# Appendices







## APPENDIX A

## Phone and Online Survey Results

Ratings for Problem Ar	eas in the Community	Not / Minor	Moderate	Major	Don't Know
	Lack of affordable housing	22%	31%	46%	1%
	Lack of affordable medical insurance	52%	29%	16%	3%
	Having jobs that do not pay enough for the basics of food, shelter, and clothing	53%	31%	13%	3%
	Lack of affordable child care	51%	27%	16%	5%
Top Tier	Lack of affordable medical care	56%	28%	14%	2%
Problems (30%+ Major/Moderate)	Inadequate public transportation	60%	24%	15%	1%
Major/Moderate)	Lack of affordable dental care	61%	27%	9%	3%
	Homelessness	65%	23%	12%	1%
	Drug abuse	64%	23%	10%	3%
	Lack of money for basic services	66%	23%	7%	3%
	Lack of affordable legal services	63%	23%	7%	7%
	Mental illness or emotional problems	67%	21%	8%	3%
	Lack of services for elderly persons	66%	21%	8%	5%
	Crime in the community	73%	21%	7%	0%
	Lack of services for people with disabilities	70%	20%	5%	5%
	Racial or ethnic discrimination	74%	19%	5%	2%
Second Tier	Lack of parenting skills	72%	20%	3%	5%
<b>Problems</b> (20% up to <30%	Lack of services for children and teens	72%	18%	5%	5%
Major/Moderate)	Hunger	76%	18%	4%	2%
	Alcoholism	73%	18%	3%	6%
	People not speaking or understanding English well enough to function in society	79%	17%	4%	0%
	Unemployment	79%	15%	5%	1%
	Domestic violence	77%	15%	2%	5%
Third Tier	Violence in the community	84%	12%	2%	2%
Problems (< 20% Major/ Moderate)	Lack of affordable housing	22%	31%	46%	1%

Q2 For anything that you feel is a problem, please tell me if it is a minor, moderate or major problem.

Base=all respondents

Ratings for Prob	lem Areas in the Communitty	2005	2007	2009	2011	2013	2015	2017	Change from 2015
	Lack of affordable housing	60%	69%	58%	61%	51%	68%	77%	9% +
	Lack of affordable medical insurance	53%	52%	48%	55%	41%	35%	45%	10% +
	Having jobs that do not pay enough for the basics of food, shelter, and clothing	40%	39%	34%	40%	35%	40%	44%	
Top Tier	Lack of affordable child care	33%	32%	25%	39%	30%	40%	44%	
Problems	Lack of affordable medical care	43%	47%	41%	51%	40%	35%	42%	7% +
(30% +	Inadequate public transportation	29%	33%	33%	38%	35%	38%	39%	
Major/	Lack of affordable dental care	33%	40%	34%	41%	34%	32%	36%	
Moderate <b>)</b>	Homelessness	14%	16%	15%	22%	28%	30%	34%	
	Drug abuse	26%	28%	25%	30%	24%	26%	33%	7%
	Lack of money for basic services	21%	25%	22%	31%	21%	23%	30%	7% +
	Lack of affordable legal services	24%	23%	24%	27%	20%	25%	30%	5%
	Mental illness or emotional problems	18%	19%	19%	27%	19%	27%	30%	
	Lack of services for elderly persons	20%	21%	18%	24%	15%	24%	29%	5%
	Crime in the community*	18%	19%	18%	25%	30%	26%	27%	
	Lack of services for people with disabilities	20%	19%	17%	24%	15%	21%	24%	
Second	Racial or ethnic discrimination	16%	16%	13%	17%	16%	17%	24%	7% +
Tier	Lack of parenting skills	28%	26%	27%	33%	23%	22%	23%	
Problems (20% up to	Lack of services for children and teens	21%	19%	19%	23%	17%	20%	23%	
<30% Major/ Moderate)	Hunger	16%	16%	18%	22%	21%	20%	22%	
1.104014107	Alcoholism	20%	21%	17%	23%	18%	19%	21%	
	People not speaking or understanding English well enough to function in society	34%	34%	31%	34%	31%	26%	21%	-5%
	Unemployment	30%	17%	44%	55%	35%	27%	20%	-7% -
Third Tier	Domestic violence	20%	21%	17%	22%	17%	19%	18%	
Problems (< 20% Major/ Moderate)	Violence in the community	18%	19%	18%	13%	16%	10%	15%	5%

Q2 For anything that you feel is a problem, please tell me if it is a minor, moderate or major problem.

