

**HOUSTON HEALTHCARE SYSTEM, INC.**

**COMBINED FINANCIAL STATEMENTS AND  
SUPPLEMENTARY INFORMATION**

**DECEMBER 31, 2021 AND 2020**

**HOUSTON HEALTHCARE SYSTEM, INC.**  
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**DECEMBER 31, 2021 AND 2020**

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## INDEPENDENT AUDITORS' REPORT

To the Board of Trustees  
Houston Healthcare System, Inc.

### **Opinion**

We have audited the accompanying combined financial statements of Houston Healthcare System, Inc. (a Georgia corporation), which comprise the combined balance sheets as of December 31, 2021 and 2020 and the related combined statements of operations and changes in net assets and cash flows for the years then ended, and the related notes to the combined financial statements.

In our opinion, the combined financial statements referred to above present fairly, in all material respects, the financial position of Houston Healthcare System, Inc. as of December 31, 2021 and 2020, and the results of its operations and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

### **Basis of Opinion**

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Combined Financial Statements section of our report. We are required to be independent of Houston Healthcare System, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### **Responsibilities of Management for the Combined Financial Statements**

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

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

### **Auditors' Responsibility for the Audit of the Combined Financial Statements**

Our objectives are to obtain reasonable assurance about whether the combined financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' 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 will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements, including omissions, are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the combined financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

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

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

**Report on Supplementary Information**

Our audits were conducted for the purpose of forming an opinion on the combined financial statements as a whole. The supplementary combining information referred to in the table of contents is presented for purposes of additional analysis and is not a required part of the combined financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the combined financial statements. The information has been subjected to the auditing procedures applied in the audits of the combined financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the combined financial statements or to the combined financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the combining information is fairly stated, in all material respects, in relation to the combined financial statements as a whole.

*Warren Averett, LLC*

Atlanta, Georgia  
March 28, 2022

**HOUSTON HEALTHCARE SYSTEM, INC.  
COMBINED BALANCE SHEETS  
DECEMBER 31, 2021 AND 2020**

<b>ASSETS</b>	<b>2021</b>	<b>2020</b>
<b>CURRENT ASSETS</b>		
Cash and cash equivalents	\$ 8,883,000	\$ 13,821,000
Assets limited as to use – current portion	696,000	912,000
Patient accounts receivable, net	28,661,000	24,748,000
Estimated third-party payor receivable	1,887,000	1,163,000
Insurance recoveries – current portion	3,039,000	1,738,000
Supplies, at lower of cost (first-in, first-out) or market and other assets	9,186,000	8,758,000
Total current assets	52,352,000	51,140,000
<b>ASSETS LIMITED AS TO USE</b>		
Internally designated for capital acquisition and other	170,535,000	239,852,000
Held by trustee under indenture agreement	-	2,360,000
	170,535,000	242,212,000
Less amounts required to meet current obligations	696,000	912,000
Total assets limited as to use	169,839,000	241,300,000
<b>PROPERTY AND EQUIPMENT, NET</b>	134,816,000	135,314,000
<b>PENSION ASSET</b>	10,073,000	-
<b>OTHER ASSETS</b>		
Long-term investments and other	3,923,000	4,319,000
Insurance recoveries	8,619,000	4,915,000
Total other assets	12,542,000	9,234,000
<b>TOTAL ASSETS</b>	<b>\$ 379,622,000</b>	<b>\$ 436,988,000</b>

See notes to the combined financial statements.

**HOUSTON HEALTHCARE SYSTEM, INC.  
COMBINED BALANCE SHEETS  
DECEMBER 31, 2021 AND 2020**

<b>LIABILITIES AND NET ASSETS</b>		
	<b>2021</b>	<b>2020</b>
<b>CURRENT LIABILITIES</b>		
Current maturities of long-term debt	\$ -	\$ 4,225,000
Accounts payable and accrued expenses	11,898,000	10,256,000
Accrued compensation and benefits	19,499,000	15,102,000
Estimated third-party payor settlements	4,067,000	4,156,000
Other current liabilities	5,394,000	18,413,000
Total current liabilities	40,858,000	52,152,000
<b>LONG-TERM DEBT, NET OF CURRENT INSTALLMENTS</b>		
	-	59,860,000
<b>SELF-INSURANCE RESERVES</b>		
	17,011,000	12,578,000
<b>ACCRUED PENSION LIABILITY</b>		
	-	4,955,000
<b>TOTAL LIABILITIES</b>	<b>57,869,000</b>	<b>129,545,000</b>
<b>NET ASSETS</b>		
Without donor-imposed restrictions	321,753,000	307,443,000
Total net assets	321,753,000	307,443,000
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>\$ 379,622,000</b>	<b>\$ 436,988,000</b>

See notes to the combined financial statements.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**COMBINED STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS**  
**FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020**

	<u>2021</u>	<u>2020</u>
<b>OPERATING REVENUES</b>		
Net patient service revenue	\$ 290,480,000	\$ 248,520,000
Grant revenue	8,142,000	27,337,000
Other revenue	3,866,000	3,375,000
Total operating revenues	<u>302,488,000</u>	<u>279,232,000</u>
<b>OPERATING EXPENSES</b>		
Salaries and benefits	177,227,000	156,050,000
Supplies and drugs	50,311,000	44,046,000
Other expenses	77,790,000	72,068,000
Depreciation and amortization	10,826,000	11,026,000
Interest expense	1,126,000	2,447,000
Total operating expenses	<u>317,280,000</u>	<u>285,637,000</u>
<b>OPERATING LOSS</b>	(14,792,000)	(6,405,000)
<b>NONOPERATING REVENUES (EXPENSES)</b>		
Investment income	2,687,000	3,448,000
Other components of net periodic pension costs	2,720,000	2,611,000
Net realized gains on sales of securities	17,328,000	16,107,000
Loss on extinguishment of long-term debt	(3,298,000)	-
Net unrealized (loss) gain on securities	(1,715,000)	3,692,000
Noncapital grants, contributions, and other	32,000	(78,000)
Total nonoperating revenues	<u>17,754,000</u>	<u>25,780,000</u>
<b>EXCESS OF REVENUES OVER EXPENSES</b>	<u>2,962,000</u>	<u>19,375,000</u>
Changes in pension assets and benefit obligations not included in net periodic pension costs	11,348,000	(177,000)
Contributions for capital	-	100,000
<b>INCREASE IN NET ASSETS WITHOUT DONOR-IMPOSED RESTRICTIONS</b>	14,310,000	19,298,000
<b>NET ASSETS AT BEGINNING OF YEAR</b>	<u>307,443,000</u>	<u>288,145,000</u>
<b>NET ASSETS AT END OF YEAR</b>	<u>\$ 321,753,000</u>	<u>\$ 307,443,000</u>

See notes to the combined financial statements.

**HOUSTON HEALTHCARE SYSTEM, INC.  
COMBINED STATEMENTS OF CASH FLOWS  
FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020**

	<u>2021</u>	<u>2020</u>
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>		
Change in net assets	\$ 14,310,000	\$ 19,298,000
Adjustments to reconcile change in net assets to net cash (used in) provided by operating activities:		
Depreciation and amortization	10,826,000	11,026,000
Bond premium / discount amortization	(329,000)	(810,000)
Loss on extinguishment of long-term debt	3,298,000	-
Loss (gain) on sale of assets	20,000	(79,000)
Net unrealized loss (gain) on securities	1,715,000	(3,692,000)
Net realized gains on securities	(17,328,000)	(16,107,000)
Changes in:		
Patient accounts receivable, net	(3,913,000)	(1,799,000)
Supplies and other assets	(428,000)	(2,111,000)
Self-insurance reserves and insurance recoveries	(572,000)	392,000
Long-term investments and other	337,000	(649,000)
Accounts payable and accrued expenses	6,039,000	(587,000)
Estimated third-party payor settlements	(813,000)	898,000
Other current liabilities	(12,327,000)	14,659,000
Accrued pension obligations	(15,028,000)	(4,453,000)
Net cash (used in) provided by operating activities	<u>(14,193,000)</u>	<u>15,986,000</u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>		
Purchase of assets limited as to use	(170,922,000)	(286,729,000)
Proceeds from sale of assets limited as to use	170,383,000	283,591,000
Withdrawals from assets limited as to use	87,828,000	8,000,000
Irrevocable trust deposit (Note 8)	(67,698,000)	
Capital expenditures	(10,336,000)	(10,071,000)
Net cash provided by (used in) investing activities	<u>9,255,000</u>	<u>(5,209,000)</u>

See notes to the combined financial statements.

**HOUSTON HEALTHCARE SYSTEM, INC.  
 COMBINED STATEMENTS OF CASH FLOWS – CONTINUED  
 FOR THE YEARS ENDED DECEMBER 31, 2021 AND 2020**

	<b>2021</b>	<b>2020</b>
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>		
Payments on long-term debt	\$ -	\$ (4,025,000)
Net cash used in financing activities	-	(4,025,000)
<b>(DECREASE) INCREASE IN CASH AND CASH EQUIVALENTS</b>	<b>(4,938,000)</b>	<b>6,752,000</b>
<b>CASH AND CASH EQUIVALENTS AT:</b>		
<b>BEGINNING OF YEAR</b>	<b>13,821,000</b>	<b>7,069,000</b>
<b>END OF YEAR</b>	<b>\$ 8,883,000</b>	<b>\$ 13,821,000</b>
<b>SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION:</b>		
Cash paid during the year for:		
Interest	\$ 1,501,500	\$ 3,204,000
Decrecognition of long-term debt and accrued interest	\$ 64,400,000	\$ -

See notes to the combined financial statements.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**NOTES TO THE COMBINED FINANCIAL STATEMENTS**  
**DECEMBER 31, 2021 AND 2020**

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**1. DESCRIPTION OF ORGANIZATION AND SUMMARY OF  
SIGNIFICANT ACCOUNTING POLICIES**

**Organization**

Houston Healthcare System, Inc. (the System), located in Warner Robins, Georgia, is a not-for-profit corporation that operates acute care hospitals and freestanding outpatient treatment facilities. The System provides a full range of inpatient, outpatient, and emergency services to the residents of Houston County and surrounding areas. The following entities comprise the System: Houston Hospitals, Inc. operates two acute care hospitals, Houston Medical Center and Perry Hospital, which provide inpatient, outpatient, and urgent care services; Houston Healthcare EMS, Inc. provides ambulance services to the residents of Houston County; Houston Healthcare Properties, Inc. owns and manages the non-hospital property of the System; Houston Health Ventures, Inc. is a for-profit corporation engaged in joint ventures that assist and promote the tax exempt purposes of the System; Houston Primary Care Physicians, LLC and Houston Physician Specialties, LLC operate free-standing primary care and specialty physician practices. All intercompany transactions have been eliminated.

