

PHOEBE WORTH MEDICAL CENTER, INC.

FINANCIAL STATEMENTS

for the years ended July 31, 2024 and 2023



PHOEBE WORTH MEDICAL CENTER, INC.

FINANCIAL STATEMENTS

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INDEPENDENT AUDITOR'S REPORT

Board of Directors
Phoebe Worth Medical Center, Inc.
Sylvester, Georgia

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of Phoebe Worth Medical Center, Inc. (Hospital), which comprise the balance sheets as of July 31, 2024 and 2023, and the related statements of operations and changes in net assets, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Hospital as of July 31, 2024 and 2023, and the results of its operations and changes in its net assets, and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Hospital and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Emphasis of Matter

As discussed in Note 14 to the financial statements, the Hospital is fiscally dependent on Phoebe Putney Health System, Inc. Our opinion is not modified with respect to that matter.

Continued

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Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Hospital's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment of a reasonable user based on these financial statements.

In performing an audit in accordance with generally accepted auditing standards and *Government Auditing Standards*, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Hospital's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Hospital's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

Continued

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated January 15, 2025, on our consideration of the Hospital's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Hospital's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Hospital's internal control over financial reporting and compliance.

A handwritten signature in black ink that reads "Draffin & Tucker, LLP". The signature is written in a cursive, flowing style.

Albany, Georgia
January 15, 2025

PHOEBE WORTH MEDICAL CENTER, INC.

BALANCE SHEETS, July 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
ASSETS		
Current assets:		
Cash	\$ 7,345,000	\$ 7,964,000
Patient accounts receivable, net	4,015,000	2,769,000
Supplies	239,000	238,000
Other current assets	<u>166,000</u>	<u>160,000</u>
Total current assets	<u>11,765,000</u>	<u>11,131,000</u>
Property and equipment, net	<u>8,491,000</u>	<u>7,973,000</u>
Total assets	<u>\$ 20,256,000</u>	<u>\$ 19,104,000</u>
LIABILITIES AND NET ASSETS		
Current liabilities:		
Current portion of finance lease liabilities	\$ 77,000	\$ 104,000
Accounts payable	433,000	807,000
Accrued expenses	1,226,000	1,255,000
Estimated third-party payor settlements	<u>564,000</u>	<u>931,000</u>
Total current liabilities	2,300,000	3,097,000
Due to related parties	10,125,000	12,129,000
Finance lease liabilities, net of current portion	<u>197,000</u>	<u>275,000</u>
Total liabilities	12,622,000	15,501,000
Net assets without donor restrictions	<u>7,634,000</u>	<u>3,603,000</u>
Total liabilities and net assets	<u>\$ 20,256,000</u>	<u>\$ 19,104,000</u>

See accompanying notes to financial statements.

PHOEBE WORTH MEDICAL CENTER, INC.

STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS
for the years ended July 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
Operating revenues, gains, and other support:		
Net patient service revenue	\$ 24,076,000	\$ 23,007,000
Other revenue	944,000	495,000
Grant stimulus funding	<u>6,000</u>	<u>84,000</u>
Total operating revenues, gains, and other support	<u>25,026,000</u>	<u>23,586,000</u>
Operating expenses:		
Salaries and wages	7,567,000	7,132,000
Employee health and welfare	2,243,000	1,768,000
Medical supplies and other	4,616,000	4,072,000
Purchased services	6,247,000	7,046,000
Depreciation and amortization	974,000	891,000
Interest	<u>16,000</u>	<u>21,000</u>
Total operating expenses	<u>21,663,000</u>	<u>20,930,000</u>
Operating income	3,363,000	2,656,000
Nonoperating income:		
Contributions and other nonoperating income	<u>668,000</u>	<u>546,000</u>
Excess revenues	<u>4,031,000</u>	<u>3,202,000</u>
Capital contributions	<u>-</u>	<u>611,000</u>
Increase in net assets	<u>4,031,000</u>	<u>3,813,000</u>
Net assets (deficit), beginning of year	<u>3,603,000</u>	<u>(210,000)</u>
Net assets, end of year	<u>\$ 7,634,000</u>	<u>\$ 3,603,000</u>

See accompanying notes to financial statements.

PHOEBE WORTH MEDICAL CENTER, INC.

STATEMENTS OF CASH FLOWS
for the years ended July 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
Cash flows from operating activities:		
Increase in net assets	\$ 4,031,000	\$ 3,813,000
Adjustments to reconcile increase in net assets to net cash provided by operating activities:		
Depreciation and amortization	974,000	891,000
Proceeds from capital contributions	-	(611,000)
Changes in:		
Patient accounts receivable, net	(1,246,000)	(517,000)
Estimated third-party payor settlements	(367,000)	1,076,000
Supplies	(1,000)	(13,000)
Grant stimulus refundable advance	-	(78,000)
Other current assets	(6,000)	1,379,000
Accounts payable	(401,000)	409,000
Accrued expenses	(29,000)	213,000
Net cash provided by operating activities	<u>2,955,000</u>	<u>6,562,000</u>
Cash flows from investing activities:		
Purchase of property and equipment	<u>(1,465,000)</u>	<u>(1,802,000)</u>
Net cash used by investing activities	<u>(1,465,000)</u>	<u>(1,802,000)</u>
Cash flows from financing activities:		
Advances from related parties	9,032,000	8,515,000
Payments on finance lease liabilities	(105,000)	(107,000)
Proceeds from capital contributions	-	611,000
Payments to related parties	<u>(11,036,000)</u>	<u>(11,444,000)</u>
Net cash used by financing activities	<u>(2,109,000)</u>	<u>(2,425,000)</u>
Increase (decrease) in cash	(619,000)	2,335,000
Cash, beginning of year	<u>7,964,000</u>	<u>5,629,000</u>
Cash, end of year	<u>\$ 7,345,000</u>	<u>\$ 7,964,000</u>
Supplemental disclosure of cash flow information:		
Cash paid for interest	<u>\$ 16,000</u>	<u>\$ 21,000</u>

Property and equipment in accounts payable as of July 31, 2024 and 2023 was approximately \$27,000 and \$334,000, respectively.

See accompanying notes to financial statements.

