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State Examiner

INDIANA STATE BOARD OF ACCOUNTS

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January 29, 2025

Board of Trustees
Major Health Partners
Shelby County, Indiana

We have reviewed the audit report of Major Health Partners which was opined on by Blue & Co., LLC, Independent Public Accountants, for the period January 1, 2023 to December 31, 2023. Per the *Report of Independent Auditors*, the financial statements present fairly the financial condition of Major Health Partners as of December 31, 2023, and the results of its operations for the period then ended, on the basis of accounting described in the report.

In our opinion, Blue & Co., LLC prepared the audit report in accordance with the guidelines established by the State Board of Accounts

The audit report is filed with this letter in our office as a matter of public record.

A handwritten signature in cursive script that reads "Tammy R. White".

Tammy R. White, CPA
Deputy State Examiner



**MAJOR HEALTH
PARTNERS**

FINANCIAL STATEMENTS

AND

SUPPLEMENTARY INFORMATION

DECEMBER 31, 2023 AND 2022

CPAs / ADVISORS



MAJOR HEALTH PARTNERS

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REPORT OF INDEPENDENT AUDITORS

Board of Trustees
Major Health Partners
Shelbyville, Indiana

Report on the Audit of Financial Statements

Opinion

We have audited the accompanying financial statements of Major Health Partners (MHP), a component unit of Shelby County, which comprise the statements of net position as of December 31, 2023 and 2022, and the related statements of revenues, expenses and changes in net position, and cash flows for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of MHP as of December 31, 2023 and 2022, and the respective changes in its financial position and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America, the *Uniform Compliance Guidelines for Audits of Hospitals and State and Local Governments by Authorized Independent Public Accountants*, issued by the Indiana State Board of Accounts, and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of MHP and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about MHP's ability to continue as a going concern for twelve months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

Auditor's Responsibilities for the Audit of the Financial Statements

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

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

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

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

Report on Required Supplementary Information

Accounting principles generally accepted in the United States of America require that the Management's Discussion and Analysis be presented to supplement the basic financial statements. Such information is the responsibility of management and, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, 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, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

Board of Trustees
Major Health Partners
Shelbyville, Indiana

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated June 28, 2024, on our consideration of MHP's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of MHP's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering MHP's internal control over financial reporting and compliance.

Blue & Co., LLC

Indianapolis, Indiana
June 28, 2024

REQUIRED SUPPLEMENTARY INFORMATION

MAJOR HEALTH PARTNERS

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2023 AND 2022

This section of Major Health Partners' (MHP) annual financial statements presents background information and management's discussion and analysis (MD&A) of MHP's financial performance. This MD&A does include a discussion and analysis of the activities and results of MHP which consists of Major Hospital (the Hospital) and its blended component units, MedWorks, Inc. (MedWorks), Major Medical Group, LLC, and Major Hospital Foundation. Please read it in conjunction with MHP's financial statements that follow this MD&A.

FINANCIAL HIGHLIGHTS

- MHP reported an increase in net position for 2023 of approximately \$40.7 million compared to a decrease in net position of approximately \$17.2 million in 2022, representing an increase of approximately \$57.9 million in comparison to the 2022 results. The increase was primarily the result of investment return.
- MHP spent approximately \$10.9 million on equipment and capital projects in 2023.
- Liabilities decreased approximately \$51.8 million primarily due to a decrease in accounts payable, accrued expenses and line of credit.

USING THIS ANNUAL REPORT

MHP's financial statements consist of three statements – a statement of net position; a statement of revenues, expenses and changes in net position; and a statement of cash flows. These financial statements and related notes provide information about the activities and the financial position of MHP.

The statement of net position includes all of MHP's assets and liabilities and provides information about the nature and amounts of investments in resources (assets) and the obligations to MHP creditors (liabilities).

All of the current year's revenue earned and expenses incurred are accounted for in the statement of revenues, expenses and changes in net position.

Finally, the statement of cash flows' purpose is to provide information about MHP's cash flows from operating activities, financing activities including capital additions, and investing activities. This statement provides information on the sources and uses of cash and the change in the cash balance during the year.

THE STATEMENT OF NET POSITION AND STATEMENT OF REVENUES, EXPENSES AND CHANGES IN NET POSITION

The statement of net position and the statement of revenues, expenses and changes in net position report information about MHP's resources and its activities. These statements include all restricted and unrestricted assets and all liabilities using the economic resources measurement focus and on the accrual basis of accounting. All of the current year's revenues and expenses are taken into account regardless of when cash is received or paid.

MAJOR HEALTH PARTNERS

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2023 AND 2022

These statements report MHP's net position and changes in them. Think of MHP's net position—the difference between assets, deferred outflows and liabilities—as one way to measure MHP's financial health, or financial position. Over time, increases or decreases in MHP's net position are one indicator of whether its financial health is improving or deteriorating. Consider other nonfinancial factors, however, such as changes in MHP's patient base and measures of the quality of service it provides to the community, as well as local economic factors to assess the overall health of MHP.

Table 1: Statements of Net Position

The significant changes in MHP's assets in 2023 resulted from a decrease in capital assets, net. Assets whose use is limited increased primarily due to investment return during the current year. Total liabilities decreased in 2023 by approximately \$51.8 million in comparison to 2022. The decrease is primarily attributable to accounts payable, accrued expenses and line of credit.

	2023	2022	Change 2023 - 2022	2021	Change 2022 - 2021
Assets					
Current assets	\$ 128,061,656	\$ 159,226,577	\$ (31,164,921)	\$ 155,007,966	\$ 4,218,611
Assets whose use is limited, net	414,400,712	383,382,793	31,017,919	376,169,029	7,213,764
Capital assets, net	154,835,950	165,196,248	(10,360,298)	160,099,475	5,096,773
Other assets, net	7,855,404	7,145,222	710,182	7,588,102	(442,880)
Total assets	<u>705,153,722</u>	<u>714,950,840</u>	<u>(9,797,118)</u>	<u>698,864,572</u>	<u>16,086,268</u>
Deferred outflows - loss on debt refunding	-0-	1,346,282	(1,346,282)	2,961,820	(1,615,538)
Total assets and deferred outflows	<u>\$ 705,153,722</u>	<u>\$ 716,297,122</u>	<u>\$ (11,143,400)</u>	<u>\$ 701,826,392</u>	<u>\$ 14,470,730</u>
Liabilities					
Current liabilities	\$ 208,288,816	\$ 256,107,707	\$ (47,818,891)	\$ 217,618,752	\$ 38,488,955
Other liabilities	3,576,886	3,042,418	534,468	3,446,604	(404,186)
Long term debt, net	83,718,531	88,263,531	(4,545,000)	94,703,621	(6,440,090)
Total liabilities	<u>295,584,233</u>	<u>347,413,656</u>	<u>(51,829,423)</u>	<u>315,768,977</u>	<u>31,644,679</u>
Net position					
Net investment in capital assets	66,572,419	72,687,717	(6,115,298)	62,460,424	10,227,293
Restricted	5,074,548	4,500,532	574,016	5,226,515	(725,983)
Unrestricted	<u>337,922,522</u>	<u>291,695,217</u>	<u>46,227,305</u>	<u>318,370,476</u>	<u>(26,675,259)</u>
Total net position	<u>409,569,489</u>	<u>368,883,466</u>	<u>40,686,023</u>	<u>386,057,415</u>	<u>(17,173,949)</u>
Total liabilities and net position	<u>\$ 705,153,722</u>	<u>\$ 716,297,122</u>	<u>\$ (11,143,400)</u>	<u>\$ 701,826,392</u>	<u>\$ 14,470,730</u>

The significant changes in MHP's assets in 2022 resulted from an increase in assets whose use is limited of approximately \$7.2 million. Assets whose use is limited increased primarily due to purchases during 2022. Total liabilities increased in 2022 by approximately \$31.6 million in comparison to 2021. The increase is primarily attributable to the line of credit.

MAJOR HEALTH PARTNERS

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2023 AND 2022

Table 2: Statements of Revenues, Expenses and Changes in Net Position

MHP's performance in 2023 showed a positive return on equity of 9.9% compared to a negative return of 4.7% in 2022. Total operating revenue increased approximately \$21.9 million as net patient revenue increased approximately \$16.9 million due to outpatient volume and long-term care operations. Other operating revenue increased approximately \$5.0 million in 2023 over 2022. Expenses increased by \$32.4 million between 2022 and 2023. Salaries and benefits increased approximately \$11.9 million in 2023. Other operating expenses increased by approximately \$19.0 million due to an increase in purchased services of approximately \$15.5 million. Nonoperating revenues increased by \$68.4 million due to an increase in investment income of \$68.3 million in 2023 over 2022.

