#### **HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY**

#### **MINUTES OF THE FEBRUARY 20, 2025 MEETING**

#### (Open Session)

#### Attendees:

Authority Board Members: Dr. James Black, Tommy Gregors, Chris Hatcher, Dr. Jim Hotz, Dorothy Hubbard, Jackie Jenkins, Clinton Johnson, and Glenn Singfield, Sr.

Authority Legal Counsel: Tommy Coleman

Those Present on Behalf of Phoebe Putney Memorial Hospital, Inc.: Deb Angerami (PPMH President), Dawn Benson (PPHS General Counsel), Jessica Castle (PPHS CMEO), Brian Church (PPHS CFO/CAO), Dr. Dianna Grant (PPHS CMO), Felicia Lewis (Board Coordinator), Ben Roberts (PPHS Public Relations), Darrell Sabbs (PPHS Community Benefits), Dr. Jason Smith (PPMH CMO), Scott Steiner (PPHS President & CEO), Dr. Tracy Suber (PPHS VP Education)

Other Attendees:

Absent Authority Members: Sheri Barlow

#### Open Meeting and Establish a Quorum:

Chair Singfield called the meeting to order at 7:35am in the Willson Board Room at Phoebe Putney Memorial Hospital. Chair Singfield thanked all Members for their attendance and participation, and he observed that a quorum was present.

#### Oath of Office for New Authority Members / Disclosure Certificates:

Dr. Black and Mr. Hatcher were sworn in as new members of the Authority. A copy of the signed Oaths will be kept with these Minutes. Mr. Coleman asked each Authority member to complete a disclosure certificate.

#### Approval of the Agenda:

The proposed Agenda had been previously provided to the Authority Members and a motion to adopt the proposed Agenda for the meeting was made by Mr. Johnson and seconded by Ms. Hubbard. A copy of the Agenda as adopted is attached.

#### **Election of Officers for 2025:**

As contemplated in the Agenda, the Authority would need to elect a new slate of officers for the current year. Mr. Johnson made a motion to elect Mr. Singfield as Chair. Ms. Hubbard seconded the motion, which was approved by all Members in attendance with Mr. Singfield abstaining from the vote. Chair Singfield made a motion to elect Ms. Hubbard as Vice Chair. Mr. Johnson seconded the motion, which was approved by all Authority Members in attendance with Ms. Hubbard abstaining from the vote. Mr.

Johnson made a motion to elect Ms. Barlow as Secretary/Treasurer. Ms. Hubbard seconded the motion, which was approved by all Authority Members in attendance.

### **Approval of the Minutes:**

The proposed Minutes of the November 21, 2024 open session meeting of the Authority had likewise been provided to Members prior to this meeting and the same were considered for approval. Mr. Johnson made a motion and Mr. Gregors seconded the motion, to approve the Minutes as previously provided. The motion passed unanimously by vote of all Members.

#### **HAADC** Financial Update:

Mr. Church presented and reviewed an interim financial report for the Authority's current fiscal year through November 30, 2024. A copy of the Authority's Financial Statements as presented by Mr. Church is attached. Mr. Church also provided an update on recent rating agency meetings with Moody's and S&P.

Discussions, questions, and comments ensued.

#### **Certified PPMH Audit for FYE 2024:**

Mr. Church presented the Audited Financial Statements for Phoebe Putney Memorial Hospital for the year ending July 31, 2024 and the report also showed the 2023 financial statements for comparison purposes. Mr. Church stated that Draffin Tucker conducted the audit in accordance with generally accepted auditing standards and it is their opinion that the financial statements present fairly, in all material respects, the financial position of the Hospital.

Discussions, questions, and comments ensued.

A copy of the PPMH Audit was provided to all Authority Members and a copy is retained with these Minutes.

#### PPMH, Inc. CEO and Operational Reports:

Ms. Angerami reported on patient satisfaction score improvement for Overall Rate of Care FY2023, FY2024, and FY2025. She also reported on the emergency room Net Promotor Score Over Time for the same time periods.

Ms. Angerami introduced Dr. Suber, who presented information on Phoebe's educational efforts and its impact on the community. Dr. Suber reminded the Authority of critical nursing and physician shortages across the nation and state as well as Phoebe. She reported that Phoebe is addressing the need by investing in education to expand programs and bolster interest in health career by partnering with local learning institutions and providing learning programs for middle and high school students. Dr. Suber reported on Phoebe's Work Base Learning (WBL) Internship Program which is designed for high school seniors. The program provides an opportunity to take skills and knowledge learned in healthcare science classes and apply in the real world as the students can shadow in different areas of the hospital to determine interest and strengths.

Discussions, questions, and comments ensued:

A copy of the CEO and Operational report as presented is attached to these Minutes.

### Closing of the Meeting:

A motion was made by Mr. Johnson, seconded by Ms. Hubbard to close the meeting for the purposes of: (i) engaging in privileged consultation with legal counsel; (ii) to discuss potentially valuable commercial plans, proposals or strategies that may be of competitive advantage in the operation of Phoebe Putney Memorial Hospital or its medical facilities, or (iii) to discuss confidential matters or information pertaining to peer review or provided by a peer review organization as defined in O.C.G.A.§31-7-131.

Chair Singfield polled each individual Authority Member present with respect to his or her vote on the motion and the vote of each of the Members is shown below, with no Member opposing:

Glenn Singfield, Sr.	Yes
Dr. James Black	Yes
Tommy Gregors	Yes
Chris Hatcher	Yes
Dr. Jim Hotz	Yes
Dorothy Hubbard	Yes
Jackie Jenkins	Yes
Clinton Johnson	Yes

The motion having passed, the meeting closed.

### **Open Session Reconvened:**

Following unanimous vote of all Members in attendance at the conclusion of the Closed Session, the meeting reopened.

#### **Adjournment:**

There being no further business the meeting was adjourned.

Minutes Approved by the HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY on May 15, 2025

# HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY, GEORGIA OPEN SESSION MEETING AGENDA

# Thursday, February 20, 2025 7:30am

## Willson Board Room / Phoebe Putney Memorial Hospital

I.	Open Meeting and Establish Quorum	Glenn Singfield, Sr., Chair
11.	Welcome and Introduce New Members  A. Oath of Office – New Members  B. Disclosure Certificates	Glenn Singfield, Sr., Chair Tommy Coleman
M.	Consider Approval of Agenda (draft previously provided to Members)	Glenn Singfield, Sr., Chair
IV.	Election of Officers for 2025  A. Chair  B. Vice Chair  C. Secretary	Tommy Coleman
V.	Speaker Appearances (if applicable)	Glenn Singfield, Sr., Chair
VI.	Consideration of Open Session Minutes of November 21, 2024 (draft previously provided to Members)	Glenn Singfield, Sr., Chair
VII.	Financial Reports A. HAADC Financial Update B. Certified PPMH Audit FYE 2024	Brian Church
VIII.	Phoebe Putney Memorial Hospital, Inc. CEO and Operational Reports  A. Educational Efforts – Impact on Community	Deb Angerami Dr. Tracy Suber
IX.	Consideration of Vote to Close Meeting for Executive Session	Glenn Singfield, Sr., Chair
х.	Additional Business	Glenn Singfield, Sr., Chair

Scheduled HAADC Meeting Dates
May 15, 2025
August 21, 2025
November 20, 2025

XI.

**ADJOURNMENT** 

## STATE OF GEORGIA COUNTY OF DOUGHERTY

## AFFIDAVIT RELATIVE TO CLOSED MEETING

Personally appeared before the undersigned, Glenn Singfield, who having been duly sworn, deposes and states as follows:

- I am over the age of 18 years, I am suffering under no disabilities and I am competent to testify to the matters contained herein.
- 2. I am the Chair of the Board of the Hospital Authority of Albany-Dougherty County, Georgia (the "Authority") and presided over the Closed Session.
- 3. On February 20, 2025 at a meeting of the Authority Board, a motion was duly approved in a roll call vote for the Authority Board to go into closed session for the purposes of: (i) engaging in privileged consultation with legal counsel; (ii) to discuss potentially valuable commercial plans, proposals or strategy that may be of competitive advantage in the operation of Phoebe Putney Memorial Hospital or its medical facilities; and (iii) to discuss confidential matters or information pertaining to peer review or provided by a review organization as defined in O.C.G.A §31-7-131.
- 4. To the best of my knowledge and belief, the business conducted during the closed portion of the meeting was devoted solely to the above matters for which the meeting was closed.

This the 20th day of February, 2025

Glenn Singfield

Sworn to and subscribed before me this day of february, 2025.

NOTARY PUBLIC

(SEAL)

Dougherty County, Georgia My Commission Expires: \_\_\_

Feb. 3, 2029

FELICIA LEWIS Notary Public - State of Georgia Lee County My Commission Expires Feb 3, 2029

## **OATH OF OFFICE**

IN RE: HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY, GEORGIA

I, CHRISTOPHER HATCHER, do solemnly swear that I will, to the best of my ability, without favor or affection to any person and without any unauthorized financial gain or compensation to myself, faithfully and fairly discharge all of the duties and responsibilities that devolve upon me as a Member of the Hospital Authority of Albany-Dougherty County, Georgia, during the term of my service as such Member.

CHRISTOPHER HATCHER

Sworn to and subscribed before me, a Notary Public, this 20 day of February, 2025.

NOTARY PUBLIC

FELICIA LEWIS Notary Public - State of Georgia Lee County My Commission Expires Feb 3, 2029

## **OATH OF OFFICE**

IN RE: HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY, GEORGIA

I, JAMES E. BLACK, MD, do solemnly swear that I will, to the best of my ability, without favor or affection to any person and without any unauthorized financial gain or compensation to myself, faithfully and fairly discharge all of the duties and responsibilities that devolve upon me as a Member of the Hospital Authority of Albany-Dougherty County, Georgia, during the term of my service as such Member.

James E. Black, MD

Sworn to and subscribed before me, a Notary Public, this 20<sup>th</sup> day of Februar, 4 2025.

FELICIA LEWIS Notary Public - State of Georgia Lee County My Commission Expires Feb 3, 2029 NOTARY PUBLIC

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## HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY, GEORGIA

Financial Statement Update
November-2024 YTD Financials
Fiscal Year 2025
February 20th Authority Meeting

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HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY, GEORGIA BALANCE SHEET 11/30/24

	Unaudited November 30, 2024	
ASSETS		
Current Assets:		
Cash and cash equivalents	\$	106, 186
Assets limited as to use - current		ia.
Patient accounts receivable, net of allowance for		52
doubtful accounts		
Supplies, at lower of cost (first in, first out) or market		ie.
Other current assets		87
Total current assets		106,186
Property and Equipment, net	-	E-1
Other Assets:		
Goodwill	0	(8)
Total other assets	-	[(w)
Total Assets	\$	106,186

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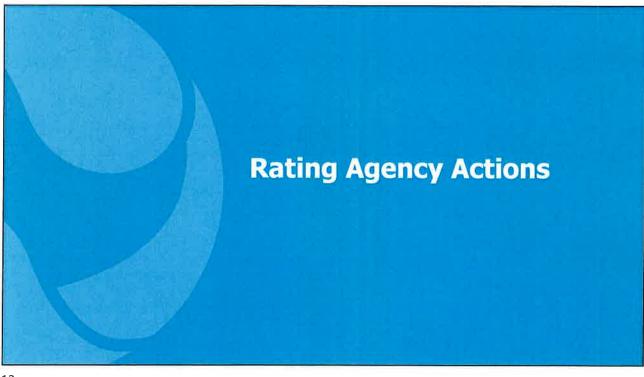
HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY, GEORGIA BALANCE SHEET 11/30/24

		udited per 30, 2024
LIABILITIES AND NET ASSETS		
Current Liabilities:		
Accounts payable		2
Accrued expenses		8,561
Estimated third-party payor settlements		3
Deferred revenue		*
Short-term oblogations	-1	
Total current liabilities		8,561
Total liabilities		8,561
Net assets:		
Unrestricted		97,625
T . 1		<del>2</del> 6
Total net assets	<del>:</del>	97,625
Total liabilities and net assets	\$	106,186

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#### HOSPITAL AUTHORITY OF ALBANY-DOUGHERTY COUNTY, GEORGIA STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN UNRESTRICTED NET ASSETS 11/30/2024

Unaudited November 30, 2024 OPERATING REVENUE: Net patient service revenue (net of provision for bad debt) Lease Consideration Total Operating Revenue OPERATING EXPENSES: Salaries and Wages Employee health and welfare Medical supplies and other Professional services 5,113 Purchased services 266 Depreciation and amortization Total Operating Expenses 5,378 Operating Income (Loss) NONOPERATING INCOME (EXPENSES): Gain in Long Term Lease Interest Expense Total Nonoperating Income EXCESS OF REVENUE OVER EXPENSE (LOSS) (5,378)





# **Today's Participants**



J. Scott Steiner President & Chief Executive Officer

Chief Executive Officer
Prior to joining Phoebe in 2019, Mr. Stelner worked as an executive with Tenet Healthcare Corporation for 12 years, most recently as CEO of four Tenet hospitals in Detroit, Michigan. He instituted the "Phoebe Focus," a new strategy and approach to guide Phoebe into the future focused on quality and safety initiatives and a \$250 million investment in capital improvements to transform the healthcare delivery throughout southwest Georgia. He began his career in healthcare administration in East St. Louis, IL in 1992.



Brian Church Chief Financial & Administrative Officer

Administrative Ornicer

12 years at a large not-for-profit healthcare system in southwest Florida. He earned his bachelor's degree in Finance from Florida State University and earned a Master of Business Administration Degree from Florida Gulf Coast University. He is a fellow of the American College of Healthcare Executives and a member of the Healthcare Financial Management Association.



Kim Gilman President, Phoebe Worth Medical Center

Ms. Gilman began her healthcare career with Phoebe in 1992 as a registered nurse at Phoebe Putney Memorial Hospital in Albany. Prior to being named President of Phoebe Worth Medical Center, she served as the hospital's chief nursing officer. She carned a bachelor's degree and a master's degree in Organizational Leadership from LaGrange College. Ms. Gilman also oversees Phoebe's Post-Acute Care Services.

2024 Rating Presentation • 1.3



## **Phoebe's Key Credit Highlights**



#### Phoebe Remains Southwest Georgia's Premier Health Care Provider

- Phoebe currently has ~78% market share in its PSA and its ICU and NICU bring patients from 42 different counties.
- 70-80% of PPHS's admissions come from its emergency department, indicating minimal reliance on elective surgeries and physician specialties as a source of volume.
- Level II trauma designation and Expanded Critical Care units will help ensure Phoebe remains primary provider in SW GA.



#### Budget Initiatives/Diversified Revenue Attributed to Strong FY2024 Results

- Reduced contract labor costs by ~\$30 million versus FY 2023
- GA Strong and other supplement payment sources generated over \$70 million in FY 2024
  - GA AIDE will replace Georgia Strong in FY 2025 adding additional diversification
- PPHS was awarded ~\$92 million in FEMA support ~\$10 million will be received in FY 2025.



#### Phoebe Maintains a Strong Balance Sheet and Capital Structure

- Phoebe continues to bolster its already strong balance sheet -FY 2024 DCOH increased to 315 days.
- Phoebe has aggressively managed its pension liability and is currently funded at over 101%.
- Phoebe terminated orphan swaps at a historically low cost.
- Conservative capital structure with 70% fixed rate debt with no renewal risk for 13 years.