Effective January 1, 2009, the Hospital Authority of Houston County, Georgia (the Authority) implemented a reorganization plan for Houston Hospitals, Inc. and related facilities whereby all the assets, liabilities, management and governance of the facilities were transferred to Houston Hospitals, Inc., pursuant to a lease and transfer agreement which provides for a nominal rate to the Authority by the System. The lease term expires December 31, 2048.

**Use of Estimates**

The preparation of combined financial statements in conformity with generally accepted account principles in the United States of America (GAAP) 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 combined 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 investments in highly liquid debt instruments with an original maturity of three months or less, excluding cash and cash equivalents included in assets limited as to use.

**Investments and Investment Income**

Investments in equity and debt securities are measured at fair value in the combined balance sheets. Investment income or loss (including realized and unrealized gains and losses on investments, interest and dividends) is included in excess of revenues over (under) expenses unless the income or loss is restricted by donor or law.

**Assets Limited as to Use**

Assets limited as to use primarily include assets held by trustee under indenture agreements and designated assets set aside by the Board of Trustees (the Board) for future capital improvements and other, over which the Board retains control and may at its discretion subsequently use for other purposes. Amounts required to meet current liabilities of the System have been reclassified in the combined balance sheets at December 31, 2021 and 2020.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**NOTES TO THE COMBINED FINANCIAL STATEMENTS**  
**DECEMBER 31, 2021 AND 2020**

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**1. DESCRIPTION OF ORGANIZATION AND SUMMARY OF  
SIGNIFICANT ACCOUNTING POLICIES – CONTINUED**

**Property and Equipment**

Property and equipment acquisitions are recorded at cost and generally defined as items with an acquisition cost of \$5,000 per unit or greater, a useful life of three years or more, and qualify as tangible personal property. Depreciation is provided over the estimated useful life of each class of depreciable asset and is computed using the straight-line method. Equipment under capital lease obligations is amortized on the straight-line method over the shorter period of the lease term or the estimated useful life of the equipment. Such amortization is included in depreciation and amortization in the combined financial statements.

During 2020, the System evaluated estimated useful lives for all depreciable assets and, as a result, made changes to asset lives that resulted in a change in estimate and a reduction in depreciation expense of approximately \$5,433,000.

Gifts of long-lived assets, such as land, buildings, or equipment, are reported as unrestricted support, and are excluded from excess of revenues over expenses, unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations addressing how long those long-lived assets must be maintained, expirations of donor restrictions are reported when the donated or acquired long-lived assets are placed in service.

**Impairment of Long-Lived Assets**

The System 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 System has not recorded any impairment charges in the accompanying combined statements of operations and changes in net assets for the years ended December 31, 2021 and 2020.

**Cost of Borrowing**

Interest cost on borrowed funds during the period of construction of capital assets is capitalized as a component of the cost of acquiring those assets. There was no capitalized interest cost for the years ended December 31, 2021 and 2020.

**Long-Term Investments and Other**

Long-term investments and other consist of notes receivable and investments in unconsolidated companies. Notes receivable are from loans secured by promissory contracts. Investments in unconsolidated companies represent the System's participation in joint ventures and partnerships, which are accounted for on the cost and equity methods and are not material to the System's combined financial statements.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**NOTES TO THE COMBINED FINANCIAL STATEMENTS**  
**DECEMBER 31, 2021 AND 2020**

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**1. DESCRIPTION OF ORGANIZATION AND SUMMARY OF  
SIGNIFICANT ACCOUNTING POLICIES – CONTINUED**

**Deferred Financing Costs**

Deferred financing 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. Unamortized deferred financing costs are presented in the accompanying combined balance sheets as an adjustment to the carrying value of the related debt.

**Excess of Revenues Over Expenses**

The combined statements of operations and changes in net assets include excess of revenues over expenses. Changes in unrestricted net assets which are excluded from excess of revenues over expenses, consistent with industry practice, include permanent transfers of assets to and from affiliates for other than goods and services, changes in pension assets and benefit obligations not included in net periodic pension costs, and contributions of long-lived assets (including assets acquired using contributions which by donor restriction were to be used for the purposes of acquiring such assets).

**Net Patient Service Revenue**

Net patient service revenue is recorded at the transaction price estimated by the System to reflect the total consideration due from patients and third-party payors in exchange for providing goods and services for patient care. These services are considered to be a single performance obligation and have a duration of less than one year. Revenues are recorded as these goods and services are provided.

The transaction price, which involves significant estimates, is determined based on the System's standard charges for the goods and services provided, with a reduction recorded for price concessions related to third-party contractual arrangements as well as patient discounts and other patient price concessions. During the years ended December 31, 2021 and 2020, the impact of changes to the inputs used to determine the transaction price was considered immaterial to the current periods.

**Charity Care**

The System 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 System does not pursue collection of amounts determined to qualify as charity care, they are not reported in net patient service revenue.

**Provider Relief Funds**

As part of the response to the coronavirus pandemic, the federal government passed legislation, referred to as the Coronavirus Aid, Relief, and Economic Security (CARES) Act, on March 27, 2020 that included, among other things, financial assistance to offset some of the financial burden expected to be incurred by providers such as the System in responding to the pandemic. During 2020, Houston received approximately \$31,208,000 in provider relief funds established under the CARES Act in the form of various grants. During 2021, the System received approximately \$4,271,000 of additional grant funds from the CARES Act. During the years ended December 31, 2021 and 2020, the System recognized grant revenue of \$27,337,000 and \$8,142,000, respectively which is included as a separate line within operating revenues in the combined statements of operations and changes in net assets. At December 31, 2021 and 2020, \$6,000 and \$3,871,000 was deferred and is included in other current liabilities in the accompanying combined balance sheets.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**NOTES TO THE COMBINED FINANCIAL STATEMENTS**  
**DECEMBER 31, 2021 AND 2020**

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**1. DESCRIPTION OF ORGANIZATION AND SUMMARY OF  
SIGNIFICANT ACCOUNTING POLICIES – CONTINUED**

**Medicare Accelerated Payment Program**

During 2020, the System received a \$10,000,000 advance payment from Medicare to help minimize the effects of revenue shortfalls due to COVID-19. The advanced payments are considered loans with repayment timelines and terms. Recipients may retain the accelerated payments for one year from the date of receipt before recoupment commences, which will be effectuated by a 25% offset of claims payments for 11 months, followed by 50% offset for the succeeding six months. The balance at December 31, 2020 is included in other current liabilities in the accompanying combined balance sheet. The advanced payments were fully recouped in 2021 and there was no balance due at December 31, 2021.

**Donor-Restricted Gifts**

Unconditional promises to give cash and other assets to the System are reported at fair value at the date the promise is received. Conditional promises to give and indications of intentions to give are reported at fair value at the date the gift is received. The gifts are reported as support without donor restrictions if they are received with donor stipulations that limit the use of the donated assets. 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 as unrestricted net assets and reported in the combined statements of operations and changes in net assets as net assets released from restrictions. Donor-restricted contributions whose restrictions are met within the same year as received are reported as contributions without donor restrictions in the accompanying combined financial statements.

**Risk Management**

The System is exposed to various risks of loss from torts; theft of, damage to, and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; medical malpractice; and employee health, dental, and accident benefits. Commercial insurance coverage is purchased for claims arising from such matters. Settled claims have not exceeded this commercial coverage in any of the three preceding years. The System is partially self-insured for employee health and professional liability as disclosed in Notes 13 and 14. The System is also partially self-insured for workers' compensation.

**Estimated Malpractice Costs and Other Self-Insurance Costs**

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

**Income Taxes**

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

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**NOTES TO THE COMBINED FINANCIAL STATEMENTS**  
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**1. DESCRIPTION OF ORGANIZATION AND SUMMARY OF  
SIGNIFICANT ACCOUNTING POLICIES – CONTINUED**

The System applies accounting policies that prescribe when to recognize and how to measure the combined financial statements 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 System 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 combined balance sheets for unrecognized income tax positions. Further, no interest or penalties have been accrued or charged to expense as of December 31, 2021 and 2020 or for the years then ended. The System's tax returns are subject to possible examination by 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.

Houston Health Ventures, Inc. is a for-profit corporation and a wholly owned subsidiary of the System. The System has not recorded a current or deferred tax provision, as this would not have a material effect on the combined financial statements.

**Fair Value Measurements**

The standards for fair value measurement of financial assets and liabilities define fair value, establish a framework for measuring fair value, and expand disclosures about fair value measurement. The guidance also emphasizes that fair value is based on a market-based measurement, not an entity-specific measurement, and sets out a fair value hierarchy with the highest priority being quoted prices in active markets. Fair value measurements are disclosed by level within the hierarchy.

