

HEALTH CARE QUALITY AND ACCESSIBILITY SURVEY I



2024 LOS ALAMOS COUNTY HEALTH CARE QUALITY AND ACCESSIBILITY SURVEY: VOLUME I



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Executive Summary

The 2024 Los Alamos County Health Care Quality and Accessibility Survey was conducted by the Los Alamos County Health Council in collaboration with Southwest Planning & Marketing (SWPM) to guide the development of the Los Alamos County Comprehensive Health Plan aimed at enhancing the quality and accessibility of local health services. The survey project assessed healthcare quality, accessibility, and unmet needs, providing an extensive foundation for strategic improvements.

The survey project consisted of two components: a primary survey targeting Los Alamos County residents, and a secondary survey aimed at non-residents who work, play, worship, or otherwise spend time in the county and may access healthcare services there. The survey instruments were developed based on insights gathered by the Health Council in 2023 from initial scoping sessions, interviews, and focus groups involving 200 participants, which included healthcare providers, social service representatives, and community members with lived experience navigating local systems.

The primary resident survey employed a statistically valid sample of 8,500 households. The process involved multiple mailings, including an introductory postcard, a mailed survey (available in English and Spanish), and a reminder postcard. Respondents could also complete the survey online via QR code or link. Ultimately, 1,034 responses were collected, resulting in a 12.2% response rate. The data carries a margin of error of ±3.0% at the 95% confidence level, ensuring a reliable representation of the population. The secondary non-resident survey responses were analyzed separately and are presented in Appendix C to the main report.¹

¹ All survey materials were available in both English and Spanish.

Key Findings: All Respondents Combined (Resident Survey) Health and Insurance Coverage

> Health

Health Ratings: The majority of respondents (58.4%) rated their overall health as "Good," while 26.4% rated their health as "Excellent." However, 15.2% rated their health as "Fair" or "Poor." These individuals are likely to have more unmet healthcare needs, potentially indicating the presence of chronic health conditions that require ongoing management. The findings suggest a generally healthy population, but the 15.2% with lower health ratings reveal opportunities to improve access to preventive and chronic care services for those who need them most.

> Insurance

Insurance Coverage: Nearly all respondents (99.0%) reported having medical insurance, reflecting high coverage levels across the community. However, significant gaps exist in coverage quality and network adequacy.

Insurance Provider Network: 8.7% of respondents reported that their insurance network did not include the providers they needed. This lack of coverage may hinder timely access to specialized or even basic care, resulting in delays and poorer health outcomes.

Treatment Coverage: Additionally, 9.6% noted that their insurance did not cover certain treatments or services, which affected their ability to access necessary healthcare interventions, particularly for specialty care. The coverage gaps were more prevalent among lower-income households, indicating financial barriers to healthcare access that need to be addressed to ensure equitable coverage.

Satisfaction with Healthcare Availability and Quality

General Healthcare

Availability and Quality: Satisfaction with the availability of general healthcare scored 3.1,² with 31.6% of respondents dissatisfied due to provider shortages,

² Unless specified otherwise, all scales range from 1 to 5, with 1 indicating the lowest level of satisfaction or measurement, and 5 indicating the highest level of satisfaction or measurement.

limited clinic hours, and geographic barriers. Many noted challenges in getting timely appointments, highlighting a need for expanded services. The quality of care received a higher score of 3.5, indicating that while access is limited, those who receive care are generally satisfied with the treatment. Expanding accessibility remains a priority to ensure equitable healthcare for all.

> Mental Healthcare

Availability and Quality: Mental healthcare was identified as an area in need of significant improvement. With a mean availability score of 2.5, over half (52.1%) of respondents expressed dissatisfaction, citing long wait times and a shortage of professionals. The quality of services, though rated slightly better at 2.9, also requires attention. Respondents stressed the need for timely and culturally competent care, especially as demand for mental health services has risen post-pandemic. Expanding the mental healthcare workforce and leveraging telehealth are key to addressing these gaps.

Substance Use Disorder Care

Availability and Quality: Substance use disorder care received the lowest satisfaction scores, with a mean rating of 2.4 for availability and 2.6 for quality. Nearly half of respondents were dissatisfied with both access (49.9%) and quality (42.8%) of care, highlighting a critical need for expanded treatment resources, evidence-based care options, and greater community outreach to reduce the stigma associated with seeking treatment.

> Dental Healthcare

Availability and Quality: Dental healthcare services received high satisfaction ratings, with a mean score of 3.8 for availability and 4.1 for quality. A majority of respondents (67.9%) were satisfied with the availability of dental services, and 76.2% were pleased with the quality. Dental services appear to be a strong point in the healthcare system, with access relatively well-distributed throughout the community.

Healthcare Avoidance, Delay and Seeking Care Outside of the County

Healthcare Avoidance and Delay

In the past two years, 34.7% of respondents reported avoiding or delaying general healthcare when it was needed. This avoidance was even higher for

mental healthcare (26.9%) and dental healthcare (22.5%). The primary reasons cited included:

Difficulties Finding Providers: 70.2% of respondents cited challenges in finding providers as a major reason for healthcare avoidance.

Financial Barriers: Cost was a significant factor, with 15.3% reporting that they could not afford the care they needed.

Appointment Availability: An additional 19.1% of respondents indicated that difficulties in securing timely appointments were a barrier to accessing care.

Avoiding healthcare can have long-term negative consequences, such as worsening of conditions and higher treatment costs in the future, underscoring the need to address these barriers.

> Seeking Care Outside the County

A significant proportion of respondents reported seeking healthcare outside of Los Alamos County, with 66.0% traveling for general healthcare services. Specialty care, mental healthcare (20.3%), and dental healthcare (27.4%) were also frequently sought outside the county. The most common reasons for seeking care elsewhere were:

Local Provider Shortages: 72.7% of respondents cited an inability to find a local provider who addressed their needs as the main reason for going elsewhere.

Quality Concerns: Some respondents expressed concerns about the quality of local healthcare providers, leading them to seek higher-quality or more specialized services outside of the county.

Social Service Needs and Economic Factors

Healthcare Accessibility: A notable 88.0% of respondents have used the internet or apps to find healthcare services or schedule appointments, highlighting the significant role digital tools play in enhancing access to healthcare. However, 8.8% of households reported that financial constraints prevented them from pursuing preventive health treatments, suggesting most households can access necessary care despite financial limitations. **Housing Stability:** Housing conditions appear relatively stable. Only 9.8% of respondents reported challenges in accessing affordable housing, and 3.3% struggled to maintain stable housing. Importantly, no respondents had been evicted, and only 0.1% experienced homelessness, suggesting a supportive housing environment, though some affordability issues persist.

Financial Strain: Approximately 9.0% of respondents indicated that household expenses exceeded their income, pointing to financial strain among a minority of households. Additionally, 7.8% reported difficulties accessing affordable food, and 6.5% faced challenges in obtaining affordable legal support. These findings highlight areas where additional support could benefit the community.

Use of Local Social Services: Despite these challenges, only 3.3% of respondents sought assistance from the Los Alamos County Social Services office. This may reflect either a limited need for such services or possible gaps in awareness and access to available resources.

Culturally/Lifestyle Appropriate Care

Demographics: 4.2% of respondents identify as LGBTQAI+, and 5.1% as BIPOC.

Satisfaction with Healthcare Access LGBTQAI+/BIPOC Respondents Combined:

General Healthcare: Mixed satisfaction, with 44.8% dissatisfied (mean: 2.9). Mental Healthcare: Lowest satisfaction, with 56.5% dissatisfied (mean: 2.3). Substance Use Disorder Care: 47.3% dissatisfied (mean: 2.5). Dental Healthcare: Higher satisfaction, with 39.3% very satisfied (mean: 3.3).

Satisfaction with Healthcare Access LGBTQAI Respondents:

General healthcare: 55.5% dissatisfied (mean: 2.8). Mental healthcare: 75% dissatisfied (mean: 2.0). Substance use disorder care: 42.9% dissatisfied (mean: 2.3). Dental healthcare: 75% satisfied (mean: 4.0).

Satisfaction with Healthcare Access BIPOC Respondents:

General healthcare: 40% satisfied, 40% dissatisfied (mean: 3.0). Mental healthcare: 46.7% dissatisfied (mean: 2.5). Substance use disorder care: 50% dissatisfied (mean: 2.6). Dental healthcare: 45% dissatisfied, 40% satisfied (mean: 3.0).

Demographics of Respondents

Household Composition

The average household size was 2.3 people, including 0.6 individuals under 18 and 0.9 individuals aged 65 or older.

> Age

The average age of respondents was 59.3 years, with an age range spanning from 23 to 95 years.

> Employment

Employment status varied, with 40.0% working full-time, 8.1% working part-time, and 46.3% retired.

1.7% were unemployed but seeking work, 3.7% were unemployed and not seeking work, and 0.1% identified as students.

> Income

Household incomes showed a broad distribution:

2.7% earned less than \$25,000, and 6.5% earned between \$25,000 and \$49,999.

18.3% had incomes between \$50,000 and \$99,999, while the largest group, 21.4%, earned between \$100,000 and \$149,999.

Higher income brackets included 17.3% earning \$150,000 to \$199,999, 14.9% earning \$200,000 to \$249,999, and 8.7% earning \$250,000 to \$299,999.

The top earners were 4.4% with incomes between \$300,000 and \$349,999, and 5.8% earning \$350,000 or more.

Median Household Income: \$153,180.

> Ethnicity/Race

9.0% of respondents identified as Spanish, Hispanic, or Latino, while 91.0% did not.

92.4% identified as White.

4.7% identified as Asian, Asian Indian, or Pacific Islander, 4.3% as Other, 1.7% as American Indian or Alaskan Native, and 0.2% as Black or African American.

> Community Identification

4.2% of respondents identified as members of the LGBTQAI+ community, while 95.8% did not.

5.1% identified as part of the Black, Indigenous, and people of color (BIPOC) community, compared to 94.9% who did not.

Key Findings: Children's Healthcare (Resident Survey) Insurance Coverage

Insurance Coverage: Nearly all respondents (99.5%) reported that their child/children had medical insurance, indicating a high level of coverage within the community.

Insurance Provider Network: 91.2% of parents reported having insurance that included the necessary healthcare providers. 7.3% reported that their insurance did not include necessary providers.

Treatment Coverage: 87.1% had coverage for their child/children for the treatments and services needed. 8.9% lacked coverage for some treatments or services. While overall insurance coverage is robust, gaps indicate that some families struggle to access specific care needs for their child/children.

Satisfaction with Healthcare Availability and Quality

General Healthcare

Availability and Quality: 50.0% of respondents expressed satisfaction with the availability of general healthcare services for their child/children, while 62.7% were satisfied with the overall quality of care. The mean satisfaction scores were 3.4 for availability and 3.7 for quality. Although the perception of quality is generally positive, there remains a need for improvement in accessibility to healthcare services.

> Mental Healthcare

Availability and Quality: 53.4% of respondents were dissatisfied with the availability of mental healthcare for their child/children, and 37.2% were

dissatisfied with its quality. The mean satisfaction scores were 2.4 for availability and 2.8 for quality. These results highlight a critical need for expanded access and improvements in the quality of mental healthcare services, particularly for children.

Substance Use Disorder Care

Availability and Quality: Care for substance use disorders also received low satisfaction ratings, with mean scores of 2.5 for availability and 2.7 for quality. There is a pressing need to enhance both access to and the quality of substance use disorder care services for children.

> Dental Healthcare

Availability and Quality: Dental healthcare is a notable strength for children in Los Alamos County, with 72.5% of respondents satisfied with its availability and 78.5% satisfied with the quality. The mean satisfaction scores were 4.0 for availability and 4.2 for quality.

Healthcare Avoidance, Delay and Seeking Care Outside of the County

Healthcare Avoidance and Delay

Thirty five percent (34.5%) of respondents whose children needed mental healthcare reported delaying or avoiding care when their child/children needed it. General and dental healthcare were delayed or avoided at the rates of 21.2% and 11.5%, respectively. Substance use disorder care services were generally accessed, with just 2.5% delaying or avoiding care for their child/children when needed. The most common reason for avoidance was difficulty finding a provider (77.1%), with financial barriers also affecting 10.0% of respondents who could not afford the necessary care. Other barriers included lack of transportation, childcare issues, and long wait times for appointments.

> Seeking Care Outside of the County

Rates of Seeking Care Outside of the County: A significant portion of respondents sought healthcare for their children outside of Los Alamos County, particularly for general healthcare (45.9%), mental healthcare (20.2%), and dental healthcare (18.4%). Substance use disorder care had the lowest rate of external seeking, with only 2.6% of respondents accessing services outside the county.

Reasons for Seeking Care Outside of the County: The primary reason for seeking care outside Los Alamos County was the inability to find a local provider who could address their child's medical needs (81.3%). Other major factors included long wait times to see local providers (30.9%), perceptions of low quality among local providers (30.1%), and difficulties getting appointments (28.5%). Additionally, some respondents cited local providers not accepting new patients (26.0%) or insurance issues (11.4%) as reasons for seeking care elsewhere.

Types of Providers Accessed Outside the County: The most frequently accessed providers outside of the county were specialists (58.7%) such as orthopedics, gastroenterology, neurology, cardiology, and ENT. Pediatric care (33.9%), mental healthcare (30.6%), and dental healthcare (28.9%) were also frequently sought outside the county. Other services accessed included primary care (26.4%), vision care (18.2%), and OB/GYN services (11.6%).

Key Findings: Demographic Analysis (Resident Survey) Age

Older Adults (65+): Older respondents were more likely to rate their health as "Fair" or "Poor" compared to younger adults. Despite this, they expressed higher satisfaction with the quality of general healthcare services (mean score of 3.5). This disparity may indicate that while older adults have greater healthcare needs, they are more accustomed to navigating the healthcare system or have established relationships with providers, resulting in a more favorable view of care quality.

Younger Adults (18-34): Younger adults rated the availability of general healthcare lower, with many expressing dissatisfaction with the ease of access. They were also more likely to avoid or delay seeking mental healthcare due to stigma or challenges in finding appropriate services. This highlights the importance of developing youth-oriented mental health services and reducing barriers to access.