Base=all respondents

A bold number followed by a + or - in the Change from 2015 column indicates a statistically significant difference when compared to 2015 data

<sup>\*</sup>Crime in the Community and Violence in the Community were one question prior to 2011

Ratings for Problems	Experienced by the household	Not / Minor	Moderate	Major	Don't Know
	Not being able to find affordable child care	78%	11%	11%	0%
	Not having enough money to pay for housing	87%	7%	6%	0%
	Inadequate public transportation (household)	79%	14%	6%	0%
	Having a lot of anxiety, stress or depression which interferes with your daily life	84%	10%	6%	0%
	Not being able to find work that supports yourself or family	85%	9%	6%	0%
	Not able to pay for dental bills	90%	5%	5%	0%
Top Tier Problems	Finding it difficult to budget the money that's available	87%	8%	5%	0%
(10%+ Major/	Not being able to pay for medical insurance	88%	7%	5%	0%
Moderate)	Not being able to pay for the doctor bills	89%	7%	4%	0%
	Not being able to find affordable care for someone with a disability	86%	10%	4%	0%
	Not being able to find programs for someone with a disability	90%	8%	2%	0%
	Children or teens with emotional or behavior problems	87%	10%	2%	0%
	Not being able to find home health care or day care for an elderly person	90%	8%	2%	0%
	Living in housing that needs major repairs which you cannot afford	90%	6%	3%	0%
	Experiencing racial or ethnic discrimination	93%	4%	3%	0%
Second Tier	Not being able to pay for mental health counseling	91%	5%	3%	0%
Problems	Not being able to pay the utility bills	93%	4%	3%	0%
(5% up to <10%	Not being able to afford legal help	91%	5%	3%	0%
Major/Moderate)	Not having access to mental health counseling	93%	3%	3%	1%
	Not having enough money for food	95%	3%	3%	0%
	Not able to pay for prescriptions	93%	5%	3%	0%
	Not being able to get medical insurance	93%	5%	2%	0%

H1 For each one, please indicate if it is has been a major problem, moderate, minor problem, or not a problem at all for you or anyone in your household over the past several years.

Base=all respondents for most; respondents with children for those relating to childcare; respondents with non-English speakers for those relating to English; respondents with elderly/disabled people in their home for those relating to elderly/disabled

Ratings for Prob	olem Areas in the Community	2005	2007	2009	2011	2013	2015	2017	Change from 2015
	Not being able to find affordable child care	7%	9%	5%	7%	8%	21%	22%	
	Inadequate public transportation	11%	14%	18%	20%	22%	19%	21%	
	Having a lot of anxiety, stress or depression which interferes with your daily life	15%	16%	16%	20%	15%	17%	16%	
	Not being able to find work that supports yourself or family	15%	12%	11%	20%	17%	13%	15%	
	Not being able to find affordable care for someone with a disability	7%	9%	6%	4%	7%	8%	14%	6%
Top Tier	Not having enough money to pay for housing	10%	10%	11%	12%	12%	13%	13%	
Problems (10%+	Children or teens with emotional or behavior problems	7%	7%	7%	7%	7%	10%	12%	
Major/ Moderate)	Finding it difficult to budget the money that's available	12%	14%	16%	19%	19%	14%	12%	
	Not being able to pay for medical insurance	17%	16%	16%	15%	15%	8%	12%	4%
	Not being able to pay for the doctor bills	15%	13%	14%	12%	14%	10%	11%	
	Not being able to find programs for someone with a disability	7%	9%	6%	5%	7%	8%	10%	
	Not able to pay for dental bills	15%	13%	14%	13%	14%	12%	10%	
	Not being able to find home health care or day care for an elderly person	5%	7%	6%	7%	6%	5%	10%	5%
	Living in housing that needs major repairs which you cannot afford	7%	7%	9%	11%	10%	6%	9%	3%
	Not being able to pay for mental health counseling	8%	8%	6%	9%	7%	7%	9%	
	Not being able to afford legal help	9%	10%	10%	11%	10%	8%	8%	
Second Tier	Experiencing racial or ethnic discrimination	5%	4%	7%	5%	7%	4%	7%	3%+
Problems	Not able to pay for prescriptions	15%	13%	14%	9%	10%	6%	7%	
(5% up to <10% Major/ Moderate)	Not being able to get medical insurance	17%	16%	16%	13%	13%	7%	7%	
53.514169	Not being able to pay the utility bills	7%	7%	6%	7%	10%	7%	7%	
	Not having access to mental health counseling	8%	8%	6%	9%	7%	7%	6%	
	Not having enough money for food	4%	7%	6%	7%	10%	6%	5%	

