CONSOLIDATED FINANCIAL STATEMENTS

for the years ended September 30, 2023 and 2022



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CONTENTS

	Pages
Independent Auditor's Report	1-2
Consolidated Financial Statements:	
Balance Sheets	3
Statements of Operations and Changes in Net Assets	4
Statements of Cash Flows	5-6
Notes to Consolidated Financial Statements	7-37
Independent Auditor's Report on Consolidating Information:	38
Consolidating Balance Sheets	39-40
Consolidating Statements of Operations and Changes in Net Assets	41-44



INDEPENDENT AUDITOR'S REPORT

Board of Directors Southwell, Inc. Tifton, Georgia

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying consolidated financial statements of Southwell, Inc. (Southwell), which comprise the consolidated balance sheets as of September 30, 2023 and 2022, 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.

In our opinion, the accompanying consolidated financial statements present fairly, in all material respects, the financial position of Southwell, Inc. as of September 30, 2023 and 2022, and the results of operations, changes in net assets, and cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

Continued

1

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Auditor's Responsibilities for the Audit of the Financial Statements

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

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

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

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

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated February 29, 2024, on our consideration of Southwell, Inc.'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, Inc.'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, Inc.'s internal control over financial reporting and compliance.

) & Tucker, LLP

Atlanta, Georgia February 29, 2024

Consolidated Balance Sheets September 30, 2023 and 2022

	<u>2023</u>	<u>2022</u>
Assets:		
Current assets:		
Cash and cash equivalents	\$ 18,405,000	\$ 32,491,000
Patient accounts receivable, net	62,795,000	72,602,000
Estimated third-party payor settlements	3,876,000	4,985,000
Supplies, at lower of cost and net realizable value	2,165,000	3,203,000
Professional insurance recoverable	5,144,000	4,445,000
Other current assets	13,735,000	8,451,000
	<u> </u>	
Total current assets	106,120,000	126,177,000
Assets limited as to use	387,059,000	355,639,000
Property and equipment, net	323,937,000	346,529,000
Operating lease right-of-use assets	1,702,000	921,000
Finance lease right-of-use assets	5,122,000	1,537,000
Other investments	6,134,000	6,069,000
Prepaid recruitment expense	4,606,000	4,330,000
Goodwill	924,000	1,673,000
Total assets	\$ <u>835,604,000</u>	\$ <u>842,875,000</u>
Liabilities and Net Assets:		
Current liabilities:		• • • • • • • • • •
Current portion of long-term debt	\$ 10,899,000	\$ 10,092,000
Current portion of operating lease liabilities	653,000	455,000
Current portion of finance lease liabilities	761,000	497,000
Accounts payable	19,520,000	17,812,000
Accrued expenses	29,863,000	28,242,000
Estimated third-party payor settlements	1,171,000	1,269,000
Professional insurance payable	6,847,000	5,196,000
Refundable advance of grant revenue		600,000
Total current liabilities	69,714,000	64,163,000
Deferred compensation	789,000	700,000
Long-term debt, net of current portion	215,151,000	226,907,000
Operating lease liabilities, net of current portion	1,034,000	438,000
Finance lease liabilities, net of current portion	3,975,000	859,000
Total liabilities	290,663,000	293,067,000
Net assets without donor restrictions	<u>544,941,000</u>	<u>549,808,000</u>
Total liabilities and net assets	\$ <u>835,604,000</u>	\$ <u>842,875,000</u>

See accompanying notes to consolidated financial statements.

Consolidated Statements of Operations and Changes in Net Assets Years Ended September 30, 2023 and 2022

	2023	<u>2022</u>
Revenues, gains, and other support:		
Net patient service revenue	\$ 450,729,000	\$ 436,062,000
Other revenue	13,822,000	8,811,000
CARES and ARP Act funding	841,000	17,160,000
Grant revenue	600,000	2,400,000
Total revenues, gains, and other support	465,992,000	464,433,000
Expenses:		
Salaries and wages	208,282,000	205,144,000
Employee benefits	65,364,000	53,969,000
Contract and purchased services	28,927,000	33,224,000
Physician services	19,285,000	15,931,000
Supplies and drugs	91,327,000	85,145,000
Depreciation	38,374,000	39,887,000
Goodwill amortization	749,000	1,513,000
Interest expense	5,256,000	4,592,000
Other expenses	47,357,000	46,998,000
Total expenses	504,921,000	486,403,000
Operating loss	(<u>38,929,000</u>)	(<u>21,970,000</u>)
Nonoperating gains (losses):		
Investment income (loss)	31,111,000	(65,320,000)
Rural hospital tax credit contributions	2,479,000	2,779,000
Total nonoperating gains (losses)	33,590,000	(<u>62,541,000</u>)
Excess revenues (expenses)	(5,339,000)	(84,511,000)
Capital contributions:		
Capital contributions from Cook County and the City of Adel	472,000	472,000
Change in net assets without donor restrictions	(4,867,000)	(84,039,000)
Net assets without donor restrictions, beginning of year	<u>549,808,000</u>	<u>633,847,000</u>
Net assets without donor restrictions, end of year	\$ <u>544,941,000</u>	\$ <u>549,808,000</u>

See accompanying notes to consolidated financial statements.

Consolidated Statements of Cash Flows Years Ended September 30, 2023 and 2022

	<u>2023</u>	<u>2022</u>
Cash flows from operating activities: Receipts from and on behalf of patients CARES and ARP Act receipts Payments to employees Payments to suppliers and contractors Other receipts Interest paid Investment income Rural hospital tax credit contributions	$\begin{array}{r} \underline{1020}\\ \$ \ 461,547,000\\ 841,000\\ (271,936,000)\\ (188,745,000)\\ 13,822,000\\ (5,200,000)\\ 9,870,000\\ \underline{2,479,000} \end{array}$	$\begin{array}{r} \underline{1022}\\ \$ \ 404,358,000\\ 17,160,000\\ (259,700,000)\\ (191,212,000)\\ 8,811,000\\ (\ 4,638,000)\\ 16,873,000\\ \underline{2,779,000} \end{array}$
Net cash provided (used) by operating activities	22,678,000	(<u>5,569,000</u>)
Cash flows from financing activities: Proceeds from issuance of long-term debt Payments on long-term debt Payments on finance lease liabilities Capital contributions from Cook County and the City of Adel Net cash used by financing activities	- (11,005,000) (795,000) <u>472,000</u> (<u>11,328,000</u>)	90,300,000 (100,177,000) (526,000) <u>472,000</u> (<u>9,931,000</u>)
Cash flows from investing activities: Purchases of property and equipment, net of retirements Sale of debt and equity securities Purchase of debt and equity securities Sale (purchase) of other investments	(15,192,000) 122,860,000 (134,412,000) (<u>75,000</u>)	(28,804,000) 171,872,000 (187,079,000) <u>297,000</u>
Net cash used by investing activities	(<u>26,819,000</u>)	(<u>43,714,000</u>)
Net change in cash and cash equivalents	(15,469,000)	(59,214,000)
Cash and cash equivalents, beginning of year	44,077,000	<u>103,291,000</u>
Cash and cash equivalents, end of year	\$ <u>_28,608,000</u>	\$ <u>44,077,000</u>