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS

July 31, 2024 and 2023

1. Summary of Significant Accounting Policies

Organization

Phoebe Worth Medical Center, Inc. (Hospital) was organized on January 23, 2002 as a nonprofit corporation and is a wholly-owned subsidiary of Phoebe Putney Health System, Inc. (System). The Hospital is a critical access hospital located in Sylvester, Georgia. The Hospital provides inpatient, outpatient and emergency care services to local residents.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Patient Accounts Receivable

Patient accounts receivable reflects the outstanding amount of consideration to which the Hospital expects to be entitled in exchange for providing patient care. These amounts are due from patients, third-party payors (including health insurers and government programs), and others. As a service to the patient, the Hospital bills third-party payors directly and bills the patient when the patient's responsibility for copays, coinsurance, and deductibles is determined. Patient accounts receivable are due in full when billed.

Patient accounts receivable can be impacted by the effectiveness of the Hospital's collection efforts. Additionally, significant changes in payor mix, business office operations, economic conditions, or trends in federal and state governmental healthcare coverage could affect the net realizable value of patient accounts receivable. The Hospital also continually reviews the net realizable value of patient accounts receivable by monitoring historical cash collections as a percentage of trailing net patient service revenues, as well as by analyzing current period net revenue and admissions by payor classification, aged patient accounts receivable by payor, days revenue outstanding, and the composition of self-pay receivables between pure self-pay patients and the patient responsibility portion of third-party insured receivables.

Patient accounts receivable was approximately \$4,015,000, \$2,769,000 and \$2,252,000 as of July 31, 2024, 2023 and 2022, respectively. The Hospital had no significant contract assets or contract liabilities as of July 31, 2024 or 2023.

Allowance for Credit Losses

In evaluating the collectability of patient accounts receivable, management evaluates historical losses as well as adjustments for current conditions, asset-specific risk characteristics and reasonable and supportable forecasts to determine an allowance for expected credit losses. Management believes that an allowance for credit losses is not required at year-end.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

1. Summary of Significant Accounting Policies, Continued

Supplies

Supplies, which consist primarily of drugs and medical supplies, are valued at the lower of cost and net realizable value, as determined on a first-in, first-out basis.

Property and Equipment

Property and equipment acquisitions over \$5,000 are recorded at cost. Depreciation is provided over the estimated useful life of each class of depreciable asset and is computed on the straight-line method. Finance lease assets are amortized on the straight-line method over the shorter period of the lease term or the estimated useful life of the asset. Such amortization is included in depreciation and amortization in the statements of operations and changes in net assets. Interest cost incurred on borrowed funds during the period of construction of capital assets is capitalized as a component of the cost of acquiring those assets.

Gifts of long-lived assets such as land, buildings, or equipment are reported as increases in net assets without donor restrictions, and are excluded from excess revenues, unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as increases in net assets with donor restrictions. Absent explicit donor stipulations about how long those long-lived assets must be maintained; expirations of donor restrictions are reported when the donated or acquired long-lived assets are placed in service.

Impairment of Long-Lived Assets

The Hospital evaluates on an ongoing basis the recoverability of its assets for impairment whenever events or changes in circumstances indicate that the carrying amount may not be recoverable. An impairment loss is required to be recognized if the carrying value of the asset exceeds the undiscounted future net cash flows associated with that asset. The impairment loss to be recognized is the amount by which the carrying value of the long-lived asset exceeds the asset's fair value. In most instances, the fair value is determined by discounted estimated future cash flows using an appropriate interest rate. The Hospital has not recorded any impairment charges in the accompanying statements of operations and changes in net assets for the years ended July 31, 2024 and 2023.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

1. Summary of Significant Accounting Policies, Continued

Net Assets

Net assets, revenues, gains, and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets and changes therein are classified and reported as follows:

Net assets without donor restrictions – net assets available for use in general operations and not subject to donor-imposed restrictions. The Board of Directors has discretionary control over these resources. Designated amounts represent those net assets that the Board has set aside for a particular purpose. All revenue not restricted by donors and donor restricted contributions whose restrictions are met in the same period in which they are received are accounted for in net assets without donor restrictions.

Net assets with donor restrictions – net assets subject to donor-imposed restrictions. Some donor-imposed restrictions are temporary in nature, such as those that will be met by the passage of time or other events specified by the donor. Other donor-imposed restrictions are perpetual in nature, where the donor stipulates that resources be maintained in perpetuity. All revenues restricted by donors as to either timing or purpose of the related expenditures or required to be maintained in perpetuity as a source of investment income are accounted for in net assets with donor restrictions. When a donor restriction expires, that is when a stipulated time restriction ends or purpose restriction is accomplished, net assets with donor restrictions are reclassified to net assets without donor restrictions.

Excess Revenues

The statements of operations and changes in net assets include excess revenues. Changes in net assets without donor restrictions which are excluded from excess revenues, consistent with industry practice, include permanent transfers of assets to and from affiliates for other than goods and services, and contributions of long-lived assets (including assets acquired using contributions which by donor restriction were to be used for the purposes of acquiring such assets).

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

1. Summary of Significant Accounting Policies, Continued

Net Patient Service Revenue

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. Payment arrangements include prospectively determined rates per discharge, reimbursed costs, discounted charges, and per diem payments. Net patient service revenue is reported at the amount that reflects the consideration to which the Hospital expects to be entitled in exchange for providing patient care. These amounts are due from patients, third-party payors, and others and includes variable consideration for retroactive revenue adjustments under reimbursement arrangements with third-party payors. Retroactive adjustments are included in the determination of the estimated transaction price and adjusted in future periods as settlements are determined.

Charity Care

The Hospital provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Because the Hospital does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenues.

Donor-Restricted Gifts

Unconditional promises to give cash and other assets to the Hospital are reported at fair value at the date the promise is received. Conditional promises to give, that is, those with a measurable performance or other barrier, and a right of return, are not recognized until the conditions on which they depend have been substantially met. Conditional gifts received prior to the satisfaction of conditions are recorded as refundable advances. The gifts are reported as increases in the appropriate categories of net assets in accordance with donor restrictions.

Estimated Malpractice and Other Self-Insurance Costs

The provisions for estimated medical malpractice claims and other claims under self-insurance plans include estimates of the ultimate costs for both reported claims and claims incurred but not reported.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

1. Summary of Significant Accounting Policies, Continued

Income Taxes

The Hospital is a not-for-profit corporation that has been recognized as tax-exempt pursuant to Section 501(c)(3) of the Internal Revenue Code.

