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## CONSOLIDATED FINANCIAL STATEMENTS

for the years ended September 30, 2020 and 2019

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#### INDEPENDENT AUDITOR'S REPORT

Board of Directors Southwell, Inc. Tifton, Georgia

#### **Report on the Financial Statements**

We have audited the accompanying consolidated financial statements of Southwell, Inc. (Southwell), which comprise the consolidated balance sheets as of September 30, 2020 and 2019, and the related consolidated statements of operations and changes in net assets, and cash flows for the years then ended, and the related notes to the consolidated financial statements.

#### Management's Responsibility for the Financial Statements

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

#### Auditor's Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audits. 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. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to Southwell's preparation and fair presentation of the consolidated financial statements 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 Southwell's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### Continued

Let's Think Together.

#### **Opinion**

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the consolidated financial position of Southwell, Inc. as of September 30, 2020 and 2019, and the results of its operations, changes in net assets, and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated February 19, 2021, on our consideration of Southwell'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 Southwell'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 Southwell's internal control over financial reporting and compliance.

Draffin & Tucker, LLP

Atlanta, Georgia February 19, 2021

### Consolidated Balance Sheets September 30, 2020 and 2019

	<u>2020</u>	<u>2019</u>
Assets Current assets:     Cash and cash equivalents     Short-term investments     Patient accounts receivable, net     Estimated third-party payor settlements     Supplies, at lower of cost and net realizable value     Professional insurance recoverable     Other current assets	\$ 94,764,000 5,321,000 57,807,000 3,098,000 3,448,000 2,564,000 9,841,000	\$ 61,187,000 5,259,000 56,667,000 - 2,912,000 1,188,000 7,303,000
Total current assets	176,843,000	134,516,000
Assets limited as to use Property and equipment, net Other investments Prepaid recruitment expense Goodwill  Total assets	445,594,000 322,857,000 1,019,000 3,027,000 5,816,000 \$ 955,156,000	493,974,000 269,696,000 849,000 1,425,000 4,491,000 \$ 904,951,000
Liabilities and Net Assets Current liabilities:		
Current portion of long-term debt Accounts payable Accrued expenses Estimated third-party payor settlements Professional insurance payable Medicare accelerated payments, current portion Refundable advance of grant revenue	\$ 7,557,000 38,342,000 27,096,000 1,018,000 3,009,000 5,203,000 5,400,000	\$ 25,124,000 26,068,000 26,307,000 3,286,000 1,543,000
Total current liabilities	87,625,000	82,328,000
Medicare accelerated payments, net of current portion Deferred compensation Long-term debt, net of current portion	20,122,000 802,000 <u>247,939,000</u>	- - 255,974,000
Total liabilities	356,488,000	338,302,000
Net assets without donor restrictions	598,668,000	566,649,000
Total liabilities and net assets	\$ <u>955,156,000</u>	\$ <u>904,951,000</u>

See accompanying notes to consolidated financial statements.

# Consolidated Statements of Operations and Changes in Net Assets Years Ended September 30, 2020 and 2019

	<u>2020</u>	<u>2019</u>
Revenues, gains, and other support:		
Net patient service revenue	\$ 391,677,000	\$ 225,508,000
Employee lease revenue from Authority	-	27,394,000
Other revenue	9,110,000	3,652,000
CARES Act funding	38,140,000	-
Grant revenue	600,000	
Total revenues, gains, and other support	439,527,000	256,554,000
Expenses:		
Salaries and wages	184,206,000	122,964,000
Employee benefits	48,929,000	29,256,000
Contract and purchased services	22,026,000	10,692,000
Physician services	17,624,000	8,973,000
Supplies and drugs	80,008,000	42,557,000
Depreciation	35,940,000	18,746,000
Goodwill amortization	2,371,000	1,468,000
Interest expense	4,762,000	2,601,000
Other expense	40,348,000	20,065,000
Total expenses	436,214,000	257,322,000
Operating income (loss)	3,313,000	( <u>768,000</u> )
Nonoperating gains:		
Investment income	29,135,000	24,045,000
Rural hospital tax credit contributions	1,003,000	529,000
Other loss	(_2,691,000)	<u> </u>
Total nonoperating gains	27,447,000	24,574,000
Excess of revenues over expenses	30,760,000	23,806,000
Capital contributions from Cook County and the City of Adel	1,259,000	-
Transfers from related parties	-	311,000
Transfer from Tift County Hospital Authority	<u> </u>	<u>541,866,000</u>
Change in net assets without donor restrictions	32,019,000	565,983,000
Net assets without donor restrictions, beginning of year	<u>566,649,000</u>	666,000
Net assets without donor restrictions, end of year	\$ <u>598,668,000</u>	\$ <u>566,649,000</u>

See accompanying notes to consolidated financial statements.

## Consolidated Statements of Cash Flows Years Ended September 30, 2020 and 2019

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	2020	<u>2019</u>
Cash flows from operating activities:		
Receipts from and on behalf of patients	\$ 416,664,000	\$ 229,857,000
CARES Act receipts Grant revenue	38,140,000 6,000,000	-
Payments to employees	(232,346,000)	(123,943,000)
Payments to employees  Payments to suppliers and contractors	(157,684,000)	(73,639,000)
Other receipts	9,110,000	3,652,000
Other loss expenditures	( 2,691,000)	-
Interest paid	( 4,987,000)	( 2,731,000)
Investment income	30,000,000	15,193,000
Rural hospital tax credit contributions	1,003,000	529,000
Transfers from related parties  Transfer from Tift County Hospital Authority	-	311,000
Transfer from Tift County Hospital Authority	<del></del>	75,023,000
Net cash provided by operating activities	103,209,000	124,252,000
Cash flows from financing activities:		
Proceeds from issuance of long-term debt	20,000,000	24,293,000
Payments on long-term debt	( 45,377,000)	( 2,505,000)
Capital contributions from Cook County and the City of Adel	<u>1,259,000</u>	<del></del>
Net cash provided (used) by financing activities	( <u>24,118,000</u> )	21,788,000
Cash flows from investing activities:		
Purchases of property and equipment, net of retirements	( 89,046,000)	( 52,614,000)
Sale of debt and equity securities	375,280,000	161,897,000
Purchase of debt and equity securities	(326,752,000)	(155,689,000)
Sale of short-term investments  Purchase of short-term investments	4,750,000 ( 855,000)	4,250,000 ( 4,003,000)
Purchase of other investments	( 170,000)	( 4,003,000)
Purchase of ambulatory surgical centers	( 3,751,000)	-
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Net cash used by investing activities	( <u>40,544,000</u> )	(46,159,000)
Net change in cash and cash equivalents	38,547,000	99,881,000
Cash and cash equivalents, beginning of year	99,974,000	93,000
Cash and cash equivalents, end of year	\$ <u>138,521,000</u>	\$ <u>99,974,000</u>

# Consolidated Statements of Cash Flows, Continued Years Ended September 30, 2020 and 2019

2020 2019 Reconciliation of cash and cash equivalents to the balance sheets: Cash and cash equivalents \$ 94,764,000 \$ 61,187,000 Cash and cash equivalents included in short-term investments 4,566,000 609,000 Cash and cash equivalents included in assets limited as to use <u>39,191,000</u> 38,178,000 \$ 99,974,000 Total cash and cash equivalents \$ 138,521,000 Reconciliation of change in net assets to net cash provided by operating activities: Change in net assets \$ 32,019,000 \$ 565,983,000 Adjustments to reconcile change in net assets to cash provided by operating activities: Depreciation 35,940,000 18,746,000 Goodwill amortization 2,371,000 1,468,000 Change in unrealized (gains) losses on investments 865,000 8,852,000) Bond premium amortization 225,000) 130,000) Capital contributions from Cook County and the City of Adel (1,259,000)Transfer from Tift County Hospital Authority (466,843,000)Changes in: Patient accounts receivable 1,140,000) 4,349,000 **Supplies** 536,000) 63,000 Professional insurance recoverable 1,376,000) 1,188,000) Other current assets (2,538,000)1,212,000 Prepaid recruitment expense 1,602,000) 28,000 Accounts payable 12,274,000 9,395,000 Accrued expenses 789,000 883,000 ( 5,366,000) Estimated third-party payor settlements 1,405,000) Professional insurance payable 1,466,000 543,000 Medicare accelerated payments 25,325,000 Refundable advance of grant revenue 5,400,000 Deferred compensation 802,000 Net cash provided by operating activities \$ 103,209,000 \$ 124,252,000

See accompanying notes to consolidated financial statements.