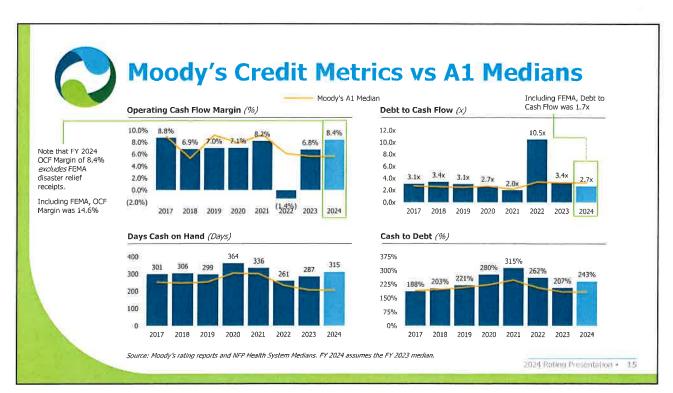


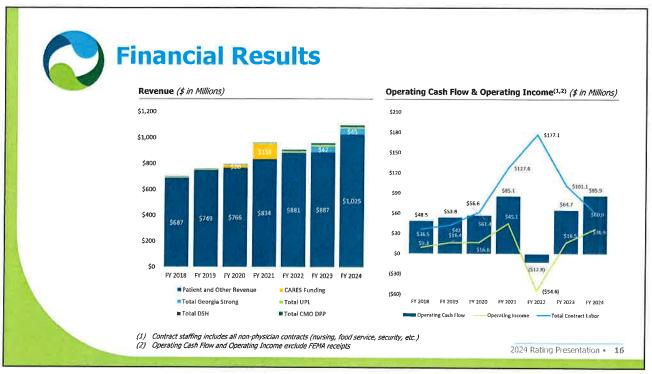
#### Comprehensive Strategic Planning will Position Phoebe for Future Success

- Phoebe is proactively defining its future via a comprehensive strategic plan
- The plan will define Phoebe's future from 2025-2030
- Will address:
  - Key clinical services lines, avenues for future growth and expense management
  - How to best utilize capital/debt for success

2024 Rating Presentation + 14

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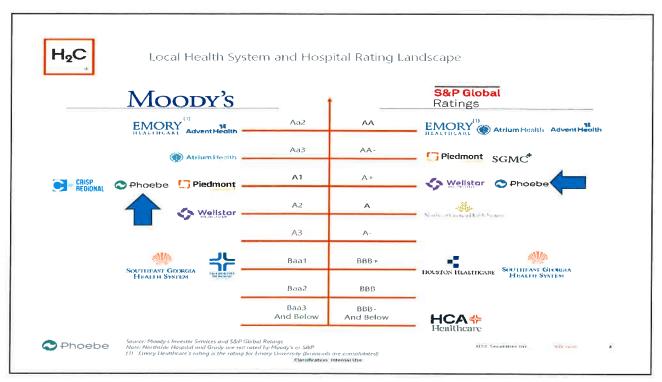


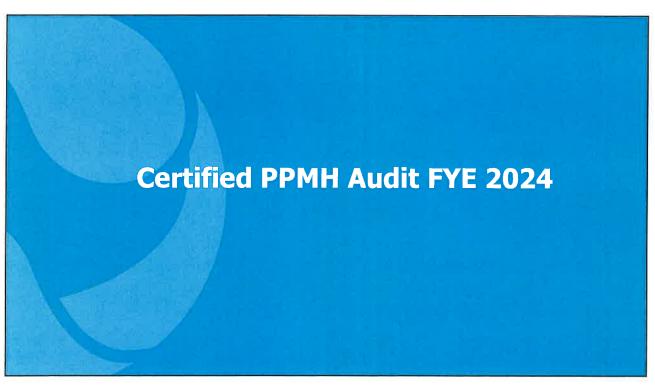


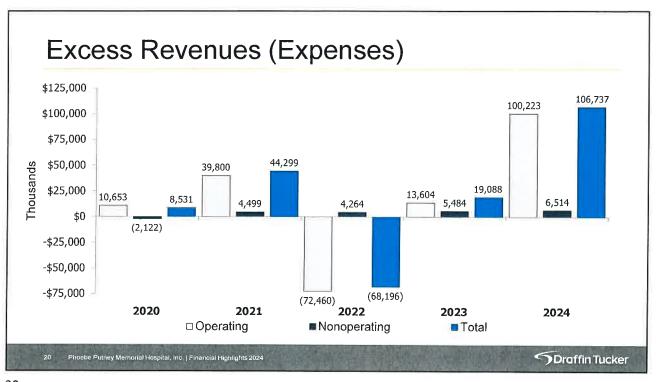
## **Rating Agency Results**

- Moody's Affirmed our A1 Rating with Stable Outlook
- S&P Affirmed our A+ Rating and with Stable Outlook

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## Statistical Comparison

## **Moody's Ratings**

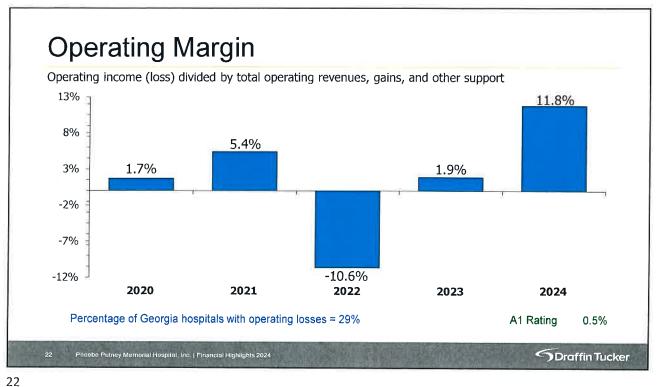
Statistic represents national averages for hospitals with A1 Moody's rating. (based on FY 2023 data collected through August of 2024)

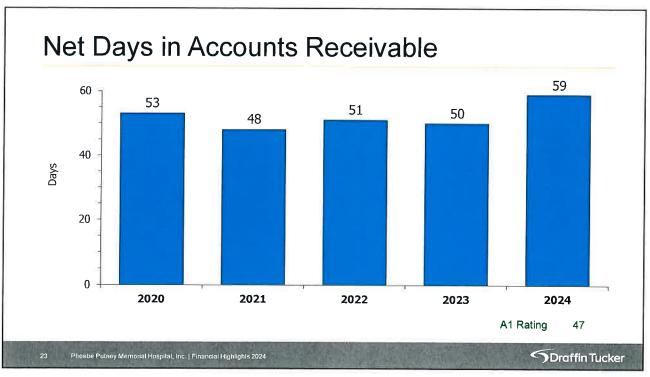
## **Georgia Hospital Association**

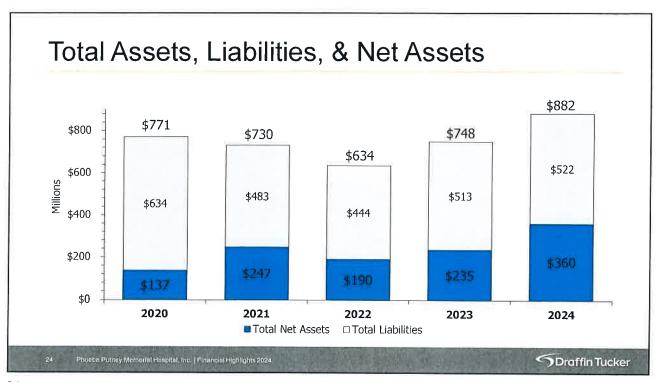
Statistic represents averages for Georgia hospitals (based on 2021-2022 data collected through January of 2024)

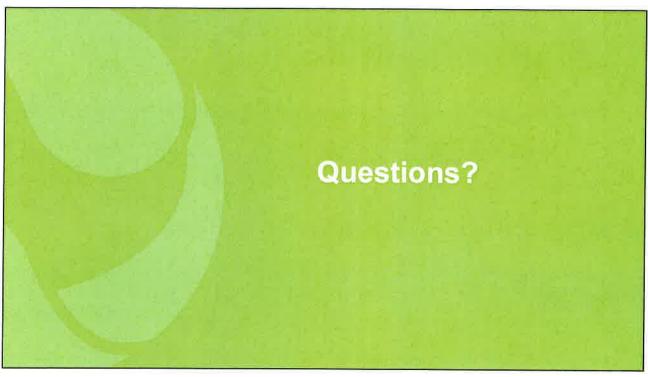
Phoebe Putney Memorial Hospital, Inc. | Financial Highlights 2024

**S**Draffin Tucker











Board of Directors Phoebe Putney Memorial Hospital, Inc. Albany, Georgia

We have audited the financial statements of Phoebe Putney Memorial Hospital, Inc. (Corporation) for the year ended July 31, 2024, and have issued our report thereon dated December 11, 2024. Professional standards require that we provide you with information about our responsibilities under generally accepted auditing standards (and, if applicable, *Government Auditing Standards*), as well as certain information related to the planned scope and timing of our audit. We have communicated such information in our letter to you dated August 29, 2024. Professional standards also require that we communicate to you the following information related to our audit.

## Significant Audit Matters

## **Qualitative Aspects of Accounting Practices**

Management is responsible for the selection and use of appropriate accounting policies. The significant accounting policies used by the Corporation are described in Note 1 to the financial statements. As described in Note 1, the Corporation changed accounting policies related to accounting for credit losses by adopting FASB ASU No. 2016-13, *Financial Instruments – Credit Losses* (Topic 326), which introduces a new current expected credit loss (CECL) method for measuring credit losses on financial assets measured at amortized cost, replacing the previous incurred loss method that delays recognition until it is probable that a loss has been incurred. The new guidance requires the immediate recognition of estimated credit losses that are expected to occur. The Corporation adopted the new guidance effective as of August 1, 2023. Adoption of the standard did not have a significant impact to the financial statements.

We noted no transactions entered into by the Corporation during the year for which there is a lack of authoritative guidance or consensus. All significant transactions have been recognized in the financial statements in the proper period.

Accounting estimates are an integral part of the financial statements prepared by management and are based on management's knowledge and experience about past and current events and assumptions about future events. Certain accounting estimates are particularly sensitive because of their significance to the financial statements and because of the possibility that future events affecting them may differ significantly from those expected. The most sensitive estimates affecting the financial statements were:

Management's estimate of the allowance for doubtful accounts is based on historical collection data. We evaluated the key factors and assumptions used to develop the allowance for doubtful accounts in determining that it is reasonable in relation to the financial statements taken as a whole.

## Let's Think Together.

### Page Two

Management's estimate of the third-party payor settlements is based on reimbursement communications with the fiscal intermediaries. We evaluated the key factors and assumptions used to develop the estimated third-party payor settlements in determining that it is reasonable in relation to the financial statements taken as a whole.

Management's estimate of the accrued pension costs / net pension asset is based on an actuarial report and assumptions. We evaluated the key factors and assumptions used to develop the estimated accrued pension cost / net pension asset in determining that it is reasonable in relation to the financial statements taken as a whole.

Management's estimate of goodwill is based on a qualitative and quantitative analysis, which is dependent on criteria both internal and external to the organization. We have evaluated the key factors and assumptions used to develop the assessment of goodwill and determined that it is reasonable in relation to the financial statements taken as a whole.

Management's estimate of the portion of the FEMA disaster relief funding for which the conditions have been substantially met is based on management's interpretation of applicable terms and conditions, as well as other guidance available as of the date of the financial statements. There is a possibility that the finalized amounts, including any potential deductions that may result from the FEMA audit and close-out process, may change in the future. We evaluated the key factors and assumptions used to develop the revenue recognized based on the specific conditions in determining that it is reasonable in relation to the financial statements taken as a whole.

Certain financial statement disclosures are particularly sensitive because of their significance to financial statement users. The most sensitive disclosure affecting the financial statements was:

The disclosure of uncompensated services in Note 3 to the financial statements is an accumulation of information summarizing services that the Corporation was compensated for at amounts less than its established rates.

The financial statement disclosures are neutral, consistent, and clear.

## Difficulties Encountered in Performing the Audit

We encountered no significant difficulties in dealing with management in performing and completing our audit.

### Page Three

#### **Corrected and Uncorrected Misstatements**

Professional standards require us to accumulate all misstatements identified during the audit, other than those that are clearly trivial, and communicate them to the appropriate level of management.

The attached schedule summarizes uncorrected misstatements of the financial statements. Management has determined that their effects are immaterial, both individually and in the aggregate, to the financial statements taken as a whole. In addition, none of the misstatements detected as a result of audit procedures and corrected by management were material, either individually or in the aggregate to the financial statements taken as a whole.

### **Disagreements With Management**

For purposes of this letter, a disagreement with management is a disagreement on a financial accounting, reporting, or auditing matter, whether or not resolved to our satisfaction, that could be significant to the financial statements or the auditor's report. We are pleased to report that no such disagreements arose during the course of our audit.

### **Management Representations**

We have requested certain representations from management that are included in the management representation letter dated December 11, 2024.

## Management Consultations With Other Independent Accountants

In some cases, management may decide to consult with other accountants about auditing and accounting matters, similar to obtaining a "second opinion" on certain situations. If a consultation involves application of an accounting principle to the Corporation's financial statements or a determination of the type of auditor's opinion that may be expressed on those statements, our professional standards require the consulting accountant to check with us to determine that the consultant has all the relevant facts. To our knowledge, there were no such consultations with other accountants.

## Other Audit Findings or Issues

We generally discuss a variety of matters, including the application of accounting principles and auditing standards, with management each year prior to retention as the Corporation's auditors. However, these discussions occurred in the normal course of our professional relationship and our responses were not a condition to our retention.

## Page Four

## **Other Matters**

With respect to the supplementary information accompanying the financial statements, we made certain inquiries of management and evaluated the form, content, and methods of preparing the information to determine that the information complies with U. S. generally accepted accounting principles, the method of preparing it has not changed from the prior period, and the information is appropriate and complete in relation to our audit of the financial statements. We compared and reconciled the supplementary information to the underlying accounting records used to prepare the financial statements or to the financial statements themselves.

This information is intended solely for the use of the Board of Directors and management of the Corporation and is not intended to be and should not be used by anyone other than these specified parties.

Albany, Georgia
December 11, 2024

FINANCIAL STATEMENTS

for the years ended July 31, 2024 and 2023

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## INDEPENDENT AUDITOR'S REPORT

Board of Directors Phoebe Putney Memorial Hospital, Inc. Albany, Georgia

## Report on the Audit of the Financial Statements

### **Opinion**

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

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

## Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Corporation 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.

Continued

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## Let's Think Together.

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## Responsibilities of Management for the Financial Statements

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

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

## Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than 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 and understanding of internal control relevant to the audit in order to design audit
  procedures that are appropriate in the circumstances, but not for the purpose of expressing an
  opinion on the effectiveness of the Corporation's internal control. Accordingly, no such opinion
  is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Corporation's ability to continue as a going concern for a reasonable period of time.

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

Continued

## Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated December 11, 2024, on our consideration of the Corporation's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Corporation's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Corporation's internal control over financial reporting and compliance.