Under the guidance for fair value measurement of nonfinancial assets and liabilities, measurements occur on a nonrecurring basis, and recognition at fair value occurs when nonfinancial assets and liabilities are deemed to be other-than-temporarily impaired. The System does not have any nonfinancial assets or nonfinancial liabilities at December 31, 2021 and 2020 that require disclosure by levels within the hierarchy.

**Subsequent Events**

The System has evaluated the impact of subsequent events through March 28, 2022, representing the date on which the combined financial statements were issued.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**NOTES TO THE COMBINED FINANCIAL STATEMENTS**  
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## **2. PATIENT SERVICE REVENUE**

The System has agreements with third-party payors that provide for payments to the System at amounts different from its established rates. The System does not believe there are any significant credit risks associated with receivables due from third-party payors.

A summary of the payment arrangements with major third-party payors follows:

### **Medicare**

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

The System is reimbursed for certain reimbursable items at a tentative rate with final settlement determined after submission of annual cost reports by the System and audits thereof by the Medicare Administrative Contractor (MAC). The System's classification of patients under the Medicare program and the appropriateness of their admissions are subject to an independent review by a peer review organization under contract with the System. The System's Medicare cost reports have been audited by the MAC through 2016 for Houston Medical Center and 2017 for Perry Hospital.

Revenue from the Medicare program accounted for approximately 41% and 43% of the System's net patient service revenue for 2021 and 2020, respectively. Laws and regulations governing the Medicare program are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term. Estimated reimbursement amounts are adjusted in subsequent periods as cost reports are prepared and filed and as final settlements are determined. The 2021 net patient service revenue increased approximately \$1,135,000 (increased \$1,027,000 for 2020) primarily due to changes in previously estimated settlements.

The System believes that it is in compliance with all applicable laws and regulations and is not aware of any pending or threatened investigations involving allegations of potential wrongdoing. However, there has been an increase in regulatory initiatives at the federal level including the initiation of the Recovery Audit Contractor (RAC) program. The RAC program was created to review Medicare claims for medical necessity and coding appropriateness. The RACs have the authority to pursue improper payments with a three year look back from the date the claim was paid. Compliance with such laws and regulations can be subject to future government review and interpretation, as well as significant regulatory action including fines, penalties, and exclusion from the Medicare program.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**NOTES TO THE COMBINED FINANCIAL STATEMENTS**  
**DECEMBER 31, 2021 AND 2020**

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**2. PATIENT SERVICE REVENUE – CONTINUED**

**Medicaid**

Inpatient acute care services rendered to Medicaid program beneficiaries are paid at a prospectively determined rate per discharge. These rates vary according to a patient classification system that is based on clinical, diagnostic, and other factors. Outpatient services rendered to the Medicaid program beneficiaries are reimbursed under a cost reimbursement methodology.

The System is reimbursed at a tentative rate with final settlement determined after submission of annual cost reports by the System and audits thereof by the Medicaid fiscal intermediary. The System's Medicaid cost reports have been audited by the Medicaid fiscal intermediary through 2018 for both Houston Medical Center and Perry Hospital.

Revenue from the Medicaid program accounted for approximately 11% of the System's net patient service revenue for 2021 and 2020. Laws and regulations governing the Medicaid program are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term. Estimated reimbursement amounts are adjusted in subsequent periods as cost reports are prepared and filed and as final settlements are determined.

The System also 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 System believes that it is in compliance with all applicable laws and regulations and is not aware of any pending or threatened investigations involving allegations of potential wrongdoing. However, there has been an increase in regulatory initiatives at the state level including the initiation of the Medicaid Integrity Contractor (MIC) program. This program was created to review Medicaid claims for medical necessity and coding appropriateness. Compliance with such laws and regulations can be subject to future government review and interpretation, as well as significant regulatory action including fines, penalties, and exclusion from the Medicaid program.

During 2010, the State of Georgia (the State) enacted legislation known as the Provider Payment Agreement Act (the Act) whereby hospitals in the State are assessed a "provider payment" in the amount of 1.45% of their net patient service revenue. The Act became effective July 1, 2010, the beginning of the State fiscal year 2011. The provider payments are due on a quarterly basis to the State's Department of Community Health. The payments are to be used for the sole purpose of obtaining federal financial participation for medical assistance payments to providers on behalf of Medicaid recipients. The provider payment results in an increase in payments for Medicaid services to hospitals of approximately 11.88%. Approximately \$3,255,000 and \$3,152,000 of provider payments relating to the Act are included in other expense in the accompanying combined statements of operations and changes in net assets for years 2021 and 2020, respectively.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
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**2. PATIENT SERVICE REVENUE – CONTINUED**

**Other Agreements**

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

The System recognizes patient service revenue associated with services provided to patients who have third-party coverage on the basis of contractual rates for the services rendered. For uninsured patients that do not qualify for charity care, the System recognizes revenue on the basis of its standard rates for services provided (or on the basis of discounted rates, if negotiated or provided by policy). On the basis of historical experience, a significant portion of the System's uninsured patients will be unable or unwilling to pay for the services provided. Therefore, the System records an implicit price concession equal to the estimated uncollectible portion of the charges related to uninsured patients in the period the services are provided.

The System's net patient revenues during the years ended December 31, 2021 and 2020 have been presented in the following table based on an allocation of the estimated transaction price with the patient between the primary patient classification and insurance coverage:

	<u>2021</u>	<u>2020</u>
Medicare	\$ 119,217,000	\$ 107,099,000
Medicaid	32,970,000	26,181,000
Other third-party payors	132,300,000	111,146,000
Self-pay	5,993,000	4,094,000
Total	<u>\$ 290,480,000</u>	<u>\$ 248,520,000</u>

**HOUSTON HEALTHCARE SYSTEM, INC.**  
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**2. PATIENT SERVICE REVENUE – CONTINUED**

**Patient Accounts Receivable**

Patient accounts receivable are recorded at net realizable value based on certain assumptions determined by each payor. For Medicare, Medicaid, and other third-party payors, the net realizable value is based on the estimated contractual reimbursement percentage, which is based on current contract prices or historical paid claims data by payor. For self-pay accounts receivable, which includes patients who are uninsured and the patient responsibility portion for patients with insurance, the net realizable value is determined using estimates of historical collection experience. These estimates are adjusted for estimated conversions of patient responsibility portions, expected recoveries and any anticipated changes in trends. Patient accounts receivable can be impacted by the effectiveness of the System's collection efforts. Additionally, significant changes in payor mix, business office operations, economic conditions or trends in federal and state governmental healthcare coverage could affect the net realizable value of accounts receivable. The System also continually reviews the net realizable value of accounts receivable by monitoring historical cash collections as a percentage of trailing net patient revenues, as well as by analyzing current period net revenue and admissions by payor classification, aged accounts receivable by payor, days revenue outstanding, and the composition of self-pay receivables between pure self-pay patients and the patient responsibility portion of third-party insured receivables.

**Charity Care**

In the ordinary course of business, the System renders services to patients who are financially unable to pay for hospital care. The System's policy is not to pursue collections for such amounts; therefore, the related charges for those patients who are financially unable to pay and otherwise do not qualify for reimbursement from a governmental program are not reported in net operating revenues, and are; therefore, classified as charity care. The System determines amounts that qualify for charity care primarily based on the patient's household income relative to the federal poverty level guidelines, as established by the federal government. These charity care services are estimated to be \$39,541,000 and \$44,379,000 for the years ended December 31, 2021 and 2020, respectively, representing the value (at the System's standard charges) of these charity care services that are excluded from net operating revenues. The estimated cost incurred by the System to provide these charity care services to patients who are unable to pay was approximately \$13,330,000 and \$14,153,000 for the years ended December 31, 2021 and 2020, respectively. The estimated cost of these charity care services was determined using a ratio of cost to gross charges and applying that ratio to the gross charges associated with providing care to charity patients for the year.

**HOUSTON HEALTHCARE SYSTEM, INC.  
NOTES TO THE COMBINED FINANCIAL STATEMENTS  
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**3. UNCOMPENSATED SERVICES**

The System was compensated for services at amounts less than its established rates. The following is a summary of uncompensated services and a reconciliation of gross patient charges to net patient service revenue for 2021 and 2020:

	<u>2021</u>	<u>2020</u>
Gross patient charges	\$ 979,807,000	\$ 860,547,000
Uncompensated services:		
Charity and indigent care	39,541,000	44,379,000
Medicare	300,159,000	269,724,000
Medicaid	95,963,000	85,330,000
Other allowances	<u>253,664,000</u>	<u>212,594,000</u>
Total uncompensated care	<u>689,327,000</u>	<u>612,027,000</u>
	<u>\$ 290,480,000</u>	<u>\$ 248,520,000</u>

**HOUSTON HEALTHCARE SYSTEM, INC.**  
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**4. INVESTMENTS**

**Assets Limited as to Use**

The composition of assets limited as to use at December 31, 2021 and 2020 is set forth in the following table. Investments are stated at fair value.

	<u>2021</u>	<u>2020</u>
Internally designated for capital acquisition and other:		
Cash and cash equivalents	\$ 7,676,000	\$ 15,246,000
Mutual funds – fixed income	13,659,000	43,929,000
Mutual funds – equities	16,518,000	17,979,000
Mutual funds – real estate	4,698,000	6,588,000
Government agency obligations	28,836,000	44,515,000
U.S. Corporate bonds	38,807,000	30,827,000
U.S. Equities	36,173,000	48,388,000
International assets – corporate obligations	6,265,000	6,341,000
International assets – government agency obligations	605,000	638,000
International assets – equities	17,298,000	25,401,000
	<u>170,535,000</u>	<u>239,852,000</u>
Held by trustee under indenture agreement:		
Cash and cash equivalents	-	2,360,000
	<u>-</u>	<u>2,360,000</u>
	<u>\$ 170,535,000</u>	<u>\$ 242,212,000</u>

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

**HOUSTON HEALTHCARE SYSTEM, INC.  
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**5. CONCENTRATIONS OF CREDIT RISK**

The System grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of receivables from patients and third-party payors at December 31, 2021 and 2020 is as follows:

	<u>2021</u>	<u>2020</u>
Medicare	32%	30%
Medicaid	7%	6%
Blue Cross	12%	15%
Other third-party payors	23%	21%
Patients	26%	28%
	<u>100%</u>	<u>100%</u>

At December 31, 2021, the System had deposits at major financial institutions which exceeded the Federal Deposit Insurance Corporation limits. Management believes the credit risks related to these deposits are minimal.

