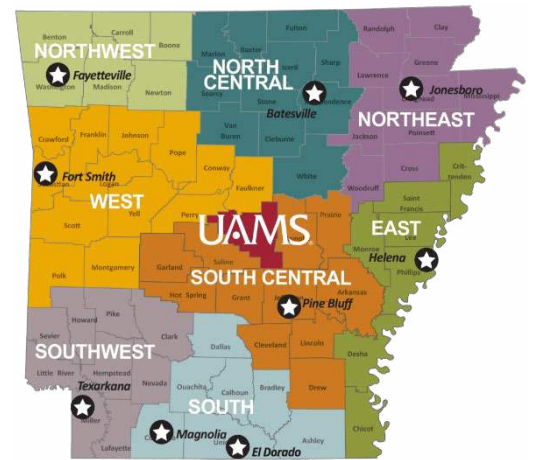


Request for Applications (RFA) 2025

Full Applications Due: 4:00pm, Monday, May 5, 2025

Purpose The Winthrop P. Rockefeller Cancer Institute invites applications for the Rural Research Award Program (RRAP). RRAP supports hypothesis-driven, cancer-related research aimed at addressing healthcare challenges in rural Arkansas populations, which have poor healthcare access, low cancer screening rates, high smoking rates, and high obesity and pesticide exposure. Funding will support investigators or teams of investigators to collect preliminary data for competitive NCI/NIH R01 grant submissions.

The UAMS Rural Research Network was established in January 2020 to leverage the existing clinical and educational infrastructure of UAMS Regional Programs for research and to help ensure that Arkansas' rural populations are included in health research. The network was created in response to the stark health disparities in rural communities. In Arkansas, 41% of residents live in rural areas, compared to just 14% nationwide. The network comprises UAMS' nine Regional Campuses located across the state and is supported by an intra-institutional partnership. Its partners include UAMS Community Health & Research, the Translational Research Institute, UAMS Regional Programs, and the Winthrop P. Rockefeller Cancer Institute. The Rural Research Network provides a platform to expand research participation opportunities for rural residents who receive their medical care within the UAMS Regional Campuses --- many of whom are older adults and/or from underrepresented minority populations. More information about the Rural Research Network, including a list of network sites, their resources, and a demographic snapshot of each site, is available in the attached appendix. Applicants are encouraged to budget for the Rural Research Network's support staff to assist with research coordinator services.



Specific Research Objectives All areas of cancer research that address a healthcare problem in rural Arkansas populations are acceptable for this funding opportunity. Below are some areas of interest for the Rural Research Award Program. The following examples illustrate the types of studies appropriate for this RFA, but proposals are not limited to these topics:

1. **Cancer Prevention and Screening** - Barriers to cancer screening, mobile screening units, telehealth interventions, socioeconomic and cultural factors in cancer screening adherence in rural populations.
2. **Cancer Health Disparities** - Rural-urban disparities in cancer incidence and mortality, environmental and occupational exposures contributing to cancer risks, impact of healthcare access on cancer treatment outcomes.
3. **Cancer Treatment and Outcomes** - Barriers to timely diagnosis and treatment, impact of financial toxicity, remote patient monitoring and digital health tools, community hospitals versus academic cancer centers.
4. **Cancer Survivorship in Rural Arkansas** - Unique survivorship challenges in rural Arkansas, management of long-term side effects, quality of life.
5. **Lifestyle, Behavioral, Environmental and Genetic Risk Factors** - Impact of obesity on cancer risk and outcomes, smoking, vaping and lung cancer, dietary patterns and cancer risk, environmental exposures, and genetic and epigenetic risk factors.
6. **Health Communication and Education** - Effective community-based interventions to improve cancer awareness, strategies to enhance shared decision-making between rural patients and healthcare providers.
7. **Implementation Science and Policy** - Policies to improve cancer prevention and care, impact of Medicaid expansion on cancer diagnosis and treatment outcomes, strategies for integrating precision medicine and targeted therapies into rural healthcare settings.

Informational Session Wednesday, March 26; 1:00 p.m.

An informational session will be held at 1:00 p.m. on Wednesday, March 26, 2025, in the Betsy Blass conference room (CI 10014) to provide interested applicants with specific information on this opportunity's focus, application process, population within Regional Programs and the Network. Program staff will provide additional information during the webinar to help identify the resources needed and the ideal site(s) for your project. Please register for the webinar using the [Information Session Registration Link](#). Those interested are asked to attend in person, if possible, but a zoom link will be available as well. Those who cannot attend but are interested in receiving updates and notifications about the RFA are encouraged to register. The webinar will be recorded and made available on our website.

