## DCFA SCHEDULE

Hospital Name: MERCY MEDICAL CENTER Hospital Number: 0008 Period: FY 2021

		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	Nationwide Bloom & Associates, P.A.									
(6)	Number of liens	60									
(7)	Number of Extended Payments Plans	11									
	FINANCIAL ASSISTANCE										
(8)	Total Number of Patients Who Completed a Financial Assistance Application	339									
(9)	Total Number of Patients Who Partially Completed a Financial Assistance Application	N/A									
(10)	Total Number of patients Who Received Free Care	5,859									
(11)	Total Number of patients Who Received Reduced-Cost Care	21,012									
			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		2,022	5,005	19,854	59	221	48	1,863	73	87
(13)	Number of Male or Male Gender Identity Patients Who Received Finacial Assistance		594	2,108	6,827	28	68	16	521	27	49
(14)	Number of Female or Female Gender Identity Patients Who Received Finacial Assistance		1,428	2,895	13,027	31	153	32	1,342	46	38
(15)	Number of Patients Who Do Not Identity by Gender Who Received Finacial Assistance		0	2	0	0	0	0	0	0	0
(16)	Number of Patients Who Were Denied Financial Assistance by Race or Ethnicity		4	28	28	0	5	0	4	0	0
(17)	Number of Male or Male Gender Identity Patients Who Were Denied Finacial Assistance		0	6	2	0	3	0	0	0	0
(18)	Number of Female or Female Gender Identity Patients Who Were Denied Finacial Assistance		4	22	26	0	2	0	4	0	0
(19)	Number of Patients Who Do Not Identity by Gender Who Were Denied Finacial Assistance		0	0	0	0	0	0	0	0	0
(20)	Total Amount of Charges for Hospital Services Provided to Patients Who Received Free Care	\$ 6,896,510									
(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	\$ 10,466,000									