Albany, Georgia

December 11, 2024

## BALANCE SHEETS July 31, 2024 and 2023

	(Dollars in Thousands)		
	<u>2024</u>	2023	
ASSETS			
Current assets: Cash and cash equivalents Patient accounts receivable, net Supplies Estimated third-party payor settlements Other current assets  Total current assets	\$ 125,665 114,230 20,113 1,912 36,275	\$ 80,578 90,961 19,518 - 13,507 204,564	
Total current assets	296,195	204,564	
Assets limited as to use: Internally designated for capital improvements Held by trustee  Total assets limited as to use	396 	395 <u>78,335</u> <u>78,730</u>	
Property and equipment, net	420,697	315,453	
Other assets: Interest in net assets of Phoebe Foundation, Inc. Deferred financing cost Operating lease right-of-use assets Goodwill and other assets Net pension asset	26,068 364 124,792 11,559	22,782 610 637 124,778	
Total other assets	162,783	148,807	
Total assets	<u>\$ 882,096</u>	<u>\$ 747,554</u>	

# BALANCE SHEETS, Continued July 31, 2024 and 2023

	(Dollars in Thousands)		
	2024	2023	
LIABILITIES AND NET ASS	ETS		
Current liabilities:			
Current portion of long-term debt Current portion of operating lease liabilities	\$ 9,276 193	\$ 9,067 266	
Accounts payable	33,486	30,837	
Accrued expenses Estimated third-party payor settlements	40,860	37,492 3,121	
Total current liabilities	83,815	80,783	
Long-term debt, net of current portion	328,541	336,666	
Operating lease liabilities, net of current portion	165	362	
Accrued pension cost	<b>a</b> 0	23,339	
Related party payables	109,472	68,170	
Derivative financial instruments	183	3,460	
Total liabilities	<u>522,176</u>	512,780	
Net assets:			
Without donor restrictions With donor restrictions:	345,532	222,215	
Purpose restrictions	12,364	10,535	
Perpetual in nature	2,024	2,024	
Total net assets	359,920	234,774	
Total liabilities and net assets	\$ 882,096	<u>\$ 747,554</u>	

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

	(Dollars in Thousands)		
	2024	2023	
Operating revenues, gains and other support: Net patient service revenue Other revenue FEMA disaster relief funding	\$ 713,972 65,300 73,630	\$ 665,532 61,002	
Total operating revenues, gains and other support	852,902	726,534	
Operating expenses: Salaries and wages Employee health and welfare Medical supplies and other Purchased services Depreciation and amortization Interest  Total operating expenses	180,839 49,345 340,261 140,580 30,224 11,430	164,311 44,783 304,897 157,455 30,216 11,268	
Operating income	100,223	13,604	
Nonoperating income: Investment and other nonoperating income Excess revenues	6,514 106,737	<u>5,484</u> 19,088	
Change in beneficial interest in net assets of Phoebe Foundation, Inc. Capital contributions and other Net actuarial gain Amortization of net loss	1,457 (26) 13,474 1,675	790 (63) 20,972 	
Increase in net assets without donor restrictions	123,317	43,275	
Net assets with donor restrictions: Change in interest in net assets of Phoebe Foundation, Inc. Increase in net assets	1,829 125,146	1,736 45,011	
Net assets, beginning of year	234,774	189,763	
Net assets, end of year	\$ 359,920	\$ 234,774	

The accompanying notes are an integral part of these financial statements.

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

	(Dollars in Thousands)				
		2024		2023	
Cash flows from operating activities:					
Increase in net assets	\$	125,146	\$	45,011	
Adjustments to reconcile change in net assets to	•	0,	*	10,011	
net cash provided by operating activities:					
Proceeds from capital contributions		Ĭ <del>.</del>		(138)	
(Gain) loss on disposal of property and equipment		(75)		228	
Loss on debt extinguishment		:=:		446	
Depreciation and amortization		30,224		30,216	
Amortization of operating lease right-of-use assets		273		108	
Change in interest in net assets of Phoebe		2.0		100	
Foundation, Inc.		(3,286)		(2,526)	
Change in derivative financial instruments		(3,277)		(2,421)	
Changes in:		(0,277)		(2,421)	
Patient accounts receivable, net		(23,269)		(5,324)	
Supplies		(595)		777	
Estimated third-party payor settlements		(5,033)		(2,372)	
Medicare accelerated and advance payments		(0,000)			
Other assets		(22,172)		(14,775) 635	
Accounts payable and accrued expenses		6,017		2,555	
Accrued pension cost/net pension asset		(34,898)		(24,243)	
Operating lease liabilities		(270)		(120)	
1	-	(270)	(1)	(120)	
Net cash provided by operating activities		68,785		28,057	
		00,700	0	20,007	
Cash flows from investing activities:					
Purchase of property and equipment		(134,511)		(45,762)	
Proceeds from sale of property and equipment		70		7	
Purchase of assets limited as to use		(1)		(2)	
Makasah ali kacamatan menangan					
Net cash used by investing activities		(134,442)		<u>(45,757</u> )	

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

	(Dollars in Thousands)		
	2024	2023	
Cash flows from financing activities: Payments on long-term debt Payments on finance lease liabilities Proceeds from issuance of long-term debt Proceeds from capital contributions Advances from related parties	\$ (6,907) (1,961) - - 41,302	\$ (158,600) (2,047) 248,356 138 	
Net cash provided by financing activities	32,434	107,987	
Increase (decrease) in cash and cash equivalents	(33,223)	90,287	
Cash and cash equivalents, beginning of year	158,913	68,626	
Cash and cash equivalents, end of year	<u>\$ 125,690</u>	<u>\$ 158,913</u>	
Reconciliation of cash and cash equivalents to the balance sheets:			
Cash and cash equivalents in current assets Cash and cash equivalents in assets limited as to use	\$ 125,665 <u>25</u>	\$ 80,578 78,335	
Total	<u>\$ 125,690</u>	<u>\$ 158,913</u>	
Supplemental disclosure of cash flow information: Cash paid for interest Assets acquired through leases	\$ 11,449 \$ 974	\$ 8,307 \$ 1,911	

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

## 1. <u>Summary of Significant Accounting Policies</u>

### Organization

Phoebe Putney Memorial Hospital, Inc., (Corporation) located in Albany, Georgia, is a not-for-profit acute care hospital which operates satellite clinics in the surrounding counties. The Corporation provides inpatient, outpatient and emergency care services for residents of Southwest Georgia. Admitting physicians are primarily practitioners in the local area. The Corporation is a single operating entity and is a wholly-owned subsidiary of Phoebe Putney Health System, Inc. (System).

## Reorganization

Effective September 1, 1991, the Hospital Authority of Albany-Dougherty County, Georgia (Authority) implemented a reorganization plan for the hospital whereby all the assets, management and governance of the hospital was transferred to Phoebe Putney Memorial Hospital, Inc., a not-for-profit corporation, qualified as an organization described in Section 501(c)(3) of the Internal Revenue Code, pursuant to a lease and transfer agreement. During 2009, the lease term was renewed for an additional forty years with a nominal annual lease payment.

Effective August 1, 2012, the lease and transfer agreement between the Corporation and the Authority was amended and restated. The amendment was made for the transfer and inclusion of the hospital formerly known as Palmyra Park Hospital, LLC (Palmyra) which was acquired by the Authority on December 15, 2011. The amendment included the extension of the lease for a term of forty years from the date of the current amendment.

Per the amended and restated lease agreement, the Corporation is required to meet certain performance measures. During the fiscal year ended July 31, 2021, the Authority engaged a consultant group to perform a lease analysis to examine the Corporation's compliance with these requirements. In February 2022, the Authority voted to accept the results of the lease analysis, which found the Corporation in compliance with the requirements of the amended and restated lease agreement.

### Use of Estimates

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

## Cash and Cash Equivalents

Cash and cash equivalents include certain investments in money market mutual funds.

Continued

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

## 1. Summary of Significant Accounting Policies, Continued

#### Supplies

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

#### **Derivative Financial Instruments**

The Corporation has entered into interest rate swap agreements as part of its interest rate risk management strategy. These arrangements are accounted for under the provisions of FASB ASC 815 *Derivatives and Hedging*. FASB ASC 815 establishes accounting and reporting standards requiring that derivative instruments be recorded at fair value as either an asset or liability.

For derivative instruments that are designated and qualify as a cash flow hedge (i.e., hedging the exposure to variability in expected future cash flows that is attributable to a particular risk), the effective portion of the gain or loss on the derivative instrument is reported as a component of net assets without donor restrictions. The ineffective component, if any, is recorded in excess revenues in the period in which the hedge transaction affects earnings. If the hedging relationship ceases to be highly effective or it becomes probable that an expected transaction will no longer occur, gains or losses on the derivative are recorded in excess revenues. For derivative instruments not designated as hedging instruments, the unrealized gain or loss is recognized in nonoperating income during the period of change.

#### Assets Limited as to Use

Assets limited as to use include assets held by trustees under indenture agreements and designated assets set aside by the Board of Directors for future capital improvements, over which the Board retains control and may, at its discretion, subsequently use for other purposes.

#### Property and Equipment

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

Gifts of long-lived assets such as land, buildings, or equipment are reported as increases in net assets without donor restrictions, and are excluded from excess revenues, unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of

Continued

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

## 1. Summary of Significant Accounting Policies, Continued

### Property and Equipment, Continued

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.

## Beneficial Interest in Net Assets of Foundation

The Corporation accounts for the activities of Phoebe Foundation, Inc. in accordance with FASB ASC 958-20, *Not-For-Profit Entities, Financially Interrelated Entities.* FASB ASC 958-20 establishes reporting standards for transactions in which a donor makes a contribution to a not-for-profit organization which accepts the assets on behalf of or transfers these assets to a beneficiary which is specified by the donor. Phoebe Foundation, Inc. accepts assets on behalf of the Corporation.

#### Goodwill

Goodwill and intangible assets with indefinite lives are tested for impairment annually and more frequently in the event of an impairment indicator. Intangible assets with definite lives are amortized over their respective estimated useful lives and reviewed whenever events or circumstances indicate impairment may exist.

The Corporation assesses qualitative factors to determine whether the existence of events or circumstances lead to a determination that it is more likely than not that the fair value of a reporting unit is less than its carrying amount. If, after assessing the totality of events or circumstances, the Corporation determines it is more likely than not that the fair value of a reporting unit is less than its carrying amount, then an impairment loss for the amount by which the carrying amount exceeds the reporting unit's fair value is recorded.

As of July 31, 2024 and 2023, the Corporation had goodwill of approximately \$124,778,000. The Corporation has elected March 31<sup>st</sup> as its annual impairment assessment date. The Corporation completed its annual impairment assessment and concluded that no goodwill or indefinite lived intangible asset impairment charge was necessary. See Note 6 for goodwill disclosures.

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

## 1. Summary of Significant Accounting Policies, Continued

### Deferred Financing Cost

Costs related to the issuance of long-term debt were deferred and are being amortized using the straight-line method, which approximates the effective interest method, over the life of the related debt. Debt issuance costs related to a recognized debt liability are presented in the balance sheets as a direct deduction from the carrying amount of the related debt liability. Costs related to the issuance of derivative financial instruments were deferred and are being amortized. The unamortized derivative financing costs are included with other assets in the balance sheets.

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

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

#### Excess Revenues

The statements of operations and changes in net assets include excess revenues. Changes in net assets without donor restrictions which are excluded from excess revenues, consistent with industry practice, include adjustments to pension obligations, 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 FINANCIAL STATEMENTS, Continued July 31, 2024 and 2023

## Summary of Significant Accounting Policies, Continued

### Net Patient Service Revenue

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

### Charity Care

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

### **Donor-Restricted Gifts**

Unconditional promises to give cash and other assets to the Corporation 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 Cost

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.

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

#### Summary of Significant Accounting Policies, Continued

#### Income Taxes

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

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

Based on the results of management's evaluation, no liability is recognized in the accompanying balance sheets for unrecognized income tax positions. Further, no interest or penalties have been accrued or charged to expense as of July 31, 2024 and 2023 or for the years then ended. The Corporation'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.

#### Impairment of Long-Lived Assets

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

#### 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.

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

### 1. Summary of Significant Accounting Policies, Continued

#### Fair Value Measurements, Continued

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.

#### Pension Plan

The Corporation sponsors a frozen defined benefit pension plan. The Corporation recognizes the overfunded and underfunded status of the defined benefit pension plan in its balance sheets. Changes in the funded status are recorded in the year in which the changes occurred in the statements of operations and changes in net assets. Components of the net periodic pension cost other than service cost are reported in investment and other nonoperating income. See Note 10 for additional information.

#### Recently Adopted Accounting Pronouncement

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

#### Subsequent Events

In preparing these financial statements, the Corporation has evaluated events and transactions for potential recognition or disclosure through December 11, 2024, the date the financial statements were issued.

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

### 2. <u>Net Patient Service Revenue</u>

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

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

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

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

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

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

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

### 2. <u>Net Patient Service Revenue, Continued</u>

The Corporation determines the transaction price based on standard charges for services provided, reduced by contractual adjustments provided to third-party payors, discounts provided to uninsured patients in accordance with the Corporation's policy, and implicit price concessions provided to uninsured patients. Implicit price concessions represent the difference between amounts billed and the estimated consideration the Corporation expects to receive from patients, which are determined based on historical collection experience, current market conditions, and other factors. The Corporation 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 acute care, rehabilitation, and psychiatric services and outpatient services rendered to Medicare program beneficiaries are paid at prospectively determined rates. These rates vary according to a patient classification system that is based on clinical, diagnostic, and other factors.

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

#### Medicaid

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

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

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

### 2. Net Patient Service Revenue, Continued

#### Medicaid, Continued

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

The Corporation participates in the Georgia Indigent Care Trust Fund (ICTF) Program. The Corporation receives ICTF payments for treating a disproportionate number of Medicaid and other indigent patients. ICTF payments are based on the Corporation's estimated uncompensated cost of services to Medicaid and uninsured patients. The Corporation was not allocated ICTF funds by the Georgia Department of Community Health during 2024 and 2023.

The Medicare, Medicaid and SCHIP Benefits Improvement and Protection Act of 2000 (BIPA) provides for payment adjustments to certain facilities based on the Medicaid Upper Payment Limit (UPL). The UPL payment adjustments are based on a measure of the difference between Medicaid payments and the amount that could be paid based on Medicare payment principles. The net amount of UPL payment adjustments recognized in net patient service revenue was approximately \$5,823,000 and \$9,551,000 for the years ended July 31, 2024 and 2023, respectively.

The Corporation also participates in the Medicaid Managed Care Directed Payment Programs, which are supplemental payment programs for hospitals and providers through the Georgia Department of Community Health. As a result of this participation, the Corporation recognized revenue of approximately \$10,915,000 and \$9,241,000 for the years ended July 31, 2024 and 2023, respectively.

During 2022, the Georgia Department of Community Health announced final approval of a new state directed payment program - Strengthening the Reinvestment Of a Necessary-workforce in Georgia (GA-STRONG). This is a supplemental payment program intended to support the retention of Georgia's existing workforce and development of the next generation of healthcare providers. As a result of participation in the GA-STRONG program, the Corporation recognized revenue of approximately \$39,657,000 and \$38,785,000 for the years ended July 31, 2024 and 2023, respectively.

During 2010, the state of Georgia enacted legislation known as the Provider Payment Agreement Act (Act) whereby hospitals in the state of Georgia are assessed a "provider payment" in the amount of 1.45% of their net patient revenue. The Act became effective July 1, 2010, the beginning of state fiscal year 2011. The provider payments are due on a quarterly basis to the Department of Community Health. The payments are to be used for the sole purpose of obtaining federal financial participation of medical assistance payments to providers on behalf of Medicaid recipients. The provider payment will result in an increase in the hospital payments on Medicaid services of 11.88%. Approximately

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

### Net Patient Service Revenue, Continued

### Medicaid, Continued

\$8,207,000 and \$7,816,000 relating to the Act is included in medical supplies and other in the accompanying statements of operations and changes in net assets for the years ended July 31, 2024 and 2023, respectively.