**6. PROPERTY AND EQUIPMENT**

A summary of property and equipment at December 31, 2021 and 2020 is as follows:

	<u>2021</u>	<u>2020</u>
Land	\$ 14,910,000	\$ 14,910,000
Land improvements	3,850,000	3,827,000
Buildings and improvements	214,093,000	210,115,000
Equipment	117,384,000	110,969,000
	350,237,000	339,821,000
Less accumulated depreciation	<u>218,587,000</u>	<u>208,286,000</u>
	131,650,000	131,535,000
Construction in progress	<u>3,166,000</u>	<u>3,779,000</u>
Property and equipment, net	<u>\$ 134,816,000</u>	<u>\$ 135,314,000</u>

**HOUSTON HEALTHCARE SYSTEM, INC.  
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**6. PROPERTY AND EQUIPMENT – CONTINUED**

Depreciation expense for the years ended December 31, 2021 and 2020 amounted to approximately \$10,814,000 and \$10,912,000, respectively.

Contracts of approximately \$4,393,000 exist for the purchase of various equipment and renovations to facilities. At December 31, 2021, the remaining commitment on these contracts approximated \$1,232,000.

**7. LINE OF CREDIT**

On April 3, 2020, the System entered into a revolving line of credit agreement with a financial institution to advance credit with a maximum revolving borrowing line of \$15,000,000. The line of credit is secured by first priority interest in certain reserve accounts and matures April 3, 2022. The interest rate is 1% less than Prime Rate (effective rate of 2.25% at December 31, 2021). At December 31, 2020 and 2021, the outstanding balance was \$28,000 and is included in other current liabilities in the accompanying combined balance sheets. Subsequent to yearend, the agreement was amended to extend the maturity date to April 3, 2024.

**8. LONG-TERM DEBT**

A summary of long-term debt at December 31, 2021 and 2020 is as follows:

	<u>2021</u>	<u>2020</u>
Revenue certificates – Series 2016A, payable in annual installments ranging from \$1,360,000 on October 1, 2017 to \$1,420,000 on October 1, 2031, with an interest rate of 5% paid semi-annually secured by gross revenues	\$ -	\$ 12,380,000
Revenue certificates – Series 2016B, payable in annual installments ranging from \$2,900,000 on October 1, 2018 to \$5,465,000 on October 1, 2031, with an interest rate of 5% paid semi-annually secured by gross revenues	-	<u>47,680,000</u>
Total revenue certificates	-	60,060,000
Less current maturities	-	4,225,000
Plus net premiums, discounts, and deferred issue costs	-	<u>4,025,000</u>
Total long-term debt	<u>\$ -</u>	<u>\$ 59,860,000</u>

Discounts and premiums on long-term debt are amortized using the straight-line method over the life of the related bonds, which approximates the effective interest method.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
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**8. LONG-TERM DEBT – CONTINUED**

With the reorganization plan implemented by the Authority on January 1, 2009, Houston Hospitals, Inc. (Hospitals), along with the Authority, entered into a master trust indenture (MTI) with a commercial bank as the trustee in which Hospitals pledged its gross revenues to the payment of all obligations issued from time-to-time under the terms of the MTI. Such obligations take the form of tax-exempt issuances of the Authority, the proceeds of which are loaned to Hospitals as conduit obligations under related loan agreements. Such conduit obligations issued under the MTI are secured by a lien on the gross revenues of the members of the Obligated Group, which have joint and severable liability for such obligations. The Obligated Group is currently composed of the Authority, Houston Healthcare System, Inc., Houston Hospitals, Inc., Houston Healthcare Properties, Inc., Houston Healthcare EMS, Inc., Houston Primary Care Physicians, LLC, and Houston Physician Specialists, LLC. The MTI provides the terms for the addition and removal of members of the Obligated Group.

On November 1, 2016, the Authority issued \$16,115,000 of Series 2016A Revenue Anticipation Certificates (the Series 2016A Certificates). In connection with the issuance of the Series 2016A Certificates, the Authority loaned the proceeds of the Series 2016A Certificates to the System to refund the previously issued Series 2013 Revenue Anticipation Certificates and to pay costs of issuance of the Series 2016A Certificates.

On November 1, 2016, the Authority issued \$56,820,000 of Series 2016B Revenue Anticipation Certificates (the Series 2016B Certificates). In connection with the issuance of the Series 2016B Certificates, the Authority loaned the proceeds of the Series 2016B Certificates to the System for the purpose of (1) redeeming the Authority's Revenue Anticipation Certificates Series 2007 maturing in years 2018 through and including 2042 on October 1, 2017, (2) paying interest on the Series 2016B Certificates up to October 1, 2017, and (3) paying the costs of issuance of the Series 2016B Certificates.

On June 23, 2021, the System transferred \$67,698,000 into an irrevocable trust to be used for the redemption of the 2016A and 2016B Certificates. The funds will be maintained in escrow for the purpose of paying the principal and interest payments as they are due on the Series 2016A and Series 2016B Certificates up to and including April 1, 2024. On April 1, 2024 the 2016A and 2016B Certificates will be retired at a redemption price equal to 100 percent of the principal and interest due at that time. The funds maintained in escrow are irrevocable and exceed the total obligations of the 2016A and 2016B certificates, as such the escrow funds and obligation have been derecognized from the balance sheet. At December 31, 2021, the escrow accounts had a combined balance of \$62,012,000 and the outstanding obligations of the 2016A and 2016B Certificates totaled \$55,835,000. The refunding of the bonds resulted in a loss of approximately \$3,298,000 for the year ended December 31, 2021.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
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**9. NET ASSETS**

At December 31, 2021 and 2020, net assets without donor-imposed restrictions were as follows:

	<u>2021</u>	<u>2020</u>
Without donor-imposed restrictions:		
Internally designated for capital acquisition and other	\$ 170,535,000	\$ 239,852,000
Held by trustee under indenture agreement	-	2,360,000
Undesignated	<u>151,218,000</u>	<u>65,231,000</u>
Total net assets without donor-imposed restrictions	<u>\$ 321,753,000</u>	<u>\$ 307,443,000</u>

**10. LIQUIDITY**

The following reflects the System's financial assets at December 31, 2021 and 2020, reduced by amounts not available for general use within one year of the combined balance sheets dates because of contractual or internal designations. Amounts not available include amounts set aside by the Board for future capital acquisition and other reserves that could be drawn upon if the Board approves the action.

	<u>2021</u>	<u>2020</u>
Cash and cash equivalents	\$ 8,883,000	\$ 13,821,000
Patients accounts receivable, net	28,661,000	24,748,000
Estimated third-party payor receivable	1,887,000	1,163,000
Insurance recoveries – current portion	<u>3,039,000</u>	<u>1,738,000</u>
	<u>\$ 42,470,000</u>	<u>\$ 41,470,000</u>

As part of the System's liquidity management, it has a policy to structure its financial assets to be available as its general expenditures, liabilities, and other obligations come due.

**11. PENSION PLAN**

**Plan Description**

The System contributes to a defined benefit pension plan (the Plan) managed by a trustee. All full-time and part-time employees who regularly worked 32 or more hours per week that were hired prior to May 1, 2009, age 21 or older and with at least one year of service, are eligible to participate in the Plan. Plan participants under the age of 45 as of January 1, 2011 no longer accumulate benefits. System employees who are vested are entitled to an annual benefit payable monthly for life, in an amount equal to 1% of final average earnings up to covered compensation, plus 1.55% of final average earnings in excess of covered compensation, times credited service up to 30 years. Participants are 100% vested after five years of employment. Participants are fully vested at age 65. The System'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.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
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**11. PENSION PLAN – CONTINUED**

The measurement date was December 31, 2021 and 2020.

The following table sets forth the Plan's funded status and amounts recognized in the combined financial statements at December 31, 2021 and 2020:

	<u>2021</u>	<u>2020</u>
Plan assets at fair value at December 31	\$ 141,602,000	\$ 135,031,000
Projected benefit obligation at December 31	<u>131,529,000</u>	<u>139,986,000</u>
Funded status	<u>\$ 10,073,000</u>	<u>\$ (4,955,000)</u>
Amounts recognized in the combined balance sheets consist of:		
Noncurrent assets (liabilities)	<u>\$ 10,073,000</u>	<u>\$ (4,955,000)</u>
Amounts recognized in net assets without donor-imposed restrictions:		
Net actuarial loss	<u>\$ 15,037,000</u>	<u>\$ 26,385,000</u>

The following table sets forth the components of net periodic pension cost and other amounts recognized in net assets without donor-imposed restrictions for the years ended December 31, 2021 and 2020:

	<u>2021</u>	<u>2020</u>
Service cost	\$ 789,000	\$ 982,000
Interest cost	2,700,000	3,901,000
Expected return on Plan assets	(6,853,000)	(8,070,000)
Amortization of net actuarial loss	497,000	415,000
Settlement/curtailment expense	<u>937,000</u>	<u>1,143,000</u>
Net periodic cost	<u>(1,930,000)</u>	<u>(1,629,000)</u>
Other changes in Plan assets and benefit obligations recognized in net assets without donor imposed restrictions:		
Net actuarial (gain) loss	(9,914,000)	1,735,000
Amortization of net actuarial loss	<u>(1,434,000)</u>	<u>(1,558,000)</u>
Total recognized in net assets without donor-imposed restrictions	<u>(11,348,000)</u>	<u>177,000</u>
Total recognized in net periodic benefit cost and net assets without donor imposed restrictions	<u>\$ (13,278,000)</u>	<u>\$ (1,452,000)</u>

**HOUSTON HEALTHCARE SYSTEM, INC.**  
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**11. PENSION PLAN – CONTINUED**

The components of net periodic cost above other than service cost are included in nonoperating revenues (expenses) in the combined statements of operations and changes in net assets.