Consolidated Statements of Cash Flows, Continued Years Ended September 30, 2023 and 2022

	<u>2023</u>	<u>2022</u>
Reconciliation of cash and cash equivalents to the		
balance sheets:		
Cash and cash equivalents	\$ 18,405,000	\$ 32,491,000
Cash and cash equivalents included in assets limited as to use	10,165,000	11,538,000
Cash and cash equivalents included in other investments	38,000	48,000
Total cash and cash equivalents	\$ <u>28,608,000</u>	\$ <u>44,077,000</u>
Reconciliation of change in net assets to net cash		
provided (used) by operating activities:		
Change in net assets	\$(4,867,000)	\$(84,039,000)
Adjustments to reconcile change in net assets to		
cash provided (used) by operating activities:		
Depreciation	38,374,000	39,887,000
Goodwill amortization	749,000	1,513,000
Operating lease right-of-use assets amortization	627,000	653,000
Change in unrealized (gains) losses on investments	(21,241,000)	82,193,000
Bond premium and issue cost amortization	56,000	(46,000)
Capital contributions from Cook County and the		
City of Adel	(472,000)	(472,000)
Changes in:		
Patient accounts receivable	9,807,000	(15,450,000)
Estimated third-party payor settlements	1,011,000	3,209,000
Supplies	1,038,000	513,000
Professional insurance recoverable	(699,000)	1,884,000
Other current assets	(5,284,000)	693,000
Prepaid recruitment expense	(276,000)	(339,000)
Accounts payable	1,708,000	(11,093,000)
Accrued expenses	1,621,000	(352,000)
Professional insurance payable	1,651,000	(1,561,000)
Medicare accelerated payments	-	(19,463,000)
Refundable advance of grant revenue	(600,000)	(2,400,000)
Deferred compensation	89,000	(235,000)
Operating lease liabilities	(<u>614,000</u>)	(<u>664,000</u>)
Net cash provided (used) by operating activities	\$ <u>22,678,000</u>	\$(<u>5,569,000)</u>
Supplemental disclosure of cash flow information:		
Assets acquired through leases	\$ <u>5,583,000</u>	\$ <u>919,000</u>

See accompanying notes to consolidated financial statements.

Notes To Consolidated Financial Statements September 30, 2023 and 2022

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, Cook 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. 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 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.

Southwell is the sole member of Southwell Ambulatory, Inc. (Ambulatory). Ambulatory operates ambulatory surgical centers.

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.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

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

Use of estimates, continued. 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.

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 15.20% investment in Stratus Healthcare, LLC, and a 25.00% investment in Diagnostic PET, LLC.

Assets limited as to use. Assets limited as to use include assets held by trustee 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.

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.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

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

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 finance 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.

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 \$969,000 and \$1,010,000 during 2023 and 2022, 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 2023 and 2022 was approximately \$-0- and \$942,000, 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.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

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

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.

Refundable advance of grant revenue. A refundable advance arises when assets are received before revenue recognition criteria has been satisfied. Grant advance payments are reported as a refundable advance until donor conditions such as qualifying expenditures have been substantially met. See Note 9 for additional information.

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 include 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).

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

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

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 Financial Assistance Policy (FAP) 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.

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

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

Professional insurance recoverable and payable. Professional insurance recoverable represents amounts over the deductible which are the responsibility of the insurance company providing the coverage. Professional insurance payable is accrued liabilities for known claims and incidents, as well as estimated claims incurred but not yet 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.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

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

Income taxes, continued. 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, 2023 and 2022 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.

Accounting Pronouncement Not Yet Adopted. In June 2016, the FASB issued ASU No. 2016-13, *Financial Instruments - Credit Losses* (Topic 326), which introduces a new current expected credit loss (CECL) method for measuring credit losses on financial assets measured at amortized cost, replacing the previous incurred loss method that delays recognition until it is probable a loss has been incurred. The new guidance requires the immediate recognition of estimated credit losses that are expected to occur. The new guidance, including subsequent amendments, is effective for Southwell as of October 1, 2023. Southwell is continuing to evaluate the impact the guidance will have on the consolidated financial statements.

Subsequent events. In preparing these financial statements, Southwell has evaluated events and transactions for potential recognition or disclosure through February 29, 2024, 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.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

2. Net Patient Service Revenue, Continued

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.

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, 2019 and SM's Medicare cost reports have been settled by the MAC through June 30, 2020.

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).

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

2. Net Patient Service Revenue, Continued

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, 2020 and SM's Medicaid cost reports
have been settled by the Medicaid fiscal intermediary through June 30, 2020.

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 \$5,511,000 and \$6,948,000 during 2023 and 2022, 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 \$4,955,000 and \$4,779,000 during 2023 and 2022, respectively.

Medicaid has five (5) Directed Payment Programs. Southwell participates in the Hospital Directed Payment Program (HDPP) for Public Hospitals. The HDPP payments are based on a measure of the difference between Medicaid CMO payments and the amount that could be paid based on Medicare payment principles. The HDPP payments are made to the CMOs and the CMOs are required to transfer the payments to Southwell. The net amount of HDPP payment adjustments recognized in net patient service revenue was approximately \$4,850,000 and \$2,472,000 during 2023 and 2022, respectively.

Southwell participates in the Supplemental Quality Incentive (SQI) payment program for nursing homes that demonstrate improvement in at least one of four quality metrics. SHR demonstrated improvement in two of the four quality metrics and recognized SQI payments of approximately \$28,000 and \$245,000 in net patient service revenue during 2023 and 2022, respectively.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

2. Net Patient Service Revenue, Continued

• *Medicaid, continued.* The State of Georgia has legislation known as the Provider Payment Agreement Act whereby hospitals in Georgia are assessed a "provider payment" in the amount of 1.45% of their net patient revenue. 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 \$4,804,000 and \$5,304,000 during 2023 and 2022, respectively. The payments are included in other expense in the accompanying statements of operations and changes in net assets.

