# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**Open to Public** 

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Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

~ . /=

		enue Service	Go to www.irs.gov/Form990 for instructions and the lates	st information.		Inspection
Α	For the	e 2021 calend	dar year, or tax year beginning , 2021, and end	ing		, 20
в	Check if	f applicable:	C Name of organization MEDICAL CENTER OF CENTRAL GEORGIA, INC.		D Empl	oyer identification number
	Address	s change	Doing business as THE MEDICAL CENTER, NAVICENT HEALTH			58-2149128
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telepl	hone number
	Initial re	turn	777 HEMLOCK STREET, MSC 111			(478) 633-6968
	Final ret	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amende	ed return	MACON, GA 31201		G Gross	receipts \$ 835,029,667
	Applicat	tion pending	F Name and address of principal officer: DELVECCHIO S. FINLEY	H(a) Is this a gr	oup return fe	or subordinates? 🗌 Yes 🔽 No
			SAME AS C ABOVE	H(b) Are all s	ubordinat	es included? 🗌 Yes 🗌 No
I	Tax-exe	empt status:	✓ 501(c)(3) 501(c) ( ) ◄ (insert no.) 4947(a)(1) or 527	lf "No," a	attach a li	st. See instructions.
J	Website	e: ► WWW.N	IAVICENTHEALTH.ORG	H(c) Group e	xemption	number 🕨
к	Form of	organization: 🗸	Corporation ☐ Trust ☐ Association ☐ Other ► L Year of form	nation: 1994	M State	of legal domicile: GA
Ρ	art I	Summa	ŷ			
	1	Briefly des	cribe the organization's mission or most significant activities: THE I	MEDICAL CENTE	R OF C	ENTRAL GEORGIA,
e		INC. (MCCO	G) IS A NON-PROFIT MEDICAL CENTER WHOSE PRIMARY PURPOSE IS	S TO PROVIDE H	IGH QU	ALITY
Governance		(CONTINU				
/en	2	Check this	box $\blacktriangleright$ if the organization discontinued its operations or dispose	d of more than	25% of	its net assets.
õ	3	Number of	3	19		
8	4	Number of	4	14		
ties	5	Total numb	per of individuals employed in calendar year 2021 (Part V, line 2a)		5	4,880
Activities &	6	Total numb	per of volunteers (estimate if necessary)		6	44
Ac	7a	Total unrel	ated business revenue from Part VIII, column (C), line 12		7a	3,893,019
	b	Net unrelat	ed business taxable income from Form 990-T, Part I, line 11		7b	0
				Prior Yea	r	Current Year
ē	8	Contributio	ons and grants (Part VIII, line 1h)	53,4	08,429	17,477,473
enu	9	•	ervice revenue (Part VIII, line 2g)	681,4	76,353	734,914,783
Revenue	10	Investment	income (Part VIII, column (A), lines 3, 4, and 7d)	43,7	61,791	44,931,059
ш	11	Other reve	nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,4	43,697	3,090,485
	12		ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	783,0	90,270	800,413,800
	13		I similar amounts paid (Part IX, column (A), lines 1–3)	113,4	54,574	0
	14		aid to or for members (Part IX, column (A), line 4)			
es	15		her compensation, employee benefits (Part IX, column (A), lines 5–10)	295,2	80,336	310,948,579
ŝns	16a	Profession	al fundraising fees (Part IX, column (A), line 11e)		0	0
Expenses	b		aising expenses (Part IX, column (D), line 25)			
ш	17	•	enses (Part IX, column (A), lines 11a–11d, 11f–24e)	395,5	598,681	413,411,058
	18	Total expe	nses. Add lines 13–17 (must equal Part IX, column (A), line 25)	804,3	33,591	724,359,637
	19	Revenue le	ess expenses. Subtract line 18 from line 12	(21,2	43,321)	76,054,163
s or				Beginning of Curr	ent Year	End of Year
sets alan	20	Total asset	s (Part X, line 16)	1,332,9	57,251	1,397,526,718
Net Assets or Fund Balances	21		ties (Part X, line 26)	392,6	92,438	350,573,361
-		Net assets	or fund balances. Subtract line 21 from line 20	940,2	264,813	1,046,953,357
D.	art II	Cianatu	re Block			

Signature Block 

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer KIMBERLY SHREWSBURY, CFO Type or print name and title			Date		
Paid Preparer	Print/Type preparer's name W. EDWARD PHILLIPS	Preparer's signature	Date		Check if self-employed	PTIN P00451499
Use Only	Firm's name	Firm's	s EIN 🕨	58-0914992		
	Firm's address ► PO BOX 71309, ALBAN	Phon	29) 883-7878			
May the IRS	discuss this return with the preparer s	shown above? See instructions				🖌 Yes 🗌 No
For Paperwo	rk Reduction Act Notice, see the separa	te instructions.	Cat. No. 11282)	(		Form <b>990</b> (2021)

	90 (2021) Page											
Part												
	Check if Schedule O contains a response or note to any line in this Part III											
1	Briefly describe the organization's mission:											
	TO ENHANCE THE HEALTH STATUS OF THOSE WE SERVE IN PARTNERSHIP WITH MEDICAL STAFF AND OTHER COMMUNITY ORGANIZATIONS BY PROVIDING WELLNESS SERVICES, HEALTH EDUCATION, TRAINING, AND ACCESS											
	TO SAFE HIGH QUALITY HEALTH CARE SERVICES.											
2	Did the organization undertake any significant program services during the year which were not listed on the											
_	prior Form 990 or 990-EZ?											
	If "Yes," describe these new services on Schedule O.											
3	Did the organization cease conducting, or make significant changes in how it conducts, any program											
	services?											
	If "Yes," describe these changes on Schedule O.											
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured to expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other the total expenses, and revenue, if any, for each program service reported.											
4a	(Code:) (Expenses \$624,329,838_ including grants of \$) (Revenue \$734,112,249_)											
	THE MEDICAL CENTER, NAVICENT HEALTH IS AN ACADEMIC MEDICAL CENTER, DESIGNATED LEVEL 1 TRAUMA											
	CENTER, MAGNET HOSPITAL FOR NURSING AND SERVES THE RESIDENTS OF CENTRAL AND SOUTH GEORGIA WITH A											
	PRIMARY AND SECONDARY SERVICE AREA OF 30 COUNTIES AND A POPULATION OF NEARLY 750,000 PERSONS.											
	THE MEDICAL CENTER, NAVICENT HEALTH HAS OVER 4,480 EMPLOYEES AND A MEDICAL STAFF OF											
	APPROXIMATELY 635 PHYSICIANS. AS THE SECOND LARGEST HOSPITAL IN GEORGIA, IT IS LICENSED FOR 637											
	BEDS, INCLUDING PEDIATRICS, MEDICAL-SURGICAL, TRAUMA AND CARDIAC SURGERY, THE EMERGENCY CENTER,											
	WITH HELIPAD CAPABILITY AND THREE URGENT CARE CENTERS TREATS OVER 126,000 VISITORS PER YEAR.											
	THE MEDICAL CENTER, NAVICENT HEALTH PROVIDES A BROAD RANGE OF COMMUNITY-BASED OUTPATIENT											
	DIAGNOSTIC, PRIMARY CARE, WELLNESS AND COMPREHENSIVE REHABILITATION SERVICES. IT IS THE PRIMARY											
	ACADEMIC HOSPITAL FOR MERCER UNIVERSITY SCHOOL OF MEDICINE, PROVIDING RESIDENCY AND FELLOWSHIP											
	PROGRAMS FOR OVER 100 RESIDENTS AND IS AFFILIATED WITH MULTIPLE UNIVERSITIES AS A CLINICAL											
41.	(CONTINUED ON SCHEDULE O)											
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)											
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)											
ا ـ 1	Other program comises (Describe on Schedule O.)											
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )											
40	(Expenses \$ including grants of \$ ) (Revenue \$ )         Total program service expenses ▶ 624,329,838											
4e												

Form 99			I	Page <b>3</b>
Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		~
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	~	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .	5		~
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		~
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .	9		~
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i> .	10		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	~	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		~
С	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		~
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	~	
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11e 11f	~	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	~	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	4.44		~
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	14b		· ·
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	15 16		· ·
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>			· ·
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	18		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a	~	
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	~	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		~

Part	V Checklist of Required Schedules (continued)		V-	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	N
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		L
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	~	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	~	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	•	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
26	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26	~	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
	persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		
b c	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	28b	~	
~	"Yes," complete Schedule L, Part IV	28c		
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		-
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	02		
34	sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33	•	
	or IV, and Part V, line 1	34	~	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	~	
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable	35b	~	
37	related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
38	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and	37		
Part		38	~	
	Check if Schedule O contains a response or note to any line in this Part V			-
4 -	Enter the number reported in her 2 of Form 1000. Enter 0, if not any listing 1 and 1 and 1 and 1 and 1		Yes	1
1a b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1163Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable10Did the organization comply with backup withholding rules for reportable payments to vendors and10	-		
С				111

Form 99 Part	0 (2021) V Statements Regarding Other IRS Filings and Tax Compliance (continued)		l Yes	Page 5 No
Part 2a			Yes	NO
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and TaxStatements, filed for the calendar year ending with or within the year covered by this return2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
•	<b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> . See instructions.		4	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<b>V</b>	
b 10	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i> . At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	3b	~	
4a	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
b	If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	•		
9	Sponsoring organization have excess business notings at any time during the year?	8		
a a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
40-	against amounts due or received from them.)	10-		
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b	12a		
b 13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		~
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		~
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			
			000	(0004)

Form **990** (2021)

Form	990	(2021)
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**Governance, Management, and Disclosure.** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Section	on A. Governing Body and Management			-
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year   1a   19			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent . <b>1b</b>			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		V
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		~
6	Did the organization have members or stockholders?	6	~	-
- 7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint		-	
	one or more members of the governing body?	7a	~	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	74	•	
~	stockholders, or persons other than the governing body?	7b	~	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	10	•	
U	the year by the following:			
2		8a	V	
a h	The governing body?       .	8b	~	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	oD	V	
3	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		~
Santi	on B. Policies (This Section B requests information about policies not required by the Internal Reven	•	nda )	V
Secu	on b. Policies (This Section B requests information about policies not required by the internal Reven		Yes	No
10-	Did the eventientien have lead about the human an efficience	10-	res	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
b	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	101		
		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	~	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	10		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	~	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	~	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	~	
13	Did the organization have a written whistleblower policy?	13	~	
14	Did the organization have a written document retention and destruction policy?	14	~	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		~
b	Other officers or key employees of the organization	15b		~
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a	~	
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed E GA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-	Г (sec	tion 5	501(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	□ Own website □ Another's website □ Upon request □ Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict o	f inter	est p	olicy,
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and re-	cords		

KIMBERLY SHREWSBURY, 777 HEMLOCK STREET, MACON, GA 31201, (478) 633-1452

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#### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

				(0	C)					
(A)	(B)			Pos				(D)	(E)	(F)
Name and title	Average	· ·		ot check more Inless person is				Reportable	Reportable	Estimated amount
	hours	office				or/trust		compensation	compensation	of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) CAROL LOVIN	1.0									
BOARD MEMBER	41.0	~						0	1,715,644	204,400
(2) NINFA M SAUNDERS										
PRESIDENT/CEO	0.0						~	0	1,740,727	0
(3) DELVECCHIO FINLEY	5.0									
PRESIDENT/CEO	50.0			~				0	1,113,418	65,210
(4) SUSAN W HARRIS	40.0									
COO MEDICAL CENTER NAVICENT HEALTH	0.0				~			651,554	0	71,520
(5) ROBERT C WILDE	1.0									
TREASURER	49.0			~				0	587,462	107,177
(6) KENNETH B BANKS	1.0									
SECRETARY	49.0			~				0	614,094	64,817
(7) PATRICE C WALKER, MD	40.0									
CHIEF MEDICAL OFFICER	0.0				~			502,573	0	92,696
(8) TRACEY A BLALOCK	40.0									
CHIEF NURSING EXECUTIVE	0.0				~			450,502	0	80,701
(9) ELIZABETH A MANN	40.0									
VP - CARDIOVASCULAR SERVICES AND NURSING STRATEGY	0.0					~		332,481	0	28,401
(10) BHALLA VISHAL	15.0									
CHIEF HR OFFICER	35.0				~			0	322,183	4,964
(11) MICHAEL G HAJWORONSKY	40.0									
VP CLINICAL SUPPORT SERVICES	0.0					~		281,269	0	21,012
(12) VALERIE HARRIS	40.0									
CLINICAL NURSE LEAD (WOW)	0.0					~		265,533	0	26,996
(13) A.KARIM JABR	40.0									
PERFUSIONIST MANAGER	0.0					~		245,185	0	33,716
(14) DEBRA D RILEY	40.0									
AVP NURSING	0.0					~		249,857	0	27,267

Form **990** (2021)

Page	8

Part VII Section A. Officers, Directors,	Trustees, I	Key I	Emj	ploy	yee	s, an	d F	lighest Compe	ensated Emplo	yees (continued)
				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average hours per week	(do not check more than one box, unless person is both an officer and a director/trustee)					n an	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(15) KIM JOHNSTON, MD	1.0									
VICE CHAIRMAN	1.0	~		~				0	0	0
(16) STARR PURDUE	1.0									
CHAIRMAN	1.0	~		~				0	0	0
(17) BILL TIFT,, MD	1.0									
BOARD MEMBER	1.0	~						0	0	0
(18) CONNIE CATER	1.0									
BOARD MEMBER	1.0	~						0	0	0
(19) DAVID DANZIE	1.0									
BOARD MEMBER	1.0	~						0	0	0
(20) HENRY KOPLIN	1.0									
BOARD MEMBER	2.0	~						0	0	0
(21) J MARBURY RAINER	1.0									
BOARD MEMBER	1.0	~						0	0	0
(22) JAYESH PATEL, MD	1.0									
BOARD MEMBER	1.0	~						0	0	0
(23) JOHN D HOUSER	1.0									
BOARD MEMBER	1.0	~						0	0	0
(24) MAC EVERETT	1.0									
BOARD MEMBER	1.0	~						0	0	0
(25) (SEE STATEMENT)										
1b Subtotal								2,978,954	6,093,528	828,877
c Total from continuation sheets to Part								0	0	0
d Total (add lines 1b and 1c)								2,978,954	6,093,528	828,877
2 Total number of individuals (including bu reportable compensation from the organ		l to th	nose	e list	ed a	above	e) w	ho received mor 459	e than \$100,000	of

3	Did the organization list any former officer, director, trustee, key employee, or highest compensate	ed
	employee on line 1a? If "Yes," complete Schedule J for such individual	
-		

- **5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

#### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	<b>(B)</b> Description of services	<b>(C)</b> Compensation
AMERICAN ANESTHESIOLOGY OF GA LLC, P O BOX 535375, ATLANTA, GA 30353	CONTRACT SERVICES-ANESTHESIA	8,215,881
ACCOUNTABLE HEALTHCARE STAFFING, PO BOX 732800, DALLAS, TX 75373	CONTRACT STAFFING	6,660,370
COGENT HEALTHCARE OF MACON, LLC DBA QUANTUM HC, 777 HEMLOCK STREET, MSC #104, MACON, GA 31201	CONTRACT SVC-HOSPITALISTS	4,759,099
MORRISON MANAGEMENT SPECIALISTS INC, PO BOX 102289, ATLANTA, GA 30368	CONTRACT MANAGEMENT - FOOD SERVICES	3,047,411
NOVO HEALTH SERVICES LLC, PO BOX 71147, CHARLOTTE, GA 28272	CONTRACT SERVICES-LINEN AND RENTAL	2,210,948
2 Total number of independent contractors (including but not limited to		
received more than \$100,000 of compensation from the organization $\blacktriangleright$	51	

Yes No

V

V

V

3

4

5

Part VIII Statement of Revenue

		Check if Schedule	2 00				· · · · · · · · · · · · · · · · · · ·			
							<b>(A)</b> Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue exclude from tax under sections 512–51
ts	1a	Federated campaig	ns .		1a	382				
and Other Similar Amounts	b	Membership dues			1b					
Ĕ	С	Fundraising events			1c					
a P	d									
li	е	Government grants (contributions) <b>1e</b>			16,698,371					
Si	f	All other contributions, gifts, grants,								
Jer		and similar amounts not included above <b>1f</b> Noncash contributions included in			778,720					
₹	g									
pu		lines 1a-1f			1g					
ø	h	Total. Add lines 1a-	-1f .		•		17,477,473			
	-					Business Code				
	2a	PATIENT CHARGES SUPPORT & SERVICES REVENUE				621500	721,342,808	721,342,808		
ne	b			EVENUE		561000	1,232,843	1,175,808	57,035	
(en	C.				531120	6,777,578	6,777,578	0.005.004		
Revenue	d	REFERENCE LAB IN		E		541380	4,352,916	516,932	3,835,984	
-	e	WELLNESS CENTER				713940	1,208,638	1,208,638		
	f	All other program se					0	0	0	
_		Total. Add lines 2a-					734,914,783			
	3	Investment income other similar amoun					11 109 046			11 100 (
							11,108,946			11,108,9
	4	Income from investn				·				
	5	Royalties		 (i) Rea		(ii) Personal				
	0-	Overe verte	0-			(II) Personal				
	6a	Gross rents	6a		3,467					
	b	Less: rental expenses			8,738					
	لہ اہ	Rental income or (loss)			4,729		1 954 720	1 954 720		
	d Za	Net rental income o	r (ios:	S) (i) Securit	ioc.	►	1,854,729	1,854,729		
	7a	Gross amount from sales of assets			162					
		other than inventory	7a	68,05	4,139	26,600				
	h	Less: cost or other basis	10							
	N N	and sales expenses .	7b	34.23	3,830	24,796				
	<b>^</b>									
			7c				33,822,113			33,822,1
	8a	Gross income from					00,022,110			00,022,
5	Ua	events (not including		inuraising						
		of contributions rep		d on line						
		1c). See Part IV, line			8a					
	b	Less: direct expense			8b					
	c	Net income or (loss)				nts 🕨				
	9a	Gross income f			Ĭ					
		activities. See Part I	V, lin	e19.	9a					
	b	Less: direct expense	es .		9b					
	С	Net income or (loss)	) from	n gaming ad	tivitie	es 🕨				
	10a	Gross sales of ir	nvent	• •						
		returns and allowan	ces		10a	563,232				
	b	Less: cost of goods sold <b>10b</b>			248,503					
		Net income or (loss)			vento	ory 🕨	314,729	314,729		
						Business Code				
e	11a	EQUITY IN PET JOIN	IT VE	NTURE		621512	905,421	905,421		
nue	b	CLINICAL TRIALS				541380	15,551	15,551		
Revenue	С	OTHER				813910	55	55		
œ	d	All other revenue			•		0	0	0	
	е	Total. Add lines 11a	a_11c	<u>.</u>		🕨	921,027			
			instr				800,413,800	734,112,249	3,893,019	44,931,0

sectio	on 501(c)(3) and 501(c)(4) organizations must comple				
	Check if Schedule O contains a response			(C)	[ (D)
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .		ехрепзез	general expenses	expenses
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	2,978,954	1,374,325	1,604,629	
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .				
7	Other salaries and wages	241,990,876	232,255,751	9,735,125	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	7,057,695	6,837,973	219,722	
9	Other employee benefits	41,066,278	40,194,256	872,022	
10	Payroll taxes	17,854,776	17,111,606	743,170	
11	Fees for services (nonemployees):				
a					
b		951,390	00.057	951,390	
C		20,357	20,357		
d		5,000	5,000		
e	Professional fundraising services. See Part IV, line 17	1 470 202		1 470 202	
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	1,479,383	100,307,199	1,479,383	
12	Advertising and promotion	206,650	175,655	30,995	
13	Office expenses	6,376,015	6,067,081	308,934	
14	Information technology	951,579	951,579		
15	Royalties				
16		6,079,817	5,988,900	90,917	
17	Travel	1,289,829	1,256,159	33,670	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20		4,217,580	4,217,580		
21	Payments to affiliates	05 000 700	04.400.000	4 050 550	
22	Depreciation, depletion, and amortization .	25,388,788	21,138,229	4,250,559	
23		92,093	92,093		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	MEDICAL SUPPLIES	159,893,371	159,890,628	2,743	
b	EQUIP RENTAL, MAINT & MINOR	12,997,881	12,919,766	78,115	
С	TAXES, PENALTIES & FEES	9,662,263	9,630,696	31,567	
d	NUTRITIONAL SUPPLIES & MEALS	2,238,223	2,193,933	44,290	
е	All other expenses	3,069,808	1,701,072	1,368,736	
25	Total functional expenses. Add lines 1 through 24e	724,359,637	624,329,838	100,029,799	
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here $\blacktriangleright$ $\Box$ if				

Form 990 (2021)

	n 990 (2	•			Page <b>11</b>
P	art X				_
		Check if Schedule O contains a response or note to any line in this Par	(A) Beginning of year		
	1	Cash-non-interest-bearing	136,594,894	1	(169,047,799)
	2	Savings and temporary cash investments		2	,
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	151,410,518	4	207,044,582
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	33,608,094	5	35,762,945
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .	0	6	0
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	19,188,118	8	20,807,587
As	9	Prepaid expenses and deferred charges	4,453,103	9	1,115,012
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D <b>10a</b> 940,501,135			
	b	Less: accumulated depreciation <b>10b</b> 585,299,669	371,754,452	10c	355,201,466
	11	Investments-publicly traded securities	588,072,007	11	668,257,341
	12	Investments-other securities. See Part IV, line 11	0	12	0
	13	Investments-program-related. See Part IV, line 11	1,313,642	13	1,754,863
	14	Intangible assets		14	132,491
	15	Other assets. See Part IV, line 11	26,562,423	15	276,498,230
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,332,957,251	16	1,397,526,718
	17	Accounts payable and accrued expenses	65,249,841	17	83,496,990
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	187,101,606	20	183,196,185
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
lide		controlled entity or family member of any of these persons	0	22	0
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	39,969,713	24	39,969,713
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D	100,371,278	25	43,910,473
	26	Total liabilities. Add lines 17 through 25	392,692,438	26	350,573,361
seo		Organizations that follow FASB ASC 958, check here ► ✓ and complete lines 27, 28, 32, and 33.			
ılar	27	Net assets without donor restrictions	940,264,813	27	1,046,953,357
Ва	28	Net assets with donor restrictions		28	
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here ► and complete lines 29 through 33.			
or	29	Capital stock or trust principal, or current funds		29	
ţs	29 30	Paid-in or capital surplus, or land, building, or equipment fund		29 30	
sse	30 31	Retained earnings, endowment, accumulated income, or other funds		30	
ťΑ	32	Total net assets or fund balances	940,264,813	32	1,046,953,357
Nei	33	Total liabilities and net assets/fund balances	1,332,957,251	33	1,397,526,718
	00		1,002,001,201	00	1,007,020,710

Form **990** (2021)

	90 (2021)			Pa	ge <b>12</b>
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				~
1	Total revenue (must equal Part VIII, column (A), line 12)	1	8	300,41	3,800
2	Total expenses (must equal Part IX, column (A), line 25)	2	7	724,35	9,637
3	Revenue less expenses. Subtract line 2 from line 1	3		76,054,163	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	ę	940,26	4,813
5	Net unrealized gains (losses) on investments	5		20,46	0,005
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9		10,17	4,376
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	1,0	)46,95	3,357
Part					
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," end Schedule O.	xplain c	n		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		~
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled o	or		
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	~	
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	ited on	a		
	separate basis, consolidated basis, or both:				
_	□ Separate basis □ Consolidated basis □ Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov the audit, review, or compilation of its financial statements and selection of an independent account				
			2c		~
	If the organization changed either its oversight process or selection process during the tax year, e Schedule O.	xpiain c	n l		
20	As a result of a federal award, was the organization required to undergo an audit or audits as set for	rth in th			
Ja	Single Audit Act and OMB Circular A-133?		е За	~	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?	 1erao th		~	
b	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a		3b	~	
	required addition addition, explain why on oblication of and describe any steps taken to undergo such		30	~	

Form **990** (2021)

Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours (C) Positio per week (Check all that ar							(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(25) MARK GROSSNICKLE, MD	1.0	<						0	0	0
BOARD MEMBER	1.0							•	•	
(26) RAY PIPPIN	1.0	1						0	0	0
BOARD MEMBER	1.0							0	v	Ŭ
(27) RICK SHACKELFORD	1.0	1						0	0	0
BOARD MEMBER	1.0	•						•	•	Ŭ
(28) RON SHIPMAN	1.0	1						0	0	0
BOARD MEMBER	1.0							•	•	
(29) RONNIE COLLIER	1.0	1						0	0	0
BOARD MEMBER	1.0							·	· ·	
(30) SHEILA RAY	1.0	1						0	0	0
BOARD MEMBER	1.0							<b>.</b>	<b>`</b>	
(31) TIMOTHY JACKSON	1.0	1						0	0	0
BOARD MEMBER	1.0							•	•	
(32) WIMBERLY TREADWELL	1.0	1						0	0	0
BOARD MEMBER	1.0							Ŷ	°	Ŭ

SCHEDULE	A
(Form 990)	

## **Public Charity Status and Public Support**

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

npt charitable trust. tion. Employer identification number

58-2149128

## Name of the organization

MEDICAL CENTER OF CENTRAL GEORGIA, INC.

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives (1) more than 33<sup>1</sup>/<sub>3</sub>% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33<sup>1</sup>/<sub>3</sub>% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - **a Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
  - **b** Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
  - c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
  - d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
  - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f  $\;$  Enter the number of supported organizations  $\;$  .  $\;$  .  $\;$  .  $\;$  .

g Provide the following information about the supported organization(s)

(i) Name of supported organization		<b>(ii)</b> EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
(B)							
(C)							
(D)							
(E)							
Total							

Schedu	le A (Form 990) 2021						Page <b>2</b>
Part	II Support Schedule for Organiza (Complete only if you checked th Part III. If the organization fails to	ne box on lin	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
Secti	on A. Public Support						
Calen	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support		1	I	1	1	
	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on .						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. First 5 years. If the Form 990 is for the organization, check this box and stop her	organization		l, third, fourth,	or fifth tax ye		
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2021 (line 6	6, column (f), c	divided by line	11, column (f))		14	%
15	Public support percentage from 2020 Sch					15	%
16a	331/3% support test-2021. If the organi						
b	box and <b>stop here.</b> The organization qual <b>33</b> <sup>1</sup> / <sub>3</sub> % <b>support test</b> — <b>2020.</b> If the organization this box and <b>stop here.</b> The organization	zation did not	check a box o	on line 13 or 16	Sa, and line 15	is 331/3% or m	nore, check
47-							
17a	<b>10%-facts-and-circumstances test</b> — <b>20</b> 10% or more, and if the organization m Part VI how the organization meets the organization .	eets the facts	s-and-circumst	ances test, ch	eck this box a zation qualifies	and stop here.	. Explain in
b	<b>10%-facts-and-circumstances test</b> — <b>20</b> 15 is 10% or more, and if the organizatio in Part VI how the organization meets the organization	n meets the facts-and-ci	acts-and-circu rcumstances te	mstances test, est. The organ	, check this bo ization qualifie	ox and <b>stop he</b>	<b>re.</b> Explain
18	Private foundation. If the organization of					. check this bo	ox and see
	instructions						

#### Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) ►	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						_
6	Total. Add lines 1 through 5.						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b						
с 8	Public support. (Subtract line 7c from						
U							
Secti	on B. Total Support						
	dar year (or fiscal year beginning in) ►	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						_
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
10	(Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	<b>First 5 years.</b> If the Form 990 is for the	organization'	s first second	third fourth	or fifth tax va	ar as a soot	$\frac{1}{100}$
14	organization, check this box and <b>stop he</b>						
Secti	on C. Computation of Public Suppor						, _
15	Public support percentage for 2021 (line 8	-		13. column (f))		15	%
16	Public support percentage from 2020 Sch					16	%
	on D. Computation of Investment In					1 1	
17	Investment income percentage for 2021 (		-	by line 13, colu	ımn (f))	17	%
18	Investment income percentage from 2020	Schedule A,	Part III, line 17			18	%
19a	331/3% support tests-2021. If the organ						
	17 is not more than $33^{1}/_{3}$ %, check this box	-	-	-		-	
b	331/3% support tests-2020. If the organiz						
	line 18 is not more than 331/3%, check this I						
20	Private foundation. If the organization di	d not check a	box on line 14,	, 19a, or 19b, o	check this box	and see instr	ructions 🕨 🗌
						Schedule	e A (Form 990) 2021

#### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes No 1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

#### 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.

2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

## Section C. Type II Supporting Organizations

1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

## Section D. All Type III Supporting Organizations

1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's

supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- а The organization satisfied the Activities Test. Complete **line 2** below.
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990) 2021 11/10/2022 7:02:11 PM

3b

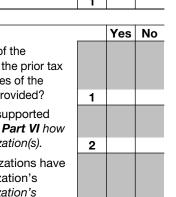
Yes No 2a 2b 3a

Yes No 1

Yes No

1

2



#### Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See
	instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	$\square$ Check berg if the current year is the organization's first as a non-function	-	· · · · <del>· ·</del> · ···	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part	V Type III Non-Functionally Integrated 509(a)(3	) Supporting Organi	zations (continue	<u>7)</u>	Page I
	on D-Distributions			<i></i>	Current Veer
Sect	on D-Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e			1	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted		
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required-	•	<b>VI</b> )	5	
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	n the organization is res	ponsive	8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount	r		10	
Sect	on E-Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2021	S	(iii) Distributable Amount for 2021
_1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required — <i>explain in Part VI</i> ). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in</i> <b>Part VI.</b> See instructions.				
7	<b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				
e	Excess from 2021				

Schedule A (Form 990) 2021

•		For Or	ganizations Exempt From Income	Tax Under sectio	n 501(c) and section 527	2021
	nent of the Treasury Revenue Service	► Compl	ete if the organization is described ▶ Go to <i>www.irs.gov/Form990</i> for		n to Form 990 or Form 990-E2 e latest information.	2. Open to Public Inspection
If the o	organization ans	wered "Yes	," on Form 990, Part IV, line 3, or Fo	rm 990-EZ, Part V,	line 46 (Political Campaign A	Activities), then
		-	Complete Parts I-A and B. Do not co			
			on 501(c)(3)) organizations: Complete	Parts I-A and C belo	ow. Do not complete Part I-B.	
	•		nplete Part I-A only.			
			" on Form 990, Part IV, line 4, or Fo			
		-	that have filed Form 5768 (election un			
		-	that have NOT filed Form 5768 (election, " on Form 990, Part IV, line 5 (Prox			
	See separate inst		-			
• Se	ection 501(c)(4), (5	ō), or (6) orga	inizations: Complete Part III.			
Name	of organization				Employer iden	tification number
MEDI	CAL CENTER OF	CENTRAL	GEORGIA, INC.			58-2149128
Part	I-A Com	olete if the	e organization is exempt und	ler section 501	(c) or is a section 527 o	rganization.
1			f the organization's direct and ir npaign activities."	ndirect political c	ampaign activities in Part	IV. See instructions for
2		•	y expenditures. See instructions		<b>▶</b> \$	
3			cal campaign activities. See instru			
Part	-		e organization is exempt und			
1		-	excise tax incurred by the organiz			
2		-	excise tax incurred by organizatio	-		
3	Was a correct		ed a section 4955 tax, did it file Fo	-		Yes . No
4a b	If "Yes," desci					<b>Yes</b> No
Part			e organization is exempt und	ler section 501	(c) except section 501	(c)(3)
1	-		ly expended by the filing organi			
•	activities .				<b>&gt;</b> \$	
2	Enter the amo	ount of the	filing organization's funds contril	buted to other or	- ganizations for section	
	527 exempt fu				<b>▶</b> \$_	
3	Total exempt	function e	expenditures. Add lines 1 and 2	2. Enter here and	d on Form 1120-POL,	
	line 17b				▶ \$ <u></u>	
4	-	-	n file <b>Form 1120-POL</b> for this year			🔄 Yes 🔄 No
5	organization m the amount of	nade payme political co	ses and employer identification nu ents. For each organization listed, ontributions received that were pro- fund or a political action committe	enter the amount omptly and directl	paid from the filing organi: y delivered to a separate p	zation's funds. Also enter olitical organization, such
	<b>(a)</b> Name		(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)						
(2)						
(3)			 			
(4)						
(5)						
(6)						
For Pa	perwork Reductio	n Act Notice	, see the Instructions for Form 990 or 9	990-EZ.	Cat. No. 50084S	Schedule C (Form 990) 2021

#### **Political Campaign and Lobbying Activities** Unde ... E, .+ E. . -..... = - 4 ( )

SCHEDULE C

(Form 990)



Scł	edule	C (Form	990) 2021			Page <b>2</b>
Pa	art I	-A	Complete if the organization section 501(h)).	is exempt under section 501(c)(3) and filed	d Form 5768 (elec	ction under
A B		eck ►	address, EIN, expenses, and s	s to an affiliated group (and list in Part IV each affil hare of excess lobbying expenditures). ed box A and "limited control" provisions apply.	iated group membe	r's name,
<u> </u>	One			ring Expenditures	(a) Filing	
				ans amounts paid or incurred.)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
	b c d e f	Total lo Total lo Other e Total e	bbbying expenditures to influence a bbbying expenditures (add lines 1a exempt purpose expenditures . xempt purpose expenditures (add ng nontaxable amount. Enter th	bublic opinion (grassroots lobbying)		
		If the ar	nount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
		Not ove	r \$500,000	20% of the amount on line 1e.		
		Over \$5	00,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
		Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	L	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
			7,000,000	\$1,000,000.		
	h i	Subtra Subtra	oots nontaxable amount (enter 259 ct line 1g from line 1a. If zero or les ct line 1f from line 1c. If zero or les	ss, enter -0		
	-		ng section 4911 tax for this year?	on either line 1h or line 1i, did the organization		Yes 🗌 No
			4-Yea	ar Averaging Period Under Section 501(h)		

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	<b>(e)</b> Total				
2a	Lobbying nontaxable amount									
b	Lobbying ceiling amount (150% of line 2a, column (e))									
с	Total lobbying expenditures									
d	Grassroots nontaxable amount									
e	Grassroots ceiling amount (150% of line 2d, column (e))									
f	Grassroots lobbying expenditures									

Schedu	le C (Form 990) 2021			Page <b>3</b>
Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	
For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(8	a)	(b)
	iption of the lobbying activity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a h	Volunteers?		~ ~	
b C	Media advertisements?		v	
d	Mailings to members, legislators, or the public?		~	
e	Publications, or published or broadcast statements?		~	
f	Grants to other organizations for lobbying purposes?		~	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		~	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		~	
i	Other activities?	~		5,000
j	Total. Add lines 1c through 1i			5,000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		~	
b	If "Yes," enter the amount of any tax incurred under section 4912		-	
с С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
d Part		-) <i>(</i> 5)		tion
ιαιι	501(c)(6).	,,(J), C	л зес	
1 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members?	e prior	year? <b>or sec</b>	1       2       3       otion       II-A, line 3, is
1	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	s of		
а	Current year		2a	
b	Carryover from last year	•	2b	
С	Total		2c	
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of		3	
4	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?	ying	4	
5	Taxable amount of lobbying and political expenditures. See instructions		5	
2 (See				II-A, lines 1 and

**Supplemental Information.** Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference - Identifier	Explanation
SCHEDULE C, PART II-B, LINE 1 - DETAILED DESCRIPTION OF THE LOBBYING ACTIVITY	LOBBYING EXPENSES INCLUDE A % OF DUES PAID TO GEORGIA CHAMBER OF COMMERCE

SCHEDULE D	)
(Form 990)	

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

2021 **Open to Public** Inspection

OMB No. 1545-0047

Name of the organization	
Internal Revenue Service	
Department of the Treasury	

Employer identification number

MEDIO	CAL CENTER OF CENTRAL GEORGIA, INC.		58-2149128
Par	Organizations Maintaining Donor Advi	sed Funds or Other Similar Fur	ids or Accounts.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a	advisors in writing that the assets h	eld in donor advised
	funds are the organization's property, subject to the	organization's exclusive legal contro	ol? No
6	Did the organization inform all grantees, donors, ar		
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		· · · · · · · 🗌 Yes 🗌 No
Par	I Conservation Easements.		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the c		
	Preservation of land for public use (for example, recreation		of a historically important land area
	Protection of natural habitat	,	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	on in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		<b>2a</b>
b	Total acreage restricted by conservation easements		
c	Number of conservation easements on a certified hi		
ď	Number of conservation easements included in (		
		· · · · · · · · · · · · · ·	
3	Number of conservation easements modified, trans	ferred released extinguished or te	
•	tax year ►		
4	Number of states where property subject to conserv	vation easement is located ►	
5	Does the organization have a written policy reg		pection, handling of
	violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring, inspec	ting handling of violations and enforci	
•			
7	Amount of expenses incurred in monitoring, inspecting	n handling of violations and enforcing	conservation easements during the year
•	► \$	g, harding of violatione, and emotoring	sonoorvation bacomente daning the year
8	Does each conservation easement reported on line 2	2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
Ū	•		
9	In Part XIII, describe how the organization reports co		
	balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easement	nts.	
Part	III Organizations Maintaining Collections	of Art. Historical Treasures. or	Other Similar Assets.
	Complete if the organization answered "		
1a	If the organization elected, as permitted under FAS		
	of art, historical treasures, or other similar assets	•	
	service, provide in Part XIII the text of the footnote t	•	•
b	If the organization elected, as permitted under FAS		
	art, historical treasures, or other similar assets held	•	
	provide the following amounts relating to these item		
			► ¢
	(i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X		· · · · <b>Þ \$</b>
2	If the organization received or held works of art,		*
2	following amounts required to be reported under FA		•
-		-	
a h	Revenue included on Form 990, Part VIII, line 1 .		
	Assets included in Form 990, Part X		
or Pa	perwork Reduction Act Notice, see the Instructions for	Form 990. Cat. No. 52283	D Schedule D (Form 990) 2021

Schedu	le D (Form 990) 2021								Page <b>2</b>
Part	III Organizations Maintaining	<b>Collections of</b>	Art, His	torical T	Freasures,	or Ot	her Similar As	sets (conti	inued)
3	Using the organization's acquisition, collection items (check all that apply):		ther reco	rds, chec	k any of the	e follov	ving that make s	ignificant us	se of its
а	Public exhibition		d	🗌 Loan	or exchange	e progi	am		
b	Scholarly research		е	Other	-				
с	Preservation for future generations	6							
4	Provide a description of the organiza XIII.	tion's collections	and expla	ain how tl	hey further t	the org	anization's exem	npt purpose	in Part
5	During the year, did the organization assets to be sold to raise funds rather								🗌 No
Part	IV Escrow and Custodial Arra	angements.							
	Complete if the organizatior 990, Part X, line 21.	answered "Yes	s" on For	m 990, F	Part IV, line	9, or	reported an arr	ount on F	orm
1a	Is the organization an agent, trustee included on Form 990, Part X?							ot	🗌 No
b	If "Yes," explain the arrangement in P	art XIII and compl	ete the fo	llowing ta	able:			_	_
		·		0			Ar	nount	
с	Beginning balance					10	:		
d	Additions during the year					10			
e	Distributions during the year					16			
f	Ending balance					11			
2a	Did the organization include an amou								
	If "Yes," explain the arrangement in P						•		
Par				<u>xpialiatio</u>	in has been j	provid			
ı aı	Complete if the organization	answered "Ves	" on For	m 000 E	Part IV line	10			
		(a) Current year		or year	(c) Two years		(d) Three years back	(e) Four yea	are back
10	Decimping of year balance			or year	(C) Two years	SDACK	(u) Three years back		ars back
1a ⊾	Beginning of year balance								
b C	Contributions								
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and programs .								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of	the current vear er	nd balanc	e (line 1a	. column (a)	) held	as:		
а	Board designated or quasi-endowme		%	、 U		,			
b	Permanent endowment	%							
c	Term endowment ► %								
Ū	The percentages on lines 2a, 2b, and		00%						
3a	Are there endowment funds not in th			zation the	at are held a	and ad	ministered for th	e	
	organization by:							Ye	s No
	(i) Unrelated organizations							3a(i)	
								3a(ii)	
b	If "Yes" on line 3a(ii), are the related of							3b	
4	Describe in Part XIII the intended uses	-	-			• •		00	
Part					unus.				
Fait	Complete if the organization		" on For	m 000 E	Dart IV/ line	110	See Form 000	Dart V lind	- 10
	· · ·								
	Description of property	(a) Cost or o (investri			or other basis ther)	• • •	Accumulated epreciation	(d) Book va	
1a	Land				20,513,597			20,	513,597
b	Buildings			5	580,038,461		327,742,385	252,	296,076
с	Leasehold improvements				1,965,976		1,893,351		72,625
d	Equipment			2	297,816,509		255,663,933	42,	152,576
е	Other				40,166,592			40,	166,592
Total.	Add lines 1a through 1e. (Column (d) r		90, Part 2	X, column	n (B), line 10	c.) .		355,	201,466

#### Investments-Other Securities. Part VII Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation: (including name of security) Cost or end-of-year market value (1) Financial derivatives . . . (2) Closely held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Investments-Program Related. Part VIII Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation: Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) Other Assets. Part IX Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1) INTERCOMPANY RECEIVABLE 264,894,690 OTHER RECEIVABLES 10,103,540 (2) CONTRIBUTION RECEIVABLE - BEVERLY KNIGHT OLSON CHILDREN HOSPITAL (3) 1,500,000 (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ► 276,498,230 . **Other Liabilities.** Part X Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes POST RETIREE BENEFIT AND NONQUALIFIED BENEFIT PLAN 19,343,234 (2) MEDICARE ADVANCED FUNDING 7,673,497 (3) INTEREST RATE SWAP LIABILITY 8,513,802 (4)FIN 47 ASSET RETIREMENT OBLIGATION 1,242,790 (5) THIRD PARTY SETTLEMENT 7,137,150 (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) . ► 43,910,473 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ~

Schedu	le D (Form 990) 2021		Pag	e <b>4</b>
Part	XI Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered "Yes" on Form 990,		Return.	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	-	
с	Recoveries of prior year grants	2c	-	
d	Other (Describe in Part XIII.)		-	
е	Add lines 2a through 2d		2e	
3	Subtract line <b>2e</b> from line <b>1</b>		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	
Part	XII Reconciliation of Expenses per Audited Financial Stater	nents With Expenses pe	er Return.	
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
с	Other losses			
d	Other (Describe in Part XIII.)			
е	Add lines <b>2a</b> through <b>2d</b>		2e	
3	Subtract line <b>2e</b> from line <b>1</b>		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines <b>4a</b> and <b>4b</b>		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18.)	5	
Part	XIII Supplemental Information.			
2; Par	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part TATEMENT			1e

**Supplemental Information.** Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1 and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference - Identifier	Explanation
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	ATRIUM HEALTH INC., ATRIUM HEALTH NAVICENT, ATRIUM HEALTH FLOYD, NCBH, WFUHS, AND VARIOUS AFFILIATES ARE TAX EXEMPT AS DESCRIBED IN SECTION (C)(3) OF THE INTERNAL REVENUE CODE (THE CODE) AND ARE GENERALLY EXEMPT FROM FEDERAL INCOME TAXES ON RELATED INCOME PURSUANT TO SECTION 501(A) OF THE CODE. AS A NORTH CAROLINA HOSPITAL AUTHORITY, ATRIUM HEALTH CMHA IS ALSO EXEMPT FROM FEDERAL AND STATE INCOME TAXES. ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS MADE IN THE COMBINED FINANCIAL STATEMENTS. IF APPLICABLE, UNRELATED BUSINESS INCOME IS REPORTED BY ALL MEMBERS AND SUBSIDIARY ORGANIZATIONS ON IRS FORM 990-T. FISCAL YEARS ENDING ON OR AFTER JUNE 30, 2018 REMAIN SUBJECT TO EXAMINATION BY FEDERAL AND STATE TAX AUTHORITIES. THE ENTERPRISE AND ITS SUBSIDIARIES HAVE EVALUATED UNCERTAIN TAX POSITIONS FOR THE FISCAL YEAR ENDED DECEMBER 31, 2021, INCLUDING A QUANTIFICATION OF TAX RISKS IN AREAS SUCH AS UNRELATED BUSINESS INCOME AND TAXATION OF FOR-PROFIT SUBSIDIARIES. THIS EVALUATION DID NOT HAVE A MATERIAL EFFECT ON THE ENTERPRISE'S COMBINED FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2021.

(Form 990)				1103	pitais			ന				
► Comp			Complete if the organization answered "Yes" on Form 990, Part IV, question 20.									
	nent of the Treasury Revenue Service	► Go	<ul> <li>► Attach to Form 990.</li> <li>► Go to www.irs.gov/Form990 for instructions and the latest information.</li> </ul>									
Name o	of the organization					Employ	er identification n	umber				
	AL CENTER OF C					58	214	9128				
Par	t Financ	ial Assistanc	e and Certai	in Other Co	mmunity Benefit	s at Cost						
									Yes	No		
1a					ing the tax year? If			1a	-			
ь 2					which of the follow			1b	~			
2					es during the tax ye		application					
	Applied unif				Applied uniform		facilities					
		ilored to individ	-									
3					gibility criteria that	applied to the larg	jest number of					
	the organization											
а	Did the organiz	ation use Fede	eral Poverty Gu	idelines (FPG	as a factor in de	termining eligibility	y for providing					
	free care? If "Ye	es," indicate wh	nich of the follo	wing was the	FPG family income	e limit for eligibility	for free care:	3a	~			
				Other _	%							
b	0				eligibility for provi	0						
		-			for eligibility for dis			3b	~			
						ther%						
С					ining eligibility, des de in the descriptio							
					, as a factor in d							
	discounted care		,g	,	,		.,					
4	Did the organiz	ation's financia	l assistance po	plicy that appl	lied to the largest r	number of its patie	ents durina the					
					Illy indigent"?			4	~			
5a	Did the organizatio	on budget amounts	s for free or disco	unted care provi	ded under its financial	assistance policy duri	ng the tax year?	5a	~			
b	If "Yes," did the	organization's	financial assis	tance expens	es exceed the bud	geted amount?		5b		~		
С			•		s, was the organiz							
			-		scounted care? .			5c	-			
6a					uring the tax year? c?			6a		~		
b					ded in the Schedul			6b				
	these workshee											
7	Financial Assist	ance and Certa	ain Other Comr	nunity Benefit	ts at Cost							
			(a) Number of		(c) Total community	(d) Direct offsetting	(e) Net communi		(f) Perc			
Mean	s-Tested Governr	ment Programs	activities or programs (optional)	served (optional)	benefit expense	revenue	benefit expense	;	of tot exper			
а	Financial Assistar	nce at cost (from										
	Worksheet 1) .				24,717,796		24,717,7			3.41		
b C	Medicaid (from Work Costs of other mean				129,572,707	129,640,412		0		0.00		
•	government program Worksheet 3, colum	ms (from						0		0.00		
لم	Total. Financial As	,								0.00		
d	Means-Tested Gov		0	0	154,290,503	129,640,412	24,717,7	'96		3.41		
	Other Ben	efits										
е	Community health i services and comm	mprovement										
	operations (from W	orksheet 4)			444,391		444,3	91		0.06		
f	Health profession											
	(from Worksheet	,			24,221,553	8,634,089	15,587,4	64		2.15		
g	Subsidized health	•								0.00		
h	Worksheet 6) . Research (from W							0		0.00		
i	Cash and in-kind co	ontributions						-		0.00		
	for community bene Worksheet 8)	efit (from						0		0.00		

**Hospitals** 

. For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Cat. No. 50192T

24,665,944

178,956,447

Schedule H (Form 990) 2021

2.21

5.63

16,031,855

40,749,651

OMB No. 1545-0047

Total. Other Benefits . .

**k** Total. Add lines 7d and 7j

j

SCHEDULE H

8,634,089

138,274,501

# Part II

**Community Building Activities** Complete this table if the organization conducted any community building activities during the tax year, and describe in Part VI how its community building activities promoted the health of the communities it serves.

		(a) Number of activities or programs (optional)	<b>(b)</b> Persons served (optional)	(c) Total community building expense	(d) Direct offsetting revenue	(e) Net community building expense		Percent al exper	
1	Physical improvements and hous	ing				(	)		0.00
2	Economic development					(	)		0.00
3	Community support					(	)		0.00
4	Environmental improvements					(	)		0.00
5	Leadership development and trai	ning							
	for community members					(	)		0.00
6	Coalition building					(	)		0.00
7	Community health improvement advo	ocacy				(	)		0.00
8	Workforce development					(	)		0.00
9	Other						)		0.00
10	Total	0	0	0		0	)		0.00
Par	,	e, & Collection	Practices	5					
Secti	on A. Bad Debt Expense							Yes	No
1	Did the organization report bad deb				0	on Statement No. 15?	1		~
2	Enter the amount of the o								
	methodology used by the org	anization to estim	late this an	nount		<b>2</b> 119,014,854	1		
3	<b>3</b> Enter the estimated amount of the organization's bad debt expense attributable to patients eligible under the organization's financial assistance policy. Explain in Part VI the methodology used by the organization to estimate this amount and the rationale, if any, for including this portion of bad debt as community benefit.								
4	Provide in Part VI the text of		-			escribes bad debt	-		
	expense or the page number	on which this foo	tnote is co	ntained in the atta	ched financial st	atements.			
Secti	on B. Medicare								
5 6 7 8	Enter total revenue received f Enter Medicare allowable cos Subtract line 6 from line 5. Th Describe in Part VI the exter benefit. Also describe in Part on line 6. Check the box that	ts of care relating is is the surplus ( nt to which any VI the costing m	to paymer or shortfall) shortfall re ethodology	nts on line 5			3		
	Cost accounting system	<ul> <li>Cost to character</li> </ul>	arge ratio	Other					
Secti	on C. Collection Practices								
9a	Did the organization have a w	ritten debt collec <sup>-</sup>	tion policy	during the tax yea	r?		9a	~	
b	If "Yes," did the organization's collect								
	on the collection practices to be follo	owed for patients who	are known to	o qualify for financial a	ssistance? Describe	in Part VI	9b	~	
Par	t IV Management Compa	anies and Joint	Ventures	owned 10% or more by off	icers, directors, trustees	, key employees, and physic	ians-se	e instruct	tions)
	(a) Name of entity		scription of p ctivity of entit		(c) Organization's profit % or stock ownership %	(d) Officers, directors, trustees, or key employees' profit % or stock ownership %	(e) Physicians' profit % or stock ownership %		
1	CENTRAL GEORGIA PET, LLC	IMAGING			66.67				33.33
2	CENTRAL GEORGIA HEALTH NETWORK LLC	РНО			29.00				71.00
3								-	
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									

Schedule H (Form 990) 2021

Part V Facility Information										
Section A. Hospital Facilities	Lic	Ge	С Р	Te	Ori	Re	Ŧ	Ŧ		
(list in order of size, from largest to smallest-see instructions)	bense	enera	nildre	achir	itical	sear	9-24	ER-other		
How many hospital facilities did the organization operate during	Licensed hospital	I mec	Children's hospital	Teaching hospital	acce	Research facility	ER-24 hours	e,		
the tax year?1	spita	lical	ospita	spita	ss ho	cility				
Name, address, primary website address, and state license number		General medical & surgical	<u> </u>		Critical access hospital					Facility
(and if a group return, the name and EIN of the subordinate hospital		gical			-					reporting
organization that operates the hospital facility)									Other (describe)	group
1 MEDICAL CENTER OF CENTRAL GA, INC.	1									
777 HEMLOCK STREET, MACON, GA 31201										
WWW.NAVICENTHEALTH.ORG STATE LICENSE NO. :	~	V		~		V	V			
011-104	_									
2										
	-									
	-									
3	-									
	-									
	-									
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37

#### Part V Facility Information (continued)

#### Section B. Facility Policies and Practices

(complete a separate Section B for each of the hospital facilities or facility reporting groups listed in Part V, Section A)

# Name of hospital facility or letter of facility reporting group MEDICAL CENTER OF CENTRAL GA, INC. Line number of hospital facility, or line numbers of hospital facility reporting group (from Part V, Section A): 1

			Yes	No
	nunity Health Needs Assessment			
1	Was the hospital facility first licensed, registered, or similarly recognized by a state as a hospital facility in the current tax year or the immediately preceding tax year?	1		~
2	Was the hospital facility acquired or placed into service as a tax-exempt hospital in the current tax year or the immediately preceding tax year? If "Yes," provide details of the acquisition in Section C.	2		~
3	During the tax year or either of the two immediately preceding tax years, did the hospital facility conduct a community health needs assessment (CHNA)? If "No," skip to line 12	3	~	
	If "Yes," indicate what the CHNA report describes (check all that apply):			
а	<ul> <li>A definition of the community served by the hospital facility</li> </ul>			
b	<ul> <li>Demographics of the community</li> </ul>			
С	Existing health care facilities and resources within the community that are available to respond to the health needs of the community			
d	How data was obtained			
е	The significant health needs of the community			
f	Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups			
g	✓ The process for identifying and prioritizing community health needs and services to meet the community health needs			
h	The process for consulting with persons representing the community's interests			
i	<ul> <li>The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA(s)</li> </ul>			
j	Other (describe in Section C)			
4	Indicate the tax year the hospital facility last conducted a CHNA: 20 20			
5	In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent			
	the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Section C how the hospital facility took into account input from			
	persons who represent the community, and identify the persons the hospital facility consulted	5		
6.0	Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other	5	~	
	hospital facilities in Section C	6a	~	
b	Was the hospital facility's CHNA conducted with one or more organizations other than hospital facilities? If "Yes," list the other organizations in Section C	6b		~
7	Did the hospital facility make its CHNA report widely available to the public?	7	~	
	If "Yes," indicate how the CHNA report was made widely available (check all that apply):			
а	Hospital facility's website (list url): https://navicenthealth.org/our-annual-reports			
b	Other website (list url):			
С	Made a paper copy available for public inspection without charge at the hospital facility			
d	C Other (describe in Section C)			
8	Did the hospital facility adopt an implementation strategy to meet the significant community health needs identified through its most recently conducted CHNA? If "No," skip to line 11	8	~	
9	Indicate the tax year the hospital facility last adopted an implementation strategy: 20 21			
10	Is the hospital facility's most recently adopted implementation strategy posted on a website?	10	~	
а	If "Yes," (list url): https://navicenthealth.org/our-annual-reports			
b	If "No," is the hospital facility's most recently adopted implementation strategy attached to this return?	10b		
11	Describe in Section C how the hospital facility is addressing the significant needs identified in its most			
	recently conducted CHNA and any such needs that are not being addressed together with the reasons why such needs are not being addressed.			
12 a	Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a			
_	CHNA as required by section 501(r)(3)?	12a		~
	If "Yes" to line 12a, did the organization file Form 4720 to report the section 4959 excise tax?	12b		
с	If "Yes" to line 12b, what is the total amount of section 4959 excise tax the organization reported on Form 4720 for all of its hospital facilities? \$			

#### Part V Facility Information (continued)

Financial Assistance Policy (FAP)

#### Name of hospital facility or letter of facility reporting group MEDICAL CENTER OF CENTRAL GA, INC.

		Ye			
	Did t	he hospital facility have in place during the tax year a written financial assistance policy that:			
13		ained eligibility criteria for financial assistance, and whether such assistance included free or discounted care?	13	~	
	_	es," indicate the eligibility criteria explained in the FAP:			
а	~	Federal poverty guidelines (FPG), with FPG family income limit for eligibility for free care of $2 0 0\%$ and FPG family income limit for eligibility for discounted care of $4 0 0\%$			
h					
b C	Н	Income level other than FPG (describe in Section C) Asset level			
d	~	Medical indigency			
е	~	Insurance status			
f	~	Underinsurance status			
g		Residency			
h		Other (describe in Section C)			
14		ained the basis for calculating amounts charged to patients?	14	~	
15		ained the method for applying for financial assistance?	15	~	
		uctions) explained the method for applying for financial assistance (check all that apply):			
а	[r]	Described the information the hospital facility may require an individual to provide as part of his or her			
-		application			
b	~	Described the supporting documentation the hospital facility may require an individual to submit as part			
		of his or her application			
С	~	Provided the contact information of hospital facility staff who can provide an individual with information			
		about the FAP and FAP application process Provided the contact information of nonprofit organizations or government agencies that may be			
d		sources of assistance with FAP applications			
е		Other (describe in Section C)			
16	Was	widely publicized within the community served by the hospital facility?	16	~	
		es," indicate how the hospital facility publicized the policy (check all that apply):			
а	~	The FAP was widely available on a website (list url): (SEE STATEMENT)			
b	~	The FAP application form was widely available on a website (list url): (SEE STATEMENT)			
C	~	A plain language summary of the FAP was widely available on a website (list url): (SEE STATEMENT)			
d	~	The FAP was available upon request and without charge (in public locations in the hospital facility and by mail)			
е	~	The FAP application form was available upon request and without charge (in public locations in the			
		hospital facility and by mail)			
f	~	A plain language summary of the FAP was available upon request and without charge (in public			
		locations in the hospital facility and by mail)			
g	~	Individuals were notified about the FAP by being offered a paper copy of the plain language summary of			
		the FAP, by receiving a conspicuous written notice about the FAP on their billing statements, and via conspicuous public displays or other measures reasonably calculated to attract patients' attention			
h	~	Notified members of the community who are most likely to require financial assistance about availability			
		of the FAP			
i	~	The FAP, FAP application form, and plain language summary of the FAP were translated into the			
		primary language(s) spoken by Limited English Proficiency (LEP) populations			
i		Other (describe in Section C)			

Part V Facility Information (continued) **Billing and Collections** Name of hospital facility or letter of facility reporting group MEDICAL CENTER OF CENTRAL GA, INC. Yes No 17 Did the hospital facility have in place during the tax year a separate billing and collections policy, or a written financial assistance policy (FAP) that explained all of the actions the hospital facility or other authorized party may take upon nonpayment? 17 V 18 Check all of the following actions against an individual that were permitted under the hospital facility's policies during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP: Reporting to credit agency(ies) а Selling an individual's debt to another party b С Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP Actions that require a legal or judicial process d Other similar actions (describe in Section C) е f None of these actions or other similar actions were permitted 19 Did the hospital facility or other authorized party perform any of the following actions during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP? . . . . 19 1 If "Yes," check all actions in which the hospital facility or a third party engaged: Reporting to credit agency(ies) а b Selling an individual's debt to another party Deferring, denying, or requiring a payment before providing medically necessary care due to С nonpayment of a previous bill for care covered under the hospital facility's FAP Actions that require a legal or judicial process d Other similar actions (describe in Section C) е 20 Indicate which efforts the hospital facility or other authorized party made before initiating any of the actions listed (whether or not checked) in line 19 (check all that apply): Provided a written notice about upcoming ECAs (Extraordinary Collection Action) and a plain language summary of the ~ а FAP at least 30 days before initiating those ECAs (if not, describe in Section C) ~ Made a reasonable effort to orally notify individuals about the FAP and FAP application process (if not, describe in Section C) h r С Processed incomplete and complete FAP applications (if not, describe in Section C)

d Made presumptive eligibility determinations (if not, describe in Section C)

e Other (describe in Section C)

## f None of these efforts were made

#### Policy Relating to Emergency Medical Care 21 Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that required the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility under the hospital facility's financial assistance policy? V 21 If "No," indicate why: а The hospital facility did not provide care for any emergency medical conditions b The hospital facility's policy was not in writing The hospital facility limited who was eligible to receive care for emergency medical conditions (describe С in Section C) Other (describe in Section C) d

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Part	V Facility Information (continued)				
Charg	es to Individuals Eligible for Assistance Under the FAP (FAP-Eligible Individuals)				
Name	of hospital facility or letter of facility reporting group MEDICAL CENTER OF CENTRAL GA, INC.				
			Yes	No	
22	Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care.				
а	The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service during a prior 12-month period				
b	The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period				
С	The hospital facility used a look-back method based on claims allowed by Medicaid, either alone or in combination with Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period				
d	The hospital facility used a prospective Medicare or Medicaid method				
23	During the tax year, did the hospital facility charge any FAP-eligible individual to whom the hospital facility provided emergency or other medically necessary services more than the amounts generally billed to individuals who had insurance covering such care?	23		~	
	If "Yes," explain in Section C.				
24	During the tax year, did the hospital facility charge any FAP-eligible individual an amount equal to the gross charge for any service provided to that individual?	24		~	
	If "Yes," explain in Section C.				

**Supplemental Information.** Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

Return Reference - Identifier	Explanation
SCHEDULE H, PART V, SECTION B, LINE 3E - THE SIGNIFICANT HEALTH NEEDS OF THE COMMUNITY	PRIORITIZATION FOR THE MEDICAL CENTER, NAVICENT HEALTH WAS DETERMINED BASED ON A JOINT REGIONAL ON DECEMBER 17. 2020, NAVICENT HEALTH CONVENED ANY ONLINE ALETING WITH COMMUNITY REGIONAL ON DECEMBER 17. 2020, NAVICENT HEALTH CONVENED ANY ONLINE ALETING WITH COMMUNITY STAKEHOLOBER'S (REPRESENTING A CROSS SECTION OF COMMUNITY-BASED AGENCIES AND ORGANIZATIONS) TO EVALUATE, DISCUSS AND PRIORITIZE HEALTH ISSUES FOR COMMUNITY, BASED ON FINDINGS OF THIS COMMUNITY HEALT NEEDS ASSESSMENT (CHNA). PROFESSIONAL RESEARCH CONSULTANTS, INC. (PRC) BEGAN THE VIRTUAL MEETING WITH A PRESENTATION OF KEY FINDINGS FROM THE CHNA, HIGHLIGHTINS THE SIGNIFICANT HEALTH ISSUES IDENTIFIED FROM THE RESEARCH. FOLLOWING THE DATA REVIEW, PRC ANSWERD ANY QUESTIONS. FINALLY, PARTICIPANTS WERE PROVIDED AN OVERVIEW OF THE PRIORITIZATION EXERCISE THAT FOLLOWED. IN ORDER TO ASSIGN PRIORITY TO THE IDENTIFIED HEALTH NEEDS, A WIRELESS AUDIENCE RESPONSE SYSTEM WAS USED IN WHICH EACH PARTICIPANTS WERE ASKED TO EVALUATE EACH HEALTH ISSUE ALONG TWO CRITERIA: 1) SCOPE & SEVERITY 2) ABUITY TO IMPACT INDIVIDUALS RATINGS FOR EACH CRITERIA WERE AVERAGED FOR EACH TESTED HEALTH ISSUE, AND INDIVIDUALS RATINGS FOR EACH CRITERIA WERE AVERAGED FOR EACH TESTED HEALTH ISSUE, AND INDIVIDUALS RATINGS FOR EACH CRITERIA WERE AVERAGED FOR PACH TESTED HEALTH ISSUE, AND INDIVIDUALS RATINGS FOR EACH CRITERIA WERE AVERAGED FOR PACH TESTED HEALTH ISSUE, AND INDIVIDUALS RATINGS FOR EACH CRITERIA WERE AVERAGED FOR PACH TESTED HEALTH ISSUE, AND INDIVIDUALS RATINGS FOR EACH CRITERIA WERE AVERAGED TO PRODUCE AN OVERALL SCORE. THIS PROCESS 3. DECORST DED THE FOLLOWING PRIORITIZED LIST OF COMMUNITY HEALTH NEEDS: 4. DECEMPTORY 4. INDRATH HEALTH 4. INFANT HEALTH & FAMILY PLANNING 5. ACCESS TO HEALTH CARE SERVICES 6. SEXUAL HEALTH 4. INFANT HEALTH & FAMILY PLANNING 5. ACCESS TO HEALTH CARE SERVICES 6. SEXUAL HEALTH 5. ORAL HEALTH 4. SESSIMENT INCORPORATES DATA FROM MULTIPLE SOURCES, INCLUDING PRIMARY RESEARCH (ITHROUGH THE PRC COMMUNITY HEALTH SURVEY AND PRC ONLINE KEY INFORMANT SURVEY), A
	RESULTS GATHERED IN THE PRC COMMUNITY HEALTH SURVEY. THUS, TO ENSURE THE BEST REPRESENTATION OF THE POPULATION SURVEYED A MIXED-MODE METHODOLOGY WAS IMPLEMENTED. THIS INCLUDED SURVEYS CONDUCTED VIA TELEPHONE (LANDLINE AND CELL PHONE), AS WELL AS THROUGH ONLINE QUESTIONNAIRES. THE SAMPLE DESIGN USED FOR THIS EFFORT CONSISTED OF A STRATIFIED RANDOM SAMPLE OF 1,200 INDIVIDUALS AGE 18 AND OLDER IN THE TOTAL AREA, INCLUDING 300 EACH IN BIBB AND HOUSTON COUNTIES, 200 EACH IN PEACH AND BALDWIN COUNTIES, AND 200 IN THE COMBINED OTHER COUNTIES AREA. ONCE THE INTERVIEWS WERE COMPLETED, THESE WERE WEIGHTED IN PROPORTION TO THE ACTUAL POPULATION DISTRIBUTION SO AS TO APPROPRIATELY REPRESENT THE TOTAL AREA AS A WHOLE. ALL ADMINISTRATION OF THE SURVEYS, DATA COLLECTION, AND DATA ANALYSIS WAS CONDUCTED BY PRC. FOR STATISTICAL PURPOSES, THE MAXIMUM RATE OF ERROR ASSOCIATED WITH A SAMPLE SIZE OF 1,200 RESPONDENTS IS +/-2.8% AT THE 95 PERCENT CONFIDENCE LEVEL.
SCHEDULE H, PART V, SECTION B, LINE 6A - CHNA CONDUCTED WITH ONE OR MORE OTHER HOSPITAL FACILITIES	FACILITY NAME: CENTRAL GEORGIA REHABILITATION HOSPITAL, LLC DESCRIPTION: A FREE STANDING SPECIALTY HOSPITAL WITH 58-LICENSED BEDS, CENTRAL GEORGIA REHABILITATION
	HOSPITAL PROVIDES COMPREHENSIVE PHYSICAL REHABILITATION SERVICES ON AN INPATIENT AND OUTPATIENT BASIS.

Return Reference - Identifier	Explanation
SCHEDULE H, PART V, SECTION B, LINE 7D - OTHER METHODS CHNA REPORT MADE WIDELY AVAILABLE	FACILITY NAME: THE MEDICAL CENTER OF CENTRAL GEORGIA, INC. DESCRIPTION: A COPY OF THE CHNA WAS PROVIDED TO MANY COMMUNITY LEADERS AND ORGANIZATIONS.
SCHEDULE H, PART V, SECTION B, LINE 11 - HOW HOSPITAL FACILITY IS ADDRESSING NEEDS IDENTIFIED IN CHNA	FACILITY NAME: THE MEDICAL CENTER OF CENTRAL GEORGIA, INC. DESCRIPTION: THERE WAS A WIDE RANGE OF PRIORITY HEALTH ISSUES IDENTIFIED FROM THE CHNA AND THE CHALLENGE IN RESOURCING EACH OF THEM. IN CONSIDERATION OF THE TOP HEALTH PRIORITIES IDENTIFIED THROUGH THE PROCESS AND IN OVERALL ALIGNMENT WITH THE HOSPITAL'S MISSION, GOALS AND STRATEGIC PRIORITIES. THE HOSPITAL WILL CONTINUE TO FOCUS ON DEVELOPING, SUPPORTING AND COLLABORATING ON STRATEGIES AND INITIATIVES TO IMPROVE HEALTHCARE ACCESS, HEALTH PROMOTION AND DISEASE PREVENTION. CERTAIN SIGNIFICANT HEALTH NEEDS WILL NOT BE ADDRESSED SO THAT RESOURCES ARE UTILIZED IN AREAS WHERE THE HOSPITAL CAN BE MOST EFFECTIVE. SOME NEEDS IDENTIFIED IN THE CHNA ARE BETTER ADDRESSED BY OTHER ORGANIZATIONS THAT ARE BETTER SUITED TO ADDRESS THESE NEEDS. THE MEDICAL CENTER OF CENTRAL GEORGIA WILL USE THE INFORMATION FROM THIS COMMUNITY HEALTH NEEDS IN THE COMMUNITY. WHILE THE HOSPITAL WILL NOT IMPLEMENT STRATEGIES FOR ALL OF THE HEALTH ISSUES LISTED ABOVE, THE RESULTS OF THIS PRIORITIZATION EXERCISE WILL BE USED TO INFORM THE DEVELOPMENT OF THE HOSPITAL'S ACTION PLAN TO GUIDE COMMUNITY HEALTH IMPROVEMENT EFFORTS IN THE COMING YEARS. THE IMPLEMENTATION STRATEGIES REPORT IS POSTED ON THE ORGANIZATION'S WEBSITE.
SCHEDULE H, PART V, SECTION B, LINE 16A - FAP AVAILABLE WEBSITE	https://atriumhealth.org/for-patients-visitors/financial-assistance#helpful-docs
SCHEDULE H, PART V, SECTION B, LINE 16B - FAP APPLICATION FORM WEBSITE	https://atriumhealth.org/for-patients-visitors/financial-assistance#helpful-docs
SCHEDULE H, PART V, SECTION B, LINE 16C - PLAIN LANGUAGE FAP SUMMARY WEBSITE	https://atriumhealth.org/for-patients-visitors/financial-assistance#helpful-docs

Name and address	Type of Facility (describe)
1 PINE POINTE HOSPICE & PALLIATIVE CARE	HOSPICE
6261 PEAKE ROAD	
MACON , GA 31210-8074	
2	
3	
4	
5	
5	
6	
7	
8	
9	
10	

Schedule H (Form 990) 2021

Part V Facility Information (continued)

Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility (list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year?

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Provide the following information.