### Notes To Consolidated Financial Statements September 30, 2020 and 2019

### 1. Description of Reporting Entity and Summary of Significant Accounting Policies

Reporting entity. Southwell, Inc. (Southwell), located in Tifton, Georgia, is a comprehensive healthcare system which provides short-term medical, surgical, obstetrical, pediatric, geriatric psychiatry, and physician care and long-term nursing care to patients in Tift County and the surrounding area.

Southwell is the sole member of Tift Regional Health System, Inc. (System). System operates Tift Regional Medical Center (TRMC) (an acute care hospital), Southwell Medical (SM) (an acute care hospital), Southwell Health and Rehabilitation (SHR) (a nursing home), and several physician practices.

Effective March 1, 2019, the System undertook a corporate restructuring and executed a Lease and Transfer Agreement (Agreement) with Tift County Hospital Authority (Authority), a public body corporate and politic organized under the Hospital Authorities Law of the State of Georgia. Under the Agreement, the System assumed substantially all of the operations, assets, and liabilities of the Authority and agreed to operate the facilities for an initial period of forty years. Also, the System makes nominal lease payments to the Authority plus amounts sufficient to make debt service payments on Authority conduit debt obligations as they come due, and assumes all operational, financial, indigent care, and community responsibilities. The governing board of the System is initially comprised of five former members of the Authority plus three additional members and is self-perpetuating. The governing board of Southwell is initially comprised of three current members of the Authority, four former members of the Authority, plus one additional member, and is self-perpetuating. Because Southwell's and the System's Board of Directors are self-perpetuating, and the Authority does not have financial accountability for Southwell or the System, Southwell and the System are excluded from the Authority's reporting entity subsequent to the restructuring.

The Authority was the sole corporate member of CareAlliance: An Accountable Care Organization, LLC (ACO). In connection with the restructuring, the Authority's membership in the ACO was transferred to the System.

Southwell owns 100% of the voting stock of Tift Enterprises, Inc. (Enterprises). Enterprises owns a 25% interest in Diagnostic PET, LLC.

On October 21, 2019 Southwell Ambulatory, Inc. (Ambulatory) was created with Southwell as the sole corporate member. On January 1, 2020, Ambulatory purchased and began operating ambulatory surgical centers. See Note 7 for information related to the purchase of the ambulatory surgical centers.

In connection with the restructuring, the Authority and the System entered into a Workforce Transfer Agreement and a Workforce Services Agreement. Under the Workforce Transfer Agreement, the Authority transferred all of its workforce (employees and independent contractors) to the System on January 1, 2019. Under the Workforce Services Agreement, the System provided the services of the workforce to the Authority from January 1, 2019 through February 28, 2019 at cost.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

### 1. Description of Reporting Entity and Summary of Significant Accounting Policies, Continued

Reporting entity, continued. Due to the nature of the restructuring, the Agreement was accounted for as a transaction between entities under common control, whereby the Authority transferred its net position at carrying values as of March 1, 2019.

The accompanying consolidated financial statements include Southwell, System, ACO, Enterprises, and Ambulatory. All significant intercompany transactions have been eliminated.

Use of estimates. The preparation of consolidated 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.

Significant items subject to such estimates and assumptions include the determination of variable consideration for patient contracts, estimated third-party payor settlements, and insurance reserves. In particular, laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates associated with these programs will change by a material amount in the near term.

Cash and cash equivalents. Cash and cash equivalents include investments in highly liquid debt instruments with an original maturity of three months or less.

*Short-term investments.* Short-term investments consist of certificates of deposit with maturities ranging from 6 months to 12 months.

Investments. Investments in equity securities with readily determinable fair values and all investments in debt securities, which are all classified as trading securities, are measured at fair value in the balance sheet. Investments without a readily determinable fair value are measured at cost, minus impairment, if any, plus or minus changes resulting from observable price changes in orderly transactions for the identical or similar investment of the same issuer. Investment income or loss (including interest, dividends, and gains and losses, both realized and unrealized) is included in excess of revenue over expenses unless the income is restricted by donor or law.

Investments without a readily determinable fair value are included in other investments on the balance sheets. These investments consist of a 7.00% investment in Distribution Cooperative, Inc., a 15.12% investment in Stratus Healthcare, LLC, and a 25.00% investment in Diagnostic PET, LLC.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

### 1. Description of Reporting Entity and Summary of Significant Accounting Policies, Continued

Fair value measurements. FASB ASC 820, Fair Value Measurement and Disclosures defines fair value as the amount that would be received for an asset or paid to transfer a liability (i.e., an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date. FASB ASC 820 also establishes a fair value hierarchy that requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. FASB ASC 820 describes the following three levels of inputs that may be used:

- Level 1: Quoted prices (unadjusted) in active markets that are accessible at the measurement date for identical assets and liabilities. The fair value hierarchy gives the highest priority to Level 1 inputs.
- Level 2: Observable prices that are based on inputs not quoted on active markets but corroborated by market data.
- Level 3: Unobservable inputs when there is little or no market data available, thereby requiring an entity to develop its own assumptions. The fair value hierarchy gives the lowest priority to Level 3 inputs.

Assets limited as to use. Assets limited as to use include assets held by trustee for capital acquisitions and for debt service reserve, and assets internally designated for capital acquisitions malpractice self-insurance, and deferred compensation, over which the Board retains control and may at its discretion subsequently use for other purposes.

Property and equipment. Property and equipment acquisitions 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. Buildings and equipment under capital lease obligations are amortized on the straight-line method over the shorter period of the lease term or the estimated useful life of the building or equipment. Such amortization is included in depreciation in the consolidated financial statements.

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 of revenue over expenses, 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.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

### 1. Description of Reporting Entity and Summary of Significant Accounting Policies, Continued

Impairment of long-lived assets. Southwell 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. Southwell has not recorded any impairment charges in the accompanying consolidated statements of operations and changes in net assets.

Prepaid recruitment expense. Southwell has entered into recruiting arrangements and educational loans with physicians that are to be repaid with interest at the prime rate plus 1%. The loans may be considered repaid by the physicians meeting certain community service obligations for a period of time. When and if these conditions are met, the loans are forgiven. If the physician ceases to meet the community service obligations before the loan is forgiven, the outstanding principal and accrued interest becomes due immediately. The amount of loans to physicians charged to expense was approximately \$410,000 and \$456,000 during 2020 and 2019, respectively. These expenses are reflected in physician services in the accompanying consolidated statements of operations and changes in net assets.

Costs of borrowing. 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. Interest cost capitalized during 2020 and 2019 was approximately \$2,939,000 and \$2,511,000, respectively.

Costs incurred in connection with the issuance of long-term debt are deferred and amortized over the term of the debt using the effective interest method. Debt issuance costs related to a recognized debt liability are presented in the balance sheet as a direct deduction from the carrying amount of the related debt liability.

Goodwill. Goodwill represents the excess of the acquisition price over the fair value of net assets acquired through business combinations. Goodwill is being amortized over five years, the time period of restrictive non-compete covenants included with the acquisition of physician practices. When events or circumstances indicate that goodwill may be impaired, goodwill is tested for impairment. Impairment, if any, will be recognized for the difference between the fair value of the physician practice and its carrying amount and will be limited to the carrying amount of goodwill. Southwell considered certain factors such as whether macroeconomic conditions, industry considerations, cost factors, and the sequence of events during the COVID-19 pandemic constituted a triggering event. Southwell's evaluation determined it is not more likely than not that the reporting unit's fair value is less than its' carrying value.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

### 1. Description of Reporting Entity and 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 of revenues over expenses. The statements of operations includes excess of revenues over expenses. Changes in net assets without donor restrictions which are excluded from excess of revenues over expenses, 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).

Net patient service revenue. Southwell has agreements with third-party payors that provide for payments to Southwell 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 Southwell 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. Southwell provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Because Southwell does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

### 1. Description of Reporting Entity and Summary of Significant Accounting Policies, Continued

Donor restricted gifts. Unconditional promises to give cash and other assets to Southwell are reported at fair value at the date the promise is received. Conditional promises to give and indications of intentions to give are reported at fair value at the date the gift is received. 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.