H1 For each one, please indicate if it is has been a major problem, moderate, minor problem, or not a problem at all for you or anyone in your household over the past several years.

A bold number followed by a + or - in the Change from 2015 column indicates a statistically significant difference when compared to 2015 data

<sup>\*</sup>Speak and Read English fluently were one question prior to 2015

<sup>+</sup>Not enough money for food and Clothing were one question prior to 2015

## APPENDIX B

Weighting—Unweighted and Weighted Data Compared to Bellevue Population	2017 Human Needs Assessment (unweighted)	2017 Human Needs Assessment (weighted)	Bellevue Population*
Gender			
Male	51%	49%	51%
Female	49%	51%	49%
Age**			
18-34	23%	28%	31%
35-54	40%	38%	37%
55 Plus	37%	34%	32%
Household Size			
Single Adult	28%	26%	27%
Two or More Adults	72%	74%	73%
Children in Household			
None	70%	67%	69%
One or More	30%	33%	31%
Dwelling Type			
Single-Family	53%	55%	50%
Multi-Family	47%	45%	50%
Home Ownership			
Own	63%	62%	52%
Rent	36%	36%	42%
Income			
Less than \$25,000	5%	7%	12%
\$25,000-\$50,000	10%	9%	14%
\$50,000-\$75,000	11%	9%	14%
\$75,000 or Greater	74%	75%	60%
Race/Ethnicity (multiple responses)			
White Alone (Not Hispanic)	60%	61%	55%
Asian (with any other race)	28%	25%	34%
African American (with any other race)	3%	3%	3%
Other	4%	4%	5%
% Hispanic	3%	2%	7%
Years Lived in Bellevue			
0-3	29%	26%	
4-9	21%	16%	n.a.
10 or More	50%	58%	
Mean	15.3 yrs	15.4 yrs	
Language Spoken at Home			
English Only	54%	54%	60%
Other than English	46%	46%	40%

<sup>\*</sup>Source for population figures: All data are 2011-2015 American Community Survey five-year estimates. \*\*Note: Age was imputed for respondents who refused their age.

Unless otherwise noted, all reported statistics are based on weighted base sizes. For reference, the table below provides both weighted and unweighted base sizes for each subgroup of respondents shown in this report.