- 1 Required descriptions. Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II; Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment. Describe how the organization assesses the health care needs of the communities it serves, in addition to any needs assessments reported in Part V, Section B.
- Patient education of eligibility for assistance. Describe how the organization informs and educates patients and persons who may be
   billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 **Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- Promotion of community health. Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 Affiliated health care system. If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report. If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

community benefi	
Return Reference - Identifier	Explanation
SCHEDULE H, PART I, LINE 7 - EXPLANATION OF COSTING METHODOLOGY USED FOR CALCULATING LINE 7 TABLE	HE DATA REPORTED IN PART 1, LINE 7 IS REPORTED AS INSTRUCTED BY THE CATHOLIC HEALTH ASSOCIATION'S "A GUIDE FOR PLANNING AND REPORTING COMMUNITY BENEFITS, 2008". THE COSTS WERE CALCULATED USING THE RATIO OF COSTS TO CHARGES USING WORKSHEET 2 IN THE INSTRUCTIONS TO FORM 990 SCHEDULE H.
SCHEDULE H, PART III, LINE 2 - METHODOLOGY USED TO ESTIMATE BAD DEBT	PATIENT CHARGES WRITTEN OFF TO BAD DEBT REPRESENT THE AMOUNT OF CHARGES CONSIDERED UNCOLLECTIBLE AFTER REASONABLE ATTEMPTS TO COLLECT HAVE BEEN MADE FOR THAT PORTION OF A PATIENT'S BILL THAT ARE NOT OTHERWISE PAID BY THIRD-PARTY INSURANCE, GOVERNMENT PROGRAMS, PATIENT PAYMENTS OR THAT DO NOT QUALIFY FOR WRITEOFF UNDER THE HOSPITAL'S FINANCIAL ASSISTANCE POLICY.
SCHEDULE H, PART III, LINE 4 - FOOTNOTE IN ORGANIZATION'S FINANCIAL STATEMENTS DESCRIBING BAD DEBT	ATRIUM HEALTH ISSUES CONSOLIDATED FINANCIAL STATEMENTS IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES AS PRESCRIBED BY THE GOVERNMENTAL ACCOUNTING STANDARDS BOARD. THERE IS NO COMPREHENSIVE FOOTNOTE THAT ADDRESSES BAD DEBT EXPENSE. PATIENT SERVICE REVENUE IS EXPLAINED IN FOOTNOTE 1(P) ON PAGED 34-35, FINANCIAL ASSISTANCE AND COMMUNITY BENEFIT COSTS ARE DISCUSSED IN FOOTNOTE 15 ON PAGE 107, AND THE USE OF ESTIMATES (WHICH INCLUDES THE USE OF ESTIMATES RELATED TO THE VALUATION OF ACCOUNTS RECEIVABLE, INCLUDING CONTRACTUAL ALLOWANCES AND PROVISIONS FOR BAD DEBTS) IS DISCUSSED IN FOOTNOTE 1(W) ON PAGE 39 OF THE AUDITED FINANCIAL ON STATEMENTS FOR THE CALENDAR YEAR ENDED DECEMBER 31, 2021.
SCHEDULE H, PART III, LINE 8 - DESCRIBE EXTENT ANY SHORTFALL FROM LINE 7 TREATED AS COMMUNITY BENEFIT AND COSTING METHOD USED	THE COSTING METHODOLOGY USES THE COSTS INCLUDED IN THE COST REPORT WHICH ARE CALCULATED USING A DEPARTMENTAL SPECIFIC COST TO CHARGE RATIO AS COMPARED TO ACTUAL MEDICARE PAYMENTS. THE MEDICARE COST REPORT DOES NOT FULLY CAPTURE ALL MEDICARE REVENUE AND COSTS, INCLUDING BUT NOT LIMITED TO PHYSICIAN SERVICES AND MEDICARE PART C. TOTAL MEDICARE LOSSES ARE \$51,698,149.
SCHEDULE H, PART III, LINE 9B - DID COLLECTION POLICY CONTAIN PROVISIONS ON COLLECTION PRACTICES FOR PATIENTS WHO ARE KNOWN TO QUALIFY FOR ASSISTANCE	PATIENTS ARE NOTIFIED OF THE ORGANIZATION'S FINANCIAL ASSISTANCE POLICY PRIOR TO DISCHARGE. AVAILABILITY OF FINANCIAL ASSISTANCE IS ALSO NOTED WITH CONSPICUOUS SIGNAGE THROUGHOUT THE HOSPITAL AND ON THE HOSPITAL'S WEBSITE. EACH BILLING STATEMENT CONTAINS A CONSPICUOUS NOTICE THAT FINANCIAL ASSISTANCE IS AVAILABLE TO INDIVIDUALS THAT QUALIFY. ONCE A PATIENT IS DETERMINED TO QUALIFY FOR FINANCIAL ASSISTANCE, IT IS NOTED IN THE PATIENT'S FINANCIAL RECORD AND ANY COLLECTION EFFORTS CEASE. ANY PREVIOUS AMOUNTS BILLED ARE WRITTEN-OFF (OR REFUNDED IF ANY PAYMENT WAS RECEIVED) AS PROVIDED IN THE FINANCIAL ASSISTANCE POLICY. THE ORGANIZATION REVIEWS THE FINANCIAL ACTIVITY ON OTHER ACCOUNTS TO DETERMINE IF THE ACCOUNTS SHOULD BE TURNED OVER TO OUTSIDE COLLECTIONS. IF A PATIENT ACCOUNT TURNED OVER TO COLLECTIONS IS LATER DETERMINED TO QUALIFY AS FINANCIAL ASSISTANCE, THE ACCOUNT IS BROUGHT BACK FROM COLLECTIONS AND THE ACCOUNT WRITTEN OFF.
SCHEDULE H, PART VI, LINE 2 - NEEDS ASSESSMENT	A COMMUNITY NEEDS ASSESSMENT WAS PERFORMED IN 2020 ON BEHALF OF THE MEDICAL CENTER OF CENTRAL GEORGIA (MCCG) BY PROFESSIONAL RESEARCH CONSULTANTS, INC. (PRC). PRC IS A NATIONALLY RECOGNIZED HEALTHCARE CONSULTING FIRM. IN ADDITION, THE MEDICAL CENTER REGULARLY SOLICITS FEEDBACK ON COMMUNITY HEALTH NEEDS FROM A VARIETY OF SOURCES INCLUDING MEDICAL STAFF MEMBERS AND COMMUNITY LEADERS AS PART OF ITS STRATEGIC PLANNING PROCESS.
SCHEDULE H, PART VI, LINE 3 - PATIENT EDUCATION	PATIENTS ARE INFORMED OF AVAILABLE ASSISTANCE BY THE FOLLOWING METHODS: THE PATIENT IS NOTIFIED UPON ADMISSION OF THE FINANCIAL ASSISTANCE POLICY; SIGNAGE AT ALL ACCESS POINTS INTO THE ORGANIZATION NOTIFIES PATIENTS AND GUESTS OF THE POLICY; AND ALL BILLINGS INCLUDE INFORMATION TO CONTACT THE BUSINESS OFFICE TO APPLY FOR ASSISTANCE. WE ALSO IDENTIFY ALL PATIENTS WITHOUT INSURANCE AND WORK WITH THEM TO OBTAIN MEDICAID COVERAGE IF POSSIBLE. THE ORGANIZATION'S WEBSITE NOTIFIES VISITORS OF AVAILABLE FINANCIAL ASSISTANCE. THE FAP, THE PLAIN LANGUAGE SUMMARY AND THE APPLICATION FOR ASSISTANCE ARE ALSO AVAILABLE ON THE ORGANIZATION'S WEBSITE.
SCHEDULE H, PART VI, LINE 4 - COMMUNITY INFORMATION	THE PRIMARY SERVICE AREA IS BIBB, CRAWFORD, HOUSTON, JONES, MONROE, PEACH AND TWIGGS COUNTIES. THERE ARE TWENTY-ONE COUNTIES IN THE SECONDARY SERVICE AREA. THE CURRENT POPULATION IN THE PRIMARY SERVICE AREA IS 406,725 AND THE SECONDARY SERVICE AREA HAS A POPULATION OF 389,460. MCCG IS THE TERTIARY HOSPITAL FOR THE CENTRAL GEORGIA REGION.

Return Reference - Identifier	Explanation
SCHEDULE H, PART VI, LINE 5 - PROMOTION OF COMMUNITY HEALTH	THE ORGANIZATION IS PART OF A MULTI-ENTITY HEALTHCARE SYSTEM THAT PROVIDES MEDICAL SERVICES TO THE COMMUNITY. THE ORGANIZATION HAS A BOARD COMPRISED OF MEMBERS OF THE COMMUNITY. THE MEDICAL STAFF OF THE HOSPITAL IS OPEN TO ALL QUALIFIED PHYSICIAN APPLICANTS. ANY SURPLUS FUNDS ARE REINVESTED IN THE ORGANIZATION AND USED FOR PROGRAM SERVICES. AN EMERGENCY ROOM OPEN 24/7/365 IS AVAILABLE TO THE COMMUNITY.
SCHEDULE H, PART VI, LINE 6 - DESCRIPTION OF AFFILIATED GROUP	THE ORGANIZATION IS PART OF NAVICENT HEALTH, INC. AND IS ONE OF SEVERAL AFFILIATED ENTITIES COMPRISING THE MULTI-ENTITY HEALTHCARE SYSTEM. ORGANIZATIONS IN THE SYSTEM INCLUDE: AH GEORGIA, INC., A NORTH CAROLINA NON-PROFIT ORGANIZATION, SERVES AS THE SOLE MEMBER OF THE NAVICENT HEALTH, INC. NAVICENT HEALTH SERVES AS THE LOCAL (CENTRAL GEORGIA BASED) PARENT ENTITY OF THE HEALTH SYSTEM. IT ALSO OPERATES CENTRAL GEORGIA REHABILITATION HOSPITAL, INC. THE MEDICAL CENTER OF CENTRAL GEORGIA, INC. IS A 637-BED GENERAL SHORT-TERM ACUTE CARE HOSPITAL FACILITY THAT IS DESIGNATED AS A LEVEL 1 TRAUMA CENTER AND MAGNET HOSPITAL FOR NURSING. HEALTH SERVICES OF CENTRAL GEORGIA, INC. PROVIDES FACULTY PHYSICIANS TO THE RESIDENCY TRAINING PROGRAMS OF THE MEDICAL CENTER OF CENTRAL GEORGIA AS WELL AS OTHER PHYSICIANS, NURSE PRACTITIONERS, AND PHYSICIAN ASSISTANTS. CENTRAL GEORGIA SENIOR HEALTH, INC. IS A LIFE PLAN COMMUNITY (CCRC) OFFERING INDEPENDENT LIVING, ASSISTED LIVING, MEMORY SUPPORT AND SKILLED NURSING. NAVICENT HEALTH BALDWIN, INC. IS A 140-LICENSED BED ACUTE CARE HOSPITAL AND 15-BED SKILLED NURSING FACILITY IN NEARBY BALDWIN COUNTY. THE MEDICAL CENTER OF PEACH COUNTY, INC. IS A 25-BED CRITICAL ACCESS HOSPITAL PRIMARILY SERVING THE RESIDENTS OF PEACH COUNTY, GEORGIA.
SCHEDULE H, PART VI, LINE 7 - STATE FILING OF COMMUNITY BENEFIT REPORT	GA

	DULE J	Compe	nsation Information		OMB No.	1545-0	047
(Form	990)	For certain Officers, Dire	ctors, Trustees, Key Employees, and H mpensated Employees	ighest	20	21	
Donortm	ant of the Treesury	Complete if the organization	on answered "Yes" on Form 990, Part I ▶ Attach to Form 990.	V, line 23.	Open to		
Department of the Treasury Internal Revenue Service       Go to www.irs.gov/Form990 for instructions and the latest information.         Name of the organization       Employer identification							n
	0	CENTRAL GEORGIA, INC.			149128		
Part	Questio	ns Regarding Compensation					
1.	Check the error	un muinte (herrige) if the sum animation and	avided only of the following to by four	novem lieted on Fr		Yes	No
Ta			ovided any of the following to or for a provide any relevant information regard		prm		
	First-class of	or charter travel	Housing allowance or residence	for personal use			
	Travel for co	•	Payments for business use of pe				
	<ul> <li>☐ Tax indemnification and gross-up payments</li> <li>☐ Health or social club dues or initiation fees</li> <li>☐ Discretionary spending account</li> <li>☐ Personal services (such as maid, chauffeur, chef)</li> </ul>						
		ry spending account		chadned, cheij			
b			he organization follow a written poli- penses described above? If "No,"				
					. 1b		
2			r to reimbursing or allowing expe				
		tees, and officers, including the CEC	D/Executive Director, regarding the i	tems checked on I	ine . <b>2</b>		
					_		
3			tion used to establish the compensation and the stabilish the compensation and the stabilish the sta				
			he CEO/Executive Director, but explanation		a		
	Compensat	ion committee	Written employment contract				
	•	t compensation consultant	Compensation survey or study				
		f other organizations	Approval by the board or compe	nsation committee			
4		r, did any person listed on Form 990 r a related organization:	, Part VII, Section A, line 1a, with res	pect to the filing			
а		erance payment or change-of-contro				ン ン	
b C			ntal nonqualified retirement plan? . ased compensation arrangement? .			V	~
· ·	•		rovide the applicable amounts for ea				
5	For persons I		organizations must complete lines in the organization of the farmed and the organization of the organizati		any		
а	0						~
b		ganization?			. 5b		~
	ii res on inc						
6		isted on Form 990, Part VII, Sect contingent on the net earnings of:	ion A, line 1a, did the organizatio	n pay or accrue a	any		
а	The organization	on?			. 6a		~
b		ganization?			. 6b		~
-	For	inted on Form 000 Deat V/II 0 11	n A line to did the survey in the	provide and the C			
7	payments not	described on lines 5 and 6? If "Yes,"	on A, line 1a, did the organization describe in Part III		. 7		r
8	to the initial	contract exception described in	paid or accrued pursuant to a contra Regulations section 53.4958-4(a)(3)	? If "Yes," descr	ibe		~
9			low the rebuttable presumption pr				
For Pa	perwork Reduct	ion Act Notice, see the Instructions for	<b>Form 990.</b> Cat. No. 5005	53T <b>S</b> o	hedule J (Fo	rm 990	0) 2021

## Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2 ar			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
BHALLA VISHAL	(i)	0	0	0	0	0	0	0
1CHIEF HR OFFICER	(ii)	170,985	50,000	101,198	4,964	0	327,147	0
CAROL LOVIN	(i)	0	0	0	0	0	0	0
2BOARD MEMBER	(ii)	787,371	706,786	221,487	188,297	16,103	1,920,044	0
NINFA M SAUNDERS	(i)	0	0	0	0	0	0	0
3PRESIDENT/CEO	(ii)	0	0	1,740,727	0	0	1,740,727	0
DELVECCHIO FINLEY	(i)	0	0	0	0	0	0	0
4PRESIDENT/CEO	(ii)	763,260	150,000	200,158	46,583	18,627	1,178,628	0
SUSAN W HARRIS	(i)	405,548	77,604	168,402	64,210	7,310	723,074	0
5 <sup>COO MEDICAL CENTER NAVICENT HEALTH</sup>	(ii)	0	0	0	0	0	0	0
ROBERT C WILDE	(i)	0	0	0	0	0	0	0
6 <sup>TREASURER</sup>	(ii)	467,778	97,513	22,171	85,905	21,272	694,639	0
KENNETH B BANKS	(i)	0	0	0	0	0	0	0
7SECRETARY	(ii)	441,391	92,598	80,105	36,619	28,198	678,911	0
PATRICE C WALKER, MD	(i)	410,644	71,509	20,420	62,995	29,701	595,269	0
8CHIEF MEDICAL OFFICER	(ii)	0	0	0	0	0	0	0
TRACEY A BLALOCK	(i)	314,952	61,937	73,613	52,026	28,675	531,203	0
9CHIEF NURSING EXECUTIVE	(ii)	0	0	0	0	0	0	0
ELIZABETH A MANN	(i)	255,121	46,141	31,219	9,748	18,653	360,882	0
VP - CARDIOVASCULAR SERVICES AND NURSING 10STRATEGY	(ii)	0	0	0	0	0	0	0
MICHAEL G HAJWORONSKY	(i)	203,672	37,663	39,934	7,891	13,121	302,281	0
11 VP CLINICAL SUPPORT SERVICES	(ii)	0	0	0	0	0	0	0
VALERIE HARRIS	(i)	213,657	0	51,876	16,919	10,077	292,529	0
12CLINICAL NURSE LEAD (WOW)	(ii)	0	0	0	0	0	0	0
A.KARIM JABR	(i)	183,854	5,579	55,752	8,938	24,778	278,901	0
13PERFUSIONIST MANAGER	(ii)	0	0	0	0	0	0	0
DEBRA D RILEY	(i)	202,473	25,929	21,455	8,182	19,085	277,124	0
14AVP NURSING	(ii)	0	0	0	0	0	0	0
	(i)							
15	(ii)							
	(i)							
16	(ii)							

Schedule J (Form 990) 2021

**Supplemental Information.** Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference - Identifier	Explanation
SCHEDULE J, PART I, LINE 3 - ARRANGEMENT USED TO ESTABLISH THE TOP MANAGEMENT OFFICIAL'S COMPENSATION	THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS OF NAVICENT HEALTH, INC. ENGAGES AN EXECUTIVE CONSULTING FIRM PERIODICALLY TO REVIEW AND PROVIDE RECOMMENDATIONS REGARDING TOTAL COMPENSATION AND BENEFITS FOR THE EXECUTIVE LEADERSHIP TEAM. BASE COMPENSATION, INCENTIVE COMPENSATION AND BENEFITS ARE INCLUDED IN THE REVIEW. THE EXECUTIVE CONSULTANTS REVIEW ORGANIZATION STRUCTURE, INDIVIDUAL JOB DESCRIPTIONS, AND DISCUSS SCOPE OF LEADERSHIP AND SPAN OF CONTROL WITH HR, THE COO, AND THE CEO AS A PART OF THE PROCESS TO DETERMINE PROPER PLACEMENT OF THE PAY GRADE AND LEVEL OF PARTICIPATION IN INCENTIVE AND BENEFITS PROGRAMS. THE COMPENSATION COMMITTEE PERIODICALLY REAFFIRMS THE TOTAL COMPENSATION PHILOSOPHY WHICH TARGETS THE 75TH PERCENTILE OF TOTAL COMPENSATION FOR OUR LEADERSHIP TEAM. THE PER GROUP USED IS NATIONAL HOSPITALS AND HEALTH SYSTEMS OF SIMILAR SIZE AND SCOPE. OUR HUMAN RESOURCES DEPARTMENT SURVEYS THOSE EMPLOYED OUTSIDE OF THE EXECUTIVE LEADERSHIP TEAM USING TOOLS THAT PROVIDE COMPARABLE DATA IN OUR MARKET AREA TO ENSURE THE COMPENSATION IS IN LINE WITH OTHER HEALTH CARE ORGANIZATIONS.
SCHEDULE J, PART I, LINE 4B - SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	MCCG HAD A SUPPLEMENTAL EXECUTIVE BENEFIT PROGRAM ("SEBP") FOR CERTAIN EXECUTIVES THAT WAS DESIGNED AS A LOAN REGIME SPLIT DOLLAR LIFE INSURANCE PROGRAM. THIS PROGRAM WAS EXPECTED TO PROVIDE DEATH AND OTHER BENEFITS TO EXECUTIVES AND TO PROVIDE REPAYMENT OF LIFE INSURANCE PREMIUMS TO THE ORGANIZATION.
	AS A RESULT OF ECONOMIC CONDITIONS, THE LIFE INSURANCE POLICIES DID NOT PERFORM AS ANTICIPATED. DURING 2009 MCCG SUSPENDED ALL PREMIUM PAYMENTS AND REEVALUATED THE EFFECTIVENESS OF THE PROGRAM FOR ALL CURRENT PARTICIPANTS. DURING CALENDAR YEAR 2009 THE MCCG BOARD OF DIRECTORS, AFTER CONSULTATION WITH COMPENSATION AND LEGAL ADVISERS, ADOPTED A RESOLUTION TO MAKE PAYMENTS TO THE RETIRED PARTICIPANTS IN THE SEBP. IN CONSIDERATION FOR THE RECEIPT OF SUCH PAYMENT, THE RETIRED EXECUTIVES SURRENDERED SUBSTANTIALLY ALL RIGHTS AND BENEFITS (OTHER THAN A SMALL DEATH BENEFIT) UNDER THE SEBP TO THE ORGANIZATION. SUBSEQUENTLY, A SIMILAR DECISION WAS MADE DURING FISCAL YEAR ENDED SEPTEMBER 30, 2011 FOR THE REMAINING (EMPLOYED) PARTICIPANTS WITH ANY PAYMENTS TO BE MADE DEPENDENT ON THE INDIVIDUAL CONTINUING TO PROVIDE SUBSTANTIAL SERVICES TO A SPECIFIED FUTURE DATE.
	IN ADDITION, MCCG AND ITS AFFILIATED ORGANIZATIONS ADOPTED A SERP PROGRAM FOR CERTAIN EXECUTIVES EFFECTIVE FOR SERVICES RENDERED ON OR AFTER JANUARY 1, 2010. THIS PROGRAM PROVIDES FOR ANNUAL ACCOUNT VESTING IF THE PARTICIPANT IS EMPLOYED ON DECEMBER 31 OF THE THIRD YEAR AFTER THE ACCOUNT IS CREATED. THE BENEFIT EQUALS THE ANNUAL INCREASE IN THE PRESENT VALUE OF A LIFETIME ANNUITY PAYABLE COMMENCING AT A SPECIFIED TARGETED FUTURE DATE. THE ANNUITY IS EQUAL TO A SPECIFIC PERCENTAGE OF FINAL AVERAGE EARNINGS (GENERALLY 60%) LESS (1) THE EXPECTED ANNUAL SEBP PAYMENT USED IN CALCULATING THE SEBP LUMP SUM PAYMENT, (2) THE ANNUAL BENEFIT PROVIDED UNDER THE DEFINED BENEFIT PLAN, AND (3) 100% OF THE PARTICIPANT'S SOCIAL SECURITY BENEFIT. DURING THE YEAR, THE FOLLOWING BENEFITS WERE ACCRUED: NONE
	IN ADDITION, NAVICENT ADOPTED A RETENTION PAYMENT PLAN EFFECTIVE OCTOBER 1, 2011 DESIGNED TO ENCOURAGE DESIGNATED EMPLOYEES TO CONTINUE THEIR EMPLOYMENT. UNDER THE PLAN, NAVICENT HEALTH MAY SELECT A RETENTION CREDIT EQUAL TO A PERCENTAGE OF THE EXECUTIVE'S BASE SALARY. THE CREDIT IS REDUCED BY THE VALUE OF LIFE INSURANCE COVERAGE PROVIDED TO THE EXECUTIVE. IN GENERAL, THE PLAN IS SUBJECT TO VESTING AT THE END OF THE THIRD PLAN YEAR AFTER THE ACCOUNT WAS CREATED OR AGE 65 IF EARLIER, AND IS SUBJECT TO FORFEITURE IF THE EXECUTIVE VOLUNTARILY SEPARATES FROM SERVICE. DURING THE YEAR THE FOLLOWING BENEFITS ACCRUED UNDER THIS PLAN: KEN BANKS \$25,126
	IN ADDITION, NAVICENT ADOPTED A NONQUALIFIED, UNFUNDED DEFERRED COMPENSATION PLAN DESIGNED TO ATTRACT AND RETAIN QUALIFIED MANAGEMENT PERSONNEL. DURING THE YEAR THE FOLLOWING BENEFITS ACCRUED UNDER THIS PLAN: SUSAN HARRIS \$52,707 TRACEY BLALOCK \$42,915 PATRICE WALKER \$52,918 R. CHRIS WILDE \$75,779

## SCHEDULE K (Form 990)

## **Supplemental Information on Tax-Exempt Bonds**

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 58-2149128

#### MEDICAL CENTER OF CENTRAL GEORGIA, INC.

Part I Bond Issues											
(a) Issuer name	(b) Issuer EIN	(b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price		(f) Description of purpose		feased (h) On behalf of issuer		alf of	of   financii		
MACON-BIBB COUNTY HOSPITAL AUTHORITY	58-1034851	NONENONEN	12/18/2019	190,821,789	REFUND BONDS SERIES 2017	Yes	No ✔	Yes	No ✓	Yes	No ✔
В											
С											
D											
Part II Proceeds											

		A	<b>\</b>	E	3	(	)		D
1	Amount of bonds retired		7,625,604						
2	Amount of bonds legally defeased		0						
3	Total proceeds of issue		190,821,789						
4	Gross proceeds in reserve funds		0						
5	Capitalized interest from proceeds		0						
6	Proceeds in refunding escrows		0						
7	Issuance costs from proceeds		0						
8	Credit enhancement from proceeds		0						
9	Working capital expenditures from proceeds		0						
10	Capital expenditures from proceeds		0						
11	Other spent proceeds	190,821,789							
12	Other unspent proceeds		0						
11 12 13	Year of substantial completion		2013						
		Yes	No	Yes	No	Yes	No	Yes	No
4	Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	2							
5	Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?	~							
6	Has the final allocation of proceeds been made?	~							
7	Does the organization maintain adequate books and records to support the final allocation of proceeds?								
or P	aperwork Reduction Act Notice, see the Instructions for Form 990.		Cat. N	No. 50193E				Schedule K (F	orm 990) :

OMB No. 1545-0047

2021

**Open to Public** 

Inspection

Schedule K (Form 990) 2021

Part	III Private Business Use								
			A		В		C		D
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	Yes	No V	Yes	No	Yes	No	Yes	No
2	Are there any lease arrangements that may result in private business use of bond-financed property?		~						
	Are there any management or service contracts that may result in private business use of bond-financed property?	v							
	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?		r						
С	Are there any research agreements that may result in private business use of bond-financed property?	~							
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?		v						
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government •		0.00 %		%		%		%
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		0.00 %		%		%		%
6	Total of lines 4 and 5		0.00 %		%		%		%
7	Does the bond issue meet the private security or payment test?		<ul> <li>✓</li> </ul>		/0				
8a			~						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	v							
Part	V Arbitrage								
	_		A		В		Ç		D
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	Yes	No V	Yes	No	Yes	No	Yes	No
2	If "No" to line 1, did the following apply?								
а	Rebate not due yet?	~							
	Exception to rebate?		~						
	No rebate due?		~						
3	Is the bond issue a variable rate issue?	~							

Schedule K (Form 990) 2021

Schedule K (Form 990) 2021

Part	IV Arbitrage (continued)								
			Α	E	3	(	C		)
4a	Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
	hedge with respect to the bond issue?		~						
b	Name of provider								
C	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								
5a			~						
b	Name of provider								
C	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period? .		~						
7	Has the organization established written procedures to monitor the								
	requirements of section 148?	~							
Part	V Procedures To Undertake Corrective Action								
			Ą	E	3	(	<u> </u>	1	)
	Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No
	of federal tax requirements are timely identified and corrected through the								1
	voluntary closing agreement program if self-remediation isn't available under								1
	applicable regulations?		<ul> <li>✓</li> </ul>						L
Part		ponses to	questions	on Schedu	le K. See i	instructions	<b>.</b>		
(SEE	STATEMENT)								

Page **3** 

**Supplemental Information.** Supplemental Information Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

Return Reference - Identifier	Explanation
SCHEDULE K, PART III, LINE 3B - BOND COUNSEL REVIEW	BOND COUNSEL REVIEWS MANAGEMENT OR SERVICE CONTRACTS DURING DISCOVERY WHEN NEW BOND ISSUES ARE ANTICIPATED.
SCHEDULE K, PART III, LINE 3D - BOND COUNSEL REVIEW	BOND COUNSEL REVIEWS RESEARCH AGREEMENTS DURING DISCOVERY WHEN NEW BOND ISSUES ARE ANTICIPATED.

#### SCHEDULE L (Form 990)

## **Transactions With Interested Persons**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Public spection

Employer identification number

58-2149128

\$

Internal Revenue Service Name of the organization

Department of the Treasury

#### MEDICAL CENTER OF CENTRAL GEORGIA, INC.

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and	(c) Description of transaction	(d) Cor	rected?
•		organization		Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
2	Enter the amount of tax incurre	ed by the organization managers or dise	qualified persons during the year		
	under section 4958				
3	Enter the amount of tax, if any, o	on line 2. above. reimbursed by the organi	zation		

Enter the amount of tax, if any, on line 2, above, reimbursed by the organization

#### Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	<b>(b)</b> Relationship with organization	<b>(c)</b> Purpose of Ioan	from	an to or 1 the zation?	<b>(e)</b> Original principal amount	(f) Balance due	<b>(g)</b> In c	lefault?		oroved oard or hittee?	(i) Wr agreer	
			То	From			Yes	No	Yes	No	Yes	No
(1) (SEE STATEMENT)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						\$ 35,762,945						
Part III Grants or Ass	sistance Bene	fiting Interest	ed Pers	sons.		· · ·						

## Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 50056A Schedule L (Form 990) 2021

	()	interested person and the organization	transaction		organiz rever	zation's nues?
					Yes	No
	STATEMENT)					
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9) (10)						
Part V	Supplemental Information. Provide additional informatio	n for responses to questions	on Schedule L (see	instructions).		<u> </u>

(e) Sharing of

(d) Description of transaction

(a) Name of interested person

Part IV	Business Transactions Involving Interested Persons.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(b) Relationship between

(c) Amount of

(a)	(b)	(c)	(	d)	(e)	(f)	(	g)	(1	1)	<b>(</b> i	)
Name of interested person	Relationship with organization	Purpose of loan		or from the iization	Original principal amount	Balance due	In de	efault?	Approved or com	l by board mittee?	Wri agree	
	-		То	From			Yes	No	Yes	No	Yes	No
(1) ALFRED D. FAULK - SPLIT DOLLAR INS. LOAN				~	4,764,065	10,636,258		1	1		1	
(2) ALFRED D. FAULK - SPLIT DOLLAR INS. LOAN				1	458,584	900,098		1	1		1	
(3) ALFRED D. FAULK - SPLIT DOLLAR INS. LOAN				~	115,000	208,197		~	~		~	
(4) ANDREW GALLOWAY - SPLIT DOLLAR INS. LOAN				~	375,677	838,737		1	~		~	
(5) ANDREW GALLOWAY - SPLIT DOLLAR INS. LOAN				1	150,000	294,416		1	1		1	
(6) ANDREW GALLOWAY - SPLIT DOLLAR INS. LOAN				~	230,000	499,119		1	~		~	
(7) ANDREW GALLOWAY - SPLIT DOLLAR INS. LOAN				~	230,000	466,744		~	~		~	
(8) ANDREW GALLOWAY - SPLIT DOLLAR INS. LOAN				~	203,992	369,310		~	~		~	
(9) BARB STICKEL - SPLIT DOLLAR INS. LOAN				~	979,436	2,186,692		~	~		<	
(10) BARB STICKEL - SPLIT DOLLAR INS. LOAN				~	219,691	431,204		~	~		~	
(11) BARB STICKEL - SPLIT DOLLAR INS. LOAN				~	235,540	426,424		1	~		~	
(12) BETH PEARSON - SPLIT DOLLAR INS. LOAN				~	20,000	44,653		~	~		<	
(13) BETH PEARSON - SPLIT DOLLAR INS. LOAN				~	25,000	49,069		1	~		~	
(14) BETH PEARSON - SPLIT DOLLAR INS. LOAN				1	25,000	54,253		1	1		1	
(15) BETH PEARSON - SPLIT DOLLAR INS. LOAN				~	25,000	50,733		~	~		<	
(16) BETH PEARSON - SPLIT DOLLAR INS. LOAN				~	21,000	38,019		~	~		<	
(17) DAWN COLE - SPLIT DOLLAR INS. LOAN				~	53,000	118,327		~	~		~	
(18) DAWN COLE - SPLIT DOLLAR INS. LOAN				~	58,000	113,841		~	~		~	
(19) DAWN COLE - SPLIT DOLLAR INS. LOAN				~	58,000	125,864		1	~		~	
(20) DAWN COLE - SPLIT DOLLAR INS. LOAN				~	58,000	117,701		1	1		1	
(21) DAWN COLE - SPLIT DOLLAR INS. LOAN				~	55,000	99,572		1	1		1	
(22) DEBBIE ORR - SPLIT DOLLAR INS. LOAN				1	349,590	780,498		1	1		1	
(23) DEBBIE ORR - SPLIT DOLLAR INS. LOAN				~	143,606	281,866		~	1		~	
	1	L	1	Image: A start of the start				✓	✓			

MEDICAL CENTER OF CENTRAL GEORGIA, INC. - 58-2149128

(a)	(b)	(c)	(	d)	(e)	(f)	(	g)	(	ו)	<b>(</b> i	i)
Name of interested person	Relationship with organization	Purpose of loan		or from the ization	Original principal amount	Balance due	In de	efault?		l by board mittee?	Wri agree	
	5		То	From			Yes	No	Yes	No	Yes	No
(24) ELBERT MCQUEEN - SPLIT DOLLAR INS. LOAN					61,000	110,436						
(25) ETHEL CULLINAN - SPLIT DOLLAR INS. LOAN				~	636,204	1,420,389		~	~		<	
(26) ETHEL CULLINAN - SPLIT DOLLAR INS. LOAN				~	37,479	73,564		1	1		~	
(27) ETHEL CULLINAN - SPLIT DOLLAR INS. LOAN				~	161,243	291,916		~	~		~	
(28) JOSEPH LAVELLE - SPLIT DOLLAR INS. LOAN				~	110,000	245,586		1	1		~	
(29) JOSEPH LAVELLE - SPLIT DOLLAR INS. LOAN				~	110,000	215,907		1	1		~	
(30) JOSEPH LAVELLE - SPLIT DOLLAR INS. LOAN				~	170,000	368,913		~	~		~	
(31) JOSEPH LAVELLE - SPLIT DOLLAR INS. LOAN				~	170,000	344,985		1	1		~	
(32) JOSEPH LAVELLE - SPLIT DOLLAR INS. LOAN				~	135,000	244,405		1	1		~	
(33) KEN BANKS - SPLIT DOLLAR INS. LOAN				~	228,829	510,884		1	1		~	
(34) KEN BANKS - SPLIT DOLLAR INS. LOAN				1	82,000	160,947		1	1		1	
(35) KEN BANKS - SPLIT DOLLAR INS. LOAN				1	82,000	177,946		1	1		1	
(36) KEN BANKS - SPLIT DOLLAR INS. LOAN				~	82,000	166,405		1	1		~	
(37) KEN BANKS - SPLIT DOLLAR INS. LOAN				1	48,000	86,899		1	1		1	
(38) LARRY PARKS - SPLIT INS. LOAN				~	359,594	802,829		1	1		~	
(39) LARRY PARKS - SPLIT INS. LOAN				~	150,000	294,416		1	~		~	
(40) LARRY PARKS - SPLIT INS. LOAN				~	150,000	325,512		1	~		~	
(41) LARRY PARKS - SPLIT INS. LOAN				~	108,904	221,001		1	1		~	
(42) LOUIS GOOLSBY, M.D SPLIT DOLLAR INS. LOAN				~	953,762	2,129,369		1	1		1	
(43) LOUIS GOOLSBY, M.D SPLIT DOLLAR INS. LOAN				~	269,000	527,987		~	~		~	
(44) LOUIS GOOLSBY, M.D SPLIT DOLLAR INS. LOAN				1	269,000	583,751		1	1		1	
(45) LOUIS GOOLSBY, M.D SPLIT DOLLAR INS. LOAN				~	269,000	545,888		1	1		1	
(46) MARCIA HUTCHINSON - SPLIT DOLLAR INS. LOAN				1	155,000	280,613		1	1		1	
(47) MICHAEL GILSTRAP - SPLIT DOLLAR INS. LOAN				1	2,941,423	6,567,025		1	1		1	
(48) MICHAEL GILSTRAP - SPLIT				~	451,034	885,280		$\checkmark$	1		~	

MEDICAL CENTER OF CENTRAL GEORGIA, INC. - 58-2149128

(a)	(b)	(c)	(	d)	(e)	(f)	(	g)	(1	n)	(i	)
Name of interested person	Relationship with organization	Purpose of loan		or from the nization	Original principal amount	Balance due	In de	efault?		l by board mittee?	Writ agreei	
	_		То	From			Yes	No	Yes	No	Yes	No
DOLLAR INS. LOAN												
(49) MICHAEL GILSTRAP - SPLIT DOLLAR INS. LOAN				1	250,000	452,602		~	~		~	
(50) MICHAEL VADEN - SPLIT DOLLAR INS. LOAN				1	232,111	518,212		1	1		1	
(51) MICHAEL VADEN - SPLIT DOLLAR INS. LOAN				~	110,000	215,907		1	~		~	
(52) MICHAEL VADEN - SPLIT DOLLAR INS. LOAN				~	110,000	238,709		~	~		<	
(53) MICHAEL VADEN - SPLIT DOLLAR INS. LOAN				1	110,000	223,225		1	~		1	
(54) MICHAEL VADEN - SPLIT DOLLAR INS. LOAN				~	76,000	137,591		1	~		<	
(55) PATRICIA D'ERRICO - SPLIT INS. LOAN				~	50,000	111,629		~	~		~	
(56) PATRICIA D'ERRICO - SPLIT INS. LOAN				~	50,000	98,139		1	~		~	
(57) PATRICIA D'ERRICO - SPLIT INS. LOAN				1	50,000	108,504		1	~		~	
(58) PATRICIA D'ERRICO - SPLIT INS. LOAN				1	50,000	101,466		1	~		~	
(59) PATRICIA D'ERRICO - SPLIT INS. LOAN				1	49,000	88,710		1	~		1	
(60) RAYMOND T. OLMER - SPLIT DOLLAR INS. LOAN				~	2,191,396	4,892,513		1	~		~	
(61) RAYMOND T. OLMER - SPLIT DOLLAR INS. LOAN				1	222,887	437,477		1	~		~	
(62) RAYMOND T. OLMER - SPLIT DOLLAR INS. LOAN				~	184,000	333,115		1	~		~	
(63) RHONDA PERRY - SPLIT DOLLAR INS. LOAN				~	509,455	1,137,410		1	~		<	
(64) RHONDA PERRY - SPLIT DOLLAR INS. LOAN				~	260,000	510,321		~	~		<	
(65) RHONDA PERRY - SPLIT DOLLAR INS. LOAN				~	260,000	564,220		1	~		<	
(66) RHONDA PERRY - SPLIT DOLLAR INS. LOAN				~	260,000	527,624		1	~		~	
(67) RHONDA PERRY - SPLIT DOLLAR INS. LOAN				~	143,000	258,889		~	✓		~	
(68) TOM SANDS, JR SPLIT DOLLAR INS. LOAN				~	30,000	66,980		1	~		~	
(69) TOM SANDS, JR SPLIT DOLLAR INS. LOAN				~	34,000	66,735		1	~		~	
(70) TOM SANDS, JR SPLIT DOLLAR INS. LOAN				~	34,000	73,781		1	~		~	
(71) TOM SANDS, JR SPLIT DOLLAR INS. LOAN				~	34,000	68,998		1	~		~	
(72) TOM SANDS, JR SPLIT DOLLAR INS. LOAN				~	30,000	54,312		1	~		~	

MEDICAL CENTER OF CENTRAL GEORGIA, INC. - 58-2149128

(a)	(b)	(c)	(	d)	(e)	(f)	(	g)	(1	1)	(	i)
Name of interested person	Relationship with organization	Purpose of loan	Loan to o organ	r from the ization	Original principal amount	Balance due	In de	efault?		l by board mittee?	Wri agree	tten ment?
	_		То	From			Yes	No	Yes	No	Yes	No
(73) VIRGIL COOPER - SPLIT INS. LOAN				~	1,012,536	2,260,588		~	~		~	
(74) VIRGIL COOPER - SPLIT INS. LOAN				~	358,905	649,766		~	~		1	
(75) GAAP ADJUSTMENT TO CSV				~	(1,891,558)	(15,148,926)		~	~		1	

Part IV Business Transactions Involving Interested Persons (continued)

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	zation's
				Yes	No
(1) WALTER HUTCHINGS	FAMILY MEMBER OF A BOARD MEMBER	\$50,675	MR HUTCHINGS WORKED AS A CONTRACT PHYSICIAN FOR THE MEDICAL CENTER OF CENTRAL GEORGIA, INC.		~
(2) COURTNEY A JOHNSTON	FAMILY MEMBER OF BOARD MEMBER	\$39,158	MS JOHNSTON IS EMPLOYED AS A SPEECH THERAPIST FOR THE MEDICAL CENTER OF CENTRAL GA, INC.		~

# Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

- Attach to Form 990 or 990-EZ.
- Go to www.irs.gov/Form990 for the latest information.



Department of Treasury Internal Revenue Service

## Name of the Organization MEDICAL CENTER OF CENTRAL GEORGIA, INC.

Open to Public Inspection Employer Identification Number 58-2149128

Return Reference - Identifier		E	xplanation		
FORM 990, PART I, LINE 1 - BRIEF MISSION	HEALTHCARE SERVICES FC AND OTHER HEALTH CARE SURROUNDING AREAS.				
FORM 990, PART III, LINE 4A - PROGRAM SERVICE DESCRIPTION	EDUCATION SITE. THE MED BUILDINGS, HOSPICE OF CE				
FORM 990, PART IV, LINE 14B - INVESTMENTS	NAVICENT HEALTH, INC. OV AND TO ADDITIONAL INFOR ARE HELD FOR THE BENEFI STATEMENT PURPOSES AR	MATION RETURN R	EPORTING REQU	REMENTS. THESE TRAL GEORGIA AN	INVESTMENTS
FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS	NAVICENT HEALTH, INC. (A CENTER OF CENTRAL GEOI HEALTH, INC. THE SOLE ME AUTHORITY, A GOVERNMEN	RGIA, INC. AHNH ĜI MBER OF AHNH, IN	EORGIA, INC. IS TH IC. IS THE CHARLO	HE SOLE MEMBER ( OTTE-MECKLENBUR	OF NAVICENT
FORM 990, PART VI, LINE 7A - MEMBERS OR STOCKHOLDERS ELECTING MEMBERS OF GOVERNING BODY	NAVICENT HEALTH, INC. (A CENTER OF CENTRAL GEOI DIRECTORS. THE TWO MEM GEORGIA, INC., A TAX-EXEM SECTION 501(C)(3).	RGIA, INC. AND ÀPF IBERS NOT APPOIN	POINTS ALL BUT T ITED BY NAVICEN	WO MEMBERS OF I T ARE APPOINTED	TS BOARD OF BY AHNH
FORM 990, PART VI, LINE 7B - DECISIONS REQUIRING APPROVAL BY MEMBERS OR STOCKHOLDERS	CERTAIN ACTIONS OF THE (THE SOLE MEMBER OF THE NAVICENT HEALTH, INC.). T INCORPORATION OR BYLAV ORGANIZING ANY SUBSIDIA ADOPTING A PLAN OF LIQU PROVIDING FOR THE SALE, ASSETS OF THE CORPORA BUDGETS; AND AMENDING	E ORGANIZATION) HESE ACTIONS INC WS: APPOINTMENT RY: PARTICIPATIN IDATION, MERGER MORTGAGE OR O TION; ADOPTING O	AND AHNH GEORG CLUDE: AMENDING OR REMOVAL OF G IN ANY JOINT VE OR CONSOLIDATI THER DISPOSITIOI R AMENDING ANN	GIA, INC. (THE SOLE OR RESTATING THE THE PRESIDENT A ENTURE OR PARTN ON; ENTERING AN N OF ALL OR SUBS UAL CAPITAL AND	MEMBER OF HE ARTICLES OF ND CEO; IERSHIP; ( TRANSACTION TANTIALLY ALL
FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY	THE FORM 990 WAS PREPA MANAGEMENT AND FROM F ADVISOR (AN INDEPENDEN CENTER OF CENTRAL GEO MEMBER PRIOR TO FILING	FINANCIAL STATEM T ACCOUNTANT) A RGIA. A COPY OF T	ENTS. IT WAS REV ND BY FINANCIAL HE FORM 990 WAS	/IEWED BY OUR OU MANAGEMENT OF S PROVIDED TO EA	JTSIDE TAX THE MEDICAL
FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY	THE DEPARTMENT OF AUDI OUR BOARD MEMBERS, AD REVIEWS AND DOCUMENTS TAKEN TO THE COMPLIANC IDENTIFIED, DISCUSSED, AN ACTION RECOMMENDATION IMPLEMENTATION. ANY TIM EVOLVES, THE INDIVIDUALS INDIVIDUALS ARE PROHIBIT REGARDING SUCH TRANSA COMPLIANCE COMMITTEE.	MINISTRATION AND ALL POTENTIAL C COMMITTEE WHI ND A PLAN FOR CO IS ARE TAKEN TO E A CHANGE IN A F MUST AMEND THI ED FROM PARTICI	D DIRECTORS. AUD ONFLICTS (PERCE ERE THE REAL CO RRECTIVE ACTION THE VARIOUS BOA RELATIONSHIP OR EIR COI DISCLOSU PATING IN DELIBE	DIT AND COMPLIAN EIVED AND REAL.) INFLICTS OF INTER IS DEVELOPED. T RDS AND ADMINIS NEW POTENTIAL ( IRE FORM. CONFLI RATIONS AND DEC	ICE RECEIVES, ITHE RESULTS ARE EST ARE THE CORRECTIVE TRATION FOR CONFLICT CTED ISIONS
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	MCCG PROVIDES COPIES C	OF ITS GOVERNING	AND OTHER COM	PANY DOCUMENTS	SUPON REQUEST.
FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES	(a) Description	<b>(b)</b> Total Expenses	(c) Program Service Expenses	(d) Management and General Expenses	(e) Fundraising Expenses
	CONTRACT LABOR - OUTSIDE AGENCIES	15,651,367	13,540,024	2,111,343	
	CONSULTING & MANAGEMENT	967,698	377,325	590,373	
	PROFESSIONAL FEES- CONTRACT & THIRD PARTY	47,709,941	41,346,290	6,363,651	
	CORP EXPENSE ALLOCATIONS	114,162,025	45,043,560	69,118,465	
	Total	178,491,031	100,307,199	78,183,832	0

Explanation	
(a) Description	(b) Amount
CHANGES IN INTEREST RATE SWAP	2,917,899
PENSION/ OPEB-2021	8,451,836
ASBESTOS VALUATION ADJUSTMENT	- 10,153
PENSION/OPEB-2020	- 1,185,206
	(a) Description CHANGES IN INTEREST RATE SWAP PENSION/ OPEB-2021 ASBESTOS VALUATION ADJUSTMENT

## SCHEDULE R (Form 990)

## **Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Internal Revenue Service Name of the organization

Department of the Treasury

MEDICAL CENTER OF CENTRAL GEORGIA, INC.

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I

(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year assets	<b>(f)</b> Direct controlling entity
(1)CENTRAL GEORGIA MEDICAL PROPERTIES, LLC 777 HEMLOCK STREET, MSC 111, MACON, GA 31201	PHYSICIAN RELATIONSHIPS	GA	0	0	MEDICAL CENTER OF CENTRAL GEORGIA
(2) CENTRAL GEORGIA CVI PROPERTIES, LLC 777 HEMLOCK ST, MSC 111, MACON, GA 31201	PHYSICIAN RELATIONSHIPS	GA	0	0	MEDICAL CENTER OF CENTRAL GEORGIA
(3)					
(4)					
(5)					
(6)					

Part II

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	<b>(e)</b> Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	Section cont	<b>(g)</b> 512(b)(13 trolled tity?
						Yes	No
(1) CENTRAL GEORGIA SENIOR HEALTH, INC. (58-2345439)	CONTINUING CARE RETIREMENT COMMUNITY	GA	501(C)(3)	12 TYPE II	NAVICENT		~
777 HEMLOCK STREET, MSC 111, MACON, GA 31201					HEALTH, INC.		
(2) HEALTH SERVICES OF CENTRAL GEORGIA, INC. (58-2307485)	HEALTH SERVICES	GA	501(C)(3)	3	NAVICENT		~
777 HEMLOCK STREET, MSC 111, MACON, GA 31201					HEALTH, INC.		
(3) NAVICENT HEALTH, INC. (58-2149127)	HEALTHCARE SERVICES, PARENT ENTITY/STRATEGIC &	GA	501(C)(3)	12 TYPE III-FI	AHNH GEORGIA,		~
777 HEMLOCK STREET, MSC 111, MACON, GA 31201	FINANCIAL MANAGEMENT				INC.		
(4) THE MEDICAL CENTER OF PEACH COUNTY, INC (45-3765471)	HOSPITAL	GA	501(C)(3)	3	NAVICENT		~
777 HEMLOCK STREET, MSC 111, MACON, GA 31201					HEALTH, INC.		
(5) NAVICENT HEALTH BALDWIN, INC. (82-3914925)	HOSPITAL	GA	501(C)(3)	3	NAVICENT		~
777 HEMLOCK STREET, MSC 111, MACON, GA 31201					HEALTH, INC.		
(6) AH GEORGIA, INC. (83-1707383)	SOLE MEMBER	NC	501(C)(3)	7	THE CHAROLOTTE- MECKLENBURG		~
PO BOX 32862, CHARLOTTE, NC 28232-2861	NAVICENT HEALTH				HOSPITAL AUTHORITY		
(7) (SEE STATEMENT)							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.



**Open to Public** 

Inspection

Employer identification number

58-2149128

Cat. No. 50135Y

Part III Identification of F because it had on	Related Organization e or more related orga	s Taxable	e as a Partners treated as a pa	ship. Complete it artnership during	f the organiza the tax year	ation answere	ed "Y	es" o	n Form 990, Pa	art IV	', line	34,		
<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	<b>(d)</b> Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under	<b>(f)</b> Share of total income	(g) Share of end-of- year assets	Disprop	<b>h)</b> ortionate itions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	<b>(j)</b> General or managing partner?		General or managing partner?		<b>(k)</b> Percentage ownership
		country)		sections 512-514)			Yes	No		Yes	No			
(1) (SEE STATEMENT)														
(2)														
(3)														
(4)														
(5)														
(6)														



Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Direct controlling entity	<b>(e)</b> Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	total Share of Perce e end-of-year assets own			<b>(i)</b> 512(b)(13) trolled tity?
								Yes	No
(1) (SEE STATEMENT)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Schedule R (Form 990) 2021

Part V

Note	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one of	or more related orgar	izations listed in Parts	II–IV?		
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity			1a	~	
b	Gift, grant, or capital contribution to related organization(s)			1b		~
С	Gift, grant, or capital contribution from related organization(s)			<b>1</b> c		~
d	Loans or loan guarantees to or for related organization(s)			1d		~
е	Loans or loan guarantees by related organization(s)			1e		~
f	Dividends from related organization(s)			1f		~
g	Sale of assets to related organization(s)			1g		~
h	Purchase of assets from related organization(s)			1h		~
i	Exchange of assets with related organization(s)			<b>1</b> i		~
j	Lease of facilities, equipment, or other assets to related organization(s)			<b>1</b> j	~	
k	Lease of facilities, equipment, or other assets from related organization(s)			1k	~	
I.	Performance of services or membership or fundraising solicitations for related organization(s)			11		~
m	Performance of services or membership or fundraising solicitations by related organization(s)			1m	~	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) .			<b>1</b> n		~
ο	Sharing of paid employees with related organization(s)			10	~	
р	Reimbursement paid to related organization(s) for expenses				~	
q	Reimbursement paid by related organization(s) for expenses			<b>1</b> q	~	
r	Other transfer of cash or property to related organization(s)				~	
S	Other transfer of cash or property from related organization(s)				~	
2	If the answer to any of the above is "Yes," see the instructions for information on who must con	mplete this line, inclu	uding covered relations	ships and transaction th	reshol	ds.
	(a) Name of related organization	(b)	(c)	(d)		
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amo	unt invo	ivea
	NTRAL GEORGIA PET, LLC		770.000			
		S	772,000	CASH DISTRIBUTION PAYMENT RECEIVE		
<u>(1)</u>	NTRAL GEORGIA PET, LLC	Q	452,253	CASH	<u> </u>	
(2)		Q	402,203	onori		
(2)						
(2)						
(3)						
(4)						
_(=)						
(5)						
(6)						
			11	Schedule R (Fo	rm 990	) 2021

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

## Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

	<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	income (related, unrelated, excluded	Are all sec 501	tion (c)(3)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	( Gene mana part	ral or aging	<b>(k)</b> Percentage ownership
				sections 512–514)	Yes	No			Yes	No		Yes	No	
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														
(8)														
(9)														
(10)														
(11)														
(12)														
(13)														
(14)														
(15)														
(16)														

Schedule R (Form 990) 2021

Part II	Identification of Related Tax-Exempt Organizations (continued)
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(a) Name, address and EIN of related organization	<b>(b)</b> Primary Activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	<b>(g)</b> So 512(b controlle	o)(13)
						Yes	No
(7) THE CHARLOTTE-MECKLENBURG HOSPITAL AUTHORITY (56-0529945) 1000 BLYTHE BLVD., CHARLOTTE, NC 28203	HEALTHCARE	NC			N/A		~
(8) FLOYD HEALTHCARE MANAGEMENT, INC. (58-1973570) 304 TURNER MCCALL BLVD., ROME, GA 30162-0233	HOSPITAL	GA	501(C)(3)		AH GOERGIA, INC.		~

#### Identification of Related Organizations Taxable as a Partnership (continued)

(a) Name, address and EIN of related organization	(b) Primary Activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income related, unrelated, excluded from tax under sections 512- 514	(f) Share of total income	assets	s	opor ate ation ?	(i) Code V - UBI amount in box 20 of Schedule K- 1 (Form 1065)	Ger c mana part	ieral or aging ner?	<b>(k)</b> Percentage ownership
(1) SECURE HEALTH PLANS OF GEORGIA, LLC (58-2306549) 577 MULBERRY STREET, SUITE 1000, MACON, GA 31201	MANAGED CARE	GA	N/A	N/A	N/A	N/A	Yes		N/A	Yes	-	N/A
	MEDICAL IMAGING CENTER	GA	MEDICAL CENTER OF CENTRAL GEORGIA	RELATED	655,599	1,016,365		✓	C		~	66.67
(3) COWLES CLINIC REALTY, LLC (81-0636590) 1000 COWLES CLINIC WAY #C100, GREENSBORO, GA 30642	HEALTHCARE REAL ESTATE	GA	MCCG	RELATED	201,944	5,182,405		1	C			51.00
(4) MACON OUTPATIENT SURGERY, LLC (20- 3027560) 3708 NORTHSIDE DRIVE, MACON, GA 31210	PHYSCIAN SERVICES	GA	N/A	RELATED	N/A	N/A			N/A			N/A

## Part IV Identification of Related Organizations Taxable as a Corporation or Trust (continued)

(a) Name, address and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C-corp, S-corp or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Se 512(b contr enti	olled
								Yes	No
(1) CENTRAL GEORGIA HEALTH VENTURES, INC. (58- 2164989) 777 HEMLOCK STREET, MSC 111, MACON, GA 31201	MANAGEMENT & HOME CARE SERVICES	GA	N/A	C CORPORATION	N/A	N/A	N/A		>
(2) CENTRA PROFESSIONAL INDEMNITY, LTD. P.O. BOX 1363, GRAND CAYMAN, CJ	SELF-INSURANCE	CAYMAN ISLANDS	N/A	C CORPORATION	N/A	N/A	N/A		~
(3) NAVICENT HEALTHPLAN, INC. (20-2467391) 777 HEMLOCK STREET, MSC 111, MACON, GA 31201	INSURANCE	GA	N/A	C CORPORATION	N/A	N/A	N/A		~



# **Atrium Health Enterprise**

Atrium Health Charlotte-Mecklenburg Hospital Authority and Atrium Health Wake Forest Baptist (under the common management of Atrium Health, Inc.)

Combined Financial Statements and Other Financial Information (With Independent Auditors' Report Thereon)

December 31, 2021

## **Atrium Health Enterprise**

## **Combined Financial Statements**

## December 31, 2021

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KPMG LLP Suite 1000 620 S. Tryon Street Charlotte, North Carolina 28202-1842

### **Independent Auditors' Report**

The Board of Directors Atrium Health, Inc.:

### Opinions

We have audited the financial statements of the business-type activities, fiduciary activities, and the discretely presented component unit of The Charlotte-Mecklenburg Hospital Authority (Atrium Health CMHA), the combined financial statements of Wake Forest University Baptist Medical Center and Affiliates, North Carolina Baptist Hospital and Affiliates and Wake Forest University Health Sciences and Affiliates (collectively, Atrium Health Wake Forest Baptist), and the combined financial statements of Atrium Health CMHA and Atrium Health Wake Forest Baptist (collectively, Atrium Health Enterprise), as of and for the year ended December 31, 2021, and the related notes to the financial statements for each respective entity, which collectively comprise the basic financial statements for each respective entity as listed in the table of contents.

### Unmodified Opinion on U.S. Generally Accepted Accounting Principles – Atrium Health CMHA

In our opinion, the accompanying financial statements referred to above of Atrium Health CMHA present fairly, in all material respects, the respective financial position of the business type activities, fiduciary activities, and the aggregate discretely presented component unit of Atrium Health CMHA as of December 31, 2021, and the respective changes in financial position and, where applicable, cash flows thereof for the year then ended, in accordance with U.S. generally accepted accounting principles.

#### Unmodified Opinion on U.S. Generally Accepted Accounting Principles – Atrium Health Wake Forest Baptist

In our opinion, the accompanying combined financial statements referred to above of Atrium Health Wake Forest Baptist present fairly, in all material respects, the financial position of Atrium Health Wake Forest Baptist as of December 31, 2021, and the results of its operations and changes in net assets, and its cash flows for the year then ended, in accordance with U.S. generally accepted accounting principles.

## Unmodified Opinion on Accounting Principles as Promulgated by the Financial Accounting Standards Board (FASB) – Atrium Health Enterprise

In our opinion, the accompanying combined financial statements referred to above of Atrium Health Enterprise present fairly, in all material respects, the financial position of Atrium Health Enterprise as of December 31, 2021, and the results of its operations and changes in net assets and its cash flows for the year then ended in accordance with accounting principles as promulgated by FASB.

KPMG LLP, a Delaware limited liability partnership and a member firm of the KPMG global organization of independent member firms affliated with KPMG International Limited, a private English company limited by guarantee.



## Adverse Opinion on U.S. Generally Accepted Accounting Principles – Atrium Health Enterprise

In our opinion, because of the significance of the matter discussed in the Matter Giving Rise to Adverse Opinion section of our report, the combined financial statements of Atrium Health Enterprise referred to above do not present fairly the financial position of Atrium Health Enterprise as of December 31, 2021, or the results of its operations and changes in net assets and its cash flows for the year then ended in accordance with U.S. generally accepted accounting principles.

### Basis for Unmodified and Adverse Opinions

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audits of the Financial Statements section of our report. We are required to be independent of Atrium Health CMHA, Atrium Health Wake Forest Baptist, and Atrium Health Enterprise 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 opinions.

## Matter Giving Rise to Adverse Opinion - Atrium Health Enterprise

As described in Note 1 to the combined financial statements, Atrium Health CMHA is a governmental entity as defined by the Governmental Accounting Standards Board (GASB) and represents 73.7% and 69.4% of Atrium Health Enterprise's total assets and revenues, respectively. Accordingly, accounting principles as promulgated by GASB are the appropriate accounting principles for Atrium Health CMHA to follow. However, Atrium Health Enterprise, which includes Atrium Health CMHA, has prepared its combined financial statements in accordance with accounting principles as promulgated by FASB. The effects on the combined financial statements of Atrium Health Enterprise of the variances between the accounting policies described in Note 1 and U.S. generally accepted accounting principles for governmental entities, although not reasonably determinable, are presumed to be material and pervasive.

## Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the respective financial statements of Atrium Health CMHA, Atrium Health Wake Forest Baptist, and Atrium Health Enterprise in accordance with U.S. generally accepted accounting principles, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of the respective financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the respective financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Atrium Health CMHA's, Atrium Health Wake Forest Baptist's and Atrium Health Enterprise's ability to continue as a going concern for one year after the date that the respective financial statements are available to be issued.

#### Auditors' Responsibilities for the Audits of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the respective financial statements as a whole for each entity are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinions. 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 GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material likelihood that, individually or in the aggregate, they would influence the



judgment made by a reasonable user based on the respective financial statements. In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audits.
- Identify and assess the risks of material misstatement of the respective 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 each of the respective financial statements.
- Obtain an understanding of internal control relevant to the audits in order to design audit procedures that
  are appropriate in the circumstances, but not for the purpose of expressing opinions on the effectiveness of
  Atrium Health CMHA's, Atrium Health Wake Forest Baptist's, and Atrium Health Enterprise's internal
  control. Accordingly, no such opinions are 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 respective financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Atrium Health CMHA's, Atrium Health Wake Forest Baptist's, and Atrium Health Enterprise'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 audits, significant audit findings, and certain internal control related matters that we identified during the audits.

## Required Supplementary Information

U.S. generally accepted accounting principles require that management's discussion and analysis on pages 5 through 14, the schedules of changes in the net pension liability and related ratios - Atrium Health Charlotte Defined Benefit Plan, the schedules of pension contributions - Atrium Health Charlotte Defined Benefit Plan, the schedules of pension plan investment returns - Atrium Health Charlotte Defined Benefit Plan, the schedules of changes in the net pension liability and related ratios - Atrium Health Navicent Defined Benefit Plan, the schedules of pension contributions - Atrium Health Navicent Defined Benefit Plan, the schedules of pension plan investment returns - Atrium Health Navicent Defined Benefit Plan, the schedules of changes in the net pension liability and related ratios - Atrium Health Floyd Defined Benefit Plan, the schedules of pension contributions - Atrium Health Floyd Defined Benefit Plan, and the schedules of pension plan investment returns - Atrium Health Floyd Defined Benefit Plan on pages 113-130 be presented to supplement the basic financial statements of Atrium Health CMHA. Such information is the responsibility of management and, although not a part of the basic financial statements of Atrium Health CMHA, is required by GASB who considers it to be an essential part of financial reporting for placing the basic financial statements of Atrium Health CMHA in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with GAAS, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements of Atrium Health CMHA, and other knowledge we obtained during our audit of the basic financial statements of Atrium Health CMHA. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with evidence sufficient to express an opinion or provide any assurance.



#### Supplementary Information

Our audits were conducted for the purpose of forming opinions on the respective financial statements as a whole of Atrium Health CMHA, Atrium Health Wake Forest Baptist, and Atrium Health Enterprise.

The supplementary combining information of Atrium Health CMHA (including CMHA Combined Group, Atrium Health Navicent and Atrium Health Floyd) on pages 131 – 139 is presented for purposes of additional analysis and is not a required part of the financial statements of Atrium Health CMHA. 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 financial statements of Atrium Health CMHA. The information has been subjected to the auditing procedures applied in the audit of the financial statements of Atrium Health CMHA. The information has been subjected to the auditional procedures, including comparing and reconciling such information directly to the underlying accounting accounting and other records used to prepare the financial statements of Atrium Health CMHA or to the financial statements themselves of Atrium Health CMHA, and other additional procedures in accordance with GAAS. In our opinion, the combining information is fairly stated in all material respects in relation to the financial statements of Atrium Health CMHA as a whole.

The supplementary combining information of Atrium Health Wake Forest Baptist on pages 140 – 141 is presented for purposes of additional analysis and is not a required part of the combined financial statements of Atrium Health Wake Forest Baptist. 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 of Atrium Health Wake Forest Baptist. The information has been subjected to the auditing procedures applied in the audit of the combined financial statements of Atrium Wake Forest Baptist 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 of Atrium Health Wake Forest Baptist or to the combined financial statements themselves of Atrium Health Wake Forest Baptist, and other additional procedures in accordance with GAAS. In our opinion, the information is fairly stated in all material respects in relation to the combined financial statements of Atrium Health Wake Forest Baptist.



Charlotte, North Carolina May 19, 2022

(d/b/a Atrium Health CMHA) Management's Discuss and Analysis - Unaudited

## December 31, 2021

Dollars in thousands.

This Management's Discussion and Analysis provides an overview of the financial position and results of activities of Atrium Health Charlotte-Mecklenburg Hospital Authority (Atrium Health CMHA) for the years ended December 31, 2021 and 2020. Atrium Health CMHA follows guidance from the Governmental Accounting Standards Board (GASB) as it is a governmental entity. This discussion and analysis has been prepared by management and is required supplemental information to the basic financial statements of Atrium Health CMHA and the notes that follow this section. Except as otherwise noted, the financial highlights in this analysis refer exclusively to Atrium Health CMHA's Primary Enterprise as described in note 1 of the notes to the combined financial statements, including Atrium Health Charlotte, Atrium Health Navicent and Atrium Health Floyd.

Certain information set forth in the following discussion contains "forward-looking statements" regarding the future oriented financial information, business plans and the future performance of Atrium Health CMHA and the health care industry that are based on the beliefs and assumptions of the management of Atrium Health CMHA and the information available to management at the time that these disclosures were prepared. Words such as "expects," "plans," "believes," "will" and other similar expressions are intended to identify these forward-looking statements. Such statements are subject to factors that could cause actual results to differ materially from anticipated results. Readers are cautioned not to place undue reliance on these forward-looking statements, which speak only as of the date of this report. Actual results may differ materially from those expressed in or implied by any forward-looking statements. Atrium Health CMHA undertakes no obligation to revise or update publicly any forward-looking statements for any reason.

## **Atrium Health CMHA Overview**

- In March 2020, the World Health Organization declared the outbreak of a novel coronavirus (COVID-19) as a pandemic. COVID-19 has continued to affect Atrium Health CMHA and the communities it serves through 2021. In response to the pandemic and to preserve resources for patients infected with COVID-19, Atrium Health CMHA, at various times throughout the pandemic depending on regional surges of COVID-19 infections and the implementation of local and state "stay at home" orders, ceased or curtailed non-essential procedural patient care such elective surgeries, resulting in significant unexpected revenue declines. Throughout the pandemic, Atrium Health CMHA has continued to make financial commitments to ensure the safety of its patients and the well-being of its teammates. As a result, the financial impact of the pandemic to Atrium Health CMHA has been decreases in volumes and revenues from non-COVID patients while simultaneously increasing the cost of care for all patients. Revenue losses from the pandemic were partially, but not completely, offset by Federal stimulus funding recorded as nonoperating income. For more information on the impact of COVID-19, see note 1 of the notes to the combined financial statements.
- In October 2020, Atrium Health CMHA and Wake Forest Baptist Health (Atrium Health WFB) became part of the Enterprise pursuant to an Enterprise Agreement among AHI, Atrium Health CMHA and Wake Forest University Baptist Medical Center (WFUBMC), which is the joint operating company for North Carolina Baptist Hospital (NCBH) and affiliates and Wake Forest University Health Sciences (WFUHS) and affiliates, and related agreements, which included a Health System Integration Agreement between AHI, Atrium Health CMHA, WFUBMC, Wake Forest University Health Sciences, North Carolina Baptist Hospital, and Wake Forest University (WFU) (collectively, the Enterprise

(d/b/a Atrium Health CMHA) Management's Discuss and Analysis - Unaudited

### December 31, 2021

Dollars in thousands.

agreements). Each Enterprise participant and its affiliates maintain their separate legal existence and continue to own their assets. Each Enterprise participant retains all power, authorities, rights and remedies necessary or appropriate to allow it to comply with its pre-existing debt instruments and any new debt instruments. Nothing in the Enterprise agreements is intended to constitute the actual or implied assumption or guaranty by any Enterprise participant of any other Enterprise participant's debt or other liabilities, and all debt and other liabilities of each Enterprise participant will remain the debt and liabilities of such Enterprise participant regardless of when incurred, except as otherwise expressly agreed in writing.

• Effective July 2021, AH Georgia, Inc., a Georgia not-for-profit corporation of which Atrium Health CMHA is the sole member, became the sole corporate member of Floyd Healthcare Management, Inc. (Floyd), which with its affiliates does business as Atrium Health Floyd in northwest Georgia and northeast Alabama, pursuant to a Member Substitution Agreement among Atrium Health CMHA, AH Georgia, Inc., and Floyd. The financial information of Atrium Health Floyd has been blended within Atrium Health CMHA for all periods presented in this discussion and analysis. For more information on the arrangement, see note 1 of the notes to combined financial statements.

#### **Overview of the Basic Financial Statements**

This discussion and analysis is intended to serve as an introduction to Atrium Health CMHA's basic financial statements and the notes to the basic financial statements. This report also contains other required supplementary information in addition to the basic financial statements.

The Governmental Accounting Standards Board (GASB) requires three financial statements: the statement of net position (balance sheet); the statement of revenues, expenses and changes in net position; and the statement of cash flows.

The balance sheet; statement of revenue, expenses and changes in net position; and statement of cash flows are presented on an accrual basis, in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP). This information provides an indication of Atrium Health CMHA's financial health. The balance sheet includes all of Atrium Health CMHA's assets, deferred outflows of resources, liabilities, and deferred inflows of resources, as well as an indication about which assets can be utilized for general purposes and which are restricted as a result of bond covenants or other agreements. The statement of revenue, expenses, and changes in net position reports the revenue and expenses during the periods indicated. The statement of cash flows reports the cash provided and used by operating activities, as well as other cash sources, such as investment income, and other cash uses, such as repayment of debt and purchase of capital.

Atrium Health CMHA applies the provisions of GASB Statement No. 84, *Fiduciary Activities*, which establishes criteria for identifying fiduciary activities of governments and how those activities should be reported. As a result, the Statement of Fiduciary Net Position, and the Statement of Changes in Fiduciary Net Position for all Atrium Health CMHA defined benefit plans have been presented with the basic financial statements. Notes to the basic financial statements provide additional information that is essential for a full understanding of the data provided in the basic financial statements. Required supplementary information relates to Atrium Health CMHA's progress in funding its obligation to provide pension benefits to its employees.

(d/b/a Atrium Health CMHA) Management's Discuss and Analysis - Unaudited

### December 31, 2021

#### **Financial Analysis and Results of Operations**

Assets, deferred outflows of resources, liabilities, deferred inflows of resources, and net position at December 31 are summarized in Table 1 and are discussed below:

#### Table 1 – Summary Balance Sheet

	2021	2020
Current assets Capital assets – net Other noncurrent assets	\$ 2,584,506 4,684,832 8,619,941	\$ 2,457,811 4,287,914 7,376,624
Total assets	15,889,279	14,122,349
Deferred outflows of resources	396,387	464,512
Total assets and deferred outflows of resources	\$ 16,285,666	\$ 14,586,861
	2021	2020
Current liabilities Long-term liabilities	\$ 2,959,159 3,844,074	\$ 2,620,414 3,751,902
Total liabilities	6,803,233	6,372,316
Deferred inflows of resources	277,416	41,232
Net investment in capital assets Restricted – by donor Unrestricted	1,628,733 35,919 7,540,365	1,471,247 76,861 6,625,205
Total net position	9,205,017	8,173,313
Total liabilities, deferred inflows of resources and net position	\$ 16,285,666	\$ 14,586,861

Atrium Health CMHA classifies net position as net investment in capital assets, restricted – by donor, and unrestricted. The change in net investment in capital assets over the prior year was driven by debt principal payments and additional capital expenditures. The unrestricted net position increase for the year ended December 31, 2021 was driven primarily by operating performance, and favorable investment returns.

The net position of Atrium Health CMHA at December 31, 2021 increased \$1,031,704 from December 31, 2020. The increase in net position was due to positive results of operations of \$322,279 and nonoperating gains of \$830,981, offset by capital and other contributions of \$121,556.

Atrium Health CMHA's cash and investment position at December 31, 2021 and 2020 was \$8,410,364 and \$7,921,561, respectively.

(d/b/a Atrium Health CMHA) Management's Discuss and Analysis - Unaudited

## December 31, 2021

Dollars in thousands.

Days cash on hand for the Atrium Health CMHA Combined Group, which consists of all entities that have either a direct obligation (Obligated Group) or indirect obligation (Designated Affiliates, of which there are currently none) to pay amounts due on Atrium Health CMHA's bonds, was 393 and 409 at December 31, 2021 and 2020, respectively.

More detailed information about Atrium Health CMHA's cash, investments and other financial instruments is presented in notes 2, 4 and 5 of the notes to the combined financial statements.

#### **Revenues and Expenses**

Revenues, expenses and changes in net position are summarized in Table 2 and are discussed below:

(d/b/a Atrium Health CMHA)

Management's Discuss and Analysis - Unaudited

## December 31, 2021

Dollars in thousands.

	2021	2020
Operating revenues and support: Net patient service revenue Other operating revenue	\$     8,120,786 851,750	\$    6,973,229 795,500
Total operating revenues	8,972,536	7,768,729
Operating expenses: Personnel costs Supplies Purchased services Other operating expenses Depreciation and amortization	5,119,128 1,772,428 635,616 728,597 394,488	4,686,855 1,607,038 637,920 611,197 383,311
Total operating expenses	8,650,257	7,926,321
Operating income (loss)	322,279	(157,592)
Nonoperating gains (losses): Interest expense Stimulus grants Interest and dividend income Net change in the fair value of investments WFBH academic endowment and enrichment funds Other, net	(107,429) 181,510 96,180 664,512 - (3,792)	(88,033) 305,526 74,288 692,305 (220,000) (23,396)
Total nonoperating gains	830,981	740,690
Excess of revenues over expenses before contributions	1,153,260	583,098
Capital contributions Other contributions	7,748 (129,304)	19,419 (5,594)
Increase in net position	1,031,704	596,923
Beginning net position	8,173,313	7,576,390
Ending net position	\$ 9,205,017	\$ 8,173,313

# Table 2 – Statement of Revenues, Expenses, and Changes in Net Position

#### **Operating Revenues**

Operating revenues in 2021 increased 15.5% from 2020 largely due to increases in hospital and physician practice patient volumes, and growth of other operating revenues. Other operating revenues increased 7.1%, primarily as a result of retail pharmacy sales. More detail of operating revenue can be found in notes 1 and 14 of the notes to combined financial statements.