The System'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.

	<u>2021</u>	<u>2020</u>
Weighted-average assumptions used to determine pension benefit obligations:		
Discount rate	2.97%	2.66%
Rate of increase in future compensation levels	2.00%	2.00%
Weighted-average assumptions used to determine net period benefit cost:		
Discount rate	2.67%	3.33%
Expected long-term return on Plan assets	3.80%	6.50%
Rate of increase in future compensation levels	2.00%	2.00%

The change in projected benefit obligation for the Plan for the years ended December 31, 2021 and 2020 included the following components:

	<u>2021</u>	<u>2020</u>
Projected benefit obligation, beginning of year	\$ 139,986,000	\$ 135,463,000
Service cost	790,000	982,000
Interest cost	2,700,000	3,901,000
Actuarial loss	(2,317,000)	10,909,000
Benefits paid	(9,630,000)	(10,334,000)
Liability gain due to curtailment	-	(935,000)
Projected benefit obligation, end of year	<u>\$ 131,529,000</u>	<u>\$ 139,986,000</u>
Accumulated benefit obligation	<u>\$ 138,453,000</u>	<u>\$ 133,061,000</u>

During 2020, the System offered a "Special 2020 In-Service Distribution Window Program" to a select group of active participants. This group had the one-time opportunity to receive their accrued pension benefit in the form of a lump sum or annuity without terminating employment. The lump sum was calculated based on the Internal Revenue Service (IRS) applicable interest rates and was paid in December 2020 and January 2021. The December 2020 lump sums payments of approximately \$5,801,000 exceeded the 2020 service cost plus interest cost, whereby settlement accounting was triggered and \$1,143,000 of amounts previously recognized as other changes in net assets were required to be recognized in 2020 pension expense. The January 2021 lump sums payments of approximately \$4,733,000 exceeded the 2021 service cost plus interest cost, whereby settlement accounting was triggered and \$937,000 of amounts previously recognized as other changes in net assets were required to be recognized in 2021 pension expense. During 2020, there was a curtailment and the projected benefit obligation decreased \$935,000 for the active participants who accepted the offer of the program.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
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**11. PENSION PLAN – CONTINUED**

The change in fair value of Plan assets for the years ended December 31, 2021 and 2020 included the following components:

	<u>2021</u>	<u>2020</u>
Plan assets at fair value, beginning of year	\$ 135,031,000	\$ 126,055,000
Actual return on assets	14,451,000	16,310,000
Employer contributions	1,750,000	3,000,000
Benefits paid	<u>(9,630,000)</u>	<u>(10,334,000)</u>
Plan assets at fair value, end of year	<u>\$ 141,602,000</u>	<u>\$ 135,031,000</u>

**Plan Assets**

The composition of Plan assets at December 31, 2021 and 2020 is as follows:

	<u>2021</u>	<u>%</u>	<u>2020</u>	<u>%</u>
Cash and cash equivalents	\$ 1,445,000	1%	\$ 6,644,000	5%
Mutual funds – fixed income	118,697,000	84%	16,099,000	12%
Mutual funds – equities	7,698,000	5%	29,950,000	22%
Mutual funds – real estate	2,944,000	2%	10,016,000	7%
Government agency obligations	-	0%	12,694,000	9%
U.S. Corporate bonds	-	0%	10,537,000	8%
U.S. Equities	8,142,000	6%	35,476,000	26%
International assets – corporate obligations	-	0%	1,590,000	1%
International assets – equities	<u>2,676,000</u>	<u>2%</u>	<u>12,025,000</u>	<u>9%</u>
	<u>\$ 141,602,000</u>	<u>100%</u>	<u>\$ 135,031,000</u>	<u>100%</u>

The System'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. The target allocation for the Plan's investments was 45% U.S. equity, 10% international equity, 35% fixed income, and 10% other securities. Beginning September 2021, the Plan rebalanced the asset allocations to adopt a liability-hedging portfolio that has a target allocation of 75% - 95% liability-hedging and 5% - 25% return seeking.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
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**11. PENSION PLAN – CONTINUED**

Pension assets are invested in equities, fixed income securities, and cash and cash equivalents. The allocation between different investment vehicles is determined by the System’s investment committee, 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 System 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 System attempts to mitigate investment risk by rebalancing between investment classes as the System’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.

The fair values of the System’s Plan assets at December 31, 2021 and 2020, by asset category (see Note 16) are as follows:

		Fair Value Measurements		
		Quoted Prices in Active Markets for Identical Assets Level 1	Significant Other Observable Inputs Level 2	Significant Unobservable Inputs Level 3
<b>December 31, 2021</b>	<b>Fair Value</b>			
Cash and cash equivalents	\$ 1,445,000	\$ 1,445,000	\$ -	\$ -
Mutual funds – fixed income	118,697,000	118,697,000	-	-
Mutual funds – equities	7,698,000	7,698,000	-	-
Mutual funds – real estate	2,944,000	2,944,000	-	-
Government agency obligations	-	-	-	-
U.S. Corporate bonds	-	-	-	-
U.S. Equities	8,142,000	8,142,000	-	-
International assets – corporate obligations	34,000	-	34,000	-
International assets – equities	2,642,000	2,642,000	-	-
<b>Total</b>	<b>\$ 141,602,000</b>	<b>\$ 141,568,000</b>	<b>\$ 34,000</b>	<b>\$ -</b>

**HOUSTON HEALTHCARE SYSTEM, INC.  
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**11. PENSION PLAN – CONTINUED**

<b>December 31, 2020</b>	<b>Fair Value</b>	<b>Fair Value Measurements</b>		
		<b>Quoted Prices in Active Markets for Identical Assets Level 1</b>	<b>Significant Other Observable Inputs Level 2</b>	<b>Significant Unobservable Inputs Level 3</b>
Cash and cash equivalents	\$ 6,644,000	\$ 6,644,000	\$ -	\$ -
Mutual funds – fixed income	16,099,000	16,099,000	-	-
Mutual funds – equities	29,950,000	29,950,000	-	-
Mutual funds – real estate	10,016,000	10,016,000	-	-
Government agency obligations	12,694,000	-	12,694,000	-
U.S. Corporate bonds	10,537,000	-	10,537,000	-
U.S. Equities	35,476,000	35,476,000	-	-
International assets – corporate obligations	1,590,000	-	1,590,000	-
International assets – equities	12,025,000	12,025,000	-	-
<b>Total</b>	<b>\$ 135,031,000</b>	<b>\$ 110,210,000</b>	<b>\$ 24,821,000</b>	<b>\$ -</b>

See Note 16 for the methods and assumptions used by the System in estimating the fair value of the above Plan assets.

**Estimated Contributions**

The System does not plan to contribute to the Plan in 2022.

**Estimated Future Benefit Payments**

The following benefit payments, which reflect expected future service and decrements as appropriate, are expected to be paid as follows:

<b>For the Years Ending December 31,</b>	<b>Pension Benefits</b>
2022	\$ 5,743,000
2023	6,011,000
2024	6,270,000
2025	6,483,000
2026	6,752,000
2026 – 2030	36,155,000

The expected benefits to be paid are based on the same assumptions used to measure the System's benefit obligation at December 31, 2021.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**NOTES TO THE COMBINED FINANCIAL STATEMENTS**  
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**12. DEFINED CONTRIBUTION PLAN**

The System has a defined contribution retirement plan (the Retirement Plan) covering substantially all employees. The Retirement Plan is a tax-deferred annuity plan under Section 403(b) of the IRC which allows employee contributions upon employment and at least 1,000 hours of work and allows employer contributions upon attainment of the age of 21 and at least one year of service. Participants may contribute up to 20% of their annual compensation up to a maximum dollar limitation. Employer contributions are made at a matching level of 50% of the participants' annual contribution to the Retirement Plan, up to a maximum of 4% of the employee's annual compensation. The System made contributions to the Retirement Plan of approximately \$1,248,000 and \$2,511,000 for the years ended December 31, 2021 and 2020, respectively.

**13. EMPLOYEE HEALTH PLAN**

The System has a self-insurance program under which a third-party administrator processes and pays claims. The System reimburses the third-party administrator for claims incurred and paid and has purchased stop-loss insurance coverage for claims in excess of \$650,000 for each individual employee. Under this self-insurance program, approximately \$17,120,000 and \$18,525,000 were paid or accrued during the years ended December 31, 2021 and 2020, respectively.

**14. PROFESSIONAL LIABILITY CLAIMS**

The System is covered by a claims-made general and professional liability insurance policy with excess coverage not-to-exceed \$35 million. Self-insured retention related to this policy in 2021 was \$2 million per occurrence and \$8 million in aggregate (\$1.5 million per occurrence and \$7.5 million in aggregate in 2020). The System uses a third-party administrator to review and analyze incidents that may result in a claim against the System. In conjunction with the third-party administrator, incidents are assigned reserve amounts for the ultimate liability that may result from an asserted claim. The System also uses independent actuaries to estimate the ultimate costs, if any, of the settlement of such claims. Long-term accrued professional claims are included in self-insurance reserves and the current portion is included in other current liabilities in the combined balance sheets, and in management's opinion, provide an adequate reserve for loss contingencies.