Income

Lower-Income Households: Respondents from lower-income brackets reported significantly poorer health outcomes, with more rating their health as "Fair" or

"Poor." They were also more likely to face gaps in insurance coverage and difficulties accessing services, which contributed to higher rates of healthcare avoidance due to cost. Lower-income respondents also expressed dissatisfaction with the availability and quality of general and mental healthcare services, indicating a need for targeted interventions.

Higher-Income Households: Higher-income respondents were more satisfied with healthcare quality and availability. They were also more likely to seek specialty care outside of the county, indicating that those with greater financial resources have more opportunities to seek high-quality care, even if it requires traveling. These findings underscore the disparity in healthcare access based on economic resources.

Ethnicity and Race

BIPOC Respondents: Black, Indigenous, and people of color (BIPOC) respondents reported significantly lower overall health ratings compared to White respondents. BIPOC respondents also expressed lower satisfaction with healthcare services and were more likely to face gaps in insurance coverage and unmet healthcare needs. These findings highlight systemic barriers to healthcare access and quality that disproportionately affect BIPOC communities.

White Respondents: White respondents rated their overall health more positively and expressed higher satisfaction with both the availability and quality of healthcare services compared to BIPOC respondents. Addressing these disparities is essential for creating an equitable healthcare system.

Gender and LGBTQAI+ Community

Gender Differences: Women reported greater dissatisfaction with mental healthcare availability and quality compared to men, particularly in terms of finding services that met their specific needs. Women were also more likely to delay healthcare services, often due to family obligations or provider shortages.

LGBTQAI+ Community: LGBTQAI+ respondents were more likely to use digital tools to find healthcare services. However, they reported mixed levels of satisfaction with the healthcare services they received, indicating gaps in culturally competent care. Many LGBTQAI+ individuals emphasized the need for

providers who understand their unique healthcare needs, which points to a broader need for inclusive healthcare practices.

Strategic Recommendations (Resident Survey)

This section outlines strategic recommendations based on the survey findings. While the Los Alamos County Health Council will decide which actions to prioritize, many issues lie beyond its purview. Nevertheless, it is essential to include them in this analysis to provide a comprehensive view of the issues to ensure that all stakeholders, including state and federal agencies, healthcare providers, and insurers, understand the full scope of the community's needs.

Expand Healthcare Access and Insurance Coverage

Provider Availability: Increase healthcare provider availability by recruiting more general practitioners, extending clinic hours, and leveraging telehealth services. Expanding access through these measures could help reduce the rate of healthcare avoidance, particularly for mental and general healthcare services.

Comprehensive Insurance Coverage: Collaborate with insurance providers to close gaps in coverage for lower-income and BIPOC households. Ensure that plans cover a broad range of treatments and include essential specialists within their networks. Providing subsidies or expanding Medicaid coverage could also help reduce financial barriers to healthcare.

Enhance Specialty and Mental Healthcare Services

Mental Health Services: Address gaps in mental healthcare by recruiting additional providers, promoting telehealth options, and reducing stigma through public awareness campaigns. Given the high dissatisfaction rates, targeted interventions for younger adults and women are crucial for improving mental healthcare accessibility. Providing culturally competent care will also be key to ensuring equitable outcomes for all populations.

Specialty Care Expansion: Improve access to specialty services through partnerships with larger healthcare systems. Hiring visiting specialists and developing regional centers of excellence could help reduce the need for residents to travel outside of Los Alamos County for specialized care. These efforts are particularly important given the high percentage of respondents seeking specialty care elsewhere.

Strengthen Community Support

Digital Literacy and Internet Access: Increase digital literacy programs and internet access to support healthcare needs.

Financial: Provide targeted subsidies for preventive care and expand affordable housing options to address affordability. Enhance access to food assistance and financial counseling.

Improve Culturally and Lifestyle-Appropriate Care

Cultural Competency Training: Provide ongoing cultural competency training for healthcare providers to improve satisfaction among LGBTQAI+ and BIPOC respondents. These trainings will help ensure that healthcare services are inclusive, culturally sensitive, and responsive to the diverse needs of the community, ultimately improving healthcare experiences and outcomes.

Strengthen Pediatric and Family Healthcare Services

Children's Healthcare: Address the dissatisfaction expressed by parents regarding pediatric mental healthcare availability and quality. Increasing the number of pediatric mental health professionals and offering expanded telehealth options can help improve access. Providing family-centered care models can also help support larger households facing logistical challenges in managing healthcare for multiple children.

Community Outreach and Public Awareness

Outreach Programs: Develop outreach initiatives to increase awareness of available healthcare services, social programs, and financial assistance. The survey revealed that many residents were unaware of resources offered by the Los Alamos County Social Services office. Improved communication through local channels, social media, and partnerships with community organizations can help ensure that residents take advantage of these services.

Community Partnerships: Partner with local organizations, schools, and employers to promote preventive healthcare services, mental health awareness, and reduce the stigma of substance use treatment. Communitybased programs can help ensure that services reach those who need them most, particularly vulnerable and underserved populations.

Conclusion

The 2024 Los Alamos County Health Care Quality and Accessibility Survey provides key insights into the current healthcare landscape, revealing strengths in general and dental healthcare while highlighting significant gaps in mental healthcare, specialty services, and social support. The survey findings underscore the importance of a collaborative, community-wide approach to addressing disparities and improving healthcare accessibility for all residents. By implementing the strategic recommendations outlined in this report, Los Alamos County can make significant progress toward a more equitable healthcare system, ensuring better health outcomes for all community members.

Introduction

The 2024 Los Alamos County Health Care Quality and Accessibility Survey, commissioned by the Los Alamos County Health Council, was conducted to provide insights into the development of the Los Alamos County Comprehensive Health Plan. The survey was designed to assess the current state of healthcare services in the county and serve as a foundation for identifying gaps in healthcare access, understanding respondents' experiences, and formulating strategies to improve the quality and accessibility of health services in Los Alamos County.

Methodology

The 2024 Los Alamos County Health Care Quality and Accessibility Survey was developed and administered by Southwest Planning & Marketing (SWPM) in collaboration with the Los Alamos County Health Council and the Los Alamos County Social Services Division.

Two surveys were conducted: the primary survey targeted residents of Los Alamos County, while the secondary survey gathered insights from non-residents who work, play, worship, or otherwise spend significant time in the county and may access healthcare services there. The analysis in the main part of this report focuses on the results from the primary residents' survey, while the data from the secondary non-residents survey is presented in a question-and-answer format in Appendix C.

Survey Design and Development

The survey instruments were collaboratively developed by SWPM and Los Alamos County staff and members of the Los Alamos County Health Council, keeping them concise to ensure ease of use for respondents and to accommodate the space limitations of printed materials. The survey topics were determined based on insights gathered during the initial scoping phase for the Los Alamos County Comprehensive Health Plan conducted by the Health Council in 2023, which included interviews and focus groups involving approximately 200 participants. These participants included health and social service providers, as well as community members with firsthand experience navigating the healthcare system in Los Alamos County. The survey design incorporated best practices in public health survey methodology to ensure reliability and validity in the data collected.

Primary Methodology (Resident Survey) 3

The primary survey was focused on collecting responses from residents of Los Alamos County through a statistically valid random sampling process. The sampling frame was created using the Department of Public Utilities mailing list, covering a significant portion of the households in the county. Additional individuals, such as non-family members in room-for-rent or roommate arrangements, were included through a purchased mailing list to enhance the sample coverage. These two lists were combined, deduplicated, and then 8,500 addresses were randomly selected to receive the survey by mail in the following sequence:

Week 1: An introductory postcard was sent to introduce the survey (including a link and QR code to the survey).

Week 2: A paper survey, available in both English and Spanish, was mailed along with a cover letter and a Business Reply Mail envelope (including a link and QR code to the survey).

Week 3: A reminder postcard was sent to encourage participation (including a link and QR code to the survey).

Participants could complete the survey either by mailing back the paper survey using the postage-paid envelope or by completing an online version of the survey accessible via a link or QR code. Data entry was conducted for paper surveys received by mail. All mailed materials were professionally designed and distributed via a third-party mailing service.

Primary Methodology Response and Data Analysis (Resident Survey)

Over one thousand responses (1,034) were received for the primary survey, yielding a 12.2% response rate. Given the number of responses and the population of Los Alamos County, the results are accurate within a margin of $\pm 3.0\%$ at the 95% confidence level, ensuring a reliable representation of the population.

³ All survey materials were available in both English and Spanish.

Upon completing data collection, SWPM processed and analyzed the responses. A written report was prepared, including an executive summary, introduction, methodology, data analysis, strategic recommendations, and categorized as well as verbatim responses to open-ended questions, where applicable.

Secondary Methodology (Non-Resident Survey) 4

As previously mentioned, a secondary survey was conducted to gather input from non-residents who work, play, worship, or otherwise spend significant time in Los Alamos County and may use healthcare services there. The survey questions were similar to those in the primary survey. This secondary survey was made available online via a separate link and QR code and promoted through Los Alamos County's existing outreach channels, including the website, social media, and public service announcements.

Secondary Methodology Response and Data Analysis (Non-Resident Survey)

A total of 49 responses were received for the secondary survey. After data collection was completed, SWPM processed and analyzed the responses. The secondary survey results were analyzed separately from the primary survey sample and are presented in question-and-answer format in Appendix C of this report.

⁴ All survey materials were available in both English and Spanish.

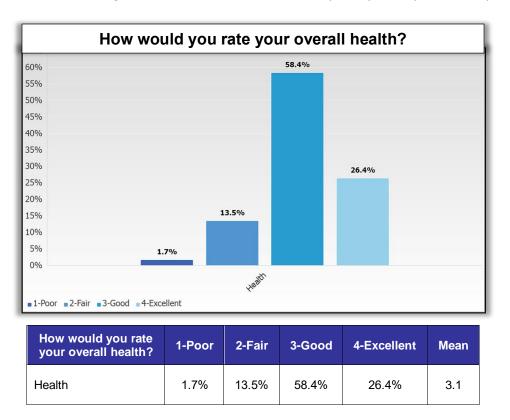
Findings – All Respondents Combined (Resident Survey)

This section provides a summary of the overall findings from the resident survey results, combining responses from all participants.

Health and Insurance Coverage

Health Ratings

When asked about their overall health, a majority of respondents (58.4%) rated their health as "Good," while 26.4% rated it as "Excellent." Only a small fraction of respondents, about 1.7%, rated their health as "Poor," and 13.5% rated it as "Fair." The mean health rating was 3.1 on a scale from 1 (Poor) to 4 (Excellent).



The self-reported health status indicates a generally healthy population but also reveals disparities that require targeted healthcare interventions. Specifically, those who rated their health as "Poor" or "Fair" may benefit from community health initiatives focusing on preventive care, chronic disease management, and health education.

Insurance Coverage

Nearly all respondents (99.0%) reported having medical insurance, indicating high levels of coverage within the community.

Do you have medical insurance?	20%	40%	60%	80%	100%	Frequency
Yes						99.0%
No						1.0%

Among those insured, 88.3% confirmed that their insurance network includes the providers they need, while 86.3% affirmed that their insurance covers the necessary treatments and services. However, a small segment (8.7%) noted that their insurance does not include the providers they need, and 9.6% mentioned gaps in treatment coverage.

Does your medical insurance?	Yes	No	Don't Know/ Not Sure
Network include the providers you need?	88.3%	8.7%	3.0%
Cover the treatments and services you need?	86.3%	9.6%	4.1%

The presence of gaps in insurance coverage suggests that certain healthcare needs are not being met by existing plans. This may include specialist services, mental health support, or specific treatment options. Addressing these gaps through enhanced insurance options or supplemental community-based programs could significantly improve healthcare outcomes.

Satisfaction with Healthcare Availability and Quality

Respondents revealed varying levels of satisfaction with healthcare services in Los Alamos County. General healthcare received moderate satisfaction for availability (3.1) and higher satisfaction for quality (3.5), indicating that while access is adequate, the quality is viewed more favorably. In contrast, mental healthcare shows significant dissatisfaction, with low ratings for both availability (2.5) and quality (2.9), highlighting a need for improvement. Substance use disorder care has the lowest satisfaction scores, with availability at 2.4 and quality at 2.6, signaling a critical gap in these services. Dental healthcare stands out with high satisfaction, receiving a score of 3.8 for availability and 4.1 for quality. Overall, while general and dental healthcare are rated positively, the county should prioritize enhancing mental health and substance use disorder care.

In the following sections, the terms "satisfied/satisfaction" refer to the combined percentages of respondents who selected "5 - Very Satisfied" and "4" (which is generally considered equivalent to "4 - Satisfied"). Similarly, the terms "dissatisfied/dissatisfaction" refer to the combined percentages of respondents who selected "1 - Very Dissatisfied" and "2" (which is generally considered equivalent to "2 - Dissatisfied").

General Healthcare

How satisfied are you with the following in Los Alamos County?	1-Very Dissatisfied	2	3	4	5-Very Satisfied	Mean
Availability of general healthcare	12.3%	19.3%	28.1%	25.4%	14.9%	3.1
Quality of general healthcare	7.0%	11.2%	24.7%	35.3%	21.8%	3.5

Availability: The availability of general healthcare services in Los Alamos County received mixed reviews, with a mean satisfaction rating of 3.1 out of 5. Thirty-two percent (31.6%) of respondents were dissatisfied with the availability of general healthcare services, while 40.3% were satisfied. The moderate satisfaction levels suggest that there are gaps in access to general healthcare that need to be addressed to ensure that respondents can obtain timely medical care when needed.

The dissatisfaction with availability may be linked to provider shortages, limited clinic hours, or geographical barriers within the county. Addressing these issues through strategic placement of clinics, extending clinic hours, and improving transportation options could enhance access to care.

Quality: The quality of general healthcare services fared better, with a mean satisfaction score of 3.5. This indicates that while accessibility might be a challenge, those who do receive care are generally satisfied with the quality. The relatively high satisfaction with quality suggests that the healthcare professionals and services available are well-regarded, but improvements are needed to expand access.

To maintain and enhance the quality of general healthcare, continuous training for healthcare providers, implementation of patient-centered care practices, and quality assurance programs could be beneficial. High-quality care must be coupled with improved accessibility to ensure equitable health outcomes.