The Hospital applies accounting policies that prescribe when to recognize and how to measure the financial statement effects of income tax positions taken or expected to be taken on its income tax returns. These rules require management to evaluate the likelihood that, upon examination by the relevant taxing jurisdictions, those income tax positions would be sustained. Based on that evaluation, the Hospital only recognizes the maximum benefit of each income tax position that is more than 50% likely of being sustained. To the extent that all or a portion of the benefits of an income tax position are not recognized, a liability would be recognized for the unrecognized benefits, along with any interest and penalties that would result from disallowance of the position. Should any such penalties and interest be incurred, they would be recognized as operating expenses.

Based on the results of management's evaluation, no liability is recognized in the accompanying balance sheets for unrecognized income tax positions. Further, no interest or penalties have been accrued or charged to expense as of July 31, 2024 and 2023 or for the years then ended. The Hospital's tax returns are subject to possible examination by the taxing authorities. For federal income tax purposes, the tax returns essentially remain open for possible examination for a period of three years after the respective filing deadlines of those returns.

Recently Adopted Accounting Pronouncement

In June 2016, the FASB issued ASU No. 2016-13, Financial Instruments – Credit Losses (Topic 326), which introduces a new current expected credit loss (CECL) method for measuring credit losses on financial assets measured at amortized cost, replacing the previous incurred loss method that delays recognition until it is probable that a loss has been incurred. The new guidance requires the immediate recognition of estimated credit losses that are expected to occur. The Hospital adopted the new guidance effective as of August 1, 2023. Adoption of the standard did not have a significant impact to the financial statements.

Subsequent Events

In preparing these financial statements, the Hospital has evaluated events and transactions for potential recognition or disclosure through January 15, 2025, the date the financial statements were available to be issued.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

2. Net Patient Service Revenue

Net patient service revenue is reported at the amount that reflects the consideration to which the Hospital expects to be entitled in exchange for providing patient care. These amounts are due from patients, third-party payors (including health insurers and government programs), and others and includes variable consideration for retroactive revenue adjustments due to settlement of audits, reviews, and investigations. Generally, the Hospital bills the patients and third-party payors several days after the services are performed and/or the patient is discharged from the facility. Revenue is recognized as performance obligations are satisfied.

Performance obligations are determined based on the nature of the services provided by the Hospital. Revenue for performance obligations satisfied over time is recognized based on actual charges incurred in relation to total expected (or actual) charges. The Hospital believes that this method provides a faithful depiction of the transfer of services over the term of the performance obligation based on the inputs needed to satisfy the obligation. Generally, performance obligations satisfied over time relate to patient services.

The Hospital measures the performance obligation from admission into the hospital to the point when it is no longer required to provide services to that patient, which is generally at the time of discharge. These services are considered to be a single performance obligation and have a duration of less than one year. Revenue for performance obligations satisfied at a point in time is recognized when services are provided and the Hospital does not believe it is required to provide additional services to the patient.

Because all of its performance obligations relate to contracts with a duration of less than one year, the Hospital has elected to apply the optional exemption provided in FASB ASC 606-10-50-14(a) and, therefore, is not required to disclose the aggregate amount of the transaction price allocated to performance obligations that are unsatisfied or partially unsatisfied at the end of the reporting period. The unsatisfied or partially unsatisfied performance obligations referred to above are primarily related to inpatient acute care services at the end of the reporting period. The performance obligations for these contracts are generally completed when the patients are discharged, which generally occurs within days or weeks of the end of the reporting period.

The Hospital is utilizing the portfolio approach practical expedient in ASC 606 for contracts related to net patient service revenue. The Hospital accounts for the contracts within each portfolio as a collective group, rather than individual contracts, based on the payment pattern expected in each portfolio category and the similar nature and characteristics of the patients within each portfolio. As a result, the Hospital has concluded that revenue for a given portfolio would not be materially different than if accounting for revenue on a contract by contract basis.

The Hospital has arrangements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. For uninsured patients that do not qualify for charity care, the Hospital recognizes revenue on the basis of its standard rates, subject to certain discounts and implicit price concessions as determined by the Hospital.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

2. Net Patient Service Revenue, Continued

The Hospital determines the transaction price based on standard charges for services provided, reduced by contractual adjustments provided to third-party payors, discounts provided to uninsured patients in accordance with the Hospital's policy, and implicit price concessions provided to uninsured patients. Implicit price concessions represent the difference between amounts billed and the estimated consideration the Hospital expects to receive from patients, which are determined based on historical collection experience, current market conditions, and other factors. The Hospital determines its estimates of contractual adjustments and discounts based on contractual agreements, discount policies, and historical experience.

Agreements with third-party payors typically provide for payments at amounts less than established charges. A summary of the payment arrangements with major third-party payors follows:

- Medicare

Effective September 1, 2002, the Hospital was granted Critical Access Hospital (CAH) designation by the Medicare program. The CAH designation places certain restrictions on daily acute care inpatient census and an annual, average length of stay of acute care inpatients. Inpatient acute care and outpatient services rendered to Medicare program beneficiaries are paid based on a cost reimbursement methodology.

The Hospital is reimbursed for certain reimbursable items at a tentative rate with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicare Administrative Contractor (MAC). The Hospital's classification of patients under the Medicare program and the appropriateness of their admission are subject to an independent review by a peer review organization under contract with the Hospital. The Hospital's Medicare cost reports have been audited by the MAC through July 31, 2018, with the exception of the July 31, 2017 cost report.

- Medicaid

Inpatient acute care services rendered to Medicaid program beneficiaries are paid at a prospectively determined rate per admission. These rates vary according to a patient classification system that is based on clinical, diagnostic and other factors.

Outpatient services rendered to Medicaid program beneficiaries are reimbursed under a cost reimbursement methodology. The Hospital is reimbursed at a tentative rate with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicaid fiscal intermediary. The Hospital's Medicaid cost reports have been audited by the Medicaid fiscal intermediary through July 31, 2021.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

2. Net Patient Service Revenue, Continued

- Medicaid, Continued

The Hospital has also entered into contracts with certain managed care organizations to receive reimbursement for providing services to selected enrolled Medicaid beneficiaries. Payment arrangements with these managed care organizations consist primarily of prospectively determined rates per discharge, discounts from established charges, or prospectively determined per diems.