Income taxes. Southwell, System, and Ambulatory are not-for-profit corporations and have been recognized as tax-exempt pursuant to Section 501(c)(3) of the Internal Revenue Code. ACO is considered a disregarded entity of the System. Enterprises is a for-profit corporation.

Southwell 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, Southwell 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 September 30, 2020 and 2019 or for the years then ended. Southwell'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 2020, the FASB issued ASU No. 2020-05, Revenue from Contracts with Customers (Topic 606) and Leases (Topic 842), Effective Dates for Certain Entities. The ASU was issued to provide relief for certain entities in light of the COVID-19 pandemic by deferring the effective dates of certain ASUs, including subsequent amendments. The ASU is effective immediately. Earlier application of amendments is permitted to the extent specified in each ASU as originally issued.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

### 1. Description of Reporting Entity and Summary of Significant Accounting Policies, Continued

Accounting pronouncement not yet adopted. In February 2016, the FASB issued ASU No. 2016-02, Leases (Topic 842), which is a new comprehensive lease accounting model. The ASU clarifies the definition of a lease and requires lessees to recognize right-of-use assets and related lease liabilities for all leases with terms greater than twelve months. The ASU, including subsequent amendments, is effective for Southwell as of October 1, 2020. Southwell is continuing to evaluate the impact the guidance will have on the financial statements.

Subsequent event. In preparing these financial statements, Southwell has evaluated events and transactions for potential recognition or disclosure through February 19, 2021, the date the financial statements were issued.

#### 2. Net Patient Service Revenue

Net patient service revenue is reported at the amount that reflects the consideration to which Southwell 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, Southwell 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. Revenue for performance obligations satisfied over time is recognized based on actual charges incurred in relation to total expected (or actual) charges. Southwell 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 patients receiving inpatient, outpatient, and emergency care services. Southwell 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 it is believed that additional services are not required to be provided to the patient.

Because all of its performance obligations relate to contracts with a duration of less than one year, Southwell 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.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

2. Net Patient Service Revenue, Continued

Southwell is utilizing the portfolio approach practical expedient in ASC 606 for contracts related to net patient service revenue. Southwell 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, Southwell has concluded that revenue for a given portfolio would not be materially different than if accounting for revenue on a contract by contract basis.

Southwell has arrangements with third-party payors that provide for payments to Southwell at amounts different from its established rates. For uninsured patients that do not qualify for charity care, Southwell recognizes revenue on the basis of its standard rates, subject to certain discounts and implicit price concessions as determined by Southwell. Southwell 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 Southwell's policy, and implicit price concessions provided to uninsured patients. Implicit price concessions represent difference between amounts billed and the estimated consideration Southwell expects to receive from patients, which are determined based on historical collection experience, current market conditions, and other factors. Southwell 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. Inpatient and outpatient services rendered to Medicare program beneficiaries
are generally paid at prospectively determined rates. These rates vary according to a
patient classification system that is based on clinical, diagnostic, and other factors. Certain
other reimbursable items are reimbursed at a tentative rate with final settlement
determined after submission of annual cost reports by Southwell and audits thereof by the
Medicare Administrative Contractor (MAC). TRMC's Medicare cost reports have been
settled by the MAC through September 30, 2015 and SM's Medicare cost reports have
been settled by the MAC through June 30, 2015.

Nursing home services rendered to Medicare program beneficiaries are paid at prospectively determined rates. These rates vary according to a patient classification system called Patient Driven Payment Model (PDPM).

• Medicaid. Inpatient services rendered to Medicaid program beneficiaries are paid at prospectively determined rates. Outpatient services rendered to Medicaid program beneficiaries are generally reimbursed under a cost reimbursement methodology. Southwell is reimbursed for cost reimbursable items at a tentative rate with final settlement determined after submission of annual cost reports by Southwell and audits thereof by the Medicaid fiscal intermediary. TRMC's Medicaid cost reports have been settled by the Medicaid fiscal intermediary through September 30, 2017 and SM's Medicaid cost reports have been settled by the Medicaid fiscal intermediary through June 30, 2017.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

### 2. Net Patient Service Revenue, Continued

Medicaid, Continued. Southwell has also entered into contracts with certain care
management organizations (CMOs) to receive reimbursement for providing services to
selected enrolled Medicaid beneficiaries. Payment arrangements with these CMOs consist
primarily of prospectively determined rates and discounts from established charges.

Long-term care services are reimbursed by the Medicaid program based on a prospectively determined per diem. The per diem is determined by the facility's historical allowable operating costs adjusted for certain incentives and inflation factors.

Southwell participates in the Indigent Care Trust Fund (ICTF) Program. Southwell receives ICTF payments for treating a disproportionate number of Medicaid and other indigent patients. ICTF payments are based on Southwell's estimated uncompensated cost of services to Medicaid and uninsured patients. The net amount of ICTF payments recognized in net patient service revenue was approximately \$4,110,000 and \$1,026,000 for 2020 and 2019, respectively.

Southwell participates in the Medicaid Upper Payment Limit (UPL) program. 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 \$5,510,000 and \$1,621,000 for 2020 and 2019, respectively.

The State of Georgia has legislation known as the Provider Payment Agreement Act (Act) whereby hospitals in Georgia are assessed a "provider payment" in the amount of 1.45% of their net patient revenue. The provider payments are due on a quarterly basis to the State of Georgia. The payments are used for the sole purpose of obtaining federal financial participation for medical assistance payments to providers on behalf of Medicaid recipients. The provider payment results in a corresponding increase in Medicaid payments for hospital services of approximately 11.88%. Southwell made provider payments to the State of Georgia of approximately \$4,521,000 and \$2,427,000 during 2020 and 2019, respectively. The payments are included in other expense in the accompanying statements of operations and changes in net assets.

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

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

### 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 Southwell'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 Southwell. In addition, the contracts Southwell 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 Southwell'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 2020 or 2019.

Generally, patients who are covered by third-party payors are responsible for related deductibles and coinsurance, which vary in amount. Southwell also provides services to uninsured patients, and offers those uninsured patients a discount, either by policy or law, from standard charges. Southwell 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 in 2020 or 2019. Subsequent changes that are determined to be the result of an adverse change in the patient's ability to pay are recorded as bad debt expense. Bad debt expense for 2020 and 2019 was not significant.

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

Patients who meet Southwell'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.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

#### 2. Net Patient Service Revenue, Continued

Net patient service revenue by major payor source for the years ended September 30, 2020 and 2019 is as follows:

	<u>2020</u>	<u>2019</u>
Medicare	\$ 131,348,000	\$ 87,577,000
Medicaid	42,435,000	12,143,000
Blue Cross	118,337,000	73,771,000
Other third-party payors	99,557,000	52,017,000
Total	\$ <u>391,677,000</u>	\$ 225,508,000

Net patient service revenue by facility/line of business and timing of revenue recognition for the years ended September 30, 2020 and 2019 is as follows:

	<u>2020</u>	<u>2019</u>
Tift Regional Medical Center Southwell Medical	\$ 288,508,000 11,539,000	\$ 168,110,000 4,308,000
Physician services and clinics	81,476,000	49,279,000
Southwell Health and Rehabilitation Southwell Ambulatory	7,405,000 <u>2,749,000</u>	3,811,000
Total services transferred over time	\$ <u>391,677,000</u>	\$ 225,508,000

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 diagnostic and surgical equipment, and emergency care services. Performance obligations are satisfied over time as the patient simultaneously receives and consumes the benefits Southwell performs. Requirements to recognize revenue 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. For employee pharmacy and cafeteria, recorded in other revenue on the consolidated statements of operations, performance obligations are satisfied at a point in time when the goods are provided.

Southwell 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 Southwell'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, Southwell 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.