	2023	2022	Change 2023 - 2022	2021	Change 2022 - 2021
Revenues					
Net patient service revenue	\$ 558,330,544	\$ 541,480,465	\$ 16,850,079	\$ 506,827,996	\$ 34,652,469
Other operating revenue	13,060,043	8,030,614	5,029,429	8,893,649	(863,035)
Total revenues	571,390,587	549,511,079	21,879,508	515,721,645	33,789,434
Expenses					
Salaries and benefits	119,604,858	107,701,263	11,903,595	100,174,232	7,527,031
Supplies	37,438,795	35,095,279	2,343,516	29,945,712	5,149,567
Depreciation and amortization	12,780,692	13,536,673	(755,981)	13,933,308	(396,635)
Other operating expenses	391,116,622	372,163,433	18,953,189	369,330,877	2,832,556
Total expenses	560,940,967	528,496,648	32,444,319	513,384,129	15,112,519
Operating income (loss)	10,449,620	21,014,431	(10,564,811)	2,337,516	18,676,915
Nonoperating revenues (expenses)					
Excess of revenues over expenses	27,486,403	(40,938,380)	68,424,783	57,207,857	(98,146,237)
	37,936,023	(19,923,949)	57,859,972	59,545,373	(79,469,322)
Transfers					
	2,750,000	2,750,000	-0-	2,750,000	-0-
Change in net position	40,686,023	(17,173,949)	57,859,972	62,295,373	(79,469,322)
Net position					
Beginning of year	368,883,466	386,057,415	(17,173,949)	323,762,042	62,295,373
End of year	\$ 409,569,489	\$ 368,883,466	\$ 40,686,023	\$ 386,057,415	\$ (17,173,949)

MHP's performance in 2022 and 2021 showed a negative return on equity of 4.7% compared to a positive return of 16.1%, respectively. Total operating revenue increased approximately \$33.8 million as net patient service revenue increased \$34.7 million in 2022 over 2021. Expenses increased by \$15.1 million between 2021 and 2022. Salaries and benefits increased \$7.5 million in 2022 over 2021. Non-operating revenues decreased by \$98.1 million due to a decrease in investment income of \$65.5 million in 2022 and MHP did not recognize any COVID-19 grant funds during 2022.

MAJOR HEALTH PARTNERS

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2023 AND 2022

STATEMENTS OF CASH FLOWS

The final required statement is the statement of cash flows. The statement reports cash receipts, cash payments, and net changes in cash resulting from operations, investing, and financing activities. It provides answers to such questions as "Where did cash come from?", "What was cash used for?" and "What was the change in cash balance during the reporting period?"

Cash and cash equivalents decreased by approximately \$34.8 million in 2023 compared to a decrease of approximately \$7.2 million in 2022. The majority of the 2023 decrease relates to cash used in capital, financing and investing activities.

	2023	2022	Change 2023 - 2022	2021	Change 2022 - 2021
Cash flows from					
Operating activities	\$ 8,062,927	\$ 44,212,932	\$ (36,150,005)	\$27,946,017	\$ 16,266,915
Noncapital financing activities	2,750,000	2,750,000	-0-	13,480,870	(10,730,870)
Capital and related financing	(17,268,938)	(8,468,486)	(8,800,452)	4,040,367	(12,508,853)
Investing	(28,289,470)	(45,678,571)	17,389,101	(68,893,461)	23,214,890
Change in cash and cash equivalents	<u>\$ (34,745,481)</u>	<u>\$ (7,184,125)</u>	<u>\$ (27,561,356)</u>	<u>\$ (23,426,207)</u>	<u>\$ 16,242,082</u>

Cash and cash equivalents decreased by approximately \$7.2 million in 2022 compared to a decrease of approximately \$23.4 million in 2021. The majority of the 2022 decrease relates to cash used in investing activities.

SOURCES OF REVENUE

During 2023, MHP derived substantially all of its revenue from patient service and other related activities. A significant portion of the patient service revenue is from patients that are insured by government health programs, principally Medicare and Medicaid, which are highly regulated and subject to frequent and substantial changes. Revenues from the Medicare and Medicaid programs represented 69% of MHP's acute care gross revenues in 2023.

Following is a table of major sources of acute care gross patient revenues for the past three years:

	2023	2022	2021
Medicare	48%	46%	44%
Medicaid	21%	21%	21%
Anthem	15%	15%	15%
Commercial	13%	15%	17%
Self Pay	3%	3%	3%
	<u>100%</u>	<u>100%</u>	<u>100%</u>

MAJOR HEALTH PARTNERS

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2023 AND 2022

MHP's service mix remained relatively consistent between 2023 and 2022. Acute inpatient revenue accounted for 10% and 11% of gross revenue in 2023 and 2022, respectively. Acute outpatient revenue was 57% and 54% of total gross revenue in 2023 and 2022, respectively. Long-term care revenue was 33% and 35% of total gross revenue in 2023 and 2022, respectively.

CAPITAL ASSETS

During 2023, MHP invested approximately \$10.9 million in capital assets along with retirements and reclassifications of approximately \$8.5 million. The change in capital assets is outlined in the following table:

	2023	2022	Change 2023 - 2022	2021	Change 2022 - 2021
Land and land improvements	\$ 16,691,777	\$ 16,477,359	\$ 214,418	\$ 15,983,169	\$ 494,190
Leasehold improvements	13,289,003	15,280,058	(1,991,055)	13,562,575	1,717,483
Buildings and improvements	150,712,840	146,480,664	4,232,176	140,830,909	5,649,755
Equipment	86,154,217	88,704,009	(2,549,792)	76,773,994	11,930,015
Construction in progress	297,434	636,321	(338,887)	1,869,781	(1,233,460)
Total property and equipment	267,145,271	267,578,411	(433,140)	249,020,428	18,557,983
Less accumulated depreciation	112,309,321	102,382,163	9,927,158	88,920,953	13,461,210
Capital assets, net	<u>\$ 154,835,950</u>	<u>\$ 165,196,248</u>	<u>\$ (10,360,298)</u>	<u>\$ 160,099,475</u>	<u>\$ 5,096,773</u>

MHP strives to meet the needs of the community and provide high quality care by adding new equipment and facilities or by replacing or upgrading equipment as it becomes obsolete. More detailed information about MHP's capital assets is presented in the notes to the financial statements.

DEBT

Total long-term debt (including current portion) decreased from approximately \$92,509,000 to \$88,264,000 in 2023. The decrease in long term debt was due to principal payments during the year. In 2022, total long-term debt (including current portion) decreased \$5,130,000 compared to 2021. The primary reason for the decrease in long term debt was due to principal payments. More detailed information about MHP's long-term debt is presented in the notes to the financial statements.

ECONOMIC OUTLOOK

Management believes that the health care industry's and MHP's operating margins will continue to be under pressure due to a variety of factors including, but not limited to, changes in payor and services mix and growth in operating expenses that are in excess of the increases in contractually arranged and legally established payments received for services rendered. Another factor that poses a challenge to management is the increasing competitive market for the delivery of health care services. This competitive market challenge will potentially be offset by the expected growth in the service area.

MAJOR HEALTH PARTNERS

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2023 AND 2022

MHP will still be faced with the challenge of providing quality services in an increasingly competitive environment, while at the same time managing costs. MHP will continue to be affected by the increases in labor costs due to the competition for health care workers. MHP is also affected by the uncertainty of federal health care reform.

CONTACTING MHP'S FINANCIAL MANAGEMENT

This financial report is designed to provide our patients, suppliers, taxpayers, and creditors with a general overview of MHP's finances and to show MHP's accountability for the money it receives. If you have questions about this report or need additional financial information, contact MHP's Administration Department, at 2451 Intelliplex Dr., Shelbyville, IN 46176.

MAJOR HEALTH PARTNERS

STATEMENTS OF NET POSITION DECEMBER 31, 2023 AND 2022

ASSETS AND DEFERRED OUTFLOWS

	2023	2022
Current assets		
Cash and cash equivalents	\$ 27,902,256	\$ 32,051,771
Patient accounts receivable, net of allowance for uncollectible accounts of \$6,729,041 in 2023 and \$8,298,235 in 2022	53,704,597	55,101,490
Inventory and other current assets	41,909,803	67,828,316
Current portion of assets whose use is limited	4,545,000	4,245,000
Total current assets	128,061,656	159,226,577
Assets whose use is limited		
Internally designated	414,794,382	383,991,830
Donor restricted funds	4,151,330	3,635,963
Total assets whose use is limited	418,945,712	387,627,793
Less current portion	4,545,000	4,245,000
Noncurrent assets whose use is limited	414,400,712	383,382,793
Capital assets, net	154,835,950	165,196,248
Property held for investment	1,926,460	1,926,460
Other assets, net	5,928,944	5,218,762
Total assets	705,153,722	714,950,840
Deferred outflows - loss on debt refunding	-0-	1,346,282
Total assets and deferred outflows	\$ 705,153,722	\$ 716,297,122

See accompanying notes to financial statements.

MAJOR HEALTH PARTNERS

STATEMENTS OF NET POSITION
DECEMBER 31, 2023 AND 2022

LIABILITIES AND NET POSITION

	2023	2022
Current liabilities		
Accounts payable and accrued expenses	\$ 97,667,177	\$ 140,701,786
Accrued wages and related liabilities	19,674,008	16,558,290
Estimated third-party settlements	43,252,631	46,452,631
Line of credit	43,150,000	48,150,000
Current portion of long-term debt		
Revenue bonds payable	4,545,000	4,245,000
Total current liabilities	<u>208,288,816</u>	<u>256,107,707</u>
Other liabilities	3,576,886	3,042,418
Long term debt, net of current portion		
Revenue bonds payable	<u>83,718,531</u>	<u>88,263,531</u>
Total liabilities	295,584,233	347,413,656
Net position		
Net investment in capital assets	66,572,419	72,687,717
Restricted		
Expendable - other specific purpose	1,441,155	925,788
Non-expendable	3,633,393	3,574,744
Total restricted net position	<u>5,074,548</u>	<u>4,500,532</u>
Unrestricted	<u>337,922,522</u>	<u>291,695,217</u>
Total net position	<u>409,569,489</u>	<u>368,883,466</u>
Total liabilities and net position	<u>\$ 705,153,722</u>	<u>\$ 716,297,122</u>

See accompanying notes to financial statements.