Mental Healthcare

How satisfied are you with the following in Los Alamos County?	1-Very Dissatisfied	2	3	4	5-Very Satisfied	Mean
Availability of mental healthcare	23.1%	29.0%	28.5%	12.9%	6.5%	2.5
Quality of mental healthcare	15.0%	19.8%	35.7%	19.4%	10.0%	2.9

Availability: The availability of mental healthcare services is a significant concern, as reflected by a low mean satisfaction score of 2.5. Notably, 52.1% of respondents expressed dissatisfaction with the availability of mental health services. This highlights a substantial gap in mental healthcare infrastructure, pointing to the need for more mental health professionals and facilities to meet the community's needs.

Common barriers may include a shortage of mental health professionals, stigma associated with seeking mental health services, and lack of awareness about available resources. Expanding telehealth options and community outreach programs could help mitigate these challenges.

Quality: The quality of mental healthcare services also received a low rating, with an average score of 2.9, and 34.8% expressing dissatisfaction with the quality of care.

The dissatisfaction with both the availability and quality of mental health services indicates that this is a critical area requiring intervention. Addressing these gaps will be crucial for improving the overall well-being of respondents, particularly those experiencing mental health challenges. Enhancing the quality of mental healthcare can involve offering specialized training for mental health providers, incorporating evidence-based treatment protocols, and providing culturally competent care. Community partnerships with mental health organizations could also enhance service quality and outreach.

Substance Use Disorders Care

How satisfied are you with the following in Los Alamos County?	1-Very Dissatisfied	2	3	4	5-Very Satisfied	Mean
Availability of care for substance use disorders	25.1%	24.8%	36.5%	7.5%	6.1%	2.4
Quality of care for substance use disorders	21.1%	21.7%	41.7%	9.2%	6.2%	2.6

Availability: The availability of care for substance use disorders in Los Alamos County receives notably low satisfaction scores, with nearly half of respondents (49.9%) expressing dissatisfaction. A significant portion of the population (36.5%) remains neutral, and only a small fraction (13.6%) is satisfied with the availability of such care. The low mean score of 2.4 underscores the need for substantial improvements in access to care for substance use disorders.

Quality: The quality of care for substance use disorders shows similarly low levels of satisfaction, with 42.8% of respondents dissatisfied. A large proportion (41.7%) remains neutral, while only 15.4% are satisfied with the quality of care. The mean score of 2.6 further suggests that the quality of care, like availability, is a critical area that needs significant attention to better meet the needs of the community.

Notably, the stark contrast between healthcare for substance use disorders and other forms of care highlights a gap in service provision for substance use disorders treatment compared to other health services.

Dental Healthcare

How satisfied are you with the following in Los Alamos County?	1-Very Dissatisfied	2	3	4	5-Very Satisfied	Mean
Availability of dental healthcare	6.1%	8.3%	17.7%	33.1%	34.8%	3.8
Quality of dental healthcare	3.5%	4.9%	15.4%	32.7%	43.5%	4.1

Availability: The availability of dental healthcare services in Los Alamos County receives favorable ratings, with 67.9% of respondents expressing satisfaction. Only 14.4% reported dissatisfaction, and 17.7% remained neutral. The mean score of 3.8 indicates that dental healthcare is seen as relatively accessible, and

the majority of respondents are pleased with the availability of dental care in the county.

Quality: The quality of dental healthcare is even more positively regarded, with 76.2% of respondents satisfied and only 8.4% dissatisfied. A smaller percentage of respondents (15.4%) remain neutral, reflecting a higher overall level of contentment with the quality of dental services. The mean score of 4.1 further emphasizes that dental healthcare quality is highly valued, indicating strong performance in this area.

The favorable ratings for dental healthcare indicate a strength in the local healthcare system. Sustaining this level of care will require continued investment in dental health facilities, provider recruitment, and public dental health initiatives.

Healthcare Avoidance or Delay

Rates of Avoidance or Delay

In the past two years, 34.7% of respondents reported avoiding or delaying general healthcare when they needed it. The avoidance rate was also high for mental healthcare (19.3%) and dental healthcare (19.6%). These data point to barriers that prevent respondents from accessing timely care across different healthcare domains.

In the past two years, have you avoided or delayed receiving any of the following when you needed it?	Yes	No	Didn't Need It
General healthcare	34.7%	62.7%	2.7%
Mental healthcare	19.3%	19.8%	60.9%
Care for substance use disorders	1.1%	10.2%	88.8%
Dental healthcare	19.6%	76.4%	4.0%

When recalculating the data to include only individuals who required the services (excluding those in the "Didn't Need It" category), the avoidance rates increase. The avoidance rate for general healthcare rises to 35.2%, for mental healthcare to 26.9%, and for dental healthcare to 22.5%.

In the past two years, have you avoided or delayed receiving any of the following when you needed it?	Yes	No
General healthcare	35.2%	64.8%
Mental healthcare	26.9%	73.1%
Care for substance use disorders	8.7%	91.3%
Dental healthcare	22.5%	77.5%

Avoiding or delaying healthcare can lead to exacerbation of medical conditions, increased healthcare costs, and poorer overall health outcomes. Addressing the reasons behind healthcare avoidance is crucial for improving the population's health status.

Reasons for Avoidance or Delay

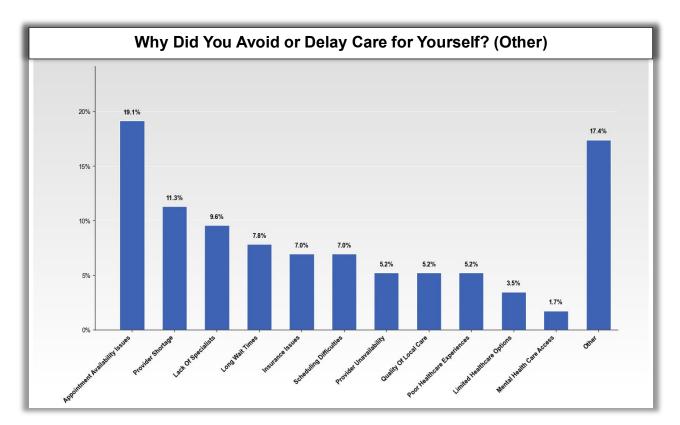
The most common reason cited for avoiding or delaying care was difficulty finding a provider, which was reported by 70.2% of respondents. This reflects a shortage of healthcare professionals or challenges in accessing available providers. Other significant reasons include financial barriers, with 15.3% of respondents stating they could not afford care, and inability to get an appointment with their primary care provider to get a referral, affecting 19.1% of respondents. These barriers suggest a need for policy interventions aimed at improving provider availability, reducing costs, and enhancing appointment scheduling processes. Public education campaigns about financial assistance programs could also increase awareness and utilization of available resources.

Why did you avoid or delay care?	20%	ó	40%	60%	6 ε	80%	100%	Frequency
Lack of transportation								4.5%
Couldn't afford it								15.3%
Lack of childcare								3.8%
Couldn't get off work								6.7%
Couldn't find a provider for what I needed	•							70.2%
Couldn't find culturally/lifestyle appropriate care								5.7%
Language barrier								0.2%
Social stigma								3.3%
Not able to physically access doctor's office								1.7%
Don't know what I need/how to find care								9.3%
Technology barriers								2.4%
Need referral from primary care provider but don't have one								8.8%
Need referral from primary care provider but can't get an appointment								19.1%
Other:								29.1%

2024 Los Alamos County Health Care Quality and Accessibility Survey: Volume I

The data in the chart below was based on open-ended responses to the "other" option in the question, "Why did you avoid or delay care for yourself?" Responses were categorized to create the chart (the full verbatim responses can be found in Volume II - Appendix E: Verbatim Responses to Open-Ended Questions (Resident Survey)). The most frequently mentioned reason for avoiding or delaying care was appointment availability issues, cited by 19.1% of respondents. Provider shortages were the second most common reason, affecting 11.3% of individuals. Lack of specialists (9.6%), long wait times (7.8%), insurance issues (7.0%), scheduling difficulties (7.0%), and provider unavailability (7.0%) were also significant factors contributing to delayed care.

Other respondents noted challenges with the quality of local care (5.2%), poor healthcare experiences (5.2%), and limited healthcare options (5.2%). A smaller percentage (3.5%) mentioned mental healthcare access, and 1.7% cited other unspecified reasons. Overall, these factors reflect a range of logistical and systemic barriers that prevented timely healthcare access.



Seeking Care Outside Los Alamos County

Rates of Seeking Care Outside of the County

A significant portion of the respondents (66.0%) sought general healthcare services outside Los Alamos County; additionally, 27.4% sought dental healthcare and 20.3% sought mental healthcare outside of the county.

In the past two years, have you sought care outside of Los Alamos County for any of the following?	Yes	No
General healthcare	66.0%	34.0%
Mental healthcare	20.3%	79.7%
Care for substance use disorders	1.8%	98.2%
Dental healthcare	27.4%	72.6%

The need to travel outside the county for healthcare services can disproportionately affect low-income respondents and those without reliable transportation. This can exacerbate health disparities and limit access to necessary care. Solutions such as mobile healthcare units, expanding provider capacity, and enhancing telehealth services could help address these gaps.

Reasons for Seeking Care Outside of the County

The most common reason respondents sought care outside of the county, reported by 72.7% of respondents, was an inability to find a local provider to address their medical needs. Other significant reasons included long wait times to see a local provider (42.5%), difficulty in getting appointments with local providers (41.0%), and local providers not accepting patients. Additionally, 30.1% reported that the quality of local providers was low, and 14.5% cited issues with providers not accepting their insurance. Concerns about confidentiality (6.6%), stigma (3.4%), and cultural or language differences (1.8%) were less frequently mentioned.

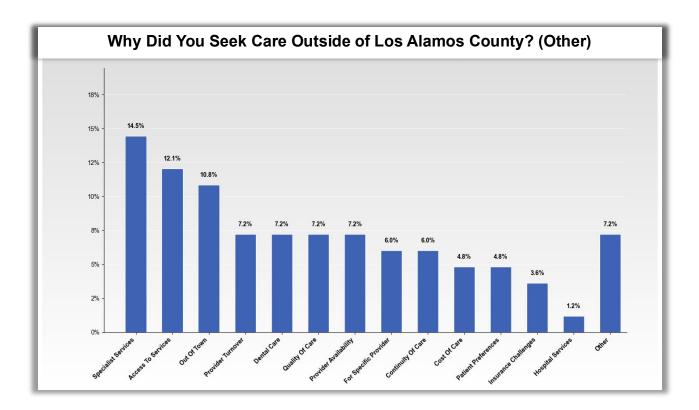
2024 Los Alamos County Health Care Quality and Accessibility Survey: Volume I

Why did you seek care outside of Los Alamos County?	20%	40)%	60%	80%	100%	Frequency
Couldn't find local provider that addressed my medical need(s)	<u>.</u>			<u>.</u>			72.7%
Worried about confidentiality around accessing certain services on the Hill							6.6%
Worried about stigma of accessing certain services on the Hill							3.4%
Couldn't get an appointment with local provider							41.0%
Couldn't find local provider that accepts my insurance							14.5%
Quality of local providers is low							30.1%
Wait time to see local provider is too long							42.5%
Local provider I needed wasn't accepting patients							32.7%
Couldn't find local provider that understood my cultural/language/lifestyle differences							1.8%
Other:							12.4%

The data in the chart on the next page originated from open-ended responses to the "other" option in the question, "Why did you seek care outside of Los Alamos County for yourself?" Responses were categorized to create the chart (the full verbatim responses can be found in Volume II - Appendix E: Verbatim Responses to Open-Ended Questions (Resident Survey)). The most cited reason for seeking care outside the county was the need for specialist services, noted by 14.5% of respondents. Access to services (12.1%) and traveling out of town (10.8%) were also significant factors. Other notable reasons included provider turnover, dental care, quality of care, provider availability, and seeking a specific provider, each cited by 7.2% of respondents.

Additionally, 6.0% of respondents indicated continuity of care and the cost of care as reasons for seeking services elsewhere. Patient preferences and insurance challenges were each noted by 4.8%, while hospital services were mentioned by 1.2%. Finally, 7.2% of respondents mentioned other reasons. These responses suggest a variety of logistical and service-related barriers to accessing healthcare within Los Alamos County, prompting respondents to seek care elsewhere.





Types of Providers Accessed Outside of the County

The services most frequently accessed outside of the county by respondents were specialty care (62.6%), followed by dental healthcare (30.9%), OB/GYN (27.5%), and primary care (26.2%). Other notable categories of providers accessed outside of the county included vision care (19.7%) and mental care (18.3%). Lower frequencies were seen for hearing care (10.3%), pediatric care (6.0%), and geriatric care (3.6%). Care for substance use disorders was accessed the least, at only 1.0%.

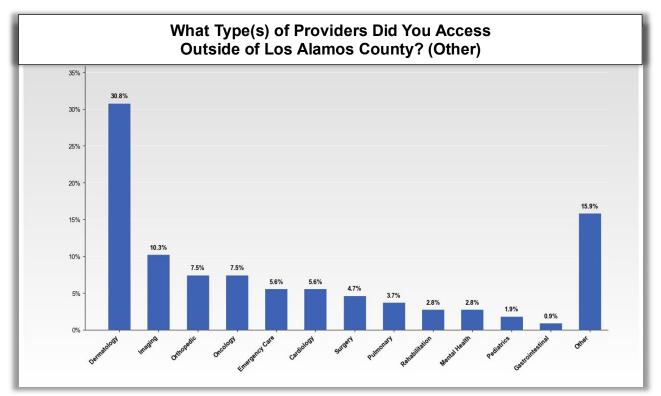
What type(s) of providers did you access outside of Los Alamos County?	20%	4	0%	60%	80%	100%	Frequency
Primary care							26.2%
Mental care							18.3%
Care for substance use disorders	·						1.0%
Dental healthcare							30.9%
Pediatric							6.0%
Geriatric							3.6%
OB/GYN							27.5%
Vision							19.7%
Hearing							10.3%
Specialty care (Ortho, GI, Neurology, Cardiology, ENT)							62.6%
Other:							19.2%

The data indicates that respondents are primarily traveling outside of Los Alamos County for specialized medical services, suggesting limited local access to specialty care. Expanding these services within the county could greatly enhance healthcare accessibility and reduce the need for respondents to travel. Strategies to improve local specialty care might include partnerships with larger healthcare systems, hiring visiting specialists, or creating regional centers of excellence. Investing in specialty care infrastructure would provide significant benefits, particularly for respondents with chronic or complex health conditions.