The State of Georgia also has legislation known as the Nursing Home Provider Fee Act whereby nursing homes in Georgia are assessed a daily provider fee for each bed occupied by a non-Medicare patient. The provider fees are for the purpose of obtaining additional federal funding to supplement Medicaid payments made to nursing homes. The provider fees are returned to the nursing homes through both higher Medicaid rates and an add-on. Southwell made provider payments to the State of Georgia of approximately \$472,000 and \$518,000 during 2023 and 2022, 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.
- Uninsured patients. Southwell has a Financial Assistance Policy (FAP) in accordance with Internal Revenue Code § 501(r). Based on the FAP, following a determination of financial assistance eligibility, an individual will not be charged more than the Amounts Generally Billed (AGB) for emergency or other medical care provided to individuals with insurance covering that care. AGB is calculated by reviewing claims that have been paid in full (including deductibles and coinsurance paid by the patient) to the Southwell for medically necessary care by Medicare and private health insurers during a 12-month look-back period.

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.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

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2. Net Patient Service Revenue, Continued

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 2023 or 2022.

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 2023 or 2022. 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 2023 and 2022 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.

Net patient service revenue by major payor source for the years ended September 30, 2023 and 2022 is as follows:

	<u>2023</u>	<u>2022</u>
Medicare Medicaid Blue Cross Other third-party payors Self-pay	\$ 145,201,000 44,418,000 125,248,000 127,061,000 <u>8,801,000</u>	\$ 169,310,000 52,104,000 114,800,000 98,555,000 1,293,000
Total	\$ <u>450,729,000</u>	\$ <u>436,062,000</u>

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

2. Net Patient Service Revenue, Continued

Net patient service revenue by facility/line of business and timing of revenue recognition for the years ended September 30, 2023 and 2022 is as follows:

	<u>2023</u>	<u>2022</u>
Tift Regional Medical Center Southwell Medical Physician services and clinics Southwell Health and Rehabilitation Southwell Ambulatory	\$ 324,555,000 14,149,000 93,285,000 10,483,000 <u>8,257,000</u>	\$ 313,216,000 14,520,000 89,441,000 10,526,000 <u>8,359,000</u>
Total services transferred over time	\$ <u>450,729,000</u>	\$ <u>436,062,000</u>

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 for inpatient services are generally satisfied over a period s 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, point of sale 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, 2023 and 2022

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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>2023</u>	<u>2022</u>	
Gross patient charges	\$ <u>1,585,667,000</u>	\$ <u>1,516,137,000</u>	
Uncompensated services:			
Medicare	663,377,000	604,818,000	
Medicaid	170,672,000	164,599,000	
Blue Cross	60,944,000	52,613,000	
Other third-party payors	125,189,000	106,449,000	
Charity/indigent/uninsured discount	63,333,000	77,320,000	
Price concessions	51,423,000	74,276,000	
Total uncompensated care	<u>1,134,938,000</u>	<u>1,080,075,000</u>	
Net patient service revenue	\$ <u>450,729,000</u>	\$ <u>436,062,000</u>	

The estimated cost of charity/indigent care/uninsured discount was approximately \$20,167,000 and \$24,806,000 during 2023 and 2022, respectively. The estimated cost of charity/indigent care/ uninsured discount includes the direct and indirect cost of providing charity/indigent care/uninsured discount services and is estimated by utilizing a ratio of cost to gross charges applied to the gross uncompensated charges associated with providing charity/indigent care/uninsured discount.

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, 2023 and 2022 was as follows:

	<u>2023</u>	<u>2022</u>
Medicare Medicaid Blue Cross Other third-party payors Self-pay	31% 8% 19% 41% <u>1</u> %	30% 6% 24% 40% %
Total	<u>100</u> %	<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, 2023 and 2022

5. Assets Limited as to Use and Other Investments

The composition of assets limited as to use as of September 30, 2023 and 2022 is set forth in the following table.

	2023	<u>2022</u>
Internally designated for capital acquisitions: Cash Money market (cash equivalent) U.S. Treasury obligations U.S. Government agency obligations Corporate obligations Asset-backed securities Municipal securities Preferred securities Marketable equity securities Non-U.S. equity mutual funds Fixed income mutual funds Commodity mutual funds Other mutual funds		
Total	<u>380,094,000</u>	<u>349,607,000</u>
Internally designated for malpractice self-insurance: Cash Certificates of deposit Total	786,000 <u>3,231,000</u> <u>4,017,000</u>	786,000 <u>3,125,000</u> <u>3,911,000</u>
	<u>4,017,000</u>	
Internally designated for deferred compensation: Equity mutual funds	789,000	700,000
Held by trustee for debt service reserve: Cash	2,159,000	
Total assets limited as to use	\$ <u>387,059,000</u>	\$ <u>355,639,000</u>

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

5. Assets Limited as to Use and Other Investments, Continued

The composition of other investments as of September 30, 2023 and 2022 is set forth in the following table.

	<u>2023</u>	<u>2022</u>
Other investments:		
Cash	\$ 38,000	\$ 48,000
U.S. Treasury obligations	1,508,000	884,000
U.S. Government agency obligations	504,000	430,000
Asset-backed securities	2,926,000	3,581,000
Corporate obligations	195,000	195,000
Diagnostic PET, LLC	114,000	82,000
Distribution Cooperative, Inc.	849,000	849,000
Total	\$ <u>6,134,000</u>	\$ <u>6,069,000</u>

The fair values of investments measured on a recurring basis at September 30, 2023 and 2022 are as follows:

	September 30, 2023			
	Total	Level 1	Level 2	Level 3
Money market	\$ 750,000	\$ 750,000	\$-	\$-
Certificates of deposit	3,231,000	3,231,000	-	-
U.S. Treasury obligations	26,730,000	26,730,000	-	-
U.S. Government agency				
obligations	17,082,000	17,082,000	-	-
Corporate obligations	40,270,000	-	40,270,000	-
Asset-backed securities	71,019,000	-	71,019,000	-
Municipal securities	790,000	-	790,000	-
Preferred securities	88,000	-	88,000	-
Marketable equity securities	125,807,000	125,807,000	-	-
Equity mutual funds	789,000	789,000	-	-
Non-U.S. equity mutual funds	15,980,000	15,980,000	-	-
Fixed income mutual funds	36,645,000	36,645,000	-	-
Commodity mutual funds	23,567,000	23,567,000	-	-
Other mutual funds	20,029,000	20,029,000		
Total	382,777,000	\$ <u>270,610,000</u>	\$ <u>112,167,000</u>	\$
Diagnostic PET, LLC	114,000			
Distribution Cooperative, Inc.	849,000			
Cash	9,453,000			
Total	\$ <u>393,193,000</u>			