#### **Operating Expenses**

Operating expenses in 2021 increased 9.1% from the prior year. Personnel costs, comprising 59.2% of the total Atrium Health CMHA operating expenses in 2021, increased due to volume growth at hospital facilities, increases in physician practice providers and staffing support, continued COVID-related salaries

(d/b/a Atrium Health CMHA) Management's Discuss and Analysis - Unaudited

## December 31, 2021

Dollars in thousands.

and benefits and annual market adjustments across Atrium Health CMHA. Other expenses, consisting primarily of pharmaceutical and supply costs, professional fees, rent and purchased services, increased 9.8%, primarily due to higher patient volumes, continued COVID-related expenses and inflationary cost increases, including the cost of new technologies.

## **Nonoperating Gains and Losses and Contributions**

Nonoperating gains and losses, which consists primarily of realized and unrealized investment returns, was impacted favorably in 2021 by the market value appreciation of Atrium Health CMHA's investments. As a governmental entity, Atrium Health CMHA is required to record all investment market value changes as a component of nonoperating gains (losses).

Nonoperating activity from Atrium Health CMHA's investment return on equity, fixed income, and cash investments was a \$760,692 gain in 2021 and a \$766,593 gain in 2020.

Interest and dividend income on Atrium Health CMHA's investment portfolio in 2021 was \$96,180 and net realized and unrealized gains on the portfolio were \$664,512 The net realized/unrealized gains were due to positive performance of investments throughout 2021.

Management presents portfolio performance to the respective regional Committees and Boards that maintain oversight over investment and financial performance on a quarterly basis. Management meets regularly with investment consultants to review portfolio and investment manager performance and to identify and recommend changes to the investment strategy for consideration by the respective Finance or Investment Oversight Committees. Investment expenses consist of fees paid to Atrium Health CMHA's investment managers, investment consultants, and custodians.

Nonoperating gains and losses in 2021 also included \$181,510 in grant revenues related to Federal stimulus legislation. Other net nonoperating expenses were \$3,792 and \$23,396 for the years ended December 31, 2021 and 2020, respectively. The decrease was due primarily to contract termination and settlement expenses that were not related to ongoing operations in 2020.

Other contributions of \$129,304 consisted primarily of payments made to the Floyd-Polk Healthcare Foundation in connection with the closing of the strategic combination with Atrium Health Floyd in July, 2021.

(d/b/a Atrium Health CMHA) Management's Discuss and Analysis - Unaudited

#### December 31, 2021

#### **Capital Assets and Debt Administration**

#### **Capital Assets**

Capital assets, net of depreciation and impairment at December 31, 2021 and 2020 are summarized in Table 3 and are discussed below.

## Table 3 – Capital Assets, Net of Depreciation and Impairment

	2021	2020
Land	\$ 328,477	\$ 327,763
Buildings and land improvements	5,145,764	4,753,826
Equipment	2,965,945	3,080,013
Construction in progress	984,472	703,488
Subtotal	9,424,658	8,865,090
Accumulated depreciation	(4,739,826)	(4,577,176)
Total	\$ 4,684,832	\$ 4,287,914

During the current fiscal year, significant additions to capital assets in excess of \$10,000 included the following:

Union West New Hospital and Medical Office Buildings Atrium Health Pineville New Bed Tower Greater Charlotte Epic Electronic Health Record Carolinas Medical Center Tower and Infrastructure Upgrades Land Acquisition in Center City Charlotte Market Navicent Epic Electronic Health Record and Revenue Cycle Carolinas Rehabilitation Replacement Facility Musculoskeletal Institute	\$ 103,462 69,708 63,336 59,387 56,053 48,628 47,613 21,807
, , ,	•

(d/b/a Atrium Health CMHA) Management's Discuss and Analysis - Unaudited

December 31, 2021

Dollars in thousands.

During the prior fiscal year, significant additions to capital assets in excess of \$10,000 included the following:

Carolinas Medical Center Tower and Infrastructure Upgrades	\$ 60,983 56,707
Kenilworth Medical Office Buildings I & II	56,797
Land Acquisition in Center City Charlotte Market	44,647
Greater Charlotte Epic Electronic Health Record	41,684
Union West New Hospital and Medical Office Buildings	34,163
Atrium Health Pineville New Bed Tower	31,308
Atrium Health Pineville Medical Office Building	29,075
Navicent Epic Electronic Health Record and Revenue Cycle	27,357
Oracle Enterprise Resource Planning	23,391
Musculoskeletal Institute	17,259
Information and Analytics Services OneCloud	16,350
Strategic Land Acquisitions	14,494

Ongoing capital requirements are funded from a combination of operating cash, debt proceeds, and contributions. Atrium Health CMHA's annual capital budget for 2021 and 2020 was \$795,659 and \$937,561, respectively. Cash outflows related to capital additions, net of retirements, for 2021 and 2020 totaled \$788,946 and \$665,767, respectively. Total depreciation expense on capital assets was \$388,396 and \$381,862 for 2021 and 2020, respectively. At December 31, 2021, Atrium Health CMHA has planned future capital spending of approximately \$4,274,369 for 2022-2026 for ongoing routine and significant strategic IT and facility expansion projects. More detailed information about Atrium Health CMHA's capital assets is presented in note 7 of the notes to the combined financial statements.

## Long-Term Debt

Atrium Health Charlotte can issue debt on behalf of the CMHA Combined Group members as established under its Second Amended and Restated Bond Order, as further amended (the Bond Order). Likewise, Atrium Health Navicent can borrow on behalf of its Obligated Group members as established under its Amended and Restated Master Trust Indenture, as further amended (the Master Trust Indenture).

Debt service for the CMHA Combined Group (scheduled principal and interest payments and net interest rate swap payments, excluding refinancing activity) for 2021 and 2020 totaled \$80,331 and \$158,881, respectively.

The actual annual debt service coverage ratio for the CMHA Combined Group, as defined in the Bond Order (and excluding net interest rate swap payments), for 2021 and 2020 was 15.10 and 5.33, respectively. The Bond Order requires an actual annual debt service coverage ratio of not less than 1.1.

In February 2022, the CMHA Combined Group refunded the outstanding 2012A bonds with proceeds from the issuance of the 2022A bonds.

In January 2022, Atrium Health Navicent extended the holding periods of its Series 2017 A and Series 2017 B Revenue Anticipation Certificates aggregating \$225,530 and its \$60,000 taxable Variable Term Loan to January 2027.

(d/b/a Atrium Health CMHA) Management's Discuss and Analysis - Unaudited

### December 31, 2021

Dollars in thousands.

In December 2021, Atrium Health Floyd entered into a Variable Term Loan with a financial institution for \$179,000 maturing in 2043 with an initial holding period expiring in January 2027.

More detailed information about Atrium Health CMHA's outstanding debt is presented in note 9 of the notes to the combined financial statements.

## **Events and Factors Expected to Impact Future Periods**

Healthcare is a capital-intensive industry that requires significant reinvestment to keep pace with patient care advancements and technology transformations occurring in the marketplace. An entity's ability to reinvest to meet its longer-term capital and program needs hinges on its ability to perform well financially. Healthcare providers, given the on-going COVID-19 pandemic, have experienced significant disruption to financial performance and capital reinvestment plans. We believe that Atrium Health CMHA, with its geographic dispersion; world-class providers and services; financial strength; balanced with its mission to provide health, hope and healing for all is well positioned to meet the demands of our fast-changing industry as well as to navigate the disruptions of the on-going pandemic.

Financial performance disruption due to the COVID-19 pandemic has primarily occurred due to patient volume decreases coupled with increased costs of patient care. Healthcare facilities have reacted to continuing surges of COVID-19 patients by "scaling down and ramping up" non-essential patient care services, which negatively impacts financial performance through reductions in higher margin services as well as impeding healthcare providers' abilities to appropriately flex costs. The high transmissibility of COVID-19 variants continues to impact consumer confidence, such that when providers do "ramp up" non-essential patient care services, many patients are still choosing to forgo preventative care, elective procedures, and other traditional outpatient services. A January 2022 study from The Hartford, found 43% of US workers have delayed routine care citing "fear of contracting COVID-19" as the highest reason. In their recent Not-For-Profit Outlook, Moody's Investor Services noted, "Recovery in patient volumes will continue to be choppy" in 2022. The magnitude of future COVID-19 patient surges and the return of consumer confidence are unknowns in the months and years ahead, but the negative financial impacts of both are expected to continue for health care providers.

Aside from the COVID-19 pandemic, healthcare providers expect an increase in reimbursement pressures in the future. Lower margins for insurance companies, along with the recently implemented federal rules requiring hospitals to make negotiated rates publicly available, will likely result in tougher contract negotiations yielding lower than inflation reimbursement rate increases. As the population continues to age, the shift away from commercial payers to lower reimbursement governmental payers is anticipated to drive healthcare revenues lower. Additionally, Medicare sequestration, the process designed to annually reduce federal government healthcare spending by 2% is expected to resume in the second quarter of 2022 and CARES Act funding is unlikely to continue in 2022 as most of the designated government funds have been distributed and it is doubtful, given other priorities, that Congress would allocate more. External pressures on revenue streams are not new to the industry, but they are expected to intensify as governmental and commercial payers continue to try to bend the growth curve in healthcare spending.

(d/b/a Atrium Health CMHA)

Management's Discuss and Analysis - Unaudited

### December 31, 2021

Dollars in thousands.

Moody's Investor Services cites, "labor costs indeed are the challenge that the sector is facing over the next year and will result, in our opinion, in driving expenses at a rate higher than revenue growth". At the start of the pandemic, some providers initially chose to lay-off or furlough staff during periods of non-essential services shut-downs. Others took the opposite stance, anticipating high staffing needs for impending COVID-19 patient surges. Regardless of the initial responses, staffing costs across almost all providers have increased compared to pre-pandemic periods due to higher overtime rates and premium pay, wages paid to employees unable to work due to quarantine, wages for additional staff for screening and testing centers, and most notably, utilization of more expensive contract staff. While labor concerns were on the horizon prior to the pandemic, it is quite clear that COVID-19 exacerbated and accelerated the industry's significant shortage of clinical labor. According to the National Institutes of Health, the United States faced a shortage of roughly 1 million nurses in 2020, and since then, that shortage has only grown as many nurses continue to leave the field due to burnout and fatigue associated with COVID-19. To fill the gaps in staff, many hospitals have had to turn to travel nurses, which is more costly now than ever before.

All health care providers must meet the challenges of fluctuating patient volumes, changing consumer confidence, reimbursement pressures, and the on-going shortage of clinical care givers. Atrium Health CMHA remains committed to its mission to provide health, hope and healing for all. With its history of meeting past challenges, a strong governing board; an experienced management team; a broad, growing and connected continuum of highly specialized world-class clinical services; and a commitment to superior levels of quality and safety, differentiated patient experience, operational and population health excellence, and teammate engagement; Atrium Health CMHA is positioned to meet the demands of this on-going pandemic and the fast-changing industry in which we operate.

#### **Finance Contact**

Atrium Health CMHA's financial statements are designed to present users with a general overview of Atrium Health CMHA's finances and to demonstrate Atrium Health CMHA's accountability. If you have any questions about the report or need additional financial information, please contact the Vice President of Finance, Atrium Health, 1000 Blythe Boulevard, Charlotte, NC 28203.

#### Atrium Health Enterprise

Combined Balance Sheets - Atrium Health Enterprise

December 31, 2021

Dollars in thousands.

	Atrium Health Charlotte- Mecklenburg Hospital Authority	Atrium Health Wake Forest Baptist	Atrium Health Enterprise
Assets			
Current assets:			
Cash and cash equivalents	\$ 799,598	\$ 332,481	\$ 1,136,105
Short term investments Patient receivables – net	39,326 1,291,751	357,037	50,868 1,648,788
Accounts, grants and notes receivable, net	1,291,751	148,390	307,741
Assets limited as to use – investments	47,321	_	47,321
Other current assets	264,949	111,089	372,170
Total current assets	2,584,506	948,997	3,562,993
Property and equipment – net	4,684,832	1,284,201	6,155,850
Investments and assets limited as to use	8,355,490	2,448,262	11,275,504
Operating lease right-of-use assets, net		196,476	730,166
Other assets	264,451	185,931	391,897
Total assets	15,889,279	\$ 5,063,867	\$ 22,116,410
Deferred outflows of resources	396,387		
Total assets and deferred outflows of resources	\$ 16,285,666		
Liabilities			
Current liabilities:			
Accounts payable	\$ 411,803	\$ 184,895	\$ 588,151
Salaries and benefits payable Other liabilities and accruals	786,877 666,881	365,586 219,185	1,154,593 881,006
Estimated third party payer settlements	321,328	75,810	397,137
Operating lease liabilities		40,833	119,543
Current portion of long-term debt	772,270	158,130	934,956
Total current liabilities	2,959,159	1,044,439	4,075,386
Notes payable, finance leases and line of credit – net of current portion	229,282	88,557	354,831
Bonds payable – net of current portion	2,620,184	727,959	3,344,100
Operating lease liabilities – less current portion		162,934	643,230
Interest rate swap liability	263,120	3,525	266,645
Retirement benefits Other liabilities	90,622 640,866	96,260 123,256	986,597 677,818
Total liabilities	6,803,233	2,246,930	10,348,607
Net assets	0,000,200	2,210,000	
Without donor restrictions		2,402,597	10,835,128
With donor restrictions		414,340	932,675
Total net assets		2,816,937	11,767,803
Total liabilities and net assets		\$ 5,063,867	\$ 22,116,410
Deferred inflows of resources	277,416		
Net position			
Net investment in capital assets	1,628,733		
Restricted – by donor	35,919		
Unrestricted	7,540,365		
Total net position	9,205,017		
Total liabilities and deferred inflows and net position	\$ 16,285,666		

See accompanying notes to combined financial statements.

#### **Atrium Health Enterprise**

Combined Statements of Revenues, Expenses and Changes in Net Position and Net Assets - Atrium Health Enterprise

Year Ended December 31, 2021

Atrium Health Charlotte-Atrium Health Atrium Health Mecklenburg Wake Forest **Hospital Authority** Baptist Enterprise **Operating revenues and support** 8,120,786 11,092,481 Ś Patient service revenue Ś \$ 3,228,061 Gifts, grants and contracts 82,527 244,329 441,650 11,694 43,618 57,300 Student tuition and fees - net Investment return designated for current operations 32.523 32.523 37,672 92,227 Net assets released from restrictions Other sources 757,529 492,502 1,219,672 8,972,536 4,078,705 12,935,853 Total operating revenues **Operating expenses** 5,119,128 2,417,071 7,410,086 Personnel costs Supplies 1,772,428 977,563 2,708,165 635,616 149,472 767,177 Purchased services 728.597 349.536 1.077.128 Other operating expenses 394,488 143,903 532,570 Depreciation and amortization 30,023 114.431 **Financing costs** 8,650,257 4,067,568 12,609,557 Total operating expenses 322.279 11.137 326,296 Operating income Nonoperating gains Interest expense (107,429) 181,510 Stimulus grants 757.608 928,795 169.655 Net investment gains 3,084 1,208 66,569 Net gains on interest rate swap valuation 150,000 Net assets released from restriction 42.883 Pension and postretirement costs (4, 945)12,025 39,839 Gains from equity method affiliates 260,454 Contribution from business combinations, net 10.709 (3,792) 12,657 46,371 Other, net 351,309 1,384,911 830,981 Total nonoperating gains Excess of revenues and support over expenses and losses \$ ¢ Ś 362.446 1.711.207 before capital and other contributions 1.153.260 Changes in net position: 7,748 **Capital contributions** (129,304) Other contributions 1.031.704 Change in net position Net position, beginning of year 8,173,313 9,205,017 Ś Net position, end of year Changes in net assets without donor restrictions: 40,775 252,314 Pension and postretirement net adjustments 14,008 Other 403,221 1,977,529 Changes in net assets without donor restrictions Changes in net assets with donor restrictions: 38,933 143,874 Contributions Investment return in excess of amounts designated for current operations 8,532 8,532 (187,672) (92,211) Net assets released from restrictions 79.256 Net investment gains 32,109 Other (2,955) (3,540) (111,053) 135,911 Change in net assets with donor restrictions 292,168 2,113,440 Change in total net assets Net assets, beginning of year 2,524,769 9,654,363 2,816,937 \$ 11,767,803 Net assets, end of year Ś

See accompanying notes to combined financial statements.

Dollars in thousands.

## **Atrium Health Enterprise**

Combined Statements of Cash Flows - Atrium Health Enterprise

December 31, 2021

	Atrium Health Charlotte- Mecklenburg Hospital Authority	Wał	m Health ce Forest ptist	um Health hterprise
Cash flows from operating activities: Receipts from third-party payers and patients Payments to suppliers Payments to employees Other receipts – net	\$ 7,894,877 (2,946,106) (5,172,323) 657,050	\$	3,215,423 (1,405,478) (2,324,340) 685,144	\$ 10,861,431 (4,409,786) (7,174,156) 1,342,592
Net cash provided by operating activities	433,498		170,749	 620,081
Cash flows from financing activities: Cash flows from noncapital financing activities: Proceeds from the issuance of commercial paper Retirements of commercial paper Stimulus grants Academic endowment and enrichment funds disbursed Other activities	250,000 (100,000) 181,510 (160,000) (107,523)			
Net cash provided by noncapital financing activities	63,987			
Cash flows from capital and related financing activities: Purchase of capital assets Proceeds from sale of capital assets Interest payments on short- and long-term debt Principal payments, refunding and retirements on short- and long-term debt Proceeds from issuance of long-term debt Contributions restricted for building and equipment purchases Other contributions	(797,112) 8,166 (100,451) (330,683) 985,807 18,510		(47,421)  160,000	(314,225) 1,233,506 7,748 119,424
Net cash (used in) provided by capital and related financing activities	(215,763)		112,579	 1,046,453
Net cash (used in) provided by financing activities	(151,776)		112,579	 1,046,453
Cash flows from investing activities: Investment earnings Purchases of investments and assets limited as to use Sales of investments and assets limited as to use Purchase of capital assets Proceeds from sale of capital assets Acquisition of health-related businesses, net of cash acquired Purchase of equity method investments Net cash provided by (used in) investing activities	19,821 (54,071) 124,233   89,983		(1,496,242) 1,128,649 (127,650) 14,450 (19,925) 	 26,315 (7,068,528) 6,648,034 (910,013) 15,879 (150,481) (1,063) (1,439,857)
Net increase (decrease) in cash and cash equivalents	371,705		(217,390)	226,677
Cash and cash equivalents: Beginning of year End of year	978,709 \$ 1,350,414	\$	555,907 338,517	\$ 1,466,280 1,692,957
Reconciliation of cash and cash equivalents to the balance sheet: Cash and cash equivalents Restricted cash in investments and assets whose use is limited	799,598 550,816		332,481	 1,136,105
Total cash and cash equivalents	\$ 1,350,414	\$	338,517	\$ 1,692,957
Reconciliation of operating income to net cash provided by operating activities: Operating income Adjustments to reconcile operating income to net cash provided by operating activities:	\$ 322,279			
Depreciation and amortization Increase in patient accounts receivable – net Increase in inventories and other current assets	394,488 (262,175) (39,274)			
Decrease in other assets affecting operating activities	46,112			
Increase in accounts payable and other current liabilities	271,923			
Decrease in other liabilities affecting operating activities	(336,121)			
Increase in estimated third party payer settlements	36,266			
Net cash provided by operating activities	\$ 433,498			

See accompanying notes to combined financial statements.

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# Atrium Health Foundation, Inc.

(a component unit of Atrium Health Charlotte-Mecklenburg Hospital Authority) Balance Sheet

December	31, 2021
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Dollars in thousands.

Current assets:\$4,026Short term investments11,542Accounts, grants and notes receivable, net33,540Other current assets422Total current assets422Total current assets49,530Property and equipment – net4,181Investments and assets limited as to use378,369Other assets61,188Total assets493,268Deferred outflows of resources	Assets		
Property and equipment - net4,181Investments and assets limited as to use378,369Other assets61,188Total assets493,268Deferred outflows of resources-Total assets and deferred outflows of resources\$Liabilities\$Current liabilities:\$Accounts payable\$Other liabilities2,148Total current liabilities2,161Other liabilities3,385Total liabilities3,385Total liabilities4,181Property and equipment in capital assets4,181Restricted - by donor4,73,725Unrestricted9,816Total net position487,722	Short term investments Accounts, grants and notes receivable, net	11,542 33,540	
Investments and assets limited as to use378,369Other assets61,188Total assets493,268Deferred outflows of resources-Total assets and deferred outflows of resources\$Liabilities\$Current liabilities:\$Accounts payable\$Other liabilities2,148Total current liabilities2,161Other liabilities3,385Total current liabilities3,385Total current liabilities5,546Deferred inflows of resources-Net position:4,181Net investment in capital assets4,181Restricted – by donor473,725Unrestricted9,816Total net position487,722	Total current assets	49,530	
Deferred outflows of resources—Total assets and deferred outflows of resources\$LiabilitiesCurrent liabilities:Accounts payable\$13Other liabilities and accruals2,148Total current liabilities102,1610ther liabilities2,1610ther liabilities2,1610ther liabilities100ther liabilities110ther liabilities0ther liabilities120ther liabilities130ther liabilities14151516161718181919101010101011121314151516161717181919191010101010101010101111121314151516171818191919191919191919191919	Investments and assets limited as to use	378,369	
Total assets and deferred outflows of resources\$493,268LiabilitiesCurrent liabilities: Accounts payable\$13Other liabilities and accruals2,1482,148Total current liabilities2,1612,161Other liabilities3,3853,385Total liabilities5,546Deferred inflows of resourcesNet position: Net investment in capital assets4,181Restricted - by donor473,7259,816Unrestricted9,816487,722	Total assets	493,268	
LiabilitiesCurrent liabilities:Accounts payableAccounts payableOther liabilities and accrualsZ,148Total current liabilitiesOther liabilitiesOther liabilitiesOther liabilitiesTotal liabilitiesDeferred inflows of resourcesNet position:Net investment in capital assetsNet investment in capital assetsUnrestricted9,816Total net position487,722	Deferred outflows of resources		
Current liabilities:Accounts payable\$Accounts payable\$Other liabilities and accruals2,148Total current liabilities2,161Other liabilities3,385Total liabilities3,385Total liabilities5,546Deferred inflows of resources—Net position:4,181Restricted – by donor473,725Unrestricted9,816Total net position487,722	Total assets and deferred outflows of resources	\$ 493,268	_
Accounts payable\$13Other liabilities and accruals2,148Total current liabilities2,161Other liabilities3,385Total liabilities3,385Deferred inflows of resources—Net position: Net investment in capital assets4,181Restricted – by donor473,725Unrestricted9,816Total net position487,722	Liabilities		
Other liabilities3,385Total liabilities5,546Deferred inflows of resources—Net position: Net investment in capital assets4,181Restricted – by donor473,725Unrestricted9,816Total net position487,722	Accounts payable		
Deferred inflows of resources—Net position: Net investment in capital assets4,181Restricted – by donor473,725Unrestricted9,816Total net position487,722			
Net position:Net investment in capital assets4,181Restricted – by donor473,725Unrestricted9,816Total net position487,722	Total liabilities	5,546	
Net investment in capital assets4,181Restricted – by donor473,725Unrestricted9,816Total net position487,722	Deferred inflows of resources		
Total net position 487,722	Net investment in capital assets	-	
		9,816	
Total liabilities and deferred inflows and net position\$493,268	Total net position	487,722	
	Total liabilities and deferred inflows and net position	\$ 493,268	_

See accompanying notes to combined financial statements.

# Atrium Health Foundation, Inc.

(a component unit of Atrium Health Charlotte-Mecklenburg Hospital Authority) Statement of Revenues, Expense and Changes in Net Position

Year Ended December 31, 2021	Dollars in thousands.

Operating revenues and support	
Gifts, grants and contracts	\$ 50,432
Other sources	 973
Total operating revenues	 51,405
Operating expenses	
Personnel costs	4,610
Other operating expenses	28,149
Depreciation and amortization	 262
Total operating expenses	33,021
Operating income	 18,384
Nonoperating gains	
Net investment gains	50,514
Total nonoperating gains	50,514
Excess of revenues over expenses and losses before capital and other contributions	68,898
Capital contributions	23,607
Other contributions	 905
Changes in net position	93,410
Net position, beginning of year	 394,312
Net position, end of year	\$ 487,722

See accompanying notes to combined financial statements.

# Atrium Health Foundation, Inc.

(a component unit of Atrium Health Charlotte-Mecklenburg Hospital Authority) Statement of Cash Flows

December 31, 2021	Dollars in thousands.
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Cash flows from operating activities:	
Payments to suppliers	\$ (8,317)
Other payments – net	 (2,606)
Net cash used in operating activities	 (10,923)
Cash flows from capital and related financing activities:	
Purchase of capital assets	(74)
Contributions restricted for building and equipment purchases	7,878
Other contributions	 1,099
Net cash provided by capital and related financing activities	 8,903
Cash flows from investing activities:	
Investment earnings	1,934
Purchases of investments and assets limited as to use	 (2)
Net cash provided by investing activities	 1,932
Net decrease in cash and cash equivalents	(88)
Cash and cash equivalents:	
Beginning of year	 4,114
End of year	\$ 4,026
Reconciliation of cash and cash equivalents to the balance sheet:	
Cash and cash equivalents	4,026
Restricted cash in investments and assets whose use is limited	 
Total cash and cash equivalents	\$ 4,026
Reconciliation of operating income to net cash provided by operating activities:	
Operating income	\$ 18,384
Adjustments to reconcile operating income to net cash used in operating activities	
Depreciation and amortization	262
Increase in patient accounts receivable – net	-
Decrease in inventories and other current assets	(26,875)
Decrease in other assets affecting operating activities	(188)
Decrease in accounts payable and other current liabilities	(2,420) (86)
Decrease in other liabilities affecting operating activities	 
Net cash used in operating activities	\$ (10,923)

See accompanying notes to combined financial statements.

# Atrium Health Charlotte-Mecklenburg Hospital Authority

Statement of Fiduciary Net Position - Pension Trust Funds

December 31, 2021

Dollars in thousands.

Assets	
Cash and cash equivalents	\$ 45,717
Investments at fair value: Fixed income: U.S. government treasuries and agencies Corporate bonds Fixed income - other Asset-backed securities	 18,313 17,047 181,473 13,266
Total fixed income	 230,099
Equity: Domestic equities International equities Global equities	 413,247 144,845 228,216 786,308
Global asset allocation funds	31,513
Real asset funds	 53,810
Total investments at fair value level	 1,101,730
Investments at net asset value: Fixed income - other Global asset allocation funds Long/short fixed income Multi-strategy hedge funds Private equity funds International equity Global equity	39,727 58,371 92,871 242 83,187 43,253 80,527
	 398,178
Total investments	 1,499,908
Total assets Liabilities	\$ 1,545,625
Accounts payable and other liabilities	
Total liabilities	 
Net position restricted for pensions	\$ 1,545,625

See accompanying notes to combined financial statements.

# Atrium Health Charlotte-Mecklenburg Hospital Authority

Statement of Changes in Fiduciary Net Position - Pension Trust Funds

Year Ended December 31, 2021	Dollars in thousands.

Additions	
Employer contributions	\$ 44,112
Investment income:	
Net appreciation in fair value of investments Interest and dividends	 202,435 17,561
	219,996
Less investment expense	 3,073
Net investment income	 216,923
Total additions	 261,035
Deductions	
Benefit payments Administrative expense	 (240,708) (2,551)
Total deductions	 (243,259)
Net increase in fiduciary net position	17,776
Fiduciary net position restricted for pensions:	
Beginning of year	 1,528,649
End of year	\$ 1,546,425

See accompanying notes to combined financial statements.

MEDICAL CENTER OF CENTRAL GEORGIA, INC. - 58-2149128

# 1. Organization and Summary of Significant Accounting Policies

## a. Description of the Organization

### **Atrium Health Enterprise**

The combined financial statements of the entities collectively comprising the Atrium Health Enterprise (Enterprise), an integrated healthcare delivery and academic system and ancillary activities, were prepared to present the Enterprise's financial position and results of operations under the common management of Atrium Health, Inc. (AHI), a North Carolina non-profit corporation. The statements also present individually the financial position and results of operations of The Charlotte-Mecklenburg Hospital Authority (Atrium Health CMHA) and Atrium Health Wake Forest Baptist (Atrium Health WFB).

The Enterprise, which does business as Atrium Health, is one of the nation's leading and most innovative healthcare organizations, providing a full spectrum of healthcare and wellness programs in the Southeast region. Its diverse network of care locations includes academic medical centers, hospitals, freestanding emergency departments, physician practices, surgical and rehabilitation centers, home health agencies, nursing homes and behavioral health centers, as well as hospice and palliative care services. Atrium Health works to enhance the overall health and wellbeing of its communities through high quality patient care, education and research programs, and numerous collaborative partnerships. Its mission is to improve health, elevate hope and advance healing – for all.

In October 2020, Atrium Health CMHA and Atrium Health WFB became part of the Enterprise pursuant to an Enterprise Agreement among AHI, Atrium Health CMHA and Wake Forest University Baptist Medical Center (WFUBMC), which is the joint operating company for North Carolina Baptist Hospital (NCBH) and affiliates and Wake Forest University Health Sciences (WFUHS) and affiliates, and related agreements, which included a Health System Integration Agreement between AHI, Atrium Health CMHA, WFUBMC, WFUHS, NCBH, and Wake Forest University (WFU) (collectively, the Enterprise agreements). Each Enterprise participant and its affiliates maintain their separate legal existence and continue to own their assets. Each Enterprise participant retains all power, authorities, rights and remedies necessary or appropriate to allow it to comply with its pre-existing debt instruments and any new debt instruments. Nothing in the Enterprise agreements is intended to constitute the actual or implied assumption or guaranty by any Enterprise participant of any other Enterprise participant's debt or other liabilities, and all debt and other liabilities of each Enterprise participant will remain the debt and liabilities of such Enterprise participant regardless of when incurred, except as otherwise expressly agreed in writing.

Atrium Health CMHA and Atrium Health WFB delegate authority to AHI to manage and oversee the activities and operations of the Enterprise participants in accordance with the Enterprise agreements, subject to the authority of WFU, WFUHS and WFUBMC over academic and research matters and the exercise of certain reserved powers and carrying out of certain responsibilities by the Atrium Health CMHA Board of Commissioners and WFUBMC Board of Directors. Some of the reserve powers of each Enterprise participant include the power to: approve a change in its fundamental business or mission; develop its capital and operating budgets, subject to approval by the AHI Board of Directors; and develop its strategic plans (which shall be generally consistent with those of the entire Enterprise), subject to approval by the AHI Board of Directors.

The AHI Board of Directors consists of 16 directors, including thirteen directors designated by Atrium Health CMHA and three directors designated by WFUBMC.

## Atrium Health CMHA

Atrium Health CMHA was organized in 1943 under the North Carolina Hospital Authorities Act. It is a public body and a body corporate and politic and, therefore, has been determined by the Internal Revenue Service to be exempt from federal and state income taxes. Atrium Health CMHA is headquartered in Charlotte, North Carolina.

For financial reporting purposes under Governmental Accounting (GASB) Standards, Atrium Health is divided into the "Primary Enterprise", "Discrete Component Unit," and "Fiduciary Activities." The Primary Enterprise consists of Atrium Health CMHA and all of its controlled affiliates (Atrium Health Charlotte) and two blended component units (Atrium Health Navicent and Atrium Health Floyd) described below. The Discrete Component Unit is The Atrium Health Foundation, Inc. (the Foundation), which raises and holds economic resources for the direct benefit of Atrium Health CMHA. The Foundation operates to raise funds to enhance, promote and support medical services, scientific education and research. It solicits contributions for Atrium Health CMHA entities, and, in the absence of donor restrictions, its Board of Directors has discretionary control over the amounts to be distributed. Net capital and operating contributions to Atrium Health CMHA from the Foundation included in the combined statement of revenues, expenses and changes in net position were \$30,259 for the year ended December 31, 2021. The Discrete Component Unit is reported on a basis consistent with Atrium Health CMHA's calendar year and is discretely presented. Transactions between Atrium Health CMHA and its Discrete Component Unit resulting in intercompany receivables, payables, revenues and expenses are not eliminated.

Atrium Health CMHA is the sole member of AH Georgia, Inc., which is the sole member of two non-profit hospital systems in Georgia: Navicent Health, Inc., which with its subsidiaries does business as Atrium Health Navicent in central and south Georgia, and Floyd Healthcare Management, Inc., which with its affiliates does business as Atrium Health Floyd in northwest Georgia and northeast Alabama. Each of Atrium Health Navicent and Atrium Health Floyd retains and appoints a majority of its Board of Directors, but Atrium Health CMHA holds customary approval rights, including approving budgets and any borrowings or discharging of debt. In addition, Atrium Health CMHA agrees to ensure, but does not formally guarantee, that neither Atrium Health Navicent nor Atrium Health Floyd defaults under any indebtedness agreements, notes or bonds, or other debt-related liabilities. Both Atrium Health Navicent and Atrium Health Floyd are component units of Atrium Health CMHA and, because a controlled subsidiary of Atrium Health CMHA is the sole member of each, financial information of both entities is blended with the Atrium Health CMHA Primary Enterprise as of and for the year ended December 31, 2021. Each of Atrium Health Navicent and Atrium Health Floyd has its own obligated group and they are not part of the CMHA Combined Group described below.

December 31, 2021

Effective July 2021, Atrium Health CMHA entered into a strategic combination with Atrium Health Floyd. This combination occurred pursuant to an agreement and member substitution whereby AH Georgia, Inc. became the sole corporate member of Floyd. More information regarding the impact of this combination to the Atrium Health CMHA and Enterprise financials is provided in Note 18 to the combined financial statements.

Atrium Health CMHA's Second Amended and Restated Bond Order authorizes the creation of a CMHA Combined Group, which consists of the CMHA Obligated Group and Designated Affiliates (there are no Designated Affiliates at this time). Only the CMHA Combined Group has a direct or indirect obligation to pay amounts due on bonds issued by Atrium Health CMHA. As of December 31, 2021, the members of the CMHA Combined Group were substantially all of the members of Atrium Health CMHA, with the exception of Atrium Health Navicent and Atrium Health Floyd and the Foundation.

## Atrium Health WFB

WFUBMC, a North Carolina non-profit corporation originally formed to act on behalf of WFUHS, a wholly-owned affiliate of WFU, and NCBH in connection with facilities planning, informational technology services, insurance, payroll, fundraising, and budget formulation and review, directs the planning and supervision of numerous construction projects as well as the fundraising campaigns in connection therewith. Construction costs are paid in accordance with the respective occupancy percentages of the facilities. WFUHS and NCBH are both party to a land and facilities sharing agreement whereby WFUHS and NCBH independently hold title to certain land and facilities, as designated by the agreement. NCBH and WFU were the initial corporate members of WFUBMC. NCBH and WFUHS each have a 50% equity interest in WFUBMC.

Effective July 2010, the Boards of WFUHS, NCBH, WFUBMC, and WFU approved the Medical Center Integration Agreement (MCIA). The MCIA allows for the leveraging of the combined resources of NCBH and WFUHS to fulfill a single mission: improve health and optimize performance of the combined organizations, while balancing patient care, education and research.

The MCIA created an integrated academic medical center that combines clinical care, education and research under a single management and debt structure, collectively referred to as Atrium Health WFB, which is governed by the Board of WFUBMC. One of the nation's preeminent academic medical centers, Atrium Health WFB is an integrated health care system that operates over 50 subsidiaries. It provides a continuum of care that includes primary care centers, outpatient rehabilitation centers and dialysis centers. To ensure alignment across the organization, NCBH and WFUHS unrestricted operating income is shared equally between the entities. Although the entities will be operated to maximize value at the total Atrium Health WFB level, revenues, expenses, existing and new assets and debt will continue to be accounted for generally at the individual entity levels.

Effective March 2011, NCBH, WFUHS, and WFUBMC formed a single obligated group (WFB Obligated Group) under the then-existing NCBH master trust indenture (WFB MTI). The separate WFUHS master trust indenture was discharged, and new obligations were issued to WFUHS

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obligation holders under the WFB MTI. In addition, substantially all of the subsidiaries of NCBH, WFUHS, and WFUBMC were included in the single credit group (WFB Combined Group) as Designated Members. Under the new credit structure, each member of the WFB Obligated Group is jointly and severally liable for all debt and other obligations that are evidenced and secured under the WFB MTI. As of December 31, 2021, the WFB Obligated Group is liable for \$856,295 of bonds payable, \$19,199 under lines of credit and \$32,155 of notes payable. Only the WFB Combined Group has a direct or indirect obligation to pay amounts due on debt and other obligations that are evidenced and secured under the WFB MTI.

Effective October 2020, in connection with the formation of the Enterprise, the MCIA among WFUBMC, WFUHS, NCBH, and WFU was amended to add AHI as a party and AHI became a corporate member of WFUBMC. Of the seventeen voting directors of the WFUBMC Board, WFU designates six, NCBH designates six, AHI designates three and the WFUBMC Board elects two. NCBH and WFUHS continue to share unrestricted operating income equally between the entities.

## b. Basis of Presentation

The financial statements for Atrium Health CMHA and Atrium Health WFB have been prepared on the accrual basis of accounting in accordance with U.S. generally accepted accounting principles (GAAP). As a governmental entity, Atrium Health CMHA is presented in accordance with Governmental Accounting Standards Board (GASB) standards. As non-governmental not-forprofit entity, Atrium Health WFB is presented in accordance with Financial Accounting Standards Board (FASB) accounting standards. Atrium Health Enterprise, which includes both Atrium Health CMHA, Atrium Health WFB and Atrium Health Foundation, Inc., is presented in accordance with FASB standards. Because Atrium Health CMHA financial statement amounts are presented in accordance with FASB standards when reported as part of the Enterprise, Enterprise financial statements and disclosure amounts do not equal the sum of Atrium Health CMHA and Atrium Health WFB statements or amounts. All significant intercompany accounts and transactions have been eliminated in the combined financial statements.

## c. Recent Accounting Pronouncements

## GASB Pronouncements Adopted

In 2019, the GASB issued Statement No. 89, Accounting for Interest Cost Incurred before the End of a Construction Period, which provides updated accounting requirements for interest cost incurred before the end of a construction period. This Statement requires that interest cost incurred before the end of a construction period be recognized as an expense in the period in which the cost was incurred. As a result, interest cost incurred before the end of a construction period will not be included in the historical cost of the related capital asset. The provisions of this Statement are required to be adopted no later than the year ended December 31, 2021. The adoption of this Statement in 2021 had no material impact for Atrium Health CMHA.

## FASB Pronouncements Adopted

In February 2016, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2016-02, Leases (Topic 842). This ASU requires the recognition of right-of-use assets

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and lease liabilities by lessees for those leases classified as operating leases under previous GAAP which have terms of greater than 12 months. This ASU defines a lease as a contract, or part of a contract, that conveys the right to control the use of identified property, plant, or equipment (an identified asset) for a period of time in exchange for consideration. This ASU retains a distinction between finance leases and operating leases. The result of retaining a distinction between finance leases and operating leases. The result of retaining a distinction between finance leases and operating leases. The result of retaining a distinction between finance leases and operating leases. The result of retaining a distinction between finance leases and operating leases. The result of retaining a distinction between finance leases and operating leases. The result of retaining a distinction between finance leases and operating leases. The result of retaining a distinction between finance leases and operating leases. The result of retaining a distinction between finance leases and operating leases. The result of retaining a distinction between finance leases and operating leases. The result of retaining a distinction between finance leases and operating leases in the statement of operations and the statement of cash flows is largely unchanged from previous GAAP. Atrium Health WFB and the Enterprise adopted ASU 2016-02 during 2021 using a modified retrospective approach. Atrium Health WFB didn't reassess whether any existing or expired agreements contain leases, the lease classification for any expired or existing leases through election of the package of practical expedients permitted under the ASU. This ASU requires that the rights and obligations arising from the lease contracts, including existing and new arrangements, be recognized as assets and liabilities on the combined balance sheet, in addition to disclosures to help financial statement users better understand the amount, timing and uncertainty of cash flows a

	Rig	ating Lease ht-of-Use Assets	Operating Lease Liabilities	
Atrium Health WFB Atrium Health Enterprise	\$	291,900 886,816	\$	295,996 897,871

#### d. Effects of COVID-19 Pandemic

In March 2020, the World Health Organization declared the outbreak of a novel coronavirus (COVID-19) as a pandemic. In an effort to preserve resources for patients infected with COVID-19, the Enterprise, at various times throughout the pandemic depending on regional surges of COVID-19 infections, ceased or curtailed non-essential procedural patient care such as elective surgeries, resulting in significant unexpected revenue declines. Since that time, vaccines have been developed to counter the spread of COVID-19, but that has not prevented the virus from evolving and new variants from spreading. As a result, the pandemic continued to affect the Enterprise in 2021, resulting in lost revenues and higher cost of care.

The Coronavirus Aid, Relief, and Economic Security Act (CARES Act) and the American Rescue Plan Act (ARP Act), passed in March of 2020 and 2021 respectively, provided funding to the Department of Health and Human Services (DHHS) Public Health and Social Services Emergency Fund (Relief Fund), which provided funds to qualifying healthcare providers treating COVID-19 patients to replace lost revenues or reimburse for COVID-19 related costs. The Enterprise received approximately \$274,400 from the Relief Fund in 2021 to replace lost revenues or reimburse for COVID-19 related costs for the year ended December 31, 2021. In fiscal year 2021, the Enterprise recorded approximately \$201,400 to gifts, grants and contracts revenue. The unrecognized funds at December 31, 2021 were recorded as deferred revenue in the combined balance sheet. These Relief Fund payments are not subject to repayment, provided the Enterprise is able to attest to and comply with the terms and conditions of the funding, including demonstrating that the

distributions received have been used to replace lost revenue attributable to COVID-19 or to reimburse for COVID-19 related costs. Under GASB, Atrium Health CMHA recorded approximately \$181,500 to non-operating revenue for the year ended December 31, 2021.

	Atrium Atrium Health Health <u>CMHA</u> WFB		Atrium Health Enterprise	
Relief fund proceeds	\$	231,000	\$ 49,100	\$ 274,400
Gift, grants and contract revenue			34,800	201,400
Non-operating revenue		181,500		_

Additionally, to ease cash flow concerns for health care providers at the start of the pandemic, DHHS Centers for Medicare and Medicaid Services (CMS) provided Medicare advance payments to the Enterprise, which were recorded as other liabilities and accruals. In fiscal year 2021, CMS began recouping these advance payments, which, according to CMS guidance, are expected to be fully recouped by the end of 2022. The respective balance sheets of the Enterprise included the following Medicare advance payments in other liabilities and accruals at December 31, 2021:

	Atrium		Atrium		Atrium	
	Health		Health		Health	
	CMHA		WFB		Enterprise	
Medicare advance payments outstanding	\$	305,200	\$	103,400	\$	408,600

The COVID-19 pandemic continues to evolve; the ultimate impact to financial and operating results cannot be reasonably estimated at the time of issuance.

#### e. Cash Equivalents

Cash equivalents include highly liquid investments with original maturities at the date of purchase of three months or less and primarily consist of money market funds and bank accounts. Atrium Health WFB, Atrium Health Navicent, and Atrium Health Floyd maintain cash balances at various financial institutions. The accounts are insured by the Federal Deposit Insurance Corporation up to \$250. At times, the amounts on deposit with these financial institutions exceed the insured limit. Atrium Health CMHA follows North Carolina General Statute 159-30, whereby all deposits of Atrium Health CMHA are held in depositories that are either insured or covered under statewide single financial institution collateral pools (the Pooling Method). Collateral is maintained for all the depositories' governmental units in the state. The North Carolina State Treasurer monitors the Pooling Method depositories for adequate collateralization. Under the Pooling Method, all uninsured deposits are collateralized with securities held by the State Treasurer's agent in the name of the State Treasurer. The amount of the pledged collateral is based on an approved averaging method for noninterest-bearing deposits and the actual current balance for interest-bearing deposits. Depositories using the Pooling Method report to the State Treasurer the adequacy of their pooled collateral covering uninsured deposits. The State

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Treasurer does not confirm this information with Atrium Health CMHA. Because of the inability to measure the exact amount of collateral pledged for Atrium Health CMHA under the Pooling Method, the potential exists for under collateralization, and this risk may increase in periods of high cash flows. However, each Pooling Method Depository is subject to financial stability standards and oversight by the State Treasurer of North Carolina.

## f. Investments and Assets Limited as to Use

Investments in debt and equity securities, inclusive of assets limited as to use, are reported at fair value. Investments in joint ventures are accounted for using the equity method.

Gains, losses, and investment income are included in excess of revenues and support over expenses and losses unless their use is restricted by donor or law.

The fair value of alternative investments is measured based on the Net Asset Value (NAV) of the shares in each investment company or partnership as a practical expedient, except for those institutional funds which have readily determinable fair values and are disclosed separately. Investments in alternative investments may include derivative products that are reported at fair value. The investments may individually expose the Enterprise to securities lending, short sales, and trading in futures and forward contract options, and other derivative products. The Enterprise's risk is limited to its carrying value of the instruments. These instruments can only be divested at specific times or based on specific triggering events.

The Enterprise's split -interest agreements with donors consist primarily of irrevocable charitable remainder trusts and charitable gift annuities for which the Enterprise serves as trustee. Assets held in these trusts are stated at fair value and are included in investments and assets whose use is limited in the combined balance sheet. Contribution revenues are recognized at the dates the trusts are established. The Enterprise records the change in value of split-interest agreements according to the fair value of assets that are associated with each trust and recalculates the liability for the present value of annuity obligations. Any change in fair value is recognized in the combined statement of revenues, expenses and changes in net position and net assets.

The Enterprise is the beneficiary of certain trusts and other assets held and administered by others. The Enterprise's share of these assets is recorded at fair value with carrying values adjusted annually for changes in fair value.

## g. Property and Equipment

Property and equipment are recorded at cost at the date of acquisition or estimated fair market value on the date received for donated items. Depreciation is recorded on the straight-line method over the estimated useful life of each class or component of depreciable asset. Estimated lives range from 1 to 40 years. Depreciation is not recorded on land and construction in progress.

Gains or losses on the disposal of property and equipment are included in nonoperating expenses in the combined statements of revenues, expenses and changes in net position and net assets.

	Estimated Useful Life in Years
Land improvements	3-25
Buildings and other improvements	3-40
Fixed and movable equipment	1-25

Under GASB, interest costs incurred on borrowed funds during the period of construction of capital assets are not capitalized as a component of the cost of acquiring those assets. Under FASB, interest costs incurred on borrowed funds during the period of construction of capital assets are capitalized as a component of the cost of acquiring those assets.

#### h. Leases

Under GASB, Atrium Health CMHA records operating lease expense within operating expenses.

Under FASB, Atrium Health WFB and the Enterprise have operating and finance leases for real estate and equipment. The Enterprise determines if an arrangement is a lease at the inception of a contract. The Enterprise has both leases under which it is obligated as a lessee and leases for which it is a lessor. Operating leases as a lessee are included in Operating lease right-of-use assets, net and Operating lease liabilities in the combined balance sheets. Finance leases as a lessee are included in Property and equipment, net and Current portion of long-term debt and Notes payable, finance leases, and line of credit, net of current portion in the combined balance sheets.

Operating lease right-of-use assets represent the Enterprise's right to use an underlying asset during the lease term, and operating lease liabilities represent the Enterprise's obligation to make lease payments arising from the lease. Operating lease right-of-use asset and liabilities are recognized at the commencement date, based on the net present value of fixed lease payments over the lease term discounted using an appropriate incremental borrowing rate. The Enterprise's lease terms include options to extend or terminate the lease when it is reasonably certain that the options will be exercised. As most of the Enterprise's operating leases do not provide an implicit rate, the Enterprise uses its incremental borrowing rate based on the information available at the commencement date in determining the present value of lease payments. 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 depreciation 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. Interest expense is recognized as a component of the lease payment for finance leases.

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#### i. Long-Lived Assets

The Enterprise reviews long-lived assets for impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable. The Enterprise recognizes an impairment charge when the fair value of the asset or group of assets is less than the carrying value.

## j. Goodwill

Under GASB, Atrium Health CMHA accounts for the acquisition of healthcare related businesses in accordance with GASB Statement No. 69. Any excess of purchase price over the net position acquired is recorded as a deferred outflow of resources and is attributed to future periods in a systematic manner based upon professional standards. Any purchase price in excess of net position acquired prior to January 1, 2013 is being amortized over periods that do not exceed 25 years. Because the combination with Atrium Health Floyd, as described elsewhere in Note 1 and Note 18, was not an acquisition as defined in GASB Statement No. 69, Atrium Health CMHA applied guidance from GASB Statement No. 62.

Under FASB, goodwill has resulted from business combinations and is based on the purchase price in excess of the fair values of assets acquired and liabilities assumed at the acquisition date. Annually, or when indicators of impairment exist, the Enterprise evaluates goodwill for impairment to determine whether there are events or circumstances that indicate it is more likely than not that the fair value of a reporting unit is less than its carrying amount. Other assets includes \$118,340 of goodwill as of December 31, 2021.

## k. Deferred Outflows of Resources and Inflows of Resources

Atrium Health CMHA's deferred outflows of resources consists of the unamortized amounts related to long-term debt refunding transactions, the aggregate change in fair value of swaps that are effective hedges, benefit plan differences between expected and actual investment earnings, benefit plan differences between expected and actual experience related to demographic factors, benefit plan assumption changes, and the excess cost of net position related to the acquisition of health-related businesses. The balance of the deferred outflows of resources at December 31, 2021 is composed of the following:

Refunding of debt	\$	173,746
Aggregate change in fair value of swaps		79,221
Deferred outflows of resources related to Atrium Health Charlotte DB		
Plan (note 11)		105,860
Deferred outflows of resources related to Atrium Health Navicent DB		
Plan (note 11)		15,772
Deferred outflows of resources related to Atrium Health Floyd DB		
Plan (note 11)		582
Excess cost of net position acquired		21,206
	Ś	396.387

December 31, 2021

Atrium Health CMHA's deferred inflows of resources consists of the gain related to a 2008 sale-leaseback transaction, which is being amortized over the terms of the related leases, benefit plan differences between expected and actual experience related to demographic factors, benefit plan assumption changes, and the benefit plan difference between expected and actual investment earnings.

Sale-leaseback gain	\$	8,936
Deferred inflows of resources related to Atrium Health Charlotte DB		
Plan (note 11)		199,901
Deferred inflows of resources related to Atrium Health Navicent DB		
Plan (note 11)		66,885
Deferred inflows of resources related to Atrium Health Floyd DB		
Plan (note 11)		1,694
	Ś	277.416

#### I. Derivative Instruments

The Enterprise records all derivative instruments other than interest rate swaps in investments and assets limited as to use on the accompanying combined balance sheets at their respective fair values. The Enterprise records its interest rate swap agreements as part of other long-term assets or liabilities in the accompanying combined balance sheets at fair value. Under GASB, the changes in fair value of derivative instruments that meet the criteria of an effective hedge are deferred on the balance sheet. Under FASB, all changes in fair value are reflected in the combined statements of revenues, expenses and changes in net assets.

#### m. Defined Benefit Plans

The Enterprise records annual amounts relating to its defined benefit plans based on calculations that incorporate various actuarial and other assumptions, including discount rates, mortality, turnover rates, rate of return, and healthcare cost trend rates in accordance with the applicable accounting standards. Management reviews its assumptions on an annual basis and makes modifications to the assumptions based on current rates and trends when it is appropriate to do so. The effect of modifications to those assumptions is recorded in changes in net assets without donor restrictions and amortized to net periodic pension benefit (cost) over future periods using the corridor method. Management believes that the assumptions used in recording its obligations under its defined benefit plans are reasonable based on its experience and market conditions.

The net periodic pension benefit (cost) is recognized as employees render the services necessary to earn the benefits.

### n. Net Position and Net Assets

Under GASB, net position is classified as net investment in capital assets, restricted-by donor, and unrestricted. Net investment in capital assets consists of capital assets, net of accumulated depreciation, reduced by the outstanding balances of bonds, notes or other borrowings that are attributable to the acquisition, construction, or improvement of those assets. Restricted net

position consists of assets generated from revenues that have third-party limitations on their use. Unrestricted net position has no third-party restrictions on use. When both restricted and unrestricted resources are available for use, generally it is Atrium Health CMHA's policy to use restricted resources first and then unrestricted resources when they are needed.

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

*Net assets without donor restrictions* – Net assets that are not subject to donor-imposed restrictions and may be expended for any purpose in performing the primary objectives of the organization.

Net assets with donor restrictions – Net assets subject to donor-imposed stipulations. Some donor restrictions are temporary in nature; those restrictions will be met by actions of the Enterprise and/or by the passage of time. Other donor restrictions are perpetual in nature, whereby the donor has stipulated the funds be maintained in perpetuity; generally, the donors of these assets permit the Enterprise to use all or part of the income earned on related investments for general or specific purposes.

FASB presents revenues as increases in net assets without donor restrictions unless their use is limited by donor-imposed restrictions. Donor-restricted contributions are reported as increases in net assets with donor restrictions. Contributions which impose restrictions that are met in the same fiscal year they are received are reported as increases in net assets without donor restrictions. Expenses are reported as decreases in net assets without donor restrictions. Gains and losses on investments and other assets or liabilities are reported as increases or decreases, respectively, in net assets without donor restrictions unless their use is restricted by explicit donor stipulations or by law. Expirations of restrictions on net assets (i.e., the donor-stipulated purpose has been fulfilled and/or the stipulated time period has elapsed) are reported as reclassifications from net assets with donor restrictions to net assets without donor restrictions in the combined statement of revenues, expenses and changes in net assets.

#### o. Classification of Revenues and Expenses

Except in cases where accounting standards dictate otherwise, exchange transactions deemed by management to be ongoing, major, or central to the provision of healthcare services are reported as operating revenues and expenses; otherwise, they are reported as nonoperating income and losses. For Atrium Health CMHA, nonoperating activities include investment returns (realized and unrealized net gains and losses on investments, interest, and dividends), interest expense on long-term debt, and federal stimulus grants that are considered non-exchange transactions. For Atrium Health WFB and the Enterprise, nonoperating activities include investment returns in excess of the Enterprise's approved endowment distribution, other than designated returns on assets held for self-insurance purposes; net gains and losses on interest rate swaps; losses on extinguishment of debt; changes in valuation of interest rate swap agreements; gains and losses from equity method affiliates; pension and postretirement costs; and other incidental transactions.

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Dollars in thousands.

The combined statement of revenues, expenses and changes in net assets for Atrium Health WFB and the Enterprise includes excess of revenues and support over expenses and losses. Changes in net assets without donor restrictions that are excluded from excess of revenue and support over expenses and losses, consistent with industry practice, include transfers of assets to and from affiliates for other than goods and services, changes in pension and postretirement plan liabilities, and capital contributions.

## p. Patient Service Revenue

Under GASB and FASB, patient service revenue is reported at the amount that reflects the consideration to which the Enterprise expects to be entitled for providing patient care. These amounts are due from patients, third-party payers, and others, and includes variable consideration for retroactive revenue adjustments due to settlement audits, reviews and investigations.

Under FASB, revenue is recognized as performance obligations are satisfied. Performance obligations are determined based on the nature of the services provided by the Enterprise. Revenue for performance obligations satisfied over time is recognized based on actual charges incurred in relation to total expected (or actual) charges. The Enterprise believes that this method provides a faithful depiction of the transfer of services over the term of the performance obligations satisfied over time relate to patient services. The Enterprise measures the performance obligation from admission into its care locations 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. Revenue for performance obligations satisfied at a point in time is recognized when services are provided and the Enterprise does not believe it is required to provide additional services to the patient. Generally, performance obligations satisfied at a point in time relate to outpatient and certain laboratory services.

Because all its performance obligations relate to contracts with a duration of less than one year, the Enterprise 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-type 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 Enterprise is utilizing the portfolio approach practical expedient in ASC 606 for contracts related to patient service revenue. The Enterprise 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. The portfolios consist of major payer classes for inpatient revenue and outpatient revenue. Based on historical collection trends and other analyses, the Enterprise has concluded

#### December 31, 2021

that revenue for a given portfolio would not be materially different than if accounting for revenue on a contract-by-contract basis.

The Enterprise has agreements with third-party payers that provide for payments to the Enterprise at amounts different from its established rates. Payment arrangements include prospectively determined rates per discharge, reimbursed costs, discounted charges, and per diem payments. For uninsured patients who do not qualify for charity care, the Enterprise recognizes revenue based on established rates, subject to certain discounts and implicit price concessions as determined by the Enterprise. The Enterprise determines the transaction price based on standard charges for services provided, reduced by explicit price concessions provided to third-party payers, discounts provided to uninsured patients in accordance with the Enterprise policies, and implicit price concessions provided to uninsured patients. Explicit price concessions are based on contractual agreements, discount policies, and historical experience. Implicit price concessions represent differences between amounts billed and the estimated consideration the Enterprise expects to receive from patients, which are determined based on historical collection experience, current market conditions, and other factors.

Generally, patients who are covered by third-party payers are responsible for patient responsibility balances, including deductibles and coinsurance, which vary in amount. The Enterprise estimates the transaction price for patients with deductibles and coinsurance based on historical experience and current market conditions. The initial estimate of the transaction price is determined by reducing the standard charge by any explicit price concessions, 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 year ended December 31, 2021. Subsequent changes that are determined to be the result of an adverse change in the patient's ability to pay are recorded as bad debt expense. Bad debt expense for the year ended December 31, 2021 was not material to the combined statement of revenues, expenses and changes in net assets.

A summary of the payment arrangements with major third-party payers is as follows:

#### Medicare and Medicaid

Under the Medicare and Medicaid programs, the Enterprise is entitled to reimbursement for certain patient charges at rates determined by federal and state governments. Differences between established billing rates and reimbursements from these programs are recorded as contractual adjustments to arrive at patient service revenue.

Inpatient care services and outpatient services rendered to Medicare program beneficiaries are paid at prospectively determined rates based on clinical, diagnostic, and other factors. The Enterprise is reimbursed for certain cost reimbursable items at a tentative rate with final settlement determined after submission of annual cost reports, and audits thereof, by the Medicare administrative contractor. The Enterprise's Medicare cost reports have generally been audited by the Medicare fiscal intermediary through December 31, 2017.

December 31, 2021

Dollars in thousands.

Inpatient reimbursement under the Medicaid program is based on prospectively determined rates based on clinical, diagnostic and other factors. Outpatient services rendered to Medicaid program beneficiaries are reimbursed under various reimbursement methodologies. The Enterprise is reimbursed for outpatient services at tentative rates with final settlement determined after submission of annual cost reports, and audits thereof, by the fiscal intermediary. The Enterprise's Medicaid cost reports have generally been audited by the Medicaid fiscal intermediary through December 31, 2017.

The Enterprise has also entered into contracts with certain Medicare and Medicaid managed care organizations to receive reimbursement for providing services to selected enrolled 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.

For North Carolina (NC) operations, the Enterprise receives Medicaid supplemental payments commonly referred to as Disproportionate Share ("DSH") and Upper Payment Limit ("UPL") payments that are intended to offset a portion of the cost incurred for delivering care to Medicaid and Uninsured patients. The Enterprise provides a portion of the state contribution needed to draw down the federal match needed to make these payments. The state share consists of multiple sources including Certified Public Expenditures ("CPE's"), Intergovernmental Transfers ("IGT's"), and state legislated assessment payments. Under the assessment program, the Enterprise reports assessments and receipts within other operating expenses and patient service revenue, respectively, in the accompanying combined statements of revenues, expenses and changes in net assets.

The NC Medicaid program transitioned to Managed Care effective July 1, 2021, resulting in significant changes to hospital reimbursement methodologies. Effective July 1, 2021, the NC's legacy reimbursement program has been terminated and the majority of its historical supplemental payments are now included in the hospital specific base payment rates for both Medicaid Managed Care payers and Medicaid fee for service payments. The Enterprise hospitals will continue to receive Graduate Medical Education (GME) payments and DSH payments discretely paid outside of the newly created base payments. In total, the overall level of Medicaid funding is expected to remain consistent as the new base rates, GME payments and DSH payments, net of the legislated assessments, CPE's, and IGT's should be comparable with historical levels. There are no assurances regarding reimbursements under the NC Medicaid program as the program could be materially modified in the future.

Similar programs exist in Georgia for which assessments and receipts are reported within other operating expenses and patient service revenue, respectively, in the accompanying combined statement of operations and changes in net assets.

For Georgia operations, under the Georgia Indigent Care Trust Fund ("ICTF") Program, the Enterprise receives ICTF payments for treating a disproportionate number of Medicaid and other indigent patients. ICTF payments are based on estimated uncompensated cost of services to Medicaid and uninsured patients.

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Dollars in thousands.

The following is a summary of the funds recognized and assessments paid under these programs for the year ended December 31, 2021:

	Atrium Health CMHA		Atrium Health WFB	Atrium Health nterprise
Net funds recognized Less assessments paid	\$	313,215 (73,665)	\$ 129,031 (47,689)	\$ 430,355 (118,909)
Net amounts recognized	\$	239,550	\$ 81,342	\$ 311,446

Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation. Settlements with third-party payers for retroactive adjustments due to reviews and audits are considered variable consideration and are included in the determination of the estimated transaction price for providing patient care in the period the related services are provided. These settlements are estimated based on the terms of the payment agreement with the payer, correspondence from the payer, and the Enterprise's historical settlement activity, including an assessment to ensure that it is probable that a significant reversal in the amount of cumulative revenue recognized will not occur when the uncertainty associated with the retroactive adjustment is subsequently resolved. Estimated settlements are adjusted in future periods as adjustments. The following is a summary of the estimated amounts that retroactive settlement adjustments increased patient service revenue for the year ended December 31, 2021:

		Atrium Health CMHA	Atrium Health WFB		ł	Atrium Iealth terprise
Retroactive settlement adjustment	\$	20,572	\$	6,337	\$	26,909

Management believes it has complied in all material respects with Medicare and Medicaid laws and regulations. The following is a summary of amounts due to third-party payers related to Medicare and Medicaid at December 31, 2021:

	Atrium Health CMHA	Atrium Health WFB		Atrium Health Enterprise	
Amounts due to Medicare and Medicaid	\$ 322,611	\$	60,484	\$	383,095

#### Other Arrangements

Payment arrangements with commercial insurance carriers, health maintenance organization, and preferred provider organizations provide for payment using prospectively determined rates per discharge, discounts from established charges, and prospectively determined per diem rates.

#### December 31, 2021

Dollars in thousands.

#### q. Financial Assistance

The Enterprise cares for patients who meet certain criteria under its financial assistance policies without charge or at amounts less than its established rates. The Enterprise does not pursue collection of amounts determined to qualify under those policies, and accordingly, such amounts are not recognized as revenue.

## r. Gifts, Grants and Contracts

Grants for basic research and other sponsored programs are generally subject to restrictions and conditions that must be met before the Enterprise is entitled to funding. Accordingly, advances from granting agencies are generally considered refundable in the unlikely event specified services are not performed. The Enterprise recognizes revenues on grants for basic research and other sponsored programs as the awards for such programs are expended, since expenditure in accordance with award terms typically results in the simultaneous release of restrictions and conditions imposed by the grantor. Revenue from exchange contracts for applied research is recognized as contractual performance obligations are substantially met. Indirect cost recovery on U.S. government grants and contracts is based upon a predetermined negotiated rate and is recorded as gifts, grants and contracts revenue.

## s. Net Student Tuition and Fees

Student tuition and fees for instruction and other educational services, net of scholarships and fellowships, are substantially billed and collected prior to the end of each semester. Revenues are earned and recognized over the course of each semester as education services are delivered. Student tuition and fees received in advance of services to be rendered are recorded as deferred revenue. Student aid provided by the Enterprise is an implicit price concession reflected as a reduction in student tuition and fee revenue. Student aid does not include payments made to students for services rendered to the Enterprise.

## t. Other Sources of Revenue

Other sources of revenue for the Enterprise is composed of the following amounts for the year ended December 31, 2021:

-	Atrium Health CMHA	 Atrium Health WFB		Atrium Health Enterprise
Reimbursed services provided to affiliates \$ Pharmacy sales Rental and other revenue	77,313 413,672 266,544	\$ 	\$	77,313 806,876 335,483
\$	757,529	\$ 492,502	\$_	1,219,672

#### December 31, 2021

Dollars in thousands.

#### u. Contributions

Atrium Health CMHA donated funds received to acquire property, plant and equipment are considered donations of capital and are included as a component of capital assets and the net investment in capital assets portion of net position.

For Atrium Health WFB and the Enterprise, contributions, including unconditional promises to give, are recognized in the period the contributions or promise is made. Contributions of assets other than cash are recorded at their estimated fair value. Unconditional promises expected to be collected in future years are recorded at the present value of expected future cash flows discounted at an appropriate discount rate commensurate with the risks involved. Amortization of discounts is recorded as additional contribution revenue in accordance with donor-imposed restrictions, if any, on the contributions. Conditional promises to give are not recognized until they become unconditional, that is, when the conditions on which they depend are substantially met.

#### v. Income Taxes

Atrium Health Inc., Atrium Health Navicent, Atrium Health Floyd, NCBH, WFUHS, and various affiliates are tax exempt organizations as described in Section 501c(3) of the Internal Revenue Code (the Code) and are generally exempt from federal income taxes on related income pursuant to Section 501(a) of the Code. As a North Carolina hospital authority, Atrium Health CMHA is also exempt from state and federal taxes.

Accordingly, no provision for income taxes is made in the combined financial statements. If applicable, unrelated business income is reported by all member and subsidiary organizations on IRS Form 990 T. Fiscal years ending on or after June 30, 2018 remain subject to examination by federal and state tax authorities.

The Enterprise and its subsidiaries have evaluated uncertain tax positions for the fiscal year ended December 31, 2021, including a quantification of tax risks in areas such as unrelated business income and taxation of its for-profit subsidiaries. This evaluation did not have a material effect on the Enterprise's combined financial statements for the year ended December 31, 2021.

#### w. Use of Estimates

Atrium Health CMHA and Atrium Health WFB prepare its financial statements in accordance with GAAP, which requires management to make estimates and assumptions relating to the reporting of assets and liabilities and the 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. Significant items subject to such estimates and assumptions include the carrying amount of land, buildings, and equipment, valuation allowances for receivables, environmental liabilities, fair value of investments and assets whose use is limited, obligations related to employee benefits, third-party payer settlements, and the ultimate cost of asserted and unasserted medical malpractice claims. Actual results could differ from those estimates.

### December 31, 2021

## 2. Liquidity and Availability

As of December 31, 2021, Atrium Health Charlotte had cash and cash equivalents of \$482,857. A portion of the cash and cash equivalents were invested with the North Carolina Capital Management Trust's Government Portfolio, which has a rating of AAAm from S&P Global Ratings and Aaa- from Moody's Investors Service, Inc.

As of December 31, 2021, Atrium Health Navicent had uncollateralized cash and cash equivalents of \$61,028 which consisted of cash on hand, deposits with banks and investments in highly liquid debt instruments with maturities of three months or less when purchased, excluding assets limited as to use.

As of December 31, 2021, Atrium Health Floyd had uncollateralized cash and cash equivalents of \$255,713 which consisted of cash on hand, deposits with banks and investments in highly liquid debt instruments with maturities of three months or less when purchased, excluding assets limited as to use.

Financial assets available for general expenditures within one year of the combined balance sheet date comprise the following at December 31, 2021:

	Atrium Health CMHA	Atrium Health WFB	Atrium Health Enterprise	
Cash and cash equivalents	\$ 799,5	98 \$ 332,481	\$ 1,136,105	
Patient receivables	1,291,7	51 357,037	1,648,788	
Current accounts, grants and notes				
receivable, net	141,5	61 148,390	307,741	
Investments available to be liquidated	8,053,0	59 1,766,560	9,829,421	
Financial assets available within				
one year	\$ 10,285,9	69 \$ 2,604,468	\$ 12,922,055	

To help manage unanticipated liquidity needs, Atrium Health WFB has committed lines of credit with a total borrowing capacity of \$300,000 at December 31, 2021, which it could draw upon. Additionally, the Enterprise has board-designated endowment funds of \$539,010 at December 31, 2021. Although the Enterprise does not intend to spend from its board-designated endowment funds other than amounts appropriated for general expenditures as part of its annual budget approval and appropriation, amounts from its board-designated endowment funds could be made available if necessary.

The asset allocation of the Enterprise's investment portfolio is broadly diversified and is designed to maximize the probability of achieving the Enterprise's long-term investment objectives at an appropriate level of risk, while maintaining a level of liquidity to meet the needs of ongoing portfolio management. The nature of certain investments restricts the liquidity and availability of these investments to be available for the general expenditures of the Enterprise within one year of the combined balance sheet date. These investments have been excluded from the amounts above.

#### 3. Accounts, Grants and Notes Receivable

Net accounts, grants and notes receivable consist of the following at December 31, 2021:

	Atrium Health CMHA		Atrium Health WFB	Atrium Health nterprise
Accounts receivable	\$ 127,644	\$	62,315	\$ 117,492
Grants receivable	18,389		63,841	82,230
Notes receivable	9,741		15,583	25,324
Contributions receivable	 	<del></del>	74,338	 169,474
Accounts, grants and notes receivable, net	155,774		216,077	394,520
Less current portion	 (141,561)		(148,390)	 (307,741)
Accounts, grants and notes receivable, long-term	\$ 14,213	\$	67,687	\$ 86,779

Accounts, grants and notes receivable, long term is included in other assets in the combined balance sheet.

The following table is an analysis of the maturities of contributions receivable at December 31, 2021:

	ł	trium Iealth WFB		Atrium Health terprise
One year or less One to five years More than five years	\$	18,487 55,947 2,166	\$	52,204 93,407 46,766
Contributions receivable, gross		76,600		192,377
Estimated uncollectible amounts Discount to present value		(1,962) (300)		(4,135) (18,768)
Contributions receivable, net	\$	74,338	\$	169,474

Contributions receivable are discounted at a rate commensurate with the scheduled timing of receipt. Such amounts outstanding as of December 31, 2021 were discounted at rates ranging from 1.71% to 2.22% for Atrium Health WFB and 3% to 7% for Atrium Health Foundation.

# 4. Investments and Assets Limited as to Use

#### Atrium Health CMHA:

Atrium Health CMHA may, for funds not required for immediate disbursement, make investments that are permissible for trustees, executors, and other fiduciaries under North Carolina and Georgia laws. Funds that are not needed for immediate operating needs and that have been designated by the governing boards for capital improvements, along with other trusteed assets, are invested in

short term investments, fixed income securities, equity securities and limited partnerships. Investments included in the portfolio are reflected at fair value at the balance sheet date, as noted in the table below, with gains and losses reflected in nonoperating income (loss) in the accompanying statement of revenues, expenses and changes in net position.

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Atrium Health CMHA operates a regional integrated healthcare system, which has significant capital needs arising from both changes in medical technology and a growing demand for healthcare services. At December 31, 2021, the fair value of investments designated for capital improvements of \$7,496,033 is substantially less than the historical cost of property, plant and equipment of \$9,424,658.