MAJOR HEALTH PARTNERS

STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION YEARS ENDED DECEMBER 31, 2023 AND 2022

	2023	2022
Revenues		
Net patient service revenue	\$ 558,330,544	\$ 541,480,465
Other revenue	13,060,043	8,030,614
Total revenues	571,390,587	549,511,079
Expenses		
Salaries and wages	96,832,068	87,698,186
Employee benefits	22,772,790	20,003,077
Medical professional fees	4,336,389	3,752,822
Supplies	37,438,795	35,095,279
Purchased services	327,259,114	311,720,458
Rent and maintenance	41,858,445	41,825,287
Utilities	1,898,142	1,719,056
Insurance	1,395,180	1,391,031
Depreciation and amortization	12,780,692	13,536,673
HAF and HIP program fee	7,931,912	5,927,722
Other expenses	6,437,440	5,827,057
Total expenses	560,940,967	528,496,648
Operating income	10,449,620	21,014,431
Nonoperating revenues (expenses)		
Investment income (loss)	31,782,039	(36,474,281)
Interest expense	(5,603,544)	(5,221,639)
Other nonoperating revenue	1,307,908	757,540
Nonoperating revenues (expenses), net	27,486,403	(40,938,380)
Excess of revenues over expenses	37,936,023	(19,923,949)
Transfers - contributions from noncontrolling interest	2,750,000	2,750,000
Change in net position	40,686,023	(17,173,949)
Net position		
Beginning of year	368,883,466	386,057,415
End of year	\$ 409,569,489	\$ 368,883,466

See accompanying notes to financial statements.

MAJOR HEALTH PARTNERS

STATEMENTS OF CASH FLOWS YEARS ENDED DECEMBER 31, 2023 AND 2022

	2023	2022
Operating activities		
Cash received from patient services	\$ 556,527,437	\$ 550,824,297
Cash paid for salaries, wages and benefits	(116,489,140)	(107,397,007)
Cash paid to vendors and suppliers	(435,848,453)	(407,670,677)
Other receipts, net	3,873,083	8,456,319
Net cash flows from operating activities	8,062,927	44,212,932
Noncapital financing activities		
Transfers - contributions from noncontrolling interest	2,750,000	2,750,000
Net cash flows from noncapital financing activities	2,750,000	2,750,000
Capital and related financing activities		
Principal payments on long-term debt	(4,245,000)	(5,130,520)
Borrowings from line of credit	-0-	20,500,000
Payments on line of credit	(5,000,000)	-0-
Interest on long-term debt	(5,603,544)	(5,221,639)
Purchases of capital assets	(10,897,172)	(18,633,502)
Loss on disposition of capital assets	8,476,778	17,175
Net cash flows from capital and related financing activities	(17,268,938)	(8,468,486)
Investing activities		
Investment income (loss)	31,782,039	(36,474,281)
Other nonoperating revenues	1,307,908	757,540
Purchase of investments	(91,730,124)	(61,695,036)
Proceeds from sale of investments	30,350,707	51,733,206
Net cash flows from investing activities	(28,289,470)	(45,678,571)
Net change in cash and cash equivalents	(34,745,481)	(7,184,125)
Cash and cash equivalents:		
Beginning of year	108,122,182	108,122,182
End of year	\$ 73,376,701	\$ 100,938,057
Reconciliation of cash and cash equivalents to the statements of net position		
Cash and cash equivalents		
In current assets	\$ 27,902,256	\$ 32,051,771
In assets whose use is limited		
Internally designated	45,420,985	68,699,262
Donor restricted	53,460	187,024
Total cash and cash equivalents	\$ 73,376,701	\$ 100,938,057

See accompanying notes to financial statements.

MAJOR HEALTH PARTNERS

STATEMENTS OF CASH FLOWS YEARS ENDED DECEMBER 31, 2023 AND 2022

	2023	2022
	<u> </u>	<u> </u>
Reconciliation of operating income		
to net cash from operating activities		
Operating income	\$ 10,449,620	\$ 21,014,431
Adjustments to reconcile operating income to net cash flows from operating activities		
Depreciation and amortization	12,780,692	13,536,673
Bad debts	8,175,023	6,592,924
Changes in operating assets, deferred outflows and liabilities		
Patient accounts receivable	(6,778,130)	2,895,799
Inventory and other current assets	25,918,513	(18,564,698)
Other assets	(710,182)	442,880
Deferred outflows	1,346,282	1,615,538
Accounts payable and accrued expenses	(43,034,609)	16,520,020
Accrued wages and related liabilities	3,115,718	304,256
Medicare accelerated and advanced payments	-0-	(2,101,000)
Estimated third-party settlements	(3,200,000)	1,956,109
Net cash flows from operating activities	<u>\$ 8,062,927</u>	<u>\$ 44,212,932</u>

See accompanying notes to financial statements.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Organization and Reporting Entity

The financial statements of Major Health Partners (MHP) refer to Major Hospital (the Hospital) and its subsidiaries.

The Hospital is an acute-care hospital located in Shelbyville, Indiana, organized for the purpose of providing healthcare services to the residents of Shelby County and the surrounding communities. The Hospital is a city/county hospital and operates under the Indiana County Hospital Law, Indiana Code (IC) 16-22. The Hospital provides short-term inpatient, outpatient and long-term health care.

A hospital appointing board, consisting of one county commissioner, one county council person and the mayor of the city of Shelbyville, appoints the governing board of the Hospital. The Hospital is considered a component unit of Shelby County.

Pursuant to the provision of long-term care, MHP owns the operations of certain long-term care facilities by way of an arrangement with managers of the facilities. These facilities provide inpatient and therapy services. Generally, gross revenues from the operation of the long-term care facilities are the property of MHP, and MHP is responsible for the associated operating expenses and working capital requirements. While the management and related lease agreements are in effect, the performance of all activities of the managers shall be on behalf of MHP, and MHP retains the authority and legal responsibility for the operation of the facilities.

Specifically, MHP entered into lease agreements with the long-term care facilities to lease the facilities managed by the respective managers. Concurrently, MHP entered into an agreement with the managers to manage the leased facilities. As part of the agreements, MHP will pay the managers a management fee to continue managing the facilities on behalf of MHP in accordance with the terms of the agreements. The agreements expire at various times. Generally, all parties involved can terminate the agreement without cause with 90 days written notice.

Accounting principles generally accepted in the United States require that these financial statements present the Hospital and its significant component units, collectively referred to as the "primary government." The blended component units discussed below are included in the Hospital's reporting entity because of the significance of their operational or financial relationships with the Hospital. Blended component units, although legally separate entities, are in substance part of the primary government's operations and exist solely to provide services for the primary government; data from these units is with data of the primary government.

Blended Component Units

Major Hospital Foundation (the Foundation) is a blended component unit of the Hospital. The Foundation is a separate not-for-profit entity organized to support the operations of the Hospital.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

MedWorks, Inc. (MedWorks) is a blended component unit of the Hospital which operates a pharmacy located in Shelbyville, Indiana. MedWorks is the majority owner of Major Multispecialty Associates, LLC (MMSA) and Onsite Solutions, LLC (Onsite). These practices generally provide health care services to the community. The Hospital is the 100% owner of MedWorks. Although MedWorks is legally separate from the Hospital, MedWorks is reported as if it were a part of the Hospital as the two governing boards are substantially the same.

Major Medical Group, LLC (MMG) is a blended component unit of the Hospital. MMG was organized to provide various physician practice services. The Hospital is the majority owner (60%) of MMG.

All significant intercompany transactions have been eliminated in the financial statements.

The separate financial statements for each of the entities discussed above may be obtained through contacting management of MHP.

Use of Estimates

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

Measurement Focus and Basis of Accounting

The financial statements are reported using the economic resources measurement focus and on the accrual basis of accounting. Revenues are recorded when earned and expenses are recorded when a liability is incurred, regardless of the timing of related cash flows.

Cash and Cash Equivalents

Cash and cash equivalents include deposits and investments in highly liquid debt instruments with an original maturity date of 90 days or less from the date of purchase. MHP maintains its cash in accounts, which at times, may exceed federally insured limits. MHP has not experienced any losses in such accounts. MHP believes it is not exposed to any significant credit risk on cash and cash equivalents.

Assets Whose Use is Limited

Assets whose use is limited are stated at fair market value in the financial statements. These assets include investments designated by the Hospital board for internal purposes, investments restricted by donors for a specific purpose and investments held by trustees for debt service.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

These investments consist primarily of cash and cash equivalents, US government securities, mutual funds, corporate debt and equity securities. Investment interest, dividends, gains and losses, both realized and unrealized are included in nonoperating revenues (expenses) in the statements of revenues, expenses and changes in net position.

Nonparticipating certificates of deposit, demand deposits and similar negotiable instruments that are not reported as cash and cash equivalents are reported as investments at contract value.

Patient Accounts Receivable and Patient Service Revenues

Patient revenues and the related accounts receivable are recorded at the time services to patients are performed. MHP is a provider of services to patients entitled to coverage under Titles XVIII and XIX of the Health Insurance Act (Medicare and Medicaid). MHP is reimbursed for Medicare and Medicaid inpatient services based on a fixed price per discharge for each diagnosis related grouping (DRG).

