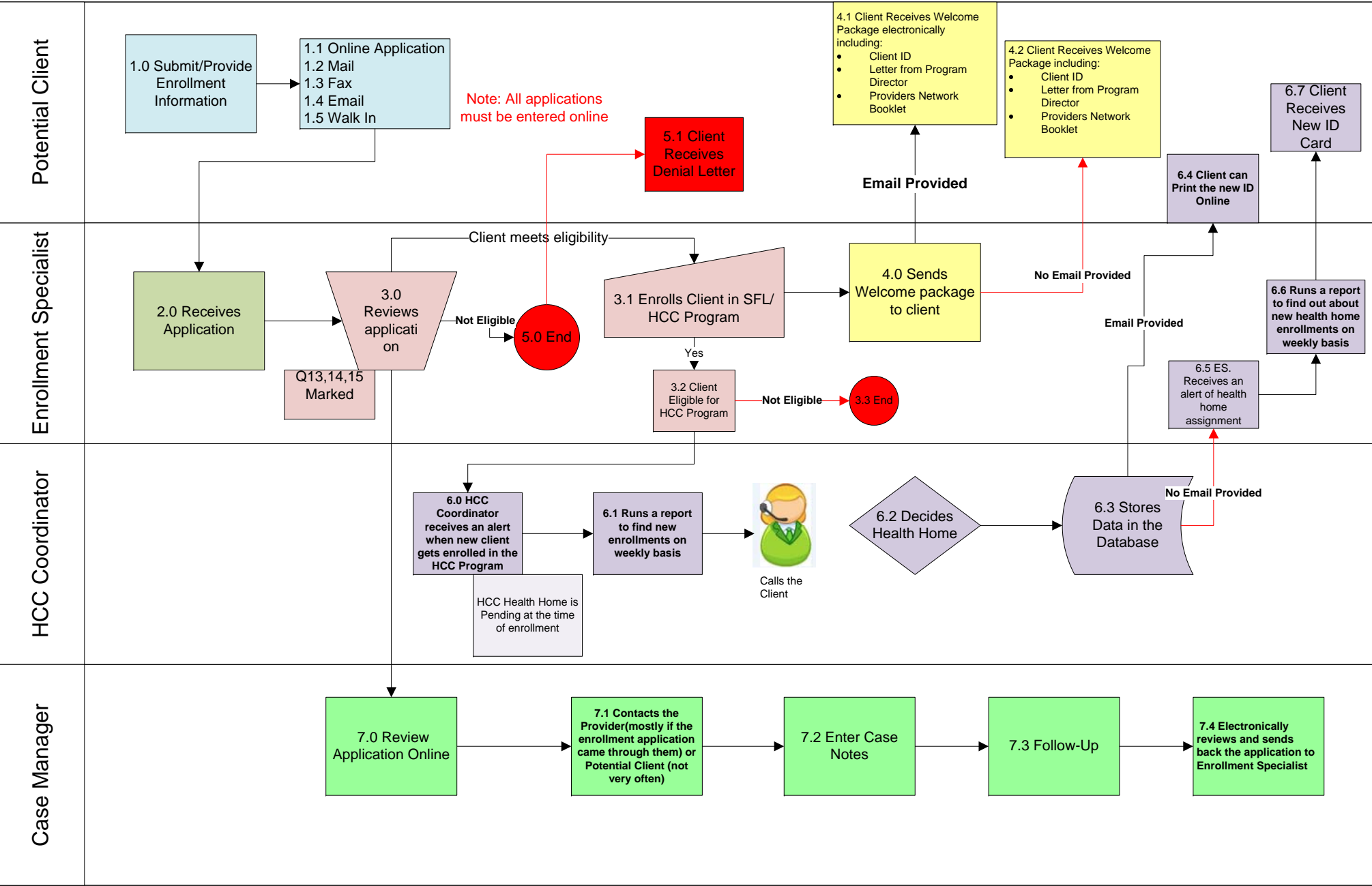


To- Be SFL/HCC Enrollment & Eligibility



Q13. What type of assistance, if any do you need in making or keeping medical appointments?
Q14. In the past 6 months, have you had any health problems?
Q15. Have you or any member of your family had cancer?