2024 Los Alamos County Health Care Quality and Accessibility Survey: Volume I

The data presented in the chart below was derived from open-ended responses to the "other" option in the question, "What type(s) of providers did you access outside of Los Alamos County?" Responses were categorized to create the chart (the full verbatim responses can be found in Volume II - Appendix E: Verbatim Responses to Open-Ended Questions (Resident Survey)). Dermatology was the most frequently accessed service outside the county, mentioned by 30.8% of respondents. Imaging services were accessed by 10.3%, while orthopedic and oncology services were each cited by 7.5%. Emergency care (5.6%), cardiology (5.6%), and surgery (4.7%) were also notable types of providers accessed.

Smaller percentages of respondents sought care for pulmonary issues (3.7%), rehabilitation (2.8%), mental health (2.8%), pediatrics (1.9%), and gastrointestinal care (0.9%). Additionally, 15.9% of respondents mentioned other types of providers. These results suggest that a variety of specialized medical services were sought outside of Los Alamos County, likely due to limited availability within the local area.



Children's Healthcare

Respondents who identified as parents or guardians of children under the age of 18 (22.6% of the total respondents) were asked a series of questions regarding healthcare services for children in Los Alamos County.

Insurance Coverage for Children

Nearly all respondents (99.5%) reported that their child/children had medical insurance, indicating high levels of coverage within the community.

Does your child/children have medical insurance?	20%	40%	60%	80%	100%	Frequency
Yes						99.5%
No						0.5%

The data indicates that most respondents (91.2%) have medical insurance for their child/children that includes the necessary providers, and 87.1% have insurance that covers the treatments and services they need. However, a small portion of respondents (7.3%) face limitations in provider networks, and 8.9% do not have coverage for certain treatments or services. These findings suggest that while most families have adequate coverage, a minority may encounter gaps in provider access and treatment coverage, which could present challenges in obtaining necessary care for their children.

Does your child's/children's medical insurance?	Yes	No	Don't Know/ Not Sure
Network include the providers you need?	91.2%	7.3%	1.5%
Cover the treatments and services you need?	87.1%	8.9%	4.0%

Satisfaction with Healthcare Availability and Quality for Children

Respondents revealed varying levels of satisfaction with healthcare services for children in Los Alamos County. The data indicates that respondents are generally satisfied with the availability and quality of general healthcare (mean scores of 3.4 and 3.7) and particularly dental healthcare (mean scores of 4.0 and 4.2). However, there is significant dissatisfaction with both the availability and quality of mental healthcare (mean scores of 2.4 and 2.8) and care for

substance use disorders (mean scores of 2.5 and 2.7), suggesting a need for improvements in these areas to better support children's healthcare needs.

In the following sections, the terms "satisfied/satisfaction" refer to the combined percentages of respondents who selected "5 - Very Satisfied" and "4" (which is generally considered equivalent to "4 - Satisfied"). Similarly, the terms "dissatisfied/dissatisfaction" refer to the combined percentages of respondents who selected "1 - Very Dissatisfied" and "2" (which is generally considered equivalent to "2 - Dissatisfied").

> General Healthcare

How satisfied are you with the following for children in Los Alamos County?	1-Very Dissatisfied	2	3	4	5-Very Satisfied	Mean
Availability of general healthcare	10.0%	16.4%	23.6%	26.4%	23.6%	3.4
Quality of general healthcare	6.4%	10.0%	20.9%	31.8%	30.9%	3.7

Availability: The data on the availability of general healthcare for children shows a balanced view of satisfaction and dissatisfaction, with 26.4% of respondents dissatisfied and 50.0% of respondents satisfied. The remaining 23.6% fall in the neutral category, with a mean satisfaction score of 3.4. This suggests that while half of the respondents are generally pleased with the availability of healthcare, over a quarter are not, indicating room for improvement in ensuring more accessible services.

Quality: Satisfaction with the quality of general healthcare is notably higher than availability, with only 16.4% of respondents dissatisfied and 62.7% of respondents satisfied. The remaining 20.9% rate the quality as neutral, resulting in a mean score of 3.7. These figures indicate that a clear majority of respondents feel positively about the quality of general healthcare for children, with fewer concerns compared to availability.

Mental Healthcare

How satisfied are you with the following for children in Los Alamos County?	1-Very Dissatisfied	2	3	4	5-Very Satisfied	Mean
Availability of mental healthcare	34.1%	19.3%	25.0%	12.5%	9.1%	2.4
Quality of mental healthcare	20.9%	16.3%	36.0%	14.0%	12.8%	2.8

Availability: The data shows significant dissatisfaction with the availability of mental healthcare for children in Los Alamos County, resulting in a mean rating of 2.4. A total of 53.4% of respondents expressed dissatisfaction with the availability of these services. On the other hand, 21.6% of respondents were satisfied with the availability of mental healthcare. This leaves a substantial portion of the community feeling that access to mental healthcare services for children is inadequate, with more than half of respondents dissatisfied.

Quality: The quality of mental healthcare for children also receives low satisfaction ratings, resulting in a mean rating of 2.8. A combined 37.2% of respondents are dissatisfied with the quality of care. Satisfaction levels are somewhat higher than availability, with a combined 26.8% of respondents expressing satisfaction. However, the largest group of respondents (36.0%) rated the quality as a 3, indicating that many feel the quality is average but not exceptional. Overall, while there is slightly more satisfaction with the quality than availability, a significant portion of the population remains dissatisfied with the mental healthcare services for children in Los Alamos County.

Substance Use Disorders Care

How satisfied are you with the following in Los Alamos County?	1-Very Dissatisfied	2	3	4	5-Very Satisfied	Mean
Availability of care for substance use disorders	27.8%	18.1%	40.3%	8.3%	5.6%	2.5
Quality of care for substance use disorders	21.4%	14.3%	47.1%	11.4%	5.7%	2.7

Availability: The data shows significant dissatisfaction with the availability of care for substance use disorders in Los Alamos County. A combined 45.9% of respondents were dissatisfied. In contrast, only 13.9% of respondents were satisfied. The mean score is 2.5, indicating that access to care for substance use

disorders is a major concern for nearly half of the respondents, with a small portion expressing satisfaction. The high neutral score (40.3% choosing 3) suggests a substantial number of respondents feel neutral or uncertain about the availability of these services.

Quality: Similarly, dissatisfaction with the quality of care for substance use disorders is high, with 35.7% of respondents expressing dissatisfaction. Only 17.1% of respondents are satisfied. The mean score of 2.7 reflects the generally low perception of service quality, though a substantial 47.1% of respondents rated the quality as a 3, indicating a neutral or undecided stance. The data suggests that while most people are either dissatisfied or neutral, there is a clear need for improvements in both the quality and availability of care for substance use disorders in Los Alamos County.

Dental Healthcare

How satisfied are you with the following in Los Alamos County?	1-Very Dissatisfied	2	3	4	5-Very Satisfied	Mean
Availability of dental healthcare	5.5%	10.1%	11.9%	24.8%	47.7%	4.0
Quality of dental healthcare	2.8%	5.6%	13.1%	23.4%	55.1%	4.2

Availability: The data shows a generally high level of satisfaction with the availability of dental healthcare for children, with 72.5% of respondents satisfied with availability, while 15.6% are dissatisfied. The remaining 11.9% of respondents are neutral, selecting 3. The mean satisfaction score is 4.0, reflecting a positive perception overall, with the majority of respondents finding dental healthcare availability adequate for their children's needs.

Quality: Satisfaction with the quality of dental healthcare for children is even higher than for availability. A combined 78.5% of respondents are satisfied with the quality, while only 7.8% express dissatisfaction. The remaining 13.1% rated the quality as neutral (3). The mean score for quality is 4.2, indicating strong overall satisfaction, with a clear majority of respondents viewing the quality of dental healthcare services for children in Los Alamos County very favorably.

Healthcare Avoidance or Delay for Children

Rates of Avoidance or Delay

General and dental healthcare for children were more readily accessed, with fewer reports of avoidance or delay. Mental healthcare had a significant portion of respondents indicating their children didn't need it (46.6%), but among those who did, a notable proportion (18.4%) experienced delays or avoidance. Substance use disorder care had the lowest need overall, with only 2.5% reporting avoidance or delay.

In the past two years, have you avoided or delayed receiving any of the following for your child/children when they needed it?	Yes	No	Didn't Need It
General healthcare	20.4%	75.8%	3.8%
Mental healthcare	18.4%	35.0%	46.6%
Care for substance use disorders	2.5%	30.2%	67.3%
Dental healthcare	10.5%	80.5%	9.0%

When recalculating the data to include only children who required the services (excluding those in the "Didn't Need It" category), the avoidance rates increase. The avoidance rate for general healthcare rises to 21.2%, for mental healthcare to 34.5%, and for dental healthcare to 11.5%.

In the past two years, have you avoided or delayed receiving any of the following when you needed it?	Yes	No
General healthcare	21.2%	78.8%
Mental healthcare	34.5%	65.5%
Care for substance use disorders	7.6%	92.4%
Dental healthcare	11.5%	88.5%

Reasons for Avoidance or Delay

The most common reason cited for avoiding or delaying care for their child/children was difficulty finding a provider, which was reported by 77.1% of respondents. This reflects a shortage of healthcare professionals or challenges in accessing available providers. The other significant reason was financial barriers, with 10.0% of respondents stating they could not afford healthcare for their child/children.

Why did you avoid or delay care for your child/children?	20%	40%	60%	80%	100%	Frequency
Lack of transportation						1.4%
Couldn't afford it						10.0%
Lack of childcare						8.6%
Couldn't get off work						5.7%
Couldn't find a provider for what my child/children needed						77.1%
Couldn't find culturally/lifestyle appropriate care				·		1.4%
Social stigma						2.9%
Not able to physically access doctor's office						1.4%
Don't know what they need/how to find care						2.9%
Need referral from primary care provider but don't have one						2.9%
Need referral from primary care provider but can't get an appointment						2.9%
Other:						32.9%

These barriers highlight the need for policy interventions to enhance provider availability, lower costs, and expand financial support for healthcare access. Increasing public awareness through education campaigns about existing financial assistance programs could also help boost the utilization of available resources. The data in the table to the right presents the open-ended responses to the "other" option in the question, "Why did you avoid or delay care for your child/children?"⁵ Several key themes emerged, including long wait times for appointments and limited availability of local providers, with many citing that only two doctors were available in town, one of whom was nearing retirement. Some respondents expressed dissatisfaction with the quality of care, particularly at the Children's Clinic, which was described as discriminatory based on religion and race. Other barriers included poor experiences in the emergency room, local doctors not accepting certain insurance plans, and general frustration with the lack of specialists and timely appointments. Additionally, one respondent mentioned avoiding a particular provider (NorthStar) entirely, preferring to go untreated. These issues reflect significant challenges in accessing pediatric care within the local healthcare system.

Why did you avoid or delay care for your child/children? (Other)

Only 2 doctors in town. Children's Clinic is awful and discriminates based on religion and race. The other is old and may retire soon.

Wait for local provider was extremely long

Waiting list too long

Poor care from ER

Couldn't get an appointment.

For a certain time, local doctors did not accept our insurance

Wait time was too long for local provider

Couldn't get into PCP to be seen

Will not use NorthStar. Better to go untreated.

Lack of appointment availability

lack of doctors and specialists

Provider was far away

Child x-ray for broken bones

No appointments available

Takes too long to be seen

⁵ Note: The comments were not categorized due to an insufficient number of data points.

Seeking Care Outside Los Alamos County for Children

Rates of Seeking Care Outside of the County

A significant portion of the respondents (45.9%) sought general healthcare services outside Los Alamos County for their child/children; additionally, 20.2% sought mental healthcare and 18.4% sought dental healthcare outside of the county.

In the past two years, have you sought care outside of Los Alamos County for any of the following for your child/children?	Yes	No
General healthcare	45.9%	54.1%
Mental healthcare	20.2%	79.8%
Care for substance use disorders	2.6%	97.4%
Dental healthcare	18.4%	81.6%

> Reasons for Seeking Care Outside of the County

The most common reason respondents sought care outside of the county for their child/children, reported by 81.3% of respondents, was an inability to find a local provider to address their medical needs. Other significant reasons included long wait times to see a local provider (30.9%), perceptions of low quality among local providers (30.1%), and difficulty in getting appointments with local providers (28.5%). Additionally, 26.0% reported that the local provider they needed was not accepting patients, and 11.4% cited issues with providers not accepting their child/children's insurance. Concerns about confidentiality (4.9%), stigma (3.3%), and cultural or language differences (0.8%) were less frequently mentioned.

Why did you seek care outside of Los Alamos County for your child/children?	20%	40)%	60%	80%	100%	Frequency
Couldn't find local provider that addressed their medical need(s)							81.3%
Worried about confidentiality around accessing certain services on the Hill							4.9%
Worried about stigma of accessing certain services on the Hill							3.3%
Couldn't get an appointment with local provider							28.5%
Couldn't find local provider that accepts their insurance							11.4%
Quality of local providers is low							30.1%
Wait time to see local provider is too long							30.9%
Local provider wasn't accepting patients							26.0%
Couldn't find local provider that understood their cultural/language/lifestyle differences							0.8%
Other:							11.4%

The data in the table below page presents the open-ended responses to the "other" option in the question, "Why did you seek care outside of Los Alamos County for your child/children?"⁶

Why did you seek care outside of Los Alamos County for your child/children? (Other)
Better care for less money.
Subspecialty need
Wanted a second opinion. Not sure if the treatment is working
local providers do not work on Saturday
Same as before, no one was accepting Molina insurance when we moved here, so we've just stayed with their dr and dentist in SF even though we have BCBS now
We were out of town
Providers don't exist here

> Types of Providers Accessed Outside of the County

The providers most frequently accessed outside of the county by respondents for their child/children were specialty care services such as orthopedics, gastroenterology, neurology, cardiology, and ENT, utilized by 58.7% of respondents. Pediatric care follows at 33.9%, while dental healthcare and

⁶ Note: The comments were not categorized due to an insufficient number of data points.

mental care were accessed by 28.9% and 30.6% of respondents, respectively. Primary care was accessed by 26.4%, with vision services used by 18.2%, and OB/GYN services by 11.6%. Care for hearing concerns and substance use disorders were less commonly accessed, with 8.3% and 4.1%, respectively.