MHP is reimbursed for Medicare and Medicaid outpatient services based on a fixed price per clinical unit of service. Differences between the total program billed charges and the payments received are reflected as deductions from revenue. At MHP's year-end, a cost report is filed with the Medicare program computing reimbursement amounts related to Medicare patients. These programs have audited the year-end cost report filed with the Medicare program through December 31, 2020 with differences reflected as deductions from revenue in 2023. Amounts for unresolved cost reports for 2021 through 2023 are reflected in estimated third-party settlements on the statements of net position.

Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. Although these audits may result in some changes in these amounts, they are not expected to have a material effect on the accompanying financial statements.

Accounts receivable for patients, insurance companies, and governmental agencies are based on gross charges less an allowance for contractual adjustments and interim payment advances. An allowance for contractual adjustments and interim payment advances is based on expected payment rates from payors based on current reimbursement methodologies. This amount also includes amounts received as interim payments against unpaid claims by certain payors. An allowance for uncollectible accounts is established on an aggregate basis by using historical write-off rate factors applied to unpaid accounts based on aging. Loss rate factors are based on historical loss experience and adjusted for economic conditions and other trends affecting MHP's ability to collect outstanding amounts. Uncollectible amounts are written off against the allowance for doubtful accounts in the period they are determined to be uncollectible.

Grants and Contributions

MHP received grant funds from Shelby County, the City of Shelbyville, Indiana and Provider Relief Funds (PRF) from the federal government. Revenues from grants and contributions are recognized when all requirements are met.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Grants may be restricted for either specific operation purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as nonoperating revenues.

Endowments

Endowments are provided to MHP through the Foundation on a voluntary basis by individuals and private organizations. Permanent endowments require that the principal or corpus of the endowment be retained in perpetuity. If a donor has not provided specific instructions, the Foundation's governing board is permitted to expend the net appreciation of the investments of endowment funds.

Charity Care

MHP provides care without charge or at amounts less than its established rates to patients who meet certain criteria under its charity care policy on a sliding scale on the basis of financial need. Because MHP does not pursue collection of approved charity care balances, the charges are not reflected in net revenue. Rather, charges approved for charity are posted to gross revenue and subsequently written off as a charity adjustment before the resulting net patient service revenue.

Of MHP's total expenses reported within the statements of revenues, expenses and changes in net position; an estimated \$385,000 and \$357,000 arose from providing services to charity patients for 2023 and 2022, respectively. The estimated costs of providing charity services are based on a calculation which applies a ratio of costs to charges to the gross uncompensated charges associated with providing care to charity patients. The ratio of cost to charges is calculated based on MHP's total expenses to gross patient service revenue. There were no significant changes to MHP's charity care policy during 2023 and 2022.

Inventory and Other Current Assets

Inventory is valued at the lower of cost or market with cost being determined on the first-in, first-out (FIFO) method. Inventory at year-end consists mainly of pharmaceuticals and medical supplies. Other current assets consist of prepaid expenses, other reimbursement receivables related to long-term care services and various other current items. These assets are classified as current as they are expected to be utilized during 2024.

The composition of inventory and other current assets includes the following as of December 31:

	2023	2022
Inventory	\$ 6,192,854	\$ 6,165,337
Prepaid expenses	6,204,916	6,273,417
Other receivables	29,512,033	55,389,562
Total	<u>\$ 41,909,803</u>	<u>\$ 67,828,316</u>

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Capital Assets and Depreciation

Capital assets such as property and equipment are stated at cost and include expenditures for new additions and other costs added to existing facilities which exceed \$2,500 for the Hospital, \$500 for other entities, and meet certain useful life thresholds. Maintenance, repairs and minor renewals are expensed as incurred.

MHP provides for depreciation of property and equipment using annual rates, which are sufficient to depreciate the cost of depreciable assets over their estimated useful lives using the straight-line method. The range of useful lives in computing depreciation is as follows:

<u>Description</u>	<u>Range of Useful Lives</u>
Land improvements	15 years
Leasehold improvements	15 years
Buildings and improvements	4-50 years
Equipment	5-15 years

Deferred Outflows of Resources

A deferred outflow of resources is a consumption of net position by MHP that is applicable to a future reporting period. Deferred outflows of resources are reported in the statements of net position but are not recognized in the financial statements as expenses until the periods to which they relate. Deferred outflows of resources consist of losses on debt refunding which became fully recognized during 2023.

Classification of Net Position

Net position of MHP is classified in four components: (1) net investment in capital assets consists of capital assets net of accumulated depreciation and reduced by the current balance of any outstanding borrowings used to finance the purchase or construction of those assets and increased by funds held by trustee for construction of the property and equipment related to the borrowings, (2) restricted expendable net position includes assets that must be used for a particular purpose, as specified by creditors, grantors, or contributors external to the Hospital, including amounts deposited with trustees as required by revenue note indentures, (3) restricted non-expendable net position includes the principal portion of permanent endowments and noncontrolling interests owned by external investors, (4) unrestricted net position is the remaining net position that does not meet the definition of invested in capital assets net of related debt or restricted.

Restricted Resources

When MHP has both restricted and unrestricted resources available to finance a particular program, it is MHP's policy to use restricted resources before unrestricted resources.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Statements of Revenues, Expenses and Changes in Net Position

MHP's statements of revenues, expenses and changes in net position distinguishes between operating and nonoperating revenues and expenses. For purposes of display, transactions deemed by management to be ongoing, major or central to the provision of healthcare services are reported as revenues and expenses. Peripheral or incidental transactions such as investment activities are reported as nonoperating revenues or expenses.

Income Taxes

The Hospital is a governmental instrumentality organized under Title 16, Article 22, of the Indiana statutes. The Hospital is exempt from federal income tax under the Internal Revenue Code of 1986 as a charitable, educational, and scientific organization as described under Section 501(c)(3). As such, the Hospital is generally exempt from income taxes as a unit of local government. No income tax filings are required of the Hospital as it is a governmental instrumentality.

The blended component unit of the Foundation is tax-exempt organizations under Internal Revenue Code 501(c)(3). As such, the Foundation is generally exempt from income taxes. However, the Foundation is required to file Federal Form 990 – Return of Organization Exempt from Income Tax, which is an informational return only.

The blended component unit of MedWorks is organized as a corporation subject to federal and state income taxes. Income taxes for these entities are provided for the tax effects of transactions reported in the financial statements and consist of taxes currently due plus deferred taxes. However, the effects of recording a deferred tax provision have been deemed immaterial and have not been recorded in the accompanying financial statements.

The remaining subsidiaries of MedWorks and MMG are organized as limited liability companies, whereby net taxable income is taxed directly to the members of the limited liability companies. Thus, the financial statements do not include any provision for federal or state income taxes related to these entities.

Accounting principles generally accepted in the United States of America require management to evaluate tax positions taken by MHP (and their affiliates) and recognize a tax liability if MHP has taken an uncertain position that more likely than not would not be sustained upon examination by various federal and state taxing authorities. Management has analyzed the tax positions taken by MHP and has concluded that as of December 31, 2023 and 2022, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the accompanying financial statements. MHP is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

These entities have filed their federal and state income tax returns for periods through December 31, 2022. These income tax returns are generally open to examination by the relevant taxing authorities for a period of three years from the later of the date the return was filed or its due date (including approved extensions).

Compensated Absences

MHP's policy on compensated absences (which include vacation, sick leave and holidays) allows full time employees and regular part time employees to accrue days off, to a maximum hour as stated in the personnel policies. Compensated absences are accrued when incurred and reported as a liability on the statements of net position.

Advertising

MHP's policy is to expense advertising costs as they are incurred. Advertising expense was approximately \$99,000 and \$117,000 for 2023 and 2022, respectively.

Litigation

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

Risk Management

MHP is exposed to various risks of loss from torts; theft of, damage to, and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses and natural disasters. Commercial insurance coverage is purchased for claims arising from such matters. Settled claims have not exceeded this commercial coverage in any of the three preceding years.

Subsequent Events

MHP evaluated events or transactions occurring subsequent to the statement of net position date for recognition and disclosure in the accompanying financial statements through the date the financial statements were available to be issued which is June 28, 2024.

Reclassifications

Certain amounts in the prior year financial statements were reclassified to conform to the current year presentation. There was no impact on the net position or change in net position as a result of these reclassifications.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

New Accounting Pronouncement

In June 2022, the Governmental Accounting Standards Board (GASB) issued GASB Statement No. 101, *Compensated Absences*, which will be effective for periods beginning after December 15, 2023. The objective of this new guidance is to better meet the information needs of financial statement users by updating the recognition and measurement guidance for compensated absences under a unified model and by amending certain previously required disclosures.

MHP is currently evaluating the effects this accounting pronouncement will have on its future financial statements, including related disclosures.

2. NET PATIENT SERVICE REVENUE

MHP has agreements with third-party payors that provide for reimbursement to MHP at amounts different from its established rates. Estimated contractual adjustments under third-party reimbursement programs represent the difference between the MHP's billings at standard rates and amounts reimbursed by third-party payors. They also include any differences between estimated third-party reimbursement settlements for prior years and subsequent final settlements.

A summary of the reimbursement arrangements with major third-party payors is as follows:

Medicare

Medicare inpatient services are reimbursed based on a predetermined amount for each case based on the diagnosis associated with the patient (Prospective Payment Hospital). These rates vary according to a patient classification system that is based on clinical, diagnostic and other factors. The prospectively determined rates are not subject to retroactive adjustment with the exception of a few select items, such as bad debts.