Atrium Health CMHA's Short term investments and Investments and assets limited as to use – current and noncurrent (which includes investments designated for capital improvements and bond proceeds held by trustee), based on fair value as of December 31, 2021, and organized by investment type to provide an indication of the level of investment and deposit risks assumed, are as follows:

	Ratings by nationally recognized agency	Effective duration in years	Charlotte designated for capital improvements	Charlotte other assets limited as to use	Navicent designated for capital improvements	Navicent other assets limited as to use	Floyd all investments
Short term investments			\$ 144,341	\$ 562,725	\$ 38,853	\$ 1,620	\$ 41,177
Fixed income:							
U.S. government treasuries							
and agencies	AAA	3.96	18,406	268	2,013	-	21,763
	AA	11.68	166,347	6,292	18,203	-	-
Mortgage pass-throughs	AAA	2.61	10,710	313	1,172	-	12,923
	AA	3.18	179,859	5,345	19,681	-	•
	Α	2.66	5,743	213	628	-	-
	BBB	2.49	1,309	95	143	-	-
Collateralized mortgage	AAA	3.56	1,708	-	187	-	323
obligations	AA	2.17	1,527	-	167	-	-
Corporate bonds	AAA	2.43	5,034	83	551	-	-
	AA	2.94	13,980	728	1,530	-	1,290
	Α	4.31	88,154	2,830	9,646	58,078	4,456
	BBB	4.47	92,591	3,011	10,132	-	10,383
	BB	3.29	801	61	88	-	-
Municipal bonds	AAA	2.21	8,598	465	941	-	-
·	AA	2.63	14,528	165	1,590	-	-
	А	2.50	1,543	71	169	-	-
Asset-backed securities	AAA	2.22	15,178	99	1,661	-	235
	AA	1.79	21,566	848	2,360	-	447
	Α	3.30	1,216	-	133	-	-
Fixed income - funds	N/A	1.93	1,078,819	30,688	118,050	-	41,900
Long/short fixed income	N/A	N/A	469,326	-	51,356	4,523	-
Total fixed income							
(weighted-average duration)		3.52	2,196,943	51,575	240,401	62,601	93,720
Domestic equities			1,599,222	50,740	174,995	19,763	-
International equities			988,575	30,675	108,175	32,139	-
Global equities			1,079,062	23,512	118,076		-
Total equity			3,666,859	104,927	401,246	51,902	
Global asset allocation funds			333,541	7,924	36,498	-	-
Real assets funds			278,105	9,621	30,432	156	-
Multi-strategy hedge funds			2.0,.00	2,480	508		-
Private equity funds			8,436	50,492	24,494	-	560
Total reported value			\$ 6,628,225	\$ 789,744	\$ 772,432	\$ 116,279	\$ 135,457

December 31, 2021

Dollars in thousands.

The investments designated for capital improvements of \$7,496,033 includes \$772,432 of Atrium Health Navicent funds, and \$95,376 of Atrium Health Floyd funds. Of the Atrium Health Navicent funds, \$725,222 are invested alongside Atrium Health Charlotte funds under the terms of an Investment Coordination Agreement (ICA) between Atrium Health Charlotte and Atrium Health Navicent, under which Atrium Health Navicent retains beneficial ownership of its funds. Atrium Health Navicent funds invested under the ICA represent approximately 9.80% of the combined portfolio of \$7,400,657. Atrium Health Navicent's funds also include \$47,209 of investments separately held by Atrium Health Navicent.

#### **Custodial Credit Risk**

Custodial credit risk is the risk that Atrium Health CMHA will not be able to recover the value of its bank deposits, which are exposed to custodial credit risk if they are uninsured and uncollateralized. As of December 31, 2021, all of Atrium Health CMHA's bank deposits were either insured by federal depository insurance or collateralized by the Pooling Method. From time to time, Atrium Health Navicent deposits at banks exceed the federal deposit insurance corporation insurance limit. By policy, the amount of credit exposure to any one institution is limited.

Fixed income investments and equity securities are exposed to custodial credit risk if the securities are uninsured, are not registered in the name of Atrium Health CMHA and are held by either the counterparty or the counterparty's trust department or agent, but not in Atrium Health CMHA's name. As of December 31, 2021, all of Atrium Health CMHA's fixed income investments and equity securities are held by Atrium Health Charlotte's, Atrium Health Navicent's or Atrium Health Floyd's custodial bank in Atrium Health Charlotte's, Atrium Health Navicent's or Atrium Health Floyd's name and are, therefore, not exposed to custodial credit risk.

#### **Credit Risk**

With respect to fixed income investments, credit risk is the risk that an issuer or other counterparty to an investment will not fulfill their obligations as required by the fixed income security. Atrium Health CMHA's investment policy requires that the overall average credit quality of the non-core fixed income portfolios must be maintained at A or higher, and the overall average credit quality of the core fixed income portfolios must be maintained at AA or higher. As of December 31, 2021, Atrium Health CMHA's fixed income portfolio met these overall average requirements. The quality ratings of Atrium Health CMHA's investments in fixed income securities (excluding long/short fixed income), as determined by nationally recognized statistical rating organizations, are disclosed in the preceding tables.

#### December 31, 2021

Dollars in thousands.

#### **Concentration of Credit Risk**

Credit concentration risk results from not adequately diversifying investments. Per Atrium Health CMHA's investment policy, equity and fixed income restrictions include, (1) no more than 7% of any investment manager's equity portfolio may be invested in securities of any one issuing corporation, and (2) fixed income investments in any single issuer (excluding obligations of the U.S. government and its agencies) may not exceed 5% of any investment manager's portfolio market value at the time of purchase. Although exceptions to these policy restrictions are at times granted to investment managers, at no time may an investment in any one corporation exceed 5% of that corporation's outstanding shares while fixed income investments in any single issuer (excluding obligations of the U.S. government and its agencies) may not exceed 5% of the total issue at the time of purchase. At December 31, 2021, no investment in any one corporation or single issuer exceeded allowable thresholds.

#### Atrium Health CMHA, Atrium Health WFB and Atrium Health Enterprise:

Short term investments, assets limited as to use – investments and investments and assets limited as to use consist of the following at December 31, 2021:

	 Atrium Health CMHA	 Atrium Health WFB	E	Atrium Health nterprise
Short-term investments <sup>(a)</sup>	\$ 788,714	\$ 144,426	\$	951,520
Absolute return <sup>(b)</sup>	898,646	885,019		1,832,172
Commodities <sup>(c)</sup>	318,313	17,935		352,121
Fixed income <sup>(a)</sup>	2,124,557	500,790		2,687,485
Private equity <sup>(e)</sup>	83,422	519		108,147
Public equity <sup>(1)</sup>	4,224,935	554,285		5,000,027
Real estate <sup>(g)</sup>	_	10,747		10,747
Pooled investments held at WFU <sup>(h)</sup>	_	2,162		2,162
Beneficial interest in perpetual trusts and				
assets held by others <sup>(i)</sup>		23,242		23,242
Investments in equity-method affiliates <sup>(i)</sup>	93,385	87,055		180,440
Other <sup>(K)</sup>	 3,550	 222,082		225,630
Total investments and assets limited as to use	\$ 8,535,522	\$ 2,448,262	\$	11,373,693

- (a) **Short -term investments** includes temporary cash investment accounts and restricted cash, including bond proceeds held by trustee and collateral on interest rate swaps.
- (b) Absolute return includes investments in hedge funds and hedge fund -of -funds that invest both long and short on a global basis primarily in a wide range of securities and other instruments, including equity securities (common stocks), credit securities (both investment grade and non-investment grade), commodities, private equity, currencies, futures contracts, options, and other derivative instruments. This class also includes absolute return mutual funds and exchange traded funds. The investment objective of this asset class is to produce attractive long -term risk -adjusted returns with low correlation to traditional asset classes.

December 31, 2021

- (c) Commodities includes investments in hedge funds and hedge fund -of -funds that invest in a wide range of commodities, securities, and financial instruments with a focus on commodities markets. This class also includes commodity (i.e., precious metals, industrial materials and energy) mutual funds and exchange traded funds. The investment objective of this class is to produce attractive long -term risk -adjusted returns in excess of traditional commodity index exposure.
- (d) **Fixed income** includes corporate bonds, mortgage-backed securities, asset-backed securities, mutual funds, exchange traded funds, and other fixed income securities. This class also includes investments in hedge funds and hedge fund-of-funds that invest in fixed income securities.
- (e) **Private equity** includes various illiquid venture capital investments.
- (f) **Public equity** includes investments primarily in U.S. and non -U.S. (including emerging markets) common stocks, mutual funds, and exchange traded funds. This class also includes investments in hedge funds and hedge fund -of -funds that invest on both a long and short basis in global equity markets. The investment objective for this class is capital appreciation over the long term.
- (g) **Real estate** includes real estate mutual funds and exchange traded funds.
- (h) **Pooled investments held at WFU** includes primarily alternative investment vehicles and other investment interests.
- (i) **Beneficial interest in perpetual trusts and assets held by others** includes trusts and certain other assets held and administered by others for which the Enterprise has an unconditional right to receive all or a portion of the specified cash flows.
- (j) Investments in equity-method affiliates includes various equity-method affiliates (generally, companies in which the Enterprise has an equity-method interest ranging from 20% to 50%).
- (k) **Other** includes primarily funds held under retirement and benefit plans and other miscellaneous investments.

The Enterprise had unfunded purchase commitments of \$16,421 at December 31, 2021.

Notes to Combined Financial Statements

## December 31, 2021

Dollars in thousands.

The following is a summary of redemption frequency for the Enterprise's investments at December 31, 2021:

Category	Redemption frequency (in days), if currently eligible	Redemption notice period (in days)
Short-term investments	1 to 7	1
Absolute return	daily to >365	1 to 90
Commodities	daily	1 to 2
Fixed income	daily	1 to 2
Private equity	N/A	N/A
Public equity	daily	1 to 2
Real estate	daily to >365	1 to 2
Pooled investments held at WFU	N/A	N/A
Beneficial interest in perpetual trusts and assets		
held by others	N/A	N/A
Investments in equity-method affiliates	N/A	N/A
Other	N/A	N/A

Notes to Combined Financial Statements

December 31, 2021	Decei	mber	31,	20	21
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Dollars in thousands.

Designations of investments and assets whose use is limited consist of the following at December 31, 2021 for Atrium Health WFB and the Enterprise, respectively:

		hout donor strictions		th donor trictions	Atrium Health WFB Total			
Endowment funds	\$	539,010	\$	248,528	\$	787,538		
Funds designated for capital improvements		1,005,602		_		1,005,602		
Funds designated for settlement of professional liability costs Collateral for derivative agreements		3,949 3,630				3,949 3,630		
Beneficial interests in perpetual trusts and assets held by others Funds held under retirement and		_		23,242		23,242		
benefit plans Designated for restricted purposes		122,068 4,110		50,959		122,068 55,069		
Assets whose use is limited	\$	1,678,369	\$	322,729		2,001,098		
Other unrestricted investments Investments in equity-method						360,109		
affiliates						87,055		
Investments and assets whose use is limited					\$	2,448,262		
		hout donor strictions		ith donor strictions		rium Health erprise Total		
Endowment funds								
Funds designated for capital improvements	re	strictions	res	strictions	Ente	erprise Total		
Funds designated for capital	re	strictions 539,010	res	strictions	Ente	erprise Total 787,538		
Funds designated for capital improvements Funds designated for settlement of professional liability costs Collateral for derivative agreements Beneficial interests in perpetual trusts and assets held by others	re	strictions 539,010 8,541,714 248,296	res	strictions	Ente	erprise Total 787,538 8,541,714 248,296		
Funds designated for capital improvements Funds designated for settlement of professional liability costs Collateral for derivative agreements Beneficial interests in perpetual	re	strictions 539,010 8,541,714 248,296 3,630 — 148,532	res	strictions 248,528 — — 23,242 —	Ente	erprise Total 787,538 8,541,714 248,296 3,630 23,242 148,532		
Funds designated for capital improvements Funds designated for settlement of professional liability costs Collateral for derivative agreements Beneficial interests in perpetual trusts and assets held by others Funds held under retirement and	re	strictions 539,010 8,541,714 248,296 3,630 —	res	strictions 248,528 — — —	Ente	erprise Total 787,538 8,541,714 248,296 3,630 23,242		
Funds designated for capital improvements Funds designated for settlement of professional liability costs Collateral for derivative agreements Beneficial interests in perpetual trusts and assets held by others Funds held under retirement and benefit plans	<u>re</u> \$	strictions 539,010 8,541,714 248,296 3,630 — 148,532	res	strictions 248,528 — — 23,242 —	Ente	erprise Total 787,538 8,541,714 248,296 3,630 23,242 148,532		
Funds designated for capital improvements Funds designated for settlement of professional liability costs Collateral for derivative agreements Beneficial interests in perpetual trusts and assets held by others Funds held under retirement and benefit plans Designated for restricted purposes	<u>re</u> \$	strictions 539,010 8,541,714 248,296 3,630 — 148,532 615,232	\$	strictions 248,528 — — 23,242 — 464,960	Ente	erprise Total 787,538 8,541,714 248,296 3,630 23,242 148,532 1,080,192		
Funds designated for capital improvements Funds designated for settlement of professional liability costs Collateral for derivative agreements Beneficial interests in perpetual trusts and assets held by others Funds held under retirement and benefit plans Designated for restricted purposes Assets whose use is limited Other unrestricted investments	<u>re</u> \$	strictions 539,010 8,541,714 248,296 3,630 — 148,532 615,232	\$	strictions 248,528 — — 23,242 — 464,960	Ente	erprise Total 787,538 8,541,714 248,296 3,630 23,242 148,532 1,080,192 10,833,144		

#### December 31, 2021

Dollars in thousands.

#### **Investment Return**

Total investment return included in net position for Atrium Health CMHA and change in change in net assets without donor restrictions for Atrium Health WFB and the Enterprise in the accompanying combined statement of revenues, expenses and changes in net position and net assets comprises the following for the year ended December 31, 2021:

		Atrium Health CMHA	Atrium Health WFB	Atrium Health Iterprise
Interest and dividend income, net Net realized gains Net unrealized gains	\$	96,180 356,568 304,860	\$ (5,454) 80,309 94,800	\$ 91,970 436,330 400,495
Total investment return	\$	757,608	\$ 169,655	\$ 928,795

Total investment return is reflected in the accompanying combined statement of revenues, expenses and changes in net position and net assets as follows at December 31, 2021:

	I	Atrium Health CMHA	Atrium Health WFB	E	Atrium Health nterprise
Operating: Investment return designated for current operations Nonoperating: Net investment gains	\$		\$ 32,523 169,655	\$	32,523 928,795
Total investment return included in change in net assets without donor restrictions		757,608	 202,178		961,318
With donor restrictions: Investment return in excess of amounts designated for current operations Net investment gains (losses)			 8,532 32,109		8,532 79,256
Total investment return included in change in net assets with donor restrictions			 40,641		87,788
Total investment return	\$	757,608	\$ 242,819	\$	1,049,106

#### December 31, 2021

#### 5. Fair Value of Financial Instruments

Under GAAP, fair value is defined as the exchange price that would be received for an asset or paid to transfer a liability (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. GAAP also prioritizes, for the measurement of fair value, the use of market-based information over entity specific information and establishes a three level hierarchy for fair value based on the transparency of inputs used in the valuation of an asset or liability as of the measurement date. The fair value hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to measurements involving significant unobservable inputs (Level 3 measurements).

Financial instruments measured and reported at fair value are classified and disclosed within one of the following categories:

Level 1 – valuations for financial instruments traded in active exchange markets as of the reporting date. Valuations are obtained from readily available pricing sources for market transactions involving identical assets or liabilities.

*Level 2* – valuations for financial instruments as determined through direct or indirect observations other than quoted market prices.

Level 3 – valuations for financial instruments that are derived from other valuation methodologies including discounted cash flow models and similar techniques, and not based on market exchange, dealer or broker traded transactions. These valuation methodologies are based on unobservable inputs in situations where there is little or no market activity for the asset or liability. Level 3 valuations incorporate certain assumptions and projections in determining the fair value assigned to such assets or liabilities.

Net Asset Value (NAV) – Certain investments that are measured at fair value using net asset value per share (or its equivalent) as a practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in the table below are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the accompanying combined balance sheets.

The classification of investments in the fair value hierarchy is not necessarily an indication of the risks, liquidity, or degree of difficulty in estimating the fair value of each investment's underlying assets and liabilities. In general, for Level 2, Level 3, and NAV investments, the Enterprise utilizes the investment manager of the asset to provide a valuation estimate based on disclosed techniques and processes, which have been reviewed by the Enterprise management for propriety and consistency with consideration given to type and investment strategy.

Notes to Combined Financial Statements

#### December 31, 2021

Dollars in thousands.

The following tables summarize the valuation of the Atrium Health CMHA, Atrium Health WFB, and the Enterprise's financial instruments recorded at fair value within the fair value hierarchy levels as of December 31, 2021, respectively:

				Atriu	m Hea	alth CMHA		
			Fair V	alue Measur	emen		 Investments	
		Level 1	_	Level 2		Level 3	Reported at NAV <sub>1</sub>	 Total
Investments and assets whose use is								
limited at fair value:								
Short-term investments	\$	788,714	\$		\$	_	\$ 	\$ 788,714
Absolute return						_	898,646	898,646
Commodities		318,313				_		318,313
Fixed income		911,385		850,577		_	362,595	2,124,557
Private equity						_	83,422	83,422
Public equity		3,470,973		_		_	753,962	4,224,935
Other	<b></b>					••••	 3,550	 3,550
Investments and assets whose								
use is limited at fair value	\$	5,489,385	\$	850,577	\$		\$ 2,102,175	\$ 8,442,137
Equity method affiliates								 93,385
Total investments and assets								
whose use is limited								\$ 8,535,522
Other liabilities at fair value:								
Interest rate swaps				263,120			 	 263,120
Total other liabilities at fair value	\$		\$	263,120	\$		\$ 	\$ 263,120

1) Fund Investments reported at NAV as a practical expedient estimate of fair value at December 31, 2021.

Notes to Combined Financial Statements

#### December 31, 2021

Dollars in thousands.

				Atri	um He	alth WFB				
			Fair V	alue Measur	ement			Investments		
		Level 1		Level 2		Level 3	-	Reported at NAV <sub>1</sub>		Total
Investments and assets whose use is										
limited at fair value:										
Short-term investments	\$	121,159	\$	23,267	Ś		Ś	_	\$	144,426
Absolute return	Ŧ	4,552	•		•	_	·	880,467		885,019
Commodities		17,935		_						17,935
Fixed income		216,475		284,315		_		_		500,790
Private equity		_				519				519
Public equity		321,320		232,965				_		554,285
Real estate		10,717				30		14000		10,747
Pooled investments held at WFU				_		2,162		_		2,162
Beneficial interest in perpetual						-				
trusts and assets held by others		_				23,242				23,242
Other		94,333		127,749						222,082
Investments and assets whose										
use is limited at fair value	¢	786,491	Ś	668,296	\$	25,953	\$	880,467	Ś	2,361,207
use is infined at fair value	<u> </u>	700,491	-	000,200	Ť.		-	000,107	*	2,002,207
Equity method affiliates										87,055
Total investments and assets										
whose use is limited									\$	2,448,262
Other liabilities at fair value:										
Employee benefits - nonrecurring	\$	_	Ś	122,068	Ś	_	Ś		s	122,068
Interest rate swaps	Ť	_	*	3,525	,	_	•			3,525
Annuities payable - nonrecurring				3,804				_		3,804
Total other liabilities at fair value	\$	_	\$	129,397	\$		\$		\$	129,397

1) Fund Investments reported at NAV as a practical expedient estimate of fair value at December 31, 2021.

			Atrium	Healt	h Enterprise			
	 	Fair \	/alue Measur	emen	s		Investments	
	 Level 1		Level 2		Level 3		Reported at NAV <sub>1</sub>	 Total
Investments and assets whose use is								
limited at fair value:								
Short-term investments	\$ 928,253	\$	23,267	\$	_	\$	-	\$ 951,520
Absolute return	4,552						1,827,620	1,832,172
Commodities	352,121							352,121
Fixed income	1,147,849		1,159,283		_		380,353	2,687,485
Private equity	-		_		519		107,628	108,147
Public equity	3,975,379		232,965		_		791,683	5,000,027
Real estate	10,717				30			10,747
Pooled investments held at WFU					2,162			2,162
Beneficial interest in perpetual								
trusts and assets held by others	_				23,242		_	23,242
Other	 94,333		127,749			<u></u>	3,548	 225,630
Investments and assets whose								
use is limited at fair value	\$ 6,513,204	\$	1,543,264	\$	25,953	\$	3,110,832	\$ 11,193,253
Equity method affiliates								 180,440
Total investments and assets								
whose use is limited								\$ 11,373,693
Other liabilities at fair value:								
Employee benefits - nonrecurring	\$ _	\$	122,068	\$		\$	_	\$ 122,068
Interest rate swaps	_		266,645					266,645
Annuities payable - nonrecurring	 _		3,804		<u></u>			 3,804
Total other liabilities at fair value	\$ _	\$	392,517	\$		\$		\$ 392,517

1) Fund Investments reported at NAV as a practical expedient estimate of fair value at December 31, 2021.

December 31, 2021

The fair values of the Enterprise's interest rate swaps (see note 10) were estimated using the zerocoupon method. This method calculates the future net settlement payments required by the swap, assuming that the current forward rates implied by the yield curve correctly anticipate future spot interest rates. These payments are then discounted using the spot rates implied by the current yield curve for hypothetical zero-coupon bonds due on the date of each future net settlement on the swaps. The spot rates used for discounting are further adjusted for the credit (nonpayment) risk associated with the party that is a net debtor as of the measurement date. The swap valuations are considered Level 2 liabilities and were valued at \$266,645 at December 31, 2021.

The following tables present the activity for Level 3 investments and assets whose use is limited held at Atrium Health WFB and the Enterprise for the year ended December 31, 2021:

	Beginning balance	un	lized and realized s (losses)	Pu	urchases	 Sales	and	fers into (out) of evel 3	Ending balance
Level 3 investments:									
Private equity	\$ 538	\$	(2)	\$		\$ (17)	\$		\$ 519
Real estate	33		(3)						30
Pooled investments held at WFU	2,023		139						2,162
Beneficial interest in perpetual									
trusts and assets held by others	 23,474		(112)			 (120)			 23,242
Total Level 3 investments	\$ 26,068	\$	22	\$		\$ (137)	\$		\$ 25,953

Transfers into and out of Level 3 are typically the result of a change in observation of significant valuation inputs required by various models.

The Atrium Health Foundation's investments at December 31, 2021 are as follows:

		Atrium Health Foundation								
		Fair Value Measurements Investments								
		Level 1		Level 2		Level 3	-	Reported at NAV <sub>1</sub>		Total
Investments at fair value:										
Short-term investments	\$	18,380	\$		\$		\$		\$	18,380
Absolute return		-						48,506		48,506
Commodities		15,873								15,873
Fixed income		19,989		24,392				17,758		62,139
Private equity		_						24,206		24,206
Public equity	_	183,086			_			37,721	-	220,807
Investments at fair value	\$	237,328	\$	24,392	\$		\$	128,191	\$	389,911

1) Fund Investments reported at NAV as a practical expedient estimate of fair value at December 31, 2021.

# 6. Endowment

Atrium Health WFB's pooled endowment funds consist of approximately 717 individual funds established for a variety of purposes, but primarily to support its academic activities, including both donor-restricted endowment funds and funds designated by the WFBUMC Board of Directors to function as endowments. Net assets associated with endowment funds, including funds designated by the Board of Directors to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions. Gift annuities, beneficial interest in perpetual

Notes to Combined Financial Statements

#### December 31, 2021

trusts, assets held by others and contributions receivable are not considered components of the endowment.

The Board of Directors has implemented a spending policy for Atrium Health WFB designed to stabilize annual spending levels and preserve the real value of the endowment over time. In accordance with the policy, a predetermined endowment spending rate consistent with Atrium Health WFB's total return objective has been established and approved by the Board of Directors. Should endowment yields prove to be insufficient to support this policy, the balance is provided from capital gains. Should endowment yields exceed the amounts necessary to maintain this objective, the balance is reinvested in the endowment. The endowment spending rate for the year ended December 31, 2021 was approximately 5.3%, calculated as a percentage of the average of the previous three-year semi-annual moving market value on a per unit basis.

The Board of Directors has interpreted the Uniform Prudent Management of Institutional Funds Act (UPMIFA) as allowing Atrium Health WFB to appropriate for expenditure or accumulate so much of an endowment fund as Atrium Health WFB determines is prudent for the uses, benefits, purposes and duration for which the endowment fund is established, subject to the intent of the donor as expressed in the gift instrument.

As a result of this interpretation, Atrium Health WFB's policy is to report as net assets with donor restrictions (i) the original value of gifts donated to the permanent endowment, (ii) the original value of subsequent gifts to the permanent endowment, and (iii) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund.

In accordance with UPMIFA, Atrium Health WFB considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- (a) The duration and preservation of the fund.
- (b) The purpose of the donor-restricted endowment fund.
- (c) General economic conditions.
- (d) The possible effect of inflation and deflation.
- (e) The expected total return from income and the appreciation of investments.
- (f) Other resources of Atrium Health WFB's Investment Committee.
- (g) The investment policies of Atrium Health WFB's Investment Committee.

Notes to Combined Financial Statements

December 31, 2021

Dollars in thousands.

Atrium Health WFB and the	e Enterprise's	endowment	net	assets	consist	of	the	following	at
December 31, 2021, respectiv	ely:								

	 nout donor strictions		th donor strictions	Atrium Health WFB Total		
Board-designated endowment funds Donor-restricted endowment funds:	\$ 539,010	\$		\$	539,010	
Underwater funds Other funds:			(368)		(368)	
Historical value	******		177,515		177,515	
Appreciation	 		71,381	<b></b>	71,381	
Total pooled endowment funds	539,010		248,528		787,538	
Other non-pooled endowment funds	 46	<u></u>	38,524		38,570	
Endowment net assets	\$ 539,056	\$	287,052	\$	826,108	

	Without donor restrictions		th donor trictions	Atrium Health Enterprise Total		
Board-designated endowment funds Donor-restricted endowment funds:	\$	539,010	\$ 	\$	539,010	
Underwater funds Other funds:			(368)		(368)	
Historical value			177,515		177,515	
Appreciation			 71,381		71,381	
Total pooled endowment funds		539,010	248,528		787,538	
Other non-pooled endowment funds		46	 101,461		101,507	
Endowment net assets	\$	539,056	\$ 349,989	\$	889,045	

Changes in Atrium Health WFB and the Enterprise's endowment net assets for the year ended December 31, 2021 are as follows, respectively:

	Without donor restrictions		 With donor restrictions		um Health /FB Total
Endowment net assets, beginning of year	\$	320,657	\$ 247,211	\$	567,868
Investment return: Investment income Net appreciation		4,372 78,556	 2,101 37,975		6,473 116,531
Total investment return		82,928	40,076		123,004
Contributions Appropriation for expenditure Transfers to create new board-designated endowment funds		 (19,279) 154,750	8,797 (9,032)		8,797 (28,311) 154,750
Endowment net assets, end of year	\$	539,056	\$ 287,052	\$	826,108

Notes to Combined Financial Statements

#### December 31, 2021

Dollars in thousands.

	Without donor restrictions		With donor restrictions		 um Health rprise Total
Endowment net assets, beginning of year	\$	320,657	\$	301,824	\$ 622,481
Investment return: Investment income Net appreciation		4,372 78,556	- <u></u>	2,545 45,803	 6,917 124,359
Total investment return		82,928		48,348	131,276
Contributions Appropriation for expenditure Transfers to create new		 (19,279)		9,847 (10,030)	9,847 (29,309)
board-designated endowment funds		154,750			 154,750
Endowment net assets, end of year	\$	539,056	\$	349,989	\$ 889,045

From time to time, the fair value of assets associated with individual donor restricted endowment funds may fall below the value of the original gifts. Deficiencies of this nature existed in four donor-restricted endowment funds at December 31, 2021. These deficiencies resulted from unfavorable market fluctuations that occurred shortly after the investment of new contributions for donor-restricted endowment funds and continued appropriation for certain programs that was deemed prudent by the WFBUMC Board of Directors. The amount by which the funds were underwater was calculated as follows at December 31, 2021:

	ł	trium lealth WFB	ŀ	trium lealth :erprise
Aggregate original gift amount Aggregate fair value	\$	3,802 3,434	\$	3,802 3,434
Aggregate deficiency	\$	(368)	\$	(368)

Atrium Health WFB builds allowable underwater spending into its endowment fund agreements, which is agreed upon and signed by any donor. The applicable distribution may be taken from an endowment fund irrespective of whether the fund's balance is above the total amount of gifts for the fund and any required accumulation from earnings, so long as prudency measures continue to be met. Absent this language, the Enterprise's process is to apply as stated or follow the terms of a fund agreement if different terms are specified. The WFUBMC Board appropriated for expenditure \$162, from endowment funds underwater during the year ended December 31, 2021 following its normal procedure of a 5.3% distribution rate based on a three-year semi-annual moving average.

In addition to the endowment funds detailed above, Atrium Health WFB has other donor-restricted endowment funds of \$4,651 at December 31, 2021.

Notes to Combined Financial Statements

#### December 31, 2021

#### 7. Property and Equipment

Property and equipment for Atrium Health CMHA is summarized as follows for the year ended December 31, 2021:

	Beginning balance	Additions	Transfers	Retirements	Ending balance
Depreciable capital assets: Land improvements Buildings Equipment	\$ 132,663 \$ 4,621,162 <u>3,080,014</u>	9 \$ 11,687 43,448	(1,652) \$ 392,113 62,046	(114) \$ (10,104) (219,563)	130,906 5,014,858 2,965,945
Depreciable capital assets – gross	7,833,839	55,144	452,507	(229,781)	8,111,709
Accumulated depreciation	(4,577,176)	(388,320)		225,670	(4,739,826)
Depreciable capital assets – net	3,256,663	(333,176)	452,507	(4,111)	3,371,883
Nondepreciable capital assets: Land Construction in progress	327,763 703,488	740,498	714 (459,514)		328,477 984,472
Net capital assets	\$\$\$\$	407,322 \$	(6,293)_\$	\$	4,684,832

Depreciation expense for Atrium Health CMHA was \$388,396 for the year ended December 31, 2021.

Property and equipment for Atrium Health WFB and Atrium Health Enterprise are summarized as follows at December 31, 2021:

	 Atrium Health WFB	 Atrium Health Enterprise		
Land and land improvements Buildings and other improvements Fixed and movable equipment Construction in progress	\$ 191,049 1,859,404 1,177,090 152,963	\$ 651,965 7,022,360 4,155,954 1,174,272		
	\$ 3,380,506	\$ 13,004,551		
Less: accumulated depreciation	 (2,096,305)	 (6,848,701)		
Total property and equipment	\$ 1,284,201	\$ 6,155,850		

Total depreciation expense for Atrium Health WFB and the Enterprise was \$143,903 and \$522,940, respectively, for the year ended December 31, 2021.

The Enterprise's policy, in accordance with FASB, is to capitalize interest incurred on debt during the construction of qualifying projects exceeding one year. The Enterprise capitalized interest totaled \$15,155 in 2021.

#### December 31, 2021

Dollars in thousands.

#### Sale-Leaseback Agreements

In 2006, Atrium Health WFB entered into a sale-leaseback agreement to sell and lease back certain assets. The initial lease term is 20 years with four 5-year renewal options. The lease is classified as an operating lease. Future minimum lease payments in each year from 2022 to 2026 are \$8,098, \$8,179, \$8,261, \$8,344 and \$8,427, respectively, and \$3,001 thereafter.

In 2010, Atrium Health WFB entered into a sale-leaseback agreement to sell and lease back certain assets. The initial lease is 16 years with three 5-year renewal options. The lease is classified as an operating lease. Operating lease payments are due monthly and expected future minimum payments in each year from 2022 to 2026 are \$6,301, \$6,459, \$6,620, \$6,786 and \$6,955, respectively, and \$3,521 thereafter.

Atrium Health WFB has a deferred gain related to the sale and lease back of certain assets. The deferred gain was \$10,422 for 2021, and is included in other liabilities in the accompanying combined balance sheets.

The sale-leaseback payments are included in total operating lease payments.

#### 8. Leases

#### Atrium Health CMHA:

Under GASB, Atrium Health CMHA obligations under noncancelable operating leases with remaining terms of more than one year, principally real estate leases for medical office space, as of December 31, 2021, were as follows:

2022	\$ 94,279
2023	85,079
2024	67,219
2025	60,098
2026	52,795
2027-2031	189,362
2032-2036	108,633
2037-2041	12,222
2042- Thereafter	 9,603
	\$ 679,290

#### Atrium Health WFB and Atrium Health Enterprise:

Atrium Health WFB and the Enterprise have operating and finance leases for real estate and equipment that are reported in accordance with FASB lease guidance. Both Atrium Health WFB and the Enterprise determine if an arrangement is a lease at the inception of a contract.

#### December 31, 2021

Dollars in thousands.

The following table presents the components of the lease right-of-use assets and lease liabilities and their classification in the combined balance sheets as of December 31, 2021: Atrium Atrium

Components of lease balances	Classification in combined balance sheet	Atrium Health WFB		Atrium Health Enterprise	
Assets:					
Operating lease assets Finance lease assets	Operating lease right-of-use assets, net Property and equipment, net	\$	196,476 71,596	\$	730,166 110,830
Total leased assets		\$	268,072	\$	840,996
Liabilities: Operating lease liabilities:					
Current Long-term	Current portion of operating lease liabilities Operating lease liabilities,	\$	40,833	\$	119,543
	net of current portion		162,934		643,230
Total operating lease liabilitie	5		203,767		762,773
Finance lease liabilities:					
Current Long-term	Current portion of long-term debt Notes payable, finance leases, and		2,735		7,393
-	line of credit, net of current portion		61,853		97,670
Total finance lease liabilities			64,588		105,063
Total lease liabilities		\$	268,355	\$	867,836

The following table presents the components of lease expense and its classification in the combined statement of revenues, expenses and changes in net assets for the year ended December 31, 2021:

Components of lease expense	Classification in combined statement of operations and changes in net assets	•	Atrium Health WFB		Atrium Health hterprise
Operating lease expense	Other operating expenses	\$ 50,142		\$	148,025
Finance lease expense: Amortization of leased assets Interest on lease liabilities	Depreciation and amortization Financing costs		3,984 2,773		6,981 3,653
Total finance lease expense			6,757		10,634
Variable and short-term lease expense Total lease expense	Other operating expenses	Ś	6,265	Ś	6,840

Notes to Combined Financial Statements

December	31.	2021
Decention	- <del>-</del> ,	

Dollars in thousands.

The following table presents the weighted-average lease terms and discount rates for operating and finance leases as of December 31, 2021:

	Atrium Health WFB	Atrium Health Enterprise
Weighted-average remaining lease term: Operating leases Finance leases	5.93 years 20.45 years	9.16 years 18.18 years
Weighted-average discount rate: Operating leases Finance leases	2.89% 4.31%	2.09% 4.26%

Cash flow and other information related to leases is included in the following table for the year ended December 31, 2021:

	Atrium Health WFB		Atrium Health Enterprise	
Cash paid for amounts included in the measurement of lease liabilities: Operating cash flows from operating leases Operating cash flows from finance leases Financing cash flows from finance leases	\$	49,507 2,773 2,412	\$	138,765 3,767 5,606

Notes to Combined Financial Statements

#### December 31, 2021

Dollars in thousands.

Future maturities of lease liabilities at December 31, 2021 are presented in the following table for Atrium Health WFB and the Enterprise, respectively:

	Operating Finance leases leases			 um Health 'FB Total	
2022	\$	46,307	\$	5,445	\$ 51,752
2023		39,183		5,435	44,618
2024		31,966		5,010	36,976
2025		29,220		4,761	33,981
2026		29,190		4,465	33,655
Thereafter		47,464		74,874	 122,338
Total lease payments		223,330		99,990	323,320
Less: imputed interest		19,563		35,402	 54,965
Total lease obligations		203,767		64,588	268,355
Less: current lease obligations		40,833		2,735	 43,568
Long-term lease obligations	\$	162,934	\$	61,853	\$ 224,787

	Operating leases		-	inance leases	 um Health rprise Total
2022	\$	134,318	\$	11,713	\$ 146,031
2023		118,947		10,749	129,696
2024		95,899		8,296	104,195
2025		86,106		7,973	94,079
2026		78,737		7,714	86,451
Thereafter		333,469		108,688	 442,157
Total lease payments		847,476		155,133	1,002,609
Less: imputed interest		84,703		50,070	 134,773
Total lease obligations		762,773		105,063	867,836
Less: current lease obligations		119,543		7,393	 126,936
Long-term lease obligations	\$	643,230	\$	97,670	\$ 740,900

Lease income is included in other sources of revenue in the combined statements of revenues, expenses and changes in net assets and amounted to \$17,131 for the year ended December 31, 2021.

Notes to Combined Financial Statements

December 31, 2021

#### 9. Debt

# Atrium Health CMHA:

Atrium Health CMHA's long-term debt, including related issuance premiums and unamortized gains on debt-related derivative instrument agreements, consists of the following as of December 31, 2021:

Atrium Heath Charlotte:	
Series 2005 B, C, and D Variable Rate Refunding	
Revenue Bonds, maturing 2023 through 2026, bearing	
interest at variable rates which are adjusted weekly (weighted	
average rate for the year ended December 31, 2021	
was 0.75%)	\$ 32,115
Series 2007 B Variable Rate Refunding Revenue	
Bonds, maturing 2022 through 2038, bearing interest at	
variable rates which are adjusted daily (weighted average	
rate for the year ended December 31, 2021 was 0.02%)	74,760
Series 2007 C Variable Rate Refunding Revenue	
Bonds, maturing 2027 through 2037, bearing interest at	
variable rates which are adjusted daily (weighted average	
rate for the year ended December 31, 2021 was 0.02%)	87,635
Series 2007 D Variable Rate Revenue Bonds,	
maturing 2041 through 2043, bearing interest at variable	
rates which are adjusted weekly (weighted average rate	
for the year ended December 31, 2021 was 0.89%)	67,140
Series 2007 E Variable Rate Revenue Bonds,	
maturing 2041 through 2044, bearing interest at variable	
rates which are adjusted daily (weighted average rate	
for the year ended December 31, 2021 was 0.03%)	77,220
Series 2007 F Variable Rate Revenue Bonds,	
maturing 2030 through 2042, bearing interest at variable	
rates which are adjusted weekly (weighted average rate	
for the year ended December 31, 2021 was 0.89%)	57,055
Series 2007 G Variable Rate Revenue Bonds,	
maturing 2032 through 2041, bearing interest at variable	
rates which are adjusted weekly (weighted average rate	
for the year ended December 31, 2021 was 0.75%)	111,170
Series 2007 H Variable Rate Revenue Bonds,	
maturing 2027 through 2045, bearing interest at variable	
rates which are adjusted weekly (weighted average rate for	
the year ended December 31, 2021 was 0.52%)	166,050
Series 2012 A Revenue and Refunding Revenue	,
Bonds, maturing 2022 through 2043 bearing interest at 3.0%	
to 5.0%	143,525
Series 2013 A Revenue and Refunding Revenue	,
Bonds, maturing 2022 through 2039 bearing interest at 3.0%	
to 5.0%	109,330
	,

Notes to Combined Financial Statements

December 31, 2021	Dollars i	in thousands.
Atrium Heath Charlotte:		
Series 2015 A Taxable Refunding Revenue Bonds,		
maturing 2022 through 2024 bearing interest at 2.64%	\$	4,725
Series 2015 B Taxable Commercial Paper	·	
Revenue Bonds (weighted average interest rate for the		
year ended December 31, 2021 was 0.14%)		400,000
Series 2016 A Refunding Revenue		
Bonds, maturing 2022 through 2047 bearing interest at 3.0%		
to 5.0%		331,250
Series 2018 A Refunding Revenue Bonds,		
maturing 2023 through 2039 bearing interest at 4.0%		
to 5.0%		149,760
Series 2018 B Variable Rate Revenue Bonds,		
maturing 2040 through 2048 bearing		
interest at 5.0% through the initial long-term rate		
period ending February 28, 2022		50,000
Series 2018 C Variable Rate Revenue Bonds,		·
maturing 2040 through 2048 bearing interest		
at 5.0% through the initial long-term rate period		
ending February 28, 2023		50,000
Series 2018 D Variable Rate Revenue Bonds,		
maturing 2040 through 2048 bearing interest at variable rates		
plus 0.60% through the initial index floating rate period ending		
November 30, 2023, which are adjusted weekly (weighted		
average rate for the year ended December 31, 2021 was 0.64%)		50,000
Series 2018 E Variable Rate Revenue Bonds,		
maturing 2040 through 2048 bearing interest at variable rates		
plus 0.45% through the initial index floating rate period ending		
November 30, 2021, which are adjusted weekly (weighted		
average rate for the year ended December 31, 2021 was 0.49%)		
Converted on December 1, 2021 to put bond with initial long-term		
rate period ending October 31, 2025 bearing interest at 5.0%		50,000
Series 2018 F Variable Rate Revenue Bonds,		
maturing 2040 through 2048 bearing interest at variable rates		
which are adjusted weekly (weighted average rate for the		
year ended December 31, 2021 was 0.04%)		100,000
Series 2018 G Variable Rate Revenue Bonds,		
maturing 2040 through 2048 bearing interest at variable rates		
which are adjusted daily (weighted average rate for the		
year ended December 31, 2021 was 0.02%)		50,000
Series 2018 H Variable Rate Revenue Bonds,		,
maturing 2040 through 2048 bearing interest at variable rates		
which are adjusted daily (weighted average rate for the		
year ended December 31, 2021 was 0.02%)		50,000
Series 2021 A Taxable Revenue Bonds,		, -
maturing 2051 bearing interest at 3.20%		300,000
Series 2021 B Variable Rate Revenue Bonds,		,
maturing 2050 bearing interest at 5.0% through the		
initial long-term rate period ending December 1, 2024		100,000
initiations terminate period chang becchiber 1, 2024		200,000

Notes to Combined Financial Statements

ecember 31, 2021	Dollar	s in thousands
Atrium Heath Charlotte:		
Series 2021 C Variable Rate Revenue Bonds, maturing 2050 bearing interest at 5.0% through the initial long-term rate period ending November 30, 2028 Series 2021 D Variable Rate Revenue Bonds,	\$	100,000
maturing 2050 bearing interest at 5.0% through the initial long-term rate period ending November 30, 2031 Series 2021 E Variable Rate Refunding Revenue Bonds, maturing 2022 through 2042, bearing interest at variable rates which are adjusted daily (weighted average rate for the year ended December 31, 2021 was 0.02%)		100,000 126,010
Other long-term debt		59,827
Total Atrium Health Charlotte Long-term Debt		2,997,572
Commercial paper and current portion		(760,955)
Total Atrium Health Charlotte Long-term Debt, minus current portion		2,236,617
Net unamortized premiums Unamortized gains on debt-related derivative agreements		157,344 1,565
Total Atrium Health Charlotte Debt, net		2,395,526
Atrium Health Navicent: Series 2017A Revenue Anticipation Certificates, maturing 2042 through 2045 bearing interest at variable rates which are adjusted weekly (weighted average rate for the year ended December 31, 2021 was 1.08%) Series 2017B Revenue Anticipation Certificates, maturing 2020 through 2042 bearing interest at		40,000
variable rates which are adjusted weekly (weighted average rate for the year ended December 31, 2021 was 1.08%) Taxable Variable Term Loan, maturing 2038 through 2048 bearing interest at variable rates which are adjusted weekly (weighted average rate for the year ended		185,530
December 31, 2021 was 1.44%) Other long-term debt		60,000 725
Total Atrium Health Navicent Long-term Debt		286,255
Current portion		(5,315)
Total Atrium Health Navicent Debt, net		280,940
Atrium Health Floyd: Term Loan Current portion		179,000 (6,000)
Total Atrium Health Floyd Debt, net		173,000
Total Atrium Health CMHA long term debt	\$	2,849,466

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Notes to Combined Financial Statements

#### December 31, 2021

Dollars in thousands.

	Beginning balance	Additions	Retirements	Ending balance
Atrium Health Charlotte:				
Fixed rate revenue bonds	\$ 872,905	\$ 300,000	\$ (139,040)	\$ 1,033,865
Variable rate revenue bonds	643,430	426,010	(3,815)	1,065,625
Commercial paper revenue bonds	250,000	250,000	(100,000)	400,000
Direct placement revenue bonds	446,140		(7,885)	438,255
Notes from direct borrowings	61,702	669	(2,544)	59,827
	2,274,177	976,679	(253,284)	2,997,572
Atrium Health Navicent:				
Direct placement revenue				
anticipation certificates	230,590		(5,060)	225,530
Note from direct borrowings	60,725			60,725
	291,315	_	(5,060)	286,255
Atrium Health Floyd:				
Fixed rate revenue bonds	173,062	_	(173,062)	_
Term Loan		179,000		179,000
	173,062	179,000	(173,062)	179,000
Total	\$ 2,738,554	\$ 1,155,679	\$ (431,406)	\$ 3,462,827

A summary of Atrium Health CMHA changes in long-term debt during 2021 is as follows:

#### **Atrium Health Charlotte Components of Debt**

- (a) Series 2005B, C and D Variable Rate Refunding Revenue Bonds In December 2005, Atrium Health Charlotte issued Series 2005 B, C and D Variable Rate Refunding Revenue Bonds which, together with \$2,855 of Atrium Health Charlotte funds, currently refunded \$96,760 of Series 1996 A Revenue Bonds. Interest on the Series 2005 B, C and D Variable Rate Refunding Revenue Bonds is payable monthly in arrears and principal is payable on January 15 of each year. In February 2011, Atrium Health Charlotte utilized a mandatory tender process to substitute new direct pay letters of credit on these bonds. As a result of this mandatory tender process, these bonds were deemed extinguished and the remarketed bonds were treated as a new issuance. In December 2016, Atrium Health Charlotte utilized a mandatory tender process to convert Series 2005 B, C and D to direct placements. As a result of this mandatory tender process, these bonds were deemed extinguished and the remarketed bonds were treated as a new issuance.
- (b) Series 2007 B and C Variable Rate Refunding Revenue Bonds In August 2007, Atrium Health Charlotte issued Series 2007 B and C Variable Rate Refunding Revenue Bonds, which advance refunded all \$71,015 of the outstanding Series 2003 A Revenue Bonds and all \$100,000 of the outstanding Series 2005 A Revenue Bonds. Interest on the Series 2007 B and C Variable Rate Refunding Revenue Bonds is payable monthly in arrears and principal is payable on January 15 of each year. In May 2017, Atrium Health Charlotte utilized a mandatory tender process to convert Series 2007 C from the weekly interest rate mode to the daily interest rate mode. As a

December 31, 2021

result of this mandatory tender process, these bonds were deemed extinguished and the remarketed bonds were treated as a new issuance.

- (c) Series 2007 D, E and F Variable Rate Revenue Bonds In September 2007, Atrium Health Charlotte issued Series 2007 D, E and F Variable Rate Revenue Bonds insured by Financial Security Assurance, Inc., now known as Assured Guaranty Municipal Corp. (AGMC). Interest on the Series 2007 D, E and F Variable Rate Revenue Bonds is payable monthly in arrears and principal is payable on January 15 of each year. In May 2013, Atrium Health Charlotte utilized a mandatory tender process to convert Series 2007 D and F to direct purchase bonds and to substitute a new direct pay letter of credit on Series 2007 E. As a result of this mandatory tender process, these bonds were deemed extinguished and the remarketed bonds were treated as a new issuance. In November 2016, Atrium Health Charlotte utilized a mandatory tender process, these bonds were deemed extinguished and the remarketed bonds were treated as a new issuance. In November 2016, Atrium Health Charlotte utilized a mandatory tender process, these bonds were deemed extinguished and the remarketed bonds were treated as a new issuance. In May 2017, Atrium Health Charlotte utilized a mandatory tender process to convert Series 2007 E from the weekly interest rate mode to the daily interest rate mode. As a result of this mandatory tender process, these bonds were deemed extinguished and the remarketed bonds were treated as a new issuance. In May 2017, Atrium Health Charlotte utilized a mandatory tender process to convert Series 2007 E from the weekly interest rate mode to the daily interest rate mode. As a result of this mandatory tender process, these bonds were deemed extinguished and the remarketed bonds were treated as a new issuance.
- (d) Series 2007 G and H Variable Rate Revenue Bonds In September 2007, Atrium Health Charlotte issued Series 2007 G Variable Rate Revenue Bonds insured by AGMC and Series 2007 H Variable Rate Revenue Bonds. The proceeds of the Series 2007 H Variable Rate Revenue Bonds were used to repay \$159,930 of outstanding revenue bonds issued by the North Carolina Medical Care Commission (NCMCC) for the benefit of CHS NorthEast. Interest on the Series 2007 G Variable Rate Revenue Bonds and the Series 2007 H Variable Rate Revenue Bonds is payable monthly in arrears. Principal is payable on January 15 of each year. In May 2013, Atrium Health Charlotte utilized a mandatory tender process to convert Series 2007 G to direct purchase bonds. As a result of this mandatory tender process to convert Series 2007 H to a direct placement. As a result of this mandatory tender process, these bonds were deemed extinguished and the remarketed bonds were treated as a new issuance.
- (e) Series 2012 A Revenue and Refunding Revenue Bonds In May 2012, Atrium Health Charlotte issued Series 2012 A Revenue and Refunding Revenue Bonds which currently refunded all \$88,535 of the outstanding Series 2001 A Revenue Bonds and \$32,185 of outstanding revenue bonds issued by the NCMCC for the benefit of CHS Union. The Series 2012 A Revenue and Refunding Revenue Bonds also included \$50,000 to finance a small portion of Atrium Health Charlotte's capital plan. Interest on the Series 2012 A Revenue Bonds is payable semiannually on January 15 and July 15 of each year and principal is payable on January 15 of each year. These bonds were refunded by the Series 2022A Refunding Revenue Bonds issued February 9, 2022.
- (f) Series 2013 A Revenue and Refunding Revenue Bonds In May 2013, Atrium Health Charlotte issued Series 2013 A Revenue and Refunding Revenue Bonds which advance refunded \$4,815 of the outstanding Series 2009 A Refunding Revenue Bonds and all \$73,250 of outstanding revenue bonds issued by the NCMCC for the benefit of CHS Cleveland. The Series 2013 A Revenue and

December 31, 2021

Refunding Revenue Bonds also included \$50,000 to finance a small portion of Atrium Health Charlotte's capital plan. Interest on the Series 2013 A Revenue Bonds is payable semiannually on January 15 and July 15 of each year and principal is payable on January 15 of each year.

- (g) 2015 A Taxable Refunding Revenue Bonds In January 2015, Atrium Health Charlotte issued Series 2015 A Taxable Refunding Revenue Bonds which, together with funds held by CHS Stanly in Debt Service Reserve Funds, currently refunded all \$16,030 of outstanding Series 1996 and Series 1999 Revenue Bonds issued by the NCMCC for the benefit of CHS Stanly. The Series 2015 A Revenue Bonds were directly placed with a financial institution and will be held through their maturity on January 15, 2024, but Atrium Health Charlotte may prepay the bonds at any time without penalty or premium except for any cost of prepayment (based upon U.S. Treasury obligations) that applies. Interest on the Series 2015 A Revenue Bonds is payable semiannually on January 15 and July 15 of each year and principal is payable on January 15 of each year.
- (h) Series 2016 A Refunding Revenue Bonds In November 2016, Atrium Health Charlotte issued Series 2016 A Refunding Revenue Bonds which currently refunded \$121,240 of the outstanding Series 2007 A Revenue and Refunding Revenue Bonds and advance refunded \$300,255 of the outstanding Series 2008 A Refunding Revenue Bonds. Interest on the Series 2016 A Refunding Revenue Bonds is payable semiannually on January 15 and July 15 of each year and principal is payable on January 15 of each year.
- (i) Series 2018 A Refunding Revenue Bonds In November 2018, Atrium Health Charlotte issued Series 2018 A Refunding Revenue Bonds which currently refunded \$178,425 of the outstanding Series 2009 A Refunding Revenue Bonds. Interest on the Series 2018 A Refunding Revenue Bonds is payable semiannually on January 15 and July 15 of each year and principal is payable on January 15 of each year.
- (j) Series 2018 B and 2018 C Variable Rate Revenue Bonds In November 2018, Atrium Health Charlotte issued Series 2018 B and 2018 C Variable Rate Revenue Bonds. Interest on the Series 2018 B and 2018 C Variable Rate Revenue Bonds is payable semiannually on January 15 and July 15 of each year and principal is payable on January 15 of each year. These bonds are subject to mandatory tender for purchase on March 1, 2022 and March 1, 2023, respectively, following the end of their initial long-term rate periods. Upon the initial mandatory tender of March 1, 2022, the Series 2018 B Bonds were extended to a new mandatory tender date of October 31, 2029.
- (k) Series 2018 D and 2018 E Variable Rate Revenue Bonds In November 2018, Atrium Health Charlotte issued Series 2018 D and 2018 E Variable Rate Revenue Bonds. Interest on the Series 2018 D and 2018 E Variable Rate Revenue Bonds is payable monthly in arrears and principal is payable on January 15 of each year. These bonds are subject to mandatory tender for purchase on December 1, 2023 and December 1, 2021, respectively, following the end of their initial index floating rate periods. Upon the initial mandatory tender of December 1, 2021, the Series 2018 E bonds were converted to the long-term rate mode and now interest on the bonds is payable semiannually on January 15 and July 15 of each year and bear interest at 5.0% through a new long-term rate period ending October 31, 2025.

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- (I) Series 2018 F Variable Rate Revenue Bonds In November 2018, Atrium Health Charlotte issued Series 2018 F Variable Rate Revenue Bonds. Interest on the Series 2018 F Variable Rate Revenue Bonds is payable monthly in arrears and principal is payable on January 15 of each year. Atrium Health Charlotte has established a self-liquidity program that will be used to repurchase any Series 2018 F Variable Rate Bonds that are not remarketed.
- (m) Series 2018 G and 2018 H Variable Rate Revenue Bonds In December 2018, Atrium Health Charlotte issued Series 2018 G and 2018 H Variable Rate Revenue Bonds. Interest on the Series 2018 G and 2018 H Variable Rate Revenue Bonds is payable monthly in arrears and principal is payable on January 15 of each year.
- (n) Series 2021 A Taxable Revenue Bonds In May 2021, Atrium Health Charlotte issued Series 2021 A Taxable Revenue Bonds. Interest on the Series 2021 A Taxable Revenue Bonds is payable semiannually on January 15 and July 15 of each year and principal is payable on January 15 of each year.
- (o) Series 2021 B, C and D Variable Rate Revenue Bonds In May 2021, Atrium Health Charlotte issued Series 2021 B, C and D Variable Rate Revenue Bonds. Interest on the Series 2021 B, C and D Variable Rate Revenue Bonds is payable semiannually on January 15 and July 15 of each year and principal is payable on January 15 of each year. These bonds are subject to mandatory tender for purchase on December 2, 2024, December 1, 2028 and December 1, 2031 respectively, following the end of their initial long-term rate periods.
- (p) Series 2021 E Variable Rate Refunding Revenue Bonds In July 2021, Atrium Health issued Series 2021 E Variable Rate Refunding Revenue Bonds, which currently refunded all \$125,375 of the outstanding Series 2011 A Revenue Bonds. Interest on the Series 2021 E Variable Rate Refunding Revenue Bonds is payable monthly in arrears and principal is payable on January 15 of each year.
- (q) Pineville LTACH/Rehab Hospital Loan In October 2014, Atrium Health Charlotte became the sole member of Pineville LTACH/Rehab Hospital, LLC (the LLC), which owns and leases a facility to Atrium Health Charlotte. Previously, the LLC was a joint venture between Atrium Health Charlotte and an unaffiliated entity. The facility was constructed with the proceeds from a \$30,101 loan to the LLC from a financial services company that is payable beginning September 2013 through August 2038 at an interest rate of 3.84%. The loan, which was not issued under Atrium Health Charlotte's Bond Order, is secured by a leasehold deed of trust and assignment of facility leases and rents. The balance of \$23,050 at December 31, 2021 is included in other long-term debt.
- (r) Cleveland County Note Payable In March 2013, Atrium Health Charlotte entered into an Amended and Restated Interlocal Agreement with Cleveland County, North Carolina for the purpose of more fully integrating CHS Cleveland with Atrium Health Charlotte and enhancing Atrium Health Charlotte's ability to provide services to the residents of Cleveland County. Atrium Health Charlotte's payment to Cleveland County included an unsecured, noninterest bearing note in the original amount of \$77,000 payable through 2038 which is recorded as other long-term debt at its net present value of \$36,182 at December 31, 2021.

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Dollars in thousands.

(s) Series 2015 B Taxable Commercial Paper Program – In October 2015, Atrium Health Charlotte established a taxable commercial paper program providing for the issuance of up to \$200,000 in aggregate taxable commercial paper revenue bonds. In November 2018, the issuance limit was increased to \$400,000. The bonds issued under the commercial paper program currently carry short-term credit ratings of A-1+ from S&P Global Ratings and P-1 from Moody's Investors Service. Proceeds from the sale of commercial paper are used to pay for additional healthcare facilities or the costs of operating healthcare facilities, including general operating costs, routine capital expenditures and the acquisition and installation of healthcare equipment. Atrium Health Charlotte has established a self-liquidity program that will be used to repurchase any commercial paper that is not remarketed. Commercial paper may be issued with maturity dates from one to 270 days from the date of issuance. While management may elect to continuously roll over all or portions of the commercial paper, the principal amount of all commercial paper must be repaid by October 2055. At December 31, 2021, commercial paper totaling \$400,000, with a weighted average maturity and interest rate of 253 days and 0.18%, respectively, was outstanding and included within current portion of debt.

Debt issued under the Atrium Health Charlotte Bond Order is payable solely from the CMHA Combined Group's revenues (as defined by the Bond Order). There are various financial covenants and restrictions contained in Atrium Health Charlotte's Bond Order, Series Resolutions, liquidity facilities, direct pay letter of credit and continuing covenants agreements for direct placements, including maintenance of a defined minimum level of annual long-term debt service coverage. As of December 31, 2021, Atrium Health Charlotte was in compliance with these financial covenants.

Deferred financing costs, net of accumulated amortization, totaled \$2,971 as of December 31, 2021. Premiums, net of accumulated amortization, totaled \$157,344 as of December 31, 2021. These costs are being amortized over the estimated duration of the related debt using the effective interest method.

# Atrium Health Navicent Components of Debt

(a) Series 2017 A and Series 2017 B Revenue Anticipation Certificates - In December 2017, the Macon-Bibb County Hospital Authority issued Series 2017 A and Series 2017 B Revenue Anticipation Certificates, the proceeds of which were loaned to Atrium Health Navicent to refund various series of Macon-Bibb County Hospital Authority Revenue Anticipation Certificates and to finance and reimburse capital expenditures. Interest on the Series 2017 A and 2017 B Certificates is payable monthly in arrears and principal is payable on August 1 of each year. The Series 2017 A and Series 2017 B certificates were initially directly placed with a financial institution with holding periods that expire on December 31, 2027 and December 31, 2019, respectively. In December 2019, Atrium Health Navicent utilized a mandatory tender process to change the holder of the Series 2017 A and Series 2017 B certificates to another financial institution. As a result of this mandatory tender process, these certificates were deemed extinguished and the remarketed certificates were treated as a new issuance with holding periods that expire on January 29, 2021. On January 29, 2021, the holding periods were extended to January 28, 2022. On January 28, 2022, the holding periods were extended to January 16, 2027. The Series 2017 A Revenue Anticipation Certificates mature 2042 through 2045 and bear interest at variable rates which are adjusted weekly (weighted average rate for the year ended December 31, 2021 was 1.08%). The Series 2017 B Revenue Anticipation Certificates mature 2022 through 2042 and bear

December 31, 2021

interest at variable rates which are adjusted weekly (weighted average rate for the year ended December 31, 2021 was 1.08%).

(b) Variable Term Loan – In December 2017, Atrium Health Navicent entered into a taxable Variable Term Loan with a financial institution, the proceeds of which were used to pay off the remaining balances of taxable loans executed in 2012 and 2017. Interest on the Variable Term Loan is payable monthly in arrears and principal is payable on August 1 of each year. The Variable Term Loan was initially directly placed with a financial institution with a holding period that expires on December 31, 2027. In December 2019, Atrium Health Navicent changed the holder of the Variable Term Loan to another financial institution. As a result, the Variable Term Loan was deemed extinguished and the new Variable Term Loan was treated as a new issuance with a holding period that expires on January 29, 2021. On January 29, 2021, the holding period was extended to January 28, 2022. On January 28, 2022, the holding period was extended to January 16, 2027. The Variable Term Loan matures 2038 through 2048 and bears interest at variable rates which are adjusted weekly (weighted average rate for the year ended December 31, 2021 was 1.44%).

**Floyd Health Term Loan** – In December 2021, Atrium Health Floyd entered into a term loan with a financial institution, with a variable rate based on Secured Overnight Financing Rate (SOFR) plus 1.41%. Interest is payable monthly in arrears while principal is payable on July 1 with the final maturity of July 1, 2043. The Term Loan is subject to a Mandatory Prepayment Date of January 16, 2027. Atrium Health Floyd is subject to various covenants under the term loan, including a days cash on hand and long-term debt service coverage ratio requirement. Neither Atrium Health Charlotte, Atrium Health Navicent or Atrium Health WFB have guaranteed the Atrium Health Floyd Term Loan.

#### Debt Service Requirements and Additional Information on Atrium Health CMHA Debt

Debt service requirements for long term debt in future years, excluding commercial paper but including the impact of other long term debt (note payable to a financial services company, note payable to Cleveland County and note payable to a financial institution) and interest rate swap transactions discussed later in this note, are shown in the table below. Debt service requirements, as reflected in the table, assume current interest rates on unhedged variable rate debt while net swap payments, are projected using the December 31, 2021 relationship between the Securities Information and Financial Markets Association (SIFMA) Municipal Swap Index and the one month London InterBank Offered Rate (LIBOR) of approximately 99%, which is higher than the interest projected using the 60% average relationship between SIFMA and LIBOR over the past 10 years. Regulators in the United Kingdom have called for LIBOR to be abandoned by June 30, 2023.

Notes to Combined Financial Statements

#### December 31, 2021

Dollars in thousands.

Secured Overnight Financing Rate could produce different results than the current average relationship between SIFMA and LIBOR.

		and variable nue bonds	borrowing	om direct s and direct ments	Το	tal
	Principal	Interest	Principal	Interest	Principal	Interest
2022	\$ 33,325	\$ 78,618	\$ 16,292	\$ 29,136	\$ 49,617	\$ 107,754
2023	28,335	72,245	23,428	28,402	51,763	100,647
2024	34,490	69,800	24,583	25,785	59,073	95 <i>,</i> 585
2025	36,155	65,810	23,928	25,007	60,083	90,817
2026	37,885	62,643	24,888	24,211	62,773	86,854
2027-2031	223,260	273,725	128,062	111,977	351,322	385,702
2032-2036	288,745	190,447	156,166	94,889	444,911	285,336
2037-2041	266,920	128,352	290,280	63,890	557,200	192,242
2042-2046	386,555	90,478	243,665	10,470	630,220	100,948
2047-2051	763,820	53,015	32,045	721	795,865	53,736
	\$ 2,099,490	\$ 1,085,133	\$ 963,337	\$ 414,488	\$3,062,827	\$1,499,621

Atrium Health Charlotte's Revenue Bonds (other than the Series 2015 A and Series 2015 B Revenue Bonds which are taxable) are tax exempt and are secured on a parity basis by and payable from Atrium Health Charlotte's revenues as defined in its bond order, the money and securities held in certain funds and accounts created by the applicable bond agreements and held by the bond trustee, and in the case of the CMHA Combined Group, amounts payable by the other members of the CMHA Combined Group under their respective Member Guaranty Agreement or Member Security Agreement. The tax exempt fixed rate revenue bonds are redeemable at the option of Atrium Health Charlotte at par value upon the expiration of the 10 year no call period subsequent to their respective issuance date. The Series 2018 D and Series 2018 E index floating rate bonds are redeemable at the option of Atrium Health Charlotte at par value one year prior to their index floating rate purchase dates of December 1, 2023 and December 1, 2021, respectively. Upon the initial mandatory tender of December 1, 2021, the Series 2018 E bonds were converted to the long-term rate mode and now interest on the bonds is payable semiannually on January 15 and July 15 of each year.

Atrium Health Navicent's tax-exempt Revenue Anticipation Certificates and taxable Variable Term Loan are secured on a parity basis by and payable from Atrium Health Navicent's revenues as defined in its Master Trust Indenture, the money and securities held in certain funds and accounts created by the applicable bond agreements and held by the bond trustee. The Series 2017 A and Series 2017 B Certificates and taxable Variable Term Loan are subject to mandatory sinking fund redemption at a redemption price equal to the principal amount of each Bond to be redeemed plus accrued interest to the date fixed for redemption. The Variable Term Loan is also subject to mandatory prepayment in whole, without penalty, on January 16, 2027.

There are various financial covenants and restrictions contained in Atrium Health Charlotte's Bond Order, Series Resolutions, liquidity facilities, direct pay letter of credit and continuing covenants agreements for direct placements and Atrium Health Navicent's Master Trust Indenture and continuing covenant and credit agreement for direct placements and term loan, including maintenance of a defined minimum level of annual long term debt service coverage. As of

#### December 31, 2021

Dollars in thousands.

December 31, 2021, Atrium Health Charlotte and Atrium Health Navicent were in compliance with these financial covenants.

Atrium Health Charlotte's parity obligation revenue bonds totaling \$2,537,745 contain terms related to significant events of default with finance-related consequences. The principal of and accrued interest on all parity obligations may be accelerated if certain events of default under the Bond Order or the individual Series Resolutions occur, including: (i) failure to pay the principal of or interest on parity obligations when due and payable; (ii) failure to comply with any of the covenants, agreements, conditions or provisions of the Bond Order or any Series Resolution for a period of 30 days after receipt by Atrium Health Charlotte of a written notice from the Trustee specifying such default and requesting it be corrected; or (iii) any member of the CMHA Combined Group becomes insolvent, or the subject of insolvency proceedings, is unable or admits in writing its inability to pay its debts as they mature, makes a general assignment for the benefit of creditors to an authorized agent to liquidate any substantial amount of property or files a petition or other pleading seeking reorganization, composition, readjustment or liquidation of assets or requesting similar relief or applies to a court for the appointment of a receiver for any of its assets.

With respect to Atrium Health Charlotte's parity obligation variable rate revenue bonds totaling \$1,065,625 certain agreements contain terms related to significant termination events with financerelated consequences. For revenue bonds totaling \$262,395 that are supported by liquidity facilities, if certain events occur (event of insolvency, payment default, contest of validity, invalidity and ratings downgrade below Baa3 and or BBB-), the financial institution's obligation to purchase tendered bonds of a series may be terminated immediately and without prior written notice to the owners of the bonds of that series or the Trustee. Atrium Health Charlotte will then be obligated to pay the purchase price of any bonds of a series tendered for purchase after an immediate termination of the liquidity facility for that series. In the event funds are not otherwise available on a purchase date for that series, Atrium Health Charlotte will have 90 days in which to arrange for the purchase of the tendered bonds. Atrium Health Charlotte's failure to arrange for purchase of the tendered bonds by the end of that 90-day period is an event of default under the Series Resolution for the applicable series. For revenue bonds totaling \$203,230 that are supported by a direct pay letters of credit, the related reimbursement agreements set forth a number of events of default (including but not limited to failure to pay amounts due under the reimbursement agreement, failure to perform any covenant, restriction or agreement contained in the reimbursement agreement, ratings downgrade below A3 and A-, an involuntary case or other proceeding commenced against Atrium Health Charlotte seeking liquidation, reorganization or other relief with respect to bankruptcy or insolvency). If an event of default under the reimbursement agreement occurs and is continuing, the financial institution may: (i) terminate the letter of credit on a date at least 40 days after giving written notice to the Trustee that an event of default has occurred and is continuing, which will result in a mandatory purchase date; and (ii) declare all amounts due under the reimbursement agreement and all interest accrued thereon (other than payments of principal and redemption price and interest on bonds purchased with money furnished by the financial institution pursuant to the letter of credit) to be immediately due and payable.

With respect to Atrium Health Charlotte's parity obligation direct placement revenue bonds totaling \$438,255, the continuing covenants agreements contain terms related to significant events of default with finance-related consequences. The principal of and accrued interest on such parity obligations

Notes to Combined Financial Statements

December 31, 2021

Dollars in thousands.

may be accelerated and immediately due if certain events of default under the continuing covenants agreements occur as follows: (i) failure to pay the principal of or interest on parity obligations when due or failure to purchase the parity obligations from the financial institution on the purchase date; (ii) an event of default as defined in the Bond Order or Series Resolutions occurs and is continuing; (iii) default in the payment of any material debt when due; (iv) the credit ratings of Atrium Health Charlotte are withdrawn or reduced below Baa3 and BBB-; (iv) commencement of a voluntary case or other proceeding seeking liquidation, reorganization, arrangement, adjustment, winding-up, dissolution, composition or similar relief with respect to its debts; or (v) a representation or warranty proves to have been untrue or incomplete in any material respect. Other events of default such as the failure to observe or perform any covenant, restriction or agreement contained in the continuing covenants agreements for 30 days after receipt of written notice from the financial institutions do not allow the acceleration of parity obligations prior to a period of 180 days after notice is given by the financial institutions.

Atrium Health Navicent's parity obligation revenue anticipation certificates and taxable variable term loan totaling \$285,530 contain terms related to significant events of default with finance-related consequences. The principal of and accrued interest on all parity obligations may be accelerated if certain events of default under the Navicent Master Trust Indenture occur, including: (i) failure to make due and punctual payment of principal and interest on parity obligations; (ii) income available for debt service is less than 1.00 times annual debt service for any two consecutive years; (iii) failure to observe or perform any covenants or agreement under the Master Trust Indenture for a period of 60 days after receipt by Atrium Health Navicent of a written notice from the Master Trustee requiring the failure to be remedied; (iv) default in the payment of other indebtedness whose grace, notice and / or cure period for such payments has expired; (v) a court decree or order for relief in an involuntary case under applicable federal / state bankruptcy, insolvency or other similar law, or appointing a receiver, liquidator, assignee, custodian, trustee, or the winding up or liquidation of its affairs; (vi) commencement of a voluntary case under any applicable federal / state bankruptcy, insolvency or other similar law or consent to an order for relief in an involuntary case under such law; or (vii) an event of default under the Lease and Transfer Agreement with the Macon-Bibb County Hospital Authority.

With respect to Atrium Health Navicent's direct placement revenue anticipation certificates and note from direct borrowings totaling \$285,530, the continuing covenant and credit agreement contains terms related to significant events of default with finance-related consequences. The principal of and accrued interest on such parity obligations may be accelerated and due within 7 days if certain events of default under the continuing covenant and credit agreement occurs including but not limited to the following: (i) failure to pay the principal of or interest on parity obligations when due or failure to purchase the parity obligations from the financial institution on the purchase date; (ii) default on parity debt and senior debt; (iii) invalidity of the obligations or pledge of gross revenues; (iv) an event of insolvency; or (v) termination of the Agreement and Member Substitution with Atrium Health CMHA. Other events of default such as the failure to perform any term, covenant, condition or provision contained in the continuing covenant and credit agreement for 30 days or more do not allow the acceleration of the parity obligations prior to a period of 30 days after notice is given by the financial institution.

There are no subjective acceleration clauses included in the debt agreements of Atrium Health Charlotte and Atrium Health Navicent.

In the event bondholders elect to tender any or all of the Series 2007 B, C, and E Revenue Bonds or Series 2018 G and H Revenue Bonds for purchase and the bonds cannot be remarketed, liquidity facilities and a direct pay letter of credit provided by two financial institutions are utilized to purchase the unremarketed bonds. Bonds held by the liquidity facility and letter of credit providers generally require payment of a higher rate of interest. The terms of these liquidity facilities and direct pay letter of credit providers.

Series	Facility type	Expiration year	Repayment period
2007 B	Liquidity facility	2026	3 year
2007 C	Liquidity facility	2026	3 year
2007 E	Direct pay letter of credit	2025	5 year
2018 G	Liquidity facility	2024	3 year
2018 H	Liquidity facility	2024	3 year
2021 E	Direct pay letter of credit	2026	3 year

Atrium Health Charlotte's Series 2005 B, C and D Variable Rate Refunding Revenue Bonds and Series 2007 D, F, G and H Revenue Bonds have been purchased by three financial institutions with holding periods noted in the table below that expire prior to the maturity of the respective bonds.

Series	Facility type	Expiration year	
2005 B, C, and D	Direct placement	2026	
2007 D	Direct placement	2023	
2007 F	Direct placement	2023	
2007 G	Direct placement	2026	
2007 H	Direct placement	2022	

Atrium Health Charlotte's Series 2018 B, C, D and E Variable Rate Revenue Bonds are subject to mandatory tender for purchase at the end of the initial holding periods noted in the table below that expire prior to the maturity of the respective bonds.