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

5. Assets Limited as to Use and Other Investments, Continued

	September 30, 2022			
	<u>Total</u>	Level 1	Level 2	Level 3
Money market Certificates of deposit U.S. Treasury obligations U.S. Government agency	\$ 515,000 3,125,000 20,428,000	\$ 515,0 3,125,0 20,428,0	00 - 00 -	\$- - -
obligations Corporate obligations Asset-backed securities Municipal securities Preferred securities	18,020,000 39,810,000 74,583,000 1,838,000 119,000	18,020,0 - - - -	00 - 39,810,000 74,583,000 1,838,000 119,000	- - - -
Marketable equity securities Equity mutual funds Non-U.S. equity mutual funds Fixed income mutual funds Commodity mutual funds Other mutual funds	102,171,000 700,000 13,370,000 33,936,000 23,837,000 17,254,000	102,171,0 700,0 13,370,0 33,936,0 23,837,0 <u>17,254,0</u>	00 - 00 - 00 - 00 - 00 -	- - - - -
Total	349,706,000	\$ <u>233,356,0</u>	<u>00</u> \$ <u>116,350,000</u>	\$
Diagnostic PET, LLC Distribution Cooperative, Inc. Cash	82,000 849,000 			
Total	\$ <u>361,708,000</u>			
A summary of investme	ent income follows	:	<u>2023</u>	2022
Interest and dividends Realized (losses) gains Unrealized gains (losse Gain on other investme Rental income, net of e Gain (loss) on disposal Other income	es) on investments ents expenses			\$ 13,830,000 2,332,000 (82,193,000) 494,000 (145,000) 164,000 <u>198,000</u>
Total			\$ <u>31,111,000</u>	\$(<u>65,320,000</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.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

6. **Property and Equipment**

A summary of property and equipment at September 30, 2023 and 2022 follows:

	<u>2023</u>	<u>2022</u>
Land	\$ 11,501,000	\$ 11,441,000
Land improvements	8,969,000	8,713,000
Buildings and improvements	380,459,000	380,568,000
Fixed equipment	29,792,000	29,691,000
Major movable equipment	367,800,000	357,705,000
	798,521,000	788,118,000
Less accumulated depreciation	477,447,000	445,051,000
	321,074,000	343,067,000
Construction-in-progress	2,863,000	3,462,000
Property and equipment, net	\$ <u>323,937,000</u>	\$ <u>346,529,000</u>

Contracts of approximately \$2,157,000 exist for the renovation and expansion of the facilities at TRMC. At September 30, 2023, the remaining commitment on these contracts approximated \$56,000.

7. Goodwill

Goodwill is related to the purchases of 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>2022</u>	Purchases	Amortization	Balance at September 30, <u>2023</u>
TOA LCASC VEC and VGA	\$ 10,000 839,000 <u>824,000</u>	\$ - - -	\$(10,000) (373,000) (<u>366,000</u>)	\$- 466,000 <u>458,000</u>
Total	\$ <u>1,673,000</u>	\$	\$(<u>749,000</u>)	\$ <u>924,000</u>
	Balance at September 30, <u>2021</u>	Purchases	Amortization	Balance at September 30, <u>2022</u>
TU and US TOA LCASC VEC and VGA Total	\$ 748,000 35,000 1,213,000 <u>1,190,000</u> \$ <u>3,186,000</u>	\$ - - - - - - - - - - - - - - - - - - -	\$(748,000) (25,000) (374,000) (<u>366,000</u>) \$(<u>1,513,000</u>)	\$ - 10,000 839,000 <u>824,000</u> \$ <u>1,673,000</u>

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

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. As of September 30, 2022, all MAAP payments had been recouped.

9. Refundable Advance of 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 refundable advance of grant revenue 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, 2023 and 2022 follows:

	<u>2023</u>	<u>2022</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, 2023.	\$-	\$ 2,050,000
2021 Series - 0.272% to 2.977% Federally Taxable 2021 Series Refunding 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.	72,470,000	73,355,000
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.	12,313,000	16,642,000

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

10. Long-Term Debt, Continued

	<u>2023</u>	<u>2022</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.	\$ 37,035,000	\$ 38,095,000
2020-USDA - 2.75% note payable, payable in monthly installments of \$82,000 including interest, secured by the Trust Estate, due February 28, 2050.	18,377,000	18,846,000
2021-USDA - 2.125% note payable, payable in monthly installments of \$340,000 including interest, secured by the Trust Estate, due December 15, 2051.	_86,460,000	88,672,000
Total long-term debt	226,655,000	237,660,000
Add unamortized bond premium Less bond issue cost Less current portion of long-term debt	- (605,000) (<u>10,899,000</u>)	7,000 (668,000) (<u>10,092,000</u>)
Long-term debt, net of current portion	\$ <u>215,151,000</u>	\$ <u>226,907,000</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 used 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, 2023 and 2022

10. Long-Term Debt, Continued

On June 3, 2021, Southwell issued \$73,540,000 Federally Taxable Refunding Revenue Anticipation Certificates Series 2021 (2021 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 2021 Series. Proceeds from the Series 2021 were used to (i) refund a portion of Southwell's outstanding 2013 Series and (ii) pay the cost of issuing the 2021 Series.

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 were 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 for each quarter. Southwell failed to meet the ratio for the third quarter of 2023. Southwell obtained a waiver of compliance with the ratio for that quarter. The waiver also removed the debt service coverage ratio covenant for the remainder of the agreement but added a day's cash on hand covenant of greater than or equal to 120 days, to be measured semi-annually.

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. 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 USDA. Proceeds of the 2020-USDA were used to repay a bank loan. 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 15, 2021, Southwell entered into a loan agreement (2021-USDA) for \$90,300,000 with the USDA. Proceeds of the 2021-USDA were used to repay a bank loan which financed the construction of a patient tower and a new emergency center. During the term of the 2021-USDA, Southwell must maintain a debt service coverage ratio greater than or equal to 1.10 and fund a debt service reserve fund.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

10. Long-Term Debt, Continued

Scheduled principal repayments on long-term debt are as follows:

Year Ending September 30,	Long-Term Debt
2024 2025 2026 2027 2028 Thereafter	\$ 10,899,000 11,456,000 10,861,000 7,212,000 7,352,000 <u>178,875,000</u>
Total	226,655,000
Less bond issue cost	(<u>605,000</u>)
Total	\$ <u>226,050,000</u>

11. Leases

Southwell has operating and finance leases for buildings and equipment. Southwell determines if an arrangement is a lease at inception of a contract. Leases with an initial term of twelve months or less are not recorded on the consolidated balance sheets.

Southwell has lease agreements which require payments for lease and nonlease components and has elected to account for these as a single lease component.