What type(s) of providers did you access outside of Los Alamos County for your child/children?	20%	40	1%	60%	80	%	100%	Frequency
Primary care								26.4%
Mental care								30.6%
Care for substance use disorders								4.1%
Dental healthcare								28.9%
Pediatric								33.9%
OB/GYN								11.6%
Vision								18.2%
Hearing								8.3%
Specialty care (Ortho, GI, Neurology, Cardiology, ENT)								58.7%
Other:								7.4%

The data indicates that respondents are primarily traveling outside of Los Alamos County for their children for specialized medical services, suggesting limited local access to specialty care. Expanding these services within the county could greatly enhance healthcare accessibility and reduce the need for respondents to travel. Strategies to improve local specialty care might include partnerships with larger healthcare systems, hiring visiting specialists, or creating regional centers of excellence. Investing in specialty care infrastructure would provide significant benefits, particularly for respondents with chronic or complex health conditions.

The data in the table to the right presents the openended responses to the "other" option in the question, "What type(s) of providers did you access outside of Los Alamos County for your child/children?"

Household Social and Economic Factors

Respondents were asked about a variety of social and economic factors that may have impacted their households over the past two years. A significant 88.0%

of respondents have used the internet or apps to find healthcare services or make appointments, indicating that digital tools are playing a critical role in improving healthcare accessibility. Nine percent (8.8%) of households reported being unable to pursue preventive health treatments due to financial constraints, suggesting that most households are not significantly hindered from accessing necessary healthcare.

Housing stability appears to be strong, with 9.8% of respondents experiencing difficulty accessing affordable housing and 3.3% struggling to maintain stable housing. Notably, none of the respondents had been evicted, and only 0.1% had experienced homelessness, indicating a relatively stable housing environment overall, though some individuals still face affordability issues. Additionally, 9.0% of respondents reported that their household expenses exceeded their income, reflecting financial strain in a small portion of the community.

Access to affordable food and legal support was a challenge for 7.8% and 6.5% of households, respectively, indicating the need for additional support in these areas. Despite this, just 3.3% of respondents sought help from the Los Alamos County Social Services office, which could suggest limited need or lack of awareness and access to available resources.⁷

What type(s) of providers
did you access outside of
Los Alamos County for
your child/children? (Other)ERPharmacyGICertain vaccines are
unavailable in los Alamos for
kidsDermatologyChild x-ray for broken bonesNeuropsychologist

⁷ In a related question, respondents were asked about unmet social service needs within their households. However, only 70 respondents (6.8% of all participants) provided answers, resulting in data that is not statistically significant, so no conclusions can be drawn. Among this small group, the most common need cited was assistance with applications or renewals for federal or state support programs, such as Medicaid, SNAP, and WIC, reported by 44.3% of respondents. Additionally, 37.1% needed help with referrals to physical or behavioral health providers, 22.9% required job-seeking services, 20.0% sought utilities assistance, and 14.3% indicated a need for housing services, including Section 8 vouchers and eviction support.

In the past two years, have you or your household:	Yes	No
Used the internet or apps to find healthcare services or make appointments?	88.0%	12.0%
Had economic challenges that prevented you from pursuing preventive health treatments?	8.8%	91.2%
Had challenges accessing affordable housing?	9.8%	90.2%
Had difficulty maintaining stable housing?	3.3%	96.7%
Been evicted from your primary residence?	0.0%	100.0%
Been homeless?	0.1%	99.9%
Had challenges with basic living expenses exceeding your household's income?	9.0%	91.0%
Had challenges accessing affordable food?	7.8%	92.2%
Had challenges accessing affordable legal support services?	6.5%	93.5%
Sought help from the Los Alamos County Social Services office?	3.3%	96.7%

Culturally/Lifestyle Appropriate Care

To assess the availability of culturally/lifestyle appropriate care in the county, respondents were asked if they identified as a member of the LBGTQAI+ and/or Black, Indigenous, and people of color (BIPOC) communities. The data shows that 4.2% of respondents identify as members of the LGBTQAI+ community, while 5.1% identify as part of the Black, Indigenous, and people of color (BIPOC) community.

Do you identify as a member of the	Yes	No
LGBTQAI+ community?	4.2%	95.8%
Black, Indigenous, and people of color (BIPOC) community?	5.1%	94.9%

In the following sections, the terms "satisfied/satisfaction" refer to the combined percentages of respondents who selected "5 - Very Satisfied" and "4" (which is generally considered equivalent to "4 - Satisfied"). Similarly, the terms "dissatisfied/dissatisfaction" refer to the combined percentages of respondents who selected "1 - Very Dissatisfied" and "2" (which is generally considered equivalent to "2 - Dissatisfied").

When asked about their level of satisfaction with access to culturally/lifestyle appropriate care in Los Alamos County, members of the LGBTQAI+ and BIPOC communities combined gave mixed reviews. For general healthcare, satisfaction is relatively low, with 44.8% of respondents being dissatisfied, leading to a mean satisfaction score of 2.9. Mental healthcare shows the highest dissatisfaction, with 56.5% of respondents expressing dissatisfaction and a mean score of 2.3. Care for substance use disorders also reflects significant

dissatisfaction, with 47.3% dissatisfied and a mean score of 2.5. Dental healthcare is the area where respondents are most satisfied, with 39.3% very satisfied, leading to a mean score of 3.3.

How satisfied are you with access to culturally/lifestyle appropriate care in Los Alamos County in the following areas? (LGBTQAI+ AND BIPOC RESPONDENTS COMBINED)	1-Very Dissatisfied	2	3	4	5-Very Satisfied	Mean
General healthcare	27.6%	17.2%	13.8%	20.7%	20.7%	2.9
Mental healthcare	39.1%	17.4%	26.1%	4.3%	13.0%	2.3
Care for substance use disorders	36.8%	10.5%	36.8%	0.0%	15.8%	2.5
Dental healthcare	21.4%	17.9%	10.7%	10.7%	39.3%	3.3

When looking at LGBTQAI+ respondents specifically, satisfaction with general healthcare is mixed, with 55.5% dissatisfied and 44.4% satisfied, resulting in a mean satisfaction score of 2.8. Mental healthcare had a lower satisfaction level, with 75.0% dissatisfied, and a mean score of 2.0. For substance use disorder care, 42.9% were dissatisfied, while 57.1% rated it neutrally, with a mean of 2.3. Dental healthcare had the highest satisfaction, with 75.0% satisfied and a mean score of 4.0, showing a more positive outlook in this area.

How satisfied are you with access to culturally/lifestyle appropriate care in Los Alamos County in the following areas? (LGBTQAI+ RESPONDENTS ONLY)	1-Very Dissatisfied	2	3	4	5-Very Satisfied	Mean
General healthcare	33.3%	22.2%	0.0%	22.2%	22.2%	2.8
Mental healthcare	37.5%	37.5%	12.5%	12.5%	0.0%	2.0
Care for substance use disorders	28.6%	14.3%	57.1%	0.0%	0.0%	2.3
Dental healthcare	0.0%	25.0%	0.0%	25.0%	50.0%	4.0

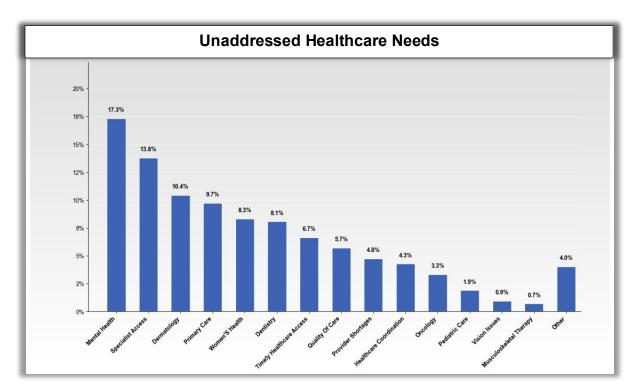
BIPOC respondents in Los Alamos County also expressed varying levels of dissatisfaction across different healthcare areas. For general healthcare, 40.0% of respondents were dissatisfied and 40.0% were satisfied, resulting in an average satisfaction score of 3.0. Mental healthcare had the highest level of dissatisfaction, with 46.7% of respondents dissatisfied and a mean score of 2.5. Care for substance use disorders also showed significant dissatisfaction, with 50.0% dissatisfied and a mean of 2.6. Dental healthcare had a more balanced

distribution, with 45.0% dissatisfied and 40.0% very satisfied, yielding a mean of 3.0. Overall, the data suggests room for improvement in making healthcare services more culturally appropriate for BIPOC individuals in Los Alamos County.

How satisfied are you with access to culturally/lifestyle appropriate care in Los Alamos County in the following areas? (BIPOC RESPONDENTS ONLY)	1-Very Dissatisfied	2	3	4	5-Very Satisfied	Mean
General healthcare	25.0%	15.0%	20.0%	20.0%	20.0%	3.0
Mental healthcare	40.0%	6.7%	33.3%	0.0%	20.0%	2.5
Care for substance use disorders	41.7%	8.3%	25.0%	0.0%	25.0%	2.6
Dental healthcare	30.0%	15.0%	15.0%	5.0%	35.0%	3.0

Unaddressed Healthcare Needs

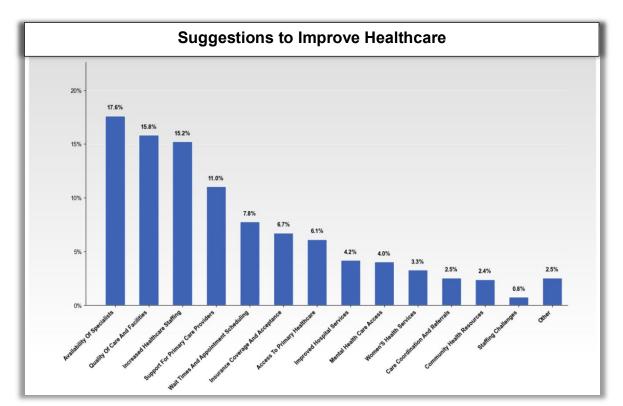
The data presented in the chart below originated from the open-ended question, "What UNADDRESSED healthcare (general, mental, substance use disorder, dental) needs do you or any member(s) of your household have right now?" Responses were categorized to create this visual representation. Mental health emerged as the most frequently mentioned unaddressed need, affecting 17.3% of respondents. Access to specialists was another prominent concern, reported by 13.8%. Dermatology (10.4%) and primary care (9.7%) were also significant areas of unmet healthcare needs. Other categories included women's health (8.3%), dentistry (8.1%), and timely healthcare access (6.7%). Issues related to quality of care (5.7%) and provider shortages (4.8%) were also cited. Smaller percentages mentioned healthcare coordination (4.3%), oncology (3.3%), pediatric care (1.9%), vision issues (0.9%), and musculoskeletal therapy (0.7%). Additionally, 4.0% of respondents indicated other unaddressed healthcare needs. Full verbatim responses to this question can be found in Volume II - Appendix E: Verbatim Responses to Open-Ended Questions (Resident Survey).



Suggestions to Improve Healthcare in Los Alamos County

The data presented in the chart below was derived from the open-ended question, "What ONE thing would improve healthcare in Los Alamos County?" Respondents' answers were categorized to create the chart, with the full verbatim responses available in Volume II - Appendix E: Verbatim Responses to Open-Ended Questions (Resident Survey). The most frequently mentioned improvement was increasing the availability of specialists, cited by 17.6% of respondents. Quality of care and facilities (15.8%) and increased healthcare staffing (15.2%) were also significant concerns. Support for primary care providers was noted by 11% of respondents, while 7.8% highlighted the need for better management of wait times and appointment scheduling.

Other areas of improvement included insurance coverage and acceptance (6.7%), access to primary healthcare (6.1%), and improved hospital services (4.2%). Mental healthcare access (4%), women's health services (3.3%), and better care coordination and referrals (2.5%) were also mentioned. Fewer respondents identified community health resources (2.4%) and staffing challenges (0.8%) as key areas for improvement. Lastly, 2.5% of respondents mentioned other suggestions.



Demographics of Respondents

Household Makeup

On average, respondent households consisted of 2.3 people, with 0.6 under the age of 18 and 0.9 aged 65 or older.

How many people	Mean
Live in your household?	2.3
In your household are under the age of 18?	0.6
In your household are aged 65 or older?	0.9

Age

The average age of respondents was 59.3 years, with ages ranging from 23 to 95.

Employment

Forty percent (40.0%) of respondents worked full-time for pay, while 8.1% worked part-time. A small portion of the population was unemployed, with 1.7% actively seeking work and 3.7% not looking for paid work. Only 0.1% of respondents were students, while the largest group, 46.3%, was retired.

What is your employment status?	20%	40%	60%	80%	100%	Frequency
Work full-time for pay						40.0%
Work part-time for pay						8.1%
Unemployed, looking for paid work						1.7%
Unemployed, not looking for paid work						3.7%
Student						0.1%
Retired						46.3%

Income

The data showed that household incomes varied across a wide range. A small percentage (2.7%) earned less than \$25,000, while 6.5% had incomes between \$25,000 and \$49,999. A larger portion, 18.3%, earned between \$50,000 and \$99,999. The majority of households fell into higher income brackets, with 21.4% earning between \$100,000 and \$149,999, and 17.3% earning between \$150,000 and \$199,999. Additionally, 14.9% of households reported incomes between \$200,000 and \$249,999. Higher income ranges included 8.7% earning \$250,000 to \$299,999, 4.4% earning \$300,000 to \$349,999, and 5.8% earning \$350,000 or more. In summary, the data shows a skew towards higher-income brackets, with the median income falling around \$153,180, placing many households within the \$100,000 to \$199,999 range, indicative of a relatively affluent population distribution.

Income	20%	40%	60%	80%	100%	Frequency
Less than \$25,000						2.7%
\$25,000 to \$49,999						6.5%
\$50,000 to \$99,999						18.3%
\$100,000 to \$149,999						21.4%
\$150,000 to \$199,999						17.3%
\$200,000 to \$249,999						14.9%
\$250,000 to \$299,999						8.7%
\$300,000 to \$349,999						4.4%
\$350,000 or more						5.8%

Median Income = \$153,180

Ethnicity/Race

Nine percent (9.0%) of respondents identified as Spanish, Hispanic, or Latino, while 91.0% did not. Regarding race, most respondents (92.4%) identified as White, followed by 4.7% identifying as Asian, Asian Indian, or Pacific Islander, 4.3% as Other, 1.7% as American Indian or Alaskan Native, and 0.2% as Black or African American.