#### Other Arrangements

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

#### Uninsured Patients

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

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

Settlements with third-party payors for retroactive adjustments due to audits, reviews or investigations are considered variable consideration and are included in the determination of the estimated transaction price for providing patient care. These settlements are estimated based on the terms of the payment agreement with the payor, correspondence from the payor and the Corporation's historical settlement activity, including an assessment to ensure that it is

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

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

probable that a significant reversal in the amount of cumulative revenue recognized will not occur when the uncertainty associated with the retroactive adjustment is subsequently resolved. Estimated settlements are adjusted in future periods as adjustments become known (that is, new information becomes available), or as years are settled or are no longer subject to such audits, reviews, and investigations. Adjustments arising from a change in the transaction price, were not significant in 2024 or 2023.

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

Consistent with the Corporation's mission, care is provided to patients regardless of their ability to pay. Therefore, the Corporation 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 the Corporation's criteria for charity care are provided care without charge or at amounts less than established rates. Such amounts determined to qualify as charity care are not reported as revenue.

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

	(Dollars in Thousands) Net Patient Service Revenue						
	Medicare	Medicaid	Total <u>All Payors</u>				
2024	\$ 284,309	<u>\$ 102,604</u>	\$ 322,783	<u>\$ 4,276</u>	\$ 713,972		
2023	\$ 264,685	<u>\$ 99,811</u>	\$ 297,141	\$ 3,895	\$ 665,532		

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

### 2. Net Patient Service Revenue, Continued

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

	(Dollars	in Thousands)
Service lines:	2024	2023
Hospital Home health Hospice	\$ 702,508 5,34 6,117	4,936
Timing of revenue recognition: Services transferred over time	<u>\$ 713,972</u>	<u>\$ 665,532</u>

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

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

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

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

### 3. <u>Uncompensated Services</u>

The Corporation was compensated for services at amounts less than its established rates. Net patient service revenue includes amounts, representing the transaction price, based on standard charges reduced by variable considerations such as contractual adjustments, discounts, and implicit price concessions. Charges for uncompensated services for 2024 and 2023 were approximately \$1,594,662,000 and \$1,493,859,000, respectively.

Uncompensated care includes charity and indigent care services of approximately \$150,576,000 and \$153,662,000 in 2024 and 2023, respectively. The cost of charity and indigent care services provided during 2024 and 2023 was approximately \$49,092,000 and \$50,732,000, respectively, computed by applying a total cost factor to the charges foregone.

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

	(Dollars in Thousands)			
	2024	2023		
Gross patient charges	\$ 2,308,634	\$ 2,159,391		
Uncompensated services:				
Charity and indigent care	150,576	153,662		
Medicare	863,584	836,011		
Medicaid	217,064	229,788		
Other third-party payors	316,226	246,579		
Price concessions	47,212	27,819		
Total uncompensated care	1,594,662	1,493,859		
Net patient service revenue	\$ 713,972	<u>\$ 665,532</u>		

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

#### 4. <u>Investments</u>

#### Assets Limited as to Use

The composition of assets limited as to use at July 31, 2024 and 2023 is set forth in the following table. See Note 18 for valuation methodologies.

	(Dollars in Thousands)			
Dy hourd for conital insurance and		2024		2023
By board for capital improvements: Certificates of deposit	\$	396	\$	395
Held by trustee: Money market funds		<u>25</u>	; <del>-</del>	78,33 <u>5</u>
Total assets limited as to use	\$	421	<u>\$</u>	78,730

Interest income for cash and cash equivalents and assets limited as to use are recorded in investment and other nonoperating income on the statements of operations and changes in net assets.

#### Property and Equipment, Net

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

	(Dollars in Thousands)			nds)
		2024		2023
Land	\$	11,931	\$	11,947
Land improvements		4,854		4,251
Building		365,111		359,983
Equipment		465,152		454,783
Finance lease right-of-use assets		6,030		7,057
		853,078		838,021
Less: accumulated depreciation		581,352		553,315
		271,726		284,706
Construction in progress	-	148,971	-	30,747
Property and equipment, net	\$	420,697	<u>\$</u>	315,453

Depreciation expense for the years ended July 31, 2024 and 2023 amounted to approximately \$28,222,000 and \$28,074,000, respectively.

Amortization expense on finance lease right-of-use assets for the years ended July 31, 2024 and 2023 amounted to approximately \$2,002,000 and \$2,142,000, respectively.

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

## 5. Property and Equipment, Net, Continued

Construction contracts exist for various projects at year end with a total commitment of approximately \$144,200,000. At July 31, 2024, the remaining commitment on these contracts approximated \$6,327,000.

#### 6. Goodwill

A summary of goodwill at July 31, 2024 and 2023 follows:

	(Dollars in Thousands)			
	<u>2024</u>	<u>2023</u>		
Goodwill Other assets	\$ 124,778 14	\$ 124,778 		
Total goodwill and other assets	<u>\$ 124,792</u>	<u>\$ 124,778</u>		

Goodwill is related to the Corporation's purchase of health care clinics and lease of Palmyra, formerly purchased by the Authority. The goodwill is evaluated annually for impairment.

The changes in the carrying amount of goodwill for the years ended July 31, 2024 and 2023, are as follows:

	(Dollars in Thousands)			
Balance at beginning of year:	<u>2024</u>	<u>2023</u>		
Goodwill Accumulated impairment losses	\$ 168,707 (43,929)	\$ 168,707 (43,929)		
	124,778	124,778		
Goodwill acquired during the year Impairment losses Disposal of goodwill		(#) #3 <u>#4</u>		
Balance at end of year: Goodwill Accumulated impairment losses	168,707 (43,929)	168,707 (43,929)		
Total	<u>\$ 124,778</u>	<u>\$ 124,778</u>		

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

## 7. Long-Term Debt

Long-term debt consists of the following:

	(Dollars in Thousands)		
	<u>2024</u>	2023	
2012 Series Revenue Anticipation Certificates, payable in varying annual amounts from \$1,260,000 to \$16,285,000 in 2043; bearing interest at fixed rates from 3.00% to 5.00%.	\$ 85,185	\$ 86,330	
2022A Revenue Anticipation Certificates, payable in varying annual amounts from \$5,250,000 to \$16,775,000; bearing interest at a fixed rate of 5.00%.	146,320	151,765	
2022B Revenue Anticipation Certificates, payable in varying annual amounts from \$5,000 to \$14,205,000 in 2052; bearing interest at a variable rate based on a percentage of term SOFR plus a credit spread.	97,805	97,805	
Finance lease liabilities (Note 21)	6,671	7,681	
	335,981	343,581	
Less: unamortized debt issuance cost Less: current portion Less: unamortized discount Add: unamortized premium	2,122 9,276 1,407 5,365	2,224 9,067 1,506 <u>5,882</u>	
Long-term debt, net of current portion	<u>\$ 328,541</u>	<u>\$ 336,666</u>	

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

### 7. Long-Term Debt, Continued

The Series 2012 Revenue Certificates were issued on December 1, 2012 for the purposes of financing the costs of making certain additions, extensions, and capital improvements to its health care system. The Series 2012 Revenue Certificates bear interest at fixed rates from 3.00% to 5.00%.

The Series 2018A Refunding Revenue Certificates were issued on November 1, 2018 in the amount of \$76,100,000 for the purpose of refunding all of the Series 2008A and 2008B Refunding Revenue Certificates. The Series 2018B Refunding Revenue Certificates were issued on November 1, 2018 in the amount of \$96,765,000 for the purpose of refunding all of the Series 2010A Revenue Certificates. The interest rate on each of the Series 2018A Refunding Revenue Certificates and Series 2018B Refunding Revenue Certificates was reset monthly at a variable rate equal to LIBOR plus a credit spread. The Corporation could convert the interest rate upon compliance with the terms and provisions of the related indenture. As of December 2022, the Series 2018A and 2018B Refunding Revenue Certificates were paid in full and no longer outstanding.

The Series 2022A Refunding Revenue Certificates were issued on December 1, 2022 in the amount of \$151,765,000 for the purpose of refunding all of the Series 2018A and 2018B Refunding Revenue Certificates. The Series 2022A Certificates mature serially on each September 1<sup>st</sup> in 2024 through 2039 and 2043 and 2044 and bear interest at a fixed rate of 5.00% per annum.

The Series 2022B Revenue Certificates were issued on December 22, 2022 in the amount of \$97,805,000 for the purpose of financing cost of certain capital expenditures for Phoebe Putney Memorial Hospital, Inc. The Series 2022B Certificates will mature on March 1, 2052, are subject to mandatory sinking fund redemption on each March 1<sup>st</sup> in 2026 through 2051 and are subject to mandatory purchase on March 1, 2037. The Series 2022B Certificates bear interest at a variable rate reset monthly equal to a percentage of term SOFR plus a credit spread. The Corporation may convert the interest rate upon compliance with terms and provisions or the related indenture.

As a result of the bond refunding transactions, the Corporation recognized a loss on extinguishment of approximately \$446,000 during 2023. The loss included the write-off of unamortized 2018A and 2018B Series issue costs as well as funds necessary to adequately fund the extinguished 2018A and 2018B Series accounts. The loss is reflected in the investment and other nonoperating income line of the statements of operations and changes in net assets for the year ended July 31, 2023.

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

### Long-Term Debt, Continued

Under the terms of the 2022B Certificate Indentures, the Corporation is required to maintain certain deposits with a trustee. Such deposits are included with assets limited as to use in the balance sheet.

Series 2012, 2022A and 2022B Revenue Certificates are secured by all receipts of, and revenue, income and money derived from the Corporation's operation of the Hospital premises.

The outstanding notes securing the Series 2012, 2022A and 2022B Revenue Certificates were issued pursuant to the Master Trust Indenture dated as of March 1, 2002, as amended, among the Corporation, Phoebe Putney Memorial Hospital, Inc. and U.S. Bank Trust Company, National Association (formerly U.S. Bank National Association), as master trustee. Under the terms of the Master Trust Indenture, the Corporation is limited on the incurrence of additional borrowings and requires that the Corporation satisfy certain measures of financial performance as long as the notes are outstanding.

Scheduled principal repayments on long-term debt (excluding finance lease liabilities) for the next five years are as follows:

	(Dollars in Thousands)							
<u>Year</u>		2012		<u>2022A</u>		2022B		<u>Total</u>
2025 2026 2027 2028 2029 Thereafter	\$	1,260 1,385 1,530 1,670 1,845 77,495	\$	5,665 5,895 6,120 6,360 6,580 115,700	\$	- 150 155 155 170 97,175	\$	6,925 7,430 7,805 8,185 8,595 290,370
Total	<u>\$</u>	85,185	<u>\$</u>	146,320	\$	<u>97,805</u>	\$	329,310

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

### 8. <u>Derivative Financial Instruments</u>

The Corporation entered into fixed pay and constant maturity swaps to effectively swap variable interest rates to fixed interest rates thus reducing the impact of interest rate changes on future interest expense. The fair market value of the swaps is reported in noncurrent liabilities on the balance sheet. The critical terms of the swaps are as follows:

(Dollars in Th	nousands)	
\$25MM Fixed Pay LIBO	R Swap - Non-Hed	lge
	<u>2024</u>	2023
Notional amount Fair market value Life remaining	\$ - \$ - -	\$ 18,566 \$ (971) 9 Years
\$25MM Fixed Pay LIBO	R Swap - Non-Hed	lge
	2024	2023
Notional amount Fair market value Life remaining	\$ = <u>.</u> \$ - -	\$ 18,566 \$ (865) 9 Years
\$21.145MM Fixed Pay LIB	OR Swap - Non-H	edge
	<u>2024</u>	2023
Notional amount Fair market value Life remaining	\$ - \$ - -	\$ 15,703 \$ (721) 9 Years
Constant Maturity LIBO	R Swap - Non-He	dge
	2024	2023
Notional amount Fair market value Life remaining	\$ 24,763 \$ (82) 8 Years	\$ 26,418 \$ (423) 9 Years

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

### 8. <u>Derivative Financial Instruments, Continued</u>

(Dol	lars in Thousa	ands)	- 4	
Constant Matur	rity LIBOR Sw	ap - Non-Hed	ge	
		<u>2024</u>		2023
Notional amount Fair market value Life remaining	\$ \$	24,763 (101) 8 Years	<b>\$</b>	26,418 (480) 9 Years

The swaps were issued at market terms so that they had no fair value at their inception. The carrying amount of the swaps has been adjusted to fair value at the end of the year which, because of changes in forecasted levels of the LIBOR, resulted in reporting a liability. The Corporation deemed the capacity to perform on the part of the derivative counterparty to be of little or no concern; and no adjustment was applied to standard market valuation practices.

Effective March 27, 2024, the three fixed pay swaps were terminated and paid in full. The swap results are included in excess revenues. For the years ending July 31, 2024 and 2023, this earnings impact totaled a gain of approximately \$1,113,000 and \$2,421,000, respectively.

### 9. Net Assets With Donor Restrictions

A summary of the net assets with donor restrictions at July 31, 2024 and 2023 follows:

<u>.</u>	(Dollars in Thousands)		
Net assets with donor restrictions that are	2024	<u>2023</u>	
subject to expenditure for a specified purpose	<u>\$ 12,364</u>	\$ 10,535	
Net assets with donor restrictions that are perpetual in nature	\$ 2,024	\$ 2,02 <u>4</u>	

#### 10. Pension Plan

The Corporation has a defined benefit pension plan covering all full-time regular employees working 1,000 hours or more in a twelve-month period with an employment date before December 31, 2006. The plan provides benefits that are based upon earnings and years of service. The Corporation's funding policy is to make the minimum annual contribution required by applicable regulations. Contributions are intended to provide not only for benefits attributed to service to date, but also for those expected to be earned in the future.

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

#### 10. Pension Plan, Continued

The measurement dates were July 31, 2024 and 2023. The Corporation issues a publicly available financial report that includes financial statements and required supplementary information for the Retirement Plan for Employees of Phoebe Putney Health System, Inc. That report may be obtained by contacting the management of the Corporation.

Effective December 31, 2014, the Corporation amended the pension plan to freeze all benefit accruals except for participants whose combined age and credited service equaled or exceeded 70 by the effective date. On July 28, 2016, the Corporation executed an amendment to permit vested terminated participants with an accrued benefit of \$150,000 or less to make an election during the period September 2, 2016 through November 1, 2016 to receive a lump sum distribution. This amendment was effective December 1, 2016 and eligibility was based on the benefit accruals as of December 1, 2016. Such distributions were made during the period December 1, 2016 through December 31, 2016. Effective December 31, 2016, the Corporation amended the pension plan to freeze all benefit accruals for all remaining participants. On November 16, 2017, the Corporation purchased annuity contracts totaling approximately \$5,373,000 to settle a portion of the pension obligations, as part of a small benefit annuity lift out plan.