2025 Award Information

Eligibility: Applicants must be UAMS faculty members with a rank of Assistant Professor or above. Priority will be given to research teams with Winthrop P. Rockefeller Cancer Institute members. Winthrop P. Rockefeller Cancer Institute membership is open to UAMS faculty who are actively conducting cancer research. To learn more about Winthrop P. Rockefeller Cancer Institute membership or to apply, visit the [membership page](#).

Award: A maximum budget of \$100,000 will be awarded. Funding is for a 24-month project period, with a start date between October 1, 2025 and December 1, 2025, depending on regulatory approval.

The opportunity supports a broad range of projects and approaches, including but not limited to clinical research, retrospective data analysis, sample collection, educational interventions, or projects that target behavioral health outcomes.

Expenses: Applicants are encouraged to utilize and budget appropriately for use of Winthrop P. Rockefeller Cancer Institute Shared Resources and the Network's research staff, if applicable. Effort for statistical support and analyses must be included. Funds may also be used to purchase computers for new hires and supplies including educational and marketing materials specifically related to the proposed research. Up to \$1,500 may be budgeted for travel directly related to presenting the results and/or publication fees. Funds may not be used for faculty salary support except for statistical support. Indirect costs are not allowed. Matching funds are allowed.

Required Budget Review: All applicants must submit their proposed budget via email to Petra Stephens by April 21, 2025, for administrative review. Program leadership will review each proposed budget to identify any issues and communicate with each PI regarding any needed adjustments prior to application submission.

Required Consultations: Projects selected for funding are required to attend a biostatistical consultation with either the Cancer Institute's Biostatistics shared resource group or TRI's Biostatistics, Epidemiology and Research Design (BERD) group. Program staff will help you determine which group will best fit your project's needs. Other consultations may also be required depending on the nature of the project and as determined by program leadership.

Progress Report: Projects that receive funding will be expected to submit periodic progress reports both during and after the completion of the award.

Publications: Publications resulting from a RRAP award will be required to cite the Winthrop P. Rockefeller Cancer Institute according to the Institute's citation requirements. Additionally, projects utilizing the Rural Research Network will be required to cite [TRI](#) according to their citation requirements.

Institutional Requirements for Awardees

Required Pre-Reviews and Approvals (for awarded projects):

All cancer-related human subjects research conducted at UAMS must go through a two-stage scientific review within the Winthrop P. Rockefeller Cancer Institute to meet standards set by the National Cancer Institute. The first review in the appropriate Disease Oriented Committee (DOC) provides multidisciplinary review of the

concept and protocol by a team of disease site experts. The second stage review by the Protocol Review and Monitoring Committee (PRMC) provides a more in-depth scientific, statistical and feasibility review by cancer clinical research experts.

Projects selected for funding are required to submit for DOC approval by September 1, 2025, and expected to submit for either the October or November 2025 PRMC meetings. Petra Stephens will help each invited applicant begin their pre-review and approval process.

Regulatory Approvals: Projects selected for funding must be submitted to the relevant research regulatory body (e.g. IRB) for approval by September 1, 2025, and must receive full approval, if applicable, before funds are released. **Projects exempt from IRB submission must provide an official letter from the IRB stating that the proposed research has been determined as non-human subject research.** Submission of a determination request does not constitute proof of IRB submission. Invited applicants are encouraged to enter their project in CLARA (or submit for an official determination for non-human subject research) as soon as possible.

Full Application Instructions

All components detailed below are required. This funding mechanism is modeled after the NIH R03 mechanism. Proposals should be typed and single spaced with 0.5-inch margins. Arial font should be used with a minimum font size of 11p. A minimum font size of 9p can be used in Figure and Table legends. The final submitted full application should be a single PDF document with all required components identified through subheadings.

Full Application Content:

1. Cover page to include the following ([download here](#)) (1 page):
 - a. Title of project
 - b. Principal Investigator's name, department and contact information
 - c. Co-investigator's name, department and contact information
2. Overview page (1 page) to include the following:
 - a. Project summary (30 lines maximum)
 - b. Project narrative (3 sentences maximum)
3. Specific aims (1 page)
4. Research strategy (3 pages). The following sections are required:
 - a. Significance
 - b. Innovation
 - c. Approach, and
 - d. Plan for Extramural Funding and Publication
 - e. A section on preliminary studies (if relevant)
5. References cited (1 page)
6. Detailed budget form ([download here](#))
 - a. Please include two pages, one for each year
 - b. Please include calendar months for faculty, but zero out requested compensation
7. Budget justification ([download here](#)) (no page limit)
 - a. Please include two pages, one for each year
8. Facilities and other resources (no page limit)
9. Equipment (no page limit)
10. NIH Biosketch of PI(s) and Co-I(s) (5 page maximum).
11. Letters of Support (no page limit). A letter of support from your division or department chair is required. Additional letters of support may be submitted with the application if appropriate to confirm support for the proposed work.