Weighted Versus Unwei	ghted Base Sizes					
All Respondent	By Neighborhood					
2011 (n = 409)	Bel-Red (n = 2, nw = 2)					
2013 (n = 624)	Bridle Trails (n = 44, nw = 48)					
2015 (n = 423)	Cougar Mountain / Lakemont (n = 32, nw = 36)					
2017 (n = 484)	Crossroads (n = 31, nw = 35)					
	Downtown (n = 75, nw = 66)					
Groups of Respondents	Eastgate (n = 17, nw = 20)					
Those Who Feel There are Unmet Needs in Bellevue	Factoria (n = 8, nw = 7)					
2017 (n = 54, nw weighted = 49)	Lake Hills(n = 61, nw = 58) Newport (n = 30, nw = 33)					
Respondents Who Rate the Availability of Help Low (<4) 2017 (n = 36, nw weighted = 33)						
Households with Children	Northeast Bellevue (n = 37, nw = 42)					
2017 (n = 146, nw weighted = 159)	Northwest Bellevue (n = 40, nw = 40)					
Speak Language Other than English	West Lake Sammamish (n = 15, nw = 19)					
2017 (n = 225, nw weighted = 223)	Somerset (n = 29, nw = 27)					
Experienced 1 or More Household Problems 2017 (n = 233, nw weighted = 224)	West Bellevue (n = 23, nw = 22)					
Someone in Household Looked for Help in Past 2 Years	Wilburton (n = 15, nw = 14)					
2017 (n = 87, nw weighted = 87)	Woodridge (n = 16, nw = 16)					
Respondents who Found the Help they Needed						
YES (n = 29, nw weighted = 31) FOR SOME PROBLEMS (n = 43, nw weighted = 41)						

Count of Households with Non-English Speakers – Unweighted data – N's shown

	Su	rvey Contact	Method	
	Landline	Cell Phone	Online	Total
Participant speaks a language other than English	7	28	143	178
Someone else in the household speaks a language other than English	9	23	89	121
Household where anyone speaks a language other than English (note, that this does not equal the sum of the above two rows as it is possible for both the participant and a second person to speak more than one language)	12	34	179	225
No one in the household speaks a language other than English (English only household)	44	33	182	259

Count of Languages Spoken in Household – Unweighted data – N's shown

	Survey Contact Method				
	Landline	Cell Phone	Web	Total	
English	9	18	105	391	
Afrikaans	3	1	33	37	
Aleut	1	4	17	22	
Arabic	1	3	17	21	
Armenian	1	5	15	21	
Bulgarian	0	2	14	16	
Cambodian	0	0	15	15	
Chinese	0	1	8	9	
Cantonese	0	0	9	9	
Farsi	0	0	8	8	
Filipino	1	2	5	8	
French	0	0	7	7	
German	0	1	6	7	
Hebrew	0	0	6	6	
Hindi	0	0	5	5	
Indian	0	2	3	5	
Italian	1	1	3	5	
Japanese	0	1	3	4	
Kannada	1	0	3	4	
Korean	0	1	3	4	
Lao	0	1	2	3	
Mandarin	0	1	1	2	
Norwegian	0	0	2	2	
Polish	0	1	1	2	
Other (please describe)	0	2	6	8	

## APPENDIX C

### Phone/online changes from 2015 to 2017

In 2017, the questionnaire was shortened to reduce respondent burden and reduce telephone costs. The revisions were primarily focused on three areas: reduction in the number of items asked regarding problems perceived to exist in the community, problems experienced by households, and the Community Support section.

	Problems Perceived to Exist in the Community
Q2_14	Illiteracy: [IF NECESSARY that is, people not reading or writing well enough to function in society.]
Q2_19	Shortage of recreational facilities
Q2_20	Shortage of recreational programs
Q2_26	Teens dropping out of school
Q2_28	Effects of gang activities
Q2_30	Poor quality public education [IF NEEDED: K - 12th grade]
Q2_34	Lack of quality childcare
Q2_35	People not knowing how to manage their personal finances.
	Questions asked only of households with non-English speakers
H1_3	Not having enough money for clothing
H1_15	Not being able to afford recreational activities
H1_24	Not being able to afford higher education
H1_44	Not having enough individual support as a parent or caregiver to children
H1_45	Not having enough community support as a parent or caregiver to children
H1_50	Not being able to speak English fluently
H1_51	Not being able to read English fluently
H1_64	Not being able to find respite care or other types of support in caring for an elderly person or a person with disabilities. [IF NEEDED: Respite care would include giving a caregiver a break by having someone else take care of the elderly person or the person with disabilities for a while.]
Con	nmunity Support (to what degree you feel your community supports the needs of each of the following population groups.)
D1_1	Young children under 5 years of age?
D1_2	Children 5 to 9 years old
D1_3	Preteens 10 to 14 years old
D1_4	Teens 15 to 17 years old
D1_5	Older Adults (Seniors)
D1_6	Individuals of diverse racial or ethnic backgrounds
D1_7	Individuals with disabilities
D1_8	Individuals with diverse sexual orientations
D1_9	Low-income individuals
D1_10	Low-income families