The following table sets forth the defined benefit pension plan funded status and amounts recognized in the financial statements at July 31, 2024 and 2023:

	(Dollars in Thousands)		
	2024	2023	
Plan assets at fair value at July 31 Projected benefit obligation at July 31	\$ 257,687 246,128	\$ 231,738 255,077	
Funded status	<u>\$ 11,559</u>	\$ (23,339)	
Amounts recognized in the balance sheets consist of: Noncurrent assets (liabilities)	<u>\$ 11,559</u>	<u>\$ (23,339)</u>	
Amounts recognized in net assets without donor restrictions: Net actuarial loss	<u>\$ (51,041)</u>	<u>\$ (66,190</u> )	
Deferred pension cost	\$ (51,041)	\$ (66,190)	

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

## 10. Pension Plan, Continued

	(Dollars in Thousands)		
	2024	2023	
Weighted-average assumptions used to determine pension benefit obligations: Discount rate Rate of compensation increase	5.28% N/A	5.22% N/A	
Weighted-average assumptions used to determine net periodic benefit cost: Discount rate Expected long-term return on	5.22%	4.44%	
plan assets Rate of compensation increase	6.50% N/A	6.50% N/A	

Mortality table assumptions used to determine pension benefit obligations were PRI2012 Employee and Healthy Annuitant Mortality Tables with Fully Generational Projections using MP2021 with Aon's Endemic Adjustment for 2024 and 2023.

The Corporation's expected rate of return on plan assets is determined by the plan assets' historical long-term investment performance, current asset allocation, and estimates of future long-term returns by asset class.

The following table sets forth the components of net periodic cost and other amounts recognized in net assets without donor restrictions for the years ended July 31, 2024 and 2023:

	•	(Dollars in Thousands)			
		<u>2024</u>		2023	
Interest cost Expected return on plan assets Amortization of recognized net	\$	12,890 (14,614)	\$	11,366 (14,637)	
actuarial loss		1,675	-	2,488	
Net periodic benefit cost (income)	ş.	(49)		(783)	

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

## 10. Pension Plan, Continued

	(Dollars in Thousands)		
	2024	2023	
Other changes in plan assets and benefit obligations recognized in net assets without donor restrictions:			
Net actuarial gain Amortization of net actuarial loss	\$ (13,474) (1,675)	\$ (20,972) (2,488)	
Total recognized in net assets without donor restrictions	<u>(15,149</u> )	(23,460)	
Total recognized in net periodic benefit cost and net assets without donor restrictions	<u>\$ (15,198</u> )	<u>\$ (24,243)</u>	

The change in projected benefit obligation for the defined benefit pension plan for the years ended July 31, 2024 and 2023 included the following components:

	(Dollars in Thousands)				
Projected benefit obligation,		2024		2023	
beginning of year	\$	255,077	\$	279,610	
Interest cost Actuarial gain		12,890 (3,249)		11,366 (23,164)	
Benefits paid		(18,590)	-	(12,735)	
Projected benefit obligation,					
end of year	\$	246,128	\$	255,077	
Accumulated benefit obligation	\$	246,128	\$	255.077	

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

#### 10. Pension Plan, Continued

The change in fair value of plan assets for the years ended July 31, 2024 and 2023 included the following components:

		(Dollars in Thousands)			
Plan assets at fair value,		<u>2024</u>		<u>2023</u>	
beginning of year	\$	231,738	\$	232,028	
Actual return on assets		24,839	·	12,445	
Employer contributions		19,700		940	
Benefits paid	X.	(18,590)		(12,735)	
Plan assets at fair value, end of year	<u>\$</u>	257,687	<u>\$</u>	231,738	

Effective July 1, 2024, the Corporation made a \$19,700,000 voluntary contribution to the Retirement Plan for Employees of Phoebe Putney Health System, Inc. The voluntary contribution applied to plan year 2023.

The Corporation does not anticipate making a contribution during fiscal year 2025.

Actuarial gains related to changes in the benefit obligation of the defined benefit pension plan were approximately \$3,249,000 and \$23,164,000 in 2024 and 2023, respectively. Significant components of gains impacting this obligation include changes in the discount rate and updates to the retirement and mortality assumptions.

#### Estimated Future Benefit Payments

The following benefit payments are expected to be paid:

	(Dollars in Thousands)	_
Year Ending July 31	Pension <u>Benefits</u>	
2025	\$ 14,572	
2026	\$ 15,180	
2027	\$ 15,679	
2028	\$ 16,070	
2029	\$ 16,396	
2030 - 2034	\$ 85,108	

The expected benefits to be paid are based on the same assumptions used to measure the Corporation's benefit obligation at July 31, 2024.

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

#### 10. Pension Plan, Continued

#### Plan Assets

The composition of plan assets at July 31, 2024 and 2023 is as follows:

	Target A	llocations	Plan <i>i</i>	Assets
	2024	2023	2024	2023
Asset category:				
Global equities	18%	38%	35%	47%
Hedge funds	10%	15%	11%	17%
Real assets	2%	7%	0%	6%
Liability-hedging assets	<u>_70%</u>	40%	_54%	_30%
Total	<u>100%</u>	<u>100%</u>	<u>100%</u>	<u>100%</u>

The Corporation's investment strategy is to manage the portfolio to preserve principal and liquidity while maximizing the return on the investment portfolio through the full investment of available funds. The portfolio is diversified by investing in multiple types of investment-grade securities. The investment policy requires assets of the plan to be primarily invested in securities with at least an investment grade rating to minimize interest rate and credit risk. The plan assets are long-term in nature and are intended to generate returns while preserving capital.

Pension assets are invested in various classes as summarized in the table below for 2024 and 2023. The allocation between different investment vehicles is determined by the Corporation, based on current market conditions, short-term and long-term market outlooks, and cash needs for distributions and plan expenses. Assumptions for expected returns on plan assets are based on historical performance, long-term market outlook, and a diversified investment approach designed to provide steady, consistent returns that minimize market fluctuations. The Corporation utilizes the services of a professional investment advisor in the selection of individual fund managers. The investment advisor tracks the performance of each fund manager and makes recommendations for redistributions, as needed, to comply with targeted allocations or to replace underperforming funds.

The Corporation attempts to mitigate investment risk by rebalancing between investment classes as the Corporation's contributions and monthly benefit payments are made. Although changes in interest rates may affect the fair value of a portion of the investment portfolio and cause unrealized gains and losses, such gains or losses would not be realized unless the investments are sold.

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

## 10. Pension Plan, Continued

## Plan Assets, Continued

The fair values of the Corporation's pension plan assets at July 31, 2024 and 2023, by asset category are as follows:

	(Dollars in Thousands)						
	Fair Value Measurements at July 31, 2024						
Asset Category	<u>Total</u>	(Level 1)	( <u>Level 2</u> )	(Level 3)			
Money market funds	\$ 52,712	\$ 3,139	\$ 49,573	<u>\$</u>			
Total assets in fair value hierarchy	52,712	<u>\$ 3,139</u>	<u>\$ 49,573</u>	<u>\$</u>			
Investments measured at net asset value	204,975						
Total assets at fair value	<u>\$ 257,687</u>						
	Fair \		Thousands) nents at July 31,	2023			
Asset Category	Fair '		<del></del>	2023 ( <u>Level 3</u> )			
Asset Category  Money market funds Equity securities Real estate investment trusts		Value Measurem	nents at July 31,				
Money market funds Equity securities	<u>Total</u> \$ 7,200 4,843	Value Measurem ( <u>Level 1</u> ) \$ 1,641 4,843	nents at July 31,	( <u>Level 3</u> )			
Money market funds Equity securities Real estate investment trusts Total assets in fair value	Total \$ 7,200 4,843 6,326	Value Measurem ( <u>Level 1</u> ) \$ 1,641 4,843 6,326	(Level 2) \$ 5,559	( <u>Level 3</u> ) \$ - - -			

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

### 10. Pension Plan, Continued

#### Plan Assets, Continued

The following table sets forth additional information for assets valued at NAV as a practical expedient:

				oo of July 24, 2024	
	_	(Dallana in	Thereandel	as of July 31, 2024	
	-	(Dollars in	Thousands)		
			Unfunded	Restrictions on	Redemption
	E	<u>air Value</u>	Commitments	Redemption Frequency	Notice Period
Mutual funds - index funds Alternative investments:	\$	110,921	None	Daily	2 - 15 Days
Credit opportunities	\$	4,925	None	Annually	None - 90 Days
Multi-strategy	\$	18,209	None	Monthly - Calendar Quarter	45 - 90 Days
Equity securities	\$	68,874	\$ 344	None - Annually	None - 62 Days
Other	\$	2,046	None	Monthly	3 Business Days
				as of July 31, 2023	
		(Dollars in	Thousands)		
		10	Unfunded	Restrictions on	Redemption
	E	air Value	Commitments	Redemption Frequency	Notice Period
Mutual funds - fixed income funds	\$	7,049	None	Monthly	30 Days
Mutual funds - index funds Mutual funds - growth and other	\$	65,919	None	Daily	15 Days
funds Alternative investments:	\$	4,915	None	Daily	None
Credit opportunities	\$	4 400	None	Appublic	OO Dovo
Multi-strategy		4,498		Annually	90 Days
•	\$	22,633	None	Monthly - Calendar Quarter	45 - 90 Days
Equity securities Other	\$	103,911	\$ 424	None - Annually	None - 62 Days
Other	\$	4,444	None	Monthly	3 Business Days

Financial assets valued using Level 1 inputs are based on unadjusted quoted market prices within active markets. Financial assets valued using Level 2 inputs are based primarily on quoted prices for similar investments in active or inactive markets. Financial assets using Level 3 inputs were primarily valued using management's assumptions about the assumptions market participants would utilize in pricing the asset or liability. Valuation techniques utilized to determine fair value are consistently applied. See Note 18 for valuation methodologies.

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

#### 10. Pension Plan, Continued

#### **Defined Contribution Plan**

The Corporation maintains defined contribution plans covering substantially all eligible employees. Employees may deposit a portion of their earnings for each pay period on a pretax basis and the Corporation matches 50% of each participant's voluntary contributions up to a maximum of 6% of the employee's annual salary. At its discretion, the Corporation may make additional contributions to the Plan. Matching and discretionary contribution expenses for the years ended July 31, 2024 and 2023 totaled approximately \$3,482,000 and \$3,212,000, respectively.

## 11. <u>Employee Health Insurance</u>

The Corporation has a self-insurance plan under which a third-party administrator processes and pays claims. The Corporation reimburses the third-party administrator for claims incurred and paid. In addition, the Corporation participates in a shared group financing layer agreement with other Georgia hospitals through a program offered by Georgia ADS, LLC. The program is designed to provide for the financing and payment of covered claims. The parameters of the program include covered claims between \$225,000 and \$850,000. Each participant in the program is responsible for a portion of the shared claims based on their percentage of the total claims for the group. Additional insurance has been obtained to provide coverage for claims exceeding \$850,000. Total expenses related to this plan were approximately \$24,721,000 and \$22,392,000 for 2024 and 2023, respectively.

#### 12. Malpractice and Other Insurance

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

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

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

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

#### 12. Malpractice and Other Insurance, Continued

of the maximum subject premium or \$6,000,000, for 2024 and 2023, whichever is greater. Under the excess of limits coverage, the reinsurer shall pay up to \$2,000,000 for 2024 and 2023, per loss, per insured, in excess of \$1,000,000 in 2024 and 2023 per loss, per insured. The maximum amount recoverable for this coverage shall not exceed \$6,000,000 for 2024 and 2023.

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

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

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

#### 13. Concentrations of Credit Risk

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

	<u>2024</u>	<u>2023</u>
Medicare Medicaid Blue Cross Commercial Patients	26% 13% 22% 39% <u>0%</u>	27% 13% 24% 35% 1%
Total	<u>100%</u>	<u>100%</u>

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

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

### Related Party Payables

	(Dollars in Thousands)		
	<u>2024</u>	2023	
Due to Phoebe Putney Health System, Inc. Due from other related parties	\$ (109,533) 61	\$ (68,180) 10	
Net related party payables	<u>\$ (109,472)</u>	\$ (68, <u>170</u> )	

The related party transactions that affect the above receivables and payables arise from the sharing of services and costs in the ordinary course of business.

### Related Organization

Phoebe Foundation, Inc. (Foundation) was established to raise funds to support the operation of the Corporation. The Foundation's bylaws provide that all funds raised, except for funds required for the operation of the Foundation, be distributed to or be held for the benefit of the Corporation. The Foundation's general funds, which represent the Foundation's undesignated resources, are distributed to the Corporation in amounts and in periods determined by the Foundation's Board of Directors, who may also restrict the use of general funds for hospital plant replacement or expansion or other specific purposes. Plant replacement and expansion funds, specific-purpose funds, and assets obtained from endowment income of the Foundation are distributed to the Corporation as required to comply with the purposes specified by donors. The Corporation's interest in the net assets of the Foundation is reported as an other asset in the balance sheets.

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

## 15. Related Organization, Continued

	(Dollars in Thousands)				
	2024	<u>2023</u>			
Assets:					
Cash and cash equivalents	\$ 8,833	\$ 6,886			
Investments	16,126	14,672			
Other assets	1,220	1,280			
Total assets	<u>\$ 26,179</u>	\$ 22,838			
Liabilities and net assets:					
Accounts payable	\$ 56	\$ 48			
Due to related parties	55	8			
Total liabilities	111	56			
Net assets	26,068	22,782			
Total liabilities and net assets	<u>\$ 26,179</u>	\$ 22,838			
Revenue and support	\$ 3,292	\$ 2,678			
Expenses	1,835	1,888			
Excess of revenue and support					
(expenses)	1,457	790			
Restricted contributions	2,679	2,593			
Released from restriction to operations	(850)	(857)			
Net assets, beginning of year	22,782	20,256			
Net assets, end of year	\$ 26,068	<u>\$ 22,782</u>			

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

### 16. Functional Expenses

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

	(Dollars in Thousands)					
July 31, 2024	Patient Care Services	General and Administrative	Total			
Salaries and wages Employee health and welfare Medical supplies and other Purchased services Depreciation and amortization Interest	\$ 149,147 40,721 271,584 97,170 14,320 5,392	\$ 31,692 8,624 68,677 43,410 15,904 6,038	\$ 180,839 49,345 340,261 140,580 30,224 11,430			
Total	<u>\$ 578,334</u>	<u>\$ 174,345</u>	<u>\$ 752,679</u>			
July 31, 2023						
Salaries and wages Employee health and welfare Medical supplies and other Purchased services Depreciation and amortization Interest	\$ 134,855 36,628 245,039 116,276 13,924 	\$ 29,456 8,155 59,858 41,179 16,292 6,105	\$ 164,311 44,783 304,897 157,455 30,216 11,268			
Total	<u>\$ 551,885</u>	<u>\$ 161,045</u>	<u>\$ 712,930</u>			

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

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

### 17. Fair Values of Financial Instruments

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

- Cash and cash equivalents, accounts payable, accrued expenses, and
  estimated third-party payor settlements: The carrying amount reported in the
  balance sheets approximates its fair value due to the short-term nature of
  these instruments.
- Assets limited as to use: Amounts reported in the balance sheets approximate fair value. See Note 18 for fair value measurement disclosures.
- Derivative financial instruments: The carrying amount reported in the balance sheets for derivative financial instruments approximates its fair value. See Note 18 for fair value measurement disclosures.
- Long-term debt: Fair values of the Corporation's revenue notes are based on current traded value. The carrying amount reported in the balance sheets for debt totals approximately \$333,268,000 and \$340,276,000 at July 31, 2024 and 2023, respectively, with a fair value of approximately \$341,999,000 and \$346,147,000, respectively. Based on inputs used in determining the estimated fair value, the Corporation's long-term debt would be classified as Level 2 in the fair value hierarchy.