Submitting your Full Application: Applications should be submitted electronically as a single PDF using the [REDCap form](#), no later than 4:00 pm on Monday, May 5, 2025. Please contact Petra Stephens (pstephens@uams.edu) if you have any questions related to this funding mechanism or the application portal.

Full Proposal Administrative Review: Applications will first undergo an administrative review by RRAP staff. Applications that do not include all required components will not be considered, and the PI will be notified.

Full Proposal Scientific Review: Applications that pass the administrative review will then undergo scientific review. These scientific reviews will be passed along to the RRAP Advisory Team.

Full Proposal Final Review: The RRAP Advisory Team will consider the scientific review along with feasibility, potential for impact, and potential for the project to result in a competitive NCI/NIH R01 grant application. The RRAP Advisory Team will rank the proposals and make recommendations to the Winthrop P. Rockefeller Cancer Institute Director for final selection.

Contact: If you have any questions about the RRAP or the application process, please contact Petra Stephens at pstephens@uams.edu.

Overall Timeline for 2025 Rural Research Award Program Award Process

Informational Webinar	March 26, 1:00 p.m.
Full Applications Due	May 5, 4:00 p.m.
Awardees Announced	Week of July 21
Regulatory and Doc Submission	August 1
DOC Approval and PRMC Submission	September 1
Planned PRMC Meeting	October 1 or November 5
Project Start Date	Between October 1 and December 1, 2025

WINTHROP P. ROCKEFELLER CANCER INSTITUTE RURAL RESEARCH AWARD APPENDIX

UAMS Rural Research Network Information

Rural Research Network Study Sites

UAMS Regional Programs is comprised of nine community clinical centers broadly dispersed throughout rural Arkansas (previously known as the Area Health Education Centers [AHECs]). The Centers serve as the study sites for the Rural Research Network. Each site is different, offering a variety of opportunities, resources, and access to special populations.

UAMS Regional Campus	Location	Examples of Staffing & Resources**	EPIC	Counties Served
Northwest	Fayetteville	Research coordinator (TBH), phlebotomists, diabetes educators, pharmacists, family medicine residents, LPN / RN, access, and education staff for the residency program and students. Includes telehealth capabilities and in-house laboratory.	Yes	Benton, Boone, Carroll, Madison, Newton, Washington
East	Helena	Research coordinator (TBH), APRN/RNs, health educators, prevention and wellness programs including a Fitness Center with strong community connections. Includes telehealth capabilities, the establishment of a Telehealth Training Center, and in-house laboratory.	Yes	Chicot, Crittenden, Desha, Lee, Monroe, Phillips, St. Francis
South Central	Pine Bluff	Research coordinator, diabetes educator, phlebotomist, family medicine residents, LPN / RN, access, and education staff for the residency program and students. Includes telehealth capabilities and in-house laboratory.	Yes	Arkansas, Cleveland, Drew, Garland, Grant, Jefferson, Hot Spring, Lincoln, Lonoke, Prairie, Saline
West	Fort Smith	Research coordinator, phlebotomists, health educator, pharmacists, family medicine residents, LPN / RN, access, and education staff for the residency program and students. Includes OB/GYN Services, telehealth capabilities, and in-house laboratory.	Yes	Conway, Crawford, Faulkner, Franklin, Johnson, Logan, Montgomery, Perry, Polk, Pope, Sebastian, Yell, Scott
North Central	Batesville	Research coordinator, phlebotomists, family medicine residents, LPN / RN, access, and education staff for the residency program and students. Includes telehealth capabilities and in-house laboratory.	Yes	Baxter, Cleburne, Fulton, Independence, Izard, Marion, Searcy, Sharp, Stone, White
Southwest	Texarkana	Research coordinator (TBH), phlebotomists, diabetes educator, pharmacists, family medicine residents, LPN / RN, access, and education staff for the residency program and students. Includes telehealth capabilities and in-house laboratory.	Yes	Clark, Hempstead, Howard, Pike, Lafayette, Little River, Miller, Nevada, Sevier
South	Magnolia and El Dorado	Research coordinator (TBH), family medicine residents, APRN/ RNs, access, phlebotomist, and education staff for the residency program and students. Includes telehealth capabilities and in-house laboratory.	Yes	Ashley, Bradley, Calhoun, Columbia, Dallas, Ouachita, Union
Northeast	Jonesboro	Research coordinator, phlebotomists, pharmacists, family medicine residents, LPN / RN, access, and education staff for the residency program and students. Includes OB/GYN Services telehealth capabilities and in-house laboratory.	Yes	Clay, Craighead, Cross, Greene, Jackson, Lawrence, Mississippi, Poinsett, Randolph, Woodruff

