Illinois Health Facilities Services and Review Board:

I am writing this letter anonymously as we have been threatened by the administration of Mercy Hospital, that coming forward regarding the closure would mean termination. I had planned to attend not for myself, but rather for the patients that I serve. I have been involved with Mercy Hospital and Medical Center for 41 years. I have seen the many changes that have occurred after Trinity Health Care took over Mercy Hospital but our patient population remains the same. We treat the underinsured and uninsured. We have always cared for these people regardless of where they came from, no questions asked. It is important that you understand exactly how much these patients need our help. Many of us could work elsewhere for much higher wages but it is our choice to serve this population and we have done so with great pride. These patients are mainly Black, Hispanic, and Chinese., who ace significant challenges in seeking out medical care. I have found many patients have limited grasp of the English language while others have little to no reading skills. They often come to us at a extremely advanced stage as they don't trust the system to seek help at an earlier point in their illness. Many Blacks are afraid to come to the hospital because of the mistreatment over the years, as evidenced by the Tuskegee Study of Untreated Syphilis in the Negro male. I have witnessed first hand the mistrust, but we at Mercy have always worked to gain the trust of these patients by treating them as individuals, not a number. The Hispanic and Chinese patients wait either because of insurance issues or the language barrier. At Mercy we have always worked to not only treat the body but the mind and spirit as well. Transportation also poses a huge hurdle as many of the patients do not own cars and depend on public transportation. Without a hospital nearby, many patients will just not seek care. They have verbalized this to me personally. I have experienced trying to make appointments at Northwestern and the University of Chicago for patients when we are unable to provide a service or the patient would like a second opinion. The first question asked is the insurance type and then I am either told that they don't take that insurance or the patient is given an appointment so far out that it is not reasonable. This is my personal experience! The patients that we do send will return feeling marginalized and defeated.

I know firsthand the importance of personal care with cancer patients. They rely on you. They believe you are a lifeline. We at Mercy treat them as family. We come to know them and their needs. There is many times a patient cannot afford the needed nausea medication and again I have seen nurses and physicians give patients the money needed for the medication. I have seen patients who need assistance with filling out forms and not complying, only to learn that the have limited reading skills and are too embarrassed to admit it. The nurses take on that responsibility, many times on their own time to help the patients comply to receive the needed medication. These patients are very sick and fighting for their lives but many have said that they will not be able to travel to get to the treatments if Mercy closes. These patients have voiced their fears about losing their lifeline with this closure. They have come to believe and depend on their doctors and nurses and now must find a new hospital and healthcare team.

I am asking you members of this committee to put yourself in their shoes. Try to imagine that in the midst of fighting to live you must now find care elsewhere. This is a vulnerable population that already mistrusts the system.

The Obstetrics Department at Mercy last year delivered more babies than Prentice Northwestern. Where are these women going to go? How far do they have to travel when transportation is an issue? An outpatient center is not going to deliver babies. Many of these women have little insurance. At Mercy they are not only treated with dignity and respect but they are taught how to care for these infants before they are discharged. The nurses make sure that the mothers are equipped with what they need prior to discharge.

Mercy Hospital was founded in 1827. It is the oldest chartered hospital in the City of Chicago. It survived and treated the victims of the Chicago Fire. It is a premier teaching hospital with its physicians in practice throughout the country in numbers too many to count. Losing this teaching program will be a huge loss to the Medical Community as physicians will no longer learn how to deal and work with patients in a marginalized community.

Let's review some numbers:

- Mercy did over 3000 procedures last year or one procedure every hour.
- Mercy Medical Group had 100,000 patient visits last year or more patients than a sold out Bears Game.
- Mercy Emergency Room had 45,000 visits with is more patients than a sold out Cubs game.
- Trinity Healthcare has closed 9 safety net hospitals.

The dire need of Mercy Hospital on Chicago's South Side does not even factor in the ongoing pandemic. How do you close a hospital during a pandemic? Patients are not going to travel far when they are sick. This is the very definition of racial disparity. **This is going to be a healthcare desert and people are going to die! I am asking you to please Save Mercy Hospital.** Please search your conscience and make the right choice for this population.

Thank you,

Anonymous not by choice.