#### 18. Fair Value Measurement

Following is a description of the valuation methodologies used for assets and liabilities at fair value. There have been no changes in the methodologies used at July 31, 2024 and 2023.

- Money market funds and certificates of deposit: Valued at amortized cost, which approximates fair value.
- Equity securities: Certain equity securities are valued at the closing price reported on the active market on which the individual securities are traded. Other equity securities are valued based on quoted prices for similar investments in active or inactive markets or valued using observable market data.

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

### 18. Fair Value Measurement, Continued

- Mutual funds and alternative investments: Certain mutual funds are valued at
  closing price reported on the active market on which the individual securities
  are traded. Other mutual funds are valued at the net asset value (NAV) of
  shares held at year end. Certain investments invest in a variety of growth and
  value assets. Management of the funds has the ability to shift investments as
  they feel necessary to meet established goals.
- Real estate investment trusts: These exchange traded investments are
  valued on the basis of a discounted cash flow approach, which includes the
  future rental receipts, expenses, and residual values as the highest and best
  use of the real estate from a market participant view as rental property.
- Derivatives: Valued using forward LIBOR curves. Values are then verified against counterparty mark-to-market valuations.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although management believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

Fair values of assets and liabilities measured on a recurring basis at July 31, 2024 and 2023 are as follows:

			(Dollars in Thousands)					
			Fair Value Measurements at Reporting Date Usir					Using
	Fa	iir Value	Quoted Active For lo Liat	Prices in Markets dentical bilities vel 1)	Sigr O Obse In	nificant other ervable puts ovel 2)	Sigr Unobs In	ificant servable puts
July 31, 2024	1.0	iii value	( <u>Le</u>	<u>vei i</u> )	(LE	<u>vei z</u> )	( <u>Le</u>	<u>vel 3</u> )
Assets:								
Money market funds Certificates of deposit	\$	25 396	\$	25	\$	- 396	\$	-
Total assets at fair value	\$	<u>421</u>	\$	25	\$	396	\$	
Liabilities: Derivatives	\$	183	\$		\$	183	\$	

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

#### 18. Fair Value Measurement, Continued

			(Dollars in Thousands)					
			Fair Value Measurements at Reporting Date U				Using	
			Quote	ed Prices in	Significant			
				e Markets	_	ther	_	ificant
				Identical		ervable		servable
	_			abilities		puts		puts
July 31, 2023	<u>, t</u>	air Value	( <u>L</u>	<u>evel 1</u> )	( <u>Le</u>	evel 2)	( <u>Le</u>	<u>vel 3</u> )
Assets:								
Money market funds	\$	78,335	\$	78,335	\$	ŝ	\$	
Certificates of deposit		395	-			395	=	= = = = = = = = = = = = = = = = = = = =
Total assets at fair value	<u>\$</u>	78,730	<u>\$</u>	78,335	<u>\$</u>	395	\$	-
Liabilities:	•	0.400	•		•	0.400	•	
Derivatives	<u>\$</u>	3,460	\$		5	3,460	\$	

Following is a description of the valuation methodologies used and investment strategies for assets measured using NAV as a practical expedient:

- Mutual funds fixed income funds: The fixed income mutual funds seek to provide a
  high level of current income while preserving principal by primarily investing in a
  portfolio of domestic and international debt securities with an investment grade or
  better and with a dollar weighted average maturity between three and ten years. The
  fixed income mutual funds may be redeemed monthly with 30 days' notice.
- Mutual funds index funds: The index mutual funds are invested in a variety of large cap domestic companies that are members of the indices. Members of the indices are determined each year during annual reconstruction and enhanced quarterly with the addition of initial public offerings. The index mutual funds have no redemption restrictions with redemption notice requirements ranging from 2 to 15 days.
- Mutual funds growth and other funds: The growth and other mutual funds seek to
  provide a high level of return through the allocation of investments among both small
  cap investments and mortgage-backed securities. The growth and other funds may be
  redeemed daily with daily notice.
- Alternative investments: The objective of the alternative investments is to use leveraged, long, short and derivative positions in both domestic and international markets with the goal of generating high returns while maintaining minimal risk. The alternative investments may be redeemed from a range of daily with daily notice to annually with 90 days' notice. The limits on redemptions vary from none to a 24 month hard lock-up.

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

## 19. Commitments and Contingencies

#### Compliance Plan

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

#### Health Care Reform

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

#### Litigation

The Corporation is involved in litigation and regulatory investigations arising in the course of business. After consultation with legal counsel, management estimates that these matters will be resolved without material adverse effect on the Corporation's future financial position or results from operations. See malpractice insurance disclosures in Note 12.

#### Other

On May 18, 2017, a group submitted to the Georgia Department of Community Health, a certificate of need application for a new hospital to be located within the Corporation's service area. On November 15, 2017, the Georgia Department of Community Health granted Lee County Medical Center a certificate of need to build a 60-bed hospital in Lee County, Georgia. The Georgia Department of Community Health has granted multiple extensions since 2017 related to the Certificate of Need. As of March 27, 2023, the Certificate of Need has been cancelled due to Lee County Medical Center having failed to show good cause or to request a hearing after failure to secure financing in a timely manner resulting in an almost three year delay.

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

#### 20. <u>Liquidity and Availability</u>

As of July 31, 2024 and 2023, the Corporation has working capital of approximately \$214,380,000 and \$123,781,000 and average days (based on normal expenditures) cash on hand of 64 and 43 days, respectively.

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

	(Dollars in Thousands)				
		2024	Ħ	2023	
Cash and cash equivalents	\$	125,665	\$	80,578	
Patient accounts receivable, net		114,230		90,961	
Estimated third-party payor settlements		1,912			
Other current assets - other receivables		21,387		1,232	
Internally designated for capital improvements	=	396	-	395	
Total financial assets available	\$	263,590	<u>\$</u>	<u> 173,166</u>	

None of the financial assets available are subject to donor or other contractual restrictions that make them unavailable for general expenditure within one year of the balance sheet date. The Corporation estimates that approximately 100% of the internally designated funds for capital improvements are available for general expenditure within one year in the normal course of operations. Accordingly, these assets have been included in the quantitative information above. The Corporation has other assets whose use is limited that are held by trustees under indenture agreements. These assets whose use is limited are not available for general expenditure within the next year and are not reflected in the amounts above. The Corporation has the ability to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due.

#### 21. Leases

The Corporation has operating and finance leases for buildings and equipment. The Corporation determines if an arrangement is a lease at the inception of a contract. Leases with an initial term of twelve months or less are not recorded on the balance sheets. The Corporation 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 the Corporation's right to use an underlying asset during the lease term, and lease liabilities represent the Corporation's obligation to make lease payments arising from the lease. Right-of-use assets and lease liabilities are recognized at the commencement date, based on the net present value of fixed lease payments over the lease term. The Corporation'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 the Corporation's operating leases do not provide an implicit rate, the Corporation uses its incremental borrowing rate based on the information available at the commencement date in determining the present

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

### 21. Leases, Continued

value of lease payments. The Corporation 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.

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

	(Dollars in Thousands)				
	<u>2024</u>	2023			
Operating leases: Right-of-use assets:					
Operating lease right-of-use assets	<u>\$ 364</u>	\$ 637			
Lease liabilities:					
Current portion	\$ 193	\$ 266			
Long-term	<u> </u>	362			
Total operating lease liabilities	\$ 358	<u>\$ 628</u>			
Finance leases: Right-of-use assets:					
Property and equipment, net	<u>\$ 6,030</u>	<u>\$ 7,057</u>			
Lease liabilities:	92				
Current portion	\$ 1,962	\$ 2,058			
Long-term	4,709	5,623			
Total finance lease liabilities	<u>\$ 6,671</u>	<u>\$ 7,681</u>			

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

## 21. Leases, Continued

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

	(Dollars in Thousands)					
<u>Lease Type</u>	2	2024	2	2023		
Operating lease cost Finance lease interest Finance lease amortization	\$	270 338 2,002	\$	120 369 2,142		
Total lease cost	\$	2,610	<u>\$</u>	2,631		

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

	(Dollars in Thousands)					
	<u>2024</u>		2023			
Operating cash flows from operating leases Operating cash flows from finance leases Financing cash flows from finance leases	\$	270 338 1,961	\$	120 369 2,047		
Total	<u>\$</u>	2,569	<u>\$</u>	2,53 <u>6</u>		

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

	(Dollars in Thousands)				
Year Ending July 31	<u>Finance</u>		Operating		
2025 2026 2027 2028 2029 Thereafter	\$	2,249 2,089 1,660 1,059 130 101	\$	209 152 13 4 -	
Total undiscounted cash flows		7,288		378	
Less: present value discount		617		20	
Total lease liabilities	\$	<u>6,671</u>	<u>\$</u>	358	

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

#### Leases, Continued

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

Weighted-average remaining lease term (years):	<u>2024</u>	<u>2023</u>
Operating leases	1.90	2.61
Finance leases	3.55	3.76
Weighted-average discount rate:		
Operating leases	6.05%	5.91%
Finance leases	5.00%	5.00%

### 22. Coronavirus (COVID-19)

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

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

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

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

## 22. Coronavirus (COVID-19), Continued

In fiscal years 2020 through 2022, the Corporation received and recognized total grant stimulus funding of approximately \$98,016,000.

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

On April 16, 2020, the Corporation received payments in the amount of approximately \$56,357,000 under the Accelerated and Advance Payment Program expansion as part of the CARES Act. The program provides emergency funding and addresses cash flow difficulties when there are disruptions in claims submission and/or claims processing. Centers for Medicare and Medicaid Services (CMS) expanded the program for all Medicare providers throughout the country. In October 2020, a Continuing Resolution was passed which allows providers to defer repayment of these funds for up to 29 months before interest starts accruing. The Corporation repaid the entire amount over the interest free period with final payment occurring in September 2022.

## 23. Federal Emergency Management Agency (FEMA) Disaster Relief Funding

As a result of increased operating costs incurred as part of its response to the COVID-19 pandemic, the Corporation requested funding under the FEMA Disaster Relief Fund for reimbursement of certain eligible costs. During fiscal year 2024, FEMA obligated and paid the Corporation total funding of approximately \$81,811,000, of which approximately \$73,630,000 is recognized in the accompanying statements of operations and changes in net assets. The timing of FEMA's close-out process for final award determination, as well as any additional procedures that FEMA may need to complete prior to close-out, including the finalization of potential deductions to the obligated amount, is unknown. Amounts received that were not recognized as revenue (totaling approximately \$8,181,000) are reported within accrued expenses in the accompanying balance sheets, and are based on guidance received from an independent consultant regarding potential demand(s) to recover a portion of the funds paid to the Corporation as a component of the FEMA close-out process.



## INDEPENDENT AUDITOR'S REPORT ON SUPPLEMENTAL INFORMATION

Board of Directors Phoebe Putney Memorial Hospital, Inc. Albany, Georgia

We have audited the financial statements of Phoebe Putney Memorial Hospital, Inc. as of and for the years ended July 31, 2024 and 2023 and our report thereon dated December 11, 2024, which expressed an unmodified opinion on those financial statements, appears on pages 1 to 3. Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The information included in this report on pages 52 to 66, inclusive, which is the responsibility of management, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information has not been subjected to the auditing procedures applied in the audits of the financial statements, and, accordingly, we do not express an opinion or provide any assurance on it.

Albany, Georgia
December 11, 2024

## SERVICE TO THE COMMUNITY July 31, 2024

Phoebe Putney Memorial Hospital, Inc. (Corporation) is a not-for-profit health care organization that exists to serve the community. The Corporation opened in 1911 to serve the community by caring for the sick regardless of ability to pay. As a tax-exempt hospital, the Corporation has no stockholders or owners. All revenue after expenses is reinvested in our mission to care for the citizens of our community - into clinical care, health programs, state-of-the-art technology and facilities, research, and teaching and training of medical professionals now and for the future.

The Corporation operates as a charitable organization consistent with the requirements of Internal Revenue Code Section 501(c)(3) and the "community benefit standard" of IRS Revenue Ruling 69-545. The Corporation takes seriously its responsibility as the community's safety net hospital and has a strong record of meeting and exceeding the charitable care and the organizational and operational standards required for federal tax-exempt status. The Corporation demonstrates a continued and expanding commitment to meeting our mission and serving the citizens by providing community benefits. A community benefit is a planned, managed, organized, and measured approach to meeting identified community health needs, requiring a partnership between the healthcare organization and the community to benefit residents through programs and services that improve health status and quality of life.

The Corporation improves the health and well-being of Southwest Georgia through clinical services, education, research and partnerships that build health capacity in the community. The Corporation provides community benefits for every citizen in its service area as well as for the medically underserved. The Corporation conducts community needs assessments and pays close attention to the needs of low income and other vulnerable persons and the community at large. The Corporation often works with community groups to identify needs, strengthen existing community programs and plan newly needed services. It provides a wide-ranging array of community benefit services designed to improve community health and the health of individuals and to increase access to health care, in addition to providing free and discounted services to people who are uninsured and underinsured.

The Corporation's excellence in community benefit programs was recognized by the prestigious Foster McGaw Prize awarded to the Corporation in 2003 for its broad-based outreach in building collaboratives that make measurable improvements in health status, expand access to care and build community capacity, so that patients receive care closest to their own neighborhoods. Drawing on a dynamic and flexible structure, the community benefit programs are designed to respond to assessed needs and are focused on upstream prevention.

As Southwest Georgia's leading provider of cost-effective, patient-centered health care, the Corporation is also the region's largest employer with more than 3,200 members of the Corporation caring for patients. The Corporation participates in the Medicare and Medicaid programs and is one of the leading providers of Medicaid services in Georgia.

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

The following table summarizes the amounts of charges foregone (i.e., contractual adjustments) and estimates the losses incurred by the Corporation due to inadequate payments by these programs and for indigent/charity. This table does not include discounts offered by the Corporation under managed care and other agreements:

	Charges <u>Foregone</u>	Estimated <u>Unreimbursed Cost</u>
Medicare Medicaid Indigent/Charity	\$ 863,584,000 217,064,000 <u>150,576,000</u>	\$ 281,552,000 70,769,000 49,092,000
	\$ 1,231,224,000	\$ 401,413,000

## Indigent/Charity Care by County

The Corporation provided care to a total of 17,807 Indigent/Charity patients during 2024. These patients came from numerous counties throughout Georgia and surrounding states. The following table summarizes the amounts of charges foregone and estimates the losses incurred by the Corporation by county.