The Hospital participates in the Georgia Indigent Care Trust Fund (ICTF) Program. The Hospital receives ICTF payments for treating a disproportionate number of Medicaid and other indigent patients. ICTF payments are based on the Hospital's estimated uncompensated cost of services to Medicaid and uninsured patients. The amount of ICTF payments recognized in net patient service revenue was approximately \$2,580,000 and \$2,029,000 for the years ended July 31, 2024 and 2023, respectively.

The Medicare, Medicaid and SCHIP Benefits Improvement and Protection Act of 2000 (BIPA) provides for payment adjustments to certain facilities based on the Medicaid Upper Payment Limit (UPL). The UPL payment adjustments are based on a measure of the difference between Medicaid payments and the amount that could be paid based on Medicare payment principles. The net amount of UPL payment adjustments recognized in net patient service revenue was approximately \$45,000 and \$55,000 for the years ended July 31, 2024 and 2023, respectively.

- Other Arrangements

The Hospital has also entered into payment arrangements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. The basis for payment to the Hospital under these agreements includes prospectively determined rates per discharge, discounts from established charges, and prospectively determined daily rates.

- Uninsured Patients

The Hospital maintains its Financial Assistance Policy (FAP) in accordance with Internal Revenue Code Section 501(r). Based on the FAP, following a determination of financial assistance eligibility, patients who are eligible individuals will not be charged more for emergency or other medically necessary care than the Amounts Generally Billed (AGB) for individuals who have insurance coverage. The minimum percentage discount to be applied to FAP eligible individuals shall be calculated on an annual basis. AGB is determined by dividing the sum of claims paid the previous fiscal year by Medicare fee-for-service and all private health insurance, including payments received from beneficiaries and insured patients, by the sum of the associated gross charges for those claims.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

2. Net Patient Service Revenue, Continued

Laws and regulations concerning government programs, including Medicare and Medicaid, are complex and subject to varying interpretation. As a result of investigations by governmental agencies, various health care organizations have received requests for information and notices regarding alleged noncompliance with those laws and regulations, which, in some instances, have resulted in organizations entering into significant settlement agreements. Compliance with such laws and regulations may also be subject to future government review and interpretation as well as significant regulatory action, including fines, penalties, and potential exclusion from the related programs. There can be no assurance that regulatory authorities will not challenge the Hospital's compliance with these laws and regulations, and it is not possible to determine the impact (if any) such claims or penalties would have upon the Hospital. In addition, the contracts the Hospital has with commercial payors also provide for retroactive audit and review of claims.

Settlements with third-party payors for retroactive adjustments due to audits, reviews or investigations are considered variable consideration and are included in the determination of the estimated transaction price for providing patient care. These settlements are estimated based on the terms of the payment agreement with the payor, correspondence from the payor and the Hospital's historical settlement activity, including an assessment to ensure that it is probable that a significant reversal in the amount of cumulative revenue recognized will not occur when the uncertainty associated with the retroactive adjustment is subsequently resolved. Estimated settlements are adjusted in future periods as adjustments become known (that is, new information becomes available), or as years are settled or are no longer subject to such audits, reviews, and investigations. Adjustments arising from a change in the transaction price, were not significant in 2024 or 2023.

Generally patients who are covered by third-party payors are responsible for related deductibles and coinsurance, which vary in amount. The Hospital also provides services to uninsured patients, and offers those uninsured patients a discount, either by policy or law, from standard charges. The Hospital estimates the transaction price for patients with deductibles and coinsurance and from those who are uninsured based on historical experience and current market conditions. The initial estimate of the transaction price is determined by reducing the standard charge by any contractual adjustments, discounts, and implicit price concessions. Subsequent changes to the estimate of the transaction price are generally recorded as adjustments to patient service revenue in the period of the change. Adjustments arising from a change in the transaction price were not significant for the years ending July 31, 2024 and 2023. Subsequent changes that are determined to be the result of an adverse change in the patient's ability to pay based on current or future estimated credit losses (determined on a portfolio basis when applicable) are recorded as credit loss expense. Credit loss expense for the years ended July 31, 2024 and 2023 was not significant.

Consistent with the Hospital's mission, care is provided to patients regardless of their ability to pay. Therefore, the Hospital has determined it has provided implicit price concessions to uninsured patients and patients with other uninsured balances (for example, copays and deductibles).

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

2. Net Patient Service Revenue, Continued

Patients who meet the Hospital's criteria for charity care are provided care without charge or at amounts less than established rates. Such amounts determined to qualify as charity care are not reported as revenue.

Net patient service revenue by major payor source for the years ended July 31, 2024 and 2023 is as follows:

<u>Net Patient Service Revenue</u>					
	<u>Medicare</u>	<u>Medicaid</u>	<u>Third-Party Payors</u>	<u>Self-Pay</u>	<u>Total All Payors</u>
2024	<u>\$ 11,985,000</u>	<u>\$ 3,143,000</u>	<u>\$ 8,741,000</u>	<u>\$ 207,000</u>	<u>\$ 24,076,000</u>
2023	<u>\$ 12,893,000</u>	<u>\$ 1,787,000</u>	<u>\$ 8,085,000</u>	<u>\$ 242,000</u>	<u>\$ 23,007,000</u>

Net patient service revenue by facility, line of business, and timing of revenue recognition for the years ended July 31, 2024 and 2023 is as follows:

	<u>2024</u>	<u>2023</u>
Service lines:		
Hospital	\$ 22,254,000	\$ 21,121,000
Clinic	<u>1,822,000</u>	<u>1,886,000</u>
Timing of revenue and recognition:		
Services transferred over time	<u>\$ 24,076,000</u>	<u>\$ 23,007,000</u>

Hospital net patient service revenue includes a variety of services mainly covering inpatient acute care services requiring overnight stays, outpatient procedures that require anesthesia or use of the Hospital's diagnostic and surgical equipment, and emergency care services. Performance obligations for the hospital and clinic are satisfied over time as the patient simultaneously receives and consumes the benefits the Hospital performs. Requirements to recognize revenue for inpatient services are generally satisfied over periods that average approximately five days and for outpatient services are generally satisfied over a period of less than one day. Retail pharmacy, cafeteria, gift shop, and other point-of-sale performance obligations are satisfied at a point in time when the goods are provided. These revenues are recorded in other revenue on the statements of operations and changes in net assets.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

2. Net Patient Service Revenue, Continued

The Hospital has elected the practical expedient allowed under FASB ASC 606-10-32-18 and does not adjust the promised amount of consideration from patients and third-party payors for the effects of a significant financing component due to the Hospital's expectation that the period between the time the service is provided to a patient and the time that the patient or a third-party payor pays for that service will be one year or less. However, the Hospital does, in certain instances, enter into payment agreements with patients that allow payments in excess of one year. For those cases, the financing component is not deemed to be significant to the contract.