## APPENDIX D

### **Address-Based Sampling**

In the past, a random-digit dialing (RDD) telephone survey was used. Strict quotas were used to ensure representation of men and women, different age groups, and residents of multi-family versus single-family dwelling types was roughly proportionate to their actual incidence in the population. While RDD telephone survey research continues to be used widely, it has come under increased scrutiny due to the proliferation of cell phones as well as declining response rates. This has called into question the representativeness of surveys conducted using traditional RDD samples. Estimates today are that as many as 46 percent of all households in King County no longer have a landline telephone and rely strictly on a cell phone or other mobile device to make and receive calls. An additional 17 percent of households have both landline and cell phone numbers but rely primarily on their cell phones.

To address the high incidence of cell phone–only households or households whose members primarily use cell phones, a major methodological change to address-based sampling (ABS) was implemented beginning with the 2011 Human Needs Assessment. In 2017 the ABS methodology was enhanced with the introduction of e-mail addresses to increase response rates and reduce survey costs.

The sample frame was composed of a list of all addresses in Bellevue—as defined by census block groups—including those indicating that post office boxes are the only way they get mail. This list was then matched against a comprehensive database to determine if the household had a matching landline or cell phone number. Additionally, e-mail addresses were appended where possible.

- a. If no matching phone number was found, the household was sent a letter signed by the city manager asking them to complete the survey online or by calling a toll-free number.
- b. If an e-mail address was found, the household was sent an e-mail inviting them to complete the survey online or by calling a toll-free number. Non-responders were contacted by phone.
- c. If a matching phone number was found, the household was called and asked to complete the survey by phone.
- d. In order to obtain a representative sample of multi-family households the ABS sample was appended with a dwelling-type indicator (single vs. multi-family home) and addresses marked as multi-family were over-sampled during the mailing of the invitations.

Distribution of Landline versus Cell Phone Households

		Unwei	ghted			Weighted					
	Cell Sample	Landline Sample	Mailed Sample	Total Sample	Cell Sample	Landline Sample	Mailed Sample	Total Sample	Estimate (King County) <sup>3</sup>		
Only have a cell	44%	13%	68%	47%	56%	8%	72%	47%	46%		
Primarily use a cell	25%	13%	17%	18%	22%	11%	16%	19%	17%		
Use landline and cell	22%	48%	10%	24%	17%	51%	8%	23%	21%		
Primarily landline	8%	21%	3%	10%	5%	22%	2%	8%	10%		
Only have a landline	1%	6%	1%	2%	0%	8%	1%	2%	5%		

Additionally, as the table below indicates, residents without landline numbers (those invited to take the survey online) are demographically different from those contacted via telephone.

Respondent Demographics by Phone versus Web Sample (unweighted)

Gender					House	hold Type				Age	
	Cell Sample	Landline Sample	Mailed Sample		Cell Sample	Landline Sample	Mailed Sample		Cell Sample	Landline Sample	Mailed Sample
Male	60%	45%	50%	Single Family	73%	77%	37%	18 to 34	18%	1%	31%
Female	40%	55%	50%	Multi- Family	27%	22%	62%	35 to 54	45%	20%	46%
								55+	37%	79%	23%

The passage below from Centris Marketing Intelligence sums up a few of the key advantages of using address-based sampling.