Southwell 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 Southwell otherwise would have recognized is one year or less in duration.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

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### 3. Uncompensated Care

Southwell was compensated for services at amounts less than its standard charges. 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. The following is a reconciliation of gross patient revenue at standard charges to net patient service revenue:

	<u>2020</u>	<u>2019</u>
Gross patient charges	\$ <u>1,401,877,000</u>	\$ <u>851,052,000</u>
Uncompensated services:		
Medicare	599,808,000	358,075,000
Medicaid	146,548,000	103,802,000
Blue Cross	46,021,000	28,387,000
Other third-party payors	84,027,000	48,545,000
Charity/indigent/uninsured discount	79,373,000	54,201,000
Price concessions	54,423,000	32,534,000
Total uncompensated care	1,010,200,000	625,544,000
Net patient service revenue	\$ <u>391,677,000</u>	\$ <u>225,508,000</u>

The estimated cost of charity/indigent care/uninsured discount was approximately \$24,698,000 and \$16,363,000 during 2020 and 2019, respectively. The estimated cost of charity/indigent care/uninsured discount includes the direct and indirect cost of providing charity/indigent care services/uninsured discount and is estimated by utilizing a ratio of cost to gross charges applied to the gross uncompensated charges associated with providing charity/indigent care.

#### 4. Concentrations of Credit Risk

Southwell grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of receivables from patients and third-party payors at September 30, 2020 and 2019 was as follows:

·	<u>2020</u>	<u>2019</u>
Medicare Medicaid Blue Cross Other third-party payors Self-pay	29% 9% 21% 40% <u>1</u> %	28% 9% 25% 34% <u>4</u> %
Total	100%	<u>100</u> %

Southwell maintains deposits at major financial institutions which exceed the \$250,000 Federal Deposit Insurance Corporation limit. Management believes the credit risks related to these deposits is minimal.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

## 5. Assets Limited as to Use

The composition of assets limited as to use as of September 30, 2020 and 2019 is set forth in the following table.

	<u>2020</u>	<u>2019</u>
Internally designated for capital acquisitions: Cash Money market (cash equivalent) Certificates of deposit U.S. Treasury obligations U.S. Government agency obligations Corporate obligations Asset-backed securities Marketable equity securities Non-U.S. equity mutual funds Commodity mutual funds Other mutual funds	\$ 751,000 12,230,000 249,000 49,849,000 11,162,000 73,831,000 74,160,000 138,535,000 20,014,000 14,985,000 19,706,000	\$ 101,000 10,544,000 2,831,000 49,917,000 8,136,000 56,349,000 81,136,000 142,269,000 18,159,000 15,997,000 19,003,000
Total	415,472,000	404,442,000
Internally designated for self-insurance: Cash Certificates of deposit Total	786,000 3,110,000 3,896,000	784,000 3,100,000 3,884,000
Internally designated for deferred compensation: Equity mutual funds	802,000	
Held by trustee for capital acquisitions: Money market (cash equivalent) U.S. Treasury obligations  Total	24,962,000 - 24,962,000	26,570,000 58,899,000 85,469,000
	24,902,000	05,409,000
Held by trustee for debt service reserve:  Cash	462,000	<u>179,000</u>
Total assets limited as to use	\$ <u>445,594,000</u>	\$ <u>493,974,000</u>

### Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

## 5. Assets Limited as to Use, Continued

The fair values of investments measured on a recurring basis at September 30, 2020 and 2019 are as follows:

		Septembe	r 30, 2020	
	<u>Total</u>	Level 1	Level 2	Level 3
Money market funds	\$ 37,192,000	\$ 37,192,000	\$ -	\$ -
Certificates of deposit	3,359,000	3,359,000	· -	-
U.S. Treasury obligations	49,849,000	49,849,000	-	-
U.S. Government agency	, ,	, ,		
obligations	11,162,000	11,162,000	-	-
Corporate obligations	73,831,000	-	73,831,000	-
Asset-backed securities	74,160,000	-	74,160,000	-
Marketable equity securities	138,535,000	138,535,000	-	-
Equity mutual funds	802,000	802,000	-	-
Non-U.S. equity mutual funds	20,014,000	20,014,000	-	-
Commodity mutual funds	14,985,000	14,985,000	-	-
Other mutual funds	19,706,000	<u>19,706,000</u>		
Total	443,595,000	\$ <u>295,604,000</u>	\$ <u>147,991,000</u>	\$
Cash	1,999,000			
Total	\$ <u>445,594,000</u>			
Total	Ψ <u>443,334,000</u>			
			r 30, 2019	
	<u>Total</u>	<u>Level 1</u>	Level 2	Level 3
Money market funds	\$ 37,114,000	\$ 37,114,000	\$ -	\$ -
Certificates of deposit	5,931,000	5,931,000	-	-
U.S. Treasury obligations U.S. Government agency	108,816,000	108,816,000	-	-
obligations	8,136,000	8,136,000	_	_
Corporate obligations	56,349,000	-	56,349,000	_
Asset-backed securities	81,136,000	_	81,136,000	_
Marketable equity securities	142,269,000	142,269,000	-	_
Non-U.S. equity mutual funds	18,159,000	18,159,000	_	_
Commodity mutual funds	15,997,000	15,997,000	_	_
Other mutual funds	19,003,000	19,003,000		
Total	492,910,000	\$ <u>355,425,000</u>	\$ <u>137,485,000</u>	\$
Cash	1,064,000			
Total	\$ <u>493,974,000</u>			

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

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### 5. Assets Limited as to Use, Continued

A summary of investment income follows:

	<u>2020</u>	<u>2019</u>
Interest and dividends Realized gains from sale of investments Unrealized gains (losses) on investments Gain on other investments Rental income, net of expenses Gain on disposal of capital assets Other income	\$ 9,250,000 20,017,000 ( 865,000) 670,000 ( 14,000) 20,000 57,000	\$ 5,188,000 9,565,000 8,852,000 - ( 36,000) 11,000 465,000
Total	\$ <u>29,135,000</u>	\$ <u>24,045,000</u>

Southwell's investments are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such change could materially affect the amounts reported in the accompanying consolidated financial statements.

#### 6. Property and Equipment

A summary of property and equipment at September 30, 2020 and 2019 follows:

	<u>2020</u>	<u>2019</u>
Land	\$ 11,120,000	\$ 9,749,000
Land improvements	7,764,000	3,526,000
Buildings and improvements	231,007,000	190,334,000
Fixed equipment	29,333,000	24,966,000
Major movable equipment	<u>328,676,000</u>	308,347,000
	607,900,000	536,922,000
Less accumulated depreciation	<u>375,697,000</u>	339,806,000
	232,203,000	197,116,000
Construction-in-progress	90,654,000	72,580,000
Property and equipment, net	\$ <u>322,857,000</u>	\$ <u>269,696,000</u>

Contracts of approximately \$110,691,000 exist for the construction of a new patient tower and the renovation and expansion of the emergency center. At September 30, 2020, the remaining commitment on these contracts approximated \$41,795,000.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

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#### 7. Goodwill

Goodwill is related to the purchases of Tiftarea Surgical Partners, LLC (TSP), Georgia Sports Medicine & Orthopedic Clinic, P.C. (GSM), Tiftarea Urology, P.C. (TU), Urosurg, LLC (US), Tifton Ophthalmology Associates, P.C. (TOA), Lowndes County Ambulatory Surgical Center, Inc. (LCASC), Valdosta Endoscopy Center (VEC), and Valdosta Gastroenterology Associates, LLC (VGA). The changes in the carrying amount of goodwill are as follows:

	Balance at September 30, <u>2019</u> <u>Purchases</u>		<u>Amortization</u>	Balance at September 30, <u>2020</u>
TSP and GSM TU and US TOA LCASC VEC and VGA	\$ 664,000 3,744,000 83,000 - -	\$ - - - 1,865,000 <u>1,831,000</u>	\$( 664,000) (1,498,000) ( 24,000) ( 93,000) ( 92,000)	\$ - 2,246,000 59,000 1,772,000 <u>1,739,000</u>
Total	\$ <u>4,491,000</u>	\$ <u>3,696,000</u>	\$( <u>2,371,000</u> )	\$ <u>5,816,000</u>
	Balance at September 30, <u>2018</u>	Transfer from <u>Authority</u>	<u>Amortization</u>	Balance at September 30, <u>2019</u>
TSP and GSM TU and US TOA	\$ - - -	\$ 1,244,000 4,618,000 <u>97,000</u>	\$( 580,000) ( 874,000) ( 14,000)	\$ 664,000 3,744,000 <u>83,000</u>
Total	\$	\$ <u>5,959,000</u>	\$( <u>1,468,000</u> )	\$ <u>4,491,000</u>

On January 1, 2020, Ambulatory purchased Valdosta Endoscopy Center, LLC and Valdosta Gastroenterology Associates, LLC for approximately \$1,895,000. Also on January 1, 2020, Ambulatory purchased Lowndes County Ambulatory Surgical Center, Inc. for approximately \$1,856,000.