The Hospital has applied the practical expedient provided by FASB ASC 340-40-25-4 and all incremental customer contract acquisition costs are expensed as they are incurred as the amortization period of the asset that the Hospital otherwise would have recognized is one year or less in duration.

3. Uncompensated Services

The Hospital was compensated for services at amounts less than its established rates. Net patient service revenue includes amounts, representing the transaction price, based on standard charges reduced by variable considerations such as contractual adjustments, discounts, and implicit price concessions.

Charges for uncompensated services for 2024 and 2023 were approximately \$37,371,000 and \$34,073,000, respectively.

Uncompensated care includes charity and indigent care services of approximately \$6,577,000 and \$5,855,000 in 2024 and 2023, respectively. The cost of charity and indigent care services provided during 2024 and 2023 was approximately \$2,319,000 and \$2,147,000, respectively, computed by applying a total cost factor to the charges foregone.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

3. Uncompensated Services, Continued

The following is a summary of uncompensated services and a reconciliation of gross patient charges to net patient service revenue for 2024 and 2023.

	<u>2024</u>	<u>2023</u>
Gross patient charges	\$ 61,447,000	\$ 57,080,000
Uncompensated services:		
Charity and indigent care	6,577,000	5,855,000
Medicare	11,589,000	10,474,000
Medicaid	5,634,000	6,412,000
Other third-party payors	9,053,000	7,070,000
Price concessions	4,518,000	4,262,000
	<u>37,371,000</u>	<u>34,073,000</u>
Total uncompensated care	<u>37,371,000</u>	<u>34,073,000</u>
Net patient service revenue	\$ 24,076,000	\$ 23,007,000

4. Property and Equipment, Net

A summary of property and equipment, net at July 31, 2024 and 2023 follows:

	<u>2024</u>	<u>2023</u>
Land and land improvements	\$ 357,000	\$ 240,000
Buildings and improvements	8,562,000	6,435,000
Equipment	10,404,000	10,260,000
Finance lease right-of-use assets	213,000	312,000
	<u>19,536,000</u>	<u>17,247,000</u>
Less: accumulated depreciation	<u>11,334,000</u>	<u>10,450,000</u>
	8,202,000	6,797,000
Construction-in-progress	<u>289,000</u>	<u>1,176,000</u>
Property and equipment, net	\$ 8,491,000	\$ 7,973,000

Depreciation expense for the years ended July 31, 2024 and 2023 amounted to approximately \$885,000 and \$791,000, respectively.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

4. Property and Equipment, Net, Continued

Amortization expense on finance lease right-of-use assets for the years ended July 31, 2024 and 2023 amounted to approximately \$89,000 and \$100,000, respectively.

Construction contracts exist for various projects at year-end with a total commitment of approximately \$612,000. At July 31, 2024, the remaining commitment on these contracts approximated \$324,000.

5. Defined Contribution Plan

The Hospital participates in the System's defined contribution pension plan covering substantially all eligible employees. Employees may deposit a portion of their earnings for each pay period on a pre-tax basis and the System matches 50% of each participant's voluntary contributions up to a maximum of 6% of the employee's annual salary. At its discretion, the System may make additional contributions to the Plan. Matching and discretionary contribution expense was approximately \$149,000 and \$134,000 for the years ended July 31, 2024 and 2023, respectively.

6. Employee Health Insurance

The Hospital participates in the System's self-insurance program under which a third-party administrator processes and pays claims. The Hospital reimburses the third-party administrator for claims incurred and paid. In addition, the Hospital participates in a shared group financing layer agreement with other Georgia hospitals through a program offered by Georgia ADS, LLC. The program is designed to provide for the financing and payment of covered claims. The parameters of the program include covered claims between \$225,000 and \$850,000. Each participant in the program is responsible for a portion of the shared claims based on their percentage of the total claims for the group. Additional insurance has been obtained to provide coverage for claims exceeding \$850,000. Total expenses related to this plan were approximately \$1,260,000 and \$894,000 for 2024 and 2023, respectively.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

7. Malpractice Insurance

Phoebe Putney Indemnity, Ltd. (PPI), located in the Cayman Islands, was incorporated on November 14, 2018 as an exempted company under the Companies Law of the Cayman Islands. PPI is a wholly-owned subsidiary of the System, established to provide general liability, professional liability, personal injury liability, advertising injury liability, contractual liability, and auto physical damage coverage to the System, including the Hospital.

PPI issues a claims-made policy providing professional liability coverage with a per occurrence limit of \$15,000,000 for 2024 and 2023 and no annual aggregate for 2024 and 2023. Additionally, PPI's claims-made policy covers general liability, personal injury liability, advertising injury liability, and contractual liability of the Hospital, with a per occurrence limit of \$5,000,000 for 2024 and 2023 and no annual aggregate for 2024 and 2023.

PPI purchases annual excess of loss reinsurance coverage in order to limit its financial exposure to large claims relating to employed physicians and surgeons. Under the per risk coverage, the reinsurer shall pay up to \$600,000 for 2024 and 2023, per loss, per insured, in excess of \$400,000 for 2024 and 2023, per loss, per insured. The maximum amount recoverable for both of these coverages combined shall not exceed 250% for 2024 and 2023 of the maximum subject premium or \$6,000,000, for 2024 and 2023, whichever is greater. Under the excess of limits coverage, the reinsurer shall pay up to \$2,000,000 for 2024 and 2023, per loss, per insured, in excess of \$1,000,000 in 2024 and 2023, per loss, per insured. The maximum amount recoverable for this coverage shall not exceed \$6,000,000 for 2024 and 2023.

During the current period, there is a second excess limits coverage. Under this coverage, the reinsurer shall pay up to \$4,000,000 per loss, per insured, in excess of \$3,000,000 per loss, per insured. The maximum amount recoverable for this coverage shall not exceed \$8,000,000. For 2023, the reinsurance treaty provides for adjustable premiums based on ceded losses up to a stated maximum. Such adjustments are recorded in the period when they become known. However, this was not continued in the current policy period.