Right-of-use assets represent Southwell's right to use an underlying asset during the lease term, and lease liabilities represent Southwell's obligation to make lease payments arising from the lease. Right-of-use assets and lease liabilities are recognized at the commencement date, based on the net present value of fixed lease payments over the lease term. Southwell's lease terms include options to extend or terminate the lease when it is reasonably certain that the option will be exercised. As most of Southwell's operating leases do not provide an implicit rate, Southwell uses its incremental borrowing rate based on the information available at the commencement date in determining the present value of lease payments. Southwell considers recent debt issuances, as well as publicly available data for instruments with similar characteristics when calculating its incremental borrowing rates. Finance lease agreements generally include an interest rate that is used to determine the present value of future lease payments. Operating fixed lease expense and finance lease amortization expense are recognized on a straight-line basis over the lease term. Variable lease costs consist primarily of common area maintenance and are not significant to total lease expense.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

11. Leases, Continued

Operating and finance lease right-of-use assets and lease liabilities as of September 30, 2023 and 2022 were as follows:

	<u>2023</u>	<u>2022</u>
Operating leases: Right-of-use assets:	•	
Operating lease right-of-use assets	\$ <u>1,702,000</u>	\$ <u>921,000</u>
Lease liabilities: Current portion	\$ 653,000	\$ 455,000
Long-term	<u>1,034,000</u>	438,000
Total operating lease liabilities	\$ <u>1,687,000</u>	\$ <u>893,000</u>
Finance leases: Right-of-use assets:		
Finance lease right-of-use assets	\$ <u>5,122,000</u>	\$ <u>1,537,000</u>
Lease liabilities:	\$ 761,000	\$ 497,000
Current portion Long-term	<u>3,975,000</u>	\$ 497,000 <u>859,000</u>
Total finance lease liabilities	\$ <u>4,736,000</u>	\$ <u>1,356,000</u>

Operating expenses for the lease activity of Southwell as the lessee for the years ended September 30, 2023 and 2022 are as follows:

Lease Type	<u>2023</u>	<u>2022</u>
Operating lease cost Finance lease interest Finance lease amortization	\$ 651,000 37,000 <u>590,000</u>	\$ 684,000 40,000 510,000
Total lease cost	\$ <u>1,278,000</u>	\$ <u>1,234,000</u>

Cash paid for amounts included in the measurement of lease liabilities for the years ended September 30, 2023 and 2022 are as follows:

	<u>2023</u>	<u>2022</u>
Operating cash flows from operating leases Operating cash flows from finance leases Financing cash flows from finance leases	\$ 612,000 23,000 <u>795,000</u>	\$ 694,000 37,000 <u>526,000</u>
Total	\$ <u>1,430,000</u>	\$ <u>1,257,000</u>

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

11. Leases, Continued

The aggregate future payments on operating and finance leases as of September 30, 2022 are as follows:

Year Ending September 30,	Finance	<u>Operating</u>
2024	\$ 901,000	\$ 692,000
2025	967,000	277,000
2026	964,000	199,000
2027	840,000	199,000
2028	526,000	199,000
Thereafter	<u>1,010,000</u>	236,000
Total undiscounted cash flows	5,208,000	1,802,000
Less present value discount	472,000	115,000
Total lease liabilities	\$ <u>4,736,000</u>	\$ <u>1,687,000</u>

Average lease terms and discount rates at September 30, 2023 and 2022 were as follows:

	<u>2023</u>	<u>2022</u>
Weighted-average remaining lease term (years):		
Operating leases	4.52	2.36
Finance leases	6.34	6.50
Weighted-average discount rate:		
Operating leases	3.00%	3.00%
Finance leases	3.17%	2.63%

12. 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 certain matching contributions to the 403(b) Plan. Southwell's contributions to the 403(b) Plan were approximately \$7,154,000 and \$6,305,000 for 2023 and 2022, 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 and highly compensated employees. Contributions to the 457(f) Plan must be approved annually by the Board of Directors. Participants vest in each year's contributions following five years of service. No contributions to the 457(f) Plan were made in 2023 or 2022.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

13. Contingencies

Litigation. Southwell is subject to litigation, regulatory investigations, and compliance matters arising in the course of business. After consultation with legal counsel, management estimates that any matters would 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 \$50,000 at September 30, 2023 and 2022, related to claims being audited by the RAC. The estimated liability is reported in estimated third-party payor settlements in the balance sheets.

Healthcare 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 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 Southwell's patients, employees, and vendors, all of which are uncertain and cannot be predicted. The extent to which COVID-19 may impact Southwell's financial position or results of operations is uncertain. The federal Public Health Emergency for COVID-19 expired on May 11, 2023.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

14. 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 professional and general liability insurance policies. Southwell's deductible for individual claims/occurrences is \$500,000 and annual aggregates of \$6,500,000. Southwell had professional insurance payable of \$6,847,000 and \$5,196,000 and professional insurance recoverable of \$5,144,000 and \$4,445,000 at September 30, 2023 and 2022, respectively.

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 \$225,000 annually. Southwell incurred expense related to this plan of approximately \$40,065,000 and \$31,449,000 in 2023 and 2022, respectively. Estimated accruals for claims incurred but not reported have been recorded in accrued expenses on the balance sheet. Estimated accruals were approximately \$5,162,000 and \$3,896,000 at September 30, 2023 and 2022, 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 \$750,000. Commercial insurance has been obtained to provide coverage for claims exceeding \$750,000. Estimated accruals for amounts owed (to) from the program under the loss financing agreement have been recorded in accrued expenses on the balance sheets. Estimated accruals were approximately \$(318,000) and \$339,000 at September 30, 2023 and 2022, respectively.