#### 8. Medicare Accelerated and Advance Payments

The Coronavirus Aid, Relief, and Economic Security Act (CARES Act) expanded the Medicare Accelerated and Advance Payment (MAAP) program to increase cash flow to healthcare providers impacted by the COVID-19 pandemic. In April 2020, Southwell received approximately \$25,325,000 in MAAP payments. The MAAP payments must be repaid and recoupment begins one year after the date of receipt. Medicare will recoup 25% of Medicare payments owed to Southwell for eleven months. Medicare will then recoup 50% of Medicare payments owed to Southwell for the succeeding six months. Any outstanding balance must then be repaid.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

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#### 9. Grant Revenue

On July 1, 2020, Southwell entered into a Provider Financial Assistance Agreement (Assistance Agreement) with a grantor. Under the Assistance Agreement, Southwell received a \$6,000,000 conditional grant to maintain the availability of health care and related services during the COVID-19 outbreak. Southwell has agreed to provide telehealth services, maintain adequate care management staff, and provide extended service hours to patients for the period July 1, 2020 through December 31, 2022. Grant funds are recorded as a refundable advance in the balance sheet until earned. The grant is being recognized as income evenly over the period the services are provided and reported as grant revenue in the statements of operations and changes in net assets.

#### 10. Long-Term Debt

A summary of long-term debt at September 30, 2020 and 2019 follows:

	2020	<u>2019</u>
2013 Series – 2.875% to 5.000% 2013 Series Revenue Anticipation Certificates, principal maturing in varying annual amounts and interest payable semi-annually, secured by the Trust Estate and an intergovernmental contract with Tift County, due December 1, 2042.	\$ 74,295,000	\$ 76,100,000
2016-A Bank – 1.80% note payable, payable in monthly installments of \$383,000 including interest, secured by EMR system and Trust Estate, due July 2026.	25,413,000	29,508,000
2018-A Bank – 2.80% note payable, interest payable quarterly and principal payment due at maturity, secured by Trust Estate, due March 24, 2022.	90,300,000	90,300,000
2018-C Bank – interest at a rate equal to 81.50% of the sum of the LIBOR daily floating rate plus 0.29% (1.95% at September 30, 2019), interest payable monthly and principal due at maturity, secured by the Trust Estate, due February 27, 2020.	_	18,200,000
2018-D Bank – interest at a rate equal to 81.50% of the sum of the LIBOR daily floating rate plus 0.29% (1.95% at September 30, 2019), interest payable monthly and principal due at maturity, secured by the Trust Estate, due February 27, 2020.	<del>-</del>	20,000,000

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

#### 10. Long-Term Debt, Continued

	<u>2020</u>	<u>2019</u>
2019-USDA – 2.375% note payable, payable in monthly installments of \$163,000 including interest, secured by the Trust Estate, due November 17, 2048.	\$ 40,142,000	\$ 41,130,000
2020-USDA – 2.75% note payable, payable in monthly installments of \$82,000 including interest, secured by the Trust Estate, due February 28, 2050.	19,746,000	-
Building lease – interest at a rate equal to 65% of the prime rate published by the <i>Wall Street Journal</i> (3.09% at September 30, 2020), secured by leased building. Payable in monthly installments of \$4,000 including interest, due		
October 16, 2034.	<u>599,000</u>	634,000
Total long-term debt	250,495,000	275,872,000
Add unamortized bond premium Less current portion of long-term debt	5,001,000 ( <u>7,557,000</u> )	5,226,000 ( <u>25,124,000</u> )
Long-term debt, net of current portion	\$ <u>247,939,000</u>	\$ <u>255,974,000</u>

Southwell operates under a Master Trust Indenture (MTI) that provides for the issuance of long-term debt under an obligated group structure. Through February 28, 2019, the Authority was the sole member of the Obligated Group. Effective March 1, 2019, Southwell and the System were added as members of the Obligated Group. All bonds and notes payable are covered under the MTI. Debt agreements covered by the MTI are secured by the Trust Estate which consists of a first pledge and lien on gross revenues of the Obligated Group.

On January 17, 2013, Southwell issued \$83,260,000 Revenue Anticipation Certificates Series 2013 (2013 Series). As security, Southwell created a first pledge of and lien on the gross revenues of Southwell. Pursuant to an intergovernmental contract, Tift County is obligated to make payments, if necessary, in amounts sufficient (limited to ad valorem tax not to exceed 7 mills) to enable Southwell to provide for the payment of principal and interest on the 2013 Series. Proceeds from the Series 2013 were issued to (i) finance or refinance certain additions, extensions, and improvements to Southwell's healthcare and related facilities, (ii) refund Southwell's outstanding 2002 Fixed, (iii) repay a bank loan, and (iv) pay the cost of issuing the 2013 Series.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

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### 10. Long-Term Debt, Continued

On July 1, 2016, Southwell entered into a master equipment lease/purchase agreement (2016-A Bank) for \$42,000,000 with a financial institution. Proceeds of the 2016-A Bank will be used for the acquisition, installation, and implementation of an Electronic Medical Records (EMR) system. During the term of the 2016-A Bank, Southwell must maintain a debt service coverage ratio greater than or equal to 1.10.

On September 24, 2018, Southwell entered into a loan agreement (2018-A Bank) for \$90,300,000 with a financial institution. Proceeds of the 2018-A Bank will be used for the construction of a patient tower and a new emergency center. During the term of the 2018-A Bank, Southwell must maintain a debt service coverage ratio greater than or equal to 1.25 and days unrestricted cash on hand greater than or equal to 75. Also on that date, Southwell obtained a nonrevolving line-of-credit with the financial institution for \$62,020,000 (2018-B Bank) subject to the same use and covenants as the 2018-A Bank. As of September 30, 2020, Southwell had not drawn on 2018-B Bank.

On February 28, 2018, Southwell entered into a loan agreement (2018-C Bank) for \$18,200,000 with a financial institution. Proceeds of the 2018-C Bank will be used for the Cook Medical Center replacement facility. During the term of the 2018-C Bank, Southwell must maintain a debt service coverage ratio greater than or equal to 1.25 and days unrestricted cash on hand greater than or equal to 75. Also on that date, Southwell entered into a loan agreement with the financial institution for \$20,000,000 (2018-D Bank) subject to the same use and covenants as the 2018-C Bank.

On December 17, 2018, Southwell entered into a loan agreement (2019-USDA) for \$41,856,000 with the United States Department of Agriculture (USDA). Proceeds of the 2019-USDA were used to repay a bank loan (2016-B). During the term of the 2019-USDA, Southwell must maintain a debt service coverage ratio greater than or equal to 1.10 and fund a debt service reserve fund.

On February 28, 2020, Southwell entered into a loan agreement (2020-USDA) for \$20,000,000 with the United States Department of Agriculture (USDA). Proceeds of the 2020-USDA were used to repay a bank loan (2018-D). During the term of the 2020-USDA, Southwell must maintain a debt service coverage ratio greater than or equal to 1.10 and fund a debt service reserve fund.

On December 19, 2016, Southwell received a loan commitment from the USDA to borrow \$90,300,000 for the future refinancing of the 2018-A Bank. The loan will be payable over 30 years.

On October 15, 2004, Southwell entered into a contract for the construction and lease of a medical office building. Southwell and the Tift County Development Authority (Tift Development) each provided \$800,000 towards the acquisition of property and construction of a building used for occupational health services. Tift Development holds title to the premises and leases the premises to Southwell. The lease is for a primary term of ten years without any rental payments or accrued interest and for an extended twenty-year term at a monthly rental sufficient in amount to amortize Tift Development's \$800,000 investment in equal and consecutive payments. The payments include interest computed at a rate equal to 65% of the prime rate published by *The Wall Street Journal* and adjusted on January 1 of each year. Southwell may purchase the premises at any time during the primary or extended term of the lease for the unamortized balance of Tift Development's investment plus \$1,000.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

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### 10. Long-Term Debt, Continued

As a condition of its worker's compensation insurance, Southwell has a letter-of-credit from a bank. The letter-of-credit is for \$871,000 for insurance policy year ending December 31, 2020. As of September 30, 2020, Southwell had not drawn on the letter-of-credit.