The System has also purchased excess liability coverage which includes coverage of the Hospital. The limits of the policy are \$50,000,000 per occurrence and in aggregate in excess of the PPI coverage of \$5,000,000. All of the risk related to this coverage has been ceded to unrelated reinsurers via a contract of reinsurance.

Various claims and assertions have been made against the Hospital in its normal course of providing services. In addition, other claims may be asserted arising from services provided to patients in the past. In the opinion of management, adequate provision has been made for losses which may occur from such asserted and unasserted claims that are not covered by liability insurance.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

8. Concentrations of Credit Risk

The Hospital grants credit without collateral to its patients, most of whom are residents of Southwest Georgia and are insured under third-party payor arrangements. The mix of receivables from patients and third-party payors at July 31, 2024 and 2023 was as follows:

	<u>2024</u>	<u>2023</u>
Medicare	60%	57%
Medicaid	6%	6%
Other third-party payors	33%	33%
Patients	<u>1%</u>	<u>4%</u>
Total	<u>100%</u>	<u>100%</u>

At July 31, 2024, the Hospital had deposits at major financial institutions which exceeded the \$250,000 Federal Deposit Insurance Corporation limits. Management believes the credit risks related to these deposits are minimal.

9. Due to Related Parties

Related party transactions as of July 31, 2024 and 2023 consist of the following:

	<u>2024</u>	<u>2023</u>
Due to Phoebe Putney Health System, Inc.	<u>\$ 10,125,000</u>	<u>\$ 12,129,000</u>

The related party transactions that affect the above payables arise from normal management related services, physician practice operations, and other shared cost in the ordinary course of business.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

10. Functional Expenses

The Hospital provides general health care services to residents within its geographic location. Expenses related to providing these services in 2024 and 2023 are as follows:

<u>July 31, 2024</u>	<u>Patient Care Services</u>	<u>General and Administrative</u>	<u>Total</u>
Salaries and wages	\$ 6,537,000	\$ 1,030,000	\$ 7,567,000
Employee health and welfare	1,928,000	315,000	2,243,000
Medical supplies and other	3,273,000	1,343,000	4,616,000
Purchased services	4,018,000	2,229,000	6,247,000
Depreciation and amortization	550,000	424,000	974,000
Interest	12,000	4,000	16,000
Total	<u>\$ 16,318,000</u>	<u>\$ 5,345,000</u>	<u>\$ 21,663,000</u>

<u>July 31, 2023</u>	<u>Patient Care Services</u>	<u>General and Administrative</u>	<u>Total</u>
Salaries and wages	\$ 6,523,000	\$ 609,000	\$ 7,132,000
Employee health and welfare	1,633,000	135,000	1,768,000
Medical supplies and other	2,894,000	1,178,000	4,072,000
Purchased services	4,724,000	2,322,000	7,046,000
Depreciation and amortization	502,000	389,000	891,000
Interest	17,000	4,000	21,000
Total	<u>\$ 16,293,000</u>	<u>\$ 4,637,000</u>	<u>\$ 20,930,000</u>

The financial statements report certain expense categories that are attributable to more than one health care service or support function. Therefore, these expenses require an allocation on a reasonable basis that is consistently applied. Costs not directly attributable to a function, including depreciation and amortization, interest expense, and other occupancy related costs, are allocated to a function based on a square footage basis. Benefit related expenses are allocated consistent with salaries.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

11. Commitments and Contingencies

Health Care Reform

There has been increasing pressure on Congress and state legislatures to control and reduce the cost of healthcare on the national or at the state level. Legislation has been passed that includes cost controls on healthcare providers, insurance market reforms, delivery system reforms, and various individual and business mandates among other provisions. The costs of these provisions are and will be funded in part by reductions in payments by government programs, including Medicare and Medicaid. There can be no assurance that these changes will not adversely affect the Hospital.

Compliance Plan

The healthcare industry has been subjected to increased scrutiny from governmental agencies at both the federal and state level with respect to compliance with regulations. Areas of noncompliance identified at the national level include Medicare and Medicaid, Internal Revenue Service, and other regulations governing the healthcare industry. In addition, the Reform Legislation includes provisions aimed at reducing fraud, waste, and abuse in the healthcare industry. These provisions allocate significant additional resources to federal enforcement agencies and expand the use of private contractors to recover potentially inappropriate Medicare and Medicaid payments. The Hospital has implemented a compliance plan focusing on such issues. There can be no assurance that the Hospital will not be subjected to future investigations with accompanying monetary damages.

Litigation

The Hospital is involved in litigation and regulatory investigations arising in the course of business. After consultation with legal counsel, management estimates that these matters will be resolved without material adverse effect on the Hospital's future financial position or results from operations. See malpractice insurance disclosures in Note 7.

12. Rural Hospital Tax Credit Contributions

The State of Georgia (State) passed legislation which allows individuals and corporations to receive a State tax credit for making a contribution to certain qualified rural hospital organizations. The Hospital submitted the necessary documentation and was approved by the State to participate in the rural hospital tax credit program for calendar years 2024 and 2023. Contributions received under the program approximated \$649,000 and \$536,000, during fiscal years 2024 and 2023, respectively. The funds are included in contributions and other nonoperating income on the statements of operations and changes in net assets. The Hospital will have to be approved by the State to participate in the program in each subsequent year.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

13. Liquidity and Availability

As of July 31, 2024 and 2023, the Hospital has working capital of approximately \$9,465,000 and \$8,034,000 and average days (based on normal expenditures) cash on hand of 130 and 145 days, respectively.

Financial assets available for general expenditure within one year of the balance sheet date, consist of the following at July 31, 2024 and 2023:

	<u>2024</u>	<u>2023</u>
Cash	\$ 7,345,000	\$ 7,964,000
Patient accounts receivable, net	4,015,000	2,769,000
Other current assets - other receivables	<u>17,000</u>	<u>16,000</u>
Total financial assets available	<u>\$ 11,377,000</u>	<u>\$ 10,749,000</u>

None of the financial assets available are subject to donor or other contractual restrictions that make them unavailable for general expenditure within one year of the balance sheet date. The Hospital has the ability to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due. The Hospital is supported by the System. See Note 14 for additional information.