Various claims and assertions have been made against the System 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.

Obligations covered by reinsurance contracts are included in the reserves for professional liability risks, as the System remains liable to the extent the reinsurers do not meet their obligations under the reinsurance contracts. The current amount receivable under the reinsurance contracts include \$2,824,000 and \$1,602,000 at December 31, 2021 and 2020, respectively, recorded in insurance recoveries – current portion and the long-term portion of \$8,024,000 and \$4,591,000, respectively, is recorded in insurance recoveries.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**NOTES TO THE COMBINED FINANCIAL STATEMENTS**  
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**15. FUNCTIONAL EXPENSES**

The System provides general health care services to residents within its geographic location. The following tables present expenses by both their nature and function for the years ended December 31:

	2021			2020		
	Health Care Services	General and Administrative	Total	Health Care Services	General and Administrative	Total
Salaries and benefits	\$ 162,324,000	\$ 14,903,000	\$ 177,227,000	\$ 142,026,000	\$ 14,024,000	\$ 156,050,000
Supplies and drugs	50,002,000	309,000	50,311,000	44,008,000	38,000	44,046,000
Other expenses	66,078,000	11,712,000	77,790,000	58,773,000	13,295,000	72,068,000
Depreciation and amortization	8,800,000	2,026,000	10,826,000	9,030,000	1,996,000	11,026,000
Interest expense	-	1,126,000	1,126,000	1,762,000	685,000	2,447,000
Total operating expenses	<u>\$ 287,204,000</u>	<u>\$ 30,076,000</u>	<u>\$ 317,280,000</u>	<u>\$ 255,599,000</u>	<u>\$ 30,038,000</u>	<u>\$ 285,637,000</u>

The combined financial statements report certain categories of expenses that are attributable to healthcare services as well as general and administrative functions. Therefore, these expenses require allocation on a reasonable basis that is consistently applied. The expenses that are allocated include utilities, depreciation and amortization, and interest expense, all of which are allocated based on a square footage basis, as well as certain employee benefits, which are allocated based on salaries.

**16. FAIR VALUE OF FINANCIAL INSTRUMENTS**

The System's assets and liabilities recorded at fair value or for which fair value is required to be disclosed have been categorized based upon a fair value hierarchy in accordance with accounting standards which require that assets and liabilities carried at fair value be classified and disclosed in one of the following three categories:

- Level 1 – Observable quoted market prices in active markets for identical assets or liabilities.
- Level 2 – Observable inputs other than Level 1, such as quoted prices in active markets for similar assets or liabilities, quoted prices for identical or similar assets or liabilities in markets that are not active, or inputs other than quoted prices that are observable for the asset or liability.
- Level 3 – Unobservable inputs for the asset or liability that are significant to the fair value of the assets or liabilities.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**NOTES TO THE COMBINED FINANCIAL STATEMENTS**  
**DECEMBER 31, 2021 AND 2020**

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**16. FAIR VALUE OF FINANCIAL INSTRUMENTS – CONTINUED**

The following methods and assumptions were used by the System 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 combined balance sheets approximates its fair value, due to the short-term nature of these instruments.
- *Assets limited as to use:* Fair values, which are the amounts reported in the combined balance sheets, are based on quoted market prices, if available, or estimated using quoted market prices for similar securities.
- *Long-term debt:* The fair value of the System's fixed rate long-term debt is estimated based on quoted market value and would be classified as Level 1 in the fair value hierarchy.

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. Valuation techniques utilized to determine fair value are consistently applied. All assets have been valued using a market approach.

- *Government agency obligations:* Level 2 assets are valued using pricing models maximizing the use of observable inputs for similar securities.
- *U.S. Corporate bonds:* Level 2 assets are valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing values on yields currently available on comparable securities of issuers with similar credit ratings. The corporate bonds contain credit ratings of A3 to AAA.

The carrying amount and estimated fair values of the System's long-term debt at December 31, 2020 was approximately \$64,085,000 and \$64,250,000, respectively.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**NOTES TO THE COMBINED FINANCIAL STATEMENTS**  
**DECEMBER 31, 2021 AND 2020**

**16. FAIR VALUE OF FINANCIAL INSTRUMENTS – CONTINUED**

The estimated fair values of the System's investments at December 31, 2021 and 2020 and the level within the fair value hierarchy are as follows:

<b>December 31, 2021</b>	<b>Fair Value</b>	<b>Fair Value Measurements</b>		
		<b>Quoted Prices in Active Markets for Identical Assets Level 1</b>	<b>Significant Other Observable Inputs Level 2</b>	<b>Significant Unobservable Inputs Level 3</b>
Cash and cash equivalents	\$ 7,676,000	\$ 7,676,000	\$ -	\$ -
Mutual funds – fixed income	13,659,000	13,659,000	-	-
Mutual funds – equities	16,518,000	16,518,000	-	-
Mutual funds – real estate	4,698,000	4,698,000	-	-
Government agency obligations	28,836,000	-	28,836,000	-
U.S. Corporate bonds	38,807,000	-	38,807,000	-
U.S. Equities	36,173,000	36,173,000	-	-
International assets – corporate obligations	6,265,000	-	6,265,000	-
International assets – Government agency obligations	605,000	-	605,000	-
International assets – equities	17,298,000	17,298,000	-	-
<b>Total</b>	<b>\$ 170,535,000</b>	<b>\$ 96,022,000</b>	<b>\$ 74,513,000</b>	<b>\$ -</b>

<b>December 31, 2020</b>	<b>Fair Value</b>	<b>Fair Value Measurements</b>		
		<b>Quoted Prices in Active Markets for Identical Assets Level 1</b>	<b>Significant Other Observable Inputs Level 2</b>	<b>Significant Unobservable Inputs Level 3</b>
Cash and cash equivalents	\$ 17,606,000	\$ 17,606,000	\$ -	\$ -
Mutual funds – fixed income	43,929,000	43,929,000	-	-
Mutual funds – equities	17,979,000	17,979,000	-	-
Mutual funds – real estate	6,588,000	6,588,000	-	-
Government agency obligations	44,515,000	-	44,515,000	-
U.S. Corporate bonds	30,827,000	-	30,827,000	-
U.S. Equities	48,388,000	48,388,000	-	-
International assets – corporate obligations	6,341,000	-	6,341,000	-
International assets – Government agency obligations	638,000	-	638,000	-
International assets – equities	25,401,000	25,401,000	-	-
<b>Total</b>	<b>\$ 242,212,000</b>	<b>\$ 159,891,000</b>	<b>\$ 82,321,000</b>	<b>\$ -</b>

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**NOTES TO THE COMBINED FINANCIAL STATEMENTS**  
**DECEMBER 31, 2021 AND 2020**

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**17. MEDICAID UPPER PAYMENT LIMIT**

The Medicare, Medicaid, and State Children's Health Insurance Program (SCHIP) Benefits Improvement and Protection Act of 2000 (BIPA) provides for enhanced payments to Medicaid providers under the Upper Payment Limit (UPL) methodology. Subsequent to the implementation of the UPL methodology, federal budget concerns have led to reconsideration of the BIPA legislation with possible elimination or reduction of enhanced Medicaid payments. Legislation has been enacted to reduce the level of UPL payments. These reductions are anticipated to remain in effect in future periods. Net patient service revenue includes enhanced payments for December 31, 2021 and 2020 of approximately \$5,054,000 and \$947,000, respectively.

**18. INDIGENT CARE TRUST FUND**

The System participates in the Georgia Indigent Care Trust Fund (ICTF) Program. The System receives ICTF payments for treating a disproportionate number of Medicaid and other indigent patients. ICTF payments are based on the System's estimated uncompensated cost of services to Medicaid and uninsured patients. The amount of ICTF payments recognized in net patient revenue was approximately \$3,863,000 and \$4,206,000 for the years ended December 31, 2021 and 2020, respectively.

**19. COMMITMENTS AND CONTINGENCIES**

**Compliance Plan**

The healthcare industry has recently been subjected to increased scrutiny from governmental agencies at both the national and state level with respect to compliance with regulations. Areas of noncompliance identified at the national level include Medicare and Medicaid, Internal Revenue Service (IRS), and other regulations governing the healthcare industry. The System has implemented a compliance plan focusing on such issues. There can be no assurance that the System will not be subjected to future investigations with accompanying monetary damages.

**Healthcare Reform**

In recent years, there has been increasing pressure on Congress and some state legislatures to control and reduce the cost of healthcare on the national or at the state level. In 2010, legislation was enacted which included cost controls on hospitals, insurance market reforms, delivery system reforms and various individual and business mandates among other provisions. The costs of certain provisions will be funded in part by reductions in payments by government programs, including Medicare and Medicaid. There can be no assurance that these changes will not adversely affect the System.