MHP's classification of patients under the Prospective Payment Hospital and the appropriateness of patient admissions are subject to validation reviews by the Medicare peer review organization which is under contract with MHP to perform such reviews. Medicare outpatient services are primarily reimbursed on predetermined rates based on the services provided.

Medicaid

MHP is reimbursed for Medicaid inpatient services under a prospectively determined rate-per-discharge and is not subject to retroactive adjustment. The differences between standard charges and reimbursement from these programs are recorded as contractual adjustments.

Reimbursement for Medicaid outpatient services is based on predetermined rates, and is not subject to retroactive cost based settlements. MHP is eligible for the Indiana Medicaid Supplemental programs including Medicaid Disproportionate Share Hospital and Municipal Upper Payment Limit programs. These programs are federal programs administered by the State of Indiana.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

The Hospital participates in the Hospital Assessment Fee (HAF) Program. The purpose of the HAF Program is to fund the State share of enhanced Medicaid payments and Medicaid Disproportionate Share (DSH) payments for Indiana hospitals as reflected in the HAF and the Healthy Indiana Plan (HIP) program fee reported in the statements of revenues, expenses and changes in net position.

Previously, the State's share was funded by governmental entities through intergovernmental transfers. The Medicaid enhanced payments relate to both fee for service and managed care claims. The Medicaid enhanced payments are designed to follow the patients and result in increased Medicaid rates. Hospitals also fund the HIP Program, the State's Medicaid expansion program. The payments related to the HIP Program mirror the Medicaid payments under the HAF Program, but the funding includes physician, state administration, and certain non-hospital expenditures. During 2023 and 2022, MHP recognized HAF and HIP program fee of approximately \$7,932,000 and \$5,928,000, respectively. The Medicaid rate increases under the HAF and HIP Programs are included in net patient service revenue in the statements of revenues, expenses and changes in net position.

Other Payors

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

The following is a summary of net patient service revenue for 2023 and 2022:

	<u>2023</u>	<u>2022</u>
Patient service revenue		
Inpatient	\$ 94,753,441	\$ 92,179,532
Outpatient	524,802,654	469,644,859
Long-term care	312,975,911	300,072,522
Gross patient service revenue	<u>932,532,006</u>	<u>861,896,913</u>
Deductions from revenue		
Contractual allowances	364,927,866	312,804,072
Charity care	1,098,573	1,019,452
Bad debts	8,175,023	6,592,924
Total deductions from revenue	<u>374,201,462</u>	<u>320,416,448</u>
Net patient service revenue	<u><u>\$ 558,330,544</u></u>	<u><u>\$ 541,480,465</u></u>

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

3. ASSETS WHOSE USE IS LIMITED

The classification "Assets whose use is limited" includes:

Internally designated – Amounts transferred by MHP's board of trustees through funding depreciation expense. Such amounts are to be used for equipment and building, remodeling, repairing, replacing or making additions to MHP buildings as authorized by Indiana Code 16-22-3-13.

Restricted – Amounts designated by outside parties for other specific purposes. Assets whose use is limited that are required for obligations classified as current liabilities are reported in current assets.

The composition of assets whose use is limited includes the following as of December 31:

	2023	2022
Internally designated		
Cash and cash equivalents	\$ 45,420,985	\$ 68,699,262
US Government securities	72,408,843	60,877,907
Mutual funds	296,156,111	251,968,529
Corporate equity securities	808,443	2,094,236
Corporate debt securities	-0-	351,896
Total internally designated	<u>414,794,382</u>	<u>383,991,830</u>
Donor restricted		
Cash and cash equivalents	53,460	187,024
US Government securities	124,317	200,720
Mutual funds	3,071,789	393,216
Corporate equity securities	901,764	2,476,552
Corporate debt securities	-0-	378,451
Total donor restricted	<u>4,151,330</u>	<u>3,635,963</u>
Total assets whose use is limited	<u>\$ 418,945,712</u>	<u>\$ 387,627,793</u>

The corporate equity and debt securities are owned by the Foundation.

4. DEPOSITS AND INVESTMENTS

Deposits with financial institutions in the State of Indiana at year end were entirely insured by the Federal Depository Insurance Corporation or by the Indiana Deposit Insurance Fund. This includes any deposit accounts issued or offered by a qualifying financial institution.

Investments are carried at fair market value and money market deposit funds which are carried at contract value. Net realized gains and losses on security transactions are determined on the specific identification cost basis. MHP's investments generally are reported at fair value, as discussed in Note 1.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

As of December 31, 2023 and 2022, MHP had the following investments and maturities, all of which were held in MHP's name by custodial banks that are agents of MHP:

December 31, 2023					
Investment Maturities (in years)					
	Carrying Amount	Less than 1	1-5	6-10	More than 10
US Government securities	\$ 72,533,160	\$ 15,364,136	\$ 38,010,106	\$ 10,567,690	\$ 8,591,228
Mutual funds	299,227,900	299,227,900	-0-	-0-	-0-
Money market mutual funds	-0-	-0-	-0-	-0-	-0-
Corporate equity securities	1,710,207	1,710,207	-0-	-0-	-0-
	<u>\$373,471,267</u>	<u>\$316,302,243</u>	<u>\$ 38,010,106</u>	<u>\$ 10,567,690</u>	<u>\$ 8,591,228</u>

December 31, 2022					
Investment Maturities (in years)					
	Carrying Amount	Less than 1	1-5	6-10	More than 10
US Government securities	\$ 61,078,627	\$ 5,961,726	\$ 40,039,369	\$ 14,688,832	\$ 388,700
Mutual funds	252,361,745	252,361,745	-0-	-0-	-0-
Corporate equity securities	4,570,788	4,570,788	-0-	-0-	-0-
Corporate debt securities	730,347	730,347	-0-	-0-	-0-
	<u>\$318,741,507</u>	<u>\$263,624,606</u>	<u>\$ 40,039,369</u>	<u>\$ 14,688,832</u>	<u>\$ 388,700</u>

Interest rate risk – MHP does have a formal investment policy that limits investment maturities as a means of managing its exposure to fair value losses arising from changing interest rates.

Credit risk – Statutes authorize MHP to invest in interest bearing deposit accounts, passbook savings accounts, certificates of deposit, money market deposit accounts, mutual funds, pooled fund investments, securities backed by the full faith and credit of the United States Treasury and repurchase agreements. The statutes require that repurchase agreements be fully collateralized by US Government or US Government Agency obligations.

Concentration of credit risk – MHP places no limit on the amount it may invest in any one issuer. MHP maintains its investments, which at times may exceed federally insured limits. MHP has not experienced any losses in such accounts. MHP believes that it is not exposed to any significant credit risk on investments. MHP does not have a formal policy for credit and concentration risk.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Deposits and investments consist of the following as of December 31, 2023 and 2022:

	2023	2022
Carrying amount		
Deposits	\$ 73,376,701	\$ 100,938,057
Investments	373,471,267	318,741,507
	<u>\$ 446,847,968</u>	<u>\$ 419,679,564</u>
Included in the statements of net position captions		
Cash	\$ 27,902,256	\$ 32,051,771
Internally designated	414,794,382	383,991,830
Restricted funds	4,151,330	3,635,963
	<u>\$ 446,847,968</u>	<u>\$ 419,679,564</u>

5. FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3).

The three levels of the fair value hierarchy are described as follows:

- Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that MHP has the ability to access.
- Level 2: Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3: Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2023 and 2022.

- *U.S. government securities:* Valued using pricing models maximizing the use of observable inputs for similar securities.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

- *Mutual funds*: Valued at the daily closing price as reported by the fund. Mutual funds held by MHP are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact at that price. The mutual funds held by MHP are deemed to be actively traded.
- *Corporate equity securities*: Valued at the closing price reported on the active market on which the individual securities are traded.
- *Corporate debt securities*: Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings.

MHP's policy is to recognize transfers between levels as of the end of the reporting period. There were no significant transfers between levels during 2023 and 2022. The following table sets forth by level, within the hierarchy, MHP's assets and liabilities measured at fair value on a recurring basis as of December 31, 2023.

	December 31, 2023			
	Total	Level 1	Level 2	Level 3
Assets				
US government securities				
US treasury notes	\$ 22,807,224	\$ -0-	\$ 22,807,224	\$ -0-
Federal home loan bank	4,768,311	-0-	4,768,311	-0-
Mortgage backed securities	44,957,625	-0-	44,957,625	-0-
Total US government securities	72,533,160	-0-	72,533,160	-0-
Mutual funds				
Nontraditional bonds	17,758,730	17,758,730	-0-	-0-
Large blend	49,586,958	49,586,958	-0-	-0-
Large growth	27,762,043	27,762,043	-0-	-0-
Mid-cap value	26,450,071	26,450,071	-0-	-0-
Options trading	26,390,716	26,390,716	-0-	-0-
Short government	26,480,944	26,480,944	-0-	-0-
Short-term bonds	54,415,613	54,415,613	-0-	-0-
World bonds	26,925,682	26,925,682	-0-	-0-
Other	43,457,143	43,457,143	-0-	-0-
Total mutual funds	299,227,900	299,227,900	-0-	-0-
Corporate equity securities				
Basic industries	193,154	193,154	-0-	-0-
Consumer	336,093	336,093	-0-	-0-
Energy	157,670	157,670	-0-	-0-
Finance	178,688	178,688	-0-	-0-
Healthcare	210,778	210,778	-0-	-0-
Technology	439,364	439,364	-0-	-0-
Other	194,460	194,460	-0-	-0-
Total corporate equity securities	1,710,207	1,710,207	-0-	-0-
	373,471,267	\$ 300,938,107	\$ 72,533,160	\$ -0-
Cash and cash equivalents	45,474,445			
Total assets whose use is limited	\$ 418,945,712			

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

The following table sets forth by level, within the hierarchy, MHP's assets and liabilities measured at fair value on a recurring basis as of December 31, 2022.

