Consolidated Financial Statements, Supplementary Information and Report of Independent Certified Public Accountants

Shore Memorial Health System and Affiliates

December 31, 2024 and 2023



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REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Board of Trustees Shore Memorial Health System

Opinion

We have audited the consolidated financial statements of Shore Memorial Health System and Affiliates, (the System), which comprise the consolidated balance sheets as of December 31, 2024 and 2023, and the related consolidated statements of operations and changes in net assets and cash flows for the years then ended, and the related notes to the consolidated financial statements.

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

Basis for opinion

We conducted our audits of the consolidated financial statements in accordance with auditing standards generally accepted in the United States of America (US GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the System and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of management for the financial statements

Management is responsible for the preparation and fair presentation of the consolidated 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 consolidated financial statements that are free from material misstatement, whether due to fraud or error.

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



Auditor's responsibilities for the audit of the financial statements

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

In performing an audit in accordance with US GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the consolidated 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 the System'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 consolidated financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the System'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.



Supplementary Information

The accompanying consolidating and combining balance sheets as of December 31, 2024, and the related consolidating and combining statements of operations and changes in net assets for the year then ended are presented for purposes of additional analysis, rather than to present the financial position, results of operations, and cash flows of the individual entities, and are not a required part of the consolidated financial statements. Such supplementary information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures. These additional procedures included comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the supplementary information is fairly stated, in all material respects, in relation to the consolidated financial statements as a whole.

Philadelphia, Pennsylvania April 1, 2025

Grant Thornton LLP

CONSOLIDATED BALANCE SHEETS

December 31,

	2024	2023
ASSETS		
Current assets		
Cash and cash equivalents	\$ 5,869,904	\$ 4,516,370
Patient accounts receivable	28,211,326	28,198,824
Supplies	7,486,719	6,446,923
Prepaid expenses and other current assets	13,367,648	12,516,321
Total current assets	54,935,597	51,678,438
Assets limited as to use		
Internally designated by Board of Trustees	180,682,875	154,732,310
Externally designated by donor	1,136,263	1,013,934
Right of use assets - operating leases	4,920,806	5,128,706
Property and equipment, net	112,250,373	112,522,746
Other assets	20,845,584	9,904,345
Beneficial interest in perpetual trust	2,049,971	1,972,251
Total assets	\$ 376,821,469	\$ 336,952,730
LIABILITIES AND NET ASSETS		
Current liabilities		
Current portion of lease liability - operating	\$ 855,022	\$ 841,096
Accounts payable, accrued expenses, and other current liabilities	38,732,160	34,300,986
Accrued vacation, holiday, and sick pay	3,845,708	4,339,892
Current portion of accrued retirement benefits	1,128,725	1,328,021
Estimated settlements due to third-party payors	8,181,055	7,173,306
Total current liabilities	52,742,670	47,983,301
Accrued retirement benefits, less current portion	13,821,588	14,151,963
Reserve for insurance claims, less current portion	3,174,109	2,472,798
Other long-term liabilities	708,147	1,068,706
Lease liability - operating, less current portion	4,221,767	4,406,455
Total liabilities	74,668,281	70,083,223
Net assets		
Without donor restrictions	298,365,863	263,517,741
With donor restrictions	3,787,325	3,351,766
Total net assets	302,153,188	266,869,507
Total liabilities and net assets	\$ 376,821,469	\$ 336,952,730

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

CONSOLIDATED STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS

Years ended December 31,

	2024	2023
Net assets without donor restrictions		
Revenues		
Patient service revenue	\$ 273,369,983	\$ 269,145,495
Other revenue	13,449,847	7,685,178
Total revenues	286,819,830	276,830,673
Expenses		
Salaries and wages	87,685,904	86,363,474
Physician salaries and fees	39,330,102	34,188,126
Employee benefits	20,949,818	19,859,256
Contracted services	51,347,752	49,960,942
Supplies and other expenses	60,138,694	54,987,453
Interest	-	778,917
Depreciation	8,864,502	8,724,369
Total expenses	268,316,772	254,862,537
Operating income	18,503,058	21,968,136
Nonoperating gains (losses)		
Investment return, net	10,832,262	11,784,859
Other accrued retirement credit (cost)	624,981	(1,183,331)
Other	<u> </u>	(376,885)
Total nonoperating gains, net	11,457,243	10,224,643
Excess of revenues and gains over expenses and losses	29,960,301	32,192,779
Other changes in net assets without donor restrictions		
Other changes in accrued retirement benefits	4,887,821	8,372,635
Increase in net assets without donor restrictions	34,848,122	40,565,414
Net assets with donor restrictions		
Investment return, net	122,329	124,945
Other	235,510	(120,824)
Change in beneficial interest in perpetual trust	77,720	160,057
Increase in net assets with donor restrictions	435,559	164,178
INCREASE IN NET ASSETS	35,283,681	40,729,592
Net assets, beginning of year	266,869,507	226,139,915
Net assets, end of year	\$ 302,153,188	\$ 266,869,507

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

STATEMENTS OF CASH FLOWS

Years ended December 31,

		2024		2023
Cash flows from operating activities:				
Increase in net assets	\$	35,283,681	\$	40,729,592
Adjustments to reconcile increase in net assets to net cash				
provided by operating activities:				
Other changes in accrued retirement benefits		(4,887,821)		(8,372,635)
Depreciation and amortization		8,864,502		9,143,417
Change in beneficial interest in perpetual trust		(77,720)		(160,057)
Net realized and unrealized gains and losses on investments		(9,058,590)		(7,095,939)
Changes in assets and liabilities:				
Patient accounts receivable		(12,502)		251,305
Supplies		(1,039,796)		(1,848,310)
Prepaid and other assets		(444,587)		(1,704,336)
Right of use assets - operating leases, net		37,138		49,666
Accounts payable, accrued expenses, and other liabilities		3,985,597		(2,490,746)
Accrued vacation, holiday, and sick pay		(494,184)		(143,853)
Estimated settlements due to third-party payors		1,007,749		3,287,823
Accrued retirement benefits		(6,989,829)		(5,109,525)
Reserve for insurance claims		786,329		86,920
Net cash provided by operating activities		26,959,967		26,623,322
Cash flows from investing activities:				
Net (purchases) sales of assets limited as to use		(17,014,304)		11,965,600
Additions to property and equipment, net		(8,592,129)		(9,715,520)
Net cash (used in) provided by investing activities		(25,606,433)		2,250,080
Cash flows from financing activities:				
Principal payments on long-term debt				(31,845,000)
Net cash used in financing activities				(31,845,000)
INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS		1,353,534		(2,971,598)
Cash and cash equivalents, beginning of year		4,516,370		7,487,968
Cash and cash equivalents, end of year	\$	5,869,904	\$	4,516,370
Supplemental disclosures of cash flow information:	¢		ď	045 200
Cash paid for interest	\$		\$	915,299

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

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

December 31, 2024 and 2023

NOTE A - ORGANIZATION AND BASIS OF PRESENTATION

Shore Memorial Health System (the Parent), a not-for-profit, tax-exempt corporation, functions as the parent corporation and provides leadership and coordination activities for its affiliates. The consolidated financial statements include the accounts of Shore Memorial Health System and its affiliates (collectively the System) as follows:

Shore Memorial Hospital d/b/a Shore Medical Center (the Medical Center) is a 203-bed not-for-profit, acute-care, tax-exempt hospital located in Somers Point, New Jersey. The Medical Center provides general health care services to residents within its geographic location for a wide range of inpatient and outpatient services, including medical, surgical, obstetrical, gynecological, pediatric, emergency, and ambulatory care.