**Litigation**

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

## **SUPPLEMENTARY INFORMATION**

**HOUSTON HEALTHCARE SYSTEM, INC.  
COMBINING BALANCE SHEET  
DECEMBER 31, 2021**

<b>ASSETS</b>	<b>Houston Medical Center</b>	<b>Perry Hospital</b>	<b>Houston Healthcare EMS, Inc.</b>	<b>Houston Healthcare System, Inc.</b>	<b>Houston Healthcare Ventures, Inc.</b>	<b>Houston Healthcare Properties, Inc.</b>	<b>Houston Primary Care Physicians, LLC</b>	<b>Houston Physician Specialties, LLC</b>	<b>Eliminations</b>	<b>Total</b>
<b>CURRENT ASSETS</b>										
Cash and cash equivalents	\$ 5,817,000	\$ 1,000	\$ 110,000	\$ 5,000	\$ 2,759,000	\$ 69,000	\$ 71,000	\$ 51,000	\$ -	\$ 8,883,000
Assets limited as to use – current portion	696,000	-	-	-	-	-	-	-	-	696,000
Patient accounts receivable, net	25,377,000	3,100,000	183,000	-	-	-	1,000	-	-	28,661,000
Estimated third-party payor receivable	1,637,000	250,000	-	-	-	-	-	-	-	1,887,000
Insurance recoveries – current portion	3,039,000	-	-	-	-	-	-	-	-	3,039,000
Supplies, at lower of cost (first-in, first-out) or market and other assets	8,623,000	563,000	-	-	-	-	-	-	-	9,186,000
Total current assets	45,189,000	3,914,000	293,000	5,000	2,759,000	69,000	72,000	51,000	-	52,352,000
<b>ASSETS LIMITED AS TO USE</b>										
Internally designated for capital acquisition and other	170,535,000	-	-	-	-	-	-	-	-	170,535,000
	170,535,000	-	-	-	-	-	-	-	-	170,535,000
Less amounts required to meet current obligations	696,000	-	-	-	-	-	-	-	-	696,000
Total assets limited as to use	169,839,000	-	-	-	-	-	-	-	-	169,839,000
<b>PROPERTY AND EQUIPMENT, NET</b>	96,683,000	8,848,000	633,000	-	-	28,061,000	56,000	535,000	-	134,816,000
<b>PENSION ASSET</b>	10,073,000	-	-	-	-	-	-	-	-	10,073,000
<b>OTHER ASSETS</b>										
Long-term investments and other	1,159,000	-	-	2,112,000	652,000	-	-	-	-	3,923,000
Insurance recoveries	8,619,000	-	-	-	-	-	-	-	-	8,619,000
Total other assets	9,778,000	-	-	2,112,000	652,000	-	-	-	-	12,542,000
<b>TOTAL ASSETS</b>	<b>\$ 331,562,000</b>	<b>\$ 12,762,000</b>	<b>\$ 926,000</b>	<b>\$ 2,117,000</b>	<b>\$ 3,411,000</b>	<b>\$ 28,130,000</b>	<b>\$ 128,000</b>	<b>\$ 586,000</b>	<b>\$ -</b>	<b>\$ 379,622,000</b>

See independent auditors' report.

**HOUSTON HEALTHCARE SYSTEM, INC.  
COMBINING BALANCE SHEET – CONTINUED  
DECEMBER 31, 2021**

LIABILITIES AND NET ASSETS	Houston Medical Center	Perry Hospital	Houston Healthcare EMS, Inc.	Houston Healthcare System, Inc.	Houston Healthcare Ventures, Inc.	Houston Healthcare Properties, Inc.	Houston Primary Care Physicians, LLC	Houston Physician Specialties, LLC	Eliminations	Total
<b>CURRENT LIABILITIES</b>										
Accounts payable and accrued expenses	\$ 11,829,000	\$ 1,000	\$ -	\$ -	\$ -	\$ 62,000	\$ 17,000	\$ (11,000)	\$ -	\$ 11,898,000
Accrued compensation and benefits	16,701,000	1,253,000	322,000	-	-	31,000	640,000	552,000	-	19,499,000
Estimated third-party payor settlements	2,284,000	1,783,000	-	-	-	-	-	-	-	4,067,000
Other current liabilities	5,388,000	-	-	-	-	-	6,000	-	-	5,394,000
Total current liabilities	<u>36,202,000</u>	<u>3,037,000</u>	<u>322,000</u>	<u>-</u>	<u>-</u>	<u>93,000</u>	<u>663,000</u>	<u>541,000</u>	<u>-</u>	<u>40,858,000</u>
<b>SELF-INSURANCE RESERVES</b>	17,011,000	-	-	-	-	-	-	-	-	17,011,000
<b>TOTAL LIABILITIES</b>	<u>53,213,000</u>	<u>3,037,000</u>	<u>322,000</u>	<u>-</u>	<u>-</u>	<u>93,000</u>	<u>663,000</u>	<u>541,000</u>	<u>-</u>	<u>57,869,000</u>
<b>NET ASSETS</b>										
Without donor-imposed restrictions	278,349,000	9,725,000	604,000	2,117,000	3,411,000	28,037,000	(535,000)	45,000	-	321,753,000
Total net assets	<u>278,349,000</u>	<u>9,725,000</u>	<u>604,000</u>	<u>2,117,000</u>	<u>3,411,000</u>	<u>28,037,000</u>	<u>(535,000)</u>	<u>45,000</u>	<u>-</u>	<u>321,753,000</u>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<u>\$ 331,562,000</u>	<u>\$ 12,762,000</u>	<u>\$ 926,000</u>	<u>\$ 2,117,000</u>	<u>\$ 3,411,000</u>	<u>\$ 28,130,000</u>	<u>\$ 128,000</u>	<u>\$ 586,000</u>	<u>\$ -</u>	<u>\$ 379,622,000</u>

See independent auditors' report.

**HOUSTON HEALTHCARE SYSTEM, INC.  
COMBINING BALANCE SHEET  
DECEMBER 31, 2020**

<b>ASSETS</b>	<b>Houston Medical Center</b>	<b>Perry Hospital</b>	<b>Houston Healthcare EMS, Inc.</b>	<b>Houston Healthcare System, Inc.</b>	<b>Houston Healthcare Ventures, Inc.</b>	<b>Houston Healthcare Properties, Inc.</b>	<b>Houston Primary Care Physicians, LLC</b>	<b>Houston Physician Specialties, LLC</b>	<b>Eliminations</b>	<b>Total</b>
<b>CURRENT ASSETS</b>										
Cash and cash equivalents	\$ 11,290,000	\$ 1,000	\$ 68,000	\$ 4,000	\$ 1,945,000	\$ 302,000	\$ 26,000	\$ 185,000	\$ -	\$ 13,821,000
Assets limited as to use – current portion	912,000	-	-	-	-	-	-	-	-	912,000
Patient accounts receivable, net	21,408,000	3,031,000	306,000	-	-	-	3,000	-	-	24,748,000
Estimated third-party payor receivable	1,040,000	123,000	-	-	-	-	-	-	-	1,163,000
Insurance recoveries – current portion	1,738,000	-	-	-	-	-	-	-	-	1,738,000
Supplies, at lower of cost (first-in, first-out) or market and other assets	8,223,000	535,000	-	-	-	-	-	-	-	8,758,000
Total current assets	<u>44,611,000</u>	<u>3,690,000</u>	<u>374,000</u>	<u>4,000</u>	<u>1,945,000</u>	<u>302,000</u>	<u>29,000</u>	<u>185,000</u>	<u>-</u>	<u>51,140,000</u>
<b>ASSETS LIMITED AS TO USE</b>										
Internally designated for capital acquisition and other	239,852,000	-	-	-	-	-	-	-	-	239,852,000
Held by trustee under indenture agreement	2,360,000	-	-	-	-	-	-	-	-	2,360,000
	242,212,000	-	-	-	-	-	-	-	-	242,212,000
Less amounts required to meet current obligations	912,000	-	-	-	-	-	-	-	-	912,000
Total assets limited as to use	<u>241,300,000</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>241,300,000</u>
<b>PROPERTY AND EQUIPMENT, NET</b>	<u>96,305,000</u>	<u>8,749,000</u>	<u>688,000</u>	<u>-</u>	<u>-</u>	<u>28,824,000</u>	<u>54,000</u>	<u>694,000</u>	<u>-</u>	<u>135,314,000</u>
<b>OTHER ASSETS</b>										
Long-term investments and other	1,714,000	-	-	1,953,000	652,000	-	-	-	-	4,319,000
Insurance recoveries	4,915,000	-	-	-	-	-	-	-	-	4,915,000
Total other assets	<u>6,629,000</u>	<u>-</u>	<u>-</u>	<u>1,953,000</u>	<u>652,000</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>9,234,000</u>
<b>TOTAL ASSETS</b>	<u>\$ 388,845,000</u>	<u>\$ 12,439,000</u>	<u>\$ 1,062,000</u>	<u>\$ 1,957,000</u>	<u>\$ 2,597,000</u>	<u>\$ 29,126,000</u>	<u>\$ 83,000</u>	<u>\$ 879,000</u>	<u>\$ -</u>	<u>\$ 436,988,000</u>

See independent auditors' report.

**HOUSTON HEALTHCARE SYSTEM, INC.  
COMBINING BALANCE SHEET – CONTINUED  
DECEMBER 31, 2020**

LIABILITIES AND NET ASSETS	Houston Medical Center	Perry Hospital	Houston Healthcare EMS, Inc.	Houston Healthcare System, Inc.	Houston Healthcare Ventures, Inc.	Houston Healthcare Properties, Inc.	Houston Primary Care Physicians, LLC	Houston Physician Specialties, LLC	Eliminations	Total
<b>CURRENT LIABILITIES</b>										
Current maturities of long-term debt	\$ 4,225,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 4,225,000
Accounts payable and accrued expenses	10,216,000	1,000	-	-	-	34,000	17,000	(12,000)	-	10,256,000
Accrued compensation and benefits	12,635,000	1,007,000	267,000	-	-	27,000	532,000	634,000	-	15,102,000
Estimated third-party payor settlements	2,489,000	1,667,000	-	-	-	-	-	-	-	4,156,000
Other current liabilities	18,391,000	-	-	-	-	-	22,000	-	-	18,413,000
Total current liabilities	<u>47,956,000</u>	<u>2,675,000</u>	<u>267,000</u>	<u>-</u>	<u>-</u>	<u>61,000</u>	<u>571,000</u>	<u>622,000</u>	<u>-</u>	<u>52,152,000</u>
<b>LONG-TERM DEBT, NET OF CURRENT INSTALLMENTS</b>	59,860,000	-	-	-	-	-	-	-	-	59,860,000
<b>SELF-INSURANCE RESERVES</b>	12,578,000	-	-	-	-	-	-	-	-	12,578,000
<b>ACCRUED PENSION LIABILITY</b>	4,955,000	-	-	-	-	-	-	-	-	4,955,000
<b>TOTAL LIABILITIES</b>	<u>125,349,000</u>	<u>2,675,000</u>	<u>267,000</u>	<u>-</u>	<u>-</u>	<u>61,000</u>	<u>571,000</u>	<u>622,000</u>	<u>-</u>	<u>129,545,000</u>
<b>NET ASSETS</b>										
Without donor-imposed restrictions	263,496,000	9,764,000	795,000	1,957,000	2,597,000	29,065,000	(488,000)	257,000	-	307,443,000
Total net assets	<u>263,496,000</u>	<u>9,764,000</u>	<u>795,000</u>	<u>1,957,000</u>	<u>2,597,000</u>	<u>29,065,000</u>	<u>(488,000)</u>	<u>257,000</u>	<u>-</u>	<u>307,443,000</u>
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<u>\$ 388,845,000</u>	<u>\$ 12,439,000</u>	<u>\$ 1,062,000</u>	<u>\$ 1,957,000</u>	<u>\$ 2,597,000</u>	<u>\$ 29,126,000</u>	<u>\$ 83,000</u>	<u>\$ 879,000</u>	<u>\$ -</u>	<u>\$ 436,988,000</u>