Recent advances in database technologies along with improvements in coverage of household addresses have provided a promising alternative for surveys that require representative samples of households. Obviously, each household has an address and virtually all households receive mail from the U.S. Postal Service (USPS)... Given the evolving problems associated with telephone surveys on the one hand, and the exorbitant cost of on-site enumeration of housing units in area probability sampling applications on the other, many researchers are considering the use of [USPS databases] for sampling purposes. Moreover, the growing problem of non-response—which is not unique to any individual mode of survey administration—suggests that more innovative approaches will be necessary to improve survey participation. These are among the reasons why multi-mode methods for data collection are gaining increasing popularity among survey and market researchers. It is in this context that address-based sample designs provide a convenient framework for an effective administration of surveys that employ multi-mode alternatives for data collection.

# APPENDIX E

	2017-20	018 Needs Update
	Commui	nity Conversations
Goal Area	Issue/Population	Group/Date
Supportive	Children birth-5	
Relationships	Families and children	Kinship Care Support Group 3/20/17
Education and Job Skills to Lead an Independent Life	Adults and children	<ul> <li>Bellevue College Faculty and Staff 5/30/17</li> <li>Panel at Human Services Commission: Early Learning/Child Care 4/4/17</li> </ul>
Food to Eat and a Roof Overhead	All ages	<ul> <li>City of Bellevue Neighborhood Outreach Staff Meeting 4/18/17</li> <li>City of Bellevue Community Centers Staff Meeting 5/15/17</li> <li>Congregations for the Homeless Men's Rotating Shelter 5/15/17</li> <li>Sophia Way Day Center 3/22/17</li> <li>Bellevue Downtown Library Staff Meeting 5/2/17</li> <li>City of Bellevue Code Compliance Staff Meeting 5/3/17</li> <li>City of Bellevue Parks Rangers Staff Meeting 6/6/17</li> </ul>
	Adults	<ul><li>Bellevue Fire Cares 1/17/17</li><li>High Utilizers Group 3/8/17</li></ul>
	Children and Youth	Bellevue School District Nurses 9/28/16
	Veterans	King County Veterans Consortium 5/11/17
	Refugees and Immigrants	<ul><li>India Association of Western WA 3/16/17</li><li>Promotores Event 4/29/17</li></ul>
	Diversity	Bellevue Diversity Advisory Network 4/25/17
	Diversity Refugees and Immigrants	Bellevue School District Asian Pacific Islander Committee
	Refugees and Immigrants	Cultural Navigators 4/25/17
	LGBTQ	Panel of Providers at Human Services Commission 3/7/17
	Youth	Youth Link Board Meeting 5/10/17
Specific Populations	Children and Youth	Bellevue School District     Family Connections and McKinney Vento Staff 5/15/17     Odle Middle School
	Older Adults	<ul> <li>Eastside Neighbors (Village) 4/21/17</li> <li>Bellevue Network on Aging Meeting on the Vets and Human Services Levy Renewal 3/2/17</li> <li>Asian Senior Concerns Foundation 5/6/17</li> <li>Evergreen Court Resident Council 5/3/17</li> <li>North Bellevue Community Center Tech Group for Older Adults 4/25/17</li> </ul>
	People with Disabilities	<ul> <li>Resource Fair Highland Community Center 4/29/17</li> <li>HERO House 3/9/17</li> <li>Panel at Human Services Commission: Providers of Agencies that Serve People with Disabilities and the City of Bellevue Supported Employment Team 6/20/17</li> </ul>

## APPENDIX F

# Key Informant Interviews 2017-2018

Area of focus	Contact	Date
Older Adults	Phyllis Smilen Bellevue Network on Aging Member	1/19/17
Older Adults	Desiree Leigh Bellevue Network on Aging Member	2/15/17
Refugees and Immigrants in Bellevue School District	Chhoun Mey Melissa King	3/22/17
Basic Needs/Refugees and Immigrants	Edi Flores Youth Eastside Services	4/18/17
Basic Needs	Barb Tuininga City of Bellevue Mini-City Hall	5/24/17
School Aged Children and Youth	Jeannie Anderson City of Bellevue Wrap Around Services Program	6/5/17
School Aged Children and Youth	Cecilia Vasquez-Martinez City of Bellevue Wrap Around Services Program	6/8/17