** Regional Programs are staffed with clinical teams for a family medicine practice. While resources are regional, depending on current patient volume and the depth or demand of the research project, resources may be budgeted within the project with prior approval.

For additional information about regional programs, go to the [REP 2022-2023 Annual Report](#). The latest reports from the Arkansas Central Cancer Registry, highlighting cancer research and statistics across Arkansas is available [here](#). Additionally, queries can be run using the Arkansas Central Cancer Registry's most updated data [here](#); select "Urban/Rural" on the "Geography" tab.

If using the Rural Research Network, please consider each site for the best fit for your study. Research coordinators with data collection and enrollment experience are physically located within 5 of the 8 study sites. Recruitment is underway to expand research support to all sites.

The following charts provide statistical information on each Rural Research Network

Regional Programs BoilerPlate Information (1-1-2024 to 12-31-2024)

Variable	Magnolia	Texarkana	Pine Bluff	Fayetteville	Fort Smith	Jonesboro	Batesville	Helena	El Dorado	Northwest Campus	Springdale	Total
Total Distinct Patients, N(%)	2071 (7.9)	6056 (9.8)	7333 (16.6)	5510 (5.6)	8149 (19.6)	5820 (7.8)	3712 (8.4)	995 (1.5)	3276 (3.3)	640 (0.7)	4092 (8.5)	46569
Total Patient Visits	20449 (7.9)	25223 (9.8)	42820 (16.6)	14331 (5.6)	50475 (19.6)	20201 (7.8)	21601 (8.4)	3775 (1.5)	8617 (3.3)	1747 (0.7)	21959 (8.5)	231198
Age (years), Mean (SD)	13	46	29	47	21	43	54	46	56	52	22	
Age Ranges, N(%)												
Under 12	15765 (77.1)	2810 (11.1)	20850 (48.7)	764 (5.3)	28577 (56.6)	2339 (11.6)	912 (4.2)	423 (11.2)	460 (5.3)	0 (0.0)	12791 (58.2)	85691 (37.1)
12-17	415 (2.0)	1883 (7.5)	561 (1.3)	720 (5.0)	3286 (6.5)	1287 (6.4)	670 (3.1)	190 (5.0)	70 (0.8)	0 (0.0)	1024 (4.7)	10106 (4.4)
18-24	339 (1.7)	1557 (6.2)	1233 (2.9)	1419 (9.9)	2740 (5.4)	1472 (7.3)	1176 (5.4)	194 (5.1)	269 (3.1)	98 (5.6)	896 (4.1)	11393 (4.9)
25-34	622 (3.0)	1714 (6.8)	2172 (5.1)	1696 (11.8)	2978 (5.9)	2288 (11.3)	1709 (7.9)	283 (7.5)	560 (6.5)	183 (10.5)	790 (3.6)	14995 (6.5)
35-44	525 (2.6)	2424 (9.6)	2672 (6.2)	1784 (12.4)	2813 (5.6)	2534 (12.5)	2031 (9.4)	582 (15.4)	822 (9.5)	209 (12.0)	1061 (4.8)	17457 (7.6)
45-54	692 (3.4)	3576 (14.2)	3236 (7.6)	1783 (12.4)	2604 (5.2)	2685 (13.3)	2781 (12.9)	522 (13.8)	1082 (12.6)	383 (21.9)	1189 (5.4)	20533 (8.9)
55-64	1033 (5.1)	4466 (17.7)	4337 (10.1)	2195 (15.3)	2809 (5.6)	3079 (15.2)	3802 (17.6)	526 (13.9)	1590 (18.5)	455 (26.0)	1581 (7.2)	25873 (11.2)
65-74	718 (3.5)	4305 (17.1)	4166 (9.7)	2190 (15.3)	2739 (5.4)	2538 (12.6)	3922 (18.2)	737 (19.5)	2060 (23.9)	317 (18.1)	1315 (6.0)	25007 (10.8)
75+	340 (1.7)	2488 (9.9)	3593 (8.4)	1780 (12.4)	1929 (3.8)	1979 (9.8)	4598 (21.3)	318 (8.4)	1704 (19.8)	102 (5.8)	1312 (6.0)	20143 (8.7)
Gender, N (%)												
Female	1149 (50.0)	3446 (52.7)	4342 (54.2)	3000 (50.3)	4525 (51.6)	3422 (56.2)	2145 (54.3)	641 (58.6)	1932 (56.9)	433 (58.4)	2178 (49.7)	27213 (69.5)
Male	922 (40.1)	2610 (39.9)	2991 (37.3)	2507 (42.0)	3624 (41.3)	2398 (39.4)	1566 (39.7)	354 (32.4)	1343 (39.5)	207 (27.9)	1914 (43.6)	20436 (52.2)
Missing	0 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.1)	0 (0.0)	0 (0.0)	less than 1 (0.0)	0 (0.0)	less than 10 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.0)
Race, N(%)												
NULL	less than 1 (0.0)	16 (0.2)	less than 1 (0.0)	less than 1 (0.1)	less than 10 (0.0)	less than 10 (0.1)	0 (0.0)	0 (0.0)	123 (3.8)	0 (0.0)	22 (0.5)	180 (0.4)
