## DEBT COLLECTION / FINANCIAL ASSISTANCE REPORT

Hospital Name: University of Maryland Medical Center Period FY21

Hospital Name: University of Maryland Medical Center

10002

		Column 1	Column 2	Column 3	Column 4	Column 5	Column 6	Column 7	Column 8	Column 9	Column 10
	CREDIT & COLLECTION										
(1) (2) (3) (4) (5)	Collection Agency Name Bloom & Associates, P.A. MAMI Receivables Outsourcing, Inc. ProCo LLC										
(6)	Number of liens										
(7)	Number of Extended Payments Plans	283									
	FINANCIAL ASSISTANCE										
(8)	Total Number of Patients Who Completed a Financial Assistance Application	749									
(9)	Total Number of Patients Who Partially Completed a Financial Assistance Application	174									
(10)	Total Number of patients Who Received Free Care	359									
(11)	Total Number of patients Who Received Reduced-Cost Care	68									
			Spanish or <u>Hispanic</u>	White	Black or African American	American Indian or Alaska Native	<u>Asian</u>	Native Hawaiian or Other Pacific <u>Islander</u>	<u>Other</u>	Declined to Answer	Unknown or Cannot be Determined
(12)	Number of Patients Who Received Financial Assistance by Race or Ethnicity	427	0	217	120	2	12	1	73	1	1
(13)	Number of Male or Male Gender Identity Patients Who Received Finacial Assistance	147	0	95	26	0	5	0	21	0	0
(14)	Number of Female or Female Gender Identity Patients Who Received Finacial Assistance	280	0	122	94	2	7	1	52	1	1
(15)	Number of Patients Who Do Not Identity by Gender Who Received Finacial Assistance	0	0	0	0	0	0	0	0	0	0
(16)	Number of Patients Who Were Denied Financial Assistance by Race or Ethnicity	315	0	118	125	1	14	1	53	1	2
(17)	Number of Male or Male Gender Identity Patients Who Were Denied Finacial Assistance	141	0	61	41	1	7	1	29	0	1
(18)	Number of Female or Female Gender Identity Patients Who Were Denied Finacial Assistance	174	0	57	84	0	7	0	24	1	1
(19)	Number of Patients Who Do Not Identity by Gender Who Were Denied Finacial Assistance	0	0	0	0	0	0	0	0	0	0
(20)	Total Amount of Charges for Hospital Services Provided to Patients Who Received Free Care	\$ 18,077,096									
(21)	Total Amount of Charges for Hospital Services Provided to Patients Who Received Reduced-Cost Care Whether Covered by Financial Assistance or Billed to the Patient	\$ 2,587,411									