Are you Spanish, Hispanic or Latino?	20%	40%	60%	80%	100%	Frequency
Yes						9.0%
No						91.0%

What is your race?	20%	40%	60%	80%	100%	Frequency
American Indian or Alaskan Native						1.7%
Asian, Asian Indian, or Pacific Islander						4.7%
Black or African American						0.2%
White						92.4%
Other						4.3%

Key Insights and Strategic Recommendations – All Respondents Combined (Resident Survey)

This section summarizes key insights from the survey results and outlines potential strategies to address the identified issues. While these are recommendations aimed at addressing the gaps revealed, identifying and prioritizing which strategies are feasible for implementation will be at the discretion of the Los Alamos County Health Council. Some actions, such as addressing specialist shortages and improving insurance coverage, will require collaboration with state and federal agencies, healthcare providers, and insurers, which may be beyond the Council's direct control. Nonetheless, these insights offer a valuable roadmap for prioritizing local healthcare initiatives and advocating for broader systemic changes to improve health outcomes and access for county residents.

Healthcare Access, Availability, and Insurance Coverage Key Insights

Most respondents rate their health positively, with 58.4% rating it as "Good" and 26.4% as "Excellent." However, 15.2% rate their health as "Fair" or "Poor," highlighting the need for improved healthcare access.

While nearly all respondents (99%) have insurance, 8.7% report that their provider network lacks necessary services, and 9.6% mention gaps in treatment coverage.

General healthcare availability received moderate satisfaction (mean score: 3.1), while quality was rated higher at 3.5. Still, 31.6% are dissatisfied with availability, indicating issues with access due to provider shortages or limited clinic hours.

Recommendations

Expand provider availability by increasing recruitment, extending clinic hours, and leveraging telehealth services to address accessibility issues. Improving these areas could reduce the healthcare avoidance rate, which is currently at 34.7%, largely due to difficulties finding providers. Ensure more comprehensive insurance coverage, particularly for specialist services, by working with insurers to close existing gaps and improve access to necessary treatments.

Specialty and Mental Healthcare

Key Insights

Mental healthcare services are notably lacking, with low satisfaction for both availability (mean score: 2.5) and quality (2.9). Over half of respondents (52.1%) expressed dissatisfaction with access.

Substance use disorder care is similarly underprovided, with ratings of 2.4 for availability and 2.6 for quality.

A significant portion of respondents (62.6%) sought specialty care outside the county, indicating a local shortage of specialists.

Recommendations

Address gaps in mental healthcare by recruiting more providers and expanding services through telehealth. Given the high dissatisfaction rates, especially for mental healthcare, these steps are critical to improving access.

Enhance specialty care availability through partnerships with larger healthcare systems and incentives to attract visiting specialists, reducing the need for residents to travel outside the county for care.

Unaddressed Healthcare Needs

Key Insights

Mental health services are the most frequently cited unaddressed need (17.3%), followed by access to specialists (13.8%) and dermatology (10.4%).

Recommendations

Expand local mental health services, potentially through telehealth, and focus on recruiting specialists in dermatology and primary care to address the significant unmet demand.

Suggestions to Improve Healthcare

Key Insights

The most commonly suggested improvements include increasing specialist availability (17.6%), improving the quality of care and facilities (15.8%), and increasing healthcare staffing (15.2%).

Recommendations

Focus recruitment efforts on bringing more specialists to the area and improving clinic infrastructure to enhance primary care. Streamlining appointment scheduling and addressing long wait times would also help meet the needs identified by respondents.

Household Social and Economic Factors

Key Insights

Digital tools are essential for healthcare access, with 88% of respondents using them. Only 8.8% report financial barriers to preventive care, and housing remains stable overall, though 9.8% still face affordability issues. Financial strain affects some, with 9% spending beyond their income and 7.8% facing food insecurity. Social services utilization is low, with only 3.3% seeking county support, suggesting possible awareness gaps.

Recommendations

Increase digital literacy programs and internet access to support healthcare needs. Provide targeted subsidies for preventive care and expand affordable housing options to address affordability. Enhance access to food assistance and financial counseling and raise awareness of county social services to improve resource utilization.

Culturally and Lifestyle-Appropriate Care

Key Insights

Respondents from LGBTQAI+ and BIPOC communities report mixed satisfaction with culturally appropriate care, particularly low for mental healthcare (mean score: 2.3). General healthcare also received relatively low ratings (2.9).

Recommendations

Provide ongoing cultural competency training for healthcare providers to improve satisfaction with care for diverse communities. These trainings can enhance trust and improve the healthcare experience for underserved groups.

Findings – Demographic Analysis (Resident Survey)⁸

Along with analyzing the data for all respondents combined, additional analysis was conducted by demographic categories. This section summarizes how factors like age, income, gender, and race influence healthcare experiences in Los Alamos County, uncovering disparities in health outcomes, access to services, and satisfaction levels among different demographic groups.

Overall Health Ratings by Demographics

Age Groups: Older respondents were more likely to rate their health as "Fair" or "Poor" compared to younger participants, indicating potential age-related health challenges. Younger respondents, on the other hand, were more likely to rate their health as "Good" or "Excellent."

Income Levels: Respondents from lower-income brackets were more likely to report poorer health compared to those in higher income brackets, suggesting that financial challenges may be linked to worse health outcomes.

Gender: There was no significant difference in health ratings between male and female respondents, indicating that both experienced similar health outcomes on average.

Ethnicity and Race: White respondents were more likely to rate their health as "Good" or "Excellent" compared to respondents from other racial and ethnic groups. Black, Indigenous, and people of color (BIPOC) respondents reported poorer health outcomes, reflecting potential disparities in healthcare access and quality.

Insurance Coverage and Satisfaction by Demographics

Income and Employment: Lower-income households and unemployed respondents reported more gaps in insurance coverage, including difficulty finding providers within their network and services not being covered. This group also expressed lower satisfaction with their insurance coverage.

⁸ The demographic data tables for this analysis, given their extensive content and complexity, were provided to Los Alamos County in digital form.

Household Size: Larger households reported more challenges with accessing covered services, potentially due to the increased complexity of managing healthcare for multiple individuals.

Ethnicity and Race: BIPOC respondents were more likely to report gaps in insurance coverage and expressed lower satisfaction compared to White respondents. This indicates a disparity in access to adequate insurance options.

Satisfaction with Healthcare Availability and Quality by Demographics

General Healthcare

Age: Younger adults (18-34) rated the availability of general healthcare lower compared to older age groups. However, older adults (65+) rated the quality of healthcare higher, potentially due to different expectations or experiences.

Income: Respondents with higher incomes expressed higher satisfaction with both availability and quality of healthcare, highlighting disparities in access to quality healthcare services based on economic status.

Ethnicity and Race: White respondents rated the availability and quality of general healthcare higher compared to BIPOC respondents, indicating disparities in healthcare experiences and satisfaction.

Mental Healthcare

Gender: Female respondents were more likely to rate mental healthcare availability and quality as poor. This may indicate a gap in mental health services that adequately address women's specific needs.

Income: Lower-income respondents were less satisfied with mental healthcare services, which may indicate financial barriers in accessing adequate mental health support.

Ethnicity and Race: BIPOC respondents expressed lower satisfaction with mental healthcare availability and quality compared to White respondents, highlighting disparities in mental health support and services.

Dental Healthcare

Household Size: Respondents from larger households reported greater dissatisfaction with dental healthcare availability. This might be due to logistical difficulties in arranging appointments for multiple family members.

Ethnicity and Race: White respondents reported higher satisfaction with dental healthcare services compared to BIPOC respondents, suggesting disparities in access and service quality.

Healthcare Avoidance or Delay by Demographics

Age: Younger respondents (18-34) were more likely to report avoiding or delaying healthcare, particularly mental healthcare. This might be due to stigma or a lack of understanding about the importance of early intervention.

Income: Those with lower incomes were more likely to avoid healthcare due to financial barriers. Cost was a significant factor in delaying or avoiding healthcare, especially for preventive services.

Gender: Women reported higher rates of delaying dental and general healthcare compared to men. Challenges related to finding a provider, financial constraints, and family obligations were more frequently cited by female respondents.

Ethnicity and Race: BIPOC respondents reported higher rates of avoiding or delaying healthcare compared to White respondents, which may indicate systemic barriers, cultural factors, or mistrust in the healthcare system.

Seeking Care Outside Los Alamos County by Demographics

Income: Respondents in higher income brackets were more likely to seek care outside the county, particularly for specialty care, suggesting that those with greater resources are more willing or able to travel for specialized services.

Employment: Full-time employed respondents reported seeking specialty care outside the county more often, possibly due to their ability to afford out-of-county care options or dissatisfaction with local offerings.

Ethnicity and Race: White respondents were more likely to seek care outside the county compared to BIPOC respondents. This may reflect differences in resource availability or trust in non-local healthcare providers.

Child and Household Health Needs by Demographics

Number of Children: Households with multiple children reported greater dissatisfaction with pediatric mental healthcare services. The availability of services was cited as a major barrier, with many parents unable to find suitable mental health resources for their children.

Ethnicity and Race: BIPOC households were more likely to report needing assistance with social support programs compared to White households, suggesting disparities in socioeconomic stability and access to resources.

Social and Economic Factors by Demographics

Economic Hardship: Respondents with household incomes below \$50,000 were significantly more likely to report economic challenges that prevented them from seeking preventive healthcare. Financial challenges also correlated with higher rates of reported health avoidance.

Employment Status: Retired respondents were less likely to report economic challenges, which may be attributed to stable income from pensions or retirement savings, compared to unemployed or part-time workers who reported higher levels of economic instability.

Ethnicity and Race: BIPOC respondents reported more economic challenges compared to White respondents, which impacted their ability to access healthcare services and preventive treatments.

LGBTQAI+ and BIPOC Communities

Healthcare Access for LGBTQAI+ Community: LGBTQAI+ respondents were more likely to use digital tools, such as internet or apps, to find healthcare services. This reliance on digital healthcare navigation tools highlights the importance of expanding telehealth and online healthcare services tailored for LGBTQAI+ needs. Despite the use of these tools, LGBTQAI+ individuals reported varied levels of satisfaction with the quality of healthcare services, suggesting gaps in inclusive healthcare options.

BIPOC Community Challenges: BIPOC respondents experienced significantly lower satisfaction with healthcare access and availability compared to White respondents. They also reported higher rates of avoiding healthcare services due to economic barriers, mistrust, and difficulty finding culturally competent providers. These findings point to systemic disparities that limit healthcare equity for BIPOC communities.

Strategic Recommendations – Based on Demographic Analysis (Resident Survey)

The data from the demographic analysis points to areas where targeted strategies could help reduce gaps and improve equitable access to care. While the recommendations provided in this section aim to address these challenges, it is important to recognize that not all strategies are within the control of the Los Alamos County Health Council. The implementation of many initiatives will require collaboration with healthcare providers, local government, and other external stakeholders. The Health Council will play a key role in identifying and prioritizing actionable strategies, ensuring that the needs of all residents, especially those most affected by systemic barriers, are addressed.

Health Outcomes and Access to Care

Targeted Outreach for BIPOC and Lower-Income Communities: Develop culturally sensitive outreach programs to improve healthcare access and education for Black, Indigenous, and people of color (BIPOC) and lower-income populations. This can help reduce the disparities in health outcomes, as these groups reported poorer health ratings and higher rates of healthcare avoidance.

Expand Preventive Care Programs: Prioritize preventive healthcare services for older adults, lower-income individuals, and larger households, which are more likely to face health challenges and barriers to accessing care.

Insurance Coverage and Satisfaction

Enhance Access to Comprehensive Insurance Plans: Work with local providers and insurance companies to offer more comprehensive and affordable insurance options, especially for BIPOC respondents and lower-income households who reported gaps in coverage and dissatisfaction with insurance.

Increase Awareness of Available Insurance Resources: Implement educational campaigns to inform underinsured groups, particularly in larger households and lower-income brackets, about available insurance plans and how to better navigate the healthcare system.

General and Mental Healthcare Availability

Expand Mental Health Services: Invest in mental health services tailored to meet the specific needs of women, BIPOC, and lower-income respondents who reported lower satisfaction with mental health care. Increasing mental health providers, particularly in underserved areas, will help address access disparities.

Improve General Healthcare Access for Younger and Lower-Income Adults:

Work to increase the availability of general healthcare services, especially for younger adults and those in lower-income brackets who expressed dissatisfaction with healthcare access.

Specialty and Dental Healthcare

Improve Local Access to Specialty Care: Collaborate with external healthcare systems to bring more specialty services to Los Alamos County, reducing the need for higher-income residents and full-time employees to seek care outside the county.

Address Dental Care Gaps: Provide targeted support for larger households and BIPOC communities who reported dissatisfaction with dental healthcare. Initiatives could include community dental clinics or mobile services to better serve these populations.

Healthcare Avoidance and Delays

Financial Assistance for Healthcare Costs: Expand financial support and subsidy programs to help lower-income individuals and families afford preventive care, addressing the economic barriers that contribute to delayed healthcare.

Improve Accessibility for Women: Focus on reducing barriers for women who are more likely to delay general and dental healthcare. This may involve increasing the availability of affordable childcare and flexible healthcare appointment times to accommodate family obligations.

Families and Children

Increase Pediatric Mental Health Services: Expand access to pediatric mental health services, particularly for households with multiple children, to address the high dissatisfaction with the availability of these services.

Telehealth and Digital Tools

Telehealth Expansion for LGBTQAI+ and Younger Adults: Build on the existing reliance on digital healthcare navigation tools by expanding telehealth services, particularly for the LGBTQAI+ community and younger adults who are more likely to use these resources.

Promote Digital Literacy and Access: Offer programs to enhance digital literacy and access to telehealth services in lower-income and BIPOC communities to ensure equitable use of these resources.

Social and Economic Barriers

Economic Assistance Programs for Healthcare Access: Implement programs to support lower-income and part-time workers facing economic hardships that prevent them from seeking preventive care. These could include sliding-scale healthcare fees or transportation subsidies.

Culturally Competent Healthcare Initiatives: Develop initiatives to train healthcare providers in culturally competent care, particularly for BIPOC respondents, who reported higher rates of healthcare avoidance due to economic and cultural barriers.