AMERICAN INDIAN OR ALASKAN NATIVE	less than 1 (0.2)	23 (0.4)	17 (0.2)	44 (0.7)	106 (1.2)	14 (0.2)	less than 1 (0.2)	less than 1 (0.1)	less than 10 (0.2)	less than 1 (0.3)	25 (0.6)	249 (0.5)
ASIAN	22 (1.0)	23 (0.4)	82 (1.0)	95 (1.6)	167 (1.9)	58 (1.0)	33 (0.8)	less than 1 (0.8)	14 (0.4)	13 (1.8)	34 (0.8)	550 (1.2)
BLACK OR AFRICAN AMERICAN	1316 (57.3)	2545 (39.0)	5414 (67.6)	413 (6.9)	907 (10.3)	1831 (30.1)	79 (2.0)	490 (44.8)	1324 (40.4)	19 (2.6)	192 (4.4)	14530 (30.5)
NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER	0 (0.0)	less than 1 (0.1)	less than 1 (0.1)	181 (3.0)	16 (0.2)	12 (0.2)	less than 1 (0.1)	less than 1 (0.2)	less than 10 (0.1)	277 (37.4)	122 (2.8)	624 (1.3)
OTHER	82 (3.6)	365 (5.6)	147 (1.8)	407 (6.8)	1971 (22.5)	421 (6.9)	241 (6.1)	16 (1.5)	46 (1.4)	19 (2.6)	673 (15.4)	4388 (9.2)
UNKNOWN (FOR USE IF PATIENT REFUSES OR	60 (2.6)	56 (0.9)	74 (0.9)	194 (3.3)	177 (2.0)	48 (0.8)	75 (1.9)	13 (1.2)	66 (2.0)	18 (2.4)	131 (3.0)	912 (1.9)
WHITE	585 (25.5)	3024 (46.4)	1590 (19.9)	4169 (70.0)	4803 (54.8)	3431 (56.4)	3274 (82.9)	464 (42.4)	1696 (51.8)	292 (39.4)	2893 (66.4)	26221 (55.0)
Ethnicity, N(%)												
ETHNICITY												
NULL	less than 1 (0.0)	11 (0.2)	less than 1 (0.1)	less than 1 (0.2)	less than 10 (0.0)	less than 10 (0.1)	0 (0.0)	0 (0.0)	119 (3.6)	0 (0.0)	22 (0.5)	176 (0.4)
African (Continental)	0 (0.0)	less than 1 (0.0)	less than 1 (0.1)	less than 1 (0.1)	less than 10 (0.0)	less than 10 (0.1)	less than 1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.1)	22 (0.0)
African American	100 (4.4)	72 (1.1)	134 (1.7)	74 (1.2)	27 (0.3)	43 (0.7)	less than 1 (0.2)	less than 1 (0.8)	21 (0.6)	less than 1 (0.4)	17 (0.4)	509 (1.1)
American Indian	less than 1 (0.1)	12 (0.2)	less than 1 (0.0)	12 (0.2)	47 (0.5)	less than 10 (0.1)	less than 1 (0.1)	0 (0.0)	less than 10 (0.1)	less than 1 (0.1)	less than 10 (0.2)	94 (0.2)
American Indian or Alaska Native: Not Specified	0 (0.0)	less than 1 (0.0)	less than 1 (0.0)	less than 1 (0.1)	18 (0.2)	less than 10 (0.0)	less than 1 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.0)	less than 10 (0.1)	41 (0.1)
American Indian or Alaska Native: Other	0 (0.0)	less than 1 (0.0)	0 (0.0)	less than 1 (0.1)	11 (0.1)	less than 10 (0.0)	less than 1 (0.1)	0 (0.0)	less than 10 (0.0)	0 (0.0)	less than 10 (0.1)	30 (0.1)
Arab or Middle Eastern	less than 1 (0.1)	less than 1 (0.0)	less than 1 (0.1)	12 (0.2)	10 (0.1)	10 (0.2)	0 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.0)	less than 10 (0.0)	45 (0.1)
Asian Indian/Indian Sub-Continent	less than 1 (0.1)	less than 1 (0.1)	16 (0.2)	18 (0.3)	34 (0.4)	less than 10 (0.1)	less than 1 (0.2)	less than 1 (0.4)	less than 10 (0.1)	less than 1 (0.4)	less than 10 (0.2)	108 (0.2)
Asian: Not Specified/Unknown	10 (0.4)	less than 1 (0.0)	14 (0.2)	22 (0.4)	47 (0.5)	17 (0.3)	less than 1 (0.2)	less than 1 (0.1)	less than 10 (0.1)	less than 1 (0.4)	less than 10 (0.1)	129 (0.3)
Asian: Other	10 (0.4)	less than 1 (0.1)	29 (0.4)	29 (0.5)	55 (0.6)	18 (0.3)	less than 1 (0.1)	0 (0.0)	0 (0.0)	less than 1 (0.4)	12 (0.3)	168 (0.4)
Black or African American: Not Specified/Unknown	265 (11.5)	736 (11.3)	781 (9.8)	95 (1.6)	278 (3.2)	533 (8.8)	21 (0.5)	104 (9.5)	98 (3.0)	less than 1 (0.9)	48 (1.1)	2966 (6.2)
Black or African American: Other	127 (5.5)	374 (5.7)	655 (8.2)	43 (0.7)	216 (2.5)	245 (4.0)	22 (0.6)	53 (4.8)	65 (2.0)	0 (0.0)	13 (0.3)	1813 (3.8)
Chinese	0 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.0)	0 (0.0)	less than 10 (0.1)	less than 1 (0.1)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.0)
Cuban	0 (0.0)	less than 1 (0.1)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.1)	0 (0.0)	less than 1 (0.0)