15. Functional Expenses

Southwell provides health care services to residents within its geographic location. Expenses related to providing these services in 2023 and 2022 are as follows:

		September 30, 2023	
	Patient Care	General and	
	<u>Services</u>	Administrative	<u>Total</u>
Salaries and wages	\$ 165,491,000	\$ 42,791,000	\$ 208,282,000
Employee benefits	48,973,000	16,391,000	65,364,000
Contract and purchased	10,010,000	10,001,000	00,001,000
services	17,135,000	11,792,000	28,927,000
Physician services	19,075,000	210,000	19,285,000
Supplies and drugs	86,715,000	4,612,000	91,327,000
Depreciation	34,920,000	3,454,000	38,374,000
Goodwill amortization	749,000	-	749,000
Interest expense	5,256,000	-	5,256,000
Other expenses	12,891,000	34,466,000	47,357,000
Total	\$ <u>391,205,000</u>	\$ <u>113,716,000</u>	\$ <u>504,921,000</u>
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Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

15. Functional Expenses, Continued

	September 30, 2022							
	Patient Care	General and						
	<u>Services</u>	Administrative	<u>Total</u>					
Salaries and wages	\$ 162,142,000	\$ 43,002,000	\$ 205,144,000					
Employee benefits	42,656,000	11,313,000	53,969,000					
Contract and purchased	42,000,000	11,010,000	33,303,000					
services	22,779,000	10,445,000	33,224,000					
Physician services	15,756,000	175,000	15,931,000					
Supplies and drugs	80,898,000	4,247,000	85,145,000					
Depreciation	36,297,000	3,590,000	39,887,000					
Goodwill amortization	1,513,000	-	1,513,000					
Interest expense	4,592,000	-	4,592,000					
Other expenses	12,776,000	34,222,000	46,998,000					
Total	\$ <u>379,409,000</u>	\$ <u>106,994,000</u>	\$ <u>486,403,000</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.

16. 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, accounts payable, accrued expenses, estimated third-party payor settlements, 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 and other investments: 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 is 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.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

16. Fair Value of Financial Instruments, Continued

	20	23	2022			
	Carrying		Carrying			
	<u>Amount</u>	<u>Fair Value</u>	<u>Amount</u>	<u>Fair Value</u>		
Long-term debt	\$ <u>226,050,000</u>	\$ <u>209,240,000</u>	\$ <u>236,999,000</u>	\$ <u>222,452,000</u>		

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, 2023 and 2022.

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, municipal securities and preferred 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, fixed income 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.

17. 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 2023. Contributions received under the program approximated \$2,479,000 and \$2,779,000 during fiscal years 2023 and 2022, respectively. Southwell will have to be approved by the State to participate in the rural hospital year.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

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18. Liquidity and Availability

Financial assets available for general expenditure within one year of the balance sheet date, consists of the following at September 30, 2023 and 2022:

	<u>2023</u>	2022
Cash and cash equivalents Patient accounts receivable, net Estimated third-party payor settlements Conditional grant refundable advance	\$ 18,405,000 62,795,000 3,876,000 	\$ 32,491,000 72,602,000 4,985,000 (<u>600,000</u>)
Total	\$ <u>85,076,000</u>	\$ <u>109,478,000</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.

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

19. CARES and ARP Act Funding

On March 27, 2020, the *Coronavirus, Aid, Relief, and Economic Security Act* was passed, on April 24, 2020, the *Paycheck Protection Program and Health Care Enhancement Act* was passed, and on March 11, 2021 the *American Rescue Plan Act* was passed (collectively, CARES and ARP Act). Certain provisions of the CARES and ARP 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. Southwell has received the following CARES and ARP 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, 2023 and 2022

19. CARES and ARP 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 Rural Health Clinic COVID-19 Testing (RHCCT) 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.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

19. CARES and ARP Act Funding, Continued

- \$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 \$288,000 from this distribution.
- \$1.2 Million Provider Relief Fund Supplemental Grant On May 13, 2020, HHS appropriated approximately \$1.2 million to the State of Georgia, Department of Community Health, State Office of Rural Health to disburse to 88 rural health clinics in Georgia for the purpose of supporting healthcare-related expenses or lost revenue attributed to COVID-19. Southwell received approximately \$18,000 in funding from this distribution.
- \$150 Billion Coronavirus Relief Fund (CRF) HHS distributed \$150 billion to state, local, and tribal governments through the CRF. The State of Georgia received \$5.9 billion in CRF funds. The State of Georgia allocated \$77.8 million of the CRF funds to nursing homes. Southwell was allocated \$168,000 in CRF funds from the State of Georgia. Southwell must submit expenses for reimbursement to the State of Georgia to receive the funds. Southwell received reimbursement of \$155,000.
- \$2.25 Billion Allocation to Nursing Homes for the Quality Incentive Payment Program -HHS allocated \$2.25 billion to NHs that pass two initial gateway qualification tests on both their rate of infection and rate of mortality. Payments were made monthly from October 2020 through January 2021 based on the previous month's performance with an additional payment made in February 2021 based on the aggregate performance period. Southwell received \$55,000 in funding from this allocation.
- \$475 Million Rural Health Clinic COVID-19 Testing and Mitigation Program (RHCCTM) -On June 6, 2021, HHS distributed \$475 million to 4,752 RHCs based on a fixed payment of \$100,000 per RHC. The funding is to be used for maintaining and increasing COVID-19 testing efforts, expanding access to testing in rural communities, and expanding the range of mitigation activities in local communities. Southwell received \$700,000 in funding from this allocation.
- \$398 Million Small Rural Hospital Improvement Program COVID-19 Testing and Mitigation Program HHS appropriated \$398 million to state governments to distribute to rural hospitals. The State of Georgia received \$13,436,000 to distribute to 52 rural hospitals. Southwell received \$258,000 in funding from this distribution.
- \$8.5 Billion *American Rescue Plan* Rural Payments In November 2021, HHS distributed \$8.5 billion to 43,842 rural healthcare providers. Southwell received \$12,769,000 in funding from this distribution.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

19. CARES and ARP Act Funding, Continued

- \$17 Billion Provider Relief Fund Phase 4 General Distribution In December 2021, HHS distributed batch 1 of Phase 4 of the Provider Relief Funds. Southwell received \$3,880,000 in funding from this distribution.
- \$350 Billion APR State Fiscal Recovery Fund (SFRF) HHS distributed \$350 billion to state, local, and tribal governments to support their response to and recovery from the COVID-19 public health emergency. The State of Georgia was allocated \$4.8 billion. The State of Georgia allocated \$1,045,000 to certain hospitals in the state. Southwell recognized \$941,000 in funding from this distribution.

The CARES and ARP 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 and extended to March 31, 2022 with subsequent legislation. Beginning April 1, 2022, the suspension was phased out through June 30, 2022.
- Medicare Add-on for Inpatient Hospital COVID-19 Patients Increased the Medicare payment for hospital patients admitted with COVID-19 by 20%.

The CARES and ARP 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 and ARP 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.

20. Cook County and City of Adel 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 both 2023 and 2022.

Notes To Consolidated Financial Statements, Continued September 30, 2023 and 2022

20. Cook County and City of Adel Contributions, Continued

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 both 2023 and 2022.