Series	Facility type	Expiration year
2018 B	Long-term rate period bonds	2029
2018 C	Long-term rate period bonds	2023
2018 D	Index floating rate period bonds	2023
2018 E	Long-term rate period bonds	2025

Notes to Combined Financial Statements

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Dollars in thousands.

Atrium Health Navicent's Series 2017 A and Series 2017 B Revenue Anticipation Certificates have been purchased by one financial institution with holding periods noted in the table below that expire prior to the maturity of the respective obligations.

Series	Facility type	Expiration year
2017 A	Direct placement	2027
2017 B	Direct placement	2027

For Atrium Health CMHA, interest expense was \$107,429 for the year ended December 31, 2021. Interest paid to bond holders and other lenders totaled \$100,451 for the year ended December 31, 2021.

December 31, 2021

# Atrium Health WFB and Atrium Health Enterprise:

Atrium Health Enterprise's debt consists of the following at December 31, 2021:

Atrium Health Charlotte:	
Series 2005BCD	\$ 32,115
Series 2005BCD unamortized gains on debt-related	
derivative agreements	1,566
Series 2007B	74,760
Series 2007C	87,635
Series 2007D	67,140
Series 2007E	77,220
Series 2007F	57,055
Series 2007G	111,170
Series 2007H	166,050
Series 2012A	143,525
Series 2012A unamortized bond premium	12,768
Series 2013A	109,330
Series 2013A unamortized bond premium	8,648
Series 2015A	4,725
Series 2015B Commercial Paper	400,000
Series 2015B Commercial Paper original issue discount	(361)
Series 2016A	331,250
Series 2016A unamortized bond premium	37,204
Series 2018A	149,760
Series 2018A unamortized bond premium	12,132
Series 2018B	50,000
Series 2018B unamortized bond premium	3,515
Series 2018C	50,000
Series 2018C unamortized bond premium	4,313
Series 2018D	50,000
Series 2018E	50,000
Series 2018E bond issuance costs	(118)
Series 2018F	100,000
Series 2018G	50,000
Series 2018H	50,000
Series 2021A	300,000

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Dollars in thousands.

Atrium Health Charlotta		
Atrium Health Charlotte: Series 2021A bond issuance costs Series 2021B Series 2021B unamortized bond premium Series 2021B bond issuance costs Series 2021C Series 2021C unamortized bond premium Series 2021C bond issuance costs Series 2021D Series 2021D unamortized bond premium Series 2021D unamortized bond premium Series 2021D bond issuance costs Series 2021E Series 2021E	\$	(1,712) 100,000 15,708 (294) 100,000 28,286 (294) 100,000 35,132 (393) 126,010 (160)
Total debt		3,093,684
Notes payable, finance leases and line of credit Less commercial paper and current portion		59,826 (760,853)
Total Atrium Health Charlotte long-term debt		2,392,657
Atrium Health Navicent: Series 2017A Series 2017B Taxable Variable Term Loan Other Long-Term Debt		40,000 185,530 60,000 725
Total debt		286,255
Less current portion		(5,315)
Total Atrium Health Navicent long-term debt		280,940
Atrium Health Floyd: Term Loan Finance Lease		179,000
Total notes payable, finance leases and line of credit		219,475
Less current portion		(10,658)
Total Atrium Health Floyd long-term debt	<u></u>	208,817
Atrium Health WFB: Series 2012A <sup>(a)</sup> Series 2012A unamortized bond premium Series 2012A bond issuance costs Series 2012B <sup>(a)</sup> Series 2012B unamortized bond premium Series 2012B bond issuance costs Series 2012D <sup>(a)</sup> Series 2012D bond issuance costs		118,405 3,202 (798) 76,950 9,315 (547) 80,000 (250)

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December 31, 2021

Dollars in thousands.

Atrium Health WFB:	
Series 2016 <sup>(b)</sup>	\$ 150,000
Series 2016 bond issuance costs	(1,199)
Series 2019A <sup>(c)</sup>	37,030
Series 2019A unamortized bond premium	5,113
Series 2019A bond issuance costs	(321)
Series 2019B loss history	105,905
Series 2019B bond issuance costs	(819)
Series 2019C hand issuence costs	60,605
Series 2019C bond issuance costs Series 2020 <sup>(d)</sup>	(546)
Series 2020 Series	214,850 (600)
Total bonds payable	 856,295
Line of credit <sup>(e)</sup>	19,199
Loan agreement <sup>(f)</sup>	2,669
Loan agreements <sup>(g)</sup>	2,061
Loan agreement <sup>(h)</sup>	29,486
Finance leases <sup>(i)</sup>	4,644
Finance lease <sup>())</sup>	38,199
Finance lease <sup>(k)</sup>	21,408
Loan agreements <sup>(I)</sup>	347
Finance leases <sup>(m)</sup>	 338
Total notes payable, finance leases and line of credit	 118,351
Total debt	974,646
Less current portion	 (158,130)
Total Atrium Health WFB long-term debt	 816,516
Total Atrium Health Enterprise debt	4,633,887
Less total Atrium Health Enterprise current portion	 934,956
Total Atrium Health Enterprise long-term debt	\$ 3,698,931

Notes to Combined Financial Statements

#### December 31, 2021

Dollars in thousands.

Aggregate annual maturities of notes payable, finance leases, term loans, line of credit and bonds payable are as follows:

		Year	Ending Decei	mber	31					
	um Health harlotte		Atrium Health Navicent		Atrium Health Floyd		Atrium Health WFB		Atrium Health Enterprise	
2022	\$ 44,333	\$	6,040	\$	12,268	\$	53,043	\$	115,684	
2023	46,840		5,580		11,414		36,286		100,120	
2024	53,570		5,860		9,686		36,347		105,463	
2025	54,190		6,150		9,712		35,111		105,163	
2026	55,975		6,460		9,949		110,242		182,626	
All years thereafter	 2,498,964		256,165		166,446		703,617	-	3,625,192	
	\$ 2,753,872	\$	286,255	\$	219,475	\$	974,646	\$	4,234,248	

The Atrium Health CMHA, Atrium Health WFB, Atrium Health Navicent and Atrium Health Floyd all maintain separate credit groups. No entity is obligated for or guarantees the debt of any other entity.

### Atrium Health WFB Components of Debt

(a) Series 2012 Revenue Bonds – revenue bonds issued by Atrium Health WFB Obligated Group, representing funds borrowed by the entities pursuant to loan agreements with the North Carolina Medical Care Commission (NCMCC). As a conduit issuer, the NCMCC loans the debt proceeds to the borrower and the bonds are issued by the NCMCC under a MTI structure. The MTI provides the flexibility for multiple parties to participate in debt issuances as part of an obligated group.

The Series 2012A bonds mature in full in fiscal year 2046. The fixed rate instruments bear interest at fixed coupon rates of 4.00% and 5.00%. Per the bond agreements, the principal payments on the bonds are due on December 1 of each year beginning in 2039 and in increasing annual amounts ranging from \$9,425 to \$20,200.

The Series 2012B bonds mature in full in fiscal year 2034. The fixed rate instruments bear interest at fixed coupon rates ranging from 2.00% to 5.00%. Per the bond agreements, the principal payments on the bonds are due on December 1 of each year beginning in 2014 and in increasing annual amounts ranging from \$3,385 to \$7,000.

The Series 2012D bonds were issued in an aggregate principal amount not to exceed \$80,000 and mature in full in fiscal year 2043. The bonds were refunded in fiscal year 2018 and reissued with a new bank as bondholder. The bonds are currently in the Bank-Bought Rate Mode and bear interest at an Index Floating Rate based on an Adjusted London Interbank Offered Rate (LIBOR) rate plus a tax-exempt spread of 0.5925%. At the option of NCBH, the bonds may be converted to various interest rate modes. Per the bond agreements, the principal payments on the bonds are due on December 1 of each year beginning in 2034 and in increasing annual amounts ranging from \$14,075 to \$15,295.

(b) Series 2016 Taxable Bonds – taxable bonds issued directly by WFUBMC as general, unsecured obligations under the MTI structure. The Series 2016 bonds are structured with a \$75 million bullet maturity due on June 1, 2026, at a fixed rate of 3.093% and a \$75 million term bond with

final maturity on June 1, 2046, at a fixed rate of 4.175%. The 2046 maturity includes sinking fund payments of \$25 million due on June 1 of each year beginning in 2044.

(c) Series 2019 Revenue Bonds – revenue bonds issued by Atrium Health WFB Obligated Group, representing funds borrowed by the entities pursuant to loan agreements with the North Carolina Medical Care Commission (NCMCC). As a conduit issuer, the NCMCC loans the debt proceeds to the borrower and the bonds are issued by the NCMCC under a MTI structure. The MTI provides the flexibility for multiple parties to participate in debt issuances as part of an obligated group.

The Series 2019A bonds mature in full in fiscal year 2034. The fixed rate instruments bear interest at fixed coupon rates of 5.00%. Per the bond agreements, the principal payments on the bonds are due on December 1 of each year beginning in 2019 in annual amounts ranging from \$185 to \$4,505.

The Series 2019B bonds mature in full in fiscal year 2048. The long-term rate put bond instruments bear interest at initial fixed coupon rates of 2.20% with an initial term date of December 1, 2022. Per the bond agreements, the principal payments on the bonds are due on December 1 of each year beginning in 2034 and in increasing annual amounts ranging from \$4,605 to \$23,350.

The Series 2019C bonds mature in full in fiscal year 2048. The long-term rate put bond instruments bear interest at initial fixed coupon rates of 2.55% with an initial term date of June 1, 2026. Per the bond agreements, the principal payments on the bonds are due on June 1 of each year beginning in 2035 and in increasing annual amounts ranging from \$3,375 to \$16,735.

(d) Series 2020 Revenue Refunding Bonds – revenue refunding bonds issued by Atrium Health WFB Obligated Group, representing funds borrowed by the entities pursuant to a loan agreement with the Public Finance Authority ("PFA"). As a conduit issuer, the PFA loans the debt proceeds to the borrower and the bonds are issued by the PFA under an MTI structure. The MTI provides the flexibility for multiple parties to participate in debt issuances as part of an obligated group.

The Series 2020 bonds were issued in an aggregate principal amount of \$230,450 and mature in full in fiscal year 2033. The 2020 bonds refund the prior outstanding Series 2010 bonds and were issued in the Fixed Rate Mode and bear interest at a fixed rate of 2.31%. Per the bond agreements, the principal payments on the bonds are due on June 1 of each year beginning in 2021 in annual amounts ranging from \$13,600 to \$20,500.

- (e) Line of credit consists of an unsecured credit facility with a total borrowing capacity of \$100,000 to provide for the working capital needs of NCBH, WFUHS, and WFUBMC. The line of credit is due on June 3, 2022, and bears interest at one-month LIBOR plus 0.65%. The facility is structured with WFUBMC as the Borrower and NCBH and WFUHS as Co-obligors.
- (f) Loan agreement represents an unsecured loan agreement held by WFUHS, with a variable rate based on one month LIBOR plus a premium of 0.65% for \$20,014 to refinance two previously outstanding fixed rate notes. Fixed principal payments and accrued interest are due monthly with a final maturity date of April 1, 2023. This taxable loan is guaranteed by both NCBH and WFUBMC.
- (g) Loan agreements- represents notes payable held by a WFUHS subsidiary, with variable interest rates based on one-month LIBOR plus a premium of 1.05% and final maturities in 2021 and 2025.

- (h) Loan agreement represents a taxable, unsecured loan agreement held by WFUBMC, WFUHS and NCBH as Borrowers, with a fixed rate of 1.88% to refinance previously outstanding loan agreements held by the Borrowers and owned subsidiaries. Principal payments and accrued interest are due monthly with a final maturity date of April 15, 2027.
- (*i*) **Finance leases** represents various finance lease obligations held by Atrium Health WFB affiliates, with interest rates ranging from 0.04% to 5.31% and final maturities in 2024.
- (*j*) **Finance lease** represents a finance lease obligation of \$44,125 entered into by WFUHS related to the Bowman Gray Center for Medical Education with an initial term of 15 years and additional renewal options. The obligation has a fixed interest rate of 4.5%.
- (k) Finance lease represents a finance lease obligation of \$21,911 entered into by WFUBMC and WRMC Hospital Operating Corporation (WMC) related to assets leased from the Town of North Wilkesboro with an initial term of 30 years and additional renewal options. The obligation has a fixed interest rate of 4.10%.
- (I) Loan agreements represents various notes payable and finance leases held by High Point Regional Health, Inc. (HPMC), with interest rates ranging from a fixed rate of 5.00% to variable one-month LIBOR plus a premium of 2.50% and final maturity dates through 2026.
- (*m*) *Finance leases* represents various finance lease obligations of \$538 entered into by Wake Forest Ambulatory Ventures, LLC related to equipment. The obligations have fixed interest rates ranging from 4.25% to 6.16% and final maturity dates through June 2025.

An additional unsecured line of credit facility with a total borrowing capacity of \$200,000 was entered into in June 2021 to provide for the working capital needs of WFUHS, NCBH, and WFUBMC, all Borrowers under the credit facility. The line of credit is due on June 2, 2022 and bears interest at one-month LIBOR plus 1.00%. There is no outstanding balance on the facility at December 31, 2021.

Debt issued under the MTI is payable solely from the Obligated Group's revenues (as defined by the MTI). Additionally, the Combined Group must remain compliant with certain covenants and restrictions required by the MTI and loan agreements underlying the bonds. The Combined Group is subject to covenants under the MTI containing restrictions or limitations with respect to indebtedness, property encumbrance, consolidation or merger or transfer of assets. In addition, the Combined Group has agreed that it will not create any lien upon its property, accounts, or revenue now owned or hereafter acquired other than "permitted liens" as described in the MTI.

Deferred financing costs, net of accumulated amortization, totaled \$5,080 as of December 31, 2021. Premiums, net of accumulated amortization, totaled \$17,630 as of December 31, 2021. These costs are being amortized over the estimated duration of the related debt using the effective interest method.

### December 31, 2021

Dollars in thousands.

### 10. Interest Rate Swaps

### **Atrium Health Charlotte**

Atrium Health Charlotte has adopted an Interest Rate Exchange Agreement Policy (the Policy) that governs its use of derivative instrument agreements and restricts the use of such agreements to achieving desired interest cost savings, hedging interest rate risk in financing transactions, adjusting the mix of variable and fixed rate debt exposure to appropriate levels, providing flexibility to meet financial objectives not available under then-existing market conditions and improving cash flows. The Policy does not allow Atrium Health Charlotte to speculate using derivative instrument agreements.

In January 2006, Atrium Health Charlotte entered into an uninsured floating-to-fixed interest rate swap agreement on its Series 2005 B, C and D Variable Rate Refunding Revenue Bonds.

In August 2007, Atrium Health Charlotte entered into four floating-to-fixed interest rate swaps under separate agreements insured by Ambac Assurance Corporation (Ambac) with two counterparties, in connection with its Series 2007 B and C Variable Rate Refunding Revenue Bonds, with an aggregate initial notional amount of \$177,835. These swaps were entered into in conjunction with the refunding of the Series 2003 A and 2005 A Revenue Bonds.

In September 2007, Atrium Health Charlotte entered into five AGMC-insured floating-to-fixed interest rate swaps under separate agreements with three counterparties, in connection with its Series 2007 D, E and F Variable Rate Revenue Bonds, with an aggregate initial notional amount of \$201,415.

Also in September 2007, Atrium Health Charlotte entered into two Ambac and two AGMC-insured floating-to-fixed interest rate swaps under separate agreements with two counterparties, in connection with its Series 2007 G and H Variable Rate Revenue Bonds, with an aggregate initial notional amount of \$279,875.

In January 2021, Atrium Health Charlotte entered into an uninsured floating-to-fixed interest rate swap agreement on its Series 2021 E Variable Rate Refunding Revenue Bonds.

The significant terms and features of the above transactions as of and for the year ended December 31, 2021, are summarized in the below table. The notional amounts of the swaps effectively match the principal amounts of the associated debt. The swaps contain scheduled

Notes to Combined Financial Statements

### December 31, 2021

Dollars in thousands.

reductions to outstanding notional amounts that are expected to follow scheduled or anticipated reductions in the associated bonds.

Associated bonds	2005	B, C, and D	2007 B			2007 C
Notional amount Swap type Origination date Final bond maturity Atrium Health pays Atrium Health receives	Ja	32,115 ating-to-fixed nuary 15, 2006 nuary 15, 2026 5.52 % 75% of LIBOR	A	74,760 pating-to-fixed august 28, 2007 anuary 15, 2038 4.36 % SIFMA	\$	87,635 Floating-to-fixed August 28, 2007 January 15, 2037 4.38 % SIFMA
Fair value at December 31, 2021 Change in fair value during	\$	(3,930)	\$	(25,170)	\$	(26,335)
the year		2,191		7,413		8,155
Associated bonds		2007 D		2007 E	<u></u>	2007 F
Notional amount Swap type Origination date Final bond maturity Atrium Health pays Atrium Health receives Fair value at December 31, 2021	Septe Jai	67,140 ating-to-fixed mber 19, 2007 nuary 15, 2043 3.88 % .97% of LIBOR plus 0.29% (28,819)	Septe Ja	77,220 pating-to-fixed ember 19, 2007 inuary 15, 2044 3.89 % 2.97% of LIBOR plus 0.29% (33,882)	\$ Se \$	57,055 Floating-to-fixed ptember 19, 2007 January 15, 2042 3.89 % 62.97% of LIBOR plus 0.29% (23,564)
Change in fair value during the year		5,320		6,154		4,468
Associated bonds		2007 G		2007 H		2021 E
Notional amount Swap type Origination date Final bond maturity Atrium Health pays Atrium Health receives	Septe Jai 62	111,170 ating-to-fixed mber 19, 2007 nuary 15, 2041 3.90 % .97% of LIBOR us 0.29%	Septe Ja 6 if to e	166,050 pating-to-fixed ember 19, 2007 inuary 15, 2045 3.88 % 2.97% of LIBOR LIBOR is equal or greater than 3.5%; 77.5% of LIBOR if LIBOR less than 3.5%	\$	126,010 Floating-to-fixed January 15, 2021 January 15, 2042 1.97 % 70% of LIBOR
Fair value at December 31, 2021	\$	(42,261)	\$	(57,890)	\$	(12,755)
Change in fair value during the year		8,454		13,601		6,521

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December 31, 2021

The swaps' aggregate negative fair value of (\$254,606), as of December 31, 2021, is reported as a long-term liability on the combined balance sheet. Certain of the mandatory tender processes discussed above resulted in the termination of the related hedging relationships. Although hedging relationships have been subsequently re-established, the swaps are considered off-market swaps because the fixed rates of the swaps differed from the market rates for similar swaps at the time the hedging relationship was re-established. The negative fair value of the off-market swaps are being amortized using straight-line amortization. As of December 31, 2021, Atrium Health Charlotte has determined that its 15 interest rate swaps are effective hedging derivative instruments. Because the swaps are effective hedges, aggregate changes in their fair value of \$62,277 for the year ended December 31, 2021, are deferred and are reported on the combined balance sheet as a deferred outflow of resources. See note 5 for further discussion of the measurement techniques and inputs utilized in the measurement of the swaps' fair value. For the year ended December 31, 2021, the swaps produced annual net cash outflows of approximately \$28,372. Cash flows associated with the swaps are treated as interest expense.

As of December 31, 2021, all swaps had a negative fair value. The negative fair value may be countered by a reduction in total interest payments required under Atrium Health Charlotte's associated variable rate revenue bonds, creating a lower synthetic interest rate. Because the coupons on the variable rate revenue bonds adjust to changing interest rates, the bonds do not have corresponding fair value increases.

As of December 31, 2021, Atrium Health Charlotte was not exposed to credit risk because the swaps had negative fair values. However, should interest rates change and the fair values of the swaps become positive, Atrium Health would be exposed to credit risk in the amount of the swaps' fair value.

Atrium Health Charlotte's 15 interest rate swaps are executed under seven swap agreements with various counterparties. Seven swaps, approximating 40% of the notional amount of swaps outstanding, are provided by one counterparty that was rated A+ and Aa2 by S&P Global Ratings and Moody's Investors Service, respectively, as of December 31, 2021. Five additional swaps, approximating 34% of the outstanding notional value, are provided by another counterparty rated A+ and Aa2. The remaining three swaps are provided by a third counterparty rated A+ and Aa3 as of December 31, 2021.

In the event Atrium Health Charlotte's credit ratings, as determined by S&P Global Ratings and Moody's Investors Service, fall below a level of A+ or A1, respectively, and the three uninsured swap agreements associated with Series 2005 B, C and D bonds, Series 2007 B, C and H bonds (with one counterparty) and with Series 2007 B and C bonds (with a different counterparty) each has a negative fair value of \$25,000 or more, then Atrium Health Charlotte must post collateral on these swap agreements equal to the amount of fair value in excess of \$25,000. As of December 31, 2021, the fair values of these swap agreements were (\$3,930), (\$54,694), and (\$25,752). No collateral was required to be posted by Atrium Health for these swap agreements.

In the event Atrium Health Charlotte's credit ratings, as determined by S&P Global Ratings and Moody's Investors Service, fall below a level of A+ or A1, respectively, and the uninsured swap agreement associated with Series 2007 H bonds has a negative fair value of \$50,000 or more, then Atrium Health Charlotte must post collateral on this swap agreement equal to the amount of fair

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Dollars in thousands.

value in excess of \$50,000. As of December 31, 2021, the fair value of this swap agreement was (\$28,949). No collateral was required to be posted by Atrium Health Charlotte for this swap agreement.

With respect to the AGMC-insured swap agreement associated with Series 2007 E, F and G bonds, should the financial strength ratings of AGMC, as determined by S&P Global Ratings and Moody's Investors Service, fall below A– or A3, respectively, upon the request of the counterparty, Atrium Health Charlotte, at its option, must either procure replacement swap insurance policies from counterparties rated at least AAA by S&P Global Ratings and Aaa by Moody's Investors Service, respectively, or agree to post collateral on those swap agreements equal to the amount of negative fair value in excess of \$25,000 if Atrium Health Charlotte's credit ratings, as determined by S&P Global Ratings and Moody's Investors Services, fall below a level of A+ or A1, respectively. As of December 31, 2021, the fair value of this swap agreement was (\$49,852). No collateral was required to be posted by Atrium Health for this swap agreement given AGMC's ratings of AA and A2.

With respect to the AGMC-insured swap agreement associated with Series 2007 D, E, F and G bonds, should the financial strength ratings of AGMC, as determined by S&P Global Ratings and Moody's Investors Service, fall below A– or A3, respectively, upon the request of the counterparty Atrium Health Charlotte, at its option, must either procure replacement swap insurance policies from counterparties rated at least AAA by S&P Global Ratings and Aaa by Moody's Investors Service, respectively, or agree to post collateral on this swap agreement equal to the amount of negative fair value in excess of \$50,000 if Atrium Health Charlotte's credit ratings, as determined by S&P Global Ratings and Moody's Investors Service, fall below a level of A+ or A1, respectively. As of December 31, 2021, the fair value of this insured swap agreement was (\$78,674). No collateral was required to be posted by Atrium Health Charlotte for this swap agreement given AGMC's ratings of AA and A2.

In the event Atrium Health Charlotte's credit ratings, as determined by S&P Global Ratings and Moody's Investors Service, fall below a level of A+ or A1, respectively, and the uninsured 2021 E swap has a negative fair value of \$55,000 or more, then Atrium Health Charlotte must post collateral on this swap agreement equal to the amount of fair value in excess of \$55,000. As of December 31, 2021, the fair value of this swap agreement was (\$12,755). No collateral was required to be posted by Atrium Health Charlotte for this swap agreement.

Atrium Health Charlotte's Series 2007 B, C and E and Series 2021 E bonds bear interest at a rate that is equivalent to the SIFMA rate while the Series 2005 B, C and D bonds and Series 2007 D, F, G and H bonds bear interest at LIBOR plus a spread. For those swaps on the SIFMA-based variable rate revenue bonds for which it receives a variable rate based on LIBOR, Atrium Health Charlotte is exposed to basis risk depending upon the relationship between SIFMA and LIBOR. If that relationship changes, the effective synthetic rate on the SIFMA-based variable rate revenue bonds may be higher than the intended synthetic rate. As of December 31, 2021, the SIFMA rate was 0.10% and LIBOR was 0.10%, resulting in a SIFMA to LIBOR relationship of approximately 99%.

Atrium Health Charlotte or the counterparty may terminate any of the swaps if either party fails to perform under the terms of the agreement. If any of the swaps are terminated, the associated variable rate revenue bonds would no longer carry synthetic interest rates. Also, if the swap has a negative fair value at the time of termination, Atrium Health Charlotte would be liable to the counterparty for a payment equal to the swap's fair value. Likewise, if the swap has a positive fair

### December 31, 2021

value at the time of termination, Atrium Health Charlotte would be entitled to a payment equal to the swap's fair value from the counterparty terminating the swap.

### Atrium Health Navicent

In October, 2001, Central Georgia Senior Health, Inc. entered into an uninsured floating-to-fixed interest rate swap agreement on its Series 2000 Revenue Anticipation Certificates, with an initial notional amount of \$23,000. Although the Series 2000 Certificates were refinanced in 2015 and 2017, the interest rate swap agreement remains in place and is to create synthetic fixed rate debt on a portion of the Series 2017 B Revenue Anticipation Certificates. This swap matured on September 1, 2021.

In August 2005, The Medical Center of Central Georgia, Inc. entered into an Ambac-insured floatingto-fixed interest rate swap agreement on its Series 2005 Revenue Anticipation Certificates, with an initial notional amount of \$52,000. Although the Series 2005 Certificates were refinanced in 2009, the insured interest rate swap agreement remains in place to create synthetic fixed rate debt on a portion of the Series 2017 B Revenue Anticipation Certificates.

The significant terms and features of the above transactions, which were amended in April 2018 and again in April 2021, as of and for the year ended December 31, 2021, are summarized in the below table. The notional amounts of the swaps neither effectively match the principal amounts of the associated debt nor contain scheduled reductions to outstanding notional amounts that follow scheduled or anticipated reductions in the associated debt.

Associated certificates	201	2017 B					
Notional amount	\$		\$	48,285			
Swap type	Floatin	g-to-fixed	Floa	ting-to-fixed			
Origination date	Octob	er 1, 2001	August 1, 2005				
Final swap maturity	Septemb	er 1, 2021	May 1, 202				
Navicent Health pays		4.12 %	3.29 %				
Navicent Health receives	67%	6 of LIBOR		67% of LIBOR			
Fair value at December 31, 2021 Change in fair value during	\$		\$	(8,514)			
the year		166		2,918			

The remaining swap's negative fair value of (\$8,514), as of December 31, 2021, is reported as a long-term liability on the combined balance sheet. As of December 31, 2021, Atrium Health Navicent has determined that its interest rate swaps are not an effective hedging derivative instruments, resulting in changes in its fair value of \$3,084 for the year ended December 31, 2021, being reported in nonoperating income. See note 5 for further discussion of the measurement techniques and inputs utilized in the measurement of the swaps' fair value. For the year ended December 31, 2021, the swaps produced annual net cash outflows of approximately \$1,742. Cash flows associated with the swaps are treated as interest expense.

December 31, 2021

As of December 31, 2021, the swap had a negative fair value. The negative fair value may be countered by a reduction in total interest payments required under Atrium Health Navicent's associated variable rate revenue anticipation certificates, creating a lower synthetic interest rate. Because the coupons on the variable rate revenue anticipation certificates adjust to changing interest rates, the revenue anticipation certificates do not have corresponding fair value increases.

As of December 31, 2021, Atrium Health Navicent was not exposed to credit risk because the swap had a negative fair value. However, should interest rates change and the fair value of the swap become positive, Atrium Health Navicent would be exposed to credit risk in the amount of the swap's fair value. Atrium Health Navicent's interest rate swap is executed under one swap agreement with a counterparty that was rated A and A2 by S&P Global Ratings and Moody's Investors Service, respectively, as of December 31, 2021.

In the event the swap agreement has a negative fair value of \$15,000 or more, then Atrium Health Navicent must post collateral on the swap agreement equal to the amount of fair value in excess of \$15,000. As of December 31, 2021, the fair value of this swap agreement was (\$8,514). No collateral was required to be posted by Atrium Health Navicent for this swap agreement.

Atrium Health Navicent or the counterparty may terminate the swap if either party fails to perform under the terms of the agreements. If the swap is terminated, the associated variable rate revenue anticipation certificates would no longer carry synthetic interest rates. Also, if the swap has a negative fair value at the time of termination, Atrium Health Navicent would be liable to the counterparty for a payment equal to the swap's fair value. Likewise, if the swap has a positive fair value at the time of termination, Atrium Health Navicent would be entitled to a payment equal to the swap's fair value from the counterparty terminating the swap.

Debt service requirements of Atrium Health Charlotte's outstanding hedged variable rate revenue bonds and related net swap payments and Atrium Health Navicent's outstanding revenue anticipation certificates with a synthetic fixed rate and related net swap payments, assuming current SIFMA and LIBOR interest rates and the SIFMA to LIBOR relationship remain the same, as of December 31, 2021, were as follows:

		Variable rat nue anticip	 	Int	erest rate	
	Pı	rincipal	 nterest	SV	/ap – net	 Total
2022	\$	9,175	\$ 5,393	\$	30,236	\$ 44,804
2023		18,055	5,276		29,714	53,045
2024		11,260	3,236		27,365	41,861
2025		11,745	3,171		26,850	41,766
2026		12,310	3,103		26,308	41,721
2027–2031		78,510	14,816		123,068	216,394
2032–2036		160,445	13,259		100,463	274,167
2037–2041		282,050	9,584		60,767	352,401
2042–2046		226,500	920		8,384	235,804
2047–2051			 			 
	\$	810,050	\$ 58,758	\$	433,155	\$ 1,301,963

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Dollars in thousands.

#### **Atrium Health WFB**

Management directs the effective mix of fixed and variable rate debt in its debt portfolio and manages exposure to increasing interest expense from variable-rate debt, by utilizing interest rate swap agreements. The following table summarizes the general terms of Atrium Health WFB's outstanding agreement as of December 31, 2021:

	2002 Agreement						
Notional amount	\$	18,340					
Swap type		Fixed Payer					
Origination date		37,488					
Final bond maturity		49,126					
Atrium Health WFB pays		0.04 %					
Atrium Health WFB receives	67% of 1	-Month LIBOR					
Fair value at December 31, 2021 Change in fair value during	\$	(3,525)					
the year		1,208					

Atrium Health WFB records its interest rate swap agreements as part of other long-term assets or liabilities in the accompanying combined balance sheet at its fair value. The estimated amounts that Atrium Health WFB would pay to terminate the swap agreement at the reporting date, considering current forward interest rates and the current creditworthiness of the swap counterparties approximate the fair values of the interest rate swap. All changes in fair value are reflected as a gain or loss in nonoperating activities on the combined statement of revenues, expenses and changes in net assets. The periodic net cash settlements with the counterparties are accounted for as adjustments to interest expense.

The fair value of the interest rate swap is a liability of \$ 3,525 at December 31, 2021 for which Atrium Health WFB has posted collateral of \$3,630 as of December 31, 2021. The collateral to support the swap is included in assets whose use is limited.

After taking into account the aforementioned swap agreement, Atrium Health WFB's adjusted debt portfolio was approximately 91% fixed as of December 31, 2021.

### **The Enterprise**

The Enterprise had a net gain of \$66,569 on interest rate swaps reflected in nonoperating gains in the combined statement of revenues, expenses and changes in net assets as of December 31, 2021.

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# 11. Benefit Plans

Substantially all employees of the Enterprise are eligible to participate in defined contribution benefit plans at their respective region (Atrium Health Charlotte, Atrium Health Navicent, Atrium Health Floyd and Atrium Health WFB). The Enterprise regions contribute specified percentages of each employee's salary to the plans. Total employer contributions across the Enterprise were \$321,129 for the year ended December 31, 2021.

# Atrium Health Charlotte Defined Benefit Pension Plan

Atrium Health Charlotte has a defined benefit pension plan covering substantially all employees of Atrium Health Charlotte who were employed prior to January 1, 2014 and who have attained five or more years of service. These benefits are based on years of service and the teammates' compensation. Effective January 1, 2009, the Atrium Health Charlotte DB Plan became a cash balance plan and a small group of teammates meeting specified employment, age, and service criteria were grandfathered and accrued benefits under the Atrium Health Charlotte pre cash balance formula. The Board of Commissioners of Atrium Health Charlotte or an authorized committee of the Board has the authority to amend benefit provisions. Late in 2013, Atrium Health Charlotte DB Plan to teammates hired after January 1, 2014. The Atrium Health Charlotte DB Plan was frozen for all teammates effective January 1, 2018, after which no additional benefits accrue under the Atrium Health Charlotte DB Plan.

# Atrium Health Navicent Defined Benefit Pension Plan

Atrium Health Navicent has a defined benefit pension plan covering substantially all employees of Atrium Health Navicent who were employed prior to December 31, 2007 and who have attained more than five years of service. Effective January 1, 2008, plan participants under the age of 40 no longer accrue benefits under the Atrium Health Navicent DB Plan. As of December 31, 2013, the Atrium Health Navicent DB Plan was frozen for all teammates such that additional benefits no longer accrue after that date.

# Atrium Health Floyd Defined Benefit Pension Plan

Atrium Health Floyd has a defined benefit pension plan covering substantially all employees of Floyd who were employed prior to September 30, 2005. The benefits are based on 1.75% of earnings for each year after January 1, 1998, with the total benefit subject to thirty-five years of benefit service maximum. Atrium Health Floyd's funding policy is to contribute annually an amount intended to provide not only for benefits attributed to service date but also for those expected to be earned in the future. As of March 31, 2014, Atrium Health Floyd DB Plan was frozen for all teammates such that additional benefits no longer accrue after that date.

#### December 31, 2021

Dollars in thousands.

### Atrium Health NCBH Defined Benefit Pension Plan

Atrium Health WFB has a defined benefit pension plan covering substantially all employees of NCBH who were employed prior to December 31, 2011. The benefits are based on years of service and the employee's compensation during the last five years of employment. NCBH's funding policy is to contribute amounts to the plan sufficient to meet the minimum funding requirements set forth in the Employee Retirement Income Security Act of 1974.

On June 2, 2011, the Board of NCBH amended its pension plan to provide that (i) no further benefits will accrue after December 31, 2011; (ii) no new employees will be eligible to enter the pension plan after December 31, 2011; and (iii) all participants who are active employees of NCBH on December 31, 2011 will become fully vested in their accrued benefits under the pension plan on such date.

### Atrium Health WMC Defined Benefit Pension Plan

Atrium Health WFB has a defined benefit pension plan covering substantially all employees of Wilkes Medical Center (WMC) who were employed prior to December 31, 2011. The benefits are based on years of service and age. WMC's funding policy is to contribute amounts to the plan sufficient to meet the minimum funding requirements set forth in the Employee Retirement Income Security Act of 1974. WMC Defined Benefit Pension Plan had a net pension liability balance of \$713 as of December 31, 2021. The plan had a projected benefit obligation of \$38,168 and fair value of plan assets of \$37,455 as of December 31, 2021. The annual income for the WMC Defined Benefit Pension Plan was \$779 for 2021.

### Atrium Health WFB and Atrium Health Enterprise:

The Enterprise regions made the below contributions to their respective plans and had the below ending net pension liability:

		As of Decem	nber 31	l <b>, 202</b> 1
	Con	tribution		t Pension .iability
Atrium Health Charlotte DB Plan Atrium Health Navicent DB Plan Atrium Health Floyd DB Plan	\$	36,570 6,960 582	\$	801,471 46,557 22,071
Atrium Health NCBH DB Plan Totals	\$	44,112	\$	72,079 942,178

Notes to Combined Financial Statements

# December 31, 2021

Dollars in thousands.

The following table summarizes the valuation of the Enterprise's defined benefit pension plans' assets by the fair value hierarchy levels as of December 31:

						2021				
	_	F	air Val	ue Measure	ments			Investments		
	_	Level 1		Level 2		Level 3	Re	ported at $NAV_1$		Total
Atrium Health Charlotte DB Plan:									-	
Investments at fair value:										
Short-term investments	\$	39,105	\$		\$	—	\$		\$	39,105
Absolute return		-				_		151,242		151,242
Commodities		43,010				_		-		43,010
Fixed income		75,599		48,627		_		39,727		163,953
Public equity		526,486		_		_		123,780		650,266
Private equity		_						67,227		67,227
Total plan investments	\$	684,200	\$	48,627	\$		\$	381,976	******	1,114,803
Accruals carried at cost		500.								
Total Atrium Health Charlotte DB plan assets									\$	1,114,803
Atrium Health Navicent DB Plan:										
Investments at fair value:										
Short-term investments	\$	5,095	\$	_	\$		\$	_	\$	5,095
Absolute return		31,513				_				31,513
Fixed income		62,587		_		_				62,587
Public equity		227,418				_		_		227,418
Private equity				_				15,960		15,960
Other				_				242		242
Total plan investments	\$	326,613	\$		\$		\$	16,202		342,815
Accruals carried at cost			2000							_
Total Atrium Health Navicent DB plan assets									\$	342,815

Notes to Combined Financial Statements

December 31, 2021

Dollars in thousands.

						2021			
	-	F	air Va	ue Measure	ments		I	nvestments	
	-	Level 1		Level 2		Level 3	Rep	orted at NAV <sub>1</sub>	 Total
Atrium Health Floyd DB Plan:									
Investments at fair value:									
Short-term investments	\$	_	\$	1,516	\$		\$		\$ 1,516
Commodities		_		10,800		-			10,800
Fixed income		_		43,287					43,287
Public equity		-		17,602		_			17,602
Private equity		_		14,802		_			14,802
Total plan investments	\$		\$	88,007	\$		\$		 88,007
Accruals carried at cost									 
Total Atrium Health Floyd DB plan assets									\$ 88,007
Atrium Health NCBH DB Plan:									 
Investments at fair value:									
Short-term investments	\$	2,263	\$		\$		\$	_	\$ 2,263
Absolute return				_				29,275	29,275
Fixed income		6,060		193,823					199,883
Public equity		149,935							149,935
Total plan investments	\$	158,258	\$	193,823	\$		\$	29,275	 381,356
Accruals carried at cost									 (25,290
Total Atrium Health NCBH DB plan assets									\$ 356,066

The classification of investments in the fair value hierarchy is not necessarily an indication of the risks, liquidity, or degree of difficulty in estimating the fair value of each investment's underlying assets and liabilities. Methods and assumptions used by the Enterprise in estimating the fair value of each class of financial instruments are discussed in detail in note 5.

The defined benefit pension plans' investment strategies, as set by the respective region's Board, is to provide adequate risk-adjusted returns while protecting the funded status of the plan. Expected long-term allocation targets, as well as the actual asset allocation as of December 31, are as follows:

	Atrium Health Charlotte DB Plan		Atrium Heal DB F	•••••	Atrium He DB I	•	Atrium Health NCBH DB Plan	
	Allocation Target Range	Actual 2021	Allocation Target Range	Actual 2021	Allocation Target Range	Actual 2021	Allocation Target Range	Actual 2021
Asset category:								
Equities	64 %	65 %	65 %	61 %	38 %	37 %	40 %	42 %
Fixed income	24 %	26 %	18 %	20 %	51 %	51 %	50 %	50 %
<b>Diversified alternatives</b>	12 %	9 %	17 %	19 %	11 %	12 %	10 %	8 %
Total plan assets	100 %	100 %	100 %	100 %	100 %	100 %	100 %	100 %

Notes to Combined Financial Statements

#### December 31, 2021

Dollars in thousands.

The Enterprise's accumulated benefit obligation for pension benefits, the fair value of the plan assets and the amount underfunded/(overfunded) in relation to accumulated benefits are as follows:

	As of December 31, 2021								
	 Accumulated Benefit Obligation	Fair Value of Plan Assets			Underfunded Amount				
Atrium Health Charlotte DB Plan Atrium Health Navicent DB Plan Atrium Health Floyd DB Plan Atrium Health NCBH DB Plan	\$ 1,916,274 389,372 110,078 428,145	\$	1,114,803 342,815 88,007 <u>356,066</u>	\$	801,471 46,557 22,071 72,079				
Totals:	\$ 2,843,869	\$	1,901,691	\$	942,178				

Estimated future benefit payments for the defined benefit pension plans are as follows:

	Year Ending December 31, 2021											
		ium Health lotte DB Plan		ium Health cent DB Plan		um Health /d DB Plan	Atrium Health NCBH DB Plan					
2022	\$	191,167	\$	15,118	\$	5,205	\$	19,270				
2023		178,665		16,018		5,302		19,811				
2024		168,137		16,905		5,425		20,339				
2025		156,255		17,700		5,530		20,935				
2026		149,726		18,479		5,574		21,461				
2027 to 2031		602,991		102,127		28,778		111,405				

Notes to Combined Financial Statements

December 31, 2021

Dollars in thousands.

The following table provides a reconciliation of the changes in Enterprise's portion of the plans' benefit obligations and fair value of assets for the year ended December 31, 2021:

	Pension Benefits										
		Charlotte		Navicent		Floyd		NCBH			
Change in benefit obligation: Benefit obligation, beginning of year	\$	2,101,715	\$	482,705	\$	110,642	\$	448,089			
Service cost Interest cost Participants' contributions		55,412		12,492		1,224		12,673			
Actuarial (gains) losses Benefits paid Settlements		(88,999) (26,176) (125,678)		(19,541) (17,822) (68,462)		781 (2,569)		(15,528) (17,089)			
Benefit obligation, end of year		1,916,274		389,372		110,078		428,145			
Change in plan assets: Fair value of plan assets, beginning of year Actual return on plan assets Employer's contributions Participants' contributions Benefits paid		1,072,872 157,215 36,570 (26,176)		368,825 53,314 6,960 (17,822)		86,952 3,874 582 (3,401)		345,828 27,327 (17,089)			
Settlements Fair value of plan assets, end of year		(125,678)		(68,462) 342,815		88.007	<u> </u>	356.066			
Amounts recognized in the combined balance sheets (funded status): Retirement benefits		(801,471)		(46,557)		(22,071)		(72,079)			
Total liability	\$	(801,471)	\$	(46,557)	\$	(22,071)	\$	(72,079)			
Amounts recognized in net assets without donor restrictions: Prior service credit Net actuarial (losses) gains	\$	(162,820)	\$	(41,267)	\$	143	\$	64,285			
Total	\$	(162,820)	\$	(41,267)	\$	143	\$	64,285			

Components of net periodic pension cost (benefit) for the plans for year ended December 31, 2021 are as follows:

	Pension Benefits										
	C	harlotte	N	lavicent		Floyd	NCBH				
Interest cost Expected return on plan assets Amortization of actuarial net loss Settlement credit	\$	55,412 (74,791) — (8,604)	\$	12,492 (24,331) — (7,256)	\$	1,224 (2,403) 	\$	12,673 (15,049) 9,980 —			
Total net periodic pension cost (benefit)	\$	(27,983)	\$	(19,095)	\$	(1,179)	\$	7,604			

For defined benefit plans with prior service costs, the costs and credits are amortized on a straight-line basis over the average remaining service period of active participants. Gains in excess of 10% of the greater of the benefit obligation and the market-related value of assets are amortized over the average remaining service period of active participants.

Notes to Combined Financial Statements

#### December 31, 2021

Dollars in thousands.

Assumptions used in the measurement of the Enterprise's benefit obligations and benefit costs as of December 31, 2021 are as follows:

	Pension Benefits										
	Charle	otte	Navio	ent	Flo	yd	NCBH				
	Obligation	Cost	Obligation	Cost	Obligation	Cost	Obligation	Cost			
Weighted-average assumptions:											
Discount rate	3.00%	2.65%	3.00%	2.65%	2.98%	2.26%	2.99%	3.00%			
Expected return on plan assets	7.50%	7.50%	7.10%	6.70%	5.65%	5.65%	5.20%	5.35%			
Interest crediting rate	4.18%	4.42%	N/A	N/A	N/A	N/A	N/A	N/A			

The expected return on plan assets are based on expectations regarding each asset category and average long-term rate of returns for a portfolio allocated across these categories. The expected return is reviewed annually and adjusted as appropriate to reflect changes in the expected market performance of the investments.

# Defined Benefit Postretirement Medical and Dental Plans

Atrium Health Navicent and Atrium Health WFB also sponsor unfunded postretirement health and dental plans which have a current and noncurrent liability balance as of December 31, 2021:

	l	Atrium Health Navicent					
Current liability Non-current liability	\$	2,130 19,659	\$	2,112 23,253			
Total liability	\$	21,789	\$	25,365			

### Atrium Health CMHA GASB 68 Accounting:

### **Defined Contribution Plans**

Retirement benefits for Atrium Health CMHA are provided to teammates using both defined contribution (DC) plans and defined benefit (DB) plans.

Atrium Health CMHA offers several defined contribution plans with the largest plan for Atrium Health Charlotte and Atrium Health Floyd being separate Section 401(k) defined contribution plans and the largest plan for Atrium Health Navicent being a Section 403(b) defined contribution plan. These plans cover all full-time teammates of Atrium Health Charlotte, Navicent, and Floyd and are funded by voluntary teammate contributions and certain matching contributions by Atrium Health Charlotte, Navicent, and Floyd to their respective plans. Defined contribution plan assets are not recorded in Atrium Health CMHA's combined balance sheet but are held in participant-directed individual accounts and were \$4,724,736 for the Atrium Health Charlotte DC Plans, \$509,289 for the Atrium Health Navicent DC Plan, and \$167,450 for the Atrium Health Floyd DC Plan at December 31, 2021. Total matching contribution expense was \$192,928 for the Atrium Health Charlotte DC Plan, \$10,769 for the Atrium Health Navicent DC Plan, and \$6,510 for the Atrium Health Floyd DC Plan for the year ended December 31, 2021.

December 31, 2021

Dollars in thousands.

**Atrium Health CMHA DB Plans' Benefits Provided** – The actuarial valuation establishing the net pension liability for the purposes of GASB Statement No. 68, *Accounting and Financial Reporting for Pensions*, was based on the Atrium Health CMHA DB Plan membership data as of January 1, 2020 and rolled forward to the measurement date of July 1, 2021. The Atrium Health CMHA DB Plans' participant data as of July 1, 2021 is as follows:

		2021	
	Atrium Health Charlotte DB Plan	Atrium Health Navicent DB Plan	Atrium Health Floyd DB Plan
Retirees and beneficiaries receiving benefits Previously employed plan members entitled	2,792	1,281	594
to but not yet receiving benefits	7,366	1,428	220
Employed plan members	16,801	1,427	402
Total	26,959	4,136	1,216

**Contributions to the Atrium Health CMHA DB Plans** – Annual contributions to the Atrium Health CMHA DB Plans are based upon actuarial calculations. Atrium Health CMHA DB Plans utilize the entry age normal method to determine annual contributions. There are no teammate contributions to any of the Atrium Health CMHA DB Plans.

Atrium Health CMHA's funding policy is to contribute such actuarially determined amounts as are necessary to provide assets sufficient to meet the benefits to be paid to Atrium Health CMHA DB Plans' participants. In addition, with the freezing of the Atrium Health CMHA DB Plans, Atrium Health CMHA regions have periodically made contributions to their respective plans under Atrium Health CMHA in addition to the annual actuarially determined amounts in an effort to reduce the unfunded actuarially accrued liability in a systematic manner. Atrium Health CMHA's contribution rate for the year ended December 31, 2021 equaled 2.2%, 7.2%, and 1.6% of covered payroll for Atrium Health Charlotte, Atrium Health Navicent, and Atrium Health Floyd, respectively. This contribution rate was determined based on a measurement date of January 1, 2021.

Atrium Health CMHA DB Plans' Actuarial Assumptions – The total Atrium Health CMHA DB Plans' pension liability (asset) based on the July 1, 2021, measurement date was determined using the following actuarial assumptions:

		2021	
	Atrium Health Charlotte DB Plan	Atrium Health Navicent DB Plan	Atrium Health Floyd DB Plan
Inflation rate Investment rate of return (net of investment	2.1 %	2.1 %	2.1 %
expenses, including inflation) Lump sum interest rate	7.5 % 4.5 %	7.5 %	5.7 %

Actuarial assumptions used in the July 1, 2021 valuations were based on the results of an actuarial experience study that is conducted every four years, most recently in 2020. Mortality rates were based on the Pri-2012 table (creditability adjustment factor of 95%) with MP-2020 Generational

December 31, 2021

Dollars in thousands.

Projections. This change in mortality assumption as well as other assumption changes related to termination rates, retirement rates, benefit commencement age and form of payment resulted in a net increase in the total pension liability for Atrium Health Charlotte and Atrium Health Navicent of \$6,103 and \$1,221 respectively. The long-term investment rate of return on pension assets was determined using a combination of benchmark return information and a building-block method in which best-estimated expected real rates of return are developed for each major asset class. These expected real rates of return are weighted by the target asset allocation percentage to produce an overall expected real rate of return on pension assets of 7.5% for Atrium Health Charlotte and Atrium Health Navient and 5.65% for Atrium Health Floyd.

The target allocation, expected nominal return (which includes inflation) and the best estimates of geometric or compounded real rates of return (which are net of inflation) for each major asset class were established as of July 1, 2020, the beginning of the measurement period, and are summarized in the following table:

	Atrium H	ealth Charlotte	DB Plan	Atrium H	lealth Navicent	DB Plan	Atrium Health Floyd DB Plan			
Asset class	Target allocation	Expected nominal return	Expected real rate of return	Target allocation	Expected nominal return	Expected real rate of return	Target allocation	Expected nominal return	Expected real rate of return	
Fixed income	17.0 %	3.5 %	1.4 %	22.0 %	3.5 %	1.4 %	46.0 %	3.3 %	1.2 %	
Long/short fixed income	10.0	5.5	3.3	7.0	5.5	3.3	-	- %	-	
Domestic equities	23.0	6.2	4.0	27.0	6.2	5.0	14.0	6.5 %	4.3	
International equities	16.0	6.2	4.0	16.0	6.2	5.0	14.0	7.2 %	5.0	
Global equities	22.0	6.8	4.6	23.0	6.8	5.6	10.0	7.1 %	4.9	
Private equity funds	8.0	9.9	7.6	5.0	9.9	7.6				
Real asset funds	4.0	5.6	3.4		-		16.0	5.2 %	3.0	
Total target allocation	100.0 %			100.0 %			100.0 %			

**Rate of return** – For the Atrium Health CMHA Plans fiscal year ended June 30, 2021, the annual money-weighted rate of return on pension plan investments, net of pension plan investment expenses, was 32.6% for Atrium Health Charlotte, 29.9% for Atrium Health Navicent, and 20.2% for Atrium Health Floyd. The money-weighted rate of return expresses investment performance, net of investment expenses, adjusted for the changing amounts actually invested.

**Atrium Health CMHA DB Plans' Discount rate** – The discount rate used to measure the total Atrium Health CMHA DB Plans' pension liability (asset) as of July 1, 2021 was 7.5% for Charlotte and Navicent and 5.7% for Floyd. The projection of cash flows used to determine the discount rate assumed that employer contributions will be made in amounts equal to the actuarially determined contributions. Based on those assumptions, the Atrium Health CMHA DB Plan's fiduciary net position was projected to be available to make all projected future benefit payments of current active and inactive teammates. Therefore, the long-term expected rate of return on pension assets was applied to all periods of projected benefit payments to determine the total pension liability (asset).

# December 31, 2021

Dollars in thousands.

### Changes in the Atrium Health CMHA DB Plans' Net Pension Liability (Asset)

Changes in the Atrium Health CMHA DB Plans' net pension liability (asset) for the year ended December 31, 2021, are as follows:

	Increase (decrease)										
	То	tal pension liability (a)		n fiduciary t position (b)	liab	et pension ility (asset) (a) – (b)					
Atrium Health Charlotte:											
Balances at December 31, 2020 (based on											
July 1, 2020 measurement date)	\$	1,414,024	\$	968,064	\$	445,960					
Changes for the fiscal year: Interest cost		100 567				100 5 67					
Differences between expected and		100,567				100,567					
actual experiences		4,818				4,818					
Changes in assumptions		6,103				6,103					
Contributions - employer				36,570		(36,570)					
Investment gains and other, net		_		295,675		(295,675)					
Benefit payments		(146,316)		(146,316)							
Administrative expense				(178)		178					
Net changes		(34,828)		185,751		(220,579)					
Ending balance:	\$	1,379,196	\$	1,153,815	\$	225,381					
Atrium Health Navicent: Balances at December 31, 2020 (based on July 1, 2020 measurement date) Changes for the fiscal year:	\$	279,236	\$	326,706	\$	(47,470)					
Interest cost		20,195		_		20,195					
Differences between expected and actual experiences Changes in assumptions Contributions - employer Investment gains and other, net Benefit payments Administrative expense		(2,042) (1,221) — (19,937) —				(2,042) (1,221) (7,108) (93,602)  2,202					
Net changes		(3,005)		78,571		(81,576)					
Ending balance:	\$	276,231	\$	405,277	\$	(129,046)					

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December 31, 2021

Dollars in thousands.

		Increas	se (decrease	:)		
	al pension liability (a)	Plar	n fiduciary t position (b)	Net pension liability (asset) (a) – (b)		
Atrium Health Floyd:						
Balances at December 31, 2020 (based on July 1, 2020 measurement date) Changes for the fiscal year:	\$ 80,957	\$	84,518	\$	(3,561)	
Interest cost	2,221				2,221	
Contributions - employer			532		(532)	
Investment gains and other, net			4,446		(4,446)	
Benefit payments	(2,518)		(2,518)			
Administrative expense	 		(25)		25	
Net changes	 (297)		2,435	<u></u>	(2,732)	
Ending balances	80,660		86,953		(6,293)	
Total Balances at December 31, 2021 (based on July 1, 2021 measurement date)	\$ 1,736,087	\$	1,646,045	\$	90,042	

Sensitivity of the Atrium Health CMHA DB Plans' net pension liability (asset) to changes in the discount rate – The following table presents the net Atrium Health CMHA DB Plans pension liability (asset) as of the July 1, 2021 measurement date calculated using the discount rate and alternatively, as required by GASB 68, what the net pension liability (asset) would be under different scenarios assuming it were calculated using a discount rate that is 1% lower or 1% higher:

	1% Decrease 6.50%			rrent rate 7.50%	1% Increase 8.50%		
Atrium Health Charlotte net pension liability at July 1, 2021	\$	311,280	\$	225,381	\$	149,688	
Atrium Health Navicent net pension asset at July 1, 2021	\$ (100,851)		\$	(129,046)	\$	(153,009)	
		1% Decrease 4.65%		Current rate 5.65%		6.65%	
Atrium Health Floyd net pension liability (asset) at July 1, 2021	\$	3,186	\$	(6,293)	\$	(14,178)	

**Atrium Health CMHA DB Plans' Investments** – Policies pertaining to the allocation of investments within the Atrium Health CMHA DB Plans are established and may be amended by each region's respective Board. It is the policy to invest pension assets in a wide range of permitted securities that maintain a balance between current income needs and the growth of principal for the future.

Atrium Health Charlotte, Navicent, and Floyd, as plan sponsors, have fiduciary responsibility for their respective DB Plan assets on behalf of the plan participants and beneficiaries.

The Plan categorizes its fair value measurements within the fair value hierarchy established by GAAP. The methods for determining fair value are consistent with Atrium Health CMHA's valuation techniques and presentation as detailed in note 5.

Notes to Combined Financial Statements

### December 31, 2021

Dollars in thousands.

Atrium Health CMHA DB Plans' assets were invested as follows as of the July 1, 2021 measurement date:

	Atrium	Health Charlotte	DB Plan	Atrium	n Health Navicent	DB Plan	Atrium Health Floyd DB Plan			
	Defined benefit plan assets	Quoted prices in active markets for identical assets (Level 1)	Significant other observable inputs (Level 2)	Defined benefit plan assets	Quoted prices in active markets for identical assets (Level 1)	Significant other observable inputs (Level 2)	Defined benefit plan assets	Quoted prices in active markets for identical assets (Level 1)	Significant other observable inputs (Level 2)	
Short term investments Fixed income:	\$ 32,392	\$ 32,392	\$ -	\$ 4,762	\$ 4,762	\$ -	\$ 1,381	\$ -	\$ 1,381	
U.S. government treasuries and agencies	25,498	-	25,498	-	_			-	-	
Corporate bonds	10,109	_	10,109	-	-	-	-	-	-	
Fixed income - other	55,829	55,829	_	72,272	72,272		42,507	-	42,507	
Asset-backed securities	9,514		9,514							
Total fixed income	100,950	55,829	45,121	72,272	72,272		42,507		42,507	
Equity:										
Domestic equities	269,826	269,826	-	140,151	140,151	-	14,408	-	14,408	
International equities	100,125	100,125	-	64,455	64,455		10,217	-	10,217	
Global equities	177,545	177,545		64,093	64,093		8,261		8,261	
Total equity	547,496	547,496		268,699	268,699		32,886		32,886	
Global asset allocation funds	_		-	-	-	-			_	
Real asset funds	20,779	20,779	_	40,067	40,067		10,179		10,179	
Total investments by fair value level	701,617	\$ 656,496	\$ 45,121	385,800	\$ 385,800	<u>\$ -</u>	86,953	<u>\$</u>	\$ 86,953	
Investments measured at NAV:										
Fixed income - other	50,396						-			
Global asset allocation funds	91,388			-						
Long/short fixed income	96,177									
Multi-strategy hedge funds				245			-			
Global Equity	84,979									
International Equity	43,744			-			-			
Private equity funds	67,344			15,752						
Total investments measured at NAV	434,028			15,997			_			
Total investments measured at fair value	\$ 1,135,645			\$ 401,797			\$ 86,953			

The table below discloses the unfunded commitments, redemption frequency and redemption notice period for investments measured at net asset value as of the July 1, 2021 measurement date:

	Atrium Health Charlotte DB Plan							Atrium Health Navicent DB Plan						
	Unfunded commitments as of July 1 Redemption 2021 2021 frequency		Redemption notice period	2021		•		Redemption frequency	Redemption notice period					
Fixed income - other		50,396	Ś		Monthly	15 days	5		<u> </u>		Monthly	15 days		
Global asset allocation funds	Ŷ	91,388	Ŷ	-	Daily	2 days	¥	-	7	-	Daily	2 days		
Long/short fixed income		96,177			Quarterly	45-90 days					Quarterly	45-90 days		
Multi-strategy hedge funds		-			N/A	N/A		245			N/A	N/A		
Global Equity		84,979		-	Monthly	14 days				-	Monthly	14 days		
International Equity		43,744		-	N/A	N/A		_		-	N/A	N/A		
Private equity funds		67,344		15,055	N/A	N/A		15,752		9,781	N/A	N/A		
Total	\$	434,028	\$	15,055			\$	15,997	\$	9,781				

The Plans' presentation of asset segments is consistent with Atrium Health CMHA's presentation as detailed in note 4.

December 31, 2021

Dollars in thousands.

**Pension expense and deferred outflows of resources and deferred inflows of resources related to the Atrium Health CMHA DB Plans** – For the year ended December 31, 2021, Atrium Health CMHA recognized pension benefit of \$13,999 for the Atrium Health CMHA DB Plans. At December 31, 2021, Atrium Health CMHA Plans reported deferred outflows and inflows of resources as follows based on July 1, 2021 measurement date:

	Deferred outflows of resources						Deferred inflows of resources						
	(	ium Health Charlotte DB Plan	arlotte Navicent Floyd			Atrium Health Charlotte DB Plan		ium Health Navicent DB Plan		um Health Floyd DB Plan			
Difference between expected and actual experience related to													
demographic factors	\$	28,040	\$	907	\$		\$	(12,972)	\$	(1,228)	\$	_	
Assumption changes Difference between expected and		25,006		-		_		(2,568)		(1,309)		-	
actual investment earnings Contribution made in fiscal year 2021		52,814		14,865				(184,361)		(64,348)		(1,694)	
after measurement date						582							
Total	\$	105,860	\$	15,772	\$	582	\$	(199,901)	\$	(66,885)	\$	(1,694)	

Amounts reported above as deferred outflows of resources and deferred inflows of resources related to the Atrium Health CMHA DB Plans at December 31, 2021 will be recognized in pension expense for the year ended December 31, as follows:

		Amount						
	Atrium Health Charlotte DB Plan			um Health Iavicent DB Plan	Atrium Health Floyd DB Plan			
2022	\$	16,403	\$	(14,275)	\$	(424)		
2023		14,636		(13,847)		(424)		
2024		21,258		(9,018)		(423)		
2025		41,873		(13,973)		(423)		
2026		(129)						
Thereafter			****					
	\$	94,041	\$	(51,113)	\$	(1,694)		

# **Other Benefit Plans**

Atrium Health Navicent also sponsors an unfunded postretirement health and dental plan which has a liability of \$22,870 as December 31, 2021 (based on July 1, 2021 measurement date).

### Atrium Health CMHA GASB 67 Accounting:

### **Fiduciary Pension Trust Funds**

The Atrium Health CMHA DB Plans are considered fiduciary pension trust funds. The following fiduciary fund information is provided as of December 31, 2021, the fiscal year end for the three plans, in addition to information previously provided for the three plans as of July 1, 2021 regarding

#### December 31, 2021

plan administration, membership, benefit terms, contributions, investment policy and actuarial assumptions. This information is presented as required by GASB Statement No. 67, *Financial Reporting for Pension Plans*, as no separate financial statements for these plans are issued.

# Atrium Health CMHA DB Plans' net pension liability as of plan fiscal year end

The Atrium Health CMHA plans' fiscal year end is December 31. The components of the net pension liability (asset) of the Atrium Health CMHA DB Plans on December 31, 2021 were as follows:

	Atrium Health	Atrium Health	Atrium Health		
	Charlotte	Navicent	Floyd		
	DB Plan	DB Plan	DB Plan		
Total pension liability	\$    1,351,075	\$     233,397	\$ 80,302		
Plan fiduciary net position	1,114,803	342,815	88,007		
Atrium Health net pension liability (asset)	\$ 236,272	\$ (109,418)	\$ (7,705)		
Plan fiduciary net position as a percentage of total pension liability	83%	147%	110%		

Sensitivity of the Atrium Health CMHA DB Plans' net pension liability to changes in the discount rate – The following table presents the Atrium Health CMHA DB Plans' net pension liability (asset) as of December 31, 2021 calculated using the discount rate and alternatively, what the net pension liability (asset) would be under different scenarios assuming it were calculated using a discount rate that is 1% lower or 1% higher:

	1% Decrease 6.50%			rrent rate 7.50%	1% Increase 8.50%		
Atrium Health Charlotte net pension liability at December 31, 2021 Atrium Health Navicent net pension asset	\$	318,431	\$	236,272	\$	163,942	
at December 31, 2021	\$	(84,870)	\$	(109,418)	\$	(130,234)	
	1% Decrease 4.65%		Cu	Current rate 5.65%		6.65%	
Atrium Health Floyd net pension liability (asset) at December 31, 2021	\$	1,604	\$	(7,705)	\$	(15,463)	

### Atrium Health CMHA DB Plans' Investments

The Plans categorize its fair value measurements within the fair value hierarchy established by GAAP. The methods for determining fair value are consistent with Atrium Health CMHA's valuation techniques and presentation as detailed in note 5.

Notes to Combined Financial Statements

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	Atrium H	ealth Charlotte	DB Plan	Atrium	Health Navicent	DB Plan	Atrium Health Floyd DB Plan				
	Defined benefit plan assets	Quoted prices in active markets for identical assets (Level 1)	Significant other observable inputs (Level 2)	Defined benefit plan assets	Quoted prices in active markets for identical assets (Level 1)	Significant other observable inputs (Level 2)	Defined benefit plan assets	Quoted prices in active markets for identical assets (Level 1)	Significant other observable inputs (Level 2)		
Short term investments Fixed income:	\$ 39,105	\$ 39,105	\$ -	\$ 5,095	\$ 5,095	\$	\$ 1,516	\$ -	\$ 1,516		
U.S. government treasuries and agencies	18,313	-	18,313	-		-	_	_			
Corporate bonds	17,047	-	17,047	_	-			-			
Fixed income – other	75,599	75,599	-	62,587	62,587	~	43,287	-	43,287		
Asset-backed Securities	13,267	_	13,267		_						
Total fixed income	124,226	75,599	48,627	62,587	62,587		43,287	_	43,287		
Equity:											
Domestic equities	275,713	275,713	-	122,732	122,732		14,802		14,802		
International equities	96,993	96,993	-	38,445	38,445	-	9,407	-	9,407		
Global equities	153,780	153,780		66,241	66,241		8,195		8,195		
Total equity	526,486	526,486		227,418	227,418		32,404		32,404		
Global asset allocation funds	_		-	-	-	-	-		-		
Real asset funds	43,010	43,010		31,513	31,513	-	10,800		10,800		
Total investments by fair value											
level	732,827	\$ 684,200	\$ 48,627	326,613	\$ 326,613	\$	88,007	\$ -	\$ 88,007		
Investments measured at NAV:		<del></del>									
Fixed income - other	39,727										
Global asset allocation funds	58,371										
Long/short fixed income	92,871										
Multi-strategy hedge funds	-			242							
Global Equity	80,527						-				
International Equity	43,253			-			-				
Private equity funds	67,227			15,960							
Total investments measured at NAV	381,976			16,202							
Total investments measured	n			i							
at fair value	\$ 1,114,803			\$ 342,815			\$ 88,007				

The table below discloses the unfunded commitments, redemption frequency, and redemption notice period for investments measure at net asset value as of December 31, 2021:

	 Atrium Health Charlotte DB Plan						Atrium Health Navicent DB Plan						
	2021	com as (	nfunded mitments of Dec 31 2021	Redemption frequency	Redemption notice period		2021	com	nfunded mitments of Dec 31 2021	Redemption frequency	Redemption notice period		
Fixed income - other	\$ 39,727	\$	-	Monthly	15 days	\$		\$	-	Monthly	15 days		
Global asset allocation funds	58,371		-	Daily	2 days					Daily	2 days		
Long/short fixed income	92,871		-	Quarterly	45–90 days				-	Quarterly	45–90 days		
Multi-strategy hedge funds	-		-	N/A	N/A		242		-	N/A	N/A		
Global Equity	80,527		-	Monthly	14 days		-		-	Monthly	14 days		
International Equity	43,253		-	N/A	N/A				-	N/A	N/A		
Private equity funds	 67,227		14,937	N/A	N/A		15,960		9,676	N/A	N/A		
Total	\$ 381,976	\$	14,937			\$	16,202	\$	9,676				

### 12. Contingencies and Other Commitments

#### a. Grant Awards

Expenditures and indirect costs related to governmental grants and contracts are subject to adjustment based upon review by the granting agencies. The amounts, if any, of expenditures, which may be disallowed by the granting agencies cannot be determined at this time, although management expects they will not have a material effect on the Enterprise's combined financial position.

### b. Professional Liability Insurance

The Enterprise is subject to legal proceedings and claims that arise in the course of providing healthcare services.

Atrium Health Charlotte has instituted a limited self-insurance program for professional liability and general liability claims. Self-insurance is limited to \$10 million per occurrence, with no aggregate limit for the year end December 31, 2021. General liability and professional liability are also covered by umbrella liability insurance policies. In management's opinion, adequate provision has been made for amounts expected to be paid under the policy's deductible limits for asserted and unasserted claims not covered by the policy and any other uninsured liability.

Atrium Health Navicent is currently insured for commercial general liability on an occurrence basis and professional liability on a claims-made basis by Centra Professional Indemnity (SPC), Ltd. or CPI, a wholly owned subsidiary of Atrium Health Navicent, and excess coverage by commercial insurance carriers through CPI. The excess coverage limits are \$40 million for 2021. The coverage for professional liability is limited to claims incurred and reported during its term. Actuarially determined funding is provided for losses.

Atrium Health Floyd has professional liability self-insurance retention limits for Floyd Medical Center of \$ 1 million per occurrence and \$4 million in aggregate. For Polk Medical Center Inc. and Floyd Cherokee Medical Center, wholly owned subsidiaries of Atrium Heath Floyd, claims are covered by a claims-made general and professional liability insurance policy with a specified deductible of \$50,000 per incident, \$1 million per occurrence and \$3 million in aggregate. In both plans, malpractice claims more than the self-insurance retention limits are insured with commercial insurance carriers on a claims-made basis. The umbrella policy covers malpractice claims up to \$15 million in aggregate.

Atrium Health WFB maintains professional liability coverage, which included a \$6 million per occurrence and a \$30 million annual aggregate self-insurance limit for the year ended December 31, 2021. Atrium Health WFB estimates its professional liability on an actuarial basis.

### c. Litigation

The Enterprise is involved in various legal actions occurring in the normal course of activities. While the final outcomes cannot be determined at this time, management is of the opinion that

Notes to Combined Financial Statements

### December 31, 2021

the resolution of these legal actions will not have a material effect on the financial position of Atrium Health CMHA, Atrium Health WFB, or the Enterprise.

### d. Future Obligations

Atrium Health CMHA has entered into contracts for various construction and capital projects, for which remaining commitments totaled approximately \$321,569 at December 31, 2021.

Atrium Health WFB's estimated cost to complete construction in progress at December 31, 2021 is approximately \$50,915.

Effective January 1, 2012, under the terms of a Lease Agreement between Atrium Health CMHA and Union County, Atrium Health CMHA leases hospital real estate from, and makes annual lease payments to, Union County. The initial term of the Lease Agreement remains in effect until December 31, 2061, unless earlier terminated, extended or renewed in accordance with the provisions of the Lease Agreement. Upon the expiration of the initial term, unless certain events of default exist, Atrium Health CMHA has the option to extend and renew the Lease Agreement for an initial renewal term of 25 years. During the term of the Lease Agreement, Union County has the right to require Atrium Health CMHA to purchase the hospital real estate at a stated price determined in accordance with the Lease Agreement. If Union County elects to require Atrium Health CMHA to purchase the hospital real estate, Atrium Health CMHA will have no further obligations under the Lease Agreement. As of December 31, 2021, the purchase price as stated in the Lease Agreement was \$127,792. The present value of Atrium Health CMHA's obligation for the annual lease payments, discounted using an effective interest rate of 4.34%, was \$120,149 as of December 31, 2021, and is recorded on the balance sheet as a long-term liability. The liability and related interest are payable in annual installments of approximately \$6,000 per year through 2061.

Additionally, as part of the Lease Agreement between Atrium Health CMHA and Union County, Atrium Health CMHA has committed to reinvest in healthcare related facilities and operations in Union County. As measured in 15-year increments commencing January 1, 2012, Atrium Health CMHA has committed to spending in Union County no less than 75% of the capital spending ratio of Atrium Health CMHA as a whole (defined as capital investments divided by net operating revenues) but limited to 75% of the operating income of the Union Healthcare Enterprise as defined in the Lease Agreement. Management believes Atrium Health CMHA has reinvested in excess of the commitment levels for the first eight years of the 15-year period.

In connection with an Agreement and Member Substitution between Atrium Health CMHA and Atrium Health Navicent, Atrium Health CMHA has committed to make capital, strategic and other expenditures in its Central and Southern Georgia market totaling at least \$1 billion over a period of 10 years beginning in 2019.

In connection with an Agreement and Member Substitution between Atrium Health CMHA and Atrium Health Floyd, Atrium Health CMHA has committed to make capital, strategic and other expenditures in its market totaling at least \$650 million over a period of 11 years beginning in 2021.

December 31, 2021

Dollars in thousands.