	December 31, 2022			
	Total	Level 1	Level 2	Level 3
Assets				
Assets whose use is limited				
US government securities				
US treasury notes	\$ 41,123,237	\$ -0-	\$ 41,123,237	\$ -0-
Federal home loan bank	517,698	-0-	517,698	-0-
Mortgage backed securities	19,437,692	-0-	19,437,692	-0-
Total US government securities	61,078,627	-0-	61,078,627	-0-
Mutual funds				
Nontraditional bonds	37,823,338	37,823,338	-0-	-0-
Large blend	26,514,775	26,514,775	-0-	-0-
Large growth	29,790,674	29,790,674	-0-	-0-
Mid-cap value	24,492,179	24,492,179	-0-	-0-
Options trading	24,141,507	24,141,507	-0-	-0-
Short government	36,639,103	36,639,103	-0-	-0-
Short-term bonds	48,346,955	48,346,955	-0-	-0-
World bonds	22,378,075	22,378,075	-0-	-0-
Other	2,235,139	2,235,139	-0-	-0-
Total mutual funds	252,361,745	252,361,745	-0-	-0-
Corporate equity securities				
Basic industries	461,672	461,672	-0-	-0-
Capital goods	208,938	208,938	-0-	-0-
Consumer	683,479	683,479	-0-	-0-
Energy	200,849	200,849	-0-	-0-
Finance	822,316	822,316	-0-	-0-
Healthcare	268,099	268,099	-0-	-0-
Services	533,190	533,190	-0-	-0-
Technology	738,239	738,239	-0-	-0-
Utilities	182,966	182,966	-0-	-0-
Other	471,040	471,040	-0-	-0-
Total corporate equity securities	4,570,788	4,570,788	-0-	-0-
Corporate debt securities				
Financial services	730,347	-0-	730,347	-0-
Total corporate debt securities	730,347	-0-	730,347	-0-
	318,741,507	\$ 256,932,533	\$ 61,808,974	\$ -0-
Cash and cash equivalents				
	68,886,286			
Total assets whose use is limited	<u>\$ 387,627,793</u>			

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

6. RESTRICTED NON-EXPENDABLE NET POSITION

MHP, through the Foundation and noncontrolling interest, has restricted non-expendable net position. Unless a contributor provides specific instructions, the Foundation's governing board is permitted to expend the net appreciation (realized and unrealized) of the investments in its endowments. When administering its power to spend net appreciation, the governing board is required to consider the Foundation's and supported organization's long and short-term needs, present and anticipated financial requirements, expected total return on its investments, price-level trends, and general economic conditions. Any net appreciation that is spent is required to be spent for the purposes designated by the contributor. The Foundation's governing board chooses to spend the investment income (including changes in the value of investments) under the established investment policy.

Restricted non-expendable net position as of December 31, 2023 and 2022, represent the principal amounts of permanent endowments, restricted to investment in perpetuity, as well as the noncontrolling interest in majority owned subsidiaries. Investment earnings from the Foundation's permanent endowments are expendable to support the programs as established by the contributors. The following is a summary of the restricted non-expendable net position as of December 31, 2023 and 2022:

	2023	2022
Compton endowment	\$ 521,714	\$ 521,714
McFadden endowment	333,133	333,133
Benessee endowment	877,664	877,664
Una Vie endowment	877,664	877,664
Lee endowment	50,000	50,000
Beck nursing scholarship endowment	50,000	50,000
Noncontrolling interest	923,218	864,569
	\$ 3,633,393	\$ 3,574,744

The following table depicts the changes in net position attributable to the controlling financial interest of MHP and the noncontrolling interest.

	Controlling interest	Noncontrolling interest	Total
Balance, December 31, 2021	\$ 385,382,534	\$ 674,881	\$ 386,057,415
Excess (deficit) of revenues over expenses	(17,363,637)	(2,560,312)	(19,923,949)
Transfers - Contributions from noncontrolling interest	-0-	2,750,000	2,750,000
Change in net position	(17,363,637)	189,688	(17,173,949)
Balance, December 31, 2022	368,018,897	864,569	368,883,466
Deficit of revenues over expenses	40,627,374	(2,691,351)	37,936,023
Transfers - Contributions from noncontrolling interest	-0-	2,750,000	2,750,000
Change in net position	40,627,374	58,649	40,686,023
Balance, December 31, 2023	\$ 408,646,271	\$ 923,218	\$ 409,569,489

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

7. CAPITAL ASSETS

Capital Assets, Net

A summary of property and equipment, including assets under capital leases for 2023 and 2022 follows:

	December 31, 2022	Additions	Disposals	Transfers	December 31, 2023
Land and land improvements	\$ 16,477,359	\$ 111,350	\$ -0-	\$ 103,068	\$ 16,691,777
Leasehold improvements	15,280,058	-0-	(1,991,055)	-0-	13,289,003
Buildings and improvements	146,480,664	523,243	(164,754)	3,873,687	150,712,840
Equipment	88,704,009	6,386,578	(9,174,503)	238,133	86,154,217
Construction in progress	636,321	3,876,001	-0-	(4,214,888)	297,434
Total property and equipment	267,578,411	10,897,172	(11,330,312)	-0-	267,145,271
Less accumulated depreciation					
Land improvements	5,915,882	672,578	-0-	-0-	6,588,460
Leasehold improvements	1,163,283	67,559	(489,060)	-0-	741,782
Buildings and improvements	36,661,527	6,256,616	(73,313)	-0-	42,844,830
Equipment	58,641,471	5,783,939	(2,291,161)	-0-	62,134,249
Total accumulated depreciation	102,382,163	12,780,692	(2,853,534)	-0-	112,309,321
Capital assets, net	<u>\$ 165,196,248</u>	<u>\$ (1,883,520)</u>	<u>\$ (8,476,778)</u>	<u>\$ -0-</u>	<u>\$ 154,835,950</u>

	December 31, 2021	Additions	Disposals	Transfers	December 31, 2022
Land and land improvements	\$15,983,169	\$ 98,300	\$ -0-	\$ 395,890	\$ 16,477,359
Leasehold improvements	13,562,575	1,717,483	-0-	-0-	15,280,058
Buildings and improvements	140,830,909	31,305	-0-	5,618,450	146,480,664
Equipment	76,773,994	12,014,133	(75,519)	(8,599)	88,704,009
Construction in progress	1,869,781	4,772,281	-0-	(6,005,741)	636,321
Total property and equipment	249,020,428	18,633,502	(75,519)	-0-	267,578,411
Less accumulated depreciation					
Land improvements	5,254,759	661,123	-0-	-0-	5,915,882
Leasehold improvements	1,023,669	139,614	-0-	-0-	1,163,283
Buildings and improvements	30,515,034	6,146,493	-0-	-0-	36,661,527
Equipment	52,127,491	6,589,443	(75,463)	-0-	58,641,471
Total accumulated depreciation	88,920,953	13,536,673	(75,463)	-0-	102,382,163
Capital assets, net	<u>\$ 160,099,475</u>	<u>\$ 5,096,829</u>	<u>\$ (56)</u>	<u>\$ -0-</u>	<u>\$ 165,196,248</u>

As of December 31, 2023, MHP did not have any significant construction commitments for future projects.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Property Held for Investment

MHP currently holds approximately 40 acres of land available for sale. The land is located in the Intelliplex Park where the Hospital's Cancer Center is located. The land is valued at cost plus improvements and will be sold in lots in varying size. Land held for investment is included within the property held for investment section of the statements of net position.

8. ACCOUNTS RECEIVABLE AND PAYABLE

Patient accounts receivable and accounts payable (including accrued expenses) reported as current assets and liabilities as of December 31, 2023 and 2022 is as follows:

	<u>2023</u>	<u>2022</u>
Patient accounts receivable		
Receivable from patients and their insurance carriers	\$ 25,214,035	\$ 22,975,159
Receivable from Medicare	24,041,289	23,522,186
Receivable from Medicaid	9,381,966	8,205,414
Receivables related to long-term care operations	<u>39,270,422</u>	<u>42,933,334</u>
Total patient accounts receivable	97,907,712	97,636,093
Less contractual allowances	(37,474,074)	(34,236,368)
Less allowance for uncollectible amounts	(6,729,041)	(8,298,235)
Patient accounts receivable, net	<u>\$ 53,704,597</u>	<u>\$ 55,101,490</u>
Accounts payable and accrued expenses		
Payable to employees (including payroll taxes and benefits)	\$ 19,674,008	\$ 16,558,290
Payable to suppliers and other accrued expenses	<u>97,667,177</u>	<u>140,701,786</u>
Total accounts payable and accrued expenses	<u>\$ 117,341,185</u>	<u>\$ 157,260,076</u>

9. LINE OF CREDIT

MHP maintains a line of credit agreement with Regions Bank with a maximum amount of \$65,000,000. The balance outstanding was approximately \$43,150,000 and \$48,150,000 as of December 31, 2023 and 2022, respectively. The line of credit bears interest at the one-month Bloomberg Short-Term Bank Yield Index rate plus 0.88% (6.258% at December 31, 2023), and is secured by certain revenues of the Hospital which approximated \$193,000,000. The line of credit expires in May 2025.