14. Economic Dependency

The Hospital is a wholly-owned subsidiary of the System and has historically received a substantial portion of its funds for operations from the System. In recent years, the Hospital has made payments to the System in excess of the support received. However, a significant liability remains due to the System at July 31, 2024 and 2023. Without the continued support from the System, there would be substantial doubt about the Hospital's ability to continue as a going concern. The System has the ability and intent to continue to support the Hospital.

15. Leases

The Hospital has finance leases for buildings and equipment. The Hospital determines if an arrangement is a lease at the inception of a contract. Leases with an initial term of twelve months or less are not recorded on the balance sheets. The Hospital has lease agreements which require payments for lease and nonlease components and has elected to account for these as a single lease component.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

15. Leases, Continued

Right-of-use assets represent the Hospital's right to use an underlying asset during the lease term, and lease liabilities represent the Hospital's obligation to make lease payments arising from the lease. Right-of-use assets and lease liabilities are recognized at the commencement date, based on the net present value of fixed lease payments over the lease term. The Hospital's lease terms include options to extend or terminate the lease when it is reasonably certain that the option will be exercised. Finance lease agreements generally include an interest rate that is used to determine the present value of future lease payments. Finance lease amortization expense is recognized on a straight-line basis over the lease term. Variable lease costs consist primarily of common area maintenance and are not significant to total lease expense.

Finance lease right-of-use assets and lease liabilities as of July 31, 2024 and 2023 were as follows:

	<u>2024</u>	<u>2023</u>
Finance leases:		
Right-of-use assets:		
Property and equipment, net	<u>\$ 213,000</u>	<u>\$ 312,000</u>
Lease liabilities:		
Current portion	<u>\$ 77,000</u>	<u>\$ 104,000</u>
Long-term	<u>197,000</u>	<u>275,000</u>
Total finance lease liabilities	<u>\$ 274,000</u>	<u>\$ 379,000</u>

Operating expenses for the leasing activity of the Hospital as the lessee for the years ended July 31, 2024 and 2023 are as follows:

<u>Lease Type</u>	<u>2024</u>	<u>2023</u>
Finance lease interest	<u>\$ 16,000</u>	<u>\$ 21,000</u>
Finance lease amortization	<u>89,000</u>	<u>100,000</u>
Total lease cost	<u>\$ 105,000</u>	<u>\$ 121,000</u>

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

15. Leases, Continued

Cash paid for amounts included in the measurement of lease liabilities for the years ended July 31, 2024 and 2023 is as follows:

	<u>2024</u>	<u>2023</u>
Operating cash flows from finance leases	\$ 16,000	\$ 21,000
Financing cash flows from finance leases	<u>105,000</u>	<u>107,000</u>
Total	<u>\$ 121,000</u>	<u>\$ 128,000</u>

The aggregate future lease payments for finance leases as of July 31, 2024 were as follows:

<u>Year Ending July 31</u>	<u>Finance</u>
2025	\$ 89,000
2026	89,000
2027	62,000
2028	6,000
2029	5,000
Thereafter	<u>72,000</u>
Total undiscounted cash flows	323,000
Less: present value discount	<u>49,000</u>
Total lease liabilities	<u>\$ 274,000</u>

Average lease terms and discount rates at July 31, 2024 and 2023 were as follows:

	<u>2024</u>	<u>2023</u>
Weighted-average remaining lease term (years):		
Finance leases	6.47	6.29
Weighted-average discount rate:		
Finance leases	5.00%	5.00%

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

NOTES TO FINANCIAL STATEMENTS, Continued
July 31, 2024 and 2023

16. Coronavirus (COVID-19)

As a result of the spread of the COVID-19 coronavirus, economic uncertainties have arisen. The outbreak has put an unprecedented strain on the U.S. healthcare system, disrupted or delayed production and delivery of materials and products in the supply chain, and caused staffing shortages. The extent of the impact of COVID-19 on the Hospital's operational and financial performance depends on certain developments, including the duration and spread of the outbreak, remedial actions and stimulus measures adopted by local and federal governments, and impact on the Hospital's customers, employees and vendors all of which are uncertain and cannot be predicted. At this point, the extent to which COVID-19 may impact the Hospital's financial position or results of operations is uncertain. The federal Public Health Emergency for COVID-19 expired on May 11, 2023.

On March 27, 2020, the President signed the Coronavirus Aid, Relief and Economic Security Act (CARES Act). Certain provisions of the CARES Act provide relief funds to hospitals and other healthcare providers. The funding will be used to support healthcare-related expenses or lost revenue attributable to COVID-19. The U.S. Department of Health and Human Services began distributing funds on April 10, 2020 to eligible providers in an effort to provide relief to both providers in areas heavily impacted by COVID-19 and those providers who are struggling to keep their doors open due to healthy patients delaying care and canceling elective services. On April 24, 2020, the Paycheck Protection Program and Health Care Enhancement Act was passed. This Act provides additional funding to replenish and supplement key programs under the CARES Act, including funds to health care providers for COVID-19 testing. On March 11, 2021, the American Rescue Plan (ARPA) was passed. This Act provides additional financial assistances for state and local governments, education, housing, food assistance, and additional grant programs.

The CARES Act and ARPA funding is a conditional contribution and accounted for as a refundable advance until conditions have been substantially met or explicitly waived by the grantor. Because the use of the funds is limited to the purposes stated in the terms and conditions, the contributions are grantor restricted. The Hospital reports restricted contributions, whose restrictions are met in the same period in which they are recognized (simultaneous release), as net assets without donor restrictions. Recognized revenue is reported as operating revenues in the statements of operations and changes in net assets.

In fiscal years 2020 through 2023, the Hospital received total grant stimulus funding of approximately \$6,746,000, of which approximately \$6,000 and \$84,000 was recognized as operating revenues in the statements of operations and changes in net assets for the years ended July 31, 2024 and 2023, respectively. Approximately \$611,000 is recorded in capital contributions in net assets without donor restrictions in the statements of operations and changes in net assets for the year ended July 31, 2023.

CARES Act and ARPA funding may be subject to audits. While the Hospital currently believes its use of the funds is in compliance with applicable terms and conditions, there is a possibility that payments could be recouped based on changes in reporting requirements or audit results.