In connection with the Health System Integration Agreement and related agreements between Atrium Health CMHA and Atrium Health WFB (see Note 1), the Atrium Health Enterprise, which includes both Atrium Health WFB and Atrium Health Charlotte, has committed to approximately \$3.4 billion in planned investments into the Winston-Salem, North Carolina area over 10 years beginning in October 2020. The Enterprise has agreed to invest approximately \$2.8 billion to improve facilities and fund critical investments across the communities served by Atrium Health WFB. With Atrium Health WFB and the Wake Forest University School of Medicine forming the academic core of the Enterprise, the Enterprise also has agreed to invest nearly \$600 million to advance the academic mission of Atrium Health WFB and further elevate its national reputation, including a \$150,000 academic endowment funded in March 2021 to fund additional education and research growth and a \$70,000 Academic Enrichment Fund (\$10,000 annually for seven years beginning in 2021) to accelerate academic initiatives. Atrium Health Charlotte and the Enterprise have committed to establish the academic endowment funds. See Note 17 for more information regarding the funding of these commitments.

### e. HIPAA Compliance

Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the federal government has authority to complete fraud and abuse investigations. HIPAA has established substantial fines and penalties for offenders. The Enterprise maintains policies and procedures, and requires regular training sessions for employees in order to ensure and monitor compliance with HIPAA, as well as other applicable local, state and federal statutes and regulations.

# 13. Net Assets

The following is a summary of net assets of Atrium Health WFB and the Enterprise at December 31, 2021, respectively:

	Atrium Health WFB								
	 Without donor restrictions	_	With donor restrictions		Total				
Operations	\$ 1,863,541	\$		\$	1,863,541				
Endowment net assets	539,056		287,052		826,108				
Gifts and pledges	—		105,507		105,507				
Student loan funds	_		5,182		5,182				
Interests in perpetual trusts held by others	_		15,282		15,282				
Annuity and other split-interest agreements	 		1,317		1,317				
Total net assets	\$ 2,402,597	\$	414,340	\$	2,816,937				

Notes to Combined Financial Statements

December 31, 2021

Dollars in thousands.

	Atrium Health Enterprise								
		Without donor restrictions		With donor restrictions		Total			
Operations	\$	10,296,072	\$	2,431	\$	10,298,503			
Endowment net assets		539,056		349,989		889,045			
Gifts and pledges				558,474		558,474			
Student loan funds		_		5,182		5,182			
Interests in perpetual trusts held by others				15,282		15,282			
Annuity and other split-interest agreements				1,317		1,317			
Total net assets	\$	10,835,128	\$	932,675	\$	11,767,803			

WFBUMC's Board of Directors has designated \$539,056 from Atrium Health WFB net assets without donor restrictions at December 31, 2021 for the following purposes as of December 31:

	Atrium Health WFB				
Academic instruction and research	\$	224,662			
Healthcare services		12,609			
General administration		301,785			
Total board-designated endowment net assets	\$	539,056			

Net assets with donor restrictions are restricted for the following purposes at Atrium Health WFB and the Enterprise as of December 31:

	۲ ۱	Atrium Health Enterprise		
Academic instruction and research	\$	255,055	\$ 353,623	
Healthcare services		19,749	433,674	
General administration		139,536	 145,378	
Total net assets with donor restrictions	\$	414,340	\$ 932,675	

### 14. Patient Service Revenue and Patient Receivables

The sources of the Enterprise's gross patient revenue by type of payer, expressed as a percentage of total gross patient revenue, consisted of the following for the years ended December 31, 2021:

	Atrium Health CMHA	Atrium Health WFB	Atrium Health Enterprise
Managed care and commercial insurance	32.0 %	30.2 %	31.5 %
Medicare	41.7	44.4	42.5
Medicaid	16.5	15.5	16.2
Direct from patient/other	9.8	9.9	9.8
	100.0 %	100.0 %	100.0 %

Patient service revenue by major payer source, net of price concessions, is as follows for the year ended December 31, 2021:

	Atrium Health CMHA		Atrium Health WFB		Atrium Health Enterprise	
Managed care and commercial insurance Medicare Medicaid Direct from patient/other	\$	4,409,454 2,452,238 1,163,619 95,475	\$	1,343,460 1,156,276 549,055 179,270	\$	5,562,528 3,516,869 1,668,396 344,688
Total	\$	8,120,786	\$	3,228,061	\$	11,092,481

### **Concentration of Credit Risk**

The Enterprise grants credit without collateral to its patients, most of whom are insured under third-party payer agreements. The mix of gross receivables from patients and third-party payers was as follows as of December 31, 2021:

	Atrium Health CMHA	Atrium Health WFB	Atrium Health Enterprise
Medicare	29.9 %	28.8 %	29.7 %
Medicaid	13.6	15.4	13.9
Managed care and commercial insurance	32.9	28.9	32.1
Direct from patient/other	23.6	26.9	24.3
	100.0 %	100.0 %	100.0 %

# **15.** Financial Assistance and Community Benefit

The Enterprise, under its financial assistance and hardship programs, provides care without charge or at discounted rates to certain uninsured patients as well as any patient, regardless of insurance

coverage, who experiences financial hardship. Key elements used to determine eligibility for financial assistance include a patient's demonstrated inability to pay based on family size and household income relative to federal income poverty guidelines. The cost of care associated with the charges foregone is estimated using applicable cost to charge ratios.

In addition to providing financial assistance to uninsured patients and in furtherance of its mission, the Enterprise provides a broad range of benefits and services, including medical education and research opportunities, to the community spanning the geographic region within which Atrium Health CMHA operates. These community benefits can be measured and categorized as follows:

Unpaid Cost of Medicare and Medicaid Services – Represents the net unreimbursed cost, estimated using the applicable cost to charge ratios, of services provided to patients who qualify for federal and/or state government healthcare benefits.

Community Benefit Programs – Includes the unreimbursed cost of various medical education programs, and costs of various research programs, nonbilled medical services, in kind donations and other services that meet a community need, but do not pay for themselves and would not be provided if based solely on financial considerations.

Cost of care extended to uninsured and underinsured patients who do not qualify for financial assistance, estimated using applicable cost to charge ratios.

The total estimated cost of financial assistance and the aforementioned programs and services that benefit the community for a complete twelve-month period ending in 2021 is estimated as follows:

	 Atrium Health CMHA	 Atrium Health WFB	E	Atrium Health Enterprise
Cost of financial assistance to uninsured patients	\$ 292,936	\$ 46,582	\$	339,518
Unpaid cost of Medicare and Medicaid services	1,044,949	393,127		1,438,076
Community benefit programs	142,749	160,275		303,024
Cost of care extended to uninsured and underinsured patients who do no qualify for financial assistance	 278,223	 96,717		374,940
	\$ 1,758,857	\$ 696,701	\$	2,455,558
Percentage of operating expenses, including interest expense	20.1%	17.1%		19.5%

# **16.** Functional Expenses

Expenses are presented by functional classification in accordance with the overall service mission of the Enterprise. The Enterprise's primary program services are academic instruction and research and health care services. Expenses directly attributable to a specific functional area are reported as expenses of those functional areas. Depreciation of plant assets, interest expense, and plant operation and maintenance expense are allocated to program and supporting activities based on square footage per periodic inventories of facilities. Total amounts allocated in fiscal 2021 were

\$45,742 and \$12,610 for Atrium Health WFB and the Enterprise, respectively. Expenses are reported in the combined statement of revenues, expenses and changes in net assets in natural categories.

Expenses by functional classification for the year ended December 31, 2021 consist of the following for Atrium Health WFB and the Enterprise, respectively:

				Atrium H	ealth W	FB		
		Prog	ram		S	upporting		
	ir	Academic Instruction and research		Healthcare services	_ <u>a</u>	General dministration	_	Total
Salaries and wages Employee benefits Purchased services Clinical and laboratory supplies Other operating expenses Depreciation Financing costs	\$	201,556 38,296 21,123 30,185 47,567 11,509 2,795	\$	1,581,471 334,162 99,553 947,378 246,581 122,657 17,369	\$	214,147 47,439 28,796  55,388 9,737 9,859	\$	1,997,174 419,897 149,472 977,563 349,536 143,903 30,023
Total operating expenses	\$	353,031	\$	3,349,171	\$	365,366	\$	4,067,568

			Atrium Healt	h Enter	prise	
	 Prog	ram		9	Supporting	 
	 Academic instruction and research		Healthcare services	a	General dministration	 Total
Salaries and wages	\$ 298,706	\$	5,463,627	\$	307,466	\$ 6,069,799
Employee benefits	59,587		1,188,059		92,641	1,340,287
Purchased services	32,117		657,034		78,026	767,177
Clinical and laboratory supplies	34,590		2,649,725		23,850	2,708,165
Other operating expenses	69,261		893,874		113,993	1,077,128
Depreciation	17,832		385,998		128,740	532,570
Financing costs	 4,282		73,703		36,446	 114,431
Total operating expenses	\$ 516,375	\$	11,312,020	\$	781,162	\$ 12,609,557

# 17. Related-Party Transactions

As part of the capital Enterprise agreements, in fiscal year 2021, Atrium Health CMHA contributed \$150,000 to WFUHS to create an unrestricted academic endowment to be used for new, ongoing or enhanced academic or research initiatives of the Atrium Health WFB entities. WFUHS received the unrestricted contribution in March 2021, and its Board established a \$150,000 quasi-endowment fund.

Additionally, as part of the capital Enterprise agreements, Atrium Health CMHA promised to provide an Academic Enrichment Fund consisting of \$10,000 per year for seven years to Atrium Health WFB. Atrium Health CMHA contributed the first \$10,000 to Atrium Health WFB during fiscal year 2021.

### December 31, 2021

Atrium Health WFB's contribution receivable from Atrium Health CMHA amounted to \$60,000 at December 31, 2021; Atrium Health WFB recorded \$10,000 of the contribution receivable in current assets and \$50,000 of the contribution receivable in other long-term assets in the accompanying combined balance sheet.

NCBH and Atrium Health CMHA each own a 50% equity share of MedCost, the third-party administrator for Atrium Health CMHA and Atrium Health WFB's self-insured employee health and dental insurance. During the year ended December 31, 2021, Atrium Health CMHA and Atrium Health WFB paid MedCost approximately \$8,828 and \$6,736, for these services, respectively.

# **18. Business Combinations**

### Floyd Healthcare Management, Inc.

Floyd Healthcare Management, Inc. (Atrium Health Floyd) is a nonprofit health system based in Rome, Georgia, which provides health care to the residents of Floyd County, Georgia and surrounding counties. Atrium Health CMHA entered into a Member Substitution Agreement with Atrium Health Floyd in July 2021. Under the agreement, AH Georgia, Inc., a controlled affiliate of which Atrium Health CMHA is the sole member, became the sole corporate member of Atrium Health Floyd. Although Atrium Health Floyd retains and appoints a majority of its Board of Directors, Atrium Health CMHA holds customary approval rights, including approving budgets and any borrowings or discharging of debt. In addition, Atrium Health CMHA agrees to ensure, but does not formally guarantee, that Atrium Health Floyd does not default under any indebtedness agreements, notes or bonds, or other debt-related liabilities. As a result, Atrium Health Floyd is a component unit of Atrium Health CMHA and, because a controlled subsidiary of Atrium Health CMHA is its sole member, financial information for Atrium Health Floyd is blended with Atrium Health CMHA as of and for the year ended December 31, 2021. Because the impact of this transaction is considered a change in reporting entity, Atrium Health CMHA's net position as of December 31, 2020 has been restated to incorporate Atrium Health Floyd. The inclusion of Atrium Health Floyd increased Atrium Health CMHA's net position by \$292,229 as of January 1, 2021.

As presented in the Enterprise financial statements, in accordance with FASB guidance, Atrium Health Floyd's July 1, 2021 balance sheet was adjusted to fair value, and the acquisition date fair value was allocated to the assets and liabilities. The 2021 activity attributable to Atrium Health Floyd within the Enterprise statement of revenues, expenses and changes in net assets since the date of acquisition was \$281,516 and \$15,018 for operating revenue and support and operating excess of revenues and expenses, respectively.

Notes to Combined Financial Statements

Decem	her	31	2021
Decen	incer	51,	2021

Dollars in thousands.

The following table summarizes the estimated fair values of the assets acquired and the liabilities assumed by the Enterprise as of the date of the acquisition:

Assets: Current assets Investments Property and equipment Other assets	\$	229,667 85,734 283,155 49,273
Total assets	\$	647,829
Liabilities: Current liabilities Notes payable Other liabilities	\$	85,406 14,829 85,002
Total liabilities	_\$	185,237
Net assets acquired: Without donor restrictions With donor restrictions	\$	462,592
Total net assets	\$	647,829

Atrium Health CMHA paid \$212,847 of cash on the transaction date and subsequently recognized Atrium Health Floyd's net assets with a fair value of \$462,592, resulting in a non-operating gain of \$249,745 which is recorded in contribution from business combinations, net in the accompanying combined statement of revenues, expenses and changes in net assets for the Enterprise.

The following table summarizes the Enterprise's unaudited pro forma results as if the acquisition date occurred at the beginning of fiscal year 2021:

	1	rium Health Enterprise proforma combined
Operating revenue and support Operating excess of revenues and expenses	\$	13,209,382 354,853
Changes in net assets: With donor restrictions Without donor restrictions		135,912 1,977,529
Total change in net assets	\$	2,113,441

December 31, 2021

Dollars in thousands.

### **19. Subsequent Events**

In May 2022, the Enterprise and Advocate Aurora Health, Inc., a Delaware nonprofit corporation (Advocate Aurora), signed an agreement to come together to create a leading health and wellness delivery system to best meet patients' needs by redefining how, when and where care is delivered (the Proposed Combination). Advocate Aurora, which serves nearly 3 million patients annually in Illinois and Wisconsin, is one of the 12 largest not-for-profit, integrated health systems in the United States and a national leader in clinical innovation, health outcomes, consumer experience and value-based care.

To facilitate the Proposed Combination, the Enterprise and Advocate Aurora plan to create a joint operating company to be known as Advocate Health (Advocate Health). AHI and Advocate Aurora will be the sole corporate members of Advocate Health, which will manage and oversee the combined organization. Advocate Health will be governed by a board of directors comprising an equal number of members from the Enterprise and Advocate Aurora. As of the date of issuance, an operating agreement has not been signed.

At the closing of the transaction, the Enterprise and Advocate Aurora will continue to own their respective assets. No assets will be transferred as part of the Proposed Combination, and the Enterprise and its related entities and Advocate Aurora and its related entities will maintain their separate legal existence and licensure status of their respective facilities.

Schedule of Changes in Net Pension Liability and Related Ratios - Atrium Health Charlotte Defined Benefit Plan (unaudited)

December 31, 2021

December 31. 2021 2020 2019 2018 2017 2016 2015 Total pension liability: Ś Ś Ś Ś 46,519 \$ 53,214 \$ 55,197 Ś Service cost -----Interest cost 100,567 99,367 91,210 96,417 100,609 95,929 93,442 7,538 Plan amendments Differences between expected and actual experiences 4,818 15,058 25,325 (14,720)(23,718)7,092 (4,091) 6,103 21,607 5,138 (2,402)(5,217)20,252 Changes of assumptions Benefit payments (146, 316)(122, 465)(150,638) (146,796) (108, 339)(106, 420)(112, 417)9,854 Net change in total pension liability (34, 828)21,105 (28, 965)(67, 501)70,067 32,131 Total pension liability - beginning 1,414,024 1,392,952 1,291,461 1,358,962 1,349,108 1,279,041 1,246,910 1,414,057 1,262,496 1,291,461 1,358,962 1,349,108 1,279,041 Total pension liability - ending (a) 1,379,196 Plan fiduciary net position: 36,570 37,378 37,473 78,526 124,181 132,884 92,405 Contributions - employer 295,675 13,096 31,478 76,644 118,972 (36, 909)20,481 Investment gains and other, net (108, 339)Benefit payments (146, 316)(122, 465)(150, 638)(146, 796)(106, 420)(112, 417)(162) Administrative expense (178)(80)(312)(217) (364) (696) 134.597 (10, 809)(227) Net change in plan fiduciary net position 185,751 (72,071) (81, 849)8,062 968.064 1,040,135 991.368 983,306 848,709 859,518 859,745 Plan fiduciary net position - beginning 991,368 983,306 848,709 1,153,815 968,064 909,519 859,518 Plan fiduciary net position - ending (b) Net pension liability - ending (a) - (b) Ś 225,381 \$ 445,993 \$ 352,977 \$ 300,093 \$ 375,656 \$ 500,399 Ś 419,523 83.7 % 68.5 % 72.0 % 76.8 % 72.4 % 62.9 % 67.2 % Plan fiduciary net position as a percentage of the total pension liability \$ 1,665,998 \$ 1,688,456 \$ 1,642,381 \$ 1,804,814 \$ 1,796,876 \$ 1,959,073 \$ 1,995,117 Covered-employee payroll 13.5 % 26.4 % 21.5 % 16.6 % 20.9 % 25.5 % 21.0 % Net pension liability as a percentage of covered-employee payroll

Note to schedule:

Measurement date is July 1 of each fiscal year presented.

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

Effective June 30, 2020, the Cleveland and Stanly DB Plans were merged with the Atrium DB Plan which increased the beginning total pension liability by approximately \$130 million and the beginning plan fiduciary net position by approximately \$131 million.

Schedule of Pension Contributions - Atrium Health Charlotte Defined Benefit Plan (unaudited)

December 31, 2021

Dollars in thousands.

December 31	Actu dete December 31 cont		in ac de	ntributions relation to the ctuarially termined ntribution	defi	ribution ciency cess)	Covered- employee payroll	Contributions as a percentage of covered- employee payroll	
2021	\$	36,570	\$	36,570	\$		\$ 1,665,998	2.2 %	
2020		37,378		37,378			1,688,456	2.2	
2019		37,473		37,473			1,642,381	2.3	
2018		36,326		78,526		(42,200)	1,804,814	4.4	
2017		81,981		124,181		(42,200)	1,796,876	6.9	
2016		90,684		132,884		(42,200)	1,959,073	6.8	
2015		92,405		92,405			1,995,117	4.6	
Notes to schedule:									
Valuation date		Actuarially determined contribution rates are calculated as of January 1, one year prior to the end of the fiscal year in which contributions are reported.							
Methods and assumptions used to d	etermine cor	tribution ra	ate for	2021:					
Actuarial cost method Asset valuation method Cash balance interest credits	5-ye	Entry age normal with 20-year as level percent of pay, closed 5-year smoothed market 5.00%							
Salary increases	Not	applicable a	after 1	2/31/2017 d	ue to be	enefit accr	ual freeze.		
Investment rate of return	7.50	%, net of pe	ension	plan investr	nent exp	bense, incl	uding inflation		
Retirement rates	Age	graded rate	es fron	n 55 to 70					
Mortality	PRI-2	2012 sex-di	sex-distinct mortality tables projected generationally with Scale						

PRI-2012 sex-distinct mortality tables projected generationally with Scale MP-2020. Prior to 1/1/2020, RP-2014 with generational projection using scale MP-2018.

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

Schedule of Pension Plan Investment Returns - Atrium Health Charlotte Defined Benefit Plan (unaudited)

December 31, 2021

Dollars in thousands.

	Atrium Health Defined Benefit Plan measurement date	Annual money- weighted rate of return net of investment expenses
July 1, 2021		32.6 %
July 1, 2020		1.6
July 1, 2019		3.8
July 1, 2018		8.0
July 1, 2017		15.0
July 1, 2016		(4.8)
July 1, 2015		2.4

Notes to schedule:

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

Schedule of Changes in Net Pension Liability and Related Ratios - Atrium Health Navicent Defined Benefit Plan (unaudited)

December 31, 2021	Dollars in thousands.

	 2021	Dec	ember 31, 2020	 2019
Total pension liability: Service cost Interest cost Differences between expected and actual experiences Changes of assumptions Benefit payments	\$  20,195 (2,042) (1,221) (19,937)	\$	 20,004 2,382 (1,507) (16,741)	\$  10,087   (7,941)
Net change in total pension liability	(3,005)		4,138	2,146
Total pension liability – beginning	 279,236		275,098	 272,952
Total pension liability – ending (a)	 276,231		279,236	 275,098
Plan fiduciary net position: Contributions – employer Investment gains and other, net Benefit payments Administrative expense	 7,108 93,602 (19,937) (2,202)		4,363 9 (16,741) (2,756)	 10,952 32,493 (7,941) (151)
Net change in plan fiduciary net position	78,571		(15,125)	35,353
Plan fiduciary net position – beginning	 326,706		341,831	 306,478
Plan fiduciary net position – ending (b)	 405,277		326,706	 341,831
Net pension asset – ending (a) – (b)	\$ (129,046)	\$	(47,470)	\$ (66,733)
Plan fiduciary net position as a percentage of the total pension liability	146.7 %		117.0 %	124.3 %
Covered-employee payroll	\$ 96,163	\$	118,953	\$ 138,664
Net pension asset as a percentage of covered-employee payroll	(134.2)%		(39.9)%	(48.1)%

Note to schedule:

Measurement date is July 1 of each fiscal year presented.

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

Schedule of Pension Contributions - Atrium Health Navicent Defined Benefit Plan (unaudited)

December 31, 2021

```
Dollars in thousands.
```

December 31	dete	uarially rmined ribution	Contributions in relation to the actuarially determined contribution		in relation to the actuarially Contribution Covered-				Contributions as a percentage of covered- employee payroll
2021	\$		\$	7,108	\$	(7,108)	\$	96,163	7.4 %
2020		4,135		4,363		(228)		118,953	3.7
2019		4,723		10,952		(6,229)		138,664	7.9

Notes to schedule:

Valuation date

Actuarially determined contribution rates are calculated as of January 1, one year prior to the end of the fiscal year in which contributions are reported.

Methods and assumptions used to determine contribution rate for 2021:

Actuarial cost method	Traditional unit credit
Asset valuation method	2-year smoothed market
Salary increases	Not applicable after 12/31/2013 due to benefit accrual freeze.
Minimum required contribution	ERISA plan's minimum contribution is determined under Section 430 of the IRC.
Retirement rates	Age-graded rates from 55 to 70
Mortality	PRI-2012 sex-distinct mortality tables projected generationally with Scale
	MP-2020. Prior to 1/1/2020, RP-2014 with generational projection using scale
	MP-2018.

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

Schedule of Pension Plan Investment Returns – Atrium Health Navicent Defined Benefit Plan (unaudited)

December 31, 2021

Dollars in thousands.

	Navicent Health Defined Benefit Plan measurement date	Annual money- weighted rate of return net of investment expenses
July 1, 2021		29.9 %
July 1, 2020		(0.5)
July 1, 2019		5.4
Notes to schedule:		

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

### Schedule of Changes in Net Pension Liability and Related Ratios - Atrium Health Floyd Defined Benefit Plan (unaudited)

December 31, 2021	Dollars in thousands.
,	

	Dec	ember 31,
		2021
Total pension liability: Service cost Interest cost Differences between expected and actual experiences Changes of assumptions Benefit payments	\$	 2,221   (2,518)
Net change in total pension liability		(297)
Total pension liability – beginning		80,957
Total pension liability – ending (a)		80,660
Plan fiduciary net position: Contributions – employer Investment gains and other, net Benefit payments Administrative expense		532 4,446 (2,518) (25)
Net change in plan fiduciary net position		2,435
Plan fiduciary net position – beginning		84,518
Plan fiduciary net position – ending (b)		86,953
Net pension asset – ending (a) – (b)	\$	(6,293)
Plan fiduciary net position as a percentage of the total pension liability		107.8 %
Covered-employee payroll	\$	32,839
Net pension asset as a percentage of covered-employee payroll		(19.2)%
Note to schedule:		

Measurement date is July 1 of each fiscal year presented.

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

Schedule of Pension Contributions - Atrium Health Floyd Defined Benefit Plan (unaudited)

December 31, 2021

Dollars in thousands.

December 31	deter	arially rmined ibution	in r to actu dete	ributions elation o the uarially ermined ribution	def	tribution iciency xcess)	er	overed- nployee payroll	Contributions as a percentage of covered- employee payroll
2021	\$		\$	532	\$	(532)	\$	32,839	1.6 %

Notes to schedule:

Valuation date

Actuarially determined contribution rates are calculated as of January 1, one year prior to the end of the fiscal year in which contributions are reported.

Methods and assumptions used to determine contribution rate for 2021:

Actuarial cost method	Traditional unit credit
Asset valuation method	2-year smoothed market
Salary increases	Not applicable after 3/31/2014 due to benefit accrual freeze.
,	ERISA plan's minimum contribution is determined under Section 430 of the IRC.
Minimum required contribution	
Retirement rates	Age-graded rates from 57 to 62+
Mortality	PRI-2012 sex-distinct mortality tables projected generationally with Scale
	MP-2020.

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

See accompanying independent auditors' report.

Schedule of Pension Plan Investment Returns - Atrium Health Floyd Defined Benefit Plan (unaudited)

December 31, 2021

Dollars in thousands.

	Annual money- weighted rate of return net of investment
Navicent Health Defined Benefit Plan measurement date	expenses
July 1, 2021	20.2 %
Notes to schedule:	

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

Schedule of Changes in Net Pension Liability and Related Ratios – Atrium Health Charlotte Defined Benefit Plan (unaudited)

December 31, 2021 Dollars in thousands.

	2021	December 31, 2020	2019
Total pension liability: Service cost Interest cost Changes of benefit terms Differences between expected and actual experiences Changes of assumptions	\$ — 98,735 — (146) 11,803	\$ — 99,191 7,811 14,140 28,432	\$ — 100,484 — — —
Benefit payments	(151,854)	(144,489)	(122,428)
Net change in total pension liability	(41,462)	5,085	(21,944)
Total pension liability – beginning	1,392,537	1,387,452	1,409,396
Total pension liability – ending (a)	1,351,075	1,392,537	1,387,452
Plan fiduciary net position: Contributions – employer Investment gains and other, net Benefit payments Administrative expense	36,570 157,404 (151,854) (188)	37,378 131,318 (144,489) (121)	38,561 173,814 (122,428) (121)
Net change in plan fiduciary net position	41,932	24,086	89,826
Plan fiduciary net position – beginning	1,072,871	1,048,785	958,959
Plan fiduciary net position – ending (b)	1,114,803	1,072,871	1,048,785
Net pension liability – ending (a) – (b)	\$ 236,272	\$ 319,666	\$ 338,667
Plan fiduciary net position as a percentage of the total pension liability	82.5 %	77.0 %	75.6 %
Covered-employee payroll	\$ 1,665,998	\$ 1,688,456	\$ 1,741,304
Net pension liability as a percentage of covered-employee payroll	14.2 %	18.9 %	19.5 %

Note to schedule:

Measurement date is December 31, 2021.

The December 31, 2021 information reflects the merger of the CCHS and SHS DB plans into the Atrium DB plan effective June 30, 2021. The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

Schedule of Pension Contributions - Atrium Health Charlotte Defined Benefit Plan (unaudited)

December 31, 2021

Dollars in thousands.

December 31	Actuarially determined contribution		ed determined deficiency			ficiency	Covered- employee payroll	Contributions as a percentage of covered- employee payroll
2021	\$	36,570	\$	36,570	\$		\$ 1,665,998	2.2 %
2020		37,378		37,378			1,688,456	2.2
2019		37,473		38,561		(1,088)	1,741,304	2.2

Notes to schedule:

Valuation date

Actuarially determined contribution rates are calculated as of January 1, one year prior to the end of the fiscal year in which contributions are reported.

Methods and assumptions used to determine contribution rate for 2021:

Actuarial cost method	Entry age normal with 20-year as level percent of pay, closed
Asset valuation method	5-year smoothed market
Cash balance interest credits	5.00%
Salary increases	Not applicable after 12/31/2017 due to benefit accrual freeze.
Investment rate of return	7.50%, net of pension plan investment expense, including inflation
Retirement rates	Age-graded rates from 55 to 70
Mortality	PRI-2012 sex-distinct mortality tables projected generationally with Scale MP-2020. Prior to 1/1/2020, RP-2014 with generational projection using scale MP-2018.

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

Schedule of Pension Plan Investment Returns – Atrium Health Charlotte Defined Benefit Plan (unaudited)

December 31, 2021

Dollars in thousands.

	Atrium Health Defined Benefit Plan measurement date	Annual money- weighted rate of return net of investment expenses
December 31, 2021		15.0 %
December 31, 2020		14.0
December 31, 2019		19.0
Notes to schedule:		

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

Schedule of Changes in Net Pension Liability and Related Ratios - Atrium Health Navicent Defined Benefit Plan (unaudited)

December 31, 2021 Dollars in thousands.

	 2021	December 31 2020		 2019	
Total pension liability:					
Service cost	\$ 	\$	 20,084	\$  19,866	
Interest cost Changes of benefit terms	19,987 23,969		20,084	19,000	
Differences between expected and actual experiences	(1,852)		854		
Changes of assumptions	321		(904)		
Benefit payments	 (86,284)		(19,426)	 (16,170)	
Net change in total pension liability	(43,859)		608	3,696	
Total pension liability – beginning	 277,256		276,648	 272,952	
Total pension liability – ending (a)	 233,397		277,256	 276,648	
Plan fiduciary net position: Contributions – employer Investment gains and other, net Benefit payments Administrative expense	 6,960 55,294 (86,284) (1,980)		4,363 36,807 (19,426) (2,507)	 11,100 51,045 (16,170) (2,865)	
Net change in plan fiduciary net position	(26,010)		19,237	43,110	
Plan fiduciary net position – beginning	 368,825		349,588	 306,478	
Plan fiduciary net position – ending (b)	 342,815		368,825	 349,588	
Net pension asset – ending (a) – (b)	\$ (109,418)	\$	(91,569)	\$ (72,940)	
Plan fiduciary net position as a percentage of the total pension liability	146.9 %		133.0 %	126.4 %	
Covered-employee payroll	\$ 96,163	\$	112,865	\$ 138,664	
Net pension asset as a percentage of covered-employee payroll	(113.8)%		(81.1)%	(52.6)%	

#### Note to schedule:

Measurement date is December 31, 2021.

The schedule is intended to show information for 10 years. Additional years will be presented as the information becomes available.

See accompanying independent auditors' report.

Schedule of Pension Contributions - Atrium Health Navicent Defined Benefit Plan (unaudited)

December 31, 2021

Dollars in thousands.

December 31	det	Actuarially determined		tributions relation to the tuarially termined ttribution	de	ntribution ficiency excess)	e	Covered- mployee payroll	Contributions as a percentage of covered- employee payroll
2021	\$	6,960	\$	6,960	\$		\$	96,163	7.2 %
2020		4,135		4,363		(228)		112,865	3.9
2019		4,723		11,100		(6,377)		138,664	8.0

Notes to schedule:

Valuation date

Actuarially determined contribution rates are calculated as of January 1, one year prior to the end of the fiscal year in which contributions are reported.

Methods and assumptions used to determine contribution rate for 2021:

Actuarial cost method	Traditional unit credit
Asset valuation method	2-year smoothed market
Salary increases	Not applicable after 12/31/2013 due to benefit accrual freeze.
Minimum required contribution	ERISA plan's minimum contribution is determined under Section 430 of the IRC.
Retirement rates	Age-graded rates from 55 to 70
Mortality	PRI-2012 sex-distinct mortality tables projected generationally with Scale MP-2020. Prior to 1/1/2020, RP-2014 with generational projection using scale
	MP-2018.

The schedule is intended to show information for 10 years. Additional years will be presented as the information becomes available.

Schedule of Pension Plan Investment Returns – Atrium Health Navicent Defined Benefit Plan (unaudited)

-

December 31, 2021

Dollars in thousands.

	Navicent Health Defined Benefit Plan measurement date	Annual money- weighted rate of return net of investment expenses
December 31, 2021		15.6 %
December 31, 2020		11.2
December 31, 2019		17.0
Notes to schedule:		

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

### Schedule of Changes in Net Pension Liability and Related Ratios - Atrium Health Floyd Defined Benefit Plan (unaudited)

December 31, 2021 Dollars in thousands.

	December 31, 2021
Total pension liability: Service cost Interest cost Differences between expected and actual experiences Changes of assumptions Benefit payments	\$ 4,432   (5,088)
Net change in total pension liability	(656)
Total pension liability – beginning	80,958
Total pension liability – ending (a)	80,302
Plan fiduciary net position: Contributions – employer Investment gains and other, net Benefit payments Administrative expense	1,114 8,345 (5,088) (882)
Net change in plan fiduciary net position	3,489
Plan fiduciary net position – beginning	84,518
Plan fiduciary net position – ending (b)	88,007
Net pension asset – ending (a) – (b)	\$ (7,705)
Plan fiduciary net position as a percentage of the total pension liability	109.6 %
Covered-employee payroll	\$ 32,839
Net pension asset as a percentage of covered-employee payroll	(23.5)%
Note to schedule: Measurement date is December 31, 2021. The schedule is intended to show information for 10 years. Additional years will be presen	ted as the information

The schedule is intended to show information for 10 years. Additional years will be presented as the information becomes available.

Schedule of Pension Contributions - Atrium Health Floyd Defined Benefit Plan (unaudited)

December 31, 2021 December 31	Actuarially determined contribution	Contributions in relation to the actuarially determined contribution	Contribution deficiency (excess)	Covered- employee payroll	Contributions as a percentage of covered- employee payroll
2021	\$ —	1,114	(1,114)	32,839	3.4 %
Notes to schedule:					
Valuation date			n rates are calcula cal year in which c		
Methods and assumptions used to determine	ine contribution ra	te for 2021:			
Actuarial cost method Asset valuation method Salary increases Minimum required contribution Retirement rates	ERISA plan's mir Age-graded rate	d market fter 3/31/2014 du imum contribution s from 57 to 62+	e to benefit accrua n is determined un	der Section 430	
Mortality The schedule is intended to show informat becomes available.	MP-2020.		les projected gene l be presented as t		cale

See accompanying independent auditors' report.

MEDICAL CENTER OF CENTRAL GEORGIA, INC. - 58-2149128

Schedule of Pension Plan Investment Returns - Atrium Health Floyd Defined Benefit Plan (unaudited)

December 31, 2021

Dollars in thousands.

	Annual money- weighted rate of return net of investment
Navicent Health Defined Benefit Plan measurement date	expenses
December 31, 2021	10.1 %
Notes to schedule:	

The schedules are intended to show information for 10 years. Additional years will be presented as the information becomes available.

#### The Charlotte-Mecklenburg Hospital Authority Combined Group

#### Combining Balance Sheet

December 31, 2021

	Atrium Health The Charlotte- Mecklenburg Hospital Authority	Atrium Health Foundation	Eliminations	Exclude AH Navicent	Exclude AH Floyd	Exclude Non-Obligated Group Affiliates	Exclude Consolidating Eliminations	Total Combined Group
Assets								
Current assets:								
Cash and cash equivalents	\$ 799,598	\$ 4,026	ş	\$ 61,028	\$ 255,713	\$ 18,229	\$	\$ 468,654
Short term investments	39,326	11,542	-		39,326			11,542
Patient receivables - net	1,291,751			230,691	89,388	1,076	-	970,596
Accounts, grants and notes receivable, net	141,561	33,540	(2,072)	13,172	8,723	22,436		128,698
Assets limited as to use - investments	47,321				4,121		-	43,200
Other current assets	264,949	422		30,158	24,424	169		210,620
Total current assets	2,584,506		(2,072)	335,049	421,695	41,910		1,833,310
Property and equipment - net	4,684,832	4,181		470,481	157,344	28,228		4,032,960
Investments and assets limited as to use	8,355,490	378,369		888,711	92,011	77,535	1994 A.	7,675,602
Other assets	264,451	61,188	(6,717)	71,781	4,359	5,936	(17,991)	254,837
Total assets	15,889,279	493,268	(8,789)	1,766,022	675,409	153,609	(17,991)	13,796,709
Deferred outflows of resources	396,387			28,215	582			367,590
Total assets and deferred outflows of								
resources	\$ 16,285,666	\$ 493,268	\$ (8,789)	\$ 1,794,237	\$ 675,991	\$ 153,609	\$ (17,991)	\$ 14,164,299
Liabilities Current liabilities:					<b>A</b>	4	~	\$ 377.260
Accounts payable	\$ 411,803	\$ 13	\$ (4,300)	\$ 11,939	\$ 16,740	\$ 1,577 894	\$	
Salaries and benefits payable	786,877			57,362	30,080			698,541 495,519
Other liabilities and accruals	666,881	2,148	(2,072)	114,832	53,102	3,504		
Estimated third party payer settlements	321,328		and a	6,102	(1,739)			316,965
Current portion of long-term debt	772,270			5,315	6,000	1,984		758,971
Total current liabilities	2,959,159	2,161	(6,372)	195,550	104,183	7,959	_	2,647,256
Notes payable, finance leases and line of credit - net of current portion	229,282	a visita	1000	Mark	173,000	21,660		34,622
Bonds Payable - net of current portion	2,620,184			280,940			-	2,339,244
Interest rate swap liability	263,120			8,514			-	254,606
Retirement benefits	90,622		-	(128,466)	(6,293)	~~~~		225,381
Other liabilities	640,866		(2,417)	115,067	25,918			500,849
Total liabilities	6,803,233	5,546	(8,789)	471,605	296,808	29,619	-	6,001,958
Deferred inflows of resources	277,416	100.00		66,885	1,694	unar		208,837
Net position:								
Net investment in capital assets	1,628,733		-	179,030		4,584		1,449,300
Restricted - by donor	35,919					35,919		473,725
Unrestricted	7,540,365			1,076,717	377,489	83,487	(17,991)	6,030,479
Total net position	9,205,017	487,722		1,255,747	377,489	123,990	(17,991)	7,953,504
Total liabilities and deferred inflows and net position	\$ 16,285,666	\$ 493,268	\$ (8,789)	\$ 1,794,237	\$ 675,991	\$ 153,609	\$ (17,991)	\$ 14,164,299

The Total Combined Group column presented above represents the Combined Group, which consists of the Obligated Group and its Designated Affiliates, as such terms are defined in Section 101 of the Charlotte-Mecklenburg Hospital Authority's Second Amended and Restated Bond Order adopted as of September 9, 1997, as amended. Because none of the members of the Obligated Group have Designated Affiliates at this time, the only members of the Combined Group are the members of the Obligated Group.

#### The Charlotte-Mecklenburg Hospital Authority Combined Group

Combining Schedule of Revenues, Expenses and Changes in Net Position

December 31, 2021

	The Charlotte- Mecklenburg Hospital Authority		Atrium Health Foundation		Eliminations		Exclude AH Navicent		Exclude AH Floyd		Exclude Non-Obligated Group Affiliates		Exclude Consolidating Eliminations		Total Combined Group	
Operating revenues and support																
Patient service revenue	\$ 8,120,7		\$		\$		\$	867,690	\$	532,788	\$	5,409	\$		\$	6,714,899
Gifts, grants and contracts	82,5			50,432		(30,259)		6,587						-		96,113
Student tuition and fees - net	11,6			-1444				-								11,694
Other sources	757,5	529		973				39,013		5,047		33,753		(1,703)		682,392
Total operating revenues	8,972,5	536		51,405		(30,259)		913,290		537,835		39,162		(1,703)		7,505,098
Operating expenses																
Personnel costs	5,119,1			4,610		Collec		541,194		318,585		11,199				4,252,760
Supplies	1,772,4							188,690		85,131		726				1,497,881
Purchased services	635,6							80,587		35,966		169				518,894
Other operating expenses	728,5			28,149		(25,959)		83,117		40,179		13,062		(1,703)		596,132
Depreciation and amortization	394,4	188		262				42,587		21,576		2,189				328,398
Total operating expenses	8,650,2	257		33,021		(25,959)		936,175		501,437		27,345		(1,703)		7,194,065
Operating income (loss)	322,2	279		18,384		(4,300)		(22,885)		36,398		11,817		4,000		311,033
Nonoperating gains																
Interest expense	(107,4			1968A				(5,334)		(4,494)		(906)				(96,695)
Stimulus grants	181,5					100		14,900		17,210						149,400
Net investment gains	757,6			50,514				79,379		2,690		20,613				705,440
Net gains on interest rate swap valuation	3,0			-				3,084						normal.		
Other, net	(3,3	792)				4,300		(47)		(5,630)		16				6,169
Total nonoperating gains	830,9	81		50,514		4,300		91,982		9,776		19,723				764,314
Excess of revenues over expenses and losses before capital and other contributions	\$ 1,153,2	260	\$	68,898	\$	19844	\$	69,097	\$	46,174	\$	31,540	\$		\$	1,075,347
Changes in net position:																
Capital contributions	7,3	748		23,607						forms.		(3,128)		1000 B		34,483
Other contributions	(129,3	304)		905				10,762		39,086						(178,247)
Change in net position	1,031,	704		93,410				79,859		85,260		28,412		1976		931,583
Net position, beginning of year	8,173,3	313		394,312				1,175,888		292,229		95,578		(17,991)		7,021,921
Net position, end of year	\$ 9,205,0	017	\$	487,722	\$		\$	1,255,747	\$	377,489	\$	123,990	\$	(17,991)	\$	7,953,504

The Total Combined Group column presented above represents the Combined Group, which consists of the Obligated Group and its Designated Affiliates, as such terms are defined in Section 101 of the Charlotte-Mecklenburg Hospital Authority's Second Amended and Restated Bond Order adopted as of September 9, 1997, as amended. Because none of the members of the Obligated Group have Designated Affiliates at this time, the only members of the Combined Group are the members of the Obligated Group.

See accompanying independent auditors' report.

Dollars in thousands.

#### The Charlotte-Mecklenburg Hospital Authority Combined Group

Combining Schedule of Cash Flows December 31, 2021

	Atrium Health The Charlotte- Mecklenburg Hospital Authority	Atrium Health Foundation	Eliminations	Exclude AH Navicent	Exclude AH Floyd	Exclude Non-Obligated Group Affiliates	Exclude Consolidating Eliminations	Total Combined Group
Cash flows from operating activities:								
Receipts from third-party payers and patients	\$ 7,894,877	\$	\$	\$ 817,774	\$ \$22,611	\$ 5,424	\$	\$ 6,549,068
Payments to suppliers	(2,946,106)	(8,317)		(322,836)	(202,414)	(13,996)	AND 7	(2,415,177)
Payments to employees	(5,172,323)			(554,238)	(322,949)	(10,706)		(4,284,430)
Other receipts (payments) - net	657,050	(2,606)	(4,300)	(7,054)	9,421	20,955		626,822
Net cash provided by (used in) operating activities	433,498	(10,923)	(4,300)	(66,354)	6,669	1,677		476,283
Cash flows from financing activities:								
Cash flows from noncapital financing activities:								
Proceeds from the issuance of commercial paper	250,000	-						250,000
Retirements of commercial paper	(100,000)		****	-	and the second sec			(100,000)
Stimulus grants	181,510	-		14,900	17,210	-	allocation and the second s	149,400
Academic endowment and enrichment funds disbursed	(160,000)							(160,000)
Other activities	(107,523)		4,300		70,399			(173,622)
Net cash provided by (used in) noncapital financing activities	63,987		4,300	14,900	87,609			(34,222)
Cash flows from capital and related financing activities:								
Purchase of capital assets	(797,112)	(74)		(24,634)	(30,117)	(792)		(741,643)
Proceeds from sale of capital assets	8,166			25	6,779		a1946	1,362
Interest payments on short- and long-term debt	(100,451)			(5,334)	(4,494)	(904)		(89,719)
Principal payments, refunding and retirements on short- and long-term debt	(330,683)	-		(4,335)	(173,062)	(970)	and an	(152,316)
Proceeds from issuance of long-term debt	985,807		-		179,000		-	806,807
Contributions restricted for building and equipment purchases	18,510	7,878		10,762		(2,726)		18,352
Other contributions (distributions)		1,099						1,099
Net cash (used in) provided by capital and related financing activities	(215,763)	8,903		(23,516)	(21,894)	(5,392)		(156,058)
Net cash (used in) provided by financing activities	(151,776)	8,903	4,300	(8,616)	65,715	(5,392)		(190,280)
Cash flows from investing activities:								
Investment earnings	19,821	1,934	****	15	12,180	842		8,718
Purchases of investments and assets limited as to use	(54,071)	(2)		(22,791)		(2,219)		(29,063)
Sales of investments and assets limited as to use	124,233			8,324	98,703	17,206		
Net cash provided by (used in) investing activities	89,983	1,932		(14,452)	110,883	15,829		(20,345)
Net increase (decrease) in cash and cash equivalents	371,705	(88)	-	(89,422)	183,267	12,114		265,658
Cash and cash equivalents:								
Beginning of year	978,709	4,114		150,450	72,446	6,115		753,812
End of year	\$ 1,350,414	\$ 4,026	\$	\$ 61,028	\$ 255,713	\$ 18,229	\$	\$ 1,019,470
Reconciliation of cash and cash equivalents to the balance sheet:								
Cash and cash equivalents	799,598	4,026		61,028	255,713	18,229	-	468,654
Restricted cash in investments and assets whose use is limited	550,816							550,816
Total cash and cash equivalents	\$ 1,350,414	\$ 4,026	\$	\$ 61,028	\$ 255,713	\$ 18,229	<u>\$</u>	\$ 1,019,470
Reconciliation of operating income (loss) to net cash provided by (used in) operating activities:								
Operating income (loss)	\$ 322,279	\$ 18,384	\$ (4,300)	\$ (22,885)	\$ 36,398	\$ 11,817	\$ -	\$ 311,033
Adjustments to reconcile operating income (loss) to net cash provided by								
(used in) operating activities:								
Depreciation and amortization	394,488	262		42,587	21,576	2,189		328,398
(Increase) decrease in patient accounts receivable – net	(262,175)	-		(57,844)	(9,233)	14		(195,112)
(Increase) decrease in inventories and other current assets	(39,274)	(26,875)	2,338	3,471	(8,893)	(1,692)		(56,697)
Decrease (increase) in other assets affecting operating activities	46,112	(188)		(13,919)	4,956	(11,690)		66,577
Increase (decrease) in accounts payable and other current liabilities	271,923	(2,420)	(2,338)	37,981	17,069	444	-	211,671
(Decrease) increase in other liabilities affecting operating activities	(336,121)	(86)		(63,673)	(54,260)	595		(218,869)
Increase (decrease) in estimated third party payer settlements	36,266		-	7,928	(944)			29,282
Net cash provided by (used in) operating activities	\$ 433,498	\$ (10,923)	\$ (4,300)	\$ (66,354)	\$ 6,669	\$ 1,677	\$	\$ 476,283

The Total Combined Group column presented above represents the Combined Group, which consists of the Obligated Group and its Designated Affiliates, as such terms are defined in Section 101 of the Charlotte-Mecklenburg Hospital Authority's Second Amended and Restated Bond Order adopted as of September 9, 1997, as amended. Because none of the members of the Obligated Group have Designated Affiliates at this time, the only members of the Combined Group are the members of the Obligated Group.

#### Atrium Health – Navicent

**Combining Balance Sheet** 

December 31, 2021

	Cariyle Place		All Other Navicent	Atrium Health Navicent		
Assets						
Current assets:						
Cash and cash equivalents	\$	302	\$ 60,726	\$	61,028	
Short term investments		-	-			
Patient receivables – net		95	230,596		230,691	
Accounts, grants and notes receivable, net		(1,772)	14,944		13,172	
Assets limited as to use investments		_				
Other current assets		30	 30,128		30,158	
Total current assets		(1,345)	336,394		335,049	
Property and equipment – net		29,739	440,742		470,481	
Investments and assets limited as to use		104,976	783,735		888,711	
Other assets		_	71,781		71,781	
Total assets		133,370	1,632,652		1,766,022	
Deferred outflows of resources			 28,215		28,215	
Total assets and deferred outflows of resources	\$	133,370	\$ 1,660,867	\$	1,794,237	
Liabilities						
Current liabilities:						
Accounts payable	\$		\$ 11,939	\$	11,939	
Salaries and benefits payable		370	56,992		57,362	
Other liabilities and accruals		37,063	77,769		114,832	
Estimated third party payer settlements		_	6,102		6,102	
Current portion of long-term debt		947	 4,368		5,315	
Total current liabilities		38,380	157,170		195,550	
Notes payable, finance leases and line of credit – net of current portion		_				
Bonds Payable – net of current portion		32,110	248,830		280,940	
Interest rate swap liability		_	8,514		8,514	
Retirement benefits			(128,466)		(128,466)	
Other liabilities		125	 114,942		115,067	
Total liabilities		70,615	400,990		471,605	
Deferred inflows of resources		-	66,885		66,885	
Net position: Net investment in capital assets			179,030		179,030	
Restricted – by donor		-				
Unrestricted		62,755	 1,013,962	welle procession	1,076,717	
Total net position		62,755	 1,192,992		1,255,747	
Total liabilities and deferred inflows and net position	\$	133,370	\$ 1,660,867	\$	1,794,237	

See accompanying independent auditors' report.

#### Atrium Health – Navicent

Combining Schedule of Revenues, Expenses and Changes in Net Position

December 31, 2021

	Carlyle Place		All Other Navicent	Atrium Health Navicent		
Operating revenues and support						
Patient service revenue	\$	2,516	\$ 865,174	\$	867,690	
Gifts, grants and contracts		74	6,513		6,587	
Student tuition and fees - net		-	-			
Other sources		13,256	 25,757		39,013	
Total operating revenues and support		15,846	 897,444		913,290	
Operating expenses						
Personnel costs		9,315	531,879		541,194	
Supplies		1,669	187,021		188,690	
Purchased services		1,453	79,134		80,587	
Other operating expenses		1,817	81,300		83,117	
Depreciation and amortization		2,594	 39,993		42,587	
Total operating expenses		16,848	 919,327		936,175	
Operating loss		(1,002)	(21,883)		(22,885)	
Nonoperating gains						
Interest Expense		(605)	(4,729)		(5,334)	
Stimulus grants		12	14,888		14,900	
Net investment gains		10,067	69,312		79,379	
Net gains on interest rate swap valuation		166	2,918		3,084	
Other, net		3	 (50)		(47)	
Total nonoperating gains		9,643	82,339		91,982	
Excess of revenues and support over expenses and losses before contributions		8,641	60,456		69,097	
Capital contributions						
Other contributions			 10,762		10,762	
Change in net position		8,641	71,218		79,859	
Net position:						
Net position, beginning of year		54,114	 1,121,774		1,175,888	
Net position, end of year	\$	62,755	\$ 1,192,992	\$	1,255,747	

See accompanying independent auditors' report.

#### Atrium Health - Navicent

Combining Schedule of Cash Flows

December 31, 2021

	Carlyle Place Navicent Health	All Other Navicent	Atrium Health Navicent
Cash flows from operating activities:			
Receipts from third-party payers and patients	\$ 2,425	\$ 815,349	\$ 817,774
Payments to suppliers	28,496	(351,332)	(322,836)
Payments to employees	(9,704)	(544,534)	(554,238)
Other (payments) receipts – net	(21,704)	14,650	(7,054)
Net cash used in operating activities	(487)	(65,867)	(66,354)
Cash flows from financing activities:			
Cash flows from noncapital financing activities:			
Proceeds from the issuance of commercial paper		_	
Retirements of commercial paper		-	14.000
Stimulus grants	12	14,888	14,900
Academic endowment and enrichment funds disbursed Other activities	-		
Net cash provided by noncapital financing activities	12	14,888	14,900
Cash flows from capital and related financing activities:			
Purchase of capital assets	(2,872)	(21,762)	(24,634)
Proceeds from sale of capital assets		25	25
Interest payments on short- and long-term debt	(605)	(4,729)	(5,334)
Principal payments, refunding and retirements on short- and long-term debt	(902)	(3,433)	(4,335)
Proceeds from issuance of long-term debt	_		10.762
Contributions restricted for building and equipment purchases Other contributions (distributions)	-	10,762	
Net cash used in capital and related financing activities	(4,379)	(19,137)	(23,516)
Net cash used in financing activities	(4,367)	(4,249)	(8,616)
Cash flows from investing activities: Investment earnings	9,101	(9,086)	15
Purchases of investments and assets limited as to use	(8,324)	(14,467)	(22,791)
Sales of investments and assets limited as to use	4,013	4,311	8,324
			(14,452)
Net cash provided by (used in) investing activities	4,790	(19,242)	(14,452)
Net decrease in cash and cash equivalents	(64)	(89,358)	(89,422)
Cash and cash equivalents:			450.450
Beginning of year	366	150,084	150,450
End of year	\$ 302	\$ 60,726	\$ 61,028
Reconciliation of cash and cash equivalents to the balance sheet:			
Cash and cash equivalents	302	60,726	61,028
Restricted cash in investments and assets whose use is limited			
Total cash and cash equivalents	\$ 302	\$ 60,726	\$ 61,028
Reconciliation of operating loss to net cash used in operating activities:			
Operating loss	(1,000)	(21,885)	(22,885)
Adjustments to reconcile operating loss to net cash used in operating activities:			
Depreciation and amortization	2,594	39,993	42,587
(Decrease) increase in patient accounts receivable – net	8	(57,852)	(57,844)
Decrease in inventories and other current assets	1,887	1,584	3,471
Decrease (increase) in other assets affecting operating activities	169	(14,088)	(13,919)
Increase in accounts payable and other current liabilities	33,051	4,930	37,981
Decrease in other liabilities affecting operating activities	(37,097)	(26,576)	(63,673)
(Decrease) increase in estimated third party payer settlements	(99)	8,027	7,928
Net cash used in operating activities	\$ (487)	\$ (65,867)	\$ (66,354)

See accompanying independent auditors' report.

#### Atrium Health – Floyd

Combining Balance Sheet December 31, 2021

	Polk Medical Center, Inc		Cherol	Floyd kee Medical nter, LLC	All Other Floyd	Atrium Health Floyd		
Assets								
Current assets:								
Cash and cash equivalents	\$	23,709	\$	7,740	\$ 224,264	\$	255,713	
Short term investments		4,577		-	34,749		39,326	
Patient receivables - net		5,718		1,579	82,091		89,388 8,723	
Accounts, grants and notes receivable, net		945		736	7,042		8,723 4,121	
Assets limited as to use - investments		832		-	3,289		-	
Other current assets		868		349	 23,207		24,424	
Total current assets		36,649		10,404	374,642		421,695	
Property and equipment - net		19,727		2,260	135,357		157,344	
Investments and assets limited as to use		24,202			67,809		92,011	
Other assets					 4,359		4,359	
Total assets		80,578		12,664	582,167		675,409	
Deferred outflows of resources		_			582		582	
Total assets and deferred outflows of resources	\$	80,578	\$	12,664	\$ 582,749	\$	675,991	
Liabilities Current liabilities: Accounts payable Salaries and benefits payable Other liabilities and accruals Estimated third party payer settlements Current portion of long-term debt	\$	668 1,145 4,584 1,381 	\$	393 677 16,982 (30) —	\$ 15,679 28,258 31,536 (3,090) 6,000	\$	16,740 30,080 53,102 (1,739) 6,000	
Total current liabilities		7,778		18,022	78,383		104,183	
Notes payable, finance leases and line of credit - net of current portion					173,000		173,000	
Bonds Payable - net of current portion								
Interest rate swap liability								
Retirement benefits					(6,293) 2,762		(6,293) 25,918	
Other liabilities		22,815		<u>341</u>	 247,852		296,808	
Total liabilities		50,595		10,303	1,694		1,694	
Deferred inflows of resources					1,094		1,034	
Net position: Net investment in capital assets				_	_			
Restricted - by donor					_			
Unrestricted		49,985		(5,699)	 333,203		377,489	
Total net position		49,985		(5,699)	 333,203		377,489	

See accompanying independent auditors' report.

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#### Atrium Health – Floyd

Combining Schedule of Revenues, Expenses and Changes in Net Position

December 31, 2021

	Polk Medical Center, Inc.		Floyd Cherokee Medical Center, LLC		All Other Floyd		Atri	um Health Floyd
Operating revenues and support								500 700
Patient service revenue	\$	36,792	\$	18,014	\$	477,982	\$	532,788
Gifts, grants and contracts		-		_		_		
Student tuition and fees - net		124		451		4,472		5,047
Other sources								
Total operating revenues and support		36,916		18,465		482,454		537,835
Operating expenses								
Personnel costs		15,557		11,044		291,984		318,585
Supplies		2,851		2,567		79,713		85,131
Purchased services		2,213		2,137		31,616		35,966
Other operating expenses		1,795		1,185		37,199		40,179
Depreciation and amortization		2,303		379		18,894		21,576
Total operating expenses		24,719		17,312		459,406		501,437
Operating income		12,197		1,153		23,048		36,398
Nonoperating gains								
Interest expense		(648)		(17)		(3,829)		(4,494)
Stimulus grants		3,846		943		12,421		17,210
Net investment gains		386		1		2,303		2,690
Net gains on interest rate swap valuation		_						-
Other, net		668	******	19		(6,317)		(5,630)
Total nonoperating gains		4,252		946		4,578		9,776
Excess of revenues and support over expenses before capital and other contributions	\$	16,449	\$	2,099	\$	27,626	\$	46,174
Capital contributions								_
Other contributions		(20,000)		_		59,086		39,086
Change in net position		(3,551)		2,099		86,712		85,260
Net position:								
Net position, beginning of year		53,536		(7,798)		246,491		292,229
Net position, end of year	\$	49,985	\$	(5,699)	\$	333,203	\$	377,489
			10000					

See accompanying independent auditors' report.

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#### Atrium Health – Floyd

Combining Schedule of Cash Flows December 31, 2021

	Polk Medical Center, Inc.		Cherol	Floyd kee Medical nter, LLC	A	All Other Floyd		um Health Floyd
Cash flows from operating activities:								
Receipts from third-party payers and patients	\$	36,945	\$	18,129	\$	467,537	\$	522,611
Payments to suppliers		(8,320)		(14,126)		(179,968)		(202,414)
Payments to employees		(15,482)		(10,873)		(296,594)		(322,949)
Other receipts – net		792		1,395		7,234		9,421
Net cash provided by (used in) operating activities		13,935		(5,475)		(1,791)		6,669
Cash flows from financing activities:								
Cash flows from noncapital financing activities:								
Proceeds from the issuance of commercial paper						_		-
Retirements of commercial paper				Name.				
Stimulus grants		3,846		-		13,364		17,210
Academic endowment and enrichment funds disbursed		_				70,399		
Other activities								
Net cash (used in) provided by noncapital financing activities		3,846				83,763		87,609
Cash flows from capital and related financing activities:								
Purchase of capital assets		(188)		(2,009)		(27,920)		(30,117)
Proceeds from sale of capital assets				Name.		6,779		6,779
Interest payments on short- and long-term debt		(649)		(47)		(3,798)		(4,494)
Principal payments, refunding and retirements on short- and long-term debt		(33,112)				(139,950)		(173,062)
Proceeds from issuance of long-term debt				623		178,377		179,000
Net cash used in capital and related financing activities		(33,949)		(1,433)		13,488		(21,894)
Net cash (used in) provided by financing activities		(30,103)		(1,433)		97,251		65,715
Cash flows from investing activities:								
Investment earnings		407		_		11,773		12,180
Purchases of investments and assets limited as to use		_						_
Sales of investments and assets limited as to use		27,857		_		70,846		98,703
Net cash provided by investing activities		28,264				82,619		110,883
Net increase (decrease) in cash and cash equivalents		12,096		(6,908)		178,079		183,267
Cash and cash equivalents: Beginning of year		11,613		14,648		46,185		72,446
End of year	\$	23,709	\$	7,740	\$	224,264	\$	255,713
						*******		
Reconciliation of cash and cash equivalents to the balance sheet:		22 700		7 740		224,264		255,713
Cash and cash equivalents		23,709		7,740		224,204		255,715
Restricted cash in investments and assets whose use is limited Total cash and cash equivalents	\$	23,709	\$	7,740	\$	224,264	\$	255,713
							20001214.04041440	
Reconciliation of operating (loss) income to net cash (used in) provided by operating								
activities:		12,197		2,698		21,503		36,398
Operating income		12,197		2,098		21,505		30,350
Adjustments to reconcile operating income to net cash provided by								
(used in) operating activities:		2,303		615		18,658		21,576
Depreciation and amortization		2,303		115		(9,574)		(9,233)
Decrease (increase) in patient accounts receivable – net		684				(9,374) (9,411)		(8,893)
Decrease (increase) in inventories and other current assets		684 —		(166)		(9,411) 4,956		4,956
Increase in other assets affecting operating activities						22,801		4,938
Increase (decrease) in accounts payable and other current liabilities		1,840		(7,572)				
Increase (decrease) in other liabilities affecting operating activities		(3,241)		(1,165)		(49,854) (870)		(54,260) (944)
Decrease in estimated third party payer settlements		(74)						
Net cash provided by (used in) operating activities	\$	13,935	\$	(5,475)	\$	(1,791)	\$	6,669

See accompanying independent auditors' report.

#### Atrium Health – Wake Forest Baptist

#### Combining Balance Sheet

December 31, 2021

	 NCBH	 WFUHS	 WFUBMC	0	ther Affis	E	liminations		trium Health Vake Forest Baptist	No	n-Designated Entities	E	iminations	ake Forest Baptist ined Group
Assets														
Current assets:														
Cash and cash equivalents	\$ 58,582	\$ 11,412	\$ 258,678	\$	3,809	\$		\$	332,481	\$	(69,761)	\$		\$ 262,720
Short term investments														
Patient receivables - net	195,154	76,506	83,005		2,372				357,037		(20,480)			336,557
Accounts, grants and notes receivable, net	247,701	233,299	182,635		10,989		(526,234)		148,390		(22,079)			126,311
Assets limited as to use - investments	-		****				- 18 Au		-1000 A					
Other current assets	 83,448	 11,448	 16,043		150				111,089		(5,561)			 105,528
Total current assets	584,885	332,665	540,361		17,320		(526,234)		948,997		(117,881)			831,116
Property and equipment - net	583,160	364,873	326,696		9,472				1,284,201		(79,702)		- 1011	1,204,499
Investments and assets limited as to use	1,329,058	1,253,000	333,935		144		(467,875)		2,448,262		(83,894)		25,035	2,389,403
Operating lease right-of-use assets, net	21,203	143,057	116,816				(84,600)		196,476		(38,271)			158,205
Other assets	 46,438	 32,194	 107,299						185,931		(92,465)			 93,466
Total assets	\$ 2,564,744	\$ 2,125,789	\$ 1,425,107	\$	26,936	\$	(1,078,709)	\$	5,063,867	\$	(412,213)	\$	25,035	\$ 4,676,689
Liabilities														
Current liabilities:														
Accounts payable	\$ 67,372	\$ 169,981	\$ 465,039	\$	5,288	\$	(522,785)	\$	184,895	\$	(139,207)	\$		\$ 45,688
Salaries and benefits payable	88,127	219,235	57,844		380				365,586		(12,577)			353,009
Other liabilities and accruals	116,941	86,564	24,738		117		(9,175)		219,185		(3,374)			215,811
Estimated third party payer settlements	75,810								75,810 40,833		1,427 (11,569)			77,237 29,264
Operating lease liabilities	4,944	23,279	17,185				(4,575)		158,130		(11,363)			156,767
Current portion of long-term debt	 93,055	 11,645	 52,271		1,159									 
Total current liabilities	446,249	510,704	617,077		6,944		(536,535)		1,044,439		(166,663)			877,776
Notes payable, finance leases and line of credit -									00.557		(24,600)		_	63,869
net of current portion	16,624	42,530	25,919		3,484		1000		88,557		(24,688)			727,959
Bonds Payable - net of current portion	398,580	120,519	208,860		<b>Volta</b>		(70.250)		727,959 162,934		(27,732)			135,202
Operating lease liabilities - less current portion	15,903	124,743	92,638				(70,350)		3,525		(27,752)			3,525
Interest rate swap liability		3,525	713						96,260		(713)			95,547
Retirement benefits	72,294	23,253			49		(3,949)		123,256		(6,170)			117,086
Other liabilities	 46,916	 64,924	 15,316											 
Total liabilities	996,566	890,198	960,523		10,477		(610,834)		2,246,930		(225,966)		-1000	2,020,964
Net assets:											(			
Without donor restrictions	1,557,536	924,951	371,526		16,459		(467,875)		2,402,597		(185,157)		25,035	2,242,475
With donor restrictions	 10,642	 310,640	 93,058						414,340		(1,090)			 413,250
Total net assets	 1,568,178	 1,235,591	 464,584		16,459		(467,875)		2,816,937		(186,247)		25,035	 2,655,725
Total liabilities and net assets	\$ 2,564,744	\$ 2,125,789	\$ 1,425,107	\$	26,936	\$	(1,078,709)	Ş	5,063,867	\$	(412,213)	\$	25,035	\$ 4,676,689

#### Atrium Health – Wake Forest Baptist

Combining Statement of Operations and Changes in Net Assets

December 31, 2021

	NCRH	WFUHS	WFUBMC	Other Affis	Climinations	Atrium Health Wake Forest Baptist	Non-Designated	Fliminations	Wake Forest Baptist
	NCBH		WFOBINC	Other Artis	Eliminations	Bapost	Entities	Eliminations	Combined Group
Operating revenues and support									
Patient service revenue	\$ 1,706,567	\$ 708,602	\$ 794,147	\$ 18,745	\$	\$ 3,228,061	\$ (220,919)	\$	\$ 3,007,142
Gifts, grants and contracts	21,224	212,890	10,343		(128)	244,329	(9,648)		234,681
Student tuition and fees - net	1,885	41,733				43,618			43,618
Investment return designated for current operations	1,462	29,413	1,328	320		32,523	(1,690)	~*	30,833
Net assets released from restrictions	407	35,717	1,548			37,672	(21)		37,651
Other sources	431,515	249,770	37,108	197	(226,088)	492,502	(51,734)	A947	440,768
Total operating revenues	2,163,060	1,278,125	844,474	19,262	(226,216)	4,078,705	(284,012)	veex	3,794,693
Operating expenses									
Personnel costs	994,678	980,102	431,234	5,459	5,598	2,417,071	(171,114)	_	2,245,957
Supplies	690,495	120,158	165,618	1,292	3,350	977,563	(35,066)		942,497
Purchased services	287,270	31,588	46,006	3,782	(219,174)	149,472	(13,727)		135,745
Other operating expenses	124,720	132,715	101,291	3,450	(12,640)	349,536	(66,808)	1991	282,728
Depreciation and amortization	81,841	35,199	25,588	1,275	(	143,903	(5,500)		138,403
Financing costs	13,136	7,443	9,345	99		30,023	(975)		29,048
Total operating expenses	2,192,140	1,307,205	779,082	15,357	(226,216)	4,067,568	(293,190)		3,774,378
i otal operating expenses	2,192,140	1,307,203	//5,082	15,337	(220,210)	4,067,306	(255,190)		
Operating (loss) income	(29,080)	(29,080)	65,392	3,905	- 4964	11,137	9,178		20,315
Nonoperating gains (losses)									
Net investment gains (losses)	92,850	71,073	4,869	863		169,655	(3,937)		165,718
Net gains on interest rate swap valuation	1000a	1,208		1000		1,208			1,208
Net assets released from restriction		150,000				150,000		~~~	150,000
Pension and postretirement costs	(7,618)	1,894	779			(4,945)	(779)		(5,724)
Gains from equity-method affiliates	42,816	45,615	4,477		(80,883)	12,025	(163)	(9,982)	1,880
Contribution from business combinations, net			10,709		-	10,709	(10,709)		(contract of the second s
Other, net	13,522	(46)	(33)	(3,146)	2,360	12,657	(10,687)	(2,360)	(390)
Total nonoperating gains (losses)	141,570	269,744	20,801	(2,283)	(78,523)	351,309	(26,275)	(12,342)	312,692
Excess of revenues and support over expenses and losses	112,490	240,664	86,193	1,622	(78,523)	362,446	(17,097)	(12,342)	333,007
Changes in net assets without donor restrictions:	17 011	0.00	1.070			40 775	(1.070)		20 700
Pension and postretirement net adjustments	37,831	968	1,976			40,775	(1,976)	-	38,799
Other									
Changes in net assets without donor restrictions	150,321	241,632	88,169	1,622	(78,523)	403,221	(19,073)	(12,342)	371,806
Changes in net assets with donor restrictions:									
Contributions	960	36,570	1,403	- 198	-	38,933	(419)	-100.	38,514
Investment return in excess of amounts designated for current operations	242	8,290		-	- 24496	8,532		-	8,532
Net assets released from restrictions	(407)	(185,717)	(1,548)			(187,672)	21	-964	(187,651)
Net investment gains	274	31,835			-	32,109			32,109
Other	(53)	7,115	(10,017)			(2,955)			(2,955)
Change in net assets with donor restrictions	1,016	(101,907)	(10,162)			(111,053)	(398)		(111,451)
Change in total net assets	151,337	139,725	78,007	1,622	(78,523)	292,168	(19,471)	(12,342)	260,355
Net assets, beginning of year	1,416,841	1,095,866	386,577	14,837	(389,352)	2,524,769	(166,776)	37,377	2,395,370
Net assets, end of year	\$ 1,568,178	\$ 1,235,591	\$ 464,584	\$ 16,459	\$ (467,875)	\$ 2,816,937	\$ (186,247)	\$ 25,035	\$ 2,655,725

Form 8	453-TE	Tax Exempt Entity Declaration and Signature		OMB No. 1545-0047
		for Electronic Filing		
		For calendar year 2021, or tax year beginning , 2021, and ending , 20		2021
	ent of the Treasury	For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 80	038-CP	
	Revenue Service		IN or SSN	
Name of				8-2149128
distant statements of		CENTRAL GEORGIA, INC.		
Part	Type of	type of return being filed with Form 8453-TE and enter the applicable amount, if any, fr	rom the re	turn Form 8038-CP
and Fo 6a, 7a, 6b. 7b,	rm 5330 filers m 8a, 9a, or 10a i 8 <b>b, 9b, or 10</b> b,	hay enter dollars and cents. For all other forms, enter whole dollars only. If you check the below, and the amount on that line of the return being filed with this form was blank, ther , whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then e te more than one line in Part I.	box on lin n leave lin enter -0- o	e 1a, 2a, 3a, 4a, 5a, e 1b, 2b, 3b, 4b, 5b, in the applicable line
		k here		
<b>2a</b>	Form 990-EZ	check here . ► 🔲 b Total revenue, if any (Form 990-EZ, line 9)		
3a	Form 1120-PO	L check here <b>b</b> Total tax (Form 1120-POL, line 22)		
<b>4a</b>	Form 990-PF c	heck here . F i b Tax based on investment income (Form 990-PF, Part V, line 5)		and the second s
<b>5</b> a	Form 8868 che	ck here		and the second se
<b>6</b> a	Form 990-T ch			and the second design of the s
7a	Form 4720 che	eck here		
<b>8a</b>	Form 5227 che	eck here b FMV of assets at end of tax year (Form 5227, Item D)		
9a	Form 5330 che	eck here		
10a	Form 8038-CP	check here > D b Amount of credit payment requested (Form 8038-CP, Part III, line	e 22) <b>10</b>	<u>&gt; </u>
Part	I Declara	tion of Officer or Person Subject to Tax		
11a	withdrawal federal tax contact the Lalso auth	the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing (direct debit) entry to the financial institution account indicated in the tax preparation es owed on this return, and the financial institution to debit the entry to this account. U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to orize the financial institutions involved in the processing of the electronic payment of necessary to answer inquiries and resolve issues related to the payment.	n software To revok the paym	e a payment of the e a payment, I must ent (settlement) date.
b	executed t	this return is being filed with a state agency(ies) regulating charities as part of the IRS Fe he electronic disclosure consent contained within this return allowing disclosure by the specifically identified in Part I above) to the selected state agency(ies).	d/State pr IRS of th	ogram, I certify that I is Form 980/990-EZ/

Under penalties of perjury, I declare that [] I am an officer of the above named entity or [] I am the person subject to tax with respect to , (EIN) (name of entity)

and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign		Kinberly Steersber	111-2-22	CFO
Here	7	Signature of officer or person subject to tax	Date	Title, if applicable
Part II		Declaration of Electronic Return Origi	nator (ERO) and Paid P	reparer (see instructions)

I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

0011004 0					TO ALL DOLL DOTING
ERO's	ERO's signature	Dato	Check if also paid preparer	Check if self- employed	ERO's SSN or PTIN
Use	Firm's name (or yours if				EIN
Only	self-employed), address, and ZIP code				Phone no.