Shore Health Services Corporation (Health Services) is a not-for-profit, tax-exempt controlled affiliate of the Medical Center, and maintains certain property for future development.

Brighton Bay LLC (Brighton Bay), a controlled affiliate of the Medical Center, is a for-profit limited liability corporation established to hold title and manage a medical office building.

Shore Memorial Physicians Group, P.C. (the Physicians Group), a controlled affiliate of the Medical Center, is a for-profit professional corporation established for the purpose of developing an employed physician network. The Physicians Group is designed to achieve a more integrated approach to the delivery of medical care for the community served by the Medical Center.

Shore Urgent Care, P.A. (Urgent Care), a controlled affiliate of the Physicians Group, is a for-profit professional corporation established for the purpose of operating urgent care centers in the community served by the Medical Center.

Shore Pathology Associates, P.C. (the Pathology Group), a controlled affiliate of the Medical Center, is a for-profit professional corporation established for the purpose of employing pathologists that work at the Medical Center.

Shore Specialty Consultants, P.A. (the Specialists Group), a controlled affiliate of the Medical Center, is a for-profit professional association established for the purpose of developing an employed specialty physician network to service the medical needs of the community.

Shore Hospitalists Associates, P.A. (the Hospitalists Group), a controlled affiliate of the Medical Center, is a for-profit professional association established for the purpose of developing an employed physician network to service inpatients at the Medical Center.

Shore Quality Partners LLC (Quality Partners), a controlled affiliate of the Medical Center, is a for-profit limited liability corporation established for the purpose of developing an integrated physician network that does not employ physicians.

Shore Quality Partners ACO, LLC (SQP ACO), a controlled affiliate of the Medical Center, is a for-profit limited liability corporation established in order to participate in the Medicare Shared Savings program.

Shore Health Enterprises, Inc. (Enterprises), a for-profit corporation, and wholly owned by the Parent, is a Management Services Organization (MSO) that provides services to the Physicians Group.

Principles of Consolidation

The consolidated financial statements include the accounts of the System and its affiliates. All significant intercompany balances and transactions have been eliminated.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Use of Estimates

The preparation of consolidated financial statements in conformity with accounting principles generally accepted in the United States of America (US GAAP) requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, revenues and expenses, and disclosure of contingencies at the date of and during the reporting period of the consolidated financial statements. Actual results could differ from those estimates. The most significant management estimates and assumptions are used in recording patient accounts receivable and patient service revenue, settlements with third-party payors, useful lives of property and equipment, imputed interest on leases, actuarial estimates for the postretirement benefit plans, self-insured reserves, and the reported fair values of certain assets and liabilities.

Fair Value of Financial Instruments

Financial instruments consist of cash equivalents, patient accounts receivable, investments and assets limited as to use, accounts payable, accrued expenses and estimated settlements due to third-party payors. The carrying amounts reported in the consolidated balance sheets for these items approximate fair value.

Cash and Cash Equivalents

Cash and cash equivalents include certain investments in highly liquid debt instruments with original maturities of three months or less, other than amounts classified as assets limited as to use.

Patient Accounts Receivable

The System recognizes a receivable when there is an unconditional right to payment, subject only to the passage of time. Patient accounts receivable, including billed accounts and unbilled accounts, which have the unconditional right to payment, and estimated amounts due from third-party payors for retroactive adjustments, are recorded as receivables since the right to consideration is unconditional and only the passage of time is required before payment of that consideration is due. The estimated uncollectible amounts are generally considered implicit price concessions that are recorded as a direct reduction to patient accounts receivable.

Supplies

Supplies are stated at the lower of cost, determined by the average cost method, or market.

Assets Limited as to Use

Assets internally designated by the Board of Trustees are resources over which the Board of Trustees retains control and that have been designated for future acquisition of property and equipment, deferred compensation plans, and other purposes, determined at the discretion of the Board of Trustees.

Assets externally designated by donor, include funds from donors for specific purposes and permanent trusts to be held by the System, with the income to be used in accordance with the donor intentions.

Investments in equity securities with readily determinable fair values and all investments in debt securities are measured at fair value in the consolidated balance sheets. Fair values are based on quoted market prices. Investment income and realized and unrealized gains and losses are recorded as nonoperating gains (losses).

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

Property and Equipment

Property and equipment are recorded at cost. Donated assets are recorded at their fair value at the date of donation. Depreciation is provided over the estimated useful life of each class of depreciable asset and is completed using the straight-line method based.

Leases

Arrangements are determined if they are a lease at inception of the contract. Right of use assets represent the right to use the underlying assets for the lease term and lease liabilities represent the System's obligation to make lease payments arising from the leases. Right of use assets and lease liabilities are recognized at commencement date based on the present value of lease payments over the lease term. An estimated incremental borrowing rate, which is derived from information available at the lease commencement date, is used in determining the present value of lease payments. The System determines this rate based on information obtained from its bankers, its secured debt fair value and publicly available data for instruments with similar characteristics.

The operating leases are primarily for real estate, including off-campus outpatient facilities and medical office buildings. The real estate lease agreements typically have initial terms of five to ten years, and equipment lease agreements typically have initial terms of three to five years. Leases with an initial term of 12 months or less (short-term leases) are not recorded in the consolidated balance sheets.

Real estate leases may include one or more options to renew, with renewals that typically can extend the lease term from five to ten years. The exercise of lease renewal options is at the System's sole discretion. In general, these renewal options are not considered to be reasonably likely to be exercised, therefore, renewal options are generally not recognized as part of right of use assets and lease liabilities. The useful life of assets and leasehold improvements are limited by the expected lease term, unless there is a transfer of title or purchase option reasonably certain of exercise.

Certain lease agreements for real estate include payments based on actual common area maintenance expenses. These variable lease payments are recognized in other operating expenses, net, but are not included in the right-of-use asset or liability balances. The lease agreements do not contain any material residual value guarantees, restrictions or covenants.

Beneficial Interest in Perpetual Trust

Beneficial interest in perpetual trust (Craven Estate) is stated at fair value. The trust is perpetual in nature, and the original corpus cannot be expended. The trust and changes in the System's beneficial interest are reported within net assets with donor restrictions.

Reserve for Insurance Claims

The System maintains a claims-made malpractice insurance coverage through a commercial insurance carrier and participates in a group trust for workers' compensation coverage. Estimated liabilities relating to asserted and unasserted claims are recorded by the System as reserve for insurance claims in the accompanying consolidated balance sheets. The estimate for unreported incidents and losses is actuarially determined based on System-specific and industry-experience data. Receivables for expected insurance recoveries are included in other assets on the accompanying consolidated balance sheets.

Advertising Costs

The System expenses advertising costs as incurred. For the years ended December 31, 2024 and 2023, advertising costs are \$896,168 and \$636,248, respectively, which are included in contracted services on the accompanying consolidated statements of operations and changes in net assets.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

Net Assets with Donor Restrictions

Certain net assets are restricted to use by the System which has been limited by donors to a specific time period or purpose. When donor restrictions expire, that is, when a time restriction ends or a purpose restriction is accomplished, net assets with donor restrictions are reclassified into net assets without donor restrictions and reported as net assets released from restrictions.

Certain net assets have been restricted by donors to be maintained by the System or outside trustees in perpetuity. As specified by donor, the income earned on these investments is expendable for nursing scholarships and capital acquisitions.

Donor-restricted contributions whose restrictions are met within the same year as received are reported as contributions without donor restrictions if for operating purposes and as other changes in net assets without donor restrictions if for capital purposes in the consolidated statements of operations and changes in net assets.