### **Faith Community Interviews**

Congregation	Contact	Date
Bellevue Presbyterian	Tom Brewer	5/15/17
St. Madeleine Sophie Catholic Church	Ann LaBeck	5/24/17
St. Margaret's Episcopal Church	Christina Jullard	5/25/17

## APPENDIX G

### **Health Care Glossary**

### **Publicly Funded Programs Overview**

- **Medicare:** Individuals qualify for Medicare benefits if they are 65 years old, collecting Social Security (SS) payments, eligible for SS, or worked a Medicare eligible job.
- **Medicaid:** Medicaid provides medical coverage for people with disabilities, low-income elderly and children and their caretakers and as a result of the Affordable Care Act, adults who have incomes up to 138% of the federal poverty level (\$23,050 for a family of four in 2013).
- Washington Apple Health: In the past, the state's Basic Health Plan covered low-income individuals (200% of the federal poverty level). Beginning in October 2013 people who are uninsured age 19-64 whose incomes are too high to qualify for Medicaid have the opportunity to enroll in Medicaid (called "Washington Apple Health") due to expanded income guidelines of up to 138% of the federal poverty level, compared to 100% of the federal poverty level. Individuals may also enroll in a subsidized health plan by accessing the new online marketplace, Washington Healthplanfinder (http://wahealthplanfinder.org).
- Apple Health for Kids: Free for children in families below 200 percent of the Federal Poverty Level. Families above that level may be eligible for the same coverage at low cost: \$20 a month per child for families below 250 percent of poverty and \$30 a month per child for families below 300 percent of poverty. (The premiums max out at two per family, so no family would pay more than \$60 a month in premiums.) Apple Health for Kids is available to both citizens and non-citizens who are 18 or younger. During the 2013 State Legislative session, an earlier decision to charge non-citizen families a higher premium to enroll their children in this program was reversed, so now the premiums are the same for citizen or non-citizen families.

### **Basic Definitions**

- **Infant Mortality:** The infant mortality rate is measured for a given year as the number of infants who died in the first year of life per 1,000 live births.
- Overweight/Obese: Defined as having a Body-Mass Index (25) of greater than 25. The BMI is calculated using this formula: (Weight in Pounds/(Height in inches x Height in inches)) x 703.
- Prevalence: the number of persons currently with the condition.
- **Incidence:** the number of persons newly diagnosed with the condition.
- Rolling Averages: For populations of small size, small changes in the number of events will cause the rate to fluctuate substantially from year to year. To help stabilize the rate and observe the time trend of an event, rates are sometimes aggregated into "rolled" averages, such as in three or five year intervals.
- Rate: Rates in this report are usually expressed as the number of events per 1,000 population per year, unless otherwise specified.

## APPENDIX H

#### 2015 Federal Poverty Guidelines for the 48 Contiguous States and the District of Columbia

Persons in family/household	Poverty guideline	
1	\$11,770	
2	\$15,930	
3	\$20,090	
4	\$24,250	
5	\$28,410	
6	\$32,570	
7	\$36,730	
8	\$40,890	
For families/households with more than 8 persons, add \$4,160 for each additional person		

#### 2016 Federal Poverty Guidelines for the 48 Contiguous States and the District of Columbia

Persons in family/household	Poverty guideline
1	\$11,880
2	\$16,020
3	\$20,160
4	\$24,300
5	\$28,440
6	\$32,580
7	\$36,730
8	\$40,890
For families/households with more than 8 persons, add \$4,160 for each additional person	

### 2017 Federal Poverty Guidelines for the 48 Contiguous States and the District of Columbia

Persons in family/household	Poverty guideline
1	\$12,060
2	\$16,240
3	\$20,420
4	\$24,600
5	\$28,780
6	\$32,960
7	\$37,140
8	\$41,320
For families/households with more than 8 persons, add \$4,160 for each additional person	

SOURCE: Federal Register: The Daily Journal of the United States Government