European Descent	less than 1 (0.0)	less than 1 (0.0)	less than 1 (0.1)	15 (0.3)	less than 10 (0.0)	less than 10 (0.1)	less than 1 (0.1)	less than 1 (0.1)	less than 10 (0.1)	less than 1 (0.1)	less than 10 (0.1)	44 (0.1)
Filipino	0 (0.0)	less than 1 (0.1)	less than 1 (0.1)	less than 1 (0.0)	less than 10 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	14 (0.0)
Guamanian or Chamorro	0 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.0)	less than 10 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.0)
Haitian	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.0)
Hispanic or Latino	57 (2.5)	270 (4.1)	50 (0.6)	544 (9.1)	2221 (25.3)	370 (6.1)	217 (5.5)	15 (1.4)	64 (2.0)	27 (3.6)	1098 (25.2)	4933 (10.4)
Hispanic/Latino: Not Specified/Unknown	less than 1 (0.3)	20 (0.3)	less than 1 (0.0)	15 (0.3)	104 (1.2)	13 (0.2)	15 (0.4)	less than 1 (0.1)	less than 10 (0.0)	0 (0.0)	15 (0.3)	196 (0.4)
Hispanic/Latino: Other	less than 1 (0.1)	17 (0.3)	less than 1 (0.0)	10 (0.2)	58 (0.7)	15 (0.2)	less than 1 (0.2)	580 (53.0)	less than 10 (0.1)	0 (0.0)	10 (0.2)	706 (1.5)
Japanese	0 (0.0)	less than 1 (0.0)	less than 1 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.0)	less than 1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.0)
Korean	0 (0.0)	less than 1 (0.0)	less than 1 (0.0)	less than 1 (0.0)	0 (0.0)	less than 10 (0.0)	less than 1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.0)	less than 1 (0.0)
Mexican	0 (0.0)	less than 1 (0.1)	less than 1 (0.0)	less than 1 (0.1)	28 (0.3)	less than 10 (0.0)	less than 1 (0.2)	0 (0.0)	less than 10 (0.1)	0 (0.0)	less than 10 (0.1)	62 (0.1)
Native Hawaiian	0 (0.0)	less than 1 (0.0)	less than 1 (0.0)	less than 1 (0.1)	less than 10 (0.0)	less than 10 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.3)	less than 10 (0.1)	18 (0.0)
Native Hawaiian or Other Pacific Islander: Not Specified	0 (0.0)	0 (0.0)	less than 1 (0.0)	36 (0.6)	less than 10 (0.0)	less than 10 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.8)	40 (0.9)	109 (0.2)
Native Hawaiian or Other Pacific Islander: Other	0 (0.0)	0 (0.0)	less than 1 (0.0)	96 (1.6)	less than 10 (0.0)	less than 10 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.0)	195 (26.3)	41 (0.9)	341 (0.7)
Non-Hispanic or Latino	1175 (51.1)	3178 (48.7)	5194 (64.9)	3193 (53.6)	2212 (25.2)	3424 (56.3)	1486 (37.6)	0 (0.0)	2610 (79.6)	287 (38.7)	2165 (49.6)	24924 (52.3)
North African (Non-Black)	less than 1 (0.1)	10 (0.2)	less than 1 (0.1)	less than 1 (0.0)	less than 10 (0.0)	less than 10 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.1)	0 (0.0)	less than 10 (0.0)	29 (0.1)
Puerto Rican (Island)	0 (0.0)	less than 1 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.1)	0 (0.0)	0 (0.0)	less than 1 (0.0)
Puerto Rican (Mainland)	less than 1 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.0)	less than 10 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.0)
Unknown	40 (1.7)	43 (0.7)	56 (0.7)	124 (2.1)	136 (1.6)	28 (0.5)	41 (1.0)	less than 1 (0.6)	77 (2.3)	less than 1 (1.2)	100 (2.3)	661 (1.4)
Vietnamese	0 (0.0)	0 (0.0)	less than 1 (0.0)	less than 1 (0.0)	11 (0.1)	less than 10 (0.0)	less than 1 (0.1)	0 (0.0)	0 (0.0)	less than 1 (1.1)	less than 10 (0.0)	25 (0.1)
West Indian	0 (0.0)	less than 1 (0.0)	less than 1 (0.0)	less than 1 (0.0)	less than 10 (0.1)	less than 10 (0.0)	less than 1 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.1)	less than 10 (0.0)	16 (0.0)
White: Not Specified/Unknown	112 (4.9)	706 (10.8)	200 (2.5)	708 (11.9)	1882 (21.5)	624 (10.3)	1010 (25.6)	151 (13.8)	93 (2.8)	41 (5.5)	300 (6.9)	5827 (12.2)