Patient Service Revenue

Patient service revenue is reported at the amounts that reflect the consideration to which the System is expected to be entitled to in exchange for providing patient care for both the Medical Center and any eligible physicians. These amounts are due from patients, third-party payors (including managed care organizations and government programs, i.e., Medicare and Medicaid), and others and include variable consideration for retroactive adjustments due to settlement of future audits, reviews, and investigations. Retroactive adjustments are considered in the recognition of revenue on an estimated basis in the period the related services are rendered, and such amounts are adjusted in future periods as adjustments become known or as years are no longer subject to such audits, reviews, and investigations. Generally, patients and third-party payors are billed several days after the services are performed or shortly after discharge. Patient service revenue is recognized in the period in which the performance obligations are satisfied under contracts by transferring services to patients.

Performance obligations are determined based on the nature of the services provided. The System recognizes revenues for performance obligations satisfied over time based on actual charges incurred in relation to total expected charges. The System believes that this method provides an appropriate depiction of the transfer of services over the term of performance obligations based on the inputs needed to satisfy the obligations. Generally, performance obligations are satisfied over time relate to patients receiving inpatient acute care services. The System measures performance obligations from admission to the point when there are no further services required for the patient, which is generally the time of discharge. The System recognizes revenues for performance obligations satisfied at a point in time, which generally relate to patients receiving outpatient services, when: (1) services are provided; and (2) when it is believed the patient does not require additional services.

Excess of Revenues and Gains Over Expenses and Losses

The accompanying consolidated statements of operations and changes in net assets include the excess of revenues and gains over expenses and losses as the performance indicator. Changes in unrestricted net assets, which are excluded from the excess of revenues and gains over expenses and losses, includes other changes in accrued retirement benefit liabilities.

Income Taxes

The Parent, the Medical Center and the Health Services are not-for-profit corporations and have been recognized as tax-exempt for federal income tax purposes pursuant to Section 501(c)(3) of the Internal Revenue Code. The Parent, the Medical Center and the Health Services are also exempt from state income

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

taxes. Brighton Bay, the Physicians Group, Urgent Care, the Pathology Group, the Specialists Group, the Hospitalists Group, Quality Partners, SQP ACO, and Enterprises are taxable entities. The System follows the accounting guidance for uncertainties in income tax positions, which requires that a tax position be recognized or derecognized based on a "more likely than not" threshold. This applies to positions taken or expected to be taken in a tax return. The System does not believe its consolidated financial statements include any uncertain tax positions.

NOTE C - LIQUIDITY AND AVAILABILITY

Financial assets available for general expenditure within one year of the consolidated balance sheet date consist of the following:

	December 31,			
	2024	2023		
Cash and cash equivalents Patient accounts receivable Assets limited as to use, internally designated by Board of	\$ 5,869,904 28,211,326			
Trustees	180,682,875	154,732,310		
Available line of credit	214,764,105 22,000,000			
	\$ 236,764,105	\$ 209,447,504		

Excess cash is invested in accordance with the Board of Trustees' investment policy and there are no investments with purchase commitments at December 31, 2024.

NOTE D - UNCOMPENSATED CARE

The System provides charity care to patients who meet certain financial criteria established by the State of New Jersey. The cost of services provided and supplies furnished under its charity care policy is estimated using internal data and is calculated based on the System's cost to charge ratio. The total direct and indirect amount of charity care provided, determined on the basis of cost, was approximately \$1,656,050 and \$1,755,000 for the years ended December 31, 2024 and 2023, respectively.

The System's patient acceptance policy is based on its mission statement and is charitable purposes. Accordingly, the System accepts all patients regardless of their ability to pay. This policy results in the assumption of higher-than-normal patient accounts receivable credit risks. To the extent the System realizes additional losses resulting from such higher credit risk or patients who are not identified or do not meet the previously described charity definition, such additional losses are considered implicit price concessions.

Additionally, the System sponsors certain other charitable programs, which provide substantial benefit to the broader community. Such programs include services to needy and elderly populations that require special support, as well as health promotion and education for the general community welfare.

The New Jersey Health Care Reform Act of 1992, Chapter 160, established the Health Care Subsidy Funds (NJCCSF) to provide a mechanism and funding source to compensate certain hospitals for charity care. For the years ended December 31, 2024 and 2023, the System recognized from NJCCSF \$147,756 and \$261,815, respectively. Effective with the State of New Jersey's fiscal year 2025 (commencing on July 1,

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

2024), a portion of the NJCCSF was shifted into a new Medicaid State Directed Payment Program (MSDPP for the year ended December 31, 2024, the System recognized from MSDPP \$2,020,276. The NJCCSF and MSDPP funding is included in patient service revenue in the consolidated statements of operations and changes in net assets. These amounts are subject to change from year to year based on available state budget amounts and allocation methodologies.

NOTE E - PATIENT SERVICE REVENUE

The System disaggregates revenues from contracts with customers by type of service and payor source as this depicts the nature, amount, timing and uncertainty of its revenues and cash flows as affected by economic factors. Tables providing details of these factors are presented below.

The composition of patient care service revenues by primary payor is as follows:

	Year Ended December 31,			
	2024	2023		
Medicare and Medicaid	46%	45%		
Blue Cross	28	30		
Comprehensive and managed care	19	17		
Other third-party payors	2	4		
Self-pay	5	4		
	100%	100%		

Revenues from patients' deductibles and coinsurance are included in the categories presented above based on the primary payor. The composition of patient care service revenues by type of service is as follows:

	Year Ended I	Year Ended December 31,		
Inpatient	2024	2023		
	37%	38%		
Outpatient	55	53		
Physician services	8	9		
	100%	100%		

The System has agreements with third-party payors that provide for payments to the System at amounts different from established charges. Inpatient acute care services for Medicare and Medicaid beneficiaries and outpatient services for Medicare beneficiaries are paid primarily at prospectively determined rates. These rates vary according to patient classification systems that are based on clinical, diagnostic, and other factors. Certain outpatient services for Medicaid beneficiaries are paid based on a cost-reimbursement methodology, subject to certain limitations. The System is reimbursed for cost reimbursable and other items at a tentative rate, with final settlement determined after submission of annual cost reports by the System and audits thereof, by the programs' fiscal intermediary. Provisions for estimated adjustments resulting from audit and final settlements have been recorded. Differences between the estimated adjustments and the amounts settled are recorded in the year of settlement. The System's cost reports have been audited and settled by the fiscal intermediaries for Medicare through December 31, 2020 and for Medicaid through December 31, 2022.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

In the opinion of management, adequate provision has been made in the accompanying consolidated financial statements for any adjustments that may result from the final settlement of the System's cost reports. For the years ended December 31, 2024 and 2023, patient service revenue includes revenue of approximately \$685,000 and \$3,308,000, respectively, related to favorable final settlements of prior year cost reports and other changes in estimates.

Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term. The System believes that it is in compliance with all applicable laws and regulations and is not aware of any pending or threatened investigations involving allegations of potential wrongdoing that would have a material adverse effect on the accompanying consolidated financial statements. While no such regulatory inquiries have been made, compliance with such laws and regulations can be subject to future government review and interpretations as well as significant regulatory action including fines, penalties, and exclusion from the Medicare and Medicaid programs.

The System has entered into payment agreements with certain commercial insurance carriers and health maintenance organizations. The basis for payment to the System under these agreements includes prospectively determined rates per discharge, discounts from established charges, and prospectively determined daily rates. These agreements have retrospective audit clauses allowing the payor to review and adjust claims subsequent to initial payment.