	59	Charges Foregone	<u>Unre</u>	Estimated eimbursed Cost
Dougherty Lee Worth Terrell Sumter Mitchell Randolph Calhoun Baker Crisp Early Tift Other Georgia Out of State	\$	85,438,000 12,834,000 7,480,000 6,355,000 5,381,000 5,038,000 2,787,000 2,105,000 2,098,000 2,062,000 1,992,000 9,965,000 3,485,000	\$	27,853,000 4,184,000 2,438,000 2,072,000 1,754,000 1,642,000 1,159,000 909,000 686,000 684,000 672,000 649,000 3,254,000 1,136,000
Total	<u>\$</u>	150,576,000	\$	49,092,000

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

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

## I. Community Health Improvement Services

#### A. Community Health Education

The Corporation provided health education services that reached 8,588 individuals in 2024 at a cost of \$284,787. These services included the following free classes and seminars:

- Teen Pregnancy Prevention Education
- Teenage Parenting Classes (Network of Trust)
- CPR Training to Teachers
- Safe Sitter Classes
- Asthma & Epi-Pen Education
- Health Education at Summer Camps
- Breast Cancer Prevention Education
- Shop Talk discussions related to Prostate Cancer and Diabetes
- Various Cancer prevention lectures and presentations
- Presentations and Stakeholders meeting to address the Opioid Crisis
- A Men's and Women's Health Conference
- Albany Pink Run/Walk

## Men and Women's Health Conferences

The PPMH's men's and women's conferences attracted a total of 543 participants. In June, the Men's Conference attracted 150 participants. The 2024 Men's Health Fair was a screen event that provided prostate cancer screening, blood pressure and glucose check, education on health wellness, and an information presentation with health events. The Women's Conference was held in October and had 393 participants. The Women's Conference focused on breast, lung, and colorectal cancer and screenings for cholesterol, glucose and blood pressure were provided. The total cost to the organization for the two conferences and other community health education events was \$37,739.

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

## I. Community Health Improvement Services, Continued

## A. Community Health Education, Continued

### Network of Trust

This is a nationally recognized program aimed at teen mothers to provide parenting skills, attempt to reduce repeat pregnancies, and complete high school. Internal evaluations show teens participating in the program are less likely to repeat a pregnancy prior to graduation. Network of Trust enrolled 6 teen parents (with zero repeat pregnancies) during the 2023/2024 school year at a cost of \$247,048. Program results demonstrate teens that graduated from the two-semester program are less likely to have a second pregnancy prior to age 21. Two of Three Network of Trust seniors graduated in 2024. Network of Trust and the school nurse program provided teen pregnancy prevention programming, asthma and epi-pen education, Stop the Bleed Training and conducted health education at summer camps.

## B. <u>Community Based Clinical Services</u>

#### Flu Shots

The Corporation provides free flu shots to volunteers, students and homeless shelters. In 2024, the Corporation administered 94 flu shots at an unreimbursed cost of \$1,443.

### <u>Mammography</u>

The Corporation provided 150 mammograms to the uninsured this year at a cost of \$14,100.

#### School Nurse Program

The Corporation places nurses in nineteen schools in its Primary Service Area with a goal of creating access to care for students and staff, assessing the health care status of each population represented, and effectively establishing referrals for all health care needs. Nurses conducted CPR training, Safe Sitter classes, teen pregnancy prevention education, asthma and epi-pen education, Stop the Bleed Training, and health education summer camps. During the 2023/2024 school year, the school nurse program covered approximately 25,491 student lives. This program operated at a cost of \$512,743 in 2024.

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

## I. Community Health Improvement Services, Continued

#### B. Community Based Clinical Services, Continued

### Nurse Family Partnership

The Nurse Family Partnership (NFP) is a home visitation training for eligible first time moms from pregnancy until the child's second birthday. Without a variance from the National Service Office (NSO), the mom should enter the program no later than the 28th week of pregnancy. The BSN-prepared nurse provides scheduled visits throughout the pregnancy and until the child turns two. The goal of NFP is to have healthy moms having healthy babies. Phoebe's Nurse Family Partnership program has proven to be effective in improving compliance with prenatal, postpartum and infant/child medical care, and has also shown fewer preterm deliveries than counterparts not in the program. In 2024, the Corporation spent \$79,474 and provided services to 86 active clients.

### Taking Time for Teens

Taking Time for Teens (T3) is a collaboration between Morehouse School of Medicine and Phoebe Putney Network of Trust. Target population was youth aged 16-19 in Public Health District 8-2. Counties serviced with this program included Dougherty, Lee, Worth, Terrell, Calhoun, Colquitt, Mitchell, Baker, Miller, Seminole and Early. The purpose of the funded project was to strengthen social and health systems to improve optimal adolescent health, reduce sexual risk behavior that leads to teen pregnancy, and increase positive youth behaviors known to protect against teen pregnancy. Through this program, 1,197 students were reached by implementing pre-approved Evidence Based Programs (EBPs) such as Love Notes, Too Good for Drugs, My Plan A, and SPORT Prevention Plus Wellness. In addition to providing health education to the students, each county formed a Youth Leadership Council (YLC) group. YLC is a team of students selected to serve as leaders in community or school projects. This grant funded program ended in December 2023.

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

## I. Community Health Improvement Services, Continued

## B. Community Based Clinical Services, Continued

## Health Equity for All Teens (H.E.A.T.)

Health Equity for All Teens (H.E.A.T.) is a collaboration between Morehouse School of Medicine and 3 subcontractors across the state of Georgia. Phoebe Network of Trust is the subcontractor for the South Georgia Region. The target population for this project is youth aged 10-24 in Baker, Calhoun, Dougherty, Early, Mitchell, Seminole, Terrell, and Thomas counties, with the potential to expand to additional counties. The purpose of the project is to improve optimal adolescent health, reduce sexual risk behavior that leads to teen pregnancy and STI's, and increase positive youth behaviors known to protect against teen pregnancy. Through this program, 1,018 students were reached by implementing pre-approved Evidence Based Interventions (EBI's) including: InClued, Plan A, Be Proud, Be Responsible, and Positive Potential. In addition to providing health education to students, each county formed a Youth Leadership Council (YLC) group. YLC is a team of students selected to serve as leaders in community and school projects. The 2024 fiscal year was the first of five years of this grant funded project.

## C. <u>Health Care Support Services</u>

Although the Corporation anticipates possible reimbursement from various funding sources in FY2024, the Corporation wanted to highlight these life-saving benefits to the community.

#### The Light House

The Light House housing in Albany, GA provides a comforting and supportive haven for cancer patients and their families, offering a welcoming and nurturing environment during their challenging journey towards healing and recovery. It is designed to be a home away from home. The Light House affords each guest comfort, privacy, and state of the art accommodations for them and one family member. It's conveniently located across the street from the Phoebe Cancer Center and includes six bedrooms, each with a wheelchair accessible restroom and shower. There's a common area, a large kitchen, two quiet rooms, a veranda, sunroom and screened-in porch. The Light House provides a comfortable home-like setting where qualified patients can relax between treatments or spend the night to avoid having to travel back and forth to their home. It's a place where patients and families find solace and a caring environment during their most difficult times. The Light House was built on love and faith by the philanthropy giving from the community, survivors, and local business owners. In 2024, the Corporation spent \$10,921 on Light House facility maintenance.

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

## I. Community Health Improvement Services, Continued

## C. <u>Health Care Support Services, Continued</u>

#### The Phoebe Wellness Center

The Phoebe Wellness and Survivorship Center is a beacon of hope and support for cancer patients, survivors and thrivers. It offers a comprehensive range of services, programs, and resources aimed at empowering survivors to thrive beyond treatment and their cancer journey. This center provides a holistic approach to physical, emotional, and mental well-being, helping survivors regain their strength, find a sense of community, and embrace life after cancer. The Wellness Center offers a diverse array of services including educational programs, fitness classes, counseling referrals, and support groups, all tailored to meet the unique needs of survivors. It serves as a sanctuary for survivors to heal, connect, share similar experiences, and rediscover a fulfilling and vibrant life, post cancer, after diagnosis, treatment and throughout survivorship and surveillance. In 2024, the Corporation spent \$101,195 on the Phoebe Wellness and Survivorship Center.

## Government Sponsored Eligibility Applications to the Poor and Needy

The Corporation contracts for eligibility on behalf of the poor and needy that may be eligible for Medicaid. In some cases, it can take up to two years to be deemed eligible. In 2024, the Corporation paid \$652,920 to process these applications with 1,686 receiving Medicaid benefits.

#### Financial Assistance Policy (FAP)

The Corporation will extend free or discounted care to eligible individuals for all urgent, emergent, or otherwise medically necessary services. Patients whose household income is at or below 200% of the Federal Poverty Guidelines are eligible for free care. Patients whose household income is between 201% and 400% of the Federal Poverty Guidelines qualify for discounted charges based on a sliding fee schedule in the FAP. Phoebe will not charge eligible individuals more for emergency or other medically necessary care than the Amount Generally Billed (AGB) to individuals who have insurance coverage, and is compliant with the requirements for a not-for-profit charitable corporation in accordance with Internal Revenue Service Regulation §1.501(r).

### D. Social and Environmental Improvement Activities

The Corporation participated in multiple food distributions throughout FY 2024 and provided financial contributions to aid in community garden infrastructure. This was provided at a cost of \$25,000.

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

## II. Health Professions Education

The Corporation recognizes that to continuously improve the Corporation's long-term value to our community and our customers, to encourage life-long learning among employees and to achieve a world-class employer status, it is in the organization's best interest to provide opportunities that will assist eligible employees in pursuing formal, healthcare related educational opportunities. PPMH also provides non-employees financial support in pursuing healthcare related degrees. In 2024, 2,715 students received clinical instruction from the Corporation's facilities at a total cost of \$4,559,676.

### Nursing Students

In 2024, PPMH provided \$2,717,160 in clinical supervision and training to 2,087 nursing students. In 2021, the nursing clinical team added three full time employees for Academic Clinic Instructors to assist college nursing program supervisors and provided Simulation Lab instruction to all the nursing students.

## Other Students

During fall 2023 and spring 2024, the Simulation Center trained medical residents in emergency response and labor and delivery measures. The medical residents attend training in the Simulation Center each quarter.

#### Simulation & Innovation Center

PPMH's technologically advanced Simulation & Innovation Center is the leading provider of nurse training and development in Southwest Georgia. The Simulation & Innovation Center features a state-of-the-art skills lab and simulators for labor & delivery, NICU, pediatrics, medsurg, surgery, trauma and critical care. Students participate in full patient codes on life-like mannequins that respond to a variety of conditions. What nurses experience in the Simulation & Innovation Center will mirror what one would experience on a nursing floor. In 2024, the Simulation & Innovation Center provided various training to 9,977 participants.

### Other Health Professional Education

The Corporation provided an additional \$1,842,516 in clinical supervision and training to pharmacy, pharmacy techs, and other allied health professionals providing clinical opportunities for 628 students.

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

### III. Subsidized Health Services

## A. Other Subsidized Services

#### Inmate Care

The Corporation provides care to persons in jail for Dougherty County. In 2024, the Corporation provided \$1,075,719 of unreimbursed medical and drug treatment to 418 inmates.

## Indigent Drug Pharmacy

Indigent Drug Pharmacy provides medication upon discharge to patients that are either indigent or uninsured. In 2024, the pharmacy dispensed 3,441 prescriptions to 1,069 patients at a cost of \$207,184.

## IV. Financial and In-Kind Support

In 2024, the Corporation provided \$353,427 in cash donations and in-kind support to non-profit organizations in Southwest Georgia. Listed are some highlights:

- PPMH provided \$146,252 as a cash donation to Horizons Community Solutions for cancer screenings
- Provided forgone rent to non-profits at a cost of \$88,314.

### V. Community Building Activities

### A. Economic Development

The Corporation supports the Economic Development Commission of Dougherty County with funding to support improved employment and health coverage as a way to improve the overall health of the residents of the region.

### B. Workforce Development

To address long-standing nursing and medical occupational shortages, the Corporation spent \$524,531 in developing and expanding enrollment in nursing and other medical occupational programs in 2024. This funding was provided to Albany State University, Albany Technical College, and 4C Academy.

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

## V. Community Building Activities, Continued

## B. Workforce Development, Continued

## Simulation Lab Other Educational Opportunities

The Corporation's \$5.3 million dollar Simulation Plan became operational in 2021. It was built to train workers in a variety of healthcare roles and duplicates hospital environments exactly, including patient and operating rooms, intensive care units, and the emergency center. The following are some training highlights for 2024:

## a. Workforce Development

Through various investments with our academic partners, the Corporation has enabled the nursing programs to increase student enrollment by providing funding for full and/or part-time faculty for each of the nursing programs, as well as for three full time clinical faculty who are located in the Simulation & Innovation Center.

## b. Albany State University ("ASU") Summer Health and STEM Camp:

This camp provided experiential learning opportunities to high school students in the areas of biology, chemistry/physics and biomedical/healthcare fields. Students engaged in scientific experimentation and demonstrations with ASU faculty in the aforementioned areas. Additionally, students meet with keynote motivational speakers and personnel at PPMH for a tour of medical facilities. Held in the Summer of 2024, there were approximately 40 student participants.

#### c. Middle School Healthcare Summer Camp:

The Phoebe Middle School Healthcare Summer camp is a half day program for rising 7th & 8th grade students. This exciting camp experience was developed to ignite a passion for students interested in exploring healthcare pathways while participating in fun & engaging hands-on activities. During June 2024, PPMH hosted 33 student learners.

## d. Clinical Instructor Training:

Student services, in collaboration with the education department hosts Clinical Instructor Training for academic partners who bring students into the facility for clinical rotations. Members of the PPMH simulation and innovation team provide demonstration and hands on training to instructors. Student services delivers information and guidelines to instructors on student expectations, policies and procedures, and high reliability protocols. In August of 2023, 29 clinical instructors attended the training session and in July 2024, 38 clinical instructors attended the session.

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

## V. Community Building Activities, Continued

Workforce Development, Continued

Simulation Lab Other Educational Opportunities, Continued

e. Educators Advocating for Careers in Healthcare (EACH):

PPMH education department hosted a dynamic experience specifically tailored for southwest Georgia regional school superintendents regarding the future of healthcare careers. At the Phoebe Simulation and Innovation Center, educators were able to experience what it's like in the day of a nurse, they participated in a virtual reality game developed to engage middle & high school students in healthcare related opportunities, went on a walking tour of the PPMH Simulation Center, Laboratory and Radiology and heard about the free healthcare career resources available to local schools in Southwest Georgia. Five County School Superintendents and Headmasters from the region participated in the event.

### f. SOWEGA-AHEC Pathway to Medicine:

SOWEGA-AHEC, in collaboration with AAPHC and the PPMH Family Medicine Residency Program, created the Pathway to Med School Program to address the critical need for primary care physicians in Southwest Georgia. Knowing that students from rural communities are more likely to return to a rural area to practice and understanding the need to increase the pipeline of rural students enrolled in Georgia medical schools, it was determined that students from the 38-county region needed to become more competitive in the application process. This year, PPMH hosted eleven Pathways to Medicine Students and fifteen UGA PharmD students. In addition, they hosted fifteen 9th and 10th grade students interested in healthcare.

To determine how to make the students more competitive, AHEC polled the admissions committees from each of the medical schools in Georgia to determine what, beyond MCAT scores and GPA would increase their chances of being accepted. The overwhelming consensus was a much needed and significant structured clinical shadowing and medical research experience. The Albany based Pathway to Medical School Program was structured accordingly as a 4-week residential experience to include 50 hours of clinical shadowing in a primary care setting and 75 hours of community-based research to include data collection, interpretation, and presentation.

Southwest Georgia is a medically underserved area (MUA) and by supporting the efforts of local aspiring medical students at the pre-med academic level, we can improve access to healthcare in our communities.

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

## V. Community Building Activities, Continued

## B. Workforce Development, Continued

Simulation Lab Other Educational Opportunities, Continued

#### g. Colony Bank Leadership Academy:

The Colony Bank Leadership Academy aims to encourage high school juniors to recognize their own potential and develop their leadership skills. As part of the curricula, this group attended a day in the Simulation Center to participate in hands on skills (such as listening to heart tones and respirations) to educate them on medical skills and careers in hopes of encouraging them to seek a career in healthcare.