21. Subsequent Event

On November 2, 2023, the Centers for Medicare and Medicaid Services (CMS) finalized a rule to address how it would restore payments to hospitals affected by a 2018 decision to cut reimbursement amounts on 340B drugs to certain hospitals paid under the outpatient prospective payment system (OPPS). The rule is responsive to a Supreme Court opinion finding that the 2018 payment cuts were not consistent with CMS authority to set Medicare payments to hospitals for outpatient drugs. Under the rule, CMS will refund hospitals that had payments reduced with a one-time lump sum payment intended to account for the difference in what was paid to the hospitals and what should have been paid had the cut not been implemented. The refund will cover calendar years 2018 through 2022. CMS estimates that the total payments will be \$9 billion. Southwell received a lump sum payment of approximately \$6,820,000 in January 2024.



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 years ended September 30, 2023 and 2022, and our report thereon dated February 29, 2024, which expressed an unmodified opinion on those consolidated financial statements, appears on pages 1 through 2. Our audits were 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 39 to 44, inclusive, is presented for purposes of additional analysis of the consolidated financial statements rather than to present the financial position, 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 audits 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.

ffin & Tucker, LLP

Atlanta, Georgia February 29, 2024

38

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SOUTHWELL, INC. Consolidating Balance Sheets (In Thousands) September 30, 2023

	Southwell, Inc.	Tift Regional Health <u>System, Inc.</u>	Southwell Ambulatory, Inc.	CareAlliance: An Accountable Care <u>Organization, LLC</u>	Tift <u>Enterprises, Inc.</u>	Intercompany <u>Eliminations</u>	<u>Total</u>
Assets:							
Current assets:							
Cash and cash equivalents	\$-	\$ 18,194	\$ 201	\$ 10	\$ -	\$ -	\$ 18,405
Patient accounts receivable, net	-	62,114	681	-	-	-	62,795
Estimated third-party payor settlements	-	3,876	-	-	-	-	3,876
Supplies, at lower of cost and net realizable value	-	2,165	-	-	-	-	2,165
Professional insurance recoverable	-	5,144	-	-	-	-	5,144
Other current assets	-	13,697	38	-	-	-	13,735
Total current assets	-	105,190	920	10	-	-	106,120
Assets limited as to use	-	387,059	-	-	-	-	387,059
Property and equipment, net	-	317,993	5,944	-	-	-	323,937
Operating lease right-of-use assets	-	1,534	168	-	-	-	1,702
Finance lease right-of-use assets	-	5,122	-	-	-	-	5,122
Other investments	-	6,020	-	-	114	-	6,134
Prepaid recruitment expense	-	4,540	66	-	-	-	4,606
Goodwill			924				924
Total assets	\$	\$ <u>827,458</u>	\$ <u>8,022</u>	\$ <u>10</u>	\$ <u>114</u>	\$	\$ <u>835,604</u>
Liabilities and Net Assets:							
Current liabilities:							
Current portion of long-term debt	\$-	\$ 10,899	\$ -	\$ -	\$ -	\$-	\$ 10,899
Current portion of operating lease liabilities	-	525	128	-	-	-	653
Current portion of finance lease liabilities	-	761	-	-	-	-	761
Accounts payable	-	19,426	94	-	-	-	19,520
Accrued expenses	-	28,912	949	-	2	-	29,863
Estimated third-party payor settlements	-	1,171	-	-	-	-	1,171
Professional insurance payable	-	6,847	_	-	-	-	6,847
Total current liabilities	-	68,541	1,171	-	2	-	69,714
Deferred compensation	-	789	-	-	-	-	789
Long-term debt, net of current portion	-	215,151	-	-	-	-	215,151
Operating lease liabilities, net of current portion	-	1,001	33	-	-	-	1,034
Finance lease liabilities, net of current portion		3,975		-			3,975
Total liabilities	-	289,457	1,204	-	2	-	290,663
Net assets without donor restrictions		<u>538,001</u>	<u>6,818</u>	10	112		<u>544,941</u>
Total liabilities and net assets	\$	\$ <u>827,458</u>	\$ <u>8,022</u>	\$ <u>10</u>	\$ <u>114</u>	\$	\$ <u>835,604</u>

See report on consolidating information.

SOUTHWELL, INC. Consolidating Balance Sheets (In Thousands) September 30, 2022

	Southwell, Inc.	Tift Regional Health <u>System, Inc.</u>	Southwell Ambulatory, Inc.	CareAlliance: An Accountable Care <u>Organization, LLC</u>	Tift <u>Enterprises, Inc.</u>	Intercompany <u>Eliminations</u>	<u>Total</u>
Assets:							
Current assets:	•	* 00 007	• • • • • •	• • • •	•	•	* •• •• ••
Cash and cash equivalents	\$ -	\$ 32,227	\$ 254	\$ 10	\$ -	\$-	\$ 32,491
Patient accounts receivable, net	-	71,421	1,181	-	-	-	72,602
Estimated third-party payor settlements	-	4,985	-	-	-	-	4,985
Supplies, at lower of cost and net realizable value	-	3,203	-	-	-	-	3,203
Professional insurance recoverable Other current assets	-	4,445	-	-	-	-	4,445
Total current assets		8,408	<u>43</u> 1,478	<u>-</u> 10			8,451
Assets limited as to use	-	124,689	1,478	10	-	-	126,177
	-	355,639 339,913	- 6,616	-	-	-	355,639 346,529
Property and equipment, net	-	632	289	-	-	-	346,529 921
Operating lease right-of-use assets Finance lease right-of-use assets	-	1,537	209	-	-	-	1,537
Other investments	-	5,987	-	-	- 82	-	6.069
Prepaid recruitment expense	-	4,214	- 116	-	02	-	4,330
Goodwill		4,214	1,663			_	<u> </u>
Socawili		10	1,005		<u> </u>		1,075
Total assets	\$	\$ <u>832,621</u>	\$ <u>10,162</u>	\$ <u>10</u>	\$ <u>82</u>	\$	\$ <u>842,875</u>
Liabilities and Net Assets:							
Current liabilities:							
Current portion of long-term debt	\$-	\$ 10,092	\$ -	\$ -	\$ -	\$-	\$ 10,092
Current portion of operating lease liabilities	-	331	124	-	-	-	455
Current portion of finance lease liabilities	-	497	-	-	-	-	497
Accounts payable	-	17,601	211	-	-	-	17,812
Accrued expenses	-	27,173	1,069	-	-	-	28,242
Estimated third-party payor settlements	-	1,269	-	-	-	-	1,269
Professional insurance payable	-	5,196	-	-	-	-	5,196
Refundable advance grant revenue	-	600	-				600
Total current liabilities	-	62,759	1,404	-	-	-	64,163
Deferred compensation	-	700	-	-	-	-	700
Long-term debt, net of current portion	-	226,907	-	-	-	-	226,907
Operating lease liabilities, net of current portion	-	278	160	-	-	-	438
Finance lease liabilities, net of current portion		859	-	-	-		859
Total liabilities	-	291,503	1,564	-	-	-	293,067
Net assets without donor restrictions		<u>541,118</u>	8,598	10	82		<u>549,808</u>
Total liabilities and net assets	\$	\$ <u>832,621</u>	\$ <u>10,162</u>	\$ <u>10</u>	\$ <u>82</u>	\$	\$ <u>842,875</u>

See report on consolidating information.