Scheduled principal repayments on long-term debt and payments on capital lease obligations are as follows:

Year Ending September 30,	Long-Term Debt	Capital Lease Obligations
2021	\$ 7,520,000	\$ 37,000
2022	8,746,000	38,000
2023	10,016,000	38,000
2024	10,279,000	39,000
2025	10,550,000	40,000
Thereafter	<u>202,785,000</u>	<u>407,000</u>
Total	249,896,000	599,000
Add unamortized bond premium	5,001,000	
Total	\$ <u>254,897,000</u>	\$ <u>599,000</u>

#### 11. Retirement Plan and Deferred Compensation Plan

The Tift Regional Health System 403(b) Plan (403(b) Plan) is a defined contribution plan established to provide benefits at retirement to all employees. All employees may make contributions up to a maximum annual amount as set periodically by the Internal Revenue Service. Southwell makes a matching contribution of 100% of the first 5% of each employee's contribution to the 403(b) Plan. Southwell's contributions to the 403(b) Plan were approximately \$5,768,000 and \$2,183,000 for 2020 and 2019, respectively.

The Tift Regional Health System 457(f) Deferred Compensation Plan (457(f) Plan) is a nonqualified, unfunded, ineligible deferred compensation plan for certain key executives. The 457(f) Plan was expanded in July 2020 to include certain highly compensated employees. Southwell contributes 5% of each participant's compensation in excess of the compensation limit imposed by the IRS to the 457(f) Plan. Participants vest in each year's contributions following five years of service. Contributions to the 457(b) were approximately \$732,000 in 2020.

#### 12. Commitments and Contingencies

Operating leases. Southwell leases various equipment and facilities under operating leases. Total rental expense for all operating leases was approximately \$1,069,000 and \$503,000 in 2020 and 2019, respectively. There are no future minimum lease payments under operating leases that have initial or remaining lease terms in excess of one year.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

### 12. Commitments and Contingencies, Continued

*Litigation.* Southwell is involved in litigation, regulatory investigations, and compliance matters arising in the course of business. After consultation with legal counsel, management estimates that these matters will be resolved without material adverse effect on Southwell's future financial position or results from operations.

Medicare recovery audit contractors. The Centers for Medicare and Medicaid Services utilizes Recovery Audit Contractors (RACs) who are paid a contingent fee to detect and correct improper Medicare payments. RACs have authority to pursue improper payments with a three year look back from the date a claim was paid.

Southwell has received notifications from RACs regarding potential Medicare overpayments due to incorrect coding of claims. When notification of a potential claim overpayment is received, Southwell accrues a liability for the estimated amount of Medicare overpayment. The liability is then reduced when claims are refunded to Medicare or successfully appealed. Southwell has recorded an estimated liability of \$200,000 and \$250,000 at September 30, 2020 and 2019, respectively, related to claims being audited by the RAC. The estimated liability is reported in estimated third-party payor settlements in the balance sheets.

Health care reform. There has been increasing pressure on Congress and some state legislatures to control and reduce the cost of healthcare at the national and the state levels. 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 certain provisions 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 Southwell.

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 Southwell's operational and financial performance will depend on certain developments, including the duration and spread of the outbreak, remedial actions and stimulus measures adopted by local, state, and federal governments, and impact on the Southwell's patients, employees, and vendors, all of which are uncertain and cannot be predicted. At this point, the extent to which COVID-19 may impact the Southwell's financial position or results of operations in uncertain.

#### 13. Insurance Arrangements

General and professional liability. Southwell has claims-made insurance coverage for professional liability and occurrence insurance coverage for general liability. The insurance policies have limits of \$1,000,000 per claim/occurrence and \$3,000,000 annual aggregate. Southwell is self-insured to cover the deductible portion of its general and professional insurance policy. Southwell's deductible is \$50,000 for individual claims or \$750,000/\$150,000 (professional/general) annual aggregate. Southwell had professional insurance payable of \$3,009,000 and \$1,543,000 and professional insurance recoverable of \$2,564,000 and \$1,188,000 at September 30, 2020 and 2019, respectively.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

### 13. Insurance Arrangements, Continued

Employee health. Southwell has a self-insured health plan for its employees. Southwell has purchased stop loss insurance to supplement the health plan, which will reimburse Southwell for individual claims in excess of \$150,000 annually. Southwell incurred expense related to this plan of approximately \$29,344,000 and \$18,335,000 in 2020 and 2019, respectively. Estimated accruals for claims incurred but not reported have been recorded in accrued expenses on the balance sheet. Estimated accruals were approximately \$3,552,000 and \$3,245,000 at September 30, 2020 and 2019, respectively.

Also, Southwell has entered into a loss financing agreement with other Georgia hospitals through a program developed by Georgia ADS, LLC. The program is designed to provide for the financing and payment of covered claims between \$225,000 and \$650,000. Commercial insurance has been obtained to provide coverage for claims exceeding \$500,000. Estimated accruals for amounts owed to the program under the loss financing agreement have been recorded in accrued expenses on the balance sheet. Estimated accruals were approximately \$1,033,000 and \$288,000 at September 30, 2020 and 2019, respectively.

### 14. Functional Expenses

Southwell provides health care services to residents within its geographic location. Expenses related to providing these services in 2020 and 2019 are as follows:

	September 30, 2020					
	Patient Care	General and				
	<u>Services</u>	<u>Administrative</u>	<u>Total</u>			
	<b>*</b> 444 000 000	<b>4.40.000.000</b>	<b>A. 4.0.4.000.000</b>			
Salaries and wages	\$ 141,220,000	\$ 42,986,000	\$ 184,206,000			
Employee benefits	37,511,000	11,418,000	48,929,000			
Contract and purchased						
services	11,505,000	10,521,000	22,026,000			
Physician services	16,229,000	1,395,000	17,624,000			
Supplies and drugs	74,045,000	5,963,000	80,008,000			
Depreciation	32,706,000	3,234,000	35,940,000			
Goodwill amortization	2,371,000	-	2,371,000			
Interest expense	4,762,000	-	4,762,000			
Other expense	<u>11,573,000</u>	28,775,000	40,348,000			
Total	\$ <u>331,922,000</u>	\$ <u>104,292,000</u>	\$ <u>436,214,000</u>			

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

### 14. Functional Expenses, Continued

		September 30, 2019					
	Patient Care	General and	_				
	<u>Services</u>	<u>Administrative</u>	<u>Total</u>				
Salaries and wages	\$ 97,308,000	\$ 25,656,000	\$ 122,964,000				
Employee benefits	23,152,000	6,104,000	29,256,000				
Contract and purchased	, ,	, ,	, ,				
services	6,506,000	4,186,000	10,692,000				
Physician services	7,851,000	1,122,000	8,973,000				
Supplies and drugs	40,057,000	2,500,000	42,557,000				
Depreciation	17,059,000	1,687,000	18,746,000				
Goodwill amortization	1,468,000	-	1,468,000				
Interest expense	2,601,000	-	2,601,000				
Other expense	<u>5,627,000</u>	<u>14,438,000</u>	20,065,000				
Total	\$ 201,629,000	\$ <u>55.693.000</u>	\$ 257,322,000				
10101	Ψ <u>~~;0~0,000</u>	Ψ <u>55,566,666</u>	Ψ <u>~~,~~~</u>				

The consolidated 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. Cost not directly attributable to a function is depreciation which is allocated to a function based on square footage. Employee benefits are allocated based on salaries and wages.

#### 15. Fair Value of Financial Instruments

The following methods and assumptions were used by Southwell in estimating the fair value of its financial instruments:

- Cash and cash equivalents, short-term investments, accounts payable, accrued expenses, estimated third-party payor settlements, Medicare accelerated payments and refundable advances: The carrying amount reported in the balance sheet approximate their fair value due to the short-term nature of these instruments.
- Assets as limited as to use: Amounts reported in the balance sheet are at fair value. See Note 5 for fair value measurement disclosures.
- Long-term debt: Fair value of Southwell's revenue anticipation certificates are based on
  quoted market prices and the carrying amounts for other long-term debt approximate their
  fair value. Based on inputs used in determining the estimated fair value, Southwell's
  long-term debt would be classified as Level 2 in the fair value hierarchy.

