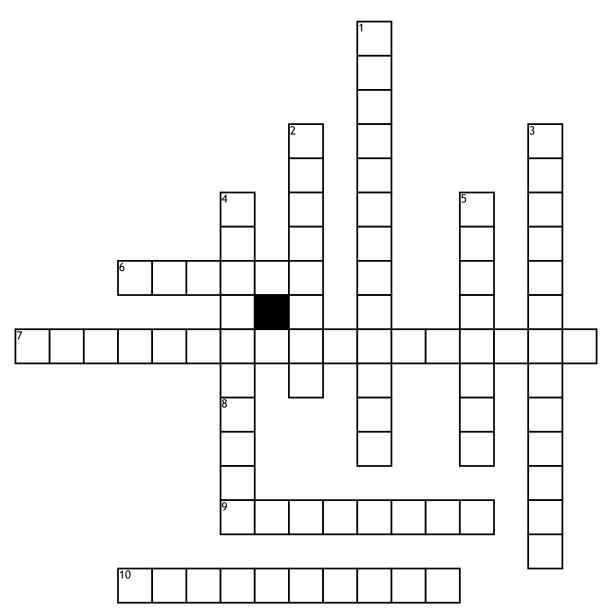
Name:	Date:
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XTEND



Across

- **6.** If you qualify for financial assistance, so does your dependents under 18 years and your _____
- 7. Where do you go to find the EPPC application template
- **8.** T OR F BAD DEBT IS NEVER INCLUDED IN FINANCIAL ASSISTANCE
- **9.** Maximum amount of months for a Mercy Payment plan
- 10. WHAT IS OUR FAX NUMBER

Down

- 1. Commerce bank cannot accept payments from flex benifits or _____ accounts.
- 2. EPPC is through what bank
- **3.** What is the Note code for financial assistance
- **4.** How many days could it take for financial assistance to be approved
- **5.** Patients have how many days to cancel the agreement for their EPPC