See independent auditors' report.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**COMBINING STATEMENT OF OPERATIONS AND CHANGES IN NET ASSETS**  
**FOR THE YEAR ENDED DECEMBER 31, 2021**

	Houston Medical Center	Perry Hospital	Houston Healthcare EMS, Inc.	Houston Healthcare System, Inc.	Houston Healthcare Ventures, Inc.	Houston Healthcare Properties, Inc.	Houston Primary Care Physicians, LLC	Houston Physician Specialties, LLC	Eliminations	Total
<b>OPERATING REVENUES</b>										
Net patient service revenue	\$ 248,057,000	\$ 31,522,000	\$ 4,950,000	\$ -	\$ -	\$ -	\$ 1,628,000	\$ 4,323,000	\$ -	\$ 290,480,000
Grant revenue	7,709,000	-	433,000	-	-	-	-	-	-	8,142,000
Other revenue	3,105,000	238,000	71,000	-	-	1,214,000	4,367,000	1,000	(5,130,000)	3,866,000
Total operating revenues	258,871,000	31,760,000	5,454,000	-	-	1,214,000	5,995,000	4,324,000	(5,130,000)	302,488,000
<b>OPERATING EXPENSES</b>										
Salaries and benefits	139,796,000	15,867,000	6,028,000	-	-	426,000	8,091,000	7,019,000	-	177,227,000
Supplies and drugs	44,413,000	5,409,000	221,000	-	-	-	85,000	183,000	-	50,311,000
Other expenses	71,316,000	7,813,000	1,202,000	4,000	-	249,000	1,218,000	1,118,000	(5,130,000)	77,790,000
Depreciation and amortization	8,303,000	849,000	268,000	-	-	1,262,000	9,000	135,000	-	10,826,000
Interest expense	1,126,000	-	-	-	-	-	-	-	-	1,126,000
Overhead allocation	(5,638,000)	3,964,000	438,000	-	-	57,000	656,000	523,000	-	-
Total operating expenses	259,316,000	33,902,000	8,157,000	4,000	-	1,994,000	10,059,000	8,978,000	(5,130,000)	317,280,000
<b>OPERATING GAIN (LOSS)</b>	(445,000)	(2,142,000)	(2,703,000)	(4,000)	-	(780,000)	(4,064,000)	(4,654,000)	-	(14,792,000)
<b>NONOPERATING REVENUES (EXPENSES)</b>										
Investment income	2,687,000	-	-	-	-	-	-	-	-	2,687,000
Other components of net periodic pension costs	2,720,000	-	-	-	-	-	-	-	-	2,720,000
Net realized gains on sales of securities	16,359,000	-	-	159,000	810,000	-	-	-	-	17,328,000
Loss on extinguishment of long-term debt	(3,298,000)	-	-	-	-	-	-	-	-	(3,298,000)
Net unrealized gains on securities	(1,715,000)	-	-	-	-	-	-	-	-	(1,715,000)
Noncapital grants, contributions, and other	31,000	1,000	-	-	-	-	-	-	-	32,000
Total nonoperating revenues (expenses)	16,784,000	1,000	-	159,000	810,000	-	-	-	-	17,754,000
<b>EXCESS OF REVENUES OVER (UNDER) EXPENSES</b>	16,339,000	(2,141,000)	(2,703,000)	155,000	810,000	(780,000)	(4,064,000)	(4,654,000)	-	2,962,000
Changes in pension assets and benefit obligations not included in net periodic pension costs	11,348,000	-	-	-	-	-	-	-	-	11,348,000
<b>INCREASE (DECREASE) IN NET ASSETS WITHOUT DONOR-IMPOSED RESTRICTIONS</b>	27,687,000	(2,141,000)	(2,703,000)	155,000	810,000	(780,000)	(4,064,000)	(4,654,000)	-	14,310,000
<b>NET ASSETS AT BEGINNING OF YEAR</b>	250,662,000	11,866,000	3,307,000	1,962,000	2,601,000	28,817,000	3,529,000	4,699,000	-	307,443,000
<b>NET ASSETS AT END OF YEAR</b>	\$ 278,349,000	\$ 9,725,000	\$ 604,000	\$ 2,117,000	\$ 3,411,000	\$ 28,037,000	\$ (535,000)	\$ 45,000	\$ -	\$ 321,753,000

See independent auditors' report.

**HOUSTON HEALTHCARE SYSTEM, INC.**  
**COMBINING STATEMENT OF OPERATIONS AND CHANGES IN NET ASSETS**  
**FOR THE YEAR ENDED DECEMBER 31, 2020**

	Houston Medical Center	Perry Hospital	Houston Healthcare EMS, Inc.	Houston Healthcare System, Inc.	Houston Healthcare Ventures, Inc.	Houston Healthcare Properties, Inc.	Houston Primary Care Physicians, LLC	Houston Physician Specialties, LLC	Eliminations	Total
<b>OPERATING REVENUES</b>										
Net patient service revenue	\$ 212,147,000	\$ 25,989,000	\$ 4,433,000	\$ -	\$ -	\$ -	\$ 1,309,000	\$ 4,642,000	\$ -	\$ 248,520,000
Grant revenue	26,644,000	-	543,000	-	-	-	-	150,000	-	27,337,000
Other revenue	2,941,000	212,000	4,000	-	-	1,047,000	2,954,000	13,000	(3,796,000)	3,375,000
Total operating revenues	241,732,000	26,201,000	4,980,000	-	-	1,047,000	4,263,000	4,805,000	(3,796,000)	279,232,000
<b>OPERATING EXPENSES</b>										
Salaries and benefits	124,088,000	13,560,000	4,570,000	-	-	412,000	5,646,000	7,774,000	-	156,050,000
Supplies and drugs	38,961,000	4,637,000	181,000	-	-	2,000	82,000	183,000	-	44,046,000
Other expenses	65,211,000	7,418,000	1,024,000	1,000	-	207,000	950,000	1,053,000	(3,796,000)	72,068,000
Depreciation and amortization	8,588,000	817,000	281,000	-	-	1,198,000	9,000	133,000	-	11,026,000
Interest expense	2,447,000	-	-	-	-	-	-	-	-	2,447,000
Overhead allocation	(6,642,000)	4,738,000	585,000	-	-	86,000	629,000	604,000	-	-
Total operating expenses	232,653,000	31,170,000	6,641,000	1,000	-	1,905,000	7,316,000	9,747,000	(3,796,000)	285,637,000
<b>OPERATING GAIN (LOSS)</b>	9,079,000	(4,969,000)	(1,661,000)	(1,000)	-	(858,000)	(3,053,000)	(4,942,000)	-	(6,405,000)
<b>NONOPERATING REVENUES (EXPENSES)</b>										
Investment income	3,448,000	-	-	-	-	-	-	-	-	3,448,000
Other components of net periodic pension costs	2,611,000	-	-	-	-	-	-	-	-	2,611,000
Net realized gains on sales of securities	15,450,000	-	-	74,000	583,000	-	-	-	-	16,107,000
Net unrealized gains on securities	3,692,000	-	-	-	-	-	-	-	-	3,692,000
Noncapital grants, contributions, and other	1,000	(79,000)	-	-	-	-	-	-	-	(78,000)
Total nonoperating revenues (expenses)	25,202,000	(79,000)	-	74,000	583,000	-	-	-	-	25,780,000
<b>EXCESS OF REVENUES OVER (UNDER) EXPENSES</b>	34,281,000	(5,048,000)	(1,661,000)	73,000	583,000	(858,000)	(3,053,000)	(4,942,000)	-	19,375,000
Changes in pension assets and benefit obligations not included in net periodic pension costs	(177,000)	-	-	-	-	-	-	-	-	(177,000)
Contributions for capital	-	-	100,000	-	-	-	-	-	-	100,000
<b>INCREASE (DECREASE) IN NET ASSETS WITHOUT DONOR-IMPOSED RESTRICTIONS</b>	34,104,000	(5,048,000)	(1,561,000)	73,000	583,000	(858,000)	(3,053,000)	(4,942,000)	-	19,298,000
<b>NET ASSETS AT BEGINNING OF YEAR</b>	229,392,000	14,812,000	2,356,000	1,884,000	2,014,000	29,923,000	2,565,000	5,199,000	-	288,145,000
<b>NET ASSETS AT END OF YEAR</b>	\$ 263,496,000	\$ 9,764,000	\$ 795,000	\$ 1,957,000	\$ 2,597,000	\$ 29,065,000	\$ (488,000)	\$ 257,000	\$ -	\$ 307,443,000

See independent auditors' report.