	20	20	2019		
	Carrying		Carrying		
	<u>Amount</u>	<u>Fair Value</u>	<u>Amount</u>	<u>Fair Value</u>	
Long-term debt	\$ <u>254,897,000</u>	\$ <u>254,284,000</u>	\$ <u>280,464,000</u>	\$ <u>280,832,000</u>	
		Continued			

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

### 15. Fair Value of Financial Instruments, Continued

Following is a description of the valuation methodologies used for assets at fair value. There have been no changes in the methodologies used at September 30, 2020.

Money market funds and certificates of deposit: Valued at amortized cost, which approximates fair value.

*U.S. Treasury obligations and U.S. Government agency obligations:* Certain U.S. government securities are valued at the closing price reported in the active market in which the individual security is traded. Other U.S. government securities are valued based on yields currently available on comparable securities of issuers with similar credit ratings.

Corporate obligations: Certain corporate obligations are valued at the closing price reported in the active market in which the security is traded. Other corporate obligations are valued based on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar securities, the security is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks.

Asset-backed securities: Asset-backed securities use valuation techniques that reflect market participants' assumptions and maximize the use of relevant observable inputs including quoted prices for similar assets, benchmark yield curves, and market corroborated inputs.

Marketable equity securities, equity mutual funds, non-U.S. equity mutual funds, commodity mutual funds, and other mutual funds: Certain equity securities and mutual funds are valued at the closing price reported on the active market on which the individual securities are traded. Other equity securities and mutual funds are valued based on quoted prices for similar investments in active or inactive markets or valued using observable market data.

#### 16. Rural Hospital Tax Credit Contributions

The State of Georgia (State) passed legislation which will allow individuals or corporations to receive a State tax credit for making a contribution to certain qualified rural hospital organizations during calendar years 2017 through 2024. Southwell submitted the necessary documentation and was approved by the State to participate in the rural hospital tax credit program for calendar years 2017 through 2020. Contributions received under the program approximated \$1,003,000 and \$529,000 during fiscal year 2020 and 2019, respectively. Southwell will have to be approved by the State to participate in the program in each subsequent year.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

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### 17. Liquidity and Availability

Financial assets available for general expenditure within one year of the balance sheet date, consists of the following at September 30, 2020 and 2019:

,	<u>2020</u>	<u>2019</u>
Cash and cash equivalents	\$ 94,764,000	\$ 61,187,000
Short-term investments	5,321,000	5,259,000
Patient accounts receivable, net	57,807,000	56,667,000
Estimated third-party payor settlements	3,098,000	-
Conditional grant refundable advance	( <u>5,400,000</u> )	
Total	\$ <u>155,590,000</u>	\$ <u>123,113,000</u>

Southwell has internally designated and held by trustee assets limited as to use, which are more fully described in Note 5, that are not available for expenditure within the next year and not reflected in the amounts above. However, the internally designated amounts could be made available if necessary. Southwell's restricted conditional grant refundable advance is not available for general expenditure and is excluded from the table above.

As of September 30, 2020 and 2019, Southwell was in compliance with loan covenants regarding days cash on hand.

Southwell structures its financial assts to be available as its general expenditures, liabilities, and other obligations come due.

#### 18. CARES Act Funding

On March 27, 2020, the *Coronavirus, Aid, Relief, and Economic Security Act* (CARES Act) was passed. Certain provisions of the CARES Act provide relief funds to healthcare providers. The funding is to be used to support healthcare-related expenses or lost revenue attributable to COVID-19. The U.S. Department of Health and Human Services (HHS) began distributing funds in April 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 remain open. 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. Southwell has received the following CARES Act funding:

- \$30 Billion General Distribution (1st round) On April 10, 2020, HHS distributed \$30 billion to nearly 320,000 Medicare fee-for-service providers based on their portion of 2019 Medicare fee-for-service payments. Southwell received approximately \$5,413,000 in funding from this distribution.
- \$20 Billion General Distribution (2nd round) On April 24, 2020, HHS distributed \$20 billion to Medicare fee-for-service providers based on revenues from cost report data or revenue submissions. Southwell received approximately \$3,704,000 in funding from this distribution.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

18. CARES Act Funding, Continued

• \$10 Billion Rural Distribution – On May 6, 2020, HHS distributed \$10 billion to almost 4,000 rural health care providers including hospitals, health clinics, and health centers.

Southwell received approximately \$13,966,000 in funding from this distribution.

• \$225 Million for COVID-19 Testing – On May 20, 2020, HHS distributed \$225 million to over 4,500 rural health clinics (RHCs) based on a fixed payment of approximately \$49,500 per RHC. Southwell received approximately \$99,000 in funding from this distribution.

- \$4.9 Billion Distribution to Skilled Nursing Facilities (SNFs) On May 22, 2020, HHS distributed \$4.9 billion to over 13,000 certified SNFs based on a fixed payment of \$50,000 plus \$2,500 per certified bed. Southwell received approximately \$288,000 in funding from this distribution.
- \$10 Billion Distribution to Safety Net Hospitals On June 12, 2020, HHS distributed \$10 billion to safety net hospitals that disproportionately provide care to the most vulnerable and operate on thin margins. Southwell received approximately \$5,000,000 in funding from this distribution.
- \$10 Billion Distribution to COVID-19 High-Impact Areas (2nd round) On July 20, 2020, HHS distributed \$10 billion to 695 hospitals in COVID-19 high-impact areas. Southwell received approximately \$9,000,000 in funding from this distribution.
- \$2.5 Billion Distribution for Skilled Nursing Facilities (SNFs) On August 27, 2020, HHS
  distributed \$2.5 billion to over 15,000 certified SNFs based on a fixed payment of \$10,000
  plus \$1,450 per certified bed. Southwell received approximately \$148,000 in funding from
  this distribution.
- \$4.9 Million Small Rural Hospital Improvement Program (SHIP) Grant On April 22, 2020, HHS appropriated approximately \$4.9 million to the State of Georgia Department of Community Health, State Office of Rural Health to disburse to 58 rural hospitals in Georgia for the purpose of preventing, preparing for, and responding to COVID-19. Southwell received approximately \$84,000 in funding from this distribution.
- \$4.9 Million Georgia Hospital Association Research and Education Foundation, Inc.
   (GHAREF) Grant The Assistant Secretary of Preparedness and Response (ASPR) of
   HHS allocated approximately \$350 million to state hospital associations and other entities
   to disburse to health care providers on the front lines of the COVID-19 pandemic.
   GHAREF received approximately \$4.9 million to disburse to hospitals in Georgia.
   Southwell received approximately \$132,000 in funding from this distribution.
- \$5 Million Rural Hospital Stabilization Operational Support Grant The State of Georgia appropriated \$5,000,000 for rural hospital stabilization grants and for additional emergency preparedness expenses. The grant was distributed based on data collected specific to COVID-19 inpatient admissions. Southwell received approximately \$306,000 from this distribution.

# Notes To Consolidated Financial Statements, Continued September 30, 2020 and 2019

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### 18. CARES Act Funding, Continued

The CARES Act also did the following:

- Sequestration Suspended the Medicare sequestration payment adjustment, which
  reduces payments to providers by 2%, for the period May 1, 2020 through December 31,
  2020.
- Medicare Add-on for Inpatient Hospital COVID-19 Patients Increased the Medicare payment for hospital patients admitted with COVID-19 by 20%.

The CARES Act 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. Southwell 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, gains, and other support in the consolidated statements of operations and changes in net assets.

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

#### 19. Cook County, City of Adel, and Adel Industrial Development Authority Contributions

Southwell (as the Authority's successor in interest) entered into an Intergovernmental Contract with Cook County (County Contract) whereby Cook County will pay Southwell three hundred sixty (360) equal monthly installments that when discounted by 3.25%, equals a net contribution of \$5,000,000. The contribution is in consideration of Southwell building and operating a new hospital facility in Cook County and the City of Adel. Southwell received approximately \$263,000 from Cook County during 2020.

Southwell (as the Authority's successor in interest) entered into an Intergovernmental Contract with City of Adel (City Contract) whereby City of Adel will pay Southwell three hundred sixty (360) equal monthly installments that when discounted by 3.25%, equals a net contribution of \$4,000,000. The contribution is in consideration of Southwell building and operating a new hospital facility in Cook County and the City of Adel. Southwell received approximately \$209,000 from City of Adel during 2020.