White: Other	153 (6.7)	560 (8.6)	147 (1.8)	422 (7.1)	722 (8.2)	416 (6.8)	837 (21.2)	69 (6.3)	105 (3.2)	23 (3.1)	154 (3.5)	3608 (7.6)
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Health Literacy, N(%)

Null	0 (0.0)	less than 1 (0.2)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.2)	0 (0.0)	0 (0.0)	0 (0.0)	less than 1 (0.1)
A little	less than 1 (3.8)	less than 1 (1.7)	14 (1.7)	14 (3.0)	20 (2.9)	16 (3.8)	14 (2.5)	less than 1 (1.7)	33 (1.8)	less than 1 (2.3)	less than 10 (1.2)	less than 10 (1.2)	133 (2.4)
English translation required (do not translate)	less than 1 (1.9)	0 (0.0)	less than 1 (0.6)	less than 1 (1.3)	73 (10.4)	less than 10 (1.2)	20 (3.5)	0 (0.0)	less than 10 (0.1)	33 (25.2)	less than 10 (1.6)	less than 10 (1.6)	151 (2.7)
Extremely	11 (7.0)	329 (62.8)	407 (48.7)	265 (57.0)	296 (42.2)	213 (50.8)	318 (56.4)	42 (70.0)	1456 (79.6)	66 (50.4)	111 (43.5)	3514 (63.3)	
Not at all	less than 1 (0.6)	14 (2.7)	18 (2.2)	less than 1 (1.3)	18 (2.6)	24 (5.7)	less than 1 (1.4)	0 (0.0)	44 (2.4)	0 (0.0)	less than 10 (0.8)	less than 10 (0.8)	135 (2.4)
Quite a bit	117 (74.1)	87 (16.6)	276 (33.0)	96 (20.6)	177 (25.2)	86 (20.5)	149 (26.4)	less than 1 (13.3)	170 (9.3)	less than 1 (6.9)	100 (39.2)	1275 (23.0)	
Somewhat	less than 1 (2.5)	38 (7.3)	55 (6.6)	39 (8.4)	67 (9.6)	42 (10.0)	32 (5.7)	less than 1 (3.3)	64 (3.5)	less than 1 (3.8)	less than 10 (3.5)	less than 10 (3.5)	357 (6.4)