10. LONG TERM DEBT

A summary of long term debt as of December 31, 2023 is as follows:

- Indiana Finance Authority Hospital Revenue Bonds, Series 2009 in the original aggregate principal amount of \$30,000,000, were issued during 2009, to finance or refinance various health care facilities. The Series 2009 bonds were refinanced in 2022 (Series 2022 Bonds). No additional amount was borrowed, and the refinancing effectively changed the interest from a variable to a fixed rate of 3.96%.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

The bonds are held in a private placement with a financial institution. The Series 2022 Bonds are secured by certain revenues of the Hospital which approximated \$190,000,000. The Series 2022 Bonds mature in monthly installments through December 1, 2032.

- Indiana Finance Authority Hospital Revenue Bonds, Series 2018, in the original principal amount of \$25,000,000, were issued during 2018 for construction of a wellness center, the installation of a new electronic health records system, and for use on other various projects. On November 1, 2018, a financial institution purchased from the Indiana Finance Authority all of the Series 2018 Bonds in a private placement. The Series 2018 Bonds bore fixed interest at a rate of 3.865%, payable semiannually on June 1 and December 1 of each year. The Series 2018 Bonds were reissued in 2020. The reissuance changed the interest rate to a fixed 2.38%. The Series 2018 Bonds are subject to mandatory tender and purchase on December 1, 2030 (Tender Date). If the Series 2018 Bonds cannot be remarketed on the Tender Date, the Hospital would be required to purchase the Series 2018 Bonds at a price equal to the remaining principal amount of the Series 2018 Bonds. Principal payments due in annual installments on December 1 of each year, from December 1, 2019, through December 1, 2030. The Series 2018 Bonds, interest only payments beginning January 1, 2029 through December 1, 2043 (final maturity). Bonds are secured by certain revenues of the Hospital similar to the Series 2022 Bonds, as well as a mortgage on certain real estate, building and improvements. The net book value of this collateral as of December 31, 2023 approximated \$90,000,000.
- Indiana Finance Authority Hospital Revenue Bonds, Series 2020A and Series 2020B (Series 2020 Bonds), in the original principal amount of \$55,825,000, were issued during 2020 to refund the Series 2014A Bonds. On December 3, 2020, a financial institution purchased from the Indiana Finance Authority all of the Series 2020 Bonds in a private placement. The Series 2020 Bonds bore fixed interest at a rate of 3.15% through October 1, 2044, payable semiannually on April 1 and October 1 of each year. The Series 2020 Bonds were refinanced in 2023 with Series 2023A and Series 2023B (Series 2023 Bonds). The Series 2023 Bonds are held in a private placement with a financial institution. The Series 2023 Bonds bear fixed interest at a rate of 2.50% through October 1, 2044, payable semiannually on April 1 and October 1 of each year. The Series 2023 Bonds are subject to mandatory tender and purchase on December 1, 2035 (Tender Date). If the Series 2023 Bonds cannot be remarketed on the Tender Date, the Hospital would be required to purchase the Series 2023 Bonds at a price equal to the remaining principal amount of the Series 2023 Bonds. The Series 2023 Bonds are secured by certain revenues of the Hospital similar to the Series 2022 Bonds, as well as a mortgage on certain real estate, building and improvements. The net book value of this collateral as of December 31, 2023 approximated \$90,000,000.

The revenue bonds require the Hospital to maintain certain financial ratios. As of December 31, 2023, the Hospital was in compliance with the financial ratios.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

The following is a progression for long term debt for 2023 and 2022:

	December 31, 2022	Additional Borrowings	Payments	December 31, 2023	Current Portion
Revenue bonds - direct placements					
2022 Bonds	\$ 14,672,731	\$ -0-	\$ (2,400,000)	\$ 12,272,731	\$ 2,400,000
2018 Bonds	24,870,800	-0-	(255,000)	24,615,800	255,000
2023 Bonds	52,965,000	-0-	(1,590,000)	51,375,000	1,890,000
Total long term debt	<u>\$ 92,508,531</u>	<u>\$ -0-</u>	<u>\$ (4,245,000)</u>	<u>\$ 88,263,531</u>	<u>\$ 4,545,000</u>
	December 31, 2021	Additional Borrowings	Payments	December 31, 2022	Current Portion
Revenue bonds - direct placements					
2009 / 2022 Bonds	\$ 18,093,251	\$ -0-	\$ (3,420,520)	\$ 14,672,731	\$ 2,400,000
2018 Bonds	25,120,800	-0-	(250,000)	24,870,800	255,000
2020 / 2023 Bonds	54,425,000	-0-	(1,460,000)	52,965,000	1,590,000
Total long term debt	<u>\$ 97,639,051</u>	<u>\$ -0-</u>	<u>\$ (5,130,520)</u>	<u>\$ 92,508,531</u>	<u>\$ 4,245,000</u>

Scheduled principal and interest repayments on long term debt for the years succeeding December 31, 2023 are as follows:

Years Ending December 31,	Principal	Interest	Total Payments
2024	4,545,000	2,773,079	\$ 7,318,079
2025	4,690,000	2,461,035	7,151,035
2026	3,457,100	2,406,005	5,863,105
2027	3,517,100	2,349,063	5,866,163
2028	3,572,100	2,290,872	5,862,972
2029-2033	38,282,231	24,515,255	62,797,486
2034-2038	30,200,000	25,576,542	55,776,542
	<u>\$ 88,263,531</u>	<u>\$ 62,371,851</u>	<u>\$ 150,635,382</u>

11. PENSION PLAN

Plan Description

MHP has a defined contribution pension plan as authorized by IC 16-22-3-11. The plan is administered by MHP and provides retirement, disability and death benefits to plan members and beneficiaries. The plan was established by written agreement between the board of Trustees and the plan administrator. Milliman, Inc. is the third party administrator for the plan. Charles Schwab Company is the trustee of the plan. The plan administrator issues a publicly available financial report that includes financial statements and required supplementary information of the plan. The report is available by contacting MHP's accounting department.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Funding Policy

The contribution requirements of plan members are established by the written agreement between MHP's board of trustees and the plan administrator. The current employer contribution rate is 7% of annual covered payroll. Employer contributions to the plan for 2023 and 2022 were approximately \$4,242,000 and \$3,565,000, respectively. Employees are not permitted to contribute to the plan.

12. CONCENTRATIONS OF CREDIT RISK

MHP is primarily located in Shelbyville, Indiana. MHP grants credit without collateral to its patients, most of who are local residents and are insured under third-party payor agreements. Concentrations of acute care accounts receivable and gross revenue from patients and third party payors are as follows as of December 31:

	Receivables		Revenues	
	2023	2022	2023	2022
Medicare	41%	43%	48%	46%
Medicaid	16%	15%	21%	21%
Anthem	18%	17%	15%	15%
Other third party payors	20%	21%	13%	15%
Self-pay	5%	4%	3%	3%
	<u>100%</u>	<u>100%</u>	<u>100%</u>	<u>100%</u>

Substantially all of the patient accounts receivables and related revenues from long-term care operations are concentrated in Medicare and Medicaid.

13. ESTIMATED MALPRACTICE COSTS

MHP has a self-insurance plan for professional liability insurance. A third-party claims administrator has been retained to process all benefit claims. Claims are processed and presented for payment upon occurrence. MHP makes periodic deposits into a trust fund for the proper administration and protection of the fund.

The Indiana Medical Malpractice Act, IC 34-18 (the Act) requires MHP to maintain medical malpractice liability insurance in the amount of at least \$500,000 per occurrence (\$10,000,000 in the annual aggregate). The Act also requires MHP to pay a surcharge to the State Patient's Compensation Fund (the Fund). The Fund is used to pay medical malpractice claims in excess of per occurrence and the annual aggregate amounts as noted above, under certain terms and conditions. No accrual for possible losses attributable to incidents that may have occurred but that have not been identified has been made because the amount, if any, is not reasonably estimable. The Fund is on a claims-made basis and as long as this coverage is continuous or replaced with equivalent insurance, claims based on occurrences during its term but reported subsequently will be insured.

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Accounting principles generally accepted in the United States of America require a health care provider to accrue the expense of its share of malpractice claim costs, if any, for any reported and unreported incidents of potential improper professional service occurring during the year by estimating the probable ultimate costs of the incidents. Based upon MHP’s claim experience, no such accrual has been made. It is reasonably possible that this estimate could change materially in the near term.

14. RISK MANAGEMENT

Medical Benefits to Employees and Dependents

MHP is self-funded for medical and related health benefits provided to employees and their families. A stop/loss policy through commercial insurance covers individual claims in excess of \$250,000 per year. Provisions are also made for unexpected and unusual claims.

Claim expenditures and liabilities of the fund are reported when it is probable that a loss has occurred and the amount of the loss can be reasonably estimated. These losses include an estimate of claims that have been incurred but not reported. Self-funded health insurance and related expenses were approximately \$10,837,000 and \$9,220,000 in 2023 and 2022, respectively.