Southwell (as the Authority's successor in interest) entered into an Intergovernmental Contract with Adel Industrial Development Authority (AIDA) whereby AIDA would acquire tracts of land and convey the land to Southwell for the construction of a new hospital facility in Cook County and the City of Adel. Southwell recorded the fair value of the land received from AIDA, approximately \$787,000, in 2020.



#### INDEPENDENT AUDITOR'S REPORT ON CONSOLIDATING INFORMATION

Board of Directors Southwell, Inc. Tifton, Georgia

We have audited the consolidated financial statements of Southwell, Inc. as of and for the year ended September 30, 2020, and our report thereon dated February 19, 2021, which expressed an unmodified opinion on those financial statements, appears on pages 1 through 2. Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The consolidating information included in this report on pages 35 to 37, inclusive, is presented for purposes of additional analysis of the consolidated financial statements rather than to present the financial position and results of operations, and changes in net assets of the individual companies, and is not a required part of the consolidated financial statements. Accordingly, we do not express an opinion on the financial position, results of operations, and changes in net assets of the individual companies.

The consolidating information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. Such information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the consolidating information is fairly stated in all material respects in relation to the consolidated financial statements as a whole.

Wraffin & Tucker, LLP
Atlanta, Georgia

Atlanta, Georgia February 19, 2021

### SOUTHWELL, INC. Consolidating Balance Sheet (In Thousands) September 30, 2020

Assets	Southwell, Inc.	Tift Regional Health <u>System, Inc.</u>	Southwell <u>Ambulatory, Inc.</u>	CareAlliance: An Accountable Care Organization, LLC	Tift Enterprises, Inc.	Intercompany Eliminations	<u>Total</u>
Current assets:							
Cash and cash equivalents	\$ -	\$ 93,749	\$ 1,005	\$ 10	\$ -	\$ -	\$ 94,764
Short-term investments	-	5,321	-	Ψ . · · · · · · · · · · · · · · · · · ·	-	-	5,321
Patient accounts receivable, net	-	56,770	1,037	-	-	-	57,807
Estimated third-party payor settlements	-	3,098	-	-	-	-	3,098
Supplies, at lower of cost and net realizable value	-	3,448	-	-	-	-	3,448
Professional insurance recoverable	-	2,564	-	-	-	-	2,564
Other current assets		<u>9,816</u>	25	<del></del>			9,841
Total current assets	-	174,766	2,067	10	-	-	176,843
Assets limited as to use	-	445,594	-	-	-	-	445,594
Property and equipment, net	-	321,720	1,137	-	-	-	322,857
Other investments	-	849	-	-	170	-	1,019
Prepaid recruitment expense	-	3,002	25	-	-	-	3,027
Goodwill		<u>2,305</u>	<u>3,511</u>				<u>5,816</u>
Total assets	\$	\$ <u>948,236</u>	\$ <u>6,740</u>	\$ <u>10</u>	\$ <u>170</u>	\$	\$ <u>955,156</u>
Liabilities and Net Assets Current liabilities:							
Current portion of long-term debt	\$ -	\$ 7,557	\$ -	\$ -	\$ -	\$ -	\$ 7,557
Accounts payable	· -	38,271	, 71	· -	· -	· -	38,342
Accrued expenses	-	26,961	135	-	-	-	27,096
Estimated third-party payor settlements	-	1,018	-	-	-	-	1,018
Professional insurance payable	-	3,009	-	-	-	-	3,009
Medicare accelerated payments, current portion	-	5,203	-	-	-	-	5,203
Refundable advance grant revenue		<u>5,400</u>					<u>5,400</u>
Total current liabilities	-	87,419	206	-	-	-	87,625
Medicare accelerated payments, net of current portion	-	20,122	-	-	-	-	20,122
Deferred compensation	-	802	-	-	-	-	802
Long-term debt, net of current portion		<u>247,939</u>					<u>247,939</u>
Total liabilities	-	356,282	206	-	-	-	356,488
Net assets without donor restrictions	<del></del>	<u>591,954</u>	6,534	10	<u>170</u>		<u>598,668</u>
Total liabilities and net assets	\$	\$ <u>948,236</u>	\$ <u>6,740</u>	\$ <u>10</u>	\$ <u>170</u>	\$	\$ <u>955,156</u>

See report on consolidating information.

# SOUTHWELL, INC. Consolidating Statement of Operations and Changes in Net Assets (In Thousands) September 30, 2020

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	Southwell, Inc.	Tift Regional Health System, Inc.	Southwell Ambulatory, Inc.	CareAlliance: An Accountable Care Organization, LLC	Tift Enterprises, Inc.	Intercompany Eliminations	<u>Total</u>
Revenues, gains, and other support:  Net patient service revenue  Other revenue  CARTA SACT funding	\$ - - -	\$ 388,928 9,110 38,140	\$ 2,749 - -	\$ - - -	\$ - - -	\$ - - -	\$ 391,677 9,110 38,140
Grant revenue  Total revenues, gains, and other support	_ <del></del>	600 436,778	2,749	<del></del>			600 439,527
Expenses:							
Salaries and wages	-	181,394	2,812	-	-	-	184,206
Employee benefits	-	48,391	538	-	-	-	48,929
Contract and purchased services	-	21,738	251	33	4	-	22,026
Physician services	-	17,624	-	-	-	-	17,624
Supplies and drugs	-	79,646	362	-	-	-	80,008
Depreciation	-	35,867	73	-	-	-	35,940
Goodwill amortization	-	2,186	185	-	-	-	2,371
Interest expense	-	4,762	-	-	-	-	4,762
Other expense		<u>39,716</u>	<u>629</u>	3			40,348
Total expenses		<u>431,324</u>	4,850	<u> 36</u>	4		<u>436,214</u>
Operating income (loss)		5,454	( <u>2,101</u> )	( <u>36</u> )	( <u>4</u> )		3,313

# SOUTHWELL, INC. Consolidating Statement of Operations and Changes in Net Assets, Continued (In Thousands) September 30, 2020

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	Southwell, Inc.	Tift Regional Health System, Inc.	Southwell Ambulatory, Inc.	CareAlliance: An Accountable Care Organization, LLC	Tift Enterprises, Inc.	Intercompany Eliminations	<u>Total</u>
Nonoperating gains: Investment income Rural hospital tax credit contributions Other loss	\$ - - 	\$ 28,465 1,003 ( <u>2,691</u> )	\$ - - -	\$ - - 	\$ 670 - -	\$ - - -	\$ 29,135 1,003 ( <u>2,691</u> )
Total nonoperating gains	<del>-</del>	26,777			<u>670</u>		27,447
Excess (deficit) of revenues over expenses	-	32,231	( 2,101)	( 36)	666	-	30,760
Capital contributions from Cook County and the City of Adel	-	1,259	-	-	-	-	1,259
Transfers between System and Enterprises Transfers between System and Ambulatory Transfers between System and ACO	- - -	496 ( 8,635) ( <u>36</u> )	8,635 	- - <u>36</u>	( 496) - -	- - -	- - -
Change in net assets without donor restrictions	-	25,315	6,534	-	170	-	32,019
Net assets without donor restrictions, beginning of year		<u>566,639</u>		10			<u>566,649</u>
Net assets without donor restrictions, end of year	\$	\$ <u>591,954</u>	\$ <u>6,534</u>	\$ <u>10</u>	\$ <u>170</u>	\$	\$ <u>598,668</u>

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



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 Southwell, Inc. Tifton, 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 consolidated financial statements of Southwell, Inc. (Southwell), which comprise the consolidated balance sheet as of September 30, 2020, and the related consolidated statements of operations and changes in net assets, and cash flows for the year then ended, and the related notes to the consolidated financial statements, and have issued our report thereon dated February 19, 2021.

#### Internal Control over Financial Reporting

In planning and performing our audit of the consolidated financial statements, we considered Southwell'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 consolidated financial statements, but not for the purpose of expressing an opinion on the effectiveness of Southwell's internal control. Accordingly, we do not express an opinion on the effectiveness of Southwell'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 Southwell's financial statements will not be prevented, or detected and corrected on a timely basis.

Continued

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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.

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 may exist that have not been identified.

#### **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether Southwell's consolidated financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the consolidated 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**

Draffin & Tucker, LLP

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 Southwell's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Southwell's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Atlanta, Georgia February 19, 2021