The System recognizes patient service revenue associated with services provided to patients who have third-party payor coverage on the basis of the contractual rates for the services rendered. For uninsured patients that do not qualify for the State Charity Care Assistance program, the System recognizes revenue on the basis of discounted rates under the Uninsured Self Pay Patient Discount Policy. Under this policy, uninsured patients that are ineligible for any government assistance program are billed at reduced charges comparable to the cost of providing care based upon the System-specific Medicare cost to charge ratio. The impact of this Uninsured Self Pay Discount Policy on the consolidated financial statements is lower patient service revenue, as the discount is considered a pricing constraint.

Deductibles and copayments under third-party payment programs within the third-party payor amounts above are the patients' responsibility, and the System considers these amounts in its determination of the implicit price concessions based on collection experience.

The System is also eligible to receive additional Medicaid funding under the New Jersey County Option Hospital Fee Program. This program is administered through the New Jersey Department of Human Services-Division of Medical Assistance and Health Services for Atlantic County, New Jersey. The program requires that participating hospitals pay quarterly assessed fees based on estimated Medicaid utilization data within the county, and such payments are then pooled with federal Medicaid matching funds and redistributed to the participating hospitals as State Directed Payments. The State Directed Payments are subject to an annual settlement based on actual Medicaid utilization data and other factors. For the years ended December 31, 2024 and 2023, the System paid assessments of \$5,778,277 and \$4,598,488, which are included in supplies and other expenses in the consolidated statements of operations and changes in net assets and received Medicaid State Directed Payments of \$13,492,544 and \$15,608,524, which are included in patient service revenue in the consolidated statements of operations and changes in net assets.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

NOTE F - ASSETS LIMITED AS TO USE

The composition of assets limited as to use is set forth in the following table. Investments are stated at fair value.

	December 31,			
		2024		2023
Internally designated by Board of Trustees				
Cash and cash equivalents	\$ 10	02,525,433	\$	83,450,559
Certificates of deposit	1	18,644,632		18,438,448
Equity mutual funds	Ę	58,388,486		51,819,957
Fixed income mutual funds		127,345		107,760
U.S. equity securities		807,345		731,505
Insurance contracts		189,634		184,081
	<u>\$ 18</u>	30,682,875	\$	154,732,310
Externally designated by donor				
Cash and cash equivalents	\$	4,172	\$	4,029
Certificates of deposit		57,165		57,165
Equity mutual funds		1,074,926		952,740
	Φ.	4 400 000	Φ.	4 040 004
	<u>\$</u>	1,136,263	\$	1,013,934

Investment return net, for assets limited as to use, included in nonoperating gains (losses) are comprised of the following:

	Year Ended December 31,			ember 31,
		2024		2023
Investment return, net	_			
Interest and dividend income	\$	1,773,672	\$	4,688,920
Net realized gains on sales of investments		1,618,752		505,666
Change in unrealized gains and losses on investments		7,439,838		6,590,273
	\$	10,832,262	\$	11,784,859

NOTE G - FAIR VALUE MEASUREMENTS

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability (the exit price) in an orderly transaction between market participants at the measurement date. A valuation framework has been outlined that creates a fair value hierarchy in order to increase the consistency and comparability of fair value measurements and the related disclosures.

The System uses the fair value hierarchy as its valuation methodology and it is broken down into three levels based on the source of inputs as follows:

- Level 1 Valuations are based on unadjusted quoted market prices for identical assets.
- Level 2 Valuations are based on observable inputs and quoted market prices for similarly structured assets and liabilities.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

Level 3 - Valuations are based on unobservable inputs in which little or no market data exists, therefore, requiring an entity to develop its own assumptions.

A financial instrument categorization within the valuation hierarchy is based upon the lowest level of input that is significant to the fair value measurement.

In determining fair value, the System uses quoted prices and observable inputs. Observable inputs are inputs that market participants would use in pricing the asset or liability based on market data obtained from independent sources. The fair values of perpetual trusts were determined based on the System's beneficial interest in the investments held in the trust which are measured at fair value. Fair value for pooled separate accounts and collective fund trusts within the defined benefit plan assets (Note K) is based upon the net asset value (NAV) per share of the investment.

The following fair value hierarchy tables present information about each major category of the System's financial assets, excluding assets invested in the System's defined benefit plan (see Note K), measured at fair value on a recurring basis as of:

	Fair Va	alue Measurement	s at Reporting Dat	e Us	sing
December 31, 2024	Total	Level 1	Level 2		Level 3
Assets					
Cash and cash equivalents	\$ 108,399,509	\$ 108,399,509	\$ -	\$	-
Certificates of deposit	18,701,797	18,701,797	-		-
Equity mutual funds	59,463,412	59,463,412	-		-
Fixed income mutual funds	127,345	127,345	-		-
U.S. equity securities	807,345	807,345	-		-
Insurance contracts	189,634	-	189,634		-
Beneficial interest in perpetual trust	2,049,971				2,049,971
	\$ 189,739,013	\$ 187,499,408	\$ 189,634	\$	2,049,971
	Fair Va	alue Measurement	s at Reporting Dat	e Us	sing
December 31, 2023	Total	Level 1	Level 2		Level 3
Assets					
Cash and cash equivalents	\$ 87,970,958	\$ 87,970,958	\$ -	\$	-
Certificates of deposit	18,495,613	18,495,613	-		-
Equity mutual funds	52,772,697	52,772,697	-		-
Fixed income mutual funds	107,760	107,760	-		-
U.S. equity securities	731,505	731,505	-		-
Insurance contracts	184,081	-	184,081		-
Beneficial interest in perpetual trust	1,972,251	-	_		1,972,251
Laikaraa, maar					
	\$ 162,234,865	\$ 160,078,533	\$ 184,081	\$	1,972,251

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

The following table sets forth the change in the fair value of the beneficial interest in perpetual trust measured using unobservable inputs (Level 3):

At December 31, 2022 Net unrealized gain	\$ 1,812,194 160,057	_
At December 31, 2023 Net unrealized gain	1,972,251 77,720	_
At December 31, 2024	\$ 2,049,971	_

NOTE H - PROPERTY AND EQUIPMENT

	Estimated Useful Lives	Decem	nber 31,
	(in Years)	2024	2023
Land Land improvements Buildings and improvements Fixed equipment	5 - 15 10 - 40 10 - 20	\$ 6,712,070 1,388,505 220,652,701 33,471,302 147,838,215	\$ 6,712,070 1,388,506 217,216,308 32,196,588
Major movable equipment	3 - 10	147,030,213	145,155,845
Less: accumulated depreciation		410,062,793 (301,248,692)	402,669,317 (292,720,795)
Construction in progress		108,814,101 3,436,272	109,948,522 2,574,224
		\$ 112,250,373	\$ 112,522,746

Depreciation expense for the years ended December 31, 2024 and 2023 was \$8,864,502 and \$8,724,369, respectively.

Other assets in the consolidated balance sheets include \$1,090,000 and \$1,740,000 of commercial property held for sale at December 31, 2024 and 2023, respectively.

NOTE I - DEBT

In 2023, the Medical Center, as the sole member of an Obligated Group under a Master Trust Indenture, voluntarily paid off the 2019 tax-exempt revenue bonds that were issued through the New Jersey Health Care Facilities Financing Authority as a bank qualified private placement issue with a financial institution, that had an interest rate at 0.79% of the 30-day London Interbank Offered Rate (LIBOR) rate plus 83 basis points. As a result of the payoff deferred financing cost of \$376,885 were written off as a component of other in nonoperating gains (losses), net for the year ended December 31, 2023, in the consolidated statement of operations and changes in net assets.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

Lines of Credit

The Medical Center has a revolving line of credit for \$20,000,000 at December 31, 2024, with an interest rate of the Secured Overnight Financing Rate Data (SOFR) plus 1.00%, (4.49% at December 31, 2024), which expires on November 1, 2026. At December 31, 2024, no amounts were outstanding.

