	SECTION 10 - CURRENT PHYSI	CAL HEALTH (	CONTINUED)		
97.	routine checkups?	☐ Within the p ☐ Number ☐ Never ☐ Don't Know ☐ Refused	er of years ago Go to 106	-	
98.	Who paid for your visit?	□ No one paid the bill □ Health Care for the Homeless clinic □ Migrant health care facility □ Other free clinic □ Veterans' Affairs (VA) □ Medicaid/Welfare/Public Insurance □ Private insurance □ Other - Specify □ I paid myself □ Don't Know □ Refused			
99.	In the last year, have you gotten medical care from any of the following places? (Read categories and mark (X) all that apply.	, 			
	OUTPATIENT CARE	Yes	No	Don't know	Refused
	a. A hospital emergency room	10	<b>2</b> D	<b>*</b> D	40,
	b. A hospital clinic	10	20	- a 🛘	40
	c. A VA hospital as an inpatient	10	20	<b>,</b> D	40
	d. Any other hospital as an inpatient	10	20	<b>*</b> D	40
	e. A VA clinic	10	20	<b>*</b> D	40
	f. A community health clinic	10	20	*D	40
	g. A migrant health care facility	,0	20	<b>.</b> D	40
	h. Health Care for the homeless clinic	10	2 D	<b>3</b> D	40
	INPATIENT CARE  i. A doctor or nurse in a shelter	םי	20	•0	40
	or soup kitchen	10	20	<b>3</b> D	40
	j. A private doctor's office (not in a hospital or clinic)	1			
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