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid	Print/Type preparer's name W. EDWARD PHILLIPS	Preparer's signature	11.0	Date 1/2/22	Check if self- employed	PTIN P00451499
Preparer	Firm's name > DRAFFIN & TUCKER, L	LP	f marge		Firm's ElN ►	58-0914992
Use Only	Firm's address ► PO BOX 71309, ALBAN	Y, GA 31708-1309				(229) 883-7878
					Ford	- 8453-TF (2021)

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Form 8453-1 E (2021)

Form 990 Audit Recon - 2021 Balance Sheet					
•	GASB Audit	FAS	ib IFS	*complete reconciliations available	- this is generalized
Assets					
Current assets:	\$ 61,028	¢	61,028	\$ (0)	
Cash and cash equivalents Short term investments	\$ 01,020	÷	01,020	\$ (0)	
Patient receivables - net	230,691		230,691	\$0	
Accounts, grants and notes receivable, net	13,172	4	13,178	\$ (6)	GASB realignment
Assets limited as to use - investments	-	÷	15,170	\$ -	GASD realignment
Other current assets	30,158		30,159	\$ (1)	Rounding
Total current assets	335,049		335,056	- \$ (1) \$ (7)	Nounding
Total current assets	555,645		555,050	\$ ~	
Property and equipment - net	470,481	\$	470,481	\$ (0)	
roperty and equipment inter		•		\$ -	
Investments and assets limited as to use	888,711	\$	888,710	\$ 1	Rounding
	,	•		\$ -	
			~~ ~~~	t (27.200)	Deferred Outflows not in FASB + FASB adj
Other assets	71,781	\$	98,990	\$ (27,209)	for amortization
<b>-</b>	4 4 766 000		1 702 220	\$ - \$ (07.010)	
Total assets	\$ 1,766,022	\$	1,793,238	\$ (27,216)	
				\$ -	
Deferred outflows of resources	28,215	\$	-	\$ 28,215	
Total seasts and deferred outflows				- \$ -	
Total assets and deferred outflows of resources	¢ 1 704 227	*	1 707 220	¢ 000	CASP adjustment in Deferred OF
orresources	\$ 1,794,237	\$	1,793,238	\$ 999	GASB adjustment in Deferred OF
				\$ -	
Liabilities				\$ -	
Current liabilities:	* ******			\$ -	
Accounts payable	\$ 11,939		11,939	\$ 0	
Salaries and benefits payable	57,362		59,494	\$ (2,132)	
Other liabilities and accruals	114,832		116,523	\$ (1,691) \$ (0)	
Estimated third party payer settlements	6,102		6,102		
Current portion of long-term debt	5,315		5,315	\$ (0) \$ (3,823)	
Total current liabilities	195,550		199,373	\$ (3,823) \$ -	
Notes payable, finance leases and line of credit -				÷ -	
net of current portion	-	\$	-	\$ -	
Bonds Payable - net of current portion	280,940		280,940	\$ (0)	
Interest rate swap liability	8,514		8,514	\$ (0)	
Retirement benefits	(128,466)		66,796	\$ (195,262)	GASB pension adjustment
Other liabilities	115,067		111,964	\$ 3,103	GASS pension adjustment
Other habilities	(15,007	*	111,504	\$ -	
Total liabilities	471,605	-	667,587	\$ (195,982)	
Total habilities	41 1,005		001,507	\$ -	
Deferred inflows of resources	66,885	\$	-	* 66,885	GASB adjustments
belefica informa of resources	00,000	*		\$ -	ense algestiterite
Net position:				\$ -	
Net investment in capital asets	179,030			•	
Restricted - by donor					
Unrestricted	1,076,717				
				-	
					GASB pension/OPEB adjustments run
Total net position	1,255,747	\$	1,125,679	\$ 130,068	through NA
	,,. ,, ,, ,,	,		\$ -	2
Total liabilities and deferred inflows					
and net position	\$ 1,794,237	\$	1,793,266	\$ 971	GASB adjustments in deferred IF
·				<b>x</b>	,

#### Balance Sheet Detail By Entity - Audited Atrium Health Navicent - Internal Reporting Only Year to Date Through The Period Ending December 31, 2021

	1201 - Navicent Health Medical Center		1203 - Navicent Health Sedical Conter - Baldwin	4551 - Carlyle Place Navicent Health		4553 - Navicent Health Rehabilitation Hospital	5119 - Doctors Office Bldg - Navicent Health	5201 - Navicent Health Corporate Human Resources	5203 - Navicent Health Co	5204 - Navicent Health Health Ventures	5206 - Centra Professional Indemnity	5202 - Navicent Health - Eimination Company	Navicent Health Physicians Group	CONSOLIDATED
Account Current Assets Casti and Cash Equivalents								e estatuten in the second s						
10000100000100 Cash - Depository - Wells Fargo	1,502,102				(0)	D			267,743,139	9,689			(1,479,840)	267,775,090 27,396,948
10002100000100 Cash - Accounts Payable - Wells Fargo 10004100000100 Cash - Zero Balance Acct - MedCost	379,364								26,817,584					1,040
10004150004100 Cash - Zero Balance Acct - MedCost - Other	4,680								2,848,891					4,680 (20,589,414)
10005100000100 - Cash - Payroll - Wells Fargo 10010100000100 - Cash - General Checking - Clearing	(23,438,305)								(7,802,748)					(7,802,748:
10010100000200 Cash - General Checking - Clearing - Temp Restricted				-					(6.902)				96,571	(6,902) 332,884
1001310000100 Cash - Depository - 881 10016400000100 Cash - Depository - Suntrust	(237,237,666)		236,372 (9,118)						1,481,838				39,211	(235,764,946)
10016800000100 Cash - Checking - 881	3,554,904			301,439										3,856,344 9,620
10017000000108 Cash - Depository - Farmers Merchant 10017300000100 Cash - Operating - Synovus		77,067											9.620	9,620 77,067
10017400000100 Cash - Central Georgia Credit Union	6,998													8,998
10027800000100: Cash - Daily Liquidity - Suntrust (10065) 10028000000100: Cash - Zero Balancing - Clearing	22,291,868								243,590					22,291,868 243,590
10400100000100 Cash - Operating		(1,688)									2,963,908			2,962,219
10402100000100 Cash - Operating - Wells Fargo 10402100000200 Cash - Operating - Wells Fargo - Temp Restricted								•	150 (150)					150
10411100000100 Cash - US Bank													(34,735)	(34,735)
10422200000100 Cash - Accounts Payable - Century (10010)			6,441,598			850,259				2,807,386			(1.806.814)	6,441,598 4,473,332
10422700000100 Cash - Operating - Suntrust 10422800000100 Suntrust Payroll	2,622,499 108,960	-				850,259		u -		2,007,500			1.3000.0141	108,960
10422900000100 Cash - Payroll - Suntrust										(0)				(0) (39 888
10423200000100: Cash - Refund - Suntrust 10423400000100: Suntrust Online Bill Pay US Bank	(72,935)		(39,888)											(72,935
10423500000100 Synovus Operating MCPC		393,864												393,864
10423600000100 -Suntrust Reland 10428600000100 -Cash - Accounts Pavable - Suntrust	(35,616) (12,238,690)								11,165 580,716				(103,604)	(128,055 111,857,975
10428900000100 Cash - Georgia Heart Rural Hospital Program - Cadence		127,001	10,001											137.003
10600100000100 Cash - Petty	11,035	625	580	950	200	1,300			(38,264)				1,325	16.015 (38,264
10613100000100 Other Cash - Imprest Balances 10618100000100 Other Cash - Debit Cards - 881	2,934													2,934
10618200000100 Other Cash - Insurance Claims - Suntrust									1,029,894					1,029,894
Total Cash and Cash Equivalents Short Term Investments	(242,534,828)	\$96,869	6,639,546	302,389	200	851,559	0	0 0	292,708,901	2,817,077	2,963,908	0	(3,317,537)	61,028,084
Total Short Term Investments	0	0	0		0	0	0	0	0	0	a	0	0	0
Patient AR - Net				······································	· · · · · · · · · · · · · · · · · · ·			·						
10732100000100 Pt Accts Rec - Legacy (Soarian plus all other)	314,817,111 10,020,169	2,352,485	3,271,826 3,384		771.698	3,067,275							4,367,674	127,876,372 10,795,251
10733100000100 Pt Accts Rec - Other 10741100000100 Pt Accts Rec - Undistributed Payments	10,020,164		3,304		// 1,030								(438,120)	(438,1,20)
10746100000100 Pt Acets Rec - Unapplied Cash 10768100000100 Pt Acets Rec - Cash Clearing			(173,592)		238,339	5,790 (2,570,651)			(35,018)				2,936,992	70,537 30,743,220
10768100000100 Pt Accts Rec - Cash Cleaning 10774100000100 Adjustment - Account Receivable Legacy	28,893,490 65,740,025	923,533 157,066	(5,511) 735,175		600,366	1,037,870			(33,018)				2.530,552	67,670,137
10776100000100 Pt Acets Rec - Clearing - Refund Payable	3,567,459	126,156	214,555			103,637								4,011,807 (27,301,926)
10780150000100: Pt Acets Rec - System Conversion 10780150001100: Pt Acets Rec - System Conversion - Medicaid	(25,546,303) (20,442,219)		(526,987) (58,942)			(835,307) (14,331)								(20,538,520
10780150002100 Pt Accts Rec - System Conversion 50002	(9,340,913)	(30,018)	(65,923)			(139,651)								(8,576,505
10780150003100 Pt Accts Rec - System Conversion 50003 10780150004100 Pt Accts Rec - System Conversion Other	(5,927,381) (5,398,770)		(2,602) (77,897)			(28,991)								(5,942,177 (5,510,832
10761100000100 Pt Accts Rec - Health Logic Star Cleaning													693	693 (30,967
10789100000300. Pt Acets Rec.: Cash Clearing - Emergency Medical Services 10791100000300. Pt Acets Rec.: Cash Clearing - Heme Health	(28,123)								(2,844) (2,408,585)					(2,408,585
11032150002100 Pt Acets Rec - Cash Clearing - Aetna - 50002									621,586					621,586
11033150002100. Pt Accts Rec - Cash Clearing - United - 50002 11036150002100. Pt Accts Rec - Cash Clearing - Cigna - 50002									(10,795,412) (424,435)					(10,795,412 (424,435
11037150002100 Pt Acets Rec - Cash Clearing - BCBS - 50002									(12,198,045)					(12,398,045
11041150003100 Pt Accts Rec - Cash Clearing - Point of Sale - Self Pay 11042150002100 Pt Accts Rec - Cash Clearing - Humana - 50002									938,339 830,255				930,462	1,868,801 830,255
11045150004100 Pt Accts Rec - Clearing - Other - Self Pay/Other									(23,918)					(23,938
11050150000100: Pt Accts Rec - Clearing - Medicare 11051150001100: Pt Accts Rec - Clearing - Georgia - Medicaid									7,759,724 (6,521,232)					7,759,724
11051150001100 Pt Acets Rec - Clearing - Georgia - Medicald 11054150004100 Pt Acets Rec - Clearing - Wholesale Lockbox -Other									1,069,244					1.069,244
11076100000100 Pt Acets Rec - Clearing - PLB	(3.053.230)								236,634				268	268 (833,528
11076150004100 Pt Accts Rec - Cleaning - PLB - Other 11088100000100 Pt Accts Rec - Inpatient	(1,062,239)			106,57					230,034				Ð	106,574
11088150000100 Pt Accts Rec - Inpatient - Medicare	152,665,989	2,114,583	11,030,535			4,063,882							1	169,874,989 75,888 785
11088150001100 Pt Accts Rec - Inpatient - Medicaid 11088150002100 Pt Accts Rec - Inpatient - Commercial	73,171,222 102,554,935	455,397 792,373	1,927,578 4,656,563			334,589 913,860								108,917,731
11088150003100 Pt Accts Rec - Inpatient - Self Pay	26,376,711	339,486	637,027			219,276								27,572,499 65,301,154
11088150004100 Pt Accts Rec - Inpatient - Other 11089100000100 Pt Accts Rec - Outpatient (Home Health - 12005/12045/12076)	63,400,876 5,690,037	169,525	868,900			861,853				14,224				5,704,261
11089150000100 Pt Accts Rec - Outpatient - Medicare	\$5,158,503	1,981,189	8,112,343			590,044							6,746,494	72,588,573
11089150001100 Pt Acets Rec - Outpatient - Medicaid 11089150002100 Pt Acets Rec - Outpatient - Commerciai	15,158,555 51,866,780	803,370 1,713,372	2,126,857 10,386,055			218,755 394,456							5,114,029 5,635,559	23,421,566 69,996,221
11089150003100 Pt Accts Rec - Outpatient - Self Pay	10,109,261	1,105,623	1,420,224			113,969							978,491	13,727,569
11089150004100 Pt Acets Rec - Outpatient - Other 11095100000100 Pt Acets Rec - Accrued Claims	21,342,691	715,000	1,919,914			280,179							4,197,936 95,400	28,449,700 95,400
11095150000100 Pt Accts Rec - Accrued Claims - Medicare	1,200,000	100,000	200,000											1,500,000
11095150001100 Pt Accts Rec - Accrued Claims - Medicaid									372.765				50,096	50,096 372,765
11097100000100 Pt Acets Rec - Cash Clearing - Other Insurance 11097150002100 Pt Acets Rec - Cash Clearing - Other Insurance - Commercial									6,019,038					6,019,038
11099100000100 Pt Accts Rec - Cash Clearing - Multi System	(28,488,813)	(166,908)	548,355		(158,803)	2,822,106			174,515				1,037,382	(24,232,168 (5,652,661
11466150003100 Pt Accts Rec - Reserve - Facility - Self Pay 11471100000100 Allowance for Contractual Adjustments Legacy	(6,121,057) (80,340,939)		(3,037,322)			350,000 (2,098,808)							(328,652)	187,609,972
11471150000100 Allowance for Contractual Adjustments Legacy - Medicare													(4,039,022)	(4,039,027
11652100000100. Pt Accts Rec - Allowances for Bad Debts (13020/13022/13155) 11657150000100. Bad Debt Charge Off - Medicare	355,595	31,611	(929,438) 157,872			\$70								(929,438 545,645
11661150000100 Pt Accts Rec - Reserve - Current Year Bad Debt - Medicare			i or jure										6,633	6,63
11661150001100: Pt Acets Rec - Reserve - Current Year Bad Debt - Medicaid 11661150002100: Pt Acets Rec - Reserve - Current Year Bad Debt - Commorcial													(524) (1,415)	(52-
11661150003100 Pt Accts Rec - Reserve - Current Year Bad Debt - Self Pay	(41,211,653)		(1,884,421)			(261,774)							(2,389,072)	(47,323,48
11663150003100: Bad Debt Charge Offs - Self Pay 11664150000100: Pt Accts Rec - Charge Offs - Medicare	1,234,938 410,139,447	66,095 6,862,697	109,546 17,609,572			2,488 5,532,803								1,413,061 440,144,520
11664150000100 PLACES Rec - Charge Offs - Medicare 11664150001100 PLACES Rec - Charge Offs - Medicard	169,903,788	2,643,366	9,962,820			360,884								182,670,858
1/2022 4:14 PM						Page 1						FINIAL EVIT INT	ernal Balance Sheet Detail	by Entity Pour Austre 6
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#### Balance Sheet Detail By Entity - Audited Anium Health Navicent - Internal Reporting Only Year to Date Through The Period Ending December 31, 2021

	1201 - Navicent Health Medical Center		1203 - Navicent Health Medical Center - Baldwin	4551 - Carlyle Place Navicent Health	4552 - Pine Pointe Hospice Navicent Health		5119 - Doctors Office Bldg - Novicent Health	5201 - Navcent Health Corporate Human Resources	n 5203 - Navicent Health Co	5204 - Navicent Health Health Ventures	5206 - Centra Professional Indemnity	S202 - Navicent Health Elimination Company	Navicent Health Physicians Group	CONSOLIDATED
Account 11664150002100 Pt Accts Rec - Charge Offs Commerciai	148,612,588	3,671,084	6,429,339			1,138,510				· SEMERERENE STREET		a mensennannennennen.		159,851,521
11664150003100 Pt Accts Rec - Charge Offs Self Pay	37,291	1,063	3											38,357
11664150004100 Pt Accts Rec · Charge Offs · Other	29,483,707	971,463	2,213,544			236,068				. (4.773)			-	32,904,782 (206,533)
11665100000100. Pt Accts Rec - Reserve - Contractual 11665150000100. Pt Accts Rec - Reserve - Contractual - Medicare	(746,544) (466)	0 28,727	602,907 3,332	(11,200	(41,922)	258.621				(9,775)			(4,826,519)	(4,536,305)
11665150001100 Pt Accts Rec - Reserve - Contractual - Medicaid	1400	4,656	2, 2 da.			5,140							(3,450,491)	(5,440.684)
11665150003100 Pt Accts Rec - Reserve - Contractual - Self Pay												· · · ·	1,406	1,406
11665350004100 Pt Accts Rec - Reserve - Constractual - Other													16 36.369	16 (612.975.168)
11667150000100. Pt Accts Rec - Reserve - Current Year Contractual - Medicare 11667150001100. Pt Accts Rec - Reserve - Current Year Contractual - Medicaid	(566,785,485) (240,944,876)		(29,406,396) (12,884,383)			(7,895,847) (739,216)							17,236	(258,180,673)
11667150002100 PLACES Rec - Reserve - Current Year Contractual - Commercial	(228,883,703)	(5,126,627)	(16,655,861)			(1,804,933)							(2,279.830)	(254,750,953)
11667150003100 Pt Accts Rec - Reserve - Current Year Contractual - Self Pay	20	902				2,139							478,154	481,255
11667150004100: Pt Accts Rec - Reserve - Current Year Contractual - Other	(94,576,818)		(4,103,261)			(1,088,244)						•	(3,010,047)	(104,349,217)
Total Patient AR - Net Due from Consolidated Entities	205,634,883	5,299,263	15,335,690	95,373	1,409,698	5,437,012	0		0 (14,387,391)	4,450		) 0	11,861,680	230,690,659
11900100000100: Intercompany Due To - From (Balancing Entries) 11900100000200: Intercompany Due To - From (Balancing Entries - Temp Restricted)	218,873,065 (17,052)	121,446	(15,441,591)	(686,797	(1,383,195)	95,777	3,036,863		(0) (186.053,141) 7,052				(17,831,674)	845,896 (10,000)
11901100000100 Interfund Due To - From - Unrestricted	15,250			4,267,883							69,013,419	s .		93,316,548
11901100000200 Interfund Due To - From - Temporarily Restricted	(15,250)	) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (												(15,250)
11901100000300 Interfund Due To - From - Restricted			16,512,677	(4,287,883 (1,135,820	, 44,415	(96,051)	818,671		(15,964,167	(396,521)	(89,013,419	5) (1.729.948)	(9,279,448)	(93,301,298) 2,087,781
11911100000100 Intercompany Due To - From (Lawson Intercompany Accounts)	38,618,229	(25,304,257)	16,512,677	(1,135,820	) 44,415	(96,051)	818,671							
Total Due from Consolidated Entities Other Healthcare Organizations	257,474,241	(25,182,811)	1,071,086	(1.822,616	(1,338,780)	) (275)	3,855,534		0) (202,010,255)	(281,378)		0 (1,729,948)	(27,111,121)	2.923,677
12222100000100: Oth Accts Rec - Atrium Health 12226100000100: Oth Accts Rec - Hospital Authority	4,903,694								(24,802,262 32,907					(19,898,568) 32,907
Total Other Healthcare Organizations	4,903,694	0	0	0	0	0	0		0 (24,769,355)	0		o 0	0	(19,865,661)
Other AR													A107 1114	6,998,848
1240410000100. Oth Acets Rec - Miscellaneous	1,743,909	36,223	985,822	50,755			149,766		4,007,108				175,031	6,998,848 367,447
12406100000100: Oth Accts Rec - Rent 12410150003100: Oth Accts Rec - Reserve - Access One - Solf Pay	17,681 108,037	1,806				(3,025)	147,766						(70,291)	36,527
1241019400300 Oth Accts Rec - Notes Rec - Stalf and Employees	78,679	-	61,231			(2)01.21							(0)	
12412100000100 Oth Accts Rec - Management Fee	(3,053)	) .		,										(3,053)
12413100000100 Oth Acets Rec - Capitation	2,196,600													2,196,600 2,561,225
12415150003100: Oth Accts Rec - Contract - Legacy - Self Pay 12417100000100: Oth Accts Rec - Clearing - Alfiliate	2,532,981	1,454	26,790						1,514,404				416,819	1,931,223
12434100000200 Unbilled AR - Grants - Temp Restricted	10,000													10,000
12441100000100 Oth Accts Rec - Grants	1,905,694													1,905,694
12442100000100. Oth Accts Rec - Non Patient	73,486,830		669	,		7,061	(316,812)	1	(56,783,290				(178,561)	15,449,051 6,602
12445100000100 Oth Accts Rec - Intercompany Interest Receivable 12458100000100 Oth Accts Rec - Allowance	196		809 (62,531)				4,911		(2.892.376	1,144			42	6,602 (2,954,907)
12456 10000 100 Oth Acets Rec - Allowater 12459100000100 Oth Acets Rec - Graduate Medical Education	1,674,952		(02,331)						. (LAML) 10					1,674,952
Total Other AR	83,752,506	(727,063)	1,012,291	50,755	0	4,036	(162,135)	•	0 (\$4,154,155	1,144		0 0	342,741	30,120,118
Total Short Term Leases Inventories	0	0	0	0	0	0	0		0 0	0		D 0	0	0
1300010000100 Inventory - Pharmacy	3,686,066	199,425	499,901			127,441								4,512,833
13003100000100 Inventory - Medical	3,724,049		(100)	29,608										4,752,926
13005100000100 Inventory - Dietary						9,822								9,822
13006100000100 Inventory - Surgery	5,389,567		1,130,726						(154					6,520,298 7,954,703
13009100000100 Inventory - General Stores 13009100000200 Inventory - General Stores - Temp Restricted	7,447,646 1,459		507,261			0			. (194					1,954,703
13015100000100 inventory - Adjustments	(0)													(d)
13017100000100 Inventory - Control	2,733		(50)									· · · ·		2,683
13020100000100 Inventory Clearing Account 13024100000100 Inventory Transfers	554,234 1,833		104,542 331						- 153 - (2,164					658,929
Total Inventories Prepaid Expenses	20,807,587	198,744	2,242,611	29,608	Ç	137,263	0		0 (2.165	0		0 0	0	23,413,648
Prepara Expenses 13200100000100 Prepaid Insurance									35,988					35,958
13211100000100 Prepaid Expenses - Other	1,095,184		89,412			0			5,436,369		21,81			6,709,280
Total Prepaid Expenses	1,095,184		89,412	0	0	0	19,828		0 \$,472,357		21,81		0	6,745,268
Total Current Assets	331,133,267	(19,768,330)	26,390,635	(1,344,491	) 71,118	6,429,595	3,713,227	)	(0) 2,857,938	2,541,293	2,985,72	7 (1,729,948)	(18,224,236)	335,055,792
Capital Assets Capital Assets tincludes CIP;														
13300100000100 Land	17,683,546	734,870	367,334	1,732,834	500,000		2,330,051		713,639					24,062,274
13301100000300 Land Improvements	2,373,745	126,634	374,833	3,819,781	26,321		518,613		574,671				1,870	7,616,468
13400100000100 Building 13401100000100 Building Improvements	108,500,800		17,450	96,511			4,072,211		- 33,771,214				17,720 268,458	746,532,353 589,393,574
13401100000100 Building Improvements 13402100000100 Fixed Assets - Contra	378,282,221 288		14,858,895 (0)	66,275,783	4,909,637	39,272	84,231,892		20,783,868				200,458	589,393,574
13500100000100 Equipment	259,987,340	6,654,824	4,915,048	4,167,076	224,402	1,964,927	1,708,203		14,640,043				5,288,302	299,550,163
13501100000100 Computer and Technology - Capital	32,000,411	455,825	1,193,529	256,649	432,043	192,368	545,146		- 154,153,935	-			1,071,733	190,307,136
13680100000100 Jaasehold Improvements 13601100000100 Asbestos Remediations	32,005						1,362,715		739,029				554,698	2,688,447 571,256
13601100000100 Asbestos Remediation 13700100000100 Construction In Progress	539,652 39,753,335		4,127,863	2,851,671			31,604 413,257		4,310,554				12,660	571,256 51,715,236
Total Capital Assets (Includes CIP)	839,153,343		25,654,951	79,200,306	6,134,100	2,196,566	95,213,692		0 229,686,952	14,747		0 0	7,215,441	1,312,431,197
Accumulated Depreciation														
13800100000100 Accum Depreciation	(535,538,107		(8,852,594)	(49,461,357	) (2,230,686	(2,029,474)			- (176,998,721		3		(5,917,696)	
13805100000100 Accum Amortization - Leasehold Improvements 13823100000100 Reverve Asbestos Remediation	(32,005) (467,026						(1,335,532) (31,605)		(492,293	, · ·			(675,141)	(2,534,970) (498,631)
Total Accumulated Depreciation	(\$36,037,139)	) (12,215,625)	(8,852,594)	(49,461,357	) (2,230,686	) (2,029,474)	(47,031,844)	۶	0 (177,491,012	(13.371		0 0	(6,586,837)	(841,949,938)
Total Net Capital Assets	303,116,204	15,745,474	16,802,357	29,738,949	3,903,414	167,092	48,181,848	, , , / , , , , , , , , , , , , , , , ,	0 52,195,941	1,376	s mannan sa an sa an	0	628,604	470,481,259

#### Balance Sheet Detail By Entity - Audited Atrium Health Navicent - Internal Reporting Only Year to Date Through The Period Ending December 31, 2021

1201 - Navicent Health Medical Center		1203 Navicent Health Medical Center - Baldwin	4551 - Carlyle Place Navicent Health	4552 - Pine Pointe Hospice Navicent Health	4553 - Navicent Health Rehabilitation Hospital	5119 - Doctors Office Bidg - Navicent Health	5201 - Navicent Health Corporate Human Resources	5203 - Navicent Health Co	5204 - Navicent Health Health Ventures	5206 - Centra Professional Indemnity	S202 - Navicent Health Elimination Company	Navicent Health Physicians Group	CONSOLIDATED
0	0	0	0	0	0	0	a	0	0	0	0	0	
667,941,851			99,811,750										767,753, 420,
315,489			(30,357										(30) 4,267
668,257.341	Ó	0	104,174,270	0	0	0	0	0	0	0	0	0	772,431,
0	0	0	0	0	0	0	0	0	Q	Q	0	0	
										0			
			802,099							59.013.415	1		80/ 89.01
· ·								24,445,058					24,44
								1,059,518	958,534				95 1.05
0	0	0	802,099	0	0	0	0		958,534	89,013,415	0	0	116,27
1,304,442								23,523,525	1,503,273				26,3 34
													2
905,421											×		9
								4,223,966					4,
													6. 1
(455,000)													(4
		1						(486,250) (163,200)					14 (*
								(3,911,837)					(3,9
								17,734,598					
1,754,863	0	0	0	0	0	0	G	40,969,541	1,634,809	0	(17,734,598)	0	26,6
			(0	E				13,063,973				224,713	13,28
0	0	0	(0	0	0	9	ď	13,063,973	0	0	0	224,713	13,28
								2,902,376					2,9
0	0	0	0	0	0	0		2,902,376	0	0	0	9	2,9
314		442,030						12,171,055				985,437	13,5
1,500,000		7.803				129 142		11 779	1 001			421	1,5
35,762,945		, op 3				10.7,140							35, 5,
				0	0								56,2 987,7
707,278,498				0 3,974,532	6,596,687	52,024,216					(17,734,398) (19,464,546)		907,7 1,793,2
0	n	0	ar.	1 .	0	â		15,846 706	0	1	1,069,658	101	(4,
		-						(11,331)					
					6,613			9,377				145	(1,
0								(007.588)					(4
(3,560,109) 58,351								(107,300)					
		(616)		-		0		(769,590)	a			0	a.
	. 0	0											(11,5
	-	-	(0	. 0	6,613	0	G	(7.525.837)	0	0	1,069,658	(75.368)	
(1,434,904) (5,248,815)	(21,410	-	(0 2	• • •			<u> </u>			· · · · · · · · · · · · · · · · · · ·	1,069,658		
(1,434,904) (5,248,815) (3,118,326) (0)	(21,410	(143,771)	00 	(0				(7,525,837) 0 (3,178,326) (0)		• 1	1,069,658	( <b>75.368</b> ) (1,188.223) 0	đ,
(1,434,904) (5,248,815) (3,118,326)	(21,410	(143,771)	G	(0	0 0	3mahataman 63 ma Indone 4347		0  3,178,3261  0			1,069,658		a,
(1,434,904) (5,248,815) (3,118,326) (0) (1,520,846) (278,690)	(21,410	(143,771)	G	(0	0 0	Annahatanan 20 an taobu 2007		0 [3,178,326]	(402	· · · · · · · · · · · · · · · · · · ·	1,069,658		(7. (1. (6.
(1,434,504) (5,248,815) (3,118,326) (1,520,846) (278,650) (70,3403)	(21,410	(143,771)	G	(0	0 0	Anadatanaa (A aa Indones) (A aa Indones)	, , , , , , , , , , , , , , , , , , ,	0 (3,118,326) (0) (6,028,000)	(402 (834		1,069,658		(7. (1. (6.
(1,434,904) (5,246,815) (3,118,326) (0) (1,220,846) (27,6400) (70,3408) (51,3422) (9,395,820)	(21,410	) 0 0 0 0	(£ 	(0	0 0 - - - - - - - - - - - - - - - - - -			0  3,178,3261  0	(402 (834		1,069,658		(7. (1. (6. ) (9.) (9.)
(1,434,964) (5,248,815) (3,118,326) (0) (1,520,846) (278,690) (703,809) (513,492) (9,559,820) (3,567,499)	(21,410	(143,771) ) D - - - - - - - - - - - - - - - - - - -	(£ 	(0	0 0			0 (3,118,326) (0) (6,028,000)	(402 (834		1.069,658	(1,188,223) D	(7. (6. (6. (9. (4.)
(1,434,904) (5,246,815) (3,118,326) (0) (1,220,846) (27,6400) (70,3408) (51,3422) (9,395,820)	(21,410 (0 (126,356	) 0 0 0 0	(£ 	(0	0 0 - - - - - - - - - - - - - - - - - -			0 (3,118,326) (0) (6,028,000)	(402 (834		1.069,658	(1,188,223) D	
	315,489 0566,257,341 0 0 1,104,442 905,421 905,421 905,421 0 1,754,863 0 0 1,154,863 0 0 1,154,863 1,155,865 0 0 0 0 0 0 0 0 0 0 0 0 0	315,489 6666,257,341 0 0 0 0 0 1,304,42 905,421 (455,000 1,304,42 905,421 0 0 0 0 0 0 0 0 0 0 0 0 0	315.489 	335,489       -       106,954         -       -       63,674         -       -       63,674         -       -       63,674         -       -       0       0         0       0       0       0         -       -       -       802,699         -       -       -       -         -       -       -       -         0       0       0       802,699       -         1,104,442       -       -       -         -       -       -       -       -         905,421       -       -       -       -         -       -       -       -       -       -         (465,5000       -       -       -       -       -         -       -       -       -       -       -       -         -       -       -       -       -       -       -         -       -       -       -       -       -       -       -         -       -       -       -       -       -       -       -       -       -       <	335,489	315,489	33,489       106,994       -       -         608,257,141       0       0       0       0       0       0       0         0	0         0	0         0	NACKARA INCOM         O<         O<         O			

#### Balance Sheet Detail By Entity - Audited Atrium Health Navicent - Internal Reporting Only Year to Date Through The Period Ending December 31, 2021

Account	1201 - Navicent Health Medical Center		1203 - Navicent Health Medical Center - Baldwin	4551 - Cariyle Place Navicent Health	4552 - Pine Pointe Hospice Navicent Health	4553 - Navicent Health Rehabilitation Hospital	5119 - Doctors Office Bidg - Navicent Health	5201 - Navicent Health Corporate Human Resources Co	lth 5204 - Navicent Health Health Ventures	- 5206 - Centra Professional Indemnity	5202 - Navicent Health - Elimination Company	Navicent Health Physicians Group	CONSOLIDATED
21602100000100 Benefits Payable - Health Savings 21602100000100 Benefits Payable - Post Retirement (ST OPEB)	(2,130,459)		-	· · · · · · · · · · · · · · · · · · ·				- (3,686, -	344)				(3,686,344) (2,130,459)
Total Salaries and Benefits Payable Fee Schedule and Reserves	(36,842,177)	(473,773)	(1,403,234)	(369,765)	(133,066)	(531,777)	0	0 (17,599,	40) (4,30	2)	<u>, 0</u>	(2,136,107)	(\$9,493,840)
22013100000100. Current Liab - Health Insurance - Reserve								(3,283	367)				(3,283,867)
Total Fee Schedule and Reserves Deforred Revenue	0	0	0	9	0	0	0	0 (3,283,	167)	0		0	(3,283,867)
22200100000100 - Current Liab - Deferred Revenue 22201100000100 - Current Liab - Deferred Endowment (Grants)	(2,832,700)			(35,694,732)	74,039							(3,122)	(36,527,432) 70,917
Total Deferred Revenue Other Liabilities and Accruais	(2,832,700)	0	0	(35,694,732)	74,039	0	0	0	0	0	o 0	(3.122)	{38,456,515}
22500100000100 Other Current Liabilities	(603,846)							- (6,954	337)			(28,042)	(7,586,225)
22502100000100: Oth Curr Liab - Taxes - State Sales 22506100000100: Oth Curr Liab - Unemployment Payable 22510100000100: Oth Curr Liab - Rent : Deferred	(36,445) (1,730)		13	(3,559) (0)		G	(2,799)			0) 0			(39,992) (1,730) (2,799)
22510100000100 Dth Curr Liab - Rent - Deferred 22511100000100 Dth Curr Liab - Advance Deposits 22517100000100 Dth Curr Liab - Accrual - Miscellaneous	(0)	(240,000)	(1,119,848)	(191,130) (1,175,044)			(1,500)	(17,838)	1171	(360,89	21 660,289	(834,868)	(192,630) (20,908,761)
22545100000100 Unersed Income 22545100000100 Unersed Income	0	(240)000	(87,796)	(1,17),000			, ioi	(1,242,			0	(356,447)	0 (1,686,900)
22547100000200 Grants Clearing - Temp Restricted 22584100000100 Oth Curr Liab - Medicare Advanced Payments	(4,525) (37,863,426)	(2,407,420)	(4,087,552)					ж К	244)				(4,525) (44,358,643)
Total Other Liabilities and Accruais Due to Affiliates	(38,509,972)	{2.647.420}	(5,295,183)	(1,369,733)	9	0	(4,299)	0 (26,035,	555} (	0) (360,89	2) 660,289	(1,219,358)	(74.782.222)
Total Due to Affiliates Estimated Third Party Payer Settlements	0	0	0	0	0	0	0	0	0	0	00	0	0
23001100000100 General Reserve	1.683 172	(429,272)	(79,835)	_		83477							1,257,542
2303150052012100 General Reserve - 2012 23001152013100 General Reserve - 2013	(1,193,320) (1,177,693)	(40.02.02)											(1,793,320) (1,777,693)
23001152014100 General Reserve - 2014 23001152015100 General Reserve - 2015	(811,157)	0											(811,157) D
23001152016100 General Reserve - 2016 23001152017100 General Reserve - 2017	(1,670,000) (1,670,000)												(1,670,000 (1,670,000
23001152018100 General Reserve - 2018 23001152019100 General Reserve - 2019	(561,300) (4,225,893)	0 (86.025)	(16,741)										(561,300 (4,328,659
23001152020100 General Reserve - 2020	{1,543,805}	502,654	(111,592)										(1,152,743 (4,174,116
23001152021100: General Reserve - 2021 23031150000100: Receivable - Medicare - General	(3,271,430) 112,862	(623,386)	(279,300)			-							112,862
23031152017100 Receivable - Medicare - 2017 23031152019100 Receivable - Medicare - 2019	(37,780) 895,776						-						(37,780 895,776
23033100000100 Upper Payment Limit Receivable	3,050,000		120,000									1,084,896	4,254,896
23033152018100 Upper Payment Limit Receivable - Report Year 2018 23034100000100 indigent Care Trust Fund Primary Care Due to Others 2303510000100 indigent Care Trust Fund Receivable	233,417	750,000	120.000										233,417 750,000 3,170,000
Total Estimated Third Party Payer Settlements Current Portion of Long Term Debt	{7,137,151}	113,972	(247,468)	ö	0	83,477	0	0	0	0	0 0	1,084,896	(6,102,274
24001100000100 Curr Port LTD - Bond Costs	(0)			(0)									11
24001152019100 Curr Port LTD - Bond Costs - 2019 24002100000100 Curr Port LTD - Nates Payable	(4,102,235)			(947,015)				. (265	750) 0				(5,315,000) 0
Total Current Portion of Long Term Debt	(4,102,236)	0	0	(947,015)	.,		0	<u> </u>			0 0	0	(5,315,001
Total Current Liabilities	(94,673,049)	(3,028,631)	(7,089,656)	(38,381,245)	(59,027	) (441,667	(4,299)	0 (54,710,	746) (4,30	2} (360,89	2) 1,729,948	(2,349,059)	(199,372,648
Long Term Debt, Less Current Portion													(60 725 449
25000100000100 LT Debt - Notes Payable (Term Loans BBT/Wells Fargo) 25001100000100 LT Debt - Bonds Payable	(49,137) 0		(15,000,000)				(39,920,576)	(5,755				-	(60,725,449 0 (220,214,999
25001152019100 LT Debt - Bonds Payable - 2019 Total Long Term Debt, Less Current Portion	(179,093,950)		(15,000,000)	(32,110,299) (32,110,299)		-	(39,920,376)			0			(280,940,448)
Commitments and Contingencies													
26004100000100 Oth LT Liab - Commitments and Contingencies 26005100000100 Oth LT Liab - Medicare Advanced Payments	(46,502)	(482,644)	(217,259)	(86,999)		.(0		(1,002	389)	(57,524,89	4)	a	(58,527,283) (833,404)
Total Commitments and Contingencies Other Liabilities	(46,502)				0	(0)		0 (1.002.	189)	0 (\$7,524,89	4) 0	<b>o</b>	(59,360,687)
26200100000100 Oth L1 Liab - Other (LT OPEB/Retention//SEBP/SERP)								. (3,588	770				(3,588,770
26207100000100 Oth LT Liab - Other - Deferred Revenue	(7,626,995)	(107,697)	(2,372,454)	(37,760)		(894,514		(3,300				(717,372)	(11,756,792
26208100000100. Oth LT Liab - Deferred Compensation - Medical Group 26214100000100. Oth LT Liab - NonQualified Benefit Plan	315,696								(958,53	\$4]			(958,534 315,696
26223100000100 Oth LT Liab - Operating Lease 26230100000100 Oth LT Liab - Deferred Commensation - Executive 4578			(355,400)					(11,006				(639,308)	(12,000,895) (24,445,058)
26230100000100 Oth LT Lub - Deferred Compensation - Executive 4528 26231100000100 Oth LT Lub - Asset Retirement Obligations 26232100000100 Oth LT Lub - Assets Remediation	(1,137,227) 899,297						(105,563) 174,890		, ,				(24,445,058 (1,242,790 1,074,187
Total Other Liabilities	(7,549,229)	(107,697)	(2,727,854)	(37,760)	0	(894,514		0 (39,040,	)14) (958,53	4}	00	(1,356,680)	{52,602,957
25900100000100 Pension - Unfunded 25905100000100 Pension University Guin and (Loss)								(88,404 41,267					(88,404,840) 41,267,612
25907100D00100 Other Post Retirement Benefit Liability	(19,658,929)							· · · ·	· · · · · · · · · · · · · · · · · · ·				(19,658,929)

Total Pension Liability Interest Rate Swap Liability

(19,658,929)

0

0

0

(66,796,158)

0 0 0

0

0 0 0

(47,137,228)

#### Balance Sheet Detail By Entity - Audited Annum Health Navicent - Internal Reporting Only Year to Data Through The Period Ending December 31, 2021

	1201 - Navicent Health Medical Center	1202 - Navicent Health Medical Conter - Peach	1203 - Navicent Health Medical Center - Baldwin	4551 - Carlyle Place Navicent Health	4552 - Pine Pointe Hospice Navicent Health	4553 - Navicent Health Rehabilitation Hospital	\$119 - Doctors Office Bidg - Navicent Health	5201 - Navicent Health Corporate Human Resources	S203 - Navcent Health Co	5204 - Navicent Health Health Ventures	5206 Centra Professional Indemnity	S202 Navicent Health Elimination Company	Navcent Health Physicians Group	CONSOLIDATED
Account														
500100000100: Oth LT Liab - Interest Rate Swap 500152005100: Oth LT Liab - Interest Rate Swap - 2005	(8,513,802)			0					· 1		-			(8,513,802)
Total Interest Rate Swap Liability	(8,513,802)	0	0	0	0	0	0	<b>0</b>	) 0	0	0	0	Q	(8,513,802)
Total Long Term Liabilities	(35,768,463)	(590,341)	(2,945,113)	(124,759	) 0	(894,514)	69,327	Ċ	) (87,179,632	) (958,534)	(57,524,894	)	(1,356,680)	(187,273,604)
Total Liabilities	(309,564,599)	(3,618,972)	(25,034,769)	(70,616,303	) (59,027)	) (1,336,201)	(39,855,548)		) (156,656,866	) (962,836)	(\$7,885,786	) 1,729,948	(3,705,739)	(667,586,699)
Net Position														
Temporarily Restricted	0	0	0	0	0	o	0	a	0	0	0	0	D	
000100000100 Net Position - Unrestricted	(925,143,922)	7,260,330	(16,873,918)	154,235,984	(4,536,467	) (4,179,564)	(10,473,405)				(35,965,619	17,734,598	(1,923,140)	
00110000100: Net Position - Capital 009100000100: Net Position - Adjustments	(8,451,836)								· (3,902,464 · (39,193,382					(1,902,464) (47,645,018)
Unrestricted	(933,595,758)	7,260,330	(16,873,918)	(54,235,984	) (4,536,467)	) (4,179,564)	(10,473,405)	6	) (15,876,666	) (3,570,536)	(35,965,619	) 17,734,598	(1,921,140)	(1,056,234,129)
														(1,056,234,129)
Net Position - Total	(933,595,758)	7,260,330	(16,873,918)	(54,235,984	) (4,536,467	} (4,179,564)	(10,473,405)	G	) (15,876,666	) (3,570,536)	(35,965,619	) 17,734,598	(1,921,140)	(11000000100)
Net Position - Total Total Net Income	(933,595,758) 98,347,612			<b>(54,235,984</b> 8,518,539			<b>(10,473,405)</b> 1,695,263		<ul> <li>(15,876,666</li> <li>(22,856,353</li> </ul>		(35,965,619 3,335,552		(22,011,948)	

	GASB Audit	FASB Consol IFS	*complete recons are	available in separate schedules - this is generalized
Operating revenues and support				
Patient service revenue	\$ 867,690	867,690		
Foundation grant revenue				
Gifts and grants and contracts	6,587	6,587		
Student tuition and fees - net	-			
				JV revenue in Operating revenue for GASB, GASB
Other sources	39,013	39,628	615	lease differences
			-	
Total operating revenues and support	913,290	913,905	615	
			-	
Operating expenses			-	
				Pension/OPEB in benefits, plus GASB adjustments
Personnel costs	541,194	542,462	1,268	and GASB pension dif
	188,690	188,690	1,208	and GASB pension di
Supplies Purchased services	80,587	80,587	0	
	83,117	83,206	89	GASB Amortization difference
Other operating expenses				GASB Amortization difference
Depreciation and amortization	42,587	41,544	(1,043)	
Financing costs	-		-	
	0000475	000.000	-	
Total operating expenses	936,175	936,490	315	
			-	
Operating Loss	(22,885)	(22,585)	300	
			-	
Nonoperating gains (losses)			-	
Interest Expense	(5,334)		0	
Stimulus grants	14,900	14,900	(0)	
Net investment gains	79,379	79,379	0	Int/Div included here GASB
Net gains on interst rate swap valuation	3,084	3,084	(0)	
Other, net	(47)		47	Contributions here FASB
Total nonoperating gains (losses)	91,982	92,029	47	
			-	
Excess of revenues and support over expenses and losses				
before contributions	69,097	69,445	348	
			-	
Capital contributions	-	-	-	
Other contributions	10,762			
Pension adjustments and net position adjustments Prior		(119,542)	(119,542)	
			-	
Change in net position	79,859	(50,097)	(129,956)	Net effect of GASB adjustments
Net position:				
Net position, beginning of year	1,175,888	1,175,888		
· · /	-	-		
Net position, end of year	\$1,255,747	\$ 1,125,791		
		1,125,679 roun	dina	
		1,125,015 1001	un g	

## Income Statement Detail by Entity - Audited Atrium Health Navicent - Internal Reporting Only Through The Period Ending December 31, 2021

		Navicent Health	Navicent Health			Navicent Health							
	Navicent Health	Medical Center -	Medical Center -	Carlyle Place	Pine Pointe Hospice	Rehabilitation	Doctors Office Bldg -	Navicent Health Corporate Human	Navicent Health -	Navicent Health Co	Navicent Health -	Centra Professional	Navicent Health
	Medical Center	Peach	Baldwin	Navicent Health	Navicent Health	Hospital	Navicent Health	Resources	Elimination Company		Health Ventures	Indemnity	Physicians Group
Account Description													
Gross Revenue Inpatient Revenue													
0000100000100 Revenue - Inpatient	989.849.297	9.532.132	37.009.749	326.031	85.260	18,809,910							143.17
0000150000100 Revenue - Inpatient - Medicare	437,313,564	6,095,217	23,875,722	698,957	1,485,252	14,180,130							20,050,31
1000015000100 Revenue - Inpatient - Medicaid	188.816.705	1.738.537	8.242.292	-	107.265	542.855							8.815.2
40000150002100 Revenue - Inpatient - Commercial	205,101,347	3,071,185	6,445,275		44,108	2,648,862							12,203,42
40000150003100 Revenue - Inpatient - Self Pay	50,016,689	1,079,248	1,895,935	1,298,274	27,440	453,145							3,092,71
0000150004100 Revenue - Inpatient - Other	78,649,768	540,388	2,377,545		127,849	1,084,118	-			-			4,991,36
Total - Inpatient Revenue	1,949,747,370	22,056,707	79,846,518	2,323,262	1,877,174	37,719,021	0		) 0	0	0	) 0	49,296,2
Outpatient Revenue													
2000100000100 Revenue - Outpatient	652,429,013	22,959,014	58,104,931	-	119,037	3,834,893	-	-	-	-	17,708	- 1	(445,1
2000150000100 Revenue - Outpatient - Medicare	185,309,865	2,438,755	16,880,469	400,306	2,173,666	1,814,235	-	-		-	-		6,442,6
2000150001100 Revenue - Outpatient - Medicaid	55,345,354	771,577	2,847,714	-	61,313	414,347	-	-		-	-	-	3,387,4
2000150002100 Revenue - Outpatient - Commercial	135,090,343	1,685,975	8,145,767	-	-	1,160,899	-	-		-			5,614,6
2000150003100 Revenue - Outpatient - Self Pay	14,418,302	150,934	704,641	-	9,290	248,566	-	-	-	-	1,586		746,8
42000150004100 Revenue - Outpatient - Other	15,998,090	317,520	1,212,468	-	107,469	545,237	-	-	-	-	10,087	-	754,9
2006100000100 Revenue - Emergency	(594)	-		-	-	-	-	-	-	-	-		
2006150000100 Revenue - Emergency - Medicare	16,041,143	4,883,156	5,862,174	-	-	404	-	-	-	-	-		
2006150001100 Revenue - Emergency - Medicaid	25,196,269	2,693,805	5,595,285	-	-	-	-	-	-	-	-		-
2006150002100 Revenue - Emergency - Commercial	17,511,248	3,878,096	4,641,294	-	-	-	-	-	-	-	-		-
2006150003100 Revenue - Emergency - Self Pay	13,356,219 12,161,788	2,740,683 1,335,147	4,064,857	-	-	-	-	-	-	-	-	-	
2006150004100 Revenue - Emergency - Other				-	-	-	-	-	-	-	-	-	-
12015150000100 Revenue - Observation - Medicare 12015150001100 Revenue - Observation - Medicaid	45,014,863 8,774,043	860,995 105,820	2,148,290	-	-	238	-	-	-	-	-	-	-
	-,			-	-	-	-	-	-	-	-	-	
42015150002100 Revenue - Observation - Commercial 42015150003100 Revenue - Observation - Self Pav	23,811,076 4 348 992	214,067 122,532	884,245 508,060	-	-	200	-	-	-	-	-	-	-
	.,			-	-	-	-	-	-	-			
2015150004100 Revenue - Observation - Other	8,073,917	73,986	238,144	-	- 66.587	-	-	-	-	-			-
42017100000100 Revenue - Physician Professional Fees Total - Outpatient Revenue	1,232,879,931	45,232,061	114,082,027	400,306	2,537,361	898,635 8,917.655	- 0	-	- 0	- 0	29,380	- 0	69,676,7 86,178,0
Total - Outpatient Revenue	1,232,879,931	45,232,061	114,082,027	400,306	2,537,361	8,917,055	0		J U	U	29,380	0	80,178,0
Total Patient Revenue	3,182,627,301	67,288,768	193,928,545	2,723,568	4,414,535	46,636,676	0	(		0	29,380		135,474,2
		67%	59%	15%	57%	19%	0%	0'	6 0%	0%	100%	6 0%	(
Outpatient as Percent of Gross: Revenue Deductions Medicare Contractual 300515000100 Rev Deducts - Contractual Adiustment - Inoatient - Medicare	39%			(419.533)		6.626.265							19.095
Revenue Deductions Medicare Contractual 3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare 300815000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare	395,201,504 171,584,642	4,628,850 5,022,344	15,246,419 20,019,297	(419,533) 64,355		6,626,265 1,303,154	- - -	:		- - -	-	 	19,095,5
Revenue Deductions Medicare Contractual 3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare 3008150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare 3011150001000 Rev Deducts - Other - Medicare	395,201,504 171,584,642 7,188,041	4,628,850	15,246,419		32,647		 	-	-	-	-	 : :	19,095,5
Revenue Deductions Medicare Contractual 13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare 13008150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare 1301150000100 Rev Deducts - Other - Medicare	395,201,504 171,584,642	4,628,850 5,022,344	15,246,419 20,019,297	64,355	32,647		- - - 0	-	- - - - 0 0	- - - - 0			-
Revenue Deductions Medicare Contractual 300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare 300815000100 Rev Deducts - Other - Medicare 3027100000100 Rev Deducts - Other - Medicare 302710000100 Rev Deducts - Other - Medicare 302710000100 Rev Deducts - Reveal	395,201,504 171,584,642 7,188,041 (4,681,452)	4,628,850 5,022,344 249,428 -	15,246,419 20,019,297 2,644,156	64,355 598,240 -	32,647 32,891 - -	1,303,154 - -	-	- - -	- - - - 0 0				
Revenue Deductions Medicare Contractual 3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare 30015100000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare 3027100000100 Rev Deducts - Other - Medicare 3027100000100 Rev Deducts - Other - Medicare ITotal - Medicare Contractual ITotal - Medicare Contractual ICTF/UPL	395,201,504 171,584,642 7,188,041 (4,681,452)	4,628,850 5,022,344 249,428 -	15,246,419 20,019,297 2,644,156	64,355 598,240 -	32,647 32,891 - -	1,303,154 - -	-	-				- - - - 0	19,095,5
Revenue Deductions Medicare Contractual 3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare 30015100000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare 3027100000100 Rev Deducts - Other - Medicare 3027100000100 Rev Deducts - Other - Medicare ITotal - Medicare Contractual ITotal - Medicare Contractual ICTF/UPL	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735	4,628,850 5,022,344 249,428 - 9,900,622	15,246,419 20,019,297 2,644,156 - 37,909,872	64,355 598,240 -	32,647 32,891 - -	1,303,154 - -	-	-		- - - 0	- - - 0	- - - - 0 0 0	19,095,5
Revenue Deductions           Medicare Contractual           13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare           13005150000100 Rev Deducts - Other - Medicare           13027100000100 Rev Deducts - Other - Medicare           13027100000100 Rev Deducts - Other - Medicare           13027100000100 Rev Deducts - Bilveekly Graduate Medical Education           Total - Medicare Contractual           ICTF/UPL           13025100000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640)	4,628,850 5,022,344 249,428 - 9,900,622 (1,705,477)	15,246,419 20,019,297 2,644,156 37,909,872 (218,690)	64,355 598,240 - 243,062	32,647 32,891 - - 65,538	1,303,154 - - 7,929,419 -	-		- - - 0 0 -	-	- - - 0	-	- - - 19,095,5 (3,601,9
Revenue Deductions           Medicare Contractual           13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare           13005150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           1301210000100 Rev Deducts - Other - Medicare           1302510000100 Rev Deducts - Other - Medicare           1302510000100 Rev Deducts - Neweeky Graduate Medical Education           Image: Contractual Adjustment - Inpatient - Medicare           1302510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Image: True - KET/UPL           Medicaid Contractuals	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640)	4,628,850 5,022,344 249,428 - 9,900,622 (1,705,477)	15,246,419 20,019,297 2,644,156 37,909,872 (218,690)	64,355 598,240 - 243,062	32,647 32,891 - - 65,538	1,303,154 - - 7,929,419 -	-		- - - - - - - - - - - - - - - - - - -	-	- - - - 0 - - - -	-	- - - - - - - - - - - - - - - - - - -
Revenue Deductions           Medicare Contractual           13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare           13001510000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           13011510000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           1302710000100 Rev Deducts - Other - Medicare           1302510000100 Rev Deducts - NetWeedly Graduate Medical Education           Total - Medicare Contractual           1302510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - Left/UPL           1302510000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid	395,201,504 171,584,642 7,186,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640)	4,628,850 5,022,344 249,428 9,900,622 (1,705,477) (1,705,477)	15,246,419 20,019,297 2,644,156 37,909,872 (218,690) (218,690)	64,355 598,240 - 243,062	32,647 32,891 - - 65,538 - 0	1,303,154 - - 7,929,419 - 0	-		- - - - - - - - - - - - - - - - - - -	-	- 0	- 0	- - - - - - - - - - - - - - - - - - -
Revenue Deductions           Medicare Contractual           13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare           13008150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           1301210000100 Rev Deducts - Other - Medicare           1302710000100 Rev Deducts - Other - Medicare           1302510000100 Rev Deducts - Other - Medicare           1302510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - ICTF/UPL           Medicaid Contractuals           13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) 184,693,355	4,628,850 5,022,344 249,243 (1,705,477) (1,705,477) 1,053,128	15,246,419 20,019,297 2,644,156 37,909,872 (218,690) (218,690) 6,507,479	64,355 598,240 - 243,062	32,647 32,891 - - 65,538 - - 0 4,948	1,303,154 - - 7,929,419 - 0 412,460	-		- - - 0 0 - 0 - - - - - - -	-	- 0	- 0	(3,601,5 (3,601,5 (3,601,5
Revenue Deductions           Medicare Contractual           300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare           300815000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Invest           Interfuel           Interfuel           Net Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - Interfuel           Medicaid Contractual           3005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) 184,693,355 61,493,722 (3,457,197)	4,628,850 5,022,344 249,428 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808 300,000	15,246,419 20,019,297 2,644,156 37,909,872 (218,690) (218,690) (218,690)	64.355 598,240 - 243,062 - 0 - - - - - - -	32,647 32,891 - - - - - - - - - - - - - - - - - - -	1,303,154 - - 7,929,419 - 0 412,460 329,489 - -	0	-	) 0 - - -	- 0	- 0	- 0	19,095,1 (3,601,5 (3,601,5 8,119,5 70,5
Revenue Deductions           Medicare Contractual           3005150000100         Rev Deducts - Contractual Adjustment - Inpatient - Medicare           3008150000100         Rev Deducts - Contractual Adjustment - Outpatient - Medicare           301115000100         Rev Deducts - Ontractual Adjustment - Outpatient - Medicare           302710000100         Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - KTF/UPL           Medicaid Contractual Adjustment - Inpatient - Medicaid           3005150001100         Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150001100         Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150001100         Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150001100         Rev Deducts - Contractual Adjustment - Uppatient - Medicaid           3001150001100         Rev Deducts - Contractual Adjustment - Uppatient - Medicaid	395,201,504 171,584,642 7,188,041 (4,681,452) (22,130,640) (22,130,640) (22,130,640) (22,130,640) 184,693,355 61,493,722	4 628 850 5.022,344 2.49,428 - 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808	15,246,419 20,019,297 2,644,156 37,909,872 (218,690) (218,690) 6,507,479	64,355 598,240 - 243,062	32,647 32,891 - - 65,538 - - 0 4,948	1,303,154 - - 7,929,419 - 0 412,460	-		) 0 - - -	-	- 0	- 0	19,095, (3,601, (3,601, 8,119,; 70,
Revenue Deductions           Medicare Contractual           300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare           301150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           302710000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Other - Medicare           302510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - Kert/UPL           Medicaid Contractuals           300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Unpatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           3011150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3011150001100 Rev Deducts - Contractual Adjustment - Medicaid           3011150001100 Rev Deducts - Contractual Adjustment - Medicaid           3011150001100 Rev Deducts - Contractual Adjustment - Medicaid           Total - Medicaid Contractuals           Soarian and Other Contractuals	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) 184,693,355 61,493,722 (3,457,197)	4,628,850 5,022,344 249,428 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808 300,000	15,246,419 20,019,297 2,644,156 - 37,909,872 (218,690) (218,690) (218,690) (218,690) - 10,083,889 - 10,083,889 - 16,591,368	64355 558240 	32,647 32,891 - - - - - - - - - - - - - - - - - - -	1,303,154 - - 7,929,419 - 0 412,460 329,489 - -	0	-	) 0 - - -	- 0	- 0	- 0	19,095, (3,601, (3,601, 8,119,; 70,
Revenue Deductions           Medicare Contractual           30051550000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare           3008150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           301150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           3027100000100 Rev Deducts - Other - Medicare           3027100000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - ICFF/UPL           302510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - ICFF/UPL           3005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Unpatient - Medicaid           3011150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           30261500001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3026150000100 Rev Deducts - Graduate Medical Education - Medicaid           3026150000100 Rev Deducts - Contractuals           Soarian and Other Contractuals           30051000000100 Rev Deducts - Contractual Adjustment - Inpatient	395,201,504 171,584,642 7,188,041 (4,681,452) (22,130,640) (23,130,130) (23,130,130) (23,130,130) (23,130,130) (23,130,130) (23,130,130) (23,130,130) (23,130,130) (23,130,130) (23	4,628,850 5,022,344 249,228 (1,705,477) (1,705,477) 1,053,128 2,626,808 300,000 	15,246,419 20,019,297 2,644,156 - 37,909,872 (218,690) (218,690) (218,690) (218,690) - - - - - - - - - - - - - - - - - - -	64.355 598,240 - 243,062 - 0 - - - - - - -	32,647 32,891 - - - - - - - - - - - - - - - - - - -	1,303,154 7,929,419 0 412,460 329,499 - 741,948	0	-	) 0 - - -	- 0	- 0	- 0	(3,601,5 (3,601,5 (3,601,5 (3,601,5 (3,601,5 (3,601,5 (3,601,5)) (3,601,5) (3,601,5))) (3,601,5))(3,601,5))) (3,601,5))(3,601,5))) (3,601,5))(3,601,5))
Revenue Deductions           Medicare Contractual           300515000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           301151000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - ICTF/UPL           Medicaid Contractuals           3005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           302615000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Inpatient           Soarian and Other Contractuals           300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Impatient           300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) 184,693,355 61,493,722 (3,457,197) 242,729,880	4 628 850 5,022,344 249,428 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808 300,000 2,979,936	15,246,419 20,019,297 2,2644,156 	64355 558240 	32,647 32,891 - - - - - - - - - - - - - - - - - - -	1,303,154 - - 7,929,419 - 0 412,460 329,489 - 741,948	0	-	) 0 - - -	- 0	- 0 - - - 0	- 0	19,095,5 (3,601,5 (3,601,5 8,119,5 70,5 8,119,6
Revenue Deductions           Medicare Contractual Adjustment - Inpatient - Medicare           13005150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           13005150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           130115000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           13027100000100 Rev Deducts - Medicare           1302510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - TCFT/UPL           13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           1300510000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           1300510000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial	395,201,504 171,584,642 7,188,041 (4,681,452) (22,130,640) (23,130,130) (23,130,130) (23,130,130) (23,130,130) (23,130,130) (23,130,130) (23,130,130) (23,130,130) (23,130,130) (23	4,628,850 5,022,344 249,228 (1,705,477) (1,705,477) 1,053,128 2,626,808 300,000 	15,246,419 20,019,297 2,644,156 - 37,909,872 (218,690) (219,690) (218,690) (219,690) (	64355 558240 - - - - - - - - - - - - - - - - - - -	32,647 32,891 - - - - 0 - - 0 - - - - - - - - - - -	1,303,154 7,929,419 0 412,460 329,499 - 741,948	0	-	) 0 - - -	- 0	0	- 0	(3,601,5 (3,601,5 (3,601,5 8,119,5 70,5 8,190,8
Revenue Deductions           Medicare Contractual           13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare           1301515000100 Rev Deducts - Other - Medicare           1302170000100 Rev Deducts - Other - Medicare           1302510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - ICTF/UPL           Medicard Contractual           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           1300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           1300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           1300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Other           1300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           1300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Inpatient - Contractual Adjustment - Inpatient - Contractual Adjustment - Inpatient - Inpatient - Contractual Adjustment - I	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (23,130,640) (23,130,640) (24,130,640)	4 628 850 5.022 344 249,428 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808 300,000 - 3,979,936	15,246,419 20,019,297 2,644,156 37,909,872 (218,690) (218,591) (218,591) (218,591) (218,595) (21	64355 558240 - - - - - - - - - - - - - - - - - - -	32,647 32,891 - - - - 0 - - 0 - - - - - - - - - - -	1,303,154 - - 7,929,419 - 0 412,460 329,489 - 741,948 - 1,425,487 745,105	0	-	) 0 - - -	- 0	- - - - - - - - - - - - - - - - - - -	- 0	(3,601,5 (3,601,5 (3,601,5 8,119,5 70,5 8,190,8
Revenue Deductions           Medicare Contractual           3005150000100 Rev Deducts - Contractual Adjustment - Dutpatient - Medicare           300150000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - REF/UPL           Medicaid Contractuals           300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Uppatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Uppatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Uppatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Inpatient           3005150001100 Rev Deducts - Contractual Adjustment - Impatient 3005150001100 Rev Deducts - Contractual Adjustment - Impatient 3005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           30051500001100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           30051500001100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           30051500001100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           30051500001100 Rev Deducts - Contractual Adjustment - Contractual Adjustment - Contractual Adjustment - Contractual Adjustment - Commercial           30051500001100 Rev	395,201,504 171,584,642 7,186,041 (4,681,452) (22,130,640) (23,130,640	4,628,850 5,022,344 2,49,428 - 9,900,622 (1,705,477) (	15,246,419 20,019,297 2,644,156 37,909,872 (218,690) (218,591,290) (21	64355 558240 - - - - - - - - - - - - - - - - - - -	32,647 32,891 - - - - 0 - - 0 - - - - - - - - - - -	1,303,154 - - - - - - - - - - - - - - - - - - -	0	-	) 0 - - -	- 0	- - - - - - - - - - - - - - - - - - -	- 0	19,095, (3,601
Revenue Deductions           Medicare Contractual           13005150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           13005150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           13015150000100 Rev Deducts - Cother - Medicare           13027100000100 Rev Deducts - Other - Medicare           1302510000100 Rev Deducts - Nolgent Care Trust Fund/Upper Payment Limit           Total - ICFF/UPL           13005150001100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - ICFF/UPL           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           130051500001100 Rev Deducts - Contractual Adjustment - Uptatient - Medicaid           13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005100000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           13005100000100 Rev Deducts - Contractual Adjustmen	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (23,130,640)	4,628,850 5,022,344 2,49,228 - 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808 300,000 - - - 3,979,936 - - 1,716,867 454,877 454,877 454,877 - - 3,424,130 1,119,193	15,246,419 20,019,297 2,644,156 37,909,872 (218,690) (218,591) (218,591) (218,591) (218,595) (21	64355 558240 - - - - - - - - - - - - - - - - - - -	32,647 32,891 - - - - 0 - - 0 - - - - - - - - - - -	1,303,154 7,929,419 0 412,460 329,489 741,948 1,425,487 741,948	0	-	) 0 - - -	- 0	- - - - - - - - - - - - - - - - - - -	- 0	19,095, (3,601,5 (3,601,5 8,119,2 70,5 8,190,8 4,124,0
Revenue Deductions           Medicare Contractual           300515000100         Rev Deducts - Contractual Adjustment - Inpatient - Medicare           301150000100         Rev Deducts - Other - Medicare           302710000100         Rev Deducts - Other - Medicare           302710000100         Rev Deducts - Other - Medicare           302710000100         Rev Deducts - Other - Medicare           302510000100         Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - KTF/UPL         Medicaid Contractual           300515000100         Rev Deducts - Contractul Adjustment - Inpatient - Medicaid           300515000100         Rev Deducts - Contractul Adjustment - Outpatient - Medicaid           300515000100         Rev Deducts - Contractul Adjustment - Inpatient - Medicaid           300515000100         Rev Deducts - Contractul Adjustment - Inpatient - Medicaid           300515000100         Rev Deducts - Contractul Adjustment - Inpatient - 3005150002100           300515000100         Rev Deducts - Contractul Adjustment - Inpatient - Commercial           300515000100         Rev Deducts - Contractul Adjustment - Outpatient - Commercial           300515000100         Rev Deducts - Contractul Adjustment - Outpatient - Commercial           300515000100         Rev Deducts - Contractul Adjustment - Outpatient - Commercial           3005150000100 <td>395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) (22,130,640) 184,693,355 61,493,725 (3,457,197) 242,729,880 137,053,445 75,881,393 91,829,877 18,829,864 381</td> <td>4,628,850 5,022,344 2,49,428 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808 3,00,000 3,000,000 3,979,936</td> <td>15,246,419 20,019,297 2,644,156 37,909,872 (218,690) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (219,591,19</td> <td>64355 5586240 </td> <td>32,647 32,891 - - - - 0 - - - - - - - - - - - - - -</td> <td>1,303,154 - 7,929,419 - 0 412,460 329,489 - 741,948 - 1,425,487 745,105 - 419,393 354,411 7,114</td> <td>0</td> <td>-</td> <td>) 0 - - -</td> <td>- 0</td> <td>- 0 </td> <td></td> <td>19,095, (3,601, (3,601, 8,119, 70, 8,190, 8,190, 4,124,1 4,124,1</td>	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) (22,130,640) 184,693,355 61,493,725 (3,457,197) 242,729,880 137,053,445 75,881,393 91,829,877 18,829,864 381	4,628,850 5,022,344 2,49,428 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808 3,00,000 3,000,000 3,979,936	15,246,419 20,019,297 2,644,156 37,909,872 (218,690) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (219,591,19	64355 5586240 	32,647 32,891 - - - - 0 - - - - - - - - - - - - - -	1,303,154 - 7,929,419 - 0 412,460 329,489 - 741,948 - 1,425,487 745,105 - 419,393 354,411 7,114	0	-	) 0 - - -	- 0	- 0 		19,095, (3,601, (3,601, 8,119, 70, 8,190, 8,190, 4,124,1 4,124,1
Revenue Deductions           Medicare Contractual           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicare           3008150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           3027100000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           3027100000100 Rev Deducts - Other - Medicare           302510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - Medicare Contractual           302510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - ICTF/UPL           Medicaid Contractuals           3005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Uppatient - Medicaid           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Other           3008150000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3008150000100 Rev Deducts - Contractual Adjustment - Outpatient - Legacy           3008150000100 Rev Deducts - Contractual Adjustment - Outpatient - Utpatient - Adjustment - Outpatient	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (23,130,640)	4,628,850 5,022,344 2,49,228 - 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808 300,000 - - - 3,979,936 - - 1,716,867 454,877 454,877 454,877 - - 3,424,130 1,119,193	15,246,419 20,019,297 2,644,156  37,909,872 (218,690) (219,690) (218,690) (219,690)	64355 558240 - - - - - - - - - - - - - - - - - - -	32,647 32,891 - - - - - 0 - - - - - - - - - - - - -	1,303,154 7,929,419 0 412,460 329,489 741,948 1,425,487 741,948	0	-	) 0 - - -	- 0	- - - - - - - - - - - - - - - - - - -		19,095,5 (3,601,5 (3,601,5 8,119,5 70,5 8,190,4 4,124,0 4,124,0 7,919,3
Revenue Deductions           Medicare Contractual Adjustment - Inpatient - Medicare           3005150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           301150000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Other - Medicare           302510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - KCF/UPL           Medicaid Contractuals           300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           3005150002100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           3008150000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3008150000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3008150000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3008150000100 Rev Deducts - Contractual Adjustment - Outpatient - Other           <	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) (22,130,640) 184,693,355 61,493,725 (3,457,197) 242,729,880 137,053,445 75,881,393 91,829,877 18,829,864 381	4 628 850 5,022,344 249,428 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,666,808 300,000 3,979,936 	15,246,419 20,019,297 2,644,156 37,909,872 (218,690) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (218,591,490) (219,591,19	64355 5586240 	32,647 32,891 - - - - - - - - - - - - - - - - - - -	1,303,154 - - 7,929,419 - 0 412,460 329,489 - 741,948 - - - - - - - - - - - - - - - - - - -	0	-	) 0 - - -	- 0	0 		19,095,5 (3,601,5 (3,601,5 8,119,5 70,5 8,190,4 4,124,0 4,124,0 7,919,3
Revenue Deductions           Medicare Contractual           3005150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           3001510000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           300110000100 Rev Deducts - Other - Medicare           300210000100 Rev Deducts - Other - Medicare           300210000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - TEF/UPL           Medicaid Contractual           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100 Rev Deducts - Contractual Adjustment - Nedicaid           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           3005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           3005100000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3005100000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3005100000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3005100000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           30051000000100 Rev Deducts - Outmarctual Adjustment - Outpatie	395,201,504 171,584,642 7,188,041 (4,681,452) (22,130,640	4,628,850 5,022,344 2,49,428 - 9,900,622 (1,705,477) (1,705,477) (1,705,477) 1,053,128 2,626,808 3,00,000 - - 1,716,867 4,54,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 1,119,189 - 3,3,424,924 - - - - - - - - - - - - - - - - - - -	15,246,419 20,019,297 2,644,156 37,909,872 (218,690) (21	64355 5586240 	32,647 32,891 - - - - - 0 - - - - - - - - - - - - -	1,303,154 - 7,929,419 - 0 412,460 329,489 - 741,948 - 1,425,487 745,105 - 419,393 354,411 7,114	0	-	) 0 - - -	- 0	- 0 		(3,601,5 (3,601,5 (3,601,5 70,5 70,5 8,119,6 8,119,6 4,124,0 4,124,0 7,919,7
Revenue Deductions           Medicare Contractual           300515000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           301150000100 Rev Deducts - Other - Medicare           302710000100 Rev Deducts - Other - Medicare           302510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - HCTF/UPL           Medicare Contractual           3005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           3005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Other           3005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           301150000100 Rev Deducts - Otherer - C	395,201,504 171,584,642 7,186,041 (4,661,452) 566,292,735 (22,130,640)	4 628 850 5,022,344 249,428 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,666,808 300,000 3,979,936	15,246,419 20,019,297 2,244,156 (218,690) (219,571) (219	64355 598240 243062 - - - - - - - - - - - - - - - - - - -	32,647 32,891 - - - - - - - - - - - - - - - - - - -	1,303,154 - - 7,929,419 - 0 412,460 329,489 - - - - - - - - - - - - - - - - - - -		-		0	- - - - - - - - - - - - - - - - - - -		19,095, (3,601, (3,601, 8,119, 70, 8,190, 4,124, 4,124, 4,124, 4,124, 4,1590,
Revenue Deductions           Medicare Contractual           3005150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           3001510000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           300110000100 Rev Deducts - Other - Medicare           300210000100 Rev Deducts - Other - Medicare           300210000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - TEF/UPL           Medicaid Contractual           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100 Rev Deducts - Contractual Adjustment - Nedicaid           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           3005100000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           3005100000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3005100000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3005100000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3005100000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           30051000000100 Rev Deducts - Outmarctual Adjustment - Outpatie	395,201,504 171,584,642 7,188,041 (4,681,452) (22,130,640	4,628,850 5,022,344 2,49,428 - 9,900,622 (1,705,477) (1,705,477) (1,705,477) 1,053,128 2,626,808 3,00,000 - - 1,716,867 4,54,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 3,3,424,877 - 1,119,189 - 3,3,424,924 - - - - - - - - - - - - - - - - - - -	15,246,419 20,019,297 2,644,156 37,909,872 (218,690) (21	64355 5586240 	32,647 32,891 - - - - - - - - - - - - - - - - - - -	1,303,154 - - 7,929,419 - 0 412,460 329,489 - 741,948 - - - - - - - - - - - - - - - - - - -	0	-		0	0 		19,095, (3,601, (3,601, 8,119, 70, 8,190, 4,124, 4,124, 4,124, 4,124, 4,1590,
Revenue Deductions           Medicare Contractual           3005150000100         Rev Deducts - Contractual Adjustment - Inpatient - Medicare           3005150000100         Rev Deducts - Contractual Adjustment - Outpatient - Medicare           3007100000100         Rev Deducts - Contractual Adjustment - Outpatient - Medicare           3007100000100         Rev Deducts - Indiventive Adjustment - Outpatient - Medicare           3007100000100         Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - KET/UPL         Medicaid Contractual           3000510000100         Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           300051000100         Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           300051000100         Rev Deducts - Contractual Adjustment - Inpatient           3000510000100         Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3000510000100         Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3000510000100         Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3000510000100         Rev Deducts - Other -	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (23,130,640) (242,729,880 184,693,355 61,493,722 (3,457,197) (242,729,880 137,053,445 75,881,393 91,829,877 18,829,864 3,300,000 4,300,000 (1,789,642 1,789,642 1,789,642	4,628,850 5,022,344 2,49,428 - 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808 3,00,000 3,00,000 3,079,936 - 1,716,867 4,54,8774,54,877 4,54,877 4,54,8774,54,877 4,54,877 4,54,8774,54,877 4,54,877 4,54,8774,54,877 4,54,8774,54,877 4,54,8774,54,877 4,54,8774,54,877 4,54,8774,54,877 4,54,8774,54,877 4,54,9774,54,977 4,54,9774,54,977 4,54,9774,54,977 4,54,9774,54,977 4,54,977 4,54,9774,54,977 4,54,977 4,54,9774,54,977 4,54,977 4,54,9774,54,977 4,54,977 4,54,977 4,54,9774,54,977 4,54,977 4,54,9774,54,977 4,54,977 4,54,9774,5477 4,54,977 4,54,9777 4,54,97774,5477 4,54,9777 4,54,97777 4,54,97777777777777777777777777777777777	15,246,419 20,019,297 2,644,156 - 37,909,872 (218,690) (218,591,260) (219,571) (219,57	64355 598240 243062 - - - - - - - - - - - - - - - - - - -	32,647 32,891 - - - - 0 - - - - - - - - - - - - - -	1,303,154 - 7,929,419 - 0 412,460 329,489 - 741,948 - 1,425,487 745,105 - 419,393 354,411 7,419,481 11,540,775 - 14,492,285		-		0	0 		19,095,5 (3,601,5 (3,601,5 70,5 70,5 8,119,4 4,124,0 4,124,0 7,919,7 41,590,5 53,634,7
Revenue Deductions           Medicare Contractual Adjustment - Inpatient - Medicare           1300515000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           1301510000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           13027100000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           13027100000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - Medicare Contractual           1302510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - REF/UPL           Medicaid Contractuals           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005150000100 Rev Deducts - Contractual Adjustment - Outpatient - Commercial           13005150000100 Rev Deducts - Outractual Adjustment - Outpatient - Commercial           13005150000100 Rev Deducts - Outractual Adjustment - Outpatient - Commercial           13005150000100 Rev Deducts - Outractual Adjustment - Outpatient - Commercial	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (3,457,197) 242,729,880 137,053,445 75,881,393 91,829,864 381 1,108,086,468 4,330,000 1,789,642 1,437,777,070	4 628 850 5,022,344 249,428 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,666,808 300,000 3,979,936	15,246,419 20,019,297 2,244,156 (218,690) (219,571) (219	64355 598240 243062 - - - - - - - - - - - - - - - - - - -	32,647 32,891 - - - - - - - - - - - - - - - - - - -	1,303,154 - - - - - - - - - - - - - - - - - - -		-		0	0		19,095,5 (3,601,5 (3,601,5 70,5 70,5 8,119,4 4,124,0 4,124,0 7,919,7 41,590,5 53,634,7
Revenue Deductions           Medicare Contractual Adjustment - Inpatient - Medicare           3005150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare         3008150000100 Rev Deducts - Other - Medicare           30021700000100 Rev Deducts - Other - Medicare         300210000000         See Veducts - Selweekly Graduate Medical Education           Interf.vpl.           Medicale Contractual           Medicare Contractual           Source Contractual Adjustment - Inpatient - Medicaid           Source Contractual Adjustment - Outpatient - Medicaid           Medicaid Contractuals           Source Contractual Adjustment - Outpatient - Medicaid           Source Contractual Adjustment - Inpatient           Source Medica: Contractual Adjustment - Outpatient - Commercial           Medicaid Contractual Adjustment - Inpatient           Source Contractual Adjustment - Outpatient - Commercial           Source Contractual Adjustment - Outpatient - Commercial           Source Contractual Adjustment - Outpatient - Other <td>395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (23,130,640) (242,729,880 137,053,445 75,881,393 - 91,829,877 18,829,864 381 1,108,086,468 4,300,000 - 1,789,642 (1,437,771,070) 68,606,063 (6,478,841)</td> <td>4 628,850 5,022,344 249,428 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808 300,000 30,000 30,979,936 - - - 1,716,867 4,54,877 4,54,877 4,54,877 4,54,877 4,54,877 4,54,877 4,54,877 4,54,877 4,54,877 4,54,877 4,54,873 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,8754,54,875 4,54,875 4,54,8754,54,875 4,54,8754,555 4,555 4,555 4,555 4,555 4,555 4,5554,555 4,5555 4,5555 4,5555 4,555564,55556 4,555567 4,5555676 4,555676766766766766766767676767676767676</td> <td>15,246,419 20,019,297 2,644,156 - 37,909,872 (218,690) (218,591,260) (219,571) (219,57</td> <td>64355 598240 243062 - - - - - - - - - - - - - - - - - - -</td> <td>32,647 32,891 - - - - 0 - - - - - - - - - - - - - -</td> <td>1,303,154 - - 7,929,419 - 0 412,460 329,489 - - 741,948 - 419,333 354,411 7,114 11,540,775 - - - - - - - - - - - - - - - - - -</td> <td></td> <td>-</td> <td></td> <td>0</td> <td>0 </td> <td></td> <td>(3,601,5 (3,601,5 (3,601,5 8,119,5 70,5 8,119,6 8,119,6 8,119,6 4,124,0 4,124,0 4,124,0 5,3,634,7 1,129,5</td>	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (23,130,640) (242,729,880 137,053,445 75,881,393 - 91,829,877 18,829,864 381 1,108,086,468 4,300,000 - 1,789,642 (1,437,771,070) 68,606,063 (6,478,841)	4 628,850 5,022,344 249,428 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808 300,000 30,000 30,979,936 - - - 1,716,867 4,54,877 4,54,877 4,54,877 4,54,877 4,54,877 4,54,877 4,54,877 4,54,877 4,54,877 4,54,877 4,54,873 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,875 4,54,874 4,54,8754,54,875 4,54,875 4,54,8754,54,875 4,54,8754,555 4,555 4,555 4,555 4,555 4,555 4,5554,555 4,5555 4,5555 4,5555 4,555564,55556 4,555567 4,5555676 4,555676766766766766766767676767676767676	15,246,419 20,019,297 2,644,156 - 37,909,872 (218,690) (218,591,260) (219,571) (219,57	64355 598240 243062 - - - - - - - - - - - - - - - - - - -	32,647 32,891 - - - - 0 - - - - - - - - - - - - - -	1,303,154 - - 7,929,419 - 0 412,460 329,489 - - 741,948 - 419,333 354,411 7,114 11,540,775 - - - - - - - - - - - - - - - - - -		-		0	0 		(3,601,5 (3,601,5 (3,601,5 8,119,5 70,5 8,119,6 8,119,6 8,119,6 4,124,0 4,124,0 4,124,0 5,3,634,7 1,129,5
Revenue Deductions           Medicare Contractual           3005150000100         Rev Deducts - Contractual Adjustment - Outpatient - Medicare           3005150000100         Rev Deducts - Contractual Adjustment - Outpatient - Medicare           300710000100         Rev Deducts - Contractual Adjustment - Outpatient - Medicare           300710000100         Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - IEE/UPL           Medicaid Contractual           3005150001100           Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - IEE/UPL           Medicaid Contractual           3005150001100           Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           300515000100           Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           3005150000100           Rev Deducts - Contractual Adjustment - Inpatient - Commercial           3005150000100           Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3005150000100           Saarian and Other Contractual Adjustment - Outpatient - Commercial           3005150000100         Rev Deducts - Contractual Adjustment -	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (3,457,197) 242,729,880 137,053,445 75,881,393 91,829,864 381 1,108,086,468 4,330,000 1,789,642 1,437,777,070	4,628,850 5,022,344 2,49,428 - 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,626,808 3,00,000 3,00,000 3,079,936 - 1,716,867 4,54,8774,54,877 4,54,877 4,54,8774,54,877 4,54,877 4,54,8774,54,877 4,54,877 4,54,8774,54,877 4,54,8774,54,877 4,54,8774,54,877 4,54,8774,54,877 4,54,8774,54,877 4,54,8774,54,877 4,54,9774,54,977 4,54,9774,54,977 4,54,9774,54,977 4,54,9774,54,977 4,54,977 4,54,9774,54,977 4,54,977 4,54,9774,54,977 4,54,977 4,54,9774,54,977 4,54,977 4,54,977 4,54,9774,54,977 4,54,977 4,54,9774,54,977 4,54,977 4,54,9774,5477 4,54,977 4,54,9777 4,54,97774,5477 4,54,9777 4,54,97777 4,54,97777777777777777777777777777777777	15,246,419 20,019,297 2,644,156 - 37,909,872 (218,690) (218,591,260) (219,571) (219,57	64355 598240 243062 - - - - - - - - - - - - - - - - - - -	32,647 32,891 - - - - 0 - - - - - - - - - - - - - -	1,303,154 - - - - - - - - - - - - - - - - - - -		-			0		19,095,5 (3,601,5 (3,601,5 70,5 8,119,6 70,5 8,190,6 4,124,0 4,124,0 4,124,0 53,634,7 1,129,5 706,2
Revenue Deductions           Medicare Contractual           3005150000100         Rev Deducts - Contractual Adjustment - Outpatient - Medicare           3005150000100         Rev Deducts - Contractual Adjustment - Outpatient - Medicare           300710000100         Rev Deducts - Onter - Medicare           300710000100         Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - REF/UPL         Medicaid Contractual           3005150000100         Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100         Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           3005150000100         Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           3005150000100         Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100         Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100         Rev Deducts - Contractual Adjustment - Inpatient - Commercial           3005150000100         Rev Deducts - Contractual Adjustment - Loptatient - Commercial           3005150000100         Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3005150000100         Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3005150000100         Rev Deducts - Contractual Adjustment - Outpatient - Commercial           3001150000100         Re	395,201,504 171,584,642 7,188,041 (4,681,452) (22,130,640) (23,457,197) (24,275,881,393) (24,275,881)(24,275,881) (24,275,881)(24,275,881) (24,275,881)(24,275,881)(24,275	4,628,850 5,022,344 249,428 9,900,622 (1,705,477) (1,7	15,246,419 20,019,297 2,644,156 (218,690) (219,690) (219	64355 558240 - - - 0 - - - - - - - - - - - - - - -	32,647 32,891 - - - - 0 - - - - - - - - - - - - - -	1,303,154 - - - - - - - - - - - - - - - - - - -	0				0		19,095,5 (3,601,9 (3,601,9 ,70,9 8,119,9 ,70,9 8,190,8 ,1124,0 ,70,90,9 ,70,90,90,90,90,90,90,90,90,90,90,90,90,90
Revenue Deductions           Medicare Contractual           300515000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           3001510000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           3001510000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           3001510000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - Medicare Contractual           3005150000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - TCFT/UPL           Medicare Contractual           30051500001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           30051500001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           30051500001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           3005150000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           30051500000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           30051500000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           30051500000100 Rev Deducts - Outractual Adjustment - Contactial - Commercial           3005150000100 Rev Deducts - Outractual Adjustment - Contactial - Commercial           3005150000100 Rev Deducts - Outractual Adjustment - Commercial           30011100000100 Rev Deducts - Outractual Adjustment - Comm	395,201,504 171,584,642 7,188,041 (4,681,452) (22,130,640) (23,457,197) (24,275,881,393) (24,275,881)(24,275,881) (24,275,881)(24,275,881) (24,275,881)(24,275,881)(24,275	4,628,850 5,022,344 249,428 9,900,622 (1,705,477) (1,7	15,246,419 20,019,297 2,644,156 (218,690) (219,690) (219	64355 558240 - - - 0 - - - - - - - - - - - - - - -	32,647 32,891 - - - - 0 - - - - - - - - - - - - - -	1,303,154 7,929,419 0 0 412,460 329,489 741,948 1,425,487 745,105 - 14,492,887 14,492,285 519,309 1,169 118,861	0				0		(3,601,9 (3,601,9 (3,601,9 (3,601,9 
Revenue Deductions           Medicare Contractual Adjustment - Inpatient - Medicare           13005150000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           130115000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           1302710000100 Rev Deducts - Contractual Adjustment - Outpatient - Medicare           1302710000100 Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           Total - Rev Deducts - Indigent Care Trust Fund/Upper Payment Limit           10000100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Outpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           13005150001100 Rev Deducts - Contractual Adjustment - Inpatient - Medicaid           1300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           1300515000100 Rev Deducts - Contractual Adjustment - Inpatient - Commercial           13005150002100 Rev Deducts - Contractual Adjustment - Uppatient - Commercial           13001150002100 Rev Deducts - Other - Commercial           13011150002100 Rev Deducts - Other - Commercial           13011110000010 Rev Deduct	395,201,504 171,584,642 7,188,041 (4,681,452) 569,292,735 (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (22,130,640) (3,457,197) 242,729,880 137,053,445 75,881,393 	4 628 850 5,022,344 249,428 9,900,622 (1,705,477) (1,705,477) 1,053,128 2,666,808 300,000 3,3979,936 - - - - - 3,3979,936 - - - - - - - - - - - - - - - - - - -	15,246,419 20,019,297 2,644,156 (218,690) (219,571) (219	64355 5582.20 - 243,062 - - - - - - - - - - - - - - - - - - -	32,647 32,891 - - - - - - - - - - - - - - - - - - -	1,303,154 7,929,419 7,929,419 0 412,460 329,489 741,948 741,948 - 1,425,487 745,105 - 419,393 358,411 7,114 11,540,775 - 14,492,285 519,309 1,169 118,861 639,339	0 0 0 0 0 			0	0 		19,095,5 - - - - - - - - - - - - -