The Medical Center had a revolving line of credit for \$20,000,000 at December 31, 2023, with an interest rate of the SOFR plus 1.25%, (5.61% at December 31, 2023), which would have expired on March 31, 2025. At December 31, 2023, no amounts were outstanding.

The Medical Center has an additional revolving line of credit for \$2,000,000 at December 31, 2024 and 2023, with an interest rate fixed by the bank at the time plus 1.75%, adjusted based upon the type of assets borrowed under sub-notes, as defined, that expires on November 1, 2025. At December 31, 2024 and 2023, no amounts were outstanding or sub-notes executed.

NOTE J - LEASES

Lessee

Operating lease expense of \$1,332,728 and \$1,254,785, for the years ended December 31, 2024, and 2023, respectively, are included in supplies and other in the consolidated statements of operations and changes in net assets.

The weighted-average lease terms and discount rates for operating leases are as follows:

	December 31,			31,
		2024		2023
Weighted-average remaining lease term (years) Operating leases		5.5 years		6.5 years
Weighted-average discount rate Operating leases		4.0%		4.0%
Cash flow related to leases are as follows:				
		Year Ended [Dece	mber 31,
		2024		2023
Cash paid for amounts included in the measurement of lease liabilities				
Operating cash outflows related to operating leases	\$	1,005,573	\$	1,021,130

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

The future minimum rental commitments for all noncancelable operating leases are as follows:

Years Ending December 31,	
2025 2026	\$ 1,041,194 1,032,309
2027	1,053,633
2028 2029	942,338 954,719
Thereafter	 677,878
	5,702,071
Less: imputed interest	 (625,282)
	\$ 5,076,789

Lessor

The System acts as lessor for certain office space under operating lease agreements with initial lease terms expiring at various dates through 2027. In addition, the leases generally contain renewal options that give the lessees the right to extend the leases for varying additional periods. The System has received lease prepayments related to two leases that are recorded as deferred revenue for \$990,016 and \$1,428,792 as of December 31, 2024 and 2023, respectively, and are included in other current and long-term liabilities in the consolidated balance sheets. Revenue will be recognized over the lease term. Rental revenue for these leases where the System acts as lessor for the years ended December 31, 2024 and 2023 was \$522,389 and \$598,747, respectively, and is recorded as other revenue in the consolidated statements of operations and changes in net assets.

The future minimum amortization of income from the rental prepayment are as follows for the years ended December 31:

2025	\$ 438,781
2026	330,004
2027	221.231

NOTE K - PENSION AND OTHER POSTRETIREMENT BENEFIT PLANS

The System, through the Medical Center, has a noncontributory defined benefit pension plan (DB Plan) covering employees who meet prescribed eligibility requirements. In addition, the Medical Center sponsors a defined benefit health care plan that provides postretirement medical benefits (OPEB) to full-time employees who have worked 15 years and attain age 62 while employed with the Medical Center. Employees hired after January 1, 1995 are not eligible for the postretirement medical benefits. The Medical Center also has a supplemental executive retirement plan (SERP) for certain executives, as defined (collectively, the Plans).

The mortality table used for projecting the benefit obligations of the DB Plan for both years is the Pri-2012, modified with the annual updates for projected improvements to the MP-2022 Generational Mortality Tables for December 31, 2024 and 2023.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

The OPEB contains cost-sharing features such as deductibles, coinsurance, and retiree contributions. The accounting for the OPEB anticipates future cost-sharing changes to the OPEB that are consistent with the Medical Center's expressed intent to increase the retiree contribution rate annually for the expected general inflation rate for that year. The Medical Center's policy is to fund the cost of medical benefits on a pay-as-you-go basis.

The following tables (Pension Benefits includes the DB Plan, Other Benefits includes the OPEB and SERP) present a reconciliation of the beginning and ending balances of the projected obligations, the fair value of plan assets, and the funded status of the Plans:

	Pension	Benefits	Other Benefits		
		Decen	nber 31,		
	2024	2023	2024	2023	
Accumulated benefit obligation	\$ 151,107,893	\$ 161,950,810	N/A	N/A	
Change in projected benefit obligation Benefit obligation at beginning of year Service cost Interest cost Actuarial (gain) loss Contributions by participants Benefits paid	\$ 162,985,410 658,457 7,497,063 (8,639,679) - (10,302,026)	\$ 159,566,390 667,595 7,711,395 4,979,780 - (9,939,750)	\$ 15,067,087 208,029 648,988 (155,354) 671,934 (1,913,176)	\$ 14,180,723 426,947 678,692 1,080,302 587,656 (1,887,233)	
Benefit obligation at end of year	152,199,225	162,985,410	14,527,508	15,067,087	
Change in plan assets Fair value of plan assets at beginning of year Actual return on plan assets Contributions by participants Contributions by the Medical Center Benefits paid Fair value of plan assets at end of year	167,904,394 4,863,820 - 6,000,000 (10,302,026) 168,466,188	150,204,671 21,639,473 - 6,000,000 (9,939,750) 167,904,394	671,934 1,241,242 (1,913,176)	587,656 1,299,577 (1,887,233)	
,	\$ 16,266,963	\$ 4,918,984	\$ (14,527,508)	\$ (15,067,087)	
Funded status of the plan at end of year	\$ 10,200,903	φ 4,910,904	\$ (14,327,300)	\$ (13,007,007)	
Amount recognized in consolidated balance sheets consist of Other assets Current liability Noncurrent liability	\$ 16,266,963 - -	\$ 4,918,894 - -	\$ - (1,128,725) (13,398,783)	\$ - (1,328,021) (13,739,066)	
Amount recognized end of year	\$ 16,266,963	\$ 4,918,894	\$ (14,527,508)	\$ (15,067,087)	
Amounts recognized in other changes in net assets without donor restrictions consist of Net actuarial loss (gain) Prior service credit	\$ 24,730,769 (710,355)	\$ 31,993,304 (2,658,761)	\$ (1,953,778) 	\$ (2,380,086)	
	\$ 24,020,414	\$ 29,334,543	\$ (1,953,778)	\$ (2,380,086)	

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

The actuarial loss (gain) and prior service credit included in other changes in net assets without donor restriction at December 31, 2024 and expected to be recognized in net periodic pension cost during the year ending December 31, 2025 are as follows:

	 Pension Benefits	Otl	ner Benefits
Unrecognized actuarial loss (gain) Unrecognized prior service credit	\$ 1,083,000 (233,000)	\$	(647,027)

The following table sets forth the components of net periodic benefit cost for both the defined benefit plan and other postretirement benefit plan:

	Pe	nsion Benefits	Other	Other Benefits		
	Year Ended December 31,					
	2024	2023	2024	2023		
Components of net periodic benefit cost recognized in employee benefits Service cost	\$ 658,4	157 \$ 667,595	\$ 208,029	\$ 426,947		
Components of net periodic benefit (credit) cost recognized in nonoperating losses and gains Interest cost Expected return on assets	7,497,0 (8,291,8	, ,	648,988	678,692 -		
Amortization of Unrecognized net loss (gain) Unrecognized prior service credit	2,050,8 (1,948,4	3,760,676	(581,662)	(895,586)		
	(692,3	1,400,225	67,326	(216,894)		
Net periodic benefit (credit) cost	(33,8	350) 2,067,820	275,355	210,053		
Other changes in accrued retirement benefits recorded in net assets without donor restrictions consist of						
Current-year actuarial gain Amortization of prior-service credit	(7,262,5 1,948,4	, , , , ,	426,308	1,975,888		
Total recorded in net assets without donor restrictions	(5,314,	(10,348,523)	426,308	1,975,888		
Total recognized as net benefit cost and recorded in net assets without donor restrictions	\$ (5,347,9	979) \$ (8,280,703)	\$ 701,663	\$ 2,185,941		