A progression of unpaid claims for 2023 and 2022 follows:

	<u>2023</u>	<u>2022</u>
Unpaid claims, beginning of year	\$ 1,705,000	\$ 2,205,000
Incurred claims and changes in estimates	9,585,268	7,989,541
Claim payments	<u>(9,485,268)</u>	<u>(8,489,541)</u>
Unpaid claims, end of year	<u>\$ 1,805,000</u>	<u>\$ 1,705,000</u>

15. RENTAL EXPENSE

MHP has leases expiring at various times through 2024. Leases that do not meet the requirements for recognition in the statements of net position are recognized as outflows of resources. The majority of the leases have short-term cancellation clauses for both parties. Total rent expense for 2023 and 2022 was approximately \$38,300,000 and \$37,700,000, respectively.

16. COUNTY AND CITY ECONOMIC DEVELOPMENT

The Shelby County Council and City of Shelbyville Common Council each passed an ordinance pledging a portion of their share of economic development income tax (EDIT) for the purpose of land acquisition, construction and installation of public infrastructure improvements at the Shelbyville/Shelby County Advanced Technological Industrial Park. Shelby County, the City of Shelbyville, and the Hospital (a component unit of Shelby County) share administrative and financial responsibility for this project. The County and City have each pledged \$125,000 each calendar year through 2028 (or such earlier date as all outstanding bonds issued to finance or refinance the projects are defeased).

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

The Shelby County Council and City of Shelbyville Common Council each passed a resolution pledging a portion of their share of economic development income tax (EDIT) for the purpose of funding a warm water swimming pool at the wellness facility in Shelbyville, Indiana. The County and the City have each pledged \$1,575,000, due annually in payments ranging from \$100,000 to \$225,000 through 2032.

The Hospital recognizes the amounts as revenue when received. A schedule of expected payments is as follows:

Years Ending December 31,	
2024	\$ 450,000
2025	450,000
2026	450,000
2027	450,000
2028	450,000
Thereafter	<u>1,800,000</u>
	<u>\$ 4,050,000</u>

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

17. BLENDED COMPONENT UNITS

MHP's financial statements include the accounts of its blended component units. Below is condensed financial information of the blended component units.

	2023			
	MedWorks	MMG	Foundation	Total
Assets				
Current assets	\$ 7,400,059	\$ 2,037,551	\$ 682,286	\$ 10,119,896
Capital assets	1,361,957	-0-	13,333	1,375,290
Due from Hospital	350,628	969,756	16,723	1,337,107
Other assets	5,104,883	-0-	7,873,051	12,977,934
Total assets	<u>\$ 14,217,527</u>	<u>\$ 3,007,307</u>	<u>\$ 8,585,393</u>	<u>\$ 25,810,227</u>
Liabilities				
Due to Hospital	\$ 1,750,136	\$ 40,798	\$ 95,609	\$ 1,886,543
Other liabilities	7,364,447	2,448,337	12,085	9,824,869
Total liabilities	<u>9,114,583</u>	<u>2,489,135</u>	<u>107,694</u>	<u>11,711,412</u>
Net position				
Net investment in capital assets	1,361,957	-0-	13,333	1,375,290
Restricted	715,949	207,269	4,151,330	5,074,548
Unrestricted	3,025,038	310,903	4,313,036	7,648,977
Total net position	<u>5,102,944</u>	<u>518,172</u>	<u>8,477,699</u>	<u>14,098,815</u>
Total liabilities and net position	<u>\$ 14,217,527</u>	<u>\$ 3,007,307</u>	<u>\$ 8,585,393</u>	<u>\$ 25,810,227</u>
Revenues				
Net patient service revenue	\$ 22,863,522	\$ -0-	\$ -0-	\$ 22,863,522
Other	151,550	6,050,579	927,971	7,130,100
Total revenues	<u>23,015,072</u>	<u>6,050,579</u>	<u>927,971</u>	<u>29,993,622</u>
Expenses				
Depreciation	168,717	-0-	7,467	176,184
Other expenses	32,713,578	9,878,804	1,085,800	43,678,182
Total expenses	<u>32,882,295</u>	<u>9,878,804</u>	<u>1,093,267</u>	<u>43,854,366</u>
Operating loss	(9,867,223)	(3,828,225)	(165,296)	(13,860,744)
Nonoperating revenues (expenses)	596,286	-0-	1,013,352	1,609,638
Excess (deficit) revenues over expenses	(9,270,937)	(3,828,225)	848,056	(12,251,106)
Transfers	10,709,510	3,308,172	-0-	14,017,682
Change in net position	1,438,573	(520,053)	848,056	1,766,576
Net position				
Beginning of year	3,664,371	1,038,225	7,629,643	12,332,239
End of year	<u>\$ 5,102,944</u>	<u>\$ 518,172</u>	<u>\$ 8,477,699</u>	<u>\$ 14,098,815</u>
Net cash flows from				
Operating activities	\$ (9,698,506)	\$ (3,828,225)	\$ (157,829)	\$ (13,684,560)
Capital and related financing activities	10,709,510	4,825,028	277,551	15,812,089
Investing activities	(596,295)	-0-	(205,633)	(801,928)
Total	<u>414,709</u>	<u>996,803</u>	<u>(85,911)</u>	<u>1,325,601</u>
Cash and cash equivalents				
Beginning of year	4,011,523	1,038,225	288,595	5,338,343
End of year	<u>\$ 4,426,232</u>	<u>\$ 2,035,028</u>	<u>\$ 202,684</u>	<u>\$ 6,663,944</u>

MAJOR HEALTH PARTNERS

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

	2022			
	MedWorks	MMG	Foundation	Total
Assets				
Current assets	\$ 6,222,633	\$ 1,758,964	\$ 704,076	\$ 8,685,673
Capital assets	622,571	-0-	17,761	640,332
Due from Hospital	354,475	910,038	23,806	1,288,319
Other assets	4,367,383	-0-	6,992,996	11,360,379
Total assets	<u>\$ 11,567,062</u>	<u>\$ 2,669,002</u>	<u>\$ 7,738,639</u>	<u>\$ 21,974,703</u>
Liabilities				
Due to Hospital	\$ 1,561,010	\$ 55,048	\$ 100,147	\$ 1,716,205
Other liabilities	6,341,681	1,575,729	8,849	7,926,259
Total liabilities	<u>7,902,691</u>	<u>1,630,777</u>	<u>108,996</u>	<u>9,642,464</u>
Net position				
Net investment in capital assets	622,571	-0-	17,761	640,332
Restricted	449,279	415,290	3,635,963	4,500,532
Unrestricted	2,592,521	622,935	3,975,919	7,191,375
Total net position	<u>3,664,371</u>	<u>1,038,225</u>	<u>7,629,643</u>	<u>12,332,239</u>
Total liabilities and net position	<u>\$ 11,567,062</u>	<u>\$ 2,669,002</u>	<u>\$ 7,738,639</u>	<u>\$ 21,974,703</u>
Revenues				
Net patient service revenue	\$ 19,127,123	\$ -0-	\$ -0-	\$ 19,127,123
Other	36,238	4,489,870	1,232,131	5,758,239
Total revenues	<u>19,163,361</u>	<u>4,489,870</u>	<u>1,232,131</u>	<u>24,885,362</u>
Expenses				
Depreciation	155,070	-0-	7,602	162,672
Other expenses	27,596,595	8,641,159	1,245,168	37,482,922
Total expenses	<u>27,751,665</u>	<u>8,641,159</u>	<u>1,252,770</u>	<u>37,645,594</u>
Operating income (loss)	(8,588,304)	(4,151,289)	(20,639)	(12,760,232)
Nonoperating revenues (expenses)	235,852	-0-	(1,024,960)	(789,108)
Excess (deficit) revenues over expenses	(8,352,452)	(4,151,289)	(1,045,599)	(13,549,340)
Transfers	9,609,272	3,483,253	-0-	13,092,525
Change in net position	1,256,820	(668,036)	(1,045,599)	(456,815)
Net position				
Beginning of year	2,407,551	1,706,261	8,675,242	12,789,054
End of year	<u>\$ 3,664,371</u>	<u>\$ 1,038,225</u>	<u>\$ 7,629,643</u>	<u>\$ 12,332,239</u>
Net cash flows from				
Operating activities	\$ (8,433,234)	\$ (4,151,289)	\$ (13,037)	\$ (12,597,560)
Capital and related financing activities	9,609,272	4,201,469	(102,065)	13,708,676
Investing activities	158,040	-0-	267,711	425,751
Total	<u>1,334,078</u>	<u>50,180</u>	<u>152,609</u>	<u>1,536,867</u>
Cash and cash equivalents				
Beginning of year	2,677,445	1,706,261	135,986	4,519,692
End of year	<u>\$ 4,011,523</u>	<u>\$ 1,756,441</u>	<u>\$ 288,595</u>	<u>\$ 6,056,559</u>

The separate financial statements for each of the entities discussed above may be obtained through contacting management of MHP.



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

Board of Trustees
Major Health Partners
Shelbyville, Indiana

Report on the Financial Statements

We have audited, in accordance with the auditing standards generally accepted in the United States of America, the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, and the *Uniform Compliance Guidelines for Audits of Hospitals and State and Local Governments by Authorized Independent Public Accountants*, issued by the Indiana State Board of Accounts, the financial statements of Major Health Partners (MHP), which comprise the statement of net position as of December 31, 2023, and the related statements of revenues, expenses and changes in net position, and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated June 28, 2024.

Internal Control Over Financial Reporting

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

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

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that have not been identified.

Board of Trustees
Major Health Partners
Shelbyville, Indiana

Compliance and Other Matters

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

Purpose of this Report

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

Blue & Co., LLC

Indianapolis, Indiana
June 28, 2024