INDEPENDENT AUDITOR'S REPORT ON SUPPLEMENTAL INFORMATION

Board of Directors
Phoebe Worth Medical Center, Inc.
Sylvester, Georgia

We have audited the financial statements of Phoebe Worth Medical Center, Inc. as of and for the years ended July 31, 2024 and 2023, and our report thereon dated January 15, 2025, which expressed an unmodified opinion on those financial statements, appears on pages 1 to 3. Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The information included in this report on pages 29 to 31, inclusive, which is the responsibility of management, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information has not been subjected to the auditing procedures applied in the audits of the financial statements, and, accordingly, we do not express an opinion or provide any assurance on it.

A handwritten signature in black ink that reads "Draffin & Tucker, LLP".

Albany, Georgia
January 15, 2025

PHOEBE WORTH MEDICAL CENTER, INC.

SERVICE TO THE COMMUNITY

July 31, 2024

Phoebe Worth Medical Center (Hospital) is a not-for-profit health care organization that exists to serve the community. The Hospital has no stockholders or owners, and is part of the not-for-profit Phoebe Putney Health System, Inc. After operating expenses are covered, any remaining revenues are reinvested in the operation of the Hospital in order to enhance our ability to carry out our local mission of taking care of our communities' citizens.

The Hospital participates in the Medicare and Medicaid programs which cover many Georgian's health care needs, and by so doing, foregoes some charges and has unreimbursed expenses. The Hospital also offers Financial Assistance to individuals unable to pay for their healthcare services. Indigent Financial Assistance, or free care, is offered to patients whose household income is at or below 200% of the Federal Poverty Guidelines. Patients whose income level is between 201% - 400% of the Federal Poverty Levels will be classified as charity and receive their needed healthcare services at a discounted rate. The following table summarizes the amounts of charges foregone (i.e., contractual adjustments) and estimates the losses incurred by the Hospital due to inadequate payments by these programs and for indigent/charity services. The Hospital also operates a Rural Health Clinic (RHC) which also foregoes some charges and has costs not reimbursed through patients qualifying for these same indigent and charity programs. The amounts listed below are all inclusive of both Hospital and Clinic activities.

	Charges Foregone	Estimated Unreimbursed Cost
Medicare	\$ 12,000,000	\$ 4,000,000
Medicaid	6,000,000	2,000,000
Indigent/Charity	<u>7,000,000</u>	<u>2,000,000</u>
Totals	<u>\$ 25,000,000</u>	<u>\$ 8,000,000</u>

The following is a summary of the community benefit activities offered by the Hospital and illustrates the activities and donations during fiscal year 2024.

I. Subsidized Health Services

Indigent Drug Program – Rx Plus

The Hospital provided access to needed medications for 121 patients during fiscal year 2024. The Hospital's Rx Plus Program is a program for indigent patients to gain access to medications at no charge through drug manufacturers. This includes critical medications for diabetes, COPD/Asthma, and other disease states. Patients are referred to Rx Plus through Phoebe Worth Family Medicine providers. Rx Plus then assists the patients with the manufacturers' process for obtaining the medication. Once approved by the manufacturers, medications are sent to the patient's home or to Rx Plus for pickup. After initial approval, Rx Plus requests new prescriptions from the provider when needed. Rx Plus also tracks dates for when refills and renewal applications are needed by the manufacturer.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

SERVICE TO THE COMMUNITY, Continued
July 31, 2024

I. Subsidized Health Services, Continued

Indigent Drug Program – Rx Plus, Continued

The goal of Rx Plus is to make it possible for our patients to get the medications they need for better health and quality of life. The Hospital invested approximately \$32,000 to provide this drug service to the community.

II. Financial and In-Kind Support

The Hospital supports the community through providing space to the Worth County Board of Commissioners. The County utilizes the space as one of the County's Emergency Management Service (EMS) locations. The 2,710 square feet of space includes a garage/bay, housing area and storage space. The fair market value of the Hospital's contribution of space totals \$6,444 for fiscal year 2024.

The Hospital supports the community through providing office space for ASPIRE Behavioral Health so that they are able to offer more behavioral health services to the citizens of Worth County. The support provides much needed mental health services as determined by our Community Health Needs Assessment. The fair market value of the Hospital's contribution of space totals \$102 per year.

The Hospital supports the Health Department through contributions towards their programs directed at educating, screening, treating, and assisting with the costs of supplies and medications for low income individuals battling high blood pressure and diabetes. The financial support enables the Health Department to operate its Stroke and Heart Attack Prevention (SHAPP) and Diabetes Program. The Hospital's contribution totaled \$55,000.

The Hospital supports The Village Community Garden (Garden) in multiple capacities. The Garden is a bright spot to our Sylvester/Worth county residents and provides a unique food and education experience. The Garden is full year-round with a supply of seasonal produce. The Hospital supports all the various seasons by supplying vegetable signage which identifies the produce and explains the health benefits of the vegetable. The Hospital also allows departments and their staff to spend one Friday a month working at the Garden. Additionally, the Hospital provides speakers and topics for the monthly 4-H Village Living Thursdays events that the Garden hosts and provided funding for the May Day Event that the Garden hosts. Also, this fiscal year, the Hospital supplied the Garden with emergency life saving equipment and hosted a training on using the AED Defibrillator if and when necessary. The value of the Hospital's contributions to the Garden totaled approximately \$5,850.

Continued

PHOEBE WORTH MEDICAL CENTER, INC.

SERVICE TO THE COMMUNITY, Continued
July 31, 2024

II. Financial and In-Kind Support, Continued

The Hospital engages with the community in various other ways as well, including participation in local events ranging from the local law enforcement “Night Out Against Crime” to the annual community Peanut Festival. The Hospital acts as corporate sponsors to ensure the community can offer these types of events. The Hospital also provides staffing for the informational tents, which inform the community about the service offerings at the Hospital. The Hospital participates in local civic clubs and supports leadership in their roles on the local chamber boards and other community clubs.



INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER
FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS
BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN
ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

Board of Directors
Phoebe Worth Medical Center, Inc.
Sylvester, Georgia

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Phoebe Worth Medical Center, Inc. (Hospital), which comprise the balance sheet as of July 31, 2024, and the related statements of operations and changes in net assets and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated January 15, 2025.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Hospital's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Hospital's internal control. Accordingly, we do not express an opinion on the effectiveness of the Hospital's internal control.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Continued

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Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that were not identified.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Hospital's financial statements are free from material misstatement, we performed tests of its compliance with the certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Hospital's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Hospital's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

A handwritten signature in black ink that reads "Draffin & Tucker, LLP". The signature is written in a cursive, flowing style.

Albany, Georgia
January 15, 2025