Weighted-average assumptions used to determine benefit obligations were:

	Pension	ension Benefits		Benefits	
		Year Ended December 31,			
	2024	2023	2024	2023	
Discount rate	5.39%	4.74%	5.35%	4.70%	
Rate of compensation increase	2.00%	2.00%	N/A	N/A	
Measurement date	December 31	December 31	December 31	December 31	

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

Weighted-average assumptions used to determine net periodic benefit cost were:

	Pension Benefits		Other I	Benefits
_	Year Ended December 31,			
- -	2024	2023	2024	2023
Discount rate	4.74%	4.94%	4.70%	4.89%
Expected long-term return on plan assets	5.00%	5.00%	N/A	N/A
Rate of compensation increase	2.00%	2.00%	N/A	N/A

To develop the expected long-term rate of return on assets assumption, the Medical Center considered the historical returns and the future expectations for returns for each asset class, as well as the target asset allocation of the pension portfolio.

Health care rate trends are 7.90% and 7.50% for 2024 and 2023 and reflect plan provisions limiting costs to the January 1, 2024 costs.

Plan Assets

The defined benefit plan's weighted-average asset allocations by asset category are as follows:

	Target	December 31,		
Asset Category	Allocation	2024	2023	
Cash and cash equivalents	0% - 5%	4%	6%	
Equity securities	30% - 70%	9	18	
Fixed income	30% - 60%	86	74	
Real estate	0% - 15%	1	2	
		100%	100%	

The investment policy and strategy for the defined benefit plan assets have established guidelines for an asset mix that provides diversification to absorb risk while not sacrificing investment returns. The guidelines are developed as ranges for each asset class.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

The following tables set forth the plan assets in the defined benefit pension plan measured at fair value and those plan assets at NAV, which is used as a practical expedient to estimate fair value by input level as defined in Note G, excluding plan assets at NAV, at December 31, 2024 and 2023:

	December 31, 2024				
	Total	Level 1	Level 2	Level 3	
Cash and cash equivalents Certificate of deposit Equity securities US Treasury securities Corporate debt securities Insurance contracts	\$ 2,871,149 3,981,513 15,009,063 43,712,363 94,978,269 5,962,503	\$ 2,871,149 3,981,513 15,009,063 43,712,363 94,978,269	\$ - - - - 5,962,503	\$ - - - - - -	
	166,514,860	\$ 160,552,357	\$ 5,962,503	\$ -	
Collective fund trust (at NAV): Real estate	1,951,328 \$ 168,466,188				
		Decembe	r 31, 2023		
	Total	Level 1	Level 2	Level 3	
Cash and cash equivalents Certificate of deposit Equity securities US Treasury securities Corporate debt securities Insurance contracts	\$ 5,136,931 5,238,997 30,339,300 29,246,766 89,659,279 5,808,932	\$ 5,136,931 5,238,997 30,339,300 29,246,766 89,659,279	\$ - - - - 5,808,932	\$ - - - - - -	
	165,430,205	\$ 159,621,273	\$ 5,808,932	<u> </u>	
Collective fund trust (at NAV): Real estate	2,474,189				
	\$ 167,904,394				

Cash Flows

Contributions

Based on the funded status of the DB Plan as of December 31, 2024, the Medical Center expects to contribute \$1,100,000 for the year ending December 31, 2025. This will be evaluated on a quarterly basis and is subject to change.

The Medical Center expects to contribute \$1,128,725 to the other benefits for the year ending December 31, 2025.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

Estimated Future Benefit Payments

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

	Pension Benefits		ther Benefits
2025	\$ 11,408,76	5 \$	1,128,725
2026	11,580,15)	1,179,969
2027	11,753,12	1	1,199,712
2028	11,791,14)	1,328,358
2029	11,838,62	3	1,330,092
2030-2034	58,085,89	1	6,448,515

Defined Contribution

The System also offers a 401(k) defined contribution savings plan to all full-time and part-time employees. The System matches participant contributions for active participants as of December 31 who have completed at least 1,000 hours of service during the calendar year. The match is 50% of the first 6% of compensation for non-union employees and union employees hired prior to October 2020. In addition to the match, the System makes a discretionary Non-Elective Contribution (NEC) of 2.5% of compensation to all eligible employees, as defined (non-union employees had to be hired prior to January 1, 2017 and union employees had to be hired prior to October 5, 2020) annually. Effective October 2020, for new union hires only, the match to 50% of the first 8% of compensation. Also, these union employees will no longer participate in the NEC. The System's expense for this plan for the years ended December 31, 2024 and 2023 was \$1,494,394 and \$1,639,445, respectively.

Also included in the balance of accrued retirement benefits is deferred compensation of \$422,805 and \$412,897 at December 31, 2024 and 2023, respectively.

NOTE L - CONTINGENCIES

Litigation

The System is a defendant in civil actions for alleged medical malpractice and general liability. These actions are being defended by the System's medical malpractice insurance carrier. In the opinion of management, the System's potential liability in these actions is within the limits of its medical malpractice liability and comprehensive general liability insurance.

Other

In 2020, the System obtained a \$2,780,000 loan with an interest rate of 1%, through a bank for the Small Business Administration Paycheck Protection Program (PPP). This loan was designed to provide a direct incentive for small businesses to keep their workers on payroll and could be used to pay for mortgage interest, rent, utilities, worker protection costs related to the effect of the COVID-19 pandemic. During 2021, the System received notice that the loan was forgiven and recorded its forgiveness in revenue for the year ended December 31, 2021. However, during 2023, the System was notified by the Department of Justice that the application, receipt, and forgiveness of the loan was being investigated. As a result, \$2,780,000 was recorded as a reduction to other revenue in the consolidated statement of operations and changes in net assets for the year ended December 31, 2023. In August 2024, the System entered into a Settlement Agreement with the United States Department of Justice and the Relator. This settlement was not an

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

admission of liability by the System, but to avoid delay, uncertainty, inconvenience and expense of protracted litigation, the System agreed to return the PPP loan amount received along with the Relator fees and certain other legal fees. The System received notice that the claim was dismissed on August 30, 2024.

NOTE M - FUNCTIONAL EXPENSES

The System provides general health care services to residents within its geographic location. Expenses related to providing these services are as follows:

Year Ended December 31, 2024	Healthcare Services	General and Administrative	Total
Salaries and wages Physician salaries and fees Employee benefits Contracted services Supplies and other expenses Depreciation	\$ 72,858,218 32,679,380 17,407,204 42,664,847 49,969,241 7,365,515	\$ 14,827,686 6,650,722 3,542,614 8,682,905 10,169,453 1,498,987	\$ 87,685,904 39,330,102 20,949,818 51,347,752 60,138,694 8,864,502
	\$ 222,944,405	\$ 45,372,367	\$ 268,316,772
Year Ended December 31, 2023	Healthcare Services	General and Administrative	Total
Salaries and wages Physician salaries and fees Employee benefits Contracted services Supplies and other expenses Interest Depreciation	\$ 71,724,865 28,393,238 16,493,112 41,492,562 45,667,080 646,891 7,245,588	\$ 14,638,609 5,794,888 3,366,144 8,468,380 9,320,373 132,026 1,478,781	\$ 86,363,474 34,188,126 19,859,256 49,902,942 54,987,453 778,917 8,724,369
	\$ 211,663,336	\$ 43,199,201	\$ 254,862,537

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

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

NOTE N - CONCENTRATIONS OF CREDIT RISK

The System grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of accounts receivable from patients and third-party payors was as follows:

	December 31,				
	2024	2023			
Medicare and Medicaid	58%	54%			
Commercial and managed care	13	12			
Blue Cross	21	20			
Other third-party payors	2	11			
Self-pay	6	3			
	100%	100%			

In addition, the System invests its cash and cash equivalents primarily with banks and financial institutions. These deposits may be in excess of federally insured limits. Management believes that the credit risk related to these deposits is minimal.