Collaboration and Advocacy

Leverage Community Partnerships: Partner with local organizations, healthcare providers, and government agencies to address systemic disparities and improve healthcare equity for all demographic groups.

Advocate for Policy Changes: Advocate for state and federal policy changes to increase funding for healthcare programs and services that cater to underserved communities, including BIPOC and lower-income individuals.

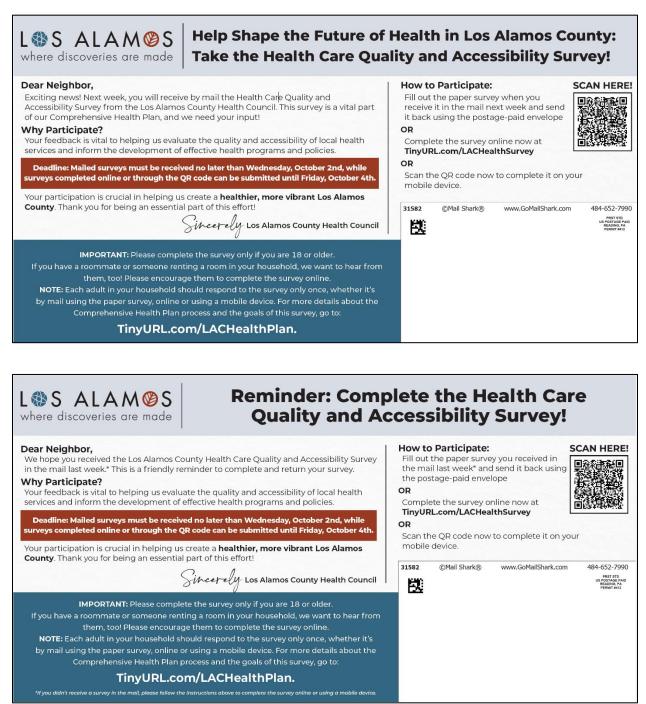
Appendices

Appendix A: Resident Survey Instrument

ease answer questions 1-9 as they pertain s	pecifically t	o you, n	ot other peo	ple in your	family or	household				
1. How would you rate your overall health? (select (>oor	2-Fair	3-Good		ellent				
2. Do you Have Medical Insurance? (select one)	() Yes	() No (SKIP TO Q4)	Networ	k include ti	cal insurance. e providers yo hts and service	u need?			
4. How satisfied are you with the following in Los Alamos County?	1-Very Dissatisfied	2	3	4	5-Very Satisfied	5. In the pa	st two years, have you avoid receiving any of the follo	ded wing Yes	No	Didr
Availability of general healthcare	0	0	0	0	0	when yo	u needed it?		110	Need
Quality of general healthcare	Q	Ó	Ó	Ó	Ō		healthcare healthcare	0	0	
Availability of mental healthcare Quality of mental healthcare		- 8	- 2	0	<u> </u>	-	substance use disorders	ŏ	tŏ	ŏ
Availability of care for substance use disorders	ŏ	Ö	ŏ	ŏ	ŏ	Dental h	ealthcare	0	0	0
Quality of care for substance use disorders	Q	0	0	Q I	Q					
Availability of dental healthcare Quality of dental healthcare	0	0	0	0	0					
Couldn't find a provider for what I needed 7. In the past two years, have you sought care outs	íde ,	() Don't Yes	know what I n	eed/how to	find care		Other:			0.52
of Los Alamos County for any of the following? General healthcare			no							
			1							
		0								
Mental healthcare Care for substance use disorders. Dental healthcare if you answered "yes" to any of QZ, why did you is Couldn't find local provider that addressed Wortied about confidentiality around acces Wortied about stigma of accessing certain is	my medical n sing certain s services on th	eed(s) ervices o			uality of loc alt time to scal provide	al providers is see local prov r I needed wa	ider is too long sn't accepting patients	al/language/lift	estvie di	ferences
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17. If you answered "yes" to any of <u>Q16</u> , why did you seek car	e outside of I	os Alamo	os Countv	for your ch	ild/child	ren? (sele	ct all that an	plv)				
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19. Do you or any members of your household currently n Applications/fenewals for Medicaid, SNAP, WIC, or other the second se						ervices? ng service		at apply)				
Utilities		440	1 (p					naviorial hea	Ith providers			
O Housing services (Section 8 vouchers, eviction service	s)											
20. In the past two years, have you or your household:					Yes	No			y as a membe	er of the	Yes	
Used the Internet or apps to find healthcare services or ma Had economic challenges that prevented you from pursuin			reatments	57	0	8		Al+ commu Indiaenous	and people of	f		3
Had challenges accessing affordable housing?					Ő	Į Ž		3IPOC) com			0	
Had difficulty maintaining stable housing? Been evicted from your primary residence?					00	8						
Been homeless?					ŏ	ŏ						
Had challenges with basic living expenses exceeding your h	nousehold's in	ncome?			Q	0						
Had challenges accessing affordable food? Had challenges accessing affordable legal support services	?				0	8						
Sought help from the Los Alamos County Social Services of					Ő	Ő						
22. If you answered "yes" to any of Q21, how satisfied are	ou with acco	ess to		1-Ve	nv				5-Verv			
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Appendix B: Resident Survey Postcards



Appendix C: Non-Resident Survey Findings

Note: No narrative or analysis was prepared due to the limited sample size of 49 survey responses.

Do you live in Los Alamos County?

Response	20%	40%	60%	80%	100%	Frequency
Yes*						23.4%
No						76.6%

*Branched out of the survey.

What county do you live in?

Response	 20%	40%	60%	% 80%	100%	Frequency
Bernalillo						2.1%
Mora						0.0%
Rio Arriba						57.4%
San Miguel						0.0%
Sandoval						6.4%
Santa Fe						29.8%
Taos						4.3%
Torrance						0.0%
Valencia						0.0%
I live in another county not listed above						0.0%

How would you rate your overall health? (select one)

	1-Poor	2-Fair	3-Good	4-Excellent	Mean
Health	0.0%	18.6%	62.8%	18.6%	3.0

Do you have medical insurance? (select one)

Response	20%	40%	60%	80%	100)%	Frequency	
Yes							95.7%	
No							4.3%	

Does your medical insurance...? (select one option per line)

	Yes	No	Don't Know/Not Sure
Network include the providers you need?	77.3%	9.1%	13.6%
Cover the treatments and services you need?	70.5%	13.6%	15.9%

Do you access general, mental, or dental healthcare and/or care for substance use disorders in Los Alamos County for yourself?

Response	20%	40%	60%	80%	100%	Frequency
Yes						67.4%
No						32.6%

	1-Very Dissatisfied	2	3	4	5-Very Satisfied	N/A	Mean
Availability of general healthcare	3.2%	22.6%	22.6%	25.8%	25.8%	0.0%	3.5
Quality of general healthcare	3.2%	19.4%	16.1%	38.7%	22.6%	0.0%	3.6
Availability of mental healthcare	13.8%	17.2%	13.8%	20.7%	3.4%	31.0%	3.8
Quality of mental healthcare	6.9%	20.7%	6.9%	17.2%	10.3%	37.9%	4.2
Availability of care for substance use disorders	10.3%	10.3%	17.2%	6.9%	3.4%	51.7%	4.4
Quality of care for substance use disorders	10.3%	10.3%	13.8%	6.9%	6.9%	51.7%	4.4
Availability of dental healthcare	3.2%	12.9%	16.1%	25.8%	29.0%	12.9%	4.0
Quality of dental healthcare	0.0%	12.9%	9.7%	29.0%	35.5%	12.9%	4.3

How satisfied are you with the following in Los Alamos County? (select one option per line)

How satisfied are you with the following in Los Alamos County? (select one option per line) N/As REMOVED

	1-Very Dissatisfied	2	3	4	5-Very Satisfied	N/A	Mean
Availability of general healthcare	6.3%	18.8%	31.3%	31.3%	12.5%	0.0%	3.3
Quality of general healthcare	6.3%	18.8%	12.5%	43.8%	18.8%	0.0%	3.5
Availability of mental healthcare	28.6%	21.4%	14.3%	28.6%	7.1%	0.0%	2.6
Quality of mental healthcare	14.3%	35.7%	7.1%	28.6%	14.3%	0.0%	2.9
Availability of care for substance use disorders	21.4%	21.4%	35.7%	14.3%	7.1%	0.0%	2.6
Quality of care for substance use disorders	21.4%	21.4%	28.6%	14.3%	14.3%	0.0%	2.8
Availability of dental healthcare	6.3%	12.5%	12.5%	43.8%	25.0%	0.0%	3.7
Quality of dental healthcare	0.0%	12.5%	12.5%	43.8%	31.3%	0.0%	3.9

In the past two years, have you avoided or delayed receiving any of the following when you needed it? (select one option per line)

	Yes	No	Didn't Need It
General healthcare	39.1%	56.5%	4.3%
Mental healthcare	17.4%	30.4%	52.2%
Care for substance use disorders	2.2%	19.6%	78.3%
Dental healthcare	26.1%	69.6%	4.3%

Why did you avoid or delay care? (select all that apply)

Response	20%	40%	60%	80%	100%	Frequency
Lack of transportation						0.0%
Couldn't afford it						37.5%
Lack of childcare						8.3%
Couldn't get off work						29.2%
Couldn't find a provider for what I needed						45.8%
Couldn't find culturally/lifestyle appropriate care						0.0%
Language barrier						0.0%
Social stigma						12.5%
Not able to physically access doctor's office						0.0%
Don't know what I need/how to find care						16.7%
Technology barriers						4.2%
Need referral from primary care provider but don't have one						16.7%
Need referral from primary care provider but can't get an appointment						16.7%
Other:						20.8%

Why did you avoid or delay care? (other)



Are you the parent or guardian of any children under the age of 18? (select one)

Response	20%	40%	60%	80%	100%	Frequency
Yes						40.0%
No						60.0%

Do you access general, mental, dental healthcare and/or care for substance use disorders in Los Alamos County for your children?

Response	20%	40%	60%	80%	100%	Frequency
Yes						38.9%
No						61.1%

How satisfied are you with the following for children in Los Alamos County? (select one option per line)

	1-Very Dissatisfied	2	3	4	5-Very Satisfied	N/A	Mean
Availability of general healthcare	0.0%	0.0%	28.6%	14.3%	57.1%	0.0%	4.3
Quality of general healthcare	0.0%	0.0%	28.6%	28.6%	42.9%	0.0%	4.1
Availability of mental healthcare	14.3%	14.3%	14.3%	0.0%	14.3%	42.9%	4.1
Quality of mental healthcare	14.3%	28.6%	0.0%	0.0%	14.3%	42.9%	4.0
Availability of care for substance use disorders	14.3%	14.3%	0.0%	14.3%	0.0%	57.1%	4.4
Quality of care for substance use disorders	14.3%	14.3%	0.0%	14.3%	0.0%	57.1%	4.4
Availability of dental healthcare	0.0%	0.0%	28.6%	28.6%	42.9%	0.0%	4.1
Quality of dental healthcare	0.0%	0.0%	28.6%	28.6%	42.9%	0.0%	4.1

How satisfied are you with the following for children in Los Alamos County? (select one option per line) N/As REMOVED

	1-Very Dissatisfied	2	3	4	5-Very Satisfied	N/A	Mean
Availability of general healthcare	0.0%	0.0%	66.7%	33.3%	0.0%	0.0%	3.3
Quality of general healthcare	0.0%	0.0%	66.7%	33.3%	0.0%	0.0%	3.3
Availability of mental healthcare	33.3%	33.3%	33.3%	0.0%	0.0%	0.0%	2.0
Quality of mental healthcare	33.3%	66.7%	0.0%	0.0%	0.0%	0.0%	1.7
Availability of care for substance use disorders	33.3%	33.3%	0.0%	33.3%	0.0%	0.0%	2.3
Quality of care for substance use disorders	33.3%	33.3%	0.0%	33.3%	0.0%	0.0%	2.3
Availability of dental healthcare	0.0%	0.0%	33.3%	66.7%	0.0%	0.0%	3.7
Quality of dental healthcare	0.0%	0.0%	33.3%	66.7%	0.0%	0.0%	3.7

Does your child/children have medical insurance? (select one)

Response	20%	40%	60%	80%	100%	Frequency
Yes						94.1%
No						5.9%

Does your child's/children's medical insurance...? (select one option per line)

	Yes	No	Don't Know/Not Sure
Network include the providers they need?	62.5%	12.5%	25.0%
Cover the treatments and services they need?	75.0%	6.3%	18.8%

In the past two years, have you avoided or delayed receiving any of the following for your child/children when they needed it? (select one option per line)

	Yes	No	Didn't Need It
General healthcare	5.9%	94.1%	0.0%
Mental healthcare	5.9%	52.9%	41.2%
Care for substance use disorders	0.0%	35.3%	64.7%
Dental healthcare	11.8%	88.2%	0.0%

Why did you avoid or delay care for your child/children? (select all that apply)

Response	20%	40%	60%	80%	100%	Frequency
Lack of transportation		, i	,	· ·		0.0%
Couldn't afford it						66.7%
Lack of childcare						0.0%
Couldn't get off work						0.0%
Couldn't find a provider for what my child/children needed						33.3%
Couldn't find culturally/lifestyle appropriate care		·				0.0%
Language barrier						0.0%
Social stigma						0.0%
Not able to physically access doctor's office						0.0%
Don't know what they need/how to find care						0.0%
Technology barriers						0.0%
Need referral from primary care provider but don't have one						0.0%
Need referral from primary care provider but can't get an appointment						0.0%
Other:						0.0%

Why did you avoid or delay care for your child/children? (other)

Response		
	Valid Responses	0

Do you or any members of your household currently have any of the following social service needs? (select all that apply)

Response	20%	40%	60%	80%	100%	Frequency
Assistance with applications/renewals for Medicaid, SNAP, WIC, or other federal/state support programs						83.3%
Utilities assistance						0.0%
Housing services (Section 8 vouchers and/or eviction services)						0.0%
Job seeking services						33.3%
Assistance with referrals to physical and/or behavioral health providers						33.3%

In the past two years, have you or your household: (select one option per line)