SOUTHWELL, INC. Consolidating Statements of Operations and Changes in Net Assets (In Thousands) Year Ended September 30, 2023

	Southwell, Inc.	Tift Regional Health <u>System, Inc.</u>	Southwell Ambulatory, Inc.	CareAlliance: An Accountable Care Organization, LLC	Tift <u>Enterprises, Inc.</u>	Intercompany <u>Eliminations</u>	Total
Revenues, gains, and other support:							
Net patient service revenue	\$ -	\$ 442,472	\$ 8,257	\$ -	\$ -	\$-	\$ 450,729
Other revenue	-	13,820	2	-	-	-	13,822
CARES and ARP Act funding	-	841	-	-	-	-	841
Grant revenue		600					600
Total revenues, gains, and other support		<u>457,733</u>	8,259				<u>465,992</u>
Expenses:							
Salaries and wages	-	200,057	8,225	-	-	-	208,282
Employee benefits	-	63,570	1,794	-	-	-	65,364
Contract and purchased services	-	28,476	449	-	2	-	28,927
Physician services	-	19,235	50	-	-	-	19,285
Supplies and drugs	-	90,545	782	-	-	-	91,327
Depreciation	-	37,728	646	-	-	-	38,374
Goodwill amortization	-	10	739	-	-	-	749
Interest expense	-	5,256	-	-	-	-	5,256
Other expenses		46,063	1,292		2		47,357
Total expenses		<u>490,940</u>	<u>13,977</u>		4		<u>504,921</u>
Operating loss		(<u>33,207</u>)	(<u>5,718</u>)		(<u>4</u>)		(<u>38,929</u>)

SOUTHWELL, INC. Consolidating Statements of Operations and Changes in Net Assets, Continued (In Thousands) Year Ended September 30, 2023

	Southwell, Inc.	Tift Regional Health <u>System, Inc.</u>	Southwell Ambulatory, Inc.	CareAlliance: An Accountable Care Organization, LLC	Tift <u>Enterprises, Inc.</u>	Intercompany <u>Eliminations</u>	<u>Total</u>
Nonoperating gains (losses): Investment income (loss) Rural hospital tax credit contributions	\$ 	\$ 30,459 	\$	\$	\$ 652 	\$	\$ 31,111
Total nonoperating gains (losses)		32,938			652		33,590
Excess revenues (expenses)	-	(269)	(5,718)	-	648	-	(5,339)
Capital contributions and related party transfers: Capital contributions from Cook County and the City of Adel Transfers between System and Enterprises Transfers between System and Ambulatory	- - -	472 618 (<u>3,938</u>)	- - 3,938	- - -	(618) 	- - -	472 - -
Change in net assets without donor restrictions	-	(3,117)	(1,780)	-	30	-	(4,867)
Net assets without donor restrictions, beginning of year		<u>541,118</u>	8,598	10	82		<u>549,808</u>
Net assets without donor restrictions, end of year	\$	\$ <u>538,001</u>	\$ <u>6,818</u>	\$ <u>10</u>	\$ <u>112</u>	\$	\$ <u>544,941</u>

See report on consolidating information.

SOUTHWELL, INC. Consolidating Statements of Operations and Changes in Net Assets (In Thousands) Year Ended September 30, 2022

	Southwell, Inc.	Tift Regional Health <u>System, Inc.</u>	Southwell Ambulatory, Inc.	CareAlliance: An Accountable Care Organization, LLC	Tift <u>Enterprises, Inc.</u>	Intercompany <u>Eliminations</u>	<u>Total</u>
Revenues, gains, and other support:							
Net patient service revenue	\$ -	\$ 427,703	\$ 8,359	\$ -	\$ -	\$-	\$ 436,062
Other revenue	-	8,808	3	-	-	-	8,811
CARES and ARP Act funding	-	17,160	-	-	-	-	17,160
Grant revenue		2,400					2,400
Total revenues, gains, and other support		<u>456,071</u>	8,362		<u> </u>		<u>464,433</u>
Expenses:							
Salaries and wages	-	196,066	9,078	-	-	-	205,144
Employee benefits	-	52,319	1,650	-	-	-	53,969
Contract and purchased services	-	32,727	495	-	2	-	33,224
Physician services	-	15,881	50	-	-	-	15,931
Supplies and drugs	-	84,263	882	-	-	-	85,145
Depreciation	-	39,402	485	-	-	-	39,887
Goodwill amortization	-	773	740	-	-	-	1,513
Interest expense	-	4,592	-	-	-	-	4,592
Other expenses		45,584	1,414				46,998
Total expenses		<u>471,607</u>	<u>14,794</u>		2		486,403
Operating loss		(<u>15,536</u>)	(<u>6,432</u>)		(<u>2</u>)		(<u>21,970</u>)

SOUTHWELL, INC. Consolidating Statements of Operations and Changes in Net Assets, Continued (In Thousands) Year Ended September 30, 2022

	Southwell, Inc.	Tift Regional Health <u>System, Inc.</u>	Southwell Ambulatory, Inc.	CareAlliance: An Accountable Care Organization, LLC	Tift <u>Enterprises, Inc.</u>	Intercompany Eliminations	Total
Nonoperating gains (losses): Investment income (loss) Rural hospital tax credit contributions	\$	\$(65,814) 	\$	\$	\$ 494 	\$	\$(65,320)
Total nonoperating gains (losses)		(<u>63,035</u>)			494		(<u>62,541</u>)
Excess revenues (expenses)	-	(78,571)	(6,432)	-	492	-	(84,511)
Capital contributions and related party transfers: Capital contributions from Cook County and the City of Adel Transfers between System and Enterprises Transfers between System and Ambulatory	- - 	472 538 (<u>6,505</u>)	- - - <u>6,505</u>	- - 	(538) 	- -	472 - -
Change in net assets without donor restrictions	-	(84,066)	73	-	(46)	-	(84,039)
Net assets without donor restrictions, beginning of year		<u>625,184</u>	8,525	10	128		<u>633,847</u>
Net assets without donor restrictions, end of year	\$	\$ <u>541,118</u>	\$ <u>8,598 </u>	\$ <u>10</u>	\$ <u>82</u>	\$	\$ <u>549,808</u>

See report on consolidating information.