NOTE O - NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions consist of the following as of December 31:

	December 31,					
		2024		2023		
Subject to expenditure for specific purpose Purchase of property and equipment	\$	601,091	\$	365,581		
Investment in perpetuity whose income is expendable to support Scholarships and other		3,186,234		2,986,185		
	\$	3,787,325	\$	3,351,766		

The System follows the requirements of the Uniform Prudent Management of Institutional Funds Act (UPMIFA) as enacted in New Jersey as they relate to its endowments. Prior to the enactment of UPMIFA, the System followed the requirements of the Uniform Management of Institutional Funds Act. The System's endowments consist of two individual funds established for the above-mentioned purposes and consist solely of donor-restricted endowment funds. As required by the US GAAP, net assets associated with endowment funds are classified and reported based on the existence or absence of donor-imposed restrictions.

The System has interpreted UPMIFA, which did not have a significant effect on the endowment policies prior to the enactment, as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, the System classifies as permanently restricted net assets: (1) the original value of gifts donated to the permanent endowment; (2) the original value of subsequent gifts to the permanent endowment; and (3) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted net assets is

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS - CONTINUED

December 31, 2024 and 2023

classified as temporarily restricted net assets until those amounts are appropriated for expenditure by the organization in a manner consistent with the standard of prudence prescribed by UPMIFA. In accordance with UPMIFA, the System considers the following factors in making a determination to appropriate or accumulate donor-restricted funds:

- The duration and preservation of the fund
- The purposes of the System and the donor-restricted endowment fund
- · General economic conditions
- The possible effect of inflation and deflation
- The expected total return from income and the appreciation of investments
- · Other resources of the System
- The investment policies of the System

The System has adopted investment policies for its endowment assets that are consistent with the policies and objectives of their overall investments. The assets are invested in a manner that is intended to produce a positive rate of return while assuming a low level of risk.

The following table sets forth the changes to assets as they relate to the System's endowments for the years ended December 31, 2024 and 2023:

Endowment net assets, December 31, 2022	\$ 888,989
Investment return, net Change in unrealized gains and losses	 (8,694) 133,639
Endowment net assets, December 31, 2023	1,013,934
Investment return, net Change in unrealized gains and losses	 (10,268) 132,597
Endowment net assets, December 31, 2024	\$ 1,136,263

NOTE P - SUBSEQUENT EVENTS

The System evaluated its December 31, 2024 consolidated financial statements for subsequent events through April 1, 2025, the date the consolidated financial statements were available to be issued. The System is not aware of any subsequent events which would require recognition or disclosure in the consolidated financial statements.



CONSOLIDATING BALANCE SHEET

December 31, 2024

	Shore Medical Center	Shore Health Services Corporation	Brighton Bay	Shore Memorial Physician Services Combined	Shore Memorial Health System	Total Before Eliminations	Eliminating Entries	Total
ASSETS								
Current assets								
Cash and cash equivalents	\$ 2,635,555	\$ -	\$ -	\$ 3,234,349	\$ -	\$ 5,869,904	\$ -	\$ 5,869,904
Patient accounts receivable	25,061,178	-	-	3,150,148	-	28,211,326	-	28,211,326
Supplies	7,486,719	-				7,486,719	-	7,486,719
Prepaid expenses and other current assets	12,221,831		97,053	1,026,890	21,874	13,367,648		13,367,648
Total current assets	47,405,283	-	97,053	7,411,387	21,874	54,935,597	-	54,935,597
Assets limited as to use								
Internally designated by Board of Trustees	180,682,875	-	-	-	-	180,682,875	-	180,682,875
Externally designated by donor Investment in affiliates	1,136,263	-			(4,250,577)	1,136,263 (4,250,577)	4,250,577	1,136,263
Due from affiliates				8,161,679	(4,230,311)	8,161,679	(8,161,679)	
Right of use assets - operating leases	-	-	-	4,920,806	-	4,920,806	(=, , ,	4,920,806
Property and equipment, net	106,199,025	1,200,000	3,394,129	1,323,219	134,000	112,250,373	-	112,250,373
Other assets	19,662,639	-	92,945	1,090,000	-	20,845,584	-	20,845,584
Beneficial interest in perpetual trust	2,049,971					2,049,971		2,049,971
Total assets	\$ 357,136,056	\$ 1,200,000	\$ 3,584,127	\$ 22,907,091	\$ (4,094,703)	\$ 380,732,571	\$ (3,911,102)	\$ 376,821,469
LIABILITIES AND NET ASSETS								
Current liabilities								
Current portion of lease liability - operating	\$ -	\$ -	\$ -	\$ 855,022	\$ -	\$ 855,022	\$ -	\$ 855,022
Accounts payable, accrued expenses, and other current liabilities	33,664,452	8,350	497,492	3,886,536	675,330	38,732,160	-	38,732,160
Accrued vacation, holiday, and sick pay Current portion of accrued retirement benefits	3,845,708 1,128,725	-	-	-	-	3,845,708 1,128,725	-	3,845,708 1,128,725
Estimated settlements due to third-party payors	8,115,247	-		65.808		8.181.055		8.181.055
Due to affiliates	3,419,691	1,793,935	940,052	-	2,008,001	8,161,679	(8,161,679)	-
Total current liabilities	50,173,823	1,802,285	1,437,544	4,807,366	2,683,331	60,904,349	(8,161,679)	52,742,670
Accrued retirement benefits, less current portion	13,821,588	-	-	-	-	13,821,588	-	13,821,588
Reserve for insurance claims, less current portion	3,174,109	-	-	-	-	3,174,109	-	3,174,109
Other long-term liabilities	156,912	-	551,235	-	-	708,147	-	708,147
Lease liability - operating, less current portion				4,221,767		4,221,767		4,221,767
Total liabilities	67,326,432	1,802,285	1,988,779	9,029,133	2,683,331	82,829,960	(8,161,679)	74,668,281
Shareholder's equity								
Common stock	-	-		500	-	500	(500)	-
Additional paid-in capital Retained (deficit) earnings	-	-	624,479 970,869	164,581,734 (150,704,276)	-	165,206,213 (149,733,407)	(165,206,213) 149,733,407	-
Retained (dentit) earnings			970,009	(150,704,276)		(149,733,407)	149,733,407	
Total shareholder's equity	-	-	1,595,348	13,877,958	-	15,473,306	(15,473,306)	-
Net assets (deficiency)								
Without donor restrictions	286,022,299	(602,285)	-	-	(6,778,034)	278,641,980	19,723,883	298,365,863
With donor restrictions	3,787,325		<u>-</u>			3,787,325		3,787,325
Total net assets (deficiency)	289,809,624	(602,285)			(6,778,034)	282,429,305	19,723,883	302,153,188
Total net assets (deficiency) and shareholder's equity	289,809,624	(602,285)	1,595,348	13,877,958	(6,778,034)	297,902,611	4,250,577	302,153,188
Total liabilities and net assets	\$ 357,136,056	\$ 1,200,000	\$ 3,584,127	\$ 22,907,091	\$ (4,094,703)	\$ 380,732,571	\$ (3,911,102)	\$ 376,821,469