	Yes	No
Used the internet or apps to find healthcare services or make appointments?	84.0%	16.0%
Had economic challenges that prevented you from pursuing preventive health treatments?	19.2%	80.8%
Had challenges accessing affordable housing?	26.9%	73.1%
Had difficulty maintaining stable housing?	3.8%	96.2%
Been evicted from your primary residence?	3.8%	96.2%
Been homeless?	4.0%	96.0%
Had challenges with basic living expenses exceeding your household's income?	26.9%	73.1%
Had challenges accessing affordable food?	15.4%	84.6%
Had challenges accessing affordable legal support services?	7.7%	92.3%

Do you identify as a member of the.. (select one option per line)

	Yes	No
LGBTQAI+ community?	7.7%	92.3%
Black, Indigenous, and people of color (BIPOC) community?	25.6%	74.4%

How satisfied are you with access to culturally/lifestyle appropriate care in Los Alamos County in the following areas? (select one option per line)

	1-Very Dissatisfied	2	3	4	5-Very Satisfied	N/A	Mean
General healthcare	0.0%	37.5%	0.0%	37.5%	25.0%	0.0%	3.5
Mental healthcare	0.0%	0.0%	12.5%	12.5%	12.5%	62.5%	5.3
Care for substance use disorders	0.0%	0.0%	12.5%	12.5%	12.5%	62.5%	5.3
Dental healthcare	12.5%	0.0%	0.0%	37.5%	37.5%	12.5%	4.3

How satisfied are you with access to culturally/lifestyle appropriate care in Los Alamos County in the following areas? (select one option per line) N/As REMOVED

	1-Very Dissatisfied	2	3	4	5-Very Satisfied	N/A	Mean
General healthcare	0.0%	0.0%	0.0%	66.7%	33.3%	0.0%	4.3
Mental healthcare	0.0%	0.0%	33.3%	33.3%	33.3%	0.0%	4.0
Care for substance use disorders	0.0%	0.0%	33.3%	33.3%	33.3%	0.0%	4.0
Dental healthcare	0.0%	0.0%	0.0%	66.7%	33.3%	0.0%	4.3

What UNADRESSED healthcare (general, mental, substance use disorder, dental) needs do you or any member(s) of your household have right now? (List no more than three)

Response
Dental, general, mental
new dentist needed plus a counselor would be nice
None at this time
None.
More doctors and dentists, at one point it took me 4 months to get a appointment with a doctor and just as long to get an appointment for pt.
N/A
Need a child psychologist
general
None
None
dental, mental, neurologist
mental, dental
NA
Child needs Braces
More services accepting Tricare
Regular checkups at a general healthcare provider covered by our insurance
None
hearing aids, bloodwork
general

What ONE thing would improve healthcare in Los Alamos County?

Response
Working hospital equipment.
More options specifically for women's health services.
more providers
LAMC is an awful hospital! Urgent care clinic is not at all good either.
Better doctors and nurses. I have gone to the ER and have been forgotten in a room for more than 10 hours.
dental insurance that covers more.
a website with ALL the healthcare providers in the area with their contact information and specialties
Not sure
Neurology specialist
Affordability
More providers. LA County has already lost 1 provider and another leaving in December
Quicker availability
Tricare insurance coverage I have to go to Pojoaque for Health care, and the same is true for medications
More doctors and fewer physician assistants.
Choices
More primary care providers
Endocrinologists needed
Better quality services at the hospital.
Professionals who would help you navigate an opaque system, a place to get blood drawn that was accessible to people who've never had bloodwork done.
Having more options for doctors up here. There aren't a lot of options so the one here often don't feel any pressure to be better.

What is the five-digit zip code of your primary residence?

Response	2	20%	40%	60%	80%	100%	Frequency
87144							5.1%
87506							10.3%
87507							10.3%
87510							5.1%
87532							33.3%
87537							5.1%
87582							5.1%
Other Responses							25.6%

What is the five-digit zip code of your primary residence? (other)

Response
87015
87025
87505
87527
87549
87557
87566
87567
87571
87578

How many people...

How many people	Mean
Live in your household?	3.0
In your household are under the age of 18?	0.8
In your household are aged 65 or older?	0.2

What is your age?

Average age = 47.4 (ages ranging from 27 to 69)

What is your employment status? (select one)

Response	209	40%	60%	80%	100%	Frequency
Work full-time for pay						89.5%
Work part-time for pay						5.3%
Unemployed, looking for paid work						0.0%
Unemployed, not looking for paid work						2.6%
Student						0.0%
Retired						2.6%

How much do you anticipate your household's total income before taxes will be for the current year?

Response	20%	40%	60%	80%	100%	Frequency
Less than \$25,000						0.0%
\$25,000 to \$49,999						2.6%
\$50,000 to \$99,999						34.2%
\$100,000 to \$149,999						34.2%
\$150,000 to \$199,999		·				18.4%
\$200,000 to \$249,999						10.5%
\$250,000 to \$299,999						0.0%
\$300,000 to \$349,999						0.0%
\$350,000 or more						0.0%

Median Income = \$123,000

Are you Spanish, Hispanic or Latino? (select one)

Response	20%	40%	60%	80%	100%	Frequency
Yes						65.8%
No						34.2%

What is your race? (select all that apply)

Response	20 %	% 40%	60%	80%	100%	Frequency
American Indian or Alaskan Native						13.9%
Asian, Asian Indian, or Pacific Islander						0.0%
Black or African American						2.8%
White						72.2%
Other						16.7%

How do you identify your gender? (select one)

Response	20%	40%	60%	80%	100%	Frequency
Woman						60.5%
Man						39.5%
Agender/I don't identify with any gender						0.0%
Genderqueer/gender fluid						0.0%
Non-binary						0.0%
Transgender man						0.0%
Transgender woman						0.0%
Two-spirit						0.0%
I identify in another way						0.0%

Appendix D: Non-Resident Survey Instrument

Thank you for completing the Health Care Quality and Accessibility Survey for <u>Non-Residents</u> of Los Alamos County.

Please only complete the survey if you are 18 or older and DO NOT live in Los Alamos County.

O Santa Fe

O Torrance

O Valencia

O Taos

1. Do you live in Los Alamos County?

O Yes O No

Branch to: **Survey is only for non-residents of Los Alamos County** (1 = Yes)

2. What county do you live in?

- Bernalillo
- O Mora
- Rio Arriba
- San Miguel
- Sandoval
- I live in another county not listed above _____

3. How would you rate <u>your</u> overall health? (select one)

	1-Poor	2-Fair	3-Good	4-Excellent
Health	Ο	Ο	Ο	Ο

4. Do <u>you</u> have medical insurance? (select one)

O Yes O No

This Question is Conditionally Shown if: (4 = Yes)

5. Does <u>your</u> medical insurance...? (select one option per line)

	Yes	No	Don't Know/ Not Sure
Network include the providers you need?	Ο	Ο	Ο
Cover the treatments and services you need?	0	О	О

6. Do <u>you</u> access general, mental, or dental healthcare and/or care for substance use disorders in Los Alamos County for yourself?

O Yes O No

This Question is Conditionally Shown if: (6 = Yes)

7. How satisfied are <u>you</u> with the following in Los Alamos County? (select one option per line)

	1-Very Dissatisfied	2	3	4	5-Very Satisfied	N/A
Availability of general healthcare	Ο	Ο	Ο	Ο	0	Ο
Quality of general healthcare	Ο	Ο	Ο	Ο	0	Ο
Availability of mental healthcare	Ο	Ο	Ο	Ο	0	Ο
Quality of mental healthcare	Ο	Ο	Ο	Ο	0	Ο
<u>Availability</u> of care for substance use disorders	0	0	0	0	О	О
Quality of care for substance use disorders	Ο	Ο	Ο	Ο	0	Ο
Availability of dental healthcare	O	Ο	Ο	Ο	Ο	Ο
Quality of dental healthcare	Ο	0	0	0	0	Ο

8. In the past two years, have <u>you</u> avoided or delayed receiving any of the following when <u>you</u> needed it? (select one option per line)

	Yes	No	Didn't Need It
General healthcare	Ο	Ο	Ο
Mental healthcare	Ο	Ο	Ο
Care for substance use disorders	О	Ο	Ο
Dental healthcare	Ο	Ο	Ο

This Question is Conditionally Shown if: (8 (A) [Yes] Count > 0)

9. Why did <u>you</u> avoid or delay care? (select all that apply)

- □ Lack of transportation
- □ Couldn't afford it
- □ Lack of childcare
- □ Couldn't get off work
- □ Couldn't find a provider for what I needed

□ Couldn't find culturally/lifestyle appropriate care

- Language barrier
- Social stigma
- □ Other: _____

□ Not able to physically access doctor's office

- Don't know what I need/how to find care
 - Technology barriers

□ Need referral from primary care provider but don't have one

□ Need referral from primary care provider but can't get an appointment

10. Are you the parent or guardian of any children under the age of 18? (select one)

O Yes O No

This Question is Conditionally Shown if: (10 = Yes)

11. Do you access general, mental, dental healthcare and/or care for substance use disorders in Los Alamos County for your children?

O Yes O No

This Question is Conditionally Shown if: (11 = Yes)

12. How satisfied are you with the following for children in Los Alamos County? (select one option per line)

	1-Very Dissatisfied	2	3	4	5-Very Satisfied	N/A
Availability of general healthcare	О	0	Ο	Ο	Ο	Ο
Quality of general healthcare	0	0	Ο	Ο	Ο	0
Availability of mental healthcare	Ο	0	Ο	Ο	Ο	Ο
Quality of mental healthcare	0	0	Ο	Ο	Ο	0
<u>Availability</u> of care for substance use disorders	0	0	0	0	0	0
Quality of care for substance use disorders	0	0	0	0	0	0
Availability of dental healthcare	0	0	Ο	Ο	Ο	0
Quality of dental healthcare	0	0	0	0	Ο	Ō

Branch to: **Page 12** (10 = No)

13. Does your child/children have medical insurance? (select one) O Yes O No

This Question is Conditionally Shown if: (13 = Yes)

14. Does your child's/children's medical insurance...? (select one option per line)

	Yes	No	Don't Know/ Not Sure
Network include the providers they need?	0	0	Ο
Cover the treatments and services they need?	0	Ο	Ο

15. In the past two years, have you avoided or delayed receiving any of the following for your child/children when they needed it? (select one option per line)

	Yes	No	Didn't Need It
General healthcare	Ο	Ο	Ο
Mental healthcare	Ο	Ο	Ο
Care for substance use disorders	Ο	Ο	Ο
Dental healthcare	Ο	Ο	Ο

This Question is Conditionally Shown if: (15 (A) [Yes] Count > 0)

16. Why did you avoid or delay care for your child/children? (select all that apply)

□ Lack of transportation

- □ Couldn't afford it
- □ Lack of childcare
- □ Couldn't get off work
- Couldn't find a provider for what

my child/children needed

- □ Couldn't find culturally/lifestyle appropriate care
 - Language barrier
 - □ Social stigma
 - □ Other: _____

□ Not able to physically access doctor's office

□ Don't know what they need/how to find care

□ Technology barriers

□ Need referral from primary care provider but don't have one

. □ Need referral from primary care provider but can't get an appointment

17. Do you or any members of your household <u>currently</u> have any of the following social service needs? (select all that apply)

□ Assistance with applications/renewals for Medicaid, SNAP, WIC, or other federal/state support programs

- Utilities assistance
- □ Housing services (Section 8 vouchers and/or eviction services)
- □ Job seeking services
- □ Assistance with referrals to physical and/or behavioral health providers

18. In the past two years, have you or your household: (select one option per line)

	Yes	No
Used the internet or apps to find healthcare services or make appointments?	0	0
Had economic challenges that prevented you from pursuing preventive health treatments?	0	0
Had challenges accessing affordable housing?	0	Ο
Had difficulty maintaining stable housing?	Ο	Ο
Been evicted from your primary residence?	0	Ο
Been homeless?	0	Ο
Had challenges with basic living expenses exceeding your household's income?	О	О
Had challenges accessing affordable food?	Ο	Ο
Had challenges accessing affordable legal support services?	Ο	Ο

19. Do you identify as a member of the.. (select one option per line)

	Yes	No
LGBTQAI+ community?	Ο	0
Black, Indigenous, and people of color (BIPOC) community?	Ο	0

This Question is Conditionally Shown if: (19 (A) [Yes] Count > 0 AND6 = Yes) 20. How satisfied are you with access to culturally/lifestyle appropriate care in Los Alamos County in the following areas? (select one option per line)

	1-Very Dissatisfied	2	3	4	5-Very Satisfie d	N/A
General healthcare	0	0	Ο	Ο	Ο	0
Mental healthcare	0	0	Ο	Ο	0	0
Care for substance use disorders	Ο	Ο	Ο	Ο	Ο	О
Dental healthcare	0	0	Ο	Ο	0	О

21. What UNADRESSED healthcare (general, mental, substance use disorder, dental) needs do you or any member(s) of your household have right now? (List no more than three) _____

This Question is Conditionally Shown if: (6 = Yes OR11 = Yes) **22. What ONE thing would improve healthcare in Los Alamos County?**

The following questions are for categorization purposes only. All responses will be kept strictly confidential and will not be identified with any individual respondent. 23. What is the five-digit zip code of your primary residence?	
24. How many people Live in your household? (including yourself))
In your household are under the age of 18	?
In your household are aged 65 or older? (in	ncluding yourself)
25. What is your age?	
 26. What is your employment status? (so Work full-time for pay Work part-time for pay Unemployed, looking for paid work 27. How much do you anticipate your here will be for the current year? (select one money from all sources for all persons living in Less than \$25,000 \$25,000 to \$49,999 \$50,000 to \$99,999 \$100,000 to \$149,999 \$150,000 to \$199,999 	 Unemployed, not looking for paid work Student Retired Dusehold's total income before taxes (Please include in your total income
28. Are you Spanish, Hispanic or Latino O Yes O No	? (select one)
 29. What is your race? (select all that an American Indian or Alaskan Native Asian, Asian Indian, or Pacific Islander 	 pply) Black or African American White Other

30. How do you identify your gender? (select one)

- $\mathbf{O} \text{ Woman}$
- O Man
- Agender/I don't identify with any

gender

- Genderqueer/gender fluid
- **O** Non-binary

- ${\bf O}$ Transgender man
- O Transgender woman
- O Two-spirit
- **O** I identify in another way

Thank you for completing the Health Care Quality and Accessibility Survey for non-residents of Los Alamos County.