOICE, BUT MOST OF US DO THE BEST WE CAN FOR OUR CHILDREN. IF YOU WANT THIS TO BE A WORTHY SURVEY THEN TRULY CONSIDER CUSTOMER SERVICE AND NEEDS GOING FORWARD. THANK YOU!
8-10	Very good	5-8	General Sample	WHEN I PUT 'YES' TO PERSONAL DOCTOR I ASSUME HIS PRIMARY DOCTOR- WHICH HE DOES HAVE.
8-10	Good	13-18	CCC Sample	WHEN MY CHILD'S GENERIC ADHD MEDS WERE UNAVAILABLE, INSURANCE WOULDN'T PAY FOR A SUBSTITUTION. THIS MEDICINE ISN'T TO BE QUIT RANDOMLY AND CAUSED MAJOR EMOTIONAL AND MENTAL DISTRESS AND PROBLEMS.
8-10	Very good	5-8	General Sample	WHY DO WE HAVE TO PAY A CO-PAY FOR MEDS? WHY DOES THIS INSURANCE NOT PAY FOR SOME TESTING, SUCH AS HEARING TESTING?

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8-10	Excellent	9-12	General Sample	WHY IS URGENT CARE NOT COVERED BY MEDICAID? THIS SAVES MONEY AND TIME FOR PROVIDERS, PATIENTS, AND INSURANCE COMPANIES. CONSIDER MAKING URGENT CARE AVAILABLE WITHOUT A REFERRAL OR PA REQUIREMENT. OFTEN IF URGENT CARE SERVICES ARE NEEDED, IT IS BECAUSE A PCP IS CLOSED AND THE ILLNESS DOESN'T WARRANT AN ER VISIT. STOP WITH THE RED TAPE AND MAKE CARE ACCESSIBLE TO ALL.
8-10	Excellent	9-12	General Sample	YOUR COMPANY IS ONLY CONCERNED ABOUT THE PAST 6 MONTHS AND NOT THE OVERALL EXPERIENCE. MY CHILD'S PERSONAL DOCTOR GAVE US A REFFERAL FOR A THERAPIST AND THAT PROVIDER WAS THE WORST. THE THERAPIST DIDN'T KNOW HOW TO HELP MY DAUGHTER SINCE SHE NEVER DEALT W/ ADHD (INABILITY TO FOCUS) AND WAS USING YOUTUBE FOR AIDS. I COULD'VE DONE THAT AT HOME. WHEN SHE FINALLY DECIDED TO DIG DEEPER INTO THE ISSUE, SHE DID NOT FOLLOW THROUGH. SHE DID NOT GO TO MY DAUGHTER'S SCHOOL AS DISCUSSED AND NO FOLLOW-UP APPOINTMENT WAS EVER MADE. THE THERAPIST REACHED OUT TO ME MONTHS LATER. I BID HER A GREAT DAY B/C HER SERVICES WERE NOT NEEDED!

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