### h. Junior Leadership Lee:

Junior Leadership Lee County draws together rising high school sophomores, juniors, and seniors who are deeply committed to our future and empowers them with the essential knowledge about every element of our community – from government, healthcare, and education to news, history, and charity. As part of the curricula, this group attended a day in the Simulation Center to participate in hands on skills (such as listening to heart tones and respirations) to educate them on medical skills and careers in hopes of encouraging them to seek a career in healthcare. Dr. Tracy Suber facilitated their session regarding communication.

#### Various Community Leaders and Organizations

- i. During FY2024, PPMH began hosting hands on training and demonstrations for non-medical community members to step into the life of a health care professional. Eight of these events were hosted this year at the PPMH Simulation and Innovation Center.
- ii. PPMH hosted multiple other community organizations in their simulation center and provided hands on opportunities to experience medical skills training. Over 250 individuals from around the community and state attended such events, more than 17 of such events were held.
- iii. PPMH hosted over 14 high school events covering hands-on training and demonstrations that allow the non-medical community member to step into the life and training required of our staff. Activities include: IV skills, tourniquet placement, heart, lung, listening to bowel sounds, pulse point checks and virtual reality health care simulation.

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

### V. Community Building Activities, Continued

#### C. Coalition Building

In 2024, Phoebe made the decision to pay for each employee to volunteer in the community for a maximum of four hours annually. This is a voluntary opportunity, and employees are able to participate as their workload allows. There were 121 employees that volunteered during fiscal year 2024. Some of the events that were held are as follows including persons served:

- MLK Day of Service 29 Phoebe employees participated providing 49.5 hours of time. Packed and distributed crates of food from the community garden.
   Approximately 200 individuals in the community received food crates.
- Liberty House 6 volunteers, totaling 12 hours of time. Packed winter clothes, prepared summer attire, removed expired products, and stuffed envelopes. Approximately 180 women benefited from this effort.
- Habitat for Humanity 15 volunteers, totaling 60 hours of time. Painting and working on home being donated to a family in need. One family will benefit.
- Feeding the Valley 14 Phoebe employees participated providing 56 hours of time. Packed 9,200 pounds of food, providing 1,840 meals for the community.
- Sleep in Heavenly Peace Bed Delivery 6 paid volunteers, totaling 18 hours of time. Assembled and delivered ten beds to children in need.

#### Partnership with The Arc of Southwest Georgia

PPHS entered into an employment partnership with The Arc of SWGA that advances employment opportunities for individuals with disabilities. The program is unique in that it is a business-led, transition-to-work program, with training taking place entirely at PPMH. The anticipated outcome for each participant is competitive employment. This means employment in an integrated setting, working alongside coworkers with and without disabilities, year-round work that is not seasonal employment, and 15 or more hours per week at a wage of \$13.00 per hour or higher. During 2024, there were 6 individuals hired in positions ranging from food service to patient transport.

### VI. Community Benefit Operations

The Corporation provided \$47,430 in data management and community dashboard that displays over 180 community health indicators on our website:

http://www.phoebehealth.com/health-matters/building-healthy-communities

# SERVICE TO THE COMMUNITY, Continued July 31, 2024

## **Summary**

Community Health Improvement Services:		<u>2024</u>
Community Health Education	\$	284,787
Community Based Clinical Services	Ψ	607,760
Healthcare Support Services		790,036
• •	2	190,030
Total community health improvement services	-	1,682,583
Health Professions Education:		
Nurses/nursing students		2,717,160
Other health professional education	-	1,842,516
Total health professional education		4,559,676
Subsidized Health Services:		
Other subsidized health services	03	1,282,903
Total subsidized health services		1,282,903
Financial and In-Kind Support:		
Cash donations		265,113
In-kind donations	63	88,314
Total financial and in-kind support	_	353,427
Community Building Activities:		
Workforce development		524,531
Economic development	-	25,000
Total community building activities		549,531
Community Benefits Operations:		
Dedicated staff and other resources		47 400
Dodiodiod Stail and Other resources	J <del></del>	47,430
Total community benefit operations		47,430

## SERVICE TO THE COMMUNITY, Continued July 31, 2024

## Summary, Continued

		<u>2024</u>
Other:		
Traditional charity care - estimated unreimbursed cost of charity services	\$	49,092,000
Unpaid cost of Medicare services - estimated unreimbursed cost of Medicare services Unpaid cost of Medicaid services - estimated		281,552,000
unreimbursed cost of Medicaid services	: <b>:</b>	70,769,000
Total other	P.	401,413,000
Total summary	\$ _	409,888,550

This report has been prepared in accordance with the community benefit reporting guidelines established by Catholic Health Association (CHA) and VHA. The Internal Revenue Services' requirements for reporting community benefits are different than the guidelines under which this report has been prepared.



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

Board of Directors
Phoebe Putney Memorial Hospital, Inc.
Albany, Georgia

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Phoebe Putney Memorial Hospital, Inc. (Corporation), which comprise the balance sheet as of July 31, 2024, and the related statements of operations and changes in net assets and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated December 11, 2024.

## Report on Internal Control Over Financial Reporting

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

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

Continued

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Let's Think Together."

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	None .
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Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that were not identified.

## Report on Compliance and Other Matters

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

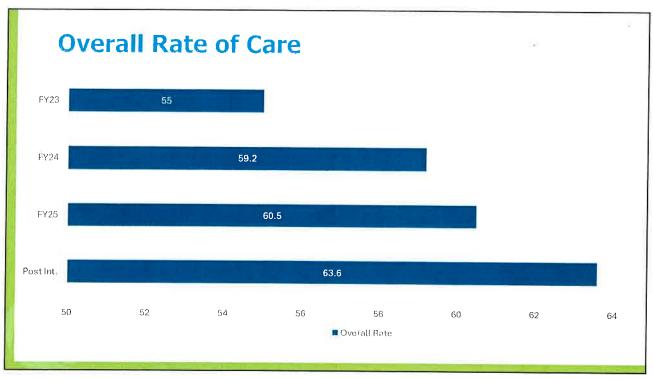
## Purpose of this Report

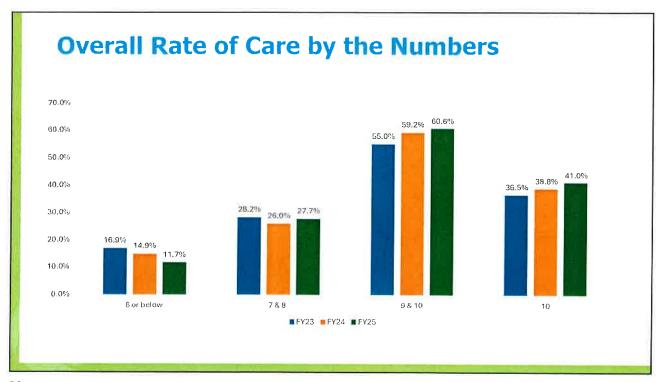
The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Corporation's internal control or on compliance. This report is an integral part of an audit performed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

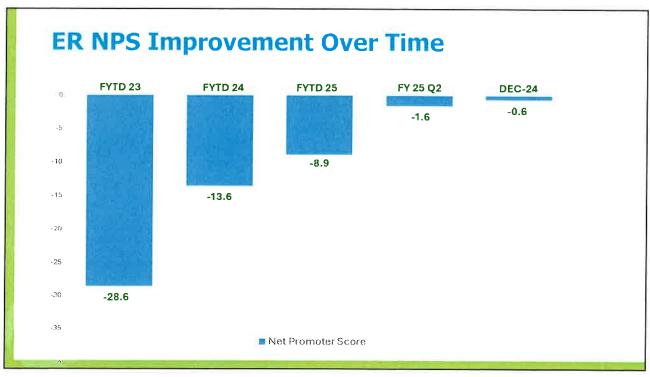
Albany, Georgia

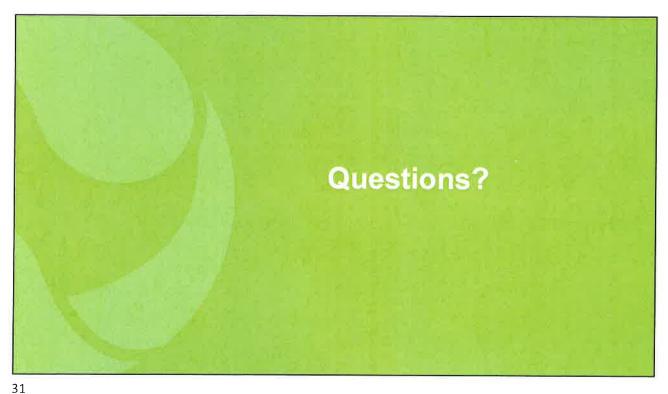
December 11, 2024

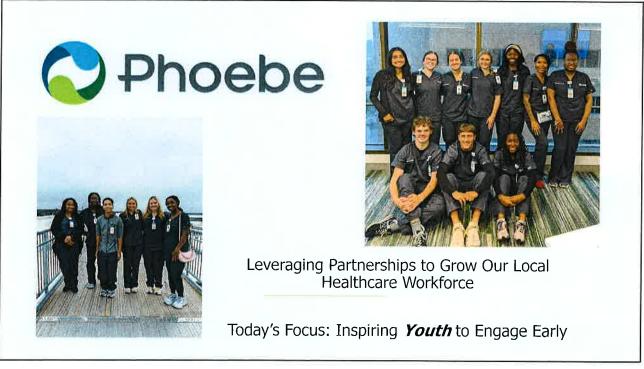






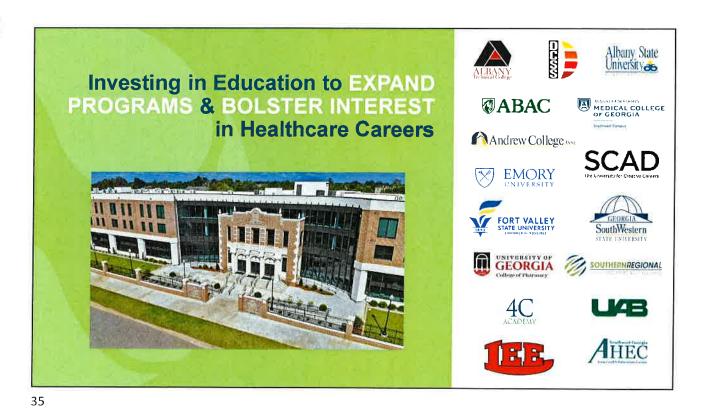












7th & 8th Grade Summer Camp

• 33 rising 7th & 8th graders participated

• Wellness Presentation

• NICU & EMS Transport Presentation

• VR Games

• Pediatric CPR

• First Aid



## **Phoebe Shadowing Program**

- Short-term learning experience.
- Age requirement of 16 to shadow within the health system (age 18 in some areas).
- Offers observation experience with participating departments.
- Advantages of shadowing:
  - Observe daily routine of professional staff.
  - Explore healthcare career options.
  - Increase awareness of required skill sets.
  - Gain an understanding of the workforce.
- Must complete a required clearance process.



#### Over 260 Student Requests

- 50 + High School Students
- 200 + College Level Students

## Top 5 Areas

- Operating Room
- Imaging Services
- Nursing Services
- Physical Medicine
- Physician Services

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## WBL Internship Program

- Provides an opportunity to take skills & knowledge learned in healthcare science classes and see it applied in the real world.
- Students can work in different areas of the hospital to determine interest & strengths.
- Offer healthcare pathway exposure & provide professional development.







#### Eligibility

- Enrolled in Work Based Learning
- Senior
- Completed Healthcare Pathway
- GPA 3.0 or higher
- Available for 3-hour shift (Mon-Fri 8AM-5PM)

#### and the miner

- Resume
- Internship Application
- Letter of Recommendation
- · Personal Statement
  - Desire to purse a degree in healthcare
  - Plans after graduation
  - Why do you want to intern at Phoebe
- Interview

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## Rotation Areas

- · Cancer Center
- Labor & Delivery
- PACU
- Family Tree
- Plastics & Dermatology
- Oncology Wellness Center
- Neurology
- Neurosurgery

- Inpatient Rehab
- Outpatient Physical Medicine
- Hospice
- · Wound Care
- · Urgent Care
- Central Sterile Processing
- Surgicare

itudent Na	me Semester Currently	Institution	Program of Study	WBL solidified	Recommend WBL	Future Career Goals
S	Fall 2023 4-year university	August University	Neuroscience	Strongly agree	Definitely recommend	Neurology or Psychiatry MD
CC	Fall 2021 4-year university	GSW	Nursing	Strongly agree	Definitely recommend	ER Nurse
LC	Fall 2023 4-year university	GCSU	Nursing	Agree	Definitely recommend	CRNA
w	Spring 20234-year university	GSU	Nursing	Strongly agree	Definitely recommend	Nurse
AP	Spring 20224-year university	Mercer University	Pre-Med	Strongly agree	Definitely recommend	Physician
ZK	Fall 2023 4-year university	UGA	Biology/Pre-Med	Strongly agree	Definitely recommend	OBGYN
ст	Spring 20244-year university	UGA	Pre-Med	Strongly agree	Definitely recommend	Anesthesiologist
ZF	Fall 2022 4-year university	GSU	Radiology	Strongly agree	Definitely recommend	Cadiovascular Technologist
QV	Fall 2022 4-year university	ASU	Nursing	Strongly agree	Definitely recommend	L&D Nurse
тв	Fall 2023 4-year university	University of North GA	Biology	Strongly agree	Definitely recommend	Physican Assistant
KP	Fall 2023 4-year university	UGA	Biology	Agree	Definitely recommend	Physician
ST	Fall 2022 4-year university	Mercer University	Biology	Strongly agree	Definitely recommend	Physican Assistant
MP	Fall 2023 4-year university	GSW	Nursing - BSN	Strongly agree	Definitely recommend	Nurse Practitioner
MÐ	Fall 2022 4-year university	GSW	Nursing	Strongly agree	Definitely recommend	EC Nurse
AN	Fall 2022 4-year university	Univesity of Wisconsin-Ma	dismarketplace studies, Minor in	Agree	Definitely recommend	Medical Device Sales.
JS	Spring 20244-year university	G\$W^	Nursing	Agree	Definitely recommend	RN-BSN
TC	Spring 2024 Technical College	ATC	Nursing	Strongly agree	Definitely recommend	Nursing - CRNA
JS	Fall 2023 4-year university	UGA	Biology	Strongly agree	Definitely recommend	Family MD or Pediatrician
KP	Fall 2021 & 4-year university	Mercer University	Nursing	Strongly agree	Definitely recommend	Pediatric Radiology Tech
CT	Fall 2022 4-year university	GSW	Nursing	Strongly agree	Definitely recommend	ICU Nurse
S	Fall 2023 4-year university	Kennesaw State	Integrated Health Science - Nursing	Strongly agree	Definitely recommend	Pediatric NP
RD	Fall 2023 4-year university	Mercer University	Biological Sciences	Agree	Definitely recommend	Anesthesiologist Assistant
S	Spring 20244-year university	University of North GA	Nursing - BSN	Strongly agree	Definitely recommend	CRNA
28	Spring 20244-year university	August University	Physician Assistant	Strongly agree	Definitely recommend	PA & open my own practice
В	Fall 2023 4-year university	Mercer University	Nursing	Strongly agree	Definitely recommend	CRNA