Insurance, N(%)

NULL	18 (0.8)	489 (8.1)	86 (1.1)	1154 (24.0)	115 (1.3)	903 (17.4)	46 (1.2)	23 (2.1)	132 (4.0)	78 (11.8)	1279 (41.2)	4323 (8.6)	
AGENCY	67 (2.9)	62 (1.0)	77 (1.0)	131 (2.7)	124 (1.4)	36 (0.7)	55 (1.4)	less than 1 (0.5)	23 (0.7)	23 (3.5)	54 (1.7)	657 (1.3)	
BLUE CROSS AND BLUE SHIELD	449 (19.7)	849 (14.0)	1627 (20.5)	957 (19.9)	1138 (13.2)	902 (17.4)	998 (25.6)	280 (26.1)	790 (24.2)	164 (24.7)	606 (19.5)	8760 (17.5)	
COMMERCIAL AND MANAGED CARE	202 (8.9)	684 (11.3)	1438 (18.1)	1099 (22.8)	972 (11.2)	768 (14.8)	829 (21.3)	0 (0.0)	387 (11.8)	168 (25.3)	542 (17.4)	7089 (14.2)	
INTERNATIONAL	less than 1 (0.0)	less than 1 (0.0)	less than 1 (0.0)	less than 1 (0.1)	0 (0.0)	0 (0.0)	0 (0.0)	244 (22.8)	0 (0.0)	0 (0.0)	less than 10 (0.1)	less than 10 (0.1)	252 (0.5)
MEDICAID	1035 (45.4)	2311 (38.2)	2275 (28.7)	1336 (27.8)	4700 (54.3)	2276 (43.9)	647 (16.6)	292 (27.3)	624 (19.1)	204 (30.8)	1202 (38.7)	16902 (33.8)	
MEDICAID MANAGED CARE	59 (2.6)	586 (9.7)	191 (2.4)	130 (2.7)	152 (1.8)	217 (4.2)	58 (1.5)	19 (1.8)	20 (0.6)	less than 1 (0.9)	103 (3.3)	1541 (3.1)	
MEDICARE	178 (7.8)	672 (11.1)	1009 (12.7)	581 (12.1)	540 (6.2)	455 (8.8)	738 (18.9)	107 (10.0)	653 (20.0)	24 (3.6)	274 (8.8)	5231 (10.5)	
MEDICARE MANAGED CARE	130 (5.7)	476 (7.9)	853 (10.8)	288 (6.0)	502 (5.8)	293 (5.6)	283 (7.3)	78 (7.3)	654 (20.0)	30 (4.5)	139 (4.5)	3726 (7.4)	
OTHER GOVERNMENT	21 (0.9)	147 (2.4)	65 (0.8)	54 (1.1)	50 (0.6)	54 (1.0)	57 (1.5)	less than 1 (0.3)	13 (0.4)	less than 1 (0.6)	15 (0.5)	483 (1.0)	
PENDING MEDICAID	61 (2.7)	72 (1.2)	138 (1.7)	38 (0.8)	111 (1.3)	63 (1.2)	31 (0.8)	14 (1.3)	45 (1.4)	less than 1 (0.2)	37 (1.2)	611 (1.2)	
SELF-PAY	67 (2.9)	167 (2.8)	188 (2.4)	183 (3.8)	349 (4.0)	110 (2.1)	187 (4.8)	24 (2.2)	49 (1.5)	39 (5.9)	126 (4.1)	1489 (3.0)	
WORKER'S COMP	less than 1 (0.0)	less than 1 (0.0)	0 (0.0)	less than 1 (0.0)	less than 10 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	0 (0.0)	less than 10 (0.0)	less than 10 (0.0)	less than 1 (0.0)
WORKER'S COMPENSATION	10 (0.4)	19 (0.3)	61 (0.8)	10 (0.2)	13 (0.2)	13 (0.3)	18 (0.5)	less than 1 (0.5)	less than 10 (0.2)	0 (0.0)	less than 10 (0.2)	less than 10 (0.2)	163 (0.3)