## Income Statement Detail by Entity - Audited Atium Health Navicent - Internal Reporting Only Through The Period Ending December 31, 2021

	Navicent Health Medical Center	Navicent Health Medical Center - Peach	Navicent Health Medical Center - Baldwin	Carlyle Place Navicent Health	Pine Pointe Hospice Navicent Health	Navicent Health Rehabilitation Hospital	Doctors Office Bldg - Navicent Health	Navicent Health Corporate Human Resources	Navicent Health - Elimination Company	Navicent Health Co	Navicent Health - Health Ventures	Centra Professional Indemnity	Navicent Health Physicians Group
t Description													
0100 Rev Deducts - Bad Debt - Recoveries	(4,067,892)	(316,089)	(11,271)	-	-	(56,311)	-		-	(2,500)			(23,688,51
0100 Rev Deducts - Discounts - Self Pay	33,433,114	1,345,228	2,017,580	-	-	249,352	-	-	-	-	-	-	1,041,18
Total - Bad Debt	119,002,857	6,801,641	11,486,208	6,305	8,731	605,279	3,267	0	0	396,118	17,532	0	10,753,53
Total Deductions	2,465,304,696	47,847,252	136,936,426	207,182	391,065	24,408,271	3,267	0	0	396,118	30,122	0	89,908,59
Net Patient Revenue	717,322,605	19,441,516	56,992,119	2,516,386	4,023,470	22,228,405	(3,267)	0	0	(396,118)	(742)	) 0	45,565,68
Gifts and Grants and Contracts													
0100 Oth Op Rev - Clinical Studies	15,552			-			-			-			
0100 Oth Op Rev - State	758,429	-	-	73,221		-		-		300,958	-	-	-
0100 Oth Op Rev - Grants - Miscellaneous	5,242,626	-	83,000	-		-		-		79,010	-	-	80,00
0100 Oth Op Rev - Federal - COVID19	8,130,559	280,008	6,059,608	12,480		231,605		-		-	-	-	185,73
0100 Oth Op Rev - State - COVID19	(45,352)	-		-		-		-		-	-	-	-
Total - Gifts and Grants and Contracts	14,101,814	280,008	6,142,608	85,701	0	231,605	0	0	0	379,969	0	0	265,73
Intercompany Revenue													
0100 Interco Revenue	55	-	-	-	-	-	-	-	-	-	-	-	-
Total - Intercompany Revenue	55	0	0	0	0	0	0	0	0	0	0	0	
Other													
0100 Oth Op Rev - Management Fees	89,517	-		-					-	2,601,881			-
0100 Oth Op Rev - Rx - Retail Sales	55,953	3,342		-					-	-			
0100 Oth Op Rev - Retail Sales	563,232	-		-			-	-		-	6,056		
0100 Oth Op Rev - Rental Income	1,963,467	32,023	396,042	7,600			10,495,224	-	(4,752,095)	545,907	121,333		51,0
0100 Oth Op Rev - Rental Income - Contra	(108,738)	-	(150,089)	-			(3,717,646)	-		(150,883)	(118,688)	) -	(48,1
0100 Oth Op Rev - Activity Fees	1,144,679	-	(5,344)	724,559			-	-		123,345			-
0100 Oth Op Rev - Food Services	4,348	(3,815)		279,836		8,002	-	-		-			-
3100 Oth Op Rev - Contract - Self Pay	2,292,900	1,454	26,790	984,067			-	-		-			-
0100 Oth Op Rev - Medical Record Abstracts	11,596	-	-	-	-	-	-	-	-	-	-	-	-
0100 Oth Op Rev - Miscellaneous	889,265	21,796	65	596,008	-	1,274	-	-	(214,182)	852	6,807	-	3,740,93
0100 Oth Op Rev - Parking	(6,758)	-	-	-	-	-	-	-	-	1,278,230	-	-	-
0100 Oth Op Rev - General Services	125,580	481,657	596,859	325,094	262,557	-			(15,466,504)	242,893	-	11,933,053	594,2
0100 Oth Op Rev - Administrative Services	2,624,209	-	-	-	-	-	-	-	-	-	-	-	-
0100 Oth Op Rev - Reference Lab	2,060,016	-	-	-	-	-	-	-	-	-	-	-	-
0100 Oth Op Rev - Transportation	-	-	-	11,585		-	-	-	-	-	-	-	-
0100 Purchase Discounts and Rebates	129,071	-	-	(86,226)		-	-	-	-	5,407	-	-	
0100 Oth Op Rev - Lifecare	-	-	-	8,528,780		-	-	-	-	-	-	-	-
0100 Oth Op Rev - Earned Entrance Fees	-	-	-	1,887,039	-	-	-	-	-	-	-	-	
Total - Other	11,838,336	536,457	864,323	13,258,341	262,557	9,275	6,777,578	0	(20,432,780)	4,647,633	15,508	11,933,053	4,338,0
Total Other Operating Revenue	25,940,206	816,465	7,006,931	13,344,042	262,557	240,880	6,777,578	0	(20,432,780)	5,027,602	15,508	11,933,053	4,603,7

Operating Expenses													
Salaries & Wages													
60035100000100 Salaries - Adjustment	(699,645)	(3,057)	(40,975)	(159,919)	63,257	-			-	(3,745,974)			(4,592)
60039100000100 Salaries - Exempt	26,276,245	686,330	2,623,330	827,522	737,659	1,453,042			-	20,815,940			31,524,030
60040100000100 Salaries - Non Exempt	99,594,447	3,748,584	8,854,249	3,090,842	939,841	5,657,639			-	11,921,915	34,383		8,916,053
60041100000100 Salaries - Physicians	2,243,130	70,500	339,400	42,370	34,314	(42,245)			-	38,480	-		4,592,245
60042100000100 Salaries - Other Compensation	131,361	2,999	109,610	2,349	1,645	1,633			-	5,968,348	(12,460)		230,579
60043100000100 Salaries - Overtime/Excess Shifts	9,734,860	346,929	765,306	264,284	34,812	597,545	-	-	-	1,522,022	81	-	468,388
60044100000100 Salaries - Shift Differentials and Special Pays	18,181,692	673,375	1,318,213	126,671	110,305	539,518	-	-	-	358,760	-	-	111,009
60045100000100 Salaries - Call Pay	4,755,076	61,736	763,244	7,719	42,778	7,876	-	-	-	142,360	-	-	246,037
60046100000100 Salaries - PTO Taken	9,797,610	272,330	656,053	224,575	200,766	268,932	-	-	-	2,234,767	2,845	-	2,695,868
60047100000100 Salaries - PTO Cash In	3,062,081	125,384	371,750	92,743	21,165	72,465	-	-	-	888,139	-	-	145,969
60048100000100 Salaries - PTO Expense (80103)	1,070,156	55,420	57,673	16,136	(37,870)	71,091	-	-	-	448,142	508	-	153,005
60049100000100 Salaries - Bonus and Severance Pay	3,909,721	5,792	86,323	33,790	7,516	45,786	-		-	3,502,817		-	404,495
60050100000100 Salaries - Education and Orientation	2,072,733	143,375	160,200	27,221	18,352	106,054	-	-	-	1,657,301	-	-	193,991
60051100000100 Salaries - Other Leave	1,361,047	20,255	68,503	9,545	23,384	48,279	-	-	-	296,997	-	-	182,048
60053100000100 Salaries - Legacy	60,515,675	2,180,072	5,489,750	1,581,567	745,943	2,866,893	-	-	-	13,913,275	37,312	-	16,624,110
60549900000200 Allocations - Salaries - Temp Restricted	19,775	-	-		-	-	-	-	-			-	-
Total - Salaries & Wages	242,025,963	8,390,022	21,622,626	6,187,415	2,943,867	11,694,508	0	0	0	59,963,290	62,669	0	66,483,235
Contract Labor													
	15.646.119	1.375.201	4.601.914	1.121.566	5.248	930.143				84.822			39.408
60052100000100 Salaries - Contract Labor - Outside Agency 60054100000100 Salaries - Contract Labor - Locum				1 1			-	-	-			-	
Total - Contract Labor	- 15,646,119	- 1,375,201	4,601,914	- 1,121,566	- 5,248	- 930,143	- 0	-	-	- 84,822	- 0	- 0	5,879,820 5,919,227
Iotai - Contract Labor	15,646,119	1,375,201	4,001,914	1,121,500	5,248	930,143	U	U	U	84,822	U	U	5,919,227
Benefits													
61000100000100 Benefits - Disability - Short Term	(695,107)			-					-		(182)		
61001100000100 Benefits - Disability - Long Term	(180,988)								-	2,117,652	(107)		
61002100000100 Benefits - Health Plan - Medical	38,708,788	1.255.604	3.401.435	1.255.604	478.325	1.348.615				4.100.155	6.648		6,523,836
61004100000100 Benefits - Health Plan - Health Savings Account Contributions		-	-	-	-	-			-	(8,144)	-		
61006100000100 Benefits - Life Insurance	(927,543)	11,544	31,284	11,544	4,404	12,408			-	1,358,011	60		60,000
61007100000100 Benefits - Other Direct Retirement - Basic	-				-	-			-	604,309	-		-

## Income Statement Detail by Entity - Audited Atrium Health Navicent - Internal Reporting Only Through The Period Ending December 31, 2021

Through The Period Ending December 31, 2021													
	Navicent Health	Navicent Health Medical Center -	Navicent Health Medical Center -	Carlyle Place	Pine Pointe Hospice	Navicent Health Rehabilitation	Doctors Office Bldg -	Navicent Health Corporate Human	Navicent Health -	Navicent Health Co	Navicent Health -	Centra Professional	Navicent Health
	Medical Center	Peach	Baldwin	Navicent Health	Navicent Health	Hospital	Navicent Health	Resources	Elimination Company		Health Ventures	Indemnity	Physicians Group
Account Description	22		262	267		154							
61008100000100 Benefits - Unemployment 61009100000100 Benefits - 401k Employer Contributions	22 1.227	- 430	363	267	-	154	-	-		14 3.017	1 1,502	-	30.069
61010100000100 Benefits - 403b Employer Expense	6,826,307	121,909	353,718	171,444	85,148	213,196	-	-		1,306,175	484	-	1,654,818
61011100000100 Benefits - FICA - Employer	17,647,040	579,741	1,481,866	474,163	207,714	626,927	-	(		4,353,704	5,228	-	3,452,241
61016100000100 Benefits - Workers Compensation - Claims (80104 Insurance WC) 61017100000100 Benefits - Tuition Reimbursement	1,690,231 44,638	32,860	91,978 3.161	86,727 3,476	12,311	33,858 3,605	-	-	(2,276,433)	174,902 29,802	361	-	153,205 8,260
6102010000100 Benefits - Teammate Other	1,021,703	1,575	7,452	3,476		3,005	-			29,802 236,547	- 92	-	16,525
61028100000100 Benefits - Pension	143,406	-	-	-	1,608	-	-	-	-	729,005	-	-	22,008
61034100000100 Benefits - Health Plan - Prescriptons	(375,452)	-	-		-	-	-			11,078,547	-	-	
Total - Benefits	63,904,273	2,010,161	5,371,257	2,006,454	793,444	2,241,838	0	(	) (2,276,433)	26,083,696	14,087	0	11,920,962
Personnel Costs	321,576,354	11,775,385	31,595,798	9,315,435	3,742,559	14,866,489	0	(	) (2,276,433)	86,131,808	76,756	0	84,323,424
Supplies - Medical													
62000100000100 Supplies - Medical - Other (s/b 62000100000100) 62001100000100 Supplies - Durable Medical Equipment	57,508,969 2,965	349,602	2,845,504 7.091	77,568	56,815 1,060	331,463 3.031	-	-	-	5,667,879	98	-	241,277 268
62002100000100 Supplies - IV	- 2,903		-	-	-	5,051	-			2,575			- 200
62003100000100 Supplies - Robotics	1,098,384						-			-			
62005100000100 Supplies - Blood Products	1,476,994	-	3,750	-		-	-	-		-	-	-	-
62006100000100 Supplies - Infection and Safety 62007100000100 Supplies - Linen	926,601 19,773	10,117 126	101,025 2,137	-	1,055	6,823	-	-	-	1,649	-	-	660
62008100000100 Supplies - Anesthesia and Respiratory	3.662.473	15.756	163.344		- 315	- 243	-		-		-		1.443
63001100000100 Supplies - Anestresia and Respiratory	24,463,543	57,411	1,203,368	-	5,741	57,986	-	-	-	453	3,457	-	16,406
63002100000100 Supplies - Sutures	437,149	2,147	29,615	-	-	-	-	-	-	46	-	-	-
6300510000100 Supplies - Endomechanical Products Total - Supplies - Medical	1,141,606 90,738,456	314 435,473	68,682 4,424,515	- 77,568	- 64,986	- 399,546	- 0	-	- 0	- 5,672,601	- 3,554	- 0	- 260,053
	90,738,456	435,473	4,424,515	//,568	64,986	399,546	0		0	5,672,601	3,554	0	260,053
Supplies - Medical - Implants & Prosthesis													
63403100000100 Supplies - Implants and Prosthesis - Other 63404100000100 Supplies - Implants and Prosthesis - Orthopedic	6,902,868 5,455,813	- 48	68,017 304,869	-	-	-	-	-	-	-	-	-	750
6340510000100 Supplies - Implants and Prosthesis - Ontopedic	6.277.410	40	2,500		-	-	-		-	- 2,400	-		
63406100000100 Supplies - Implants and Prosthesis - Cardiac	3,198,630	-	1,054	-	-	-	-	-	-	-	-	-	-
Total - Supplies - Medical - Implants & Prosthesis	21,834,721	48	376,439	0	0	0	0	(	0 0	2,400	0	0	750
Supplies - Pharmaceuticals													
63202100000100 Supplies - Pharmaceuticals Total - Supplies - Pharmaceuticals	31,697,322 31,697,322	524,190 524,190	2,422,978	24,461 24.461	106,191 106,191	416,634 416,634	- 0	-	- 0	3,804,634 3,804,634	- 0	- 0	357,432 357,432
	51,057,522	524,150	2,422,370	24,401	100,131	410,034			, <u> </u>	5,004,054		0	551,452
Supplies - Office, Dietary & Other 63500100000100 Supplies - Laboratory	10,746,880	522,492	1,370,843	32	1,209	1,791				1,574			53,052
63501100000100 Supplies - Office - Program Other (sb 63501100000100)	931,896	28,090	89,955	74,154	2,958	22,072				124,583	210		290,820
63502100000100 Supplies - Maintenance	1,809,210	55,067	158,762	128,220	7,281	61,017	714	-	-	883,117		-	9,526
6350310000100 Supplies - Dietary	3,349,057	197,883	515,388	1,000,137	25,525	49,199	-	-	-	17,831	16	-	4,881
63504100000100 Supplies - Catering Services 63506100000100 Supplies - Food	486 241,184	- 248	- 759	(10,855)	- 27	- 128.513				801 535			- 1,213
63507100000100 Supplies - Other	1,218,880	13,032	78,015	243,685		40,148	-	-	-	(4,395,487)	-	-	23,195
63508100000100 Supplies - Minor Equipment and Furnishings	371,430	11,564	104,097	89,867	3,978	10,189	6,988	-	-	444,508	-	-	50,192
63509100000100 Supplies - NonCapital Software		-	-	58,902		-	-	-	-	-	-	-	-
63512100000100 Supplies - Inventory - Adjustments 63513100000100 Supplies - Vendor Discounts - Rebates, Credits	3,600,995 (2,124,952)	58,656 (2,989)	160,983 (684)	- (16,704)		230,452				- (68,963)	- (8)		
63515100000100 Supplies - Vendor Discontis - Nebates, Credits 63515100000100 Supplies - Wearing Apparel - Teammates	96.153	(2,505)	1.649	(10,704)						(00,505)	-		
63516100000100 Supplies - Personal Hygiene	302,149	12,154	45,759		1,256	23,595	-			3,896			31
63523100000100 Requisition Default Expense Account	4,622	-	1,395	-			-	-		7,905	-	-	
63524100000100 Non-Capital Hardware Total - Supplies - Office, Dietary & Other	- 20.547.989	- 896.197	- 2,526,922	- 1,567,438	- 45.467	- 566.976	7,702	-	- 0	1,433,147 (1,546,552)	- 218	- 0	- 432.910
		, .					7,702				3,772		
Supplies	164,818,487	1,855,907	9,750,854	1,669,467	216,644	1,383,157	7,702		0 0	7,933,082	3,112	0	1,051,145
Professional Fees 66002100000100 Prof Fees - Medical Specialist	15,182,846	174.302	233,486							196			1,356,633
6600410000100 Prof Fees - Medical Specialist 66004100000100 Prof Fees - Consulting and Management	15,182,846 948,686	174,302	233,486 119,375	- 231,461	- 3,732		- 15,280			849,609	- 69	-	1,356,633
66007100000100 Prof Fees - Legal (61597)	951,390	1,741	421,222		-	-	-	-	-	1,791,255	-	2,531	
66008100000100 Prof Fees - Audit (61598)	20,357			-	-	-	-	-	-		-	37,800	
66009100000100 Prof Fees - Marketing (s/b 66009100000100) 66010100000100 Prof Fees - Collection - Medicare (s/b 66010100000100)	189,871 5.888.222	9,398	6,885 406.032	80,458	9,459	6,936	-	-	-	876,738 718	-	-	22,847 219.989
66010100000100 Prof Fees - Collection - Medicare (s/b 66010100000100) 66013100000100 Prof Fees - Honoraria	5,888,222 2,000	50,102	406,032	-	-	2,246	-	-	-	/18	-	-	219,989
6601510000100 Contract Labor - Travel and Expense	-		-	-	- 299		-	-	-	-			
66019100000100 Prof Fees - Community Benefit Sponsorships	10,320	-	-	1,830		-	-	-		50	-	-	-
66021100000100 Prof Fees - Licenses	26,231	1,808	7,570	-	-	49	-	-		6,764	-		94,382
66022100000100 Prof Fees - Financial Services 66025100000100 Prof Fees - Lobbying Costs	692,670	62,082	125,777	6,819	1,695	24,535	-		-	35,222 44,000	6,304	1,560	205,212
Total - Professional Fees	23,912,593	312,153	1,320,348	320,567	15,185	33,765	15,280	- (	0	3,604,552	6,373	41,892	2,049,674
Purchased Services													
65000100000100 Purch Svs - Third Party Contractor Services	10,979,660	525,820	2,487,336	162,840	14,885	187,474	537	-	(20,912)	2,832,831	65	115,896	91,978
65001100000100 Purch Svs - Aircraft Lease		2,500	3,294	-		616	-	-	-		-	-	1,500
65002100000100 Purch Svs - Affiliate Support 65003100000100 Purch Svs - Answering Service	337,495	2,187 2,267	-	-	123,885		-	-	-	29,596	-	-	
6500410000100 Purch Svs - Appropriate Care			-	-	9,784	2,681		-					
65005100000100 Purch Svs - Billing and Coding	261,903	100	36,504	-	-	-	-	-	-	-	71	-	-

# Income Statement Detail by Entity - Audited Atium Health Navicent - Internal Reporting Only Through The Period Ending December 31, 2021

	Navicent Health	Navicent Health Medical Center -	Navicent Health Medical Center -	Carlyle Place	Pine Pointe Hospice	Rehabilitation	Doctors Office Bldg -	Navicent Health Corporate Human	Navicent Health -	Navicent Health Co	Navicent Health -	Centra Professional	Navicent Health
Account Description	Medical Center	Peach	Baldwin	Navicent Health	Navicent Health	Hospital	Navicent Health	Resources	Elimination Company		Health Ventures	Indemnity	Physicians Group
65006100000100 Purch Svs - Medical Services - Consolidated	717,977	315,539	999,018	264,126		18,950							1,885
65009100000100 Purch Svs - Delivery Services	113,509	800	555,018	- 204,120		77				- 80			-
65010100000100 Purch Svs - Document Shredding	126	921	2,354	126	-	-		-	-	-	-	-	7,993
65011100000100 Purch Svs - Fleet Services	(32,500)	13,151	-	-			-						
65012100000100 Purch Svs - Information Services	1,850	-	25,210			-	-	-		797,830	-	-	-
65014100000100 Purch Svs - Language Translation	585	2,976	-	-		-	-	-	-	-	-	-	1,166
65015100000100 Purch Svs - Laundry and Linen Service	2,768,972	98,877	228,045	-	-	116,121	-	-	-	10,068	-	-	3,715
65018100000100 Purch Svs - Offsite Document Storage	8,028 3.337.912	- 47,024	- 17,604	-		- 19,042	-	-	-	-	-	-	-
65019100000100 Purch Svs - Outside Laboratory	3,337,912	47,024 38,722	17,604	- 3.303	-	23.090	-	-	(7.485)	219,833	-	-	-
65020100000100 Purch Svs - Outside Radiology 65021100000100 Purch Svs - Other (Inactive - old 61530)	4,621,254	420,225	1,693,773	185,451	47,112	104,158	- 16,105		(29,271)	- 1,850,123	- 171	- 38,504	- 34,319
65023100000100 Purch Svs - Printing Services	540.034	1.350	5.047	187	234	4.076	10,105		(23,211)	17.771		50,504	1.250
65025100000100 Purch Svs - Repairs and Maintenance - Medical Equipment	8,017,478	228.294	999.385	27,084	-	12.998			(1,445,154)	2,099,263			248.765
65026100000100 Purch Svs - Repairs and Maintenance - Software and IAS	210.615	8.764	78,988			12,765			-	19.991.821			165.512
65027100000100 Purch Svs - Repairs and Maintenance - Facility Plant Operations	1,968,067	201,528	521,321	535,055	6,194	54,400	120,209	-		535,527	-		14,684
65028100000100 Purch Svcs - Repairs and Maintenance - Surgical Equipment	298,908	20,806	36,399				-			(8,208)			
65029100000100 Purch Svs - Security				-		-	-	-	-	-			3,230
65030100000100 Purch Svs - Stipends - Student	144,607	-	-	-		-	-	-				-	-
65031100000100 Purch Svs - Subcontractor Costs	899,279	-	75,889	159,195		(24)	-	-	-	-	-	-	-
6503210000100 Purch Svs - Subcontractor Costs < \$25k	(16,250)		-	1				-		-	-		
65034100000100 Purch Svs - Transcription 65040100000100 Purch Svs - Dietary Services	- (1,378,056)	- (40.538)	- (127,694)	- 79.995	-	(1,251)	-	-		- (5.722)	-	-	18,079
6504110000100 Furch Svs - Dietary Services	(1,378,056)	(40,558)	(127,694)	79,995		-	-	-		(5,722) 37,216	-		
65043100000100 Library 65043100000100 Purch Sys - Other Medical Center Services	- 63.998					-	-	-	-	57,216	-	-	-
65049100000100 Purch Svs - Human Resource	310	-								201,595			
65050100000100 Purch Svs - Anesthesia	71,095	226,625	1,548,407	-		-	-	-			-	-	-
65051100000100 Purch Svcs - Environmental Services	308,581	1,222	54,164	29,338		2,380	607,378	-		17,535	-		16,409
65052100000100 Purch Svcs - Facility Management Services	111,472	86,189	16,739	5,936		-	4,800	-			-		
65749600000100 IC - Purchase Services	739,114	9,221	-	-	-	-	-	-	-	-	-	-	-
65749900000100 Allocations - Purchased Services	120,000	180		-	-	-	51,527	-	-	340,093	-	-	-
Total - Purchased Services	38,400,728	2,214,750	8,729,461	1,452,637	202,094	557,552	800,555	0	(1,502,822)	28,967,252	307	154,400	610,485
Intercompany Expenense													
67016100000100 Oth Oper Exp - Allocated Other Operating Expense	18,702,228	533,772	2,070,228	123,062	48,708	695,120	17,712	-	-	(25,542,354)	11,196		1,250,532
67016100000200 Oth Oper Exp - Allocated Other Operating Expense - Temp Restricted	2,075			-		-	-	-	-				
67649300000100 Oth Oper Exp - Allocations - Medical Group - Indirect	26,207,675	264,421	12,745	-		-	-	-	-	-	-		(26,480,941)
6764990000100 Allocations - Other Expenses	68,567,272	1,699,159	3,996,684	415,149	181,936	1,737,888	262,892		· · · · ·	(82,163,571)	18,334		5,324,087
Total - Intercompany Expenense	113,479,250	2,497,352	6,079,657	538,211	230,644	2,433,008	280,604	0	0	(107,705,926)	29,530	0	(19,906,323)
Utilities													
67027100000100 Oth Oper Exp - Freight (s/b 67027100000100)	1,148,958	11,930	144,508	266	9	2,184	-	-	-	124,154	60	-	4,157
67033100000100 Oth Oper Exp - Interest - Other	244							-			-		
67034100000100 Oth Oper Exp - Utilities - Electricity	4,147,266	333,007	730,616	466,829	76,355	141,906	599,394	-	-	239,974 33,153	-	-	39,081
67035100000100 Oth Oper Exp - Utilities - Gas	577,657	9,531	113,118 109,722	47,915 96,564		43,429	10,146	-			-		- 3.794
67036100000100 Oth Oper Exp - Utilities - Water (s/b 67036100000100) 67037100000100 Oth Oper Exp - Utilities - Other	584,735 13,900	48,670 8,689	21,146	96,564 68,860	4,392 8,216	15,081 11,855	55,851 1,122	-		11,498 185,966	-		3,794 23,183
6703810000100 Oth Oper Exp - Telecom Services	139,719	52,146	78,516	19,097	20,229	9,168	3,500			804,638			131,272
67040100000100 Oth Oper Exp - Automotive Fuel	324,302	1,292	339	-	-	15,769	5,500		-	35,502			
Total - Utilities	6,936,781	465,264	1,197,965	699,530	109,985	239,391	670,012	0	0	1,434,886	60	0	201,487
Other Organization European													
Other Operating Expenses 66300100000100 Oth Oper Exp - Building and Land Rent - Base	8,338		89,054							1,731,105			476,336
66303100000100 Oth Oper Exp - Rental and Lease - Buildings	2.223.149	91,511	452,996	-	2.732	1.382.753			(4,752,095)				2.814.989
66304100000100 Oth Oper Exp - Rental and Lease - Equipment	1,199,843	15,091	129,755		121,758	17,377			(	4,874			(750)
66309100000100 Oth Oper Exp - Base Rent - Contra	(8,652)	-	(87,888)		-		-			(1,653,317)			(466,011)
66600100000100 Oth Oper Exp - Insurance - Professional Liability	80,669	3,894	12,180	12,046		-	-	-		126,560	-		
66602100000100 Oth Oper Exp - Insurance - Property		15,662		115		-	-	-	-	414,532			
66605100000100 Oth Oper Exp - Insurance - Captive	11,424		-	-		-	-	-	(11,733,525)		-	13,538,943	-
66800100000100 Oth Oper Exp - Travel	106,072	6,509	4,142	27,696	622	10,904	-	-	-	114,052	-	-	5,456
			-	-		-		-		-	-		
66800100000200 Oth Oper Exp - Travel - Temp Restricted	1,418				-	389	-	-		1,580,538	-	-	20,073 6,239
66802100000100 Oth Oper Exp - Recruiting	242,046	-	15,601	-									6,239
66802100000100 Oth Oper Exp - Recruiting 66803100000100 Oth Oper Exp - Travel and Education - Advanced Practice Providers	242,046 598		-	-	-	-	-	-	-	-		-	27.516
66802100000100 Oth Oper Exp - Recruiting 66803100000100 Oth Oper Exp - Travel and Education - Advanced Practice Providers 66804100000100 Oth Oper Exp - Mileage	242,046 598 344,397	- 4,244	- 9,606	- 3,988	- 50,937	- 2,026	-	-	-	39,529	-		27,516
66802100000100 Oth Oper Exp - Recruiting 66803100000100 Oth Oper Exp - Travel and Education - Advanced Practice Providers 66804100000100 Oth Oper Exp - Mileage 66805100000100 Oth Oper Exp - Melas and Entertainment	242,046 598 344,397 3,858	- 4,244 264	- 9,606 236	- 3,988 40,383	-	-	- - - 1900	-	-	15,534	-	-	866
66802100000100 Oth Oper Exp - Recruiting 66803100000100 Oth Oper Exp - Travel and Education - Advanced Practice Providers 66804100000100 Oth Oper Exp - Mileage 66805100000100 Oth Oper Exp - Meals and Entertainment 66807100000100 Oth Oper Exp - Continuing Education	242,046 598 344,397 3,858 832,804	- 4,244 264 16,802	- 9,606	- 3,988 40,383 11,433	- 348	- 1,537	- - 1,900 -	-	-	15,534 95,935	-	-	866 249,270
66802100000100 Oth Oper Exp - Recruiting 66803100000100 Oth Oper Exp - Travel and Education - Advanced Practice Providers 66804100000100 Oth Oper Exp - Mileage 66803100000100 Oth Oper Exp - Meals and Entertainment 66803100000100 Oth Oper Exp - Corporate Events and Retreats	242,046 598 344,397 3,858 832,804 (5,384)	- 4,244 264 16,802 2,686	- 9,606 236 10,656 -	- 3,988 40,383	- 348 681	- 1,537 4,253	- - 1,900 -	-	-	15,534 95,935 164	-	-	866 249,270 360
66802100000100 Oth Oper Exp - Recruiting 66803100000100 Oth Oper Exp - Travel and Education - Advanced Practice Providers 66804100000100 Oth Oper Exp - Melage 66805100000100 Oth Oper Exp - Continuing Education 66808100000100 Oth Oper Exp - Corporate Events and Retreats 66809100000100 Oth Oper Exp - Subscriptions - Professional	242,046 598 344,397 3,858 832,804 (5,384) 24,788	- 4,244 264 16,802	- 9,606 236 10,656 - 9,461	- 3,988 40,383 11,433 63,732	- 348	- 1,537	- - 1,900 - -		-	15,534 95,935 164 125,778	-	-	866 249,270 360 12,599
66802100000100 Oth Oper Exp - Recruiting 66803100000100 Oth Oper Exp - Travel and Education - Advanced Practice Providers 66804100000100 Oth Oper Exp - Mielage 66807100000100 Oth Oper Exp - Meals and Entertainment 66807100000100 Oth Oper Exp - Corporate Events and Retreats 66808100000100 Oth Oper Exp - Corporate Events and Retreats 66808100000100 Oth Oper Exp - Moving and Transfer Costs	242,046 598 344,397 3,858 832,804 (5,384)	- 4,244 264 16,802 2,686	- 9,606 236 10,656 -	- 3,988 40,383 11,433 63,732	- 348 681	- 1,537 4,253	- - 1,900 - - -	-	-	15,534 95,935 164	-	-	866 249,270 360
66802100000100         Oth Oper Exp         Recruiting           66803100000100         Oth Oper Exp         Travel and Education - Advanced Practice Providers           66804100000100         Oth Oper Exp         Nileage           66805100000100         Oth Oper Exp         Neals and Entertainment           66803100000100         Oth Oper Exp         Comportable Events and Retreats           66809100000100         Oth Oper Exp         Super Strates	242,046 598 344,397 3,858 832,804 (5,384) 24,788 7,993	- 4,244 264 16,802 2,686 377 -	- 9,606 236 10,656 - 9,461	- 3,988 40,383 11,433 63,732 -	- 348 681 592 -	1,537 4,253 180	- - 1,900 - - - -	-	-	15,534 95,935 164 125,778 37,145	-	-	866 249,270 360 12,599 593
6680210000010 Oth Oper Exp - Recruiting 6680310000100 Oth Oper Exp - Travel and Education - Advanced Practice Providers 66804100000100 Oth Oper Exp - Mileage 66805100000100 Oth Oper Exp - Meals and Entertainment 66807100000100 Oth Oper Exp - Corporate Events and Retreats 66809100000100 Oth Oper Exp - Subscriptions - Professional 6681100000100 Oth Oper Exp - Subscriptions - Professional 6681100000100 Oth Oper Exp - Subscriptions - Professional 6681100000100 Oth Oper Exp - Teammate Recognition and Service Awards	242,046 598 344,397 3,858 832,804 (5,384) 24,788 7,993	- 4,244 264 16,802 2,686 377 -	- 9,606 236 10,656 - 9,461 490 -	- 3,988 40,383 11,433 63,732 -	- 348 681 592 -	1,537 4,253 180	- - - - - - - - - - -	· · · ·	-	15,534 95,935 164 125,778 37,145 1,226,437		-	866 249,270 360 12,599 593 3,340 - 580
6680210000010 Oth Oper Exp - Recruiting 6680310000010 Oth Oper Exp - Males and Education - Advanced Practice Providers 6680310000010 Oth Oper Exp - Males and Entertainment 6680710000010 Oth Oper Exp - Continuing Education 6680910000010 Oth Oper Exp - Corporate Events and Retreats 6680910000010 Oth Oper Exp - Subscriptions - Professional 6681110000010 Oth Oper Exp - Moving and Transfer Costs 6681210000010 Oth Oper Exp - Moving and Transfer Costs 6681310000010 Oth Oper Exp - Teammate Functions 6681310000010 Oth Oper Exp - Teammate Functions 6681310000010 Oth Oper Exp - Teammate Functions 668151000010 Oth Oper Exp - Teammate Functions	242,046 598 344,397 3,858 832,804 (5,384) 24,788 7,993 12,841 - 32,643 6,531	- 4,244 264 16,802 2,686 377 -	- 9,606 236 10,656 - 9,461 490 - 1,405 -	- 3,988 40,383 11,433 63,732 -	- 348 681 592 -	1,537 4,253 180	- - - - - - - - - - - - - - - -	-		15,534 95,935 164 125,778 37,145 1,226,437 1,112	- - - - - - - - - - - -	-	866 249,270 360 12,599 593 3,340
66802100000100         Oth Oper Exp - Recruiting           66803100000100         Oth Oper Exp - Travel and Education - Advanced Practice Providers           66804100000100         Oth Oper Exp - Meals and Entertainment           66807100000100         Oth Oper Exp - Continuing Education           66807100000100         Oth Oper Exp - Comporate Events and Retreats           66807100000100         Oth Oper Exp - Corporate Events and Retreats           66807100000100         Oth Oper Exp - Moving and Transfer Costs           66817100000100         Oth Oper Exp - Tearmate Recognition and Service Awards           66817100000100         Oth Oper Exp - Tearmate Recognition and Service Awards           66817100000100         Oth Oper Exp - Tearmate Functions           6681710000100         Oth Oper Exp - Tearmate Functions	242,046 598 344,397 3,858 832,804 (5,384) 24,788 7,993 12,841 - 32,643	- 4,244 264 16,802 2,686 377 -	- 9,606 236 10,656 - 9,461 490 -	- 3,988 40,383 11,433 63,732 -	- 348 681 592 -	1,537 4,253 180 - 1,631 - -	- - - - - - - - - - - - - - - - - - -			15,534 95,935 164 125,778 37,145 1,226,437 1,112			866 249,270 360 12,599 593 3,340 - 580
6680210000100 Oth Oper Exp - Recruiting 6680310000110 Oth Oper Exp - Males and Entertainment 6680310000110 Oth Oper Exp - Males and Entertainment 6680310000110 Oth Oper Exp - Continuing Education 6680310000010 Oth Oper Exp - Corporate Events and Retreats 6680310000010 Oth Oper Exp - Subscriptions - Professional 66813100000100 Oth Oper Exp - Teammate Recognition and Service Awards 66813100000100 Oth Oper Exp - Teammate Recognition and Service Awards 66813100000100 Oth Oper Exp - Teammate Recognition and Service Awards 66813100000100 Oth Oper Exp - Teammate Recognition and Service Awards 6681310000100 Oth Oper Exp - Teammate Recognition and Service Awards 6681310000100 Oth Oper Exp - Teammate Functions 6681310000100 Oth Oper Exp - Teammate Functions 66315100000100 Oth Oper Exp - Teammate Functions	242,046 598 344,397 3,858 832,804 (5,384) 24,788 7,993 12,841 	4,244 264 16,802 2,686 377 - - 187 - - - - - - - - - - - -	- 9,606 236 10,656 - - 9,461 490 - - 1,405 - - 20,324	3,988 40,383 11,433 63,732 - 20,007 - - - - - - - - - -	- 348 681 592 -	1,537 4,253 180 - 1,631 - - - - - - - - - 1,642	- 1,900 - - - - - - - - - - - -			15,534 95,335 164 125,778 37,145 1,226,437 1,112 1,523 -			866 249,270 360 12,599 593 3,340 - 580 25,729 -
66802100000100         Oth Oper Exp - Recruiting           6680310000100         Oth Oper Exp - Travel and Education - Advanced Practice Providers           66804100000100         Oth Oper Exp - Meals and Entertainment           66807100000100         Oth Oper Exp - Continuing Education           66807100000100         Oth Oper Exp - Combining Education           66807100000100         Oth Oper Exp - Corporate Events and Retreats           66809100000100         Oth Oper Exp - Corporate Events and Retreats           66801100000100         Oth Oper Exp - Moxing and Transfer Costs           6681100000100         Oth Oper Exp - Noving and Transfer Costs           6681300000100         Oth Oper Exp - Naisines Entertainment           6681300000100         Oth Oper Exp - Tearmate Recognition and Service Awards           66813100000100         Oth Oper Exp - Tearmate Functions           66813100000100         Oth Oper Exp - Tearmate Functions           66813100000100         Oth Oper Exp - Centinuing Education - Provider           7000100000100         Oth Oper Exp - Patient Adjustments           67000100000100         Oth Oper Exp - Automotive	242,046 598 344,397 3,3658 832,804 (5,384) 2,4788 7,993 1,2,841 - 3,2,643 6,531 450,202 - - 461,18	- 4,244 264 16,802 2,686 377 -	- 9,606 226 10,656 - 9,461 490 - 1,405 - 20,324 - 20,324 - 3,76	3,988 40,383 11,433 63,732 - 20,007 - -	- 348 681 592 -	1,537 4,253 180 - 1,631 - -	- 1,900 - - - - - - - - - - - - - - - - - -			15,534 95,935 164 125,778 37,145 1,226,437 1,112 1,523			866 249,270 360 12,599 593 3,340 - 580
6580210000110         Oth Oper Exp - Recruiting           6680310000100         Oth Oper Exp - Travel and Education - Advanced Practice Providers           66804100000100         Oth Oper Exp - Meals and Entertainment           66807100000100         Oth Oper Exp - Continuing Education           66807100000100         Oth Oper Exp - Combinuing Education           66807100000100         Oth Oper Exp - Corporate Events and Retreats           66807100000100         Oth Oper Exp - Subscriptions - Professional           66811100000100         Oth Oper Exp - Noving and Transfer Costs           6681100000100         Oth Oper Exp - Teammate Recognition and Service Awards           66813100000100         Oth Oper Exp - Teammate Recognition and Service Awards           66814100000100         Oth Oper Exp - Teammate Inuctions           66814100000100         Oth Oper Exp - Teammate Functions           66814100000100         Oth Oper Exp - Teatient Adjustments           67001100000100         Oth Oper Exp - Teatient Adjustments           67001100000100         Oth Oper Exp - Fee for Value           67002100000100         Oth Oper Exp - Lost of Goods Sold	242,046 598 344,397 3,858 832,804 (5,384) 2,4788 7,993 1,2,841 - 32,643 6,531 450,202 - 4,6,183 250,273	4,244 264 16,802 2,686 377 - - 187 - - - - - - - - - - - -	- 9,606 10,656 - 9,461 490 - 1,405 - - 20,324 - 1,376 (767)	3,988 40,383 11,433 63,732 - 20,007 - - - - - - - - - -	- 348 681 592 - - - - - - - -	1,537 4,253 180 - 1,631 - - - - - - - - - 1,642	- - - - - - - - - - - - - - - - - - -			15,534 95,935 164 125,778 37,145 1,226,437 1,112 1,523 - - - - - - - - - - - - - - - - - - -	- - - - - - - - - - - - - - - - 598		866 249,270 360 12,599 593 3,340 - 580 25,729 -
66802100000100         Oth Oper Exp - Recruiting           66803100000100         Oth Oper Exp - Mielage           6680410000100         Oth Oper Exp - Meals and Entertainment           6680710000100         Oth Oper Exp - Continuing Education           6680710000100         Oth Oper Exp - Continuing Education           6680710000100         Oth Oper Exp - Corporate Events and Retreats           66807100000100         Oth Oper Exp - Subscriptions - Professional           66817100000100         Oth Oper Exp - Noving and Transfer Costs           66813100000100         Oth Oper Exp - Teammate Recognition and Service Awards           66813100000100         Oth Oper Exp - Teammate Functions           66815100000100         Oth Oper Exp - Teammate Functions           66815100000100         Oth Oper Exp - Teammate Functions           66815100000100         Oth Oper Exp - Feen Yalues           67000100000100         Oth Oper Exp - Feen Yalues           6700100000100         Oth Oper Exp - Feen Yalues           67001100000100         Oth Oper Exp - Gends Yalues           6700100000100         Oth Oper Exp - Gend Yalues           67001000	242,046 598 344,397 3,3658 832,804 (5,384) 2,4788 7,993 1,2,841 - 3,2,643 6,531 450,202 - - 461,18	4,244 264 16,802 2,686 377 - - 187 - - - - - - - - - - - -	- 9,606 226 10,656 - 9,461 490 - 1,405 - 20,324 - 20,324 - 3,76	3,988 40,383 11,433 63,732 - 20,007 - - - - - - - - - -	- 348 681 592 -	1,537 4,253 180 - 1,631 - - - - - - - - - 1,642	- 1,900 - - - - - - - - - - - - - - - - - -			15,534 95,935 164 125,778 37,145 1,226,437 1,112 1,523 - - 43,003 - - 0,000	- - - - - - - - - - - - - - - - - - - -		866 249,270 360 12,599 593 3,340 - 580 25,729 -
6580210000110         Oth Oper Exp - Recruiting           6680310000100         Oth Oper Exp - Travel and Education - Advanced Practice Providers           66804100000100         Oth Oper Exp - Meals and Entertainment           66807100000100         Oth Oper Exp - Continuing Education           66807100000100         Oth Oper Exp - Combinuing Education           66807100000100         Oth Oper Exp - Corporate Events and Retreats           66807100000100         Oth Oper Exp - Subscriptions - Professional           66811100000100         Oth Oper Exp - Noving and Transfer Costs           6681100000100         Oth Oper Exp - Teammate Recognition and Service Awards           66813100000100         Oth Oper Exp - Teammate Recognition and Service Awards           66814100000100         Oth Oper Exp - Teammate Inuctions           66814100000100         Oth Oper Exp - Teammate Functions           66814100000100         Oth Oper Exp - Teatient Adjustments           67001100000100         Oth Oper Exp - Teatient Adjustments           67001100000100         Oth Oper Exp - Fee for Value           67002100000100         Oth Oper Exp - Lost of Goods Sold	242,046 598 344,397 3,858 832,804 (5,384) 2,4788 7,993 1,2,841 - 32,643 6,531 450,202 - 4,6,183 250,273	4,244 264 16,802 2,686 377 - - 187 - - - - - - - - - - - -	- 9,606 10,656 - 9,461 490 - 1,405 - - 20,324 - 1,376 (767)	3,988 40,383 11,433 63,732 - 20,007 - - - - - - - - - -	- 348 681 592 - - - - - - - -	1,537 4,253 180 - 1,631 - - - - - - - - - 1,642	- 1,900 - - - - - - - - - - - - - - - - - -			15,534 95,935 164 125,778 37,145 1,226,437 1,112 1,523 - - - - - - - - - - - - - - - - - - -	- - - - - - - - - - - - - - - - - - -		866 249,270 370 12,599 593 3,340 - 580 25,729 -

## Income Statement Detail by Entity - Audited Atrium Health Navicent - Internal Reporting Only Through The Period Ending December 31, 2021

Through The P	eriod Ending December 31, 2021													
		Navicent Health	Navicent Health	Navicent Health	Carlyle Place	Pine Pointe Hospice	Navicent Health Rehabilitation	Doctors Office Bldg -	Navicent Health	Navicent Health -		Navicent Health -	Centra Professional	Navicent Health
		Medical Center	Medical Center - Peach	Medical Center - Baldwin	Navicent Health	Navicent Health	Rehabilitation Hospital	Navicent Health	Corporate Human Resources	Elimination Company	Navicent Health Co	Health Ventures	Indemnity	Physicians Group
Account	Description		reach	baluwill			nospitai		Resources					
	0 Oth Oper Exp - Education Seminar Production										695			
6702510000010	0 Oth Oper Exp - Tuition		-		-		-		-	-	-	-	-	374
	0 Oth Oper Exp - Other Expense Savings	-	-	-	2,466	-	-	-	-	-	-	-	-	-
	0 Oth Oper Exp - NonAllowable Costs		-	1,032	-			-	-	-	-		-	
6704610000010	0 Oth Oper Exp - Dues - Organizational Total - Other Operating Expenses	1,670,137 8,208,694	19,269 176,545	29,994 699,655	29,872 256,435	6,439 235,375	22,423 1,449,591	- 1,900	- 0	(16,485,620)	975,868 18,079,271	- 598	- 13,538,943	321,136 3,498,762
	Total - Other Operating Expenses	8,208,694	176,545	099,055	250,435	235,375	1,449,591	1,900	U	(16,485,620)	18,079,271	298	13,538,943	3,498,762
	Taxes, Penalties and Fees													
6670010000010	0 Oth Oper Exp - Taxes - Property	73,672	-	7,794	-	-	-	614,942	-	-	9,657	-		38,572
	0 Oth Oper Exp - Taxes - Sales and Use Tax	84,615	2,548	9,136	-	30	75,644	-	-	-	565,629	538	-	25,951
	0 Oth Oper Exp - Taxes - Income	52,924	4,647	3,985	-	420	800	-	-	-	387,260	(25,000)	-	36,625
	0 Oth Oper Exp - Taxes - Provider 0 Oth Oper Exp - Penalties and Fees	8,806,707 28,953	-	692,262	- 2,442	-	312,183 75	-	-	-	187,108 1,952	-	-	
8871010000010	Total - Taxes, Penalties and Fees	9.046.871	7.194	713.177	2,442	450	388.702	614.942	- 0	- 0	1,932	(24.462)	- 0	101.148
	Earnings before Interest, Taxes, Depreciation and Amortization	56,883,052	953,431	3,912,135	1,605,704	(466,908)	1,117,630	4,383,315	(0)	(167,905)	(34,965,046)	(78,168)	(1,802,182)	(21,760,366)
	Depreciation and Amortization													
6800010000010	0 Depreciation	22,417,904	1,045,864	1,951,107	2,594,303	154,435	36,888	2,688,052	-		10,273,305	577		218,192
6800710000010	0 Amortization – Intangible Assets Total - Depreciation and Amortization	128,397 22,546.301	1.045.864	1,951,107	2,594,303	- 154.435	- 36.888	2 688 052	- 0	- 0	10,273,305	- 577	- 0	35,010 253,202
	Total - Depreciation and Amortization	22,540,501	1,045,004	1,551,107	2,554,505	134,455	50,000	2,000,052	0	0	10,213,303	511	0	233,202
	Interest													
6850010000010		3,291,967	230,737	170,939	578,531	-	-	-	-	(167,905)	37,701	-	-	
	10 Interest - 2005	385,271	-		69,031	-	-	-	-	-	-	-	-	-
	IO Interest - 2019	540,098	60,914	46,938	79,765	-	-	-	-	-	-	-	-	-
085021000010	0 Interest - Fees Total - Interest	245 4,217,581	291,651	9,311 227,187	727,328	- 0	- 0	- 0	- 0	(167,905)	37,701	- 0	- 0	- 0
	Total interest	4,217,501	231,031	227,107	121,020	, i i i i i i i i i i i i i i i i i i i		0		(101,505)	57,701	0	0	0
	Total Operating Expenses	713,143,641	20,642,066	62,265,209	17,576,356	4,907,370	21,388,544	5,079,048	0	(20,432,780)	49,907,536	93,512	13,735,235	72,183,005
	Net Operating Income (Loss)	30,119,170	(384,084)	1,733,841	(1,715,927)	(621,343)	1,080,742	1,695,263	(0)	0	(45,276,052)	(78,745)	(1,802,182)	(22,013,568)
	Net Operating income (Loss)	30,119,170	(304,004)	1,755,041	(1,715,927)	(021,343)	1,080,742	1,095,205	(0)	U	(43,270,032)	(10,143)	(1,002,102)	(22,013,308)
	Non-Operating Revenue													
	1 2													
	Interest and Dividend Income													
	0 Non-Oper - Interest - Investments Designated for Capital Improvements	10,114,744	-		1,524,956	-	-	-		-	-			
7000210000010	0 Non-Oper - Interest - Investments Designated for Capital Improvements 0 Non-Oper - Investment Fees	(1,479,138)	- - 		(231,459)	:	-		-		(26,124)	:	(18,066)	-
7000210000010	0 Non-Oper - Interest - Investments Designated for Capital Improvements 0 Non-Oper - Investment Fees 0 Non-Oper - Interest Income	(1,479,138) 994,202		- 297	(231,459) 128	- - -	- - 180		-		286,871	-	1,046,256	- - 1,621 1,621
7000210000010	0 Non-Oper - Interest - Investments Designated for Capital Improvements 0 Non-Oper - Investment Fees	(1,479,138)	- 2,587 2,587		(231,459)	- - 0	- - 180 180	- - - 0	- - 0	- - 0		- - 0		- 1,621 1,621
7000210000010 7000310000010	00 Non-Oper - Interest - Investments Designated for Capital Improvements 00 Non-Oper - Investment Fees 00 Non-Oper - Interest Income Total - Interest and Dividend Income Gains/(Losses) from Equity Method Affiliates	(1,479,138) 994,202		- 297	(231,459) 128	- - 0		- - 0	- 0	0	286,871 260,747	-	1,046,256	
7000210000010 7000310000010 7301110000010	10 Non-Oper - Interest - Investments Designated for Capital Improvements 10 Non-Oper - Interest Income 10 Non-Oper - Interest Income 10 Ion-Oper - Interest and Dividend Income 10 Joint Venture Equity Method Affiliates 10 Joint Venture Equity Income - Legacy	(1,479,138) 994,202 9,629,808		- 297	(231,459) 128			0	0		286,871	- 0	1,046,256	
7000210000010 7000310000010 7301110000010 7301115205310	10 Non-Oper - Interest - Investments Designated for Capital Improvements 10 Non-Oper - Investment Fees 10 Non-Oper - Interest Income Total - Interest and Dividend Income Gains/(Losses) from Equity Method Affiliates 10 Joint Venture Equity Income - Legacy 10 Joint Venture Equity Income MRI	(1,479,138) 994,202 9,629,808		- 297	(231,459) 128				0	- - - 0	286,871 260,747	- 0 - 388,391	1,046,256	
7000210000010 7000310000010 7301110000010 7301115205310 7301115205410	00 Non-Oper - Interest - Investments Designated for Capital Improvements 00 Non-Oper - Investment Fees 10 Non-Oper - Interest Income Total - Interest and Dividend Income Gains/(Losses) from Equity Method Affiliates 10 Joint Venture Equity Income - Legacy 10 Joint Venture Equity Income MRI 10 Joint Venture Equity Income GMIC	(1,479,138) 994,202 9,629,808		- 297	(231,459) 128	- - - -		0	0	0	286,871 260,747	- 0	1,046,256	
7000210000010 7000310000010 7301110000010 7301115205310 7301115205410 7301115205510	10 Non-Oper - Interest - Investments Designated for Capital Improvements 10 Non-Oper - Investment Fees 10 Non-Oper - Interest Income Total - Interest and Dividend Income Gains/(Losse) from Equity Method Affiliates 10 Joint Venture Equity Income - Legacy 10 Joint Venture Equity Income KMIC 10 Joint Venture Equity Inc	(1,479,138) 994,202 9,629,808		- 297	(231,459) 128	0		0	- - - - - -	- - - - - -	286,871 260,747 (0) - - -	- 0 - 388,391	1,046,256	
7000210000010 7000310000010 7301110000010 7301115205310 7301115205510 7301115205510 7301115205510	00 Non-Oper - Interest - Investments Designated for Capital Improvements 00 Non-Oper - Investment Fees 10 Non-Oper - Interest Income Total - Interest and Dividend Income Gains/(Losses) from Equity Method Affiliates 10 Joint Venture Equity Income - Legacy 10 Joint Venture Equity Income MRI 10 Joint Venture Equity Income GMIC	(1,479,138) 994,202 9,629,808		- 297	(231,459) 128	0		0	- 0	0	286,871 260,747	- 0 - 388,391	1,046,256	
7000210000010 7000310000010 7301115205310 7301115205510 7301115205510 7301115205910 7301115205910 7301115205910	10 Non-Oper - Interest - Investments Designated for Capital Improvements     10 Non-Oper - Interest Tecme     10 Non-Oper - Interest Income     Total - Interest and Dividend Income     Gains/(Losses) from Equity Method Affiliates     10 Joint Venture Equity Income - Legacy     10 Joint Venture Equity Income MRI     10 Joint Venture Equity Income KMIC     10 Joint Venture Equity Income VET     10 Joint Venture Equity Income - Iex Health     10 Joint Venture Equity Income - Iex Health     10 Joint Venture Equity Income - Iex Health	(1,479,138) 994,202 9,629,808		- 297	(231,459) 128	0		0	0	- - - - - - - - - - - - - - - - - - -	286,871 260,747 (0) - - (405,322) (333,827) 48,739	- 0 - 388,391	1,046,256	
7000210000010 7000310000010 7301115205310 7301115205510 7301115205510 7301115205910 7301115205910 7301115205910	10 Non-Oper - Interest - Investments Designated for Capital Improvements 10 Non-Oper - Interest Income Total 0 Non-Oper - Interest Income Total - Interest and Dividend Income Optimum Control Contro	(1,479138) 994,202 9,629,808 - - - - - - - - - - - - - - - - - -	2,587 - - - - - - -	- 297 297 - - - - - - - - - - - -	(231,459) 128 1,293,625 - - - - - - - - - - - - - - - - - - -		180 - - - - - - - - - - - - -	0	0		286,871 260,747 (0) - - (405,322) (33,827) 48,739 4,223,966	0 - - - - - - - - - - - - - - - - - - -	1,046,256 1,028,190 - - - - - - - - - - - - - - - - - - -	1,621 - - - - - - - - - -
7000210000010 7000310000010 7301115205310 7301115205510 7301115205510 7301115205910 7301115205910 7301115205910	10 Non-Oper - Interest - Investments Designated for Capital Improvements     10 Non-Oper - Interest Tecme     10 Non-Oper - Interest Income     Total - Interest and Dividend Income     Gains/(Losses) from Equity Method Affiliates     10 Joint Venture Equity Income - Legacy     10 Joint Venture Equity Income MRI     10 Joint Venture Equity Income KMIC     10 Joint Venture Equity Income VET     10 Joint Venture Equity Income - Iex Health     10 Joint Venture Equity Income - Iex Health     10 Joint Venture Equity Income - Iex Health	(1,479,138) 994,202 9,629,808		- 297	(231,459) 128	- - - - - - - - - - - - - - - - - - -		- - - - - - - - - - - - - - - - - - -	0	0	286,871 260,747 (0) - - (405,322) (333,827) 48,739	- 0 - 388,391	1,046,256	
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Income Statement Detail by Entit	y - Audite	d											
Atrium Health Navicent - Internal Reporting Only													
Through The Period Ending December 31, 2021													
	Navicent Health Medical Center	Navicent Health Medical Center - Peach	Navicent Health Medical Center - Baldwin	Carlyle Place Navicent Health	Pine Pointe Hospice Navicent Health	Navicent Health Rehabilitation Hospital	Doctors Office Bldg - Navicent Health	Navicent Health Corporate Human Resources	Navicent Health - Elimination Company	Navicent Health Co	Navicent Health - Health Ventures	Centra Professional Indemnity	Navicent Health Physicians Group
Account Description													
76002100000100 Non-Oper - Other Post Retirement Employee Benefits	-	-	-	-	-					429,951		-	
Total - Pension/Post Retirement Costs	0	0	0	0	0	0	0	0	0	(18,665,360)	0	0	0
Total Non Operating Income (Loss)	68,228,442	2,587	297	10,234,466	382	180	0	0	0	22,419,699	682,386	5,137,734	1,621
Extraordinary Item													
Net Income (Loss)	98,347,612	(381,498)	1,734,137	8,518,539	(620,962)	1,080,922	1,695,263	(0)	0	(22,856,353)	603,641	3,335,552	(22,011,948)