COMBINING BALANCE SHEET

Shore Memorial Physician Services

December 31, 2024

ASSETS	Shore Memorial Physicians Group	Shore Urgent Care	Shore Pathology Associates	Shore Specialty Consultants	Shore Hospitalists Associates	Shore Quality Partners	Shore Quality Partners ACO	Shore Health Enterprises	Shore Memorial Physician Services Combined
Current assets Cash and cash equivalents Patient accounts receivable Prepaid expenses and other current assets	\$ 1,956,743 209,733 838,283	\$ 10,527 347,109	\$ - 77,037	\$ 46,483 1,859,135	\$ 19,024 657,134	\$ 1,067,181 - 130,167	\$ 8,273 - -	\$ 126,118 - 58,440	\$ 3,234,349 3,150,148 1,026,890
Total current assets	3,004,759	357,636	77,037	1,905,618	676,158	1,197,348	8,273	184,558	7,411,387
Due from affiliates Right of use assets - operating leases Property and equipment, net Other assets	3,036,903 - 	538,258 - 	- - -	- - -	- - - -	7,611,679 - 438 	550,000 - - -	1,345,645 1,322,781 1,090,000	8,161,679 4,920,806 1,323,219 1,090,000
Total assets	\$ 6,041,662	\$ 895,894	\$ 77,037	\$ 1,905,618	\$ 676,158	\$ 8,809,465	\$ 558,273	\$ 3,942,984	\$ 22,907,091
LIABILITIES AND NET ASSETS									
Current liabilities Current portion of lease liability - operating Accounts payable, accrued expenses, and other current liabilities Estimated settlements due to third-party payors	\$ 514,431 3,275,523	\$ 97,312 - -	\$ - - -	\$ - -	\$ - (75,000)	\$ - 658,226 65,808	\$ - 7,395	\$ 243,279 20,392	\$ 855,022 3,886,536 65,808
Total current liabilities	3,789,954	97,312	-	-	(75,000)	724,034	7,395	263,671	4,807,366
Lease liability - operating, less current portion	2,601,625	462,898						1,157,244	4,221,767
Total liabilities	6,391,579	560,210	-	-	(75,000)	724,034	7,395	1,420,915	9,029,133
Shareholder's (deficit) equity Common stock Additional paid-in capital Retained (deficit) earnings	- 156,848,163 (157,198,080)	- 484,071 (148,387)	- - 77,037	- - 1,905,618	- - 751,158	- - 8,085,431	- - 550,878	500 7,249,500 (4,727,931)	500 164,581,734 (150,704,276)
Total shareholder's (deficit) equity	(349,917)	335,684	77,037	1,905,618	751,158	8,085,431	550,878	2,522,069	13,877,958
Total liabilities and net assets and shareholder's equity (deficit)	\$ 6,041,662	\$ 895,894	\$ 77,037	\$ 1,905,618	\$ 676,158	\$ 8,809,465	\$ 558,273	\$ 3,942,984	\$ 22,907,091

CONSOLIDATING STATEMENT OF OPERATIONS AND CHANGES IN NET ASSETS

Year ended December 31, 2024

	Shore Medical Center	Shore Health Services Corporation	Brighton Bay	Shore Memorial Physician Services Combined	Shore Memorial Health System	Total Before Eliminations	Eliminating Entries	Total
Net assets without donor restrictions								
Revenues								
Patient service revenue	\$ 251,356,661	\$ -	\$ -	\$ 22,013,322	\$ -	\$ 273,369,983	\$ -	\$ 273,369,983
Other revenue	8,729,438		522,389	6,595,739	72,018	15,919,584	(2,469,737)	13,449,847
Total revenues	260,086,099	-	522,389	28,609,061	72,018	289,289,567	(2,469,737)	286,819,830
Expenses								
Salaries and wages	78,466,544	3,600	-	9,169,932	45,828	87,685,904	_	87,685,904
Physician salaries and fees	17,842,858	-	-	23,098,801	· -	40,941,659	(1,611,557)	39,330,102
Employee benefits	17,520,077	756	-	3,420,165	8,820	20,949,818	-	20,949,818
Contracted services	43,549,424	1,950	7,903	7,643,603	250,460	51,453,340	(105,588)	51,347,752
Supplies and other expenses	57,919,741	-	26,231	2,588,799	-	60,534,771	(396,077)	60,138,694
Depreciation	8,366,597		139,865	716,222		9,222,684	(358,182)	8,864,502
Total expenses	223,665,241	6,306	173,999	46,637,522	305,108	270,788,176	(2,471,404)	268,316,772
Operating income	36,420,858	(6,306)	348,390	(18,028,461)	(233,090)	18,501,391	1,667	18,503,058
Nonoperating gains and (losses)								
Investment return, net	11,184,908	-	-	(352,646)	(332,258)	10,500,004	332,258	10,832,262
Other accrued retirement cost	624,981					624,981		624,981
Total nonoperating gains (losses), net	11,809,889			(352,646)	(332,258)	11,124,985	332,258	11,457,243
Excess of (deficiency in) revenues and gains over expenses and losses	48,230,747	(6,306)	348,390	(18,381,107)	(565,348)	29,626,376	333,925	29,960,301
Other changes in net assets without donor restrictions Transfers with affiliates:								
Cash transfers from affiliates	(22,995,000)	-	-	22,995,000	-	-	-	-
Equity transfers (to) from affiliates	(14,355,429)	15,230	5,476	25,965,534	(75,957)	11,554,854	(11,554,854)	-
Other changes in accrued retirement benefits	4,887,821					4,887,821		4,887,821
Increase (decrease) in net assets without donor restrictions	15,768,139	8,924	353,866	30,579,427	(641,305)	46,069,051	(11,220,929)	34,848,122
Net assets with donor restrictions								
Investment return, net	122,329		-	-	-	122,329	-	122,329
Other	235,510		-	-	-	235,510	-	235,510
Change in beneficial interest in perpetual trust	77,720					77,720		77,720
Increase in net assets with donor restrictions	435,559					435,559		435,559
INCREASE (DECREASE) IN NET ASSETS	16,203,698	8,924	353,866	30,579,427	(641,305)	46,504,610	(11,220,929)	35,283,681
Net assets, beginning of year	273,605,926	(611,209)	1,241,482	(16,701,469)	(6,136,729)	251,398,001	15,471,506	266,869,507
Net assets, end of year	\$ 289,809,624	\$ (602,285)	\$ 1,595,348	\$ 13,877,958	\$ (6,778,034)	\$ 297,902,611	\$ 4,250,577	\$ 302,153,188

COMBINING STATEMENT OF OPERATIONS AND CHANGES IN NET ASSETS

Shore Memorial Physician Services

Year ended December 31, 2024

	Shore Memorial Physicians Group	Shore Urgent Care	Shore Pathology Associates	Shore Specialty Consultants	Shore Hospitalists Associates	Shore Quality Partners	Shore Quality Partners ACO	Shore Health Enterprises	Shore Memorial Physician Services Combined
Net assets without donor restrictions									
Revenues	\$ 6,222,023	0 0 4 4 0 4 4 4	6 500.005	\$ 9.978.211	Ф 0.445.700	•	•	•	Ф 00 040 000
Patient service revenue Other revenue	\$ 6,222,023 945,845	\$ 2,146,414 9,596	\$ 520,965	\$ 9,978,211 1,562,541	\$ 3,145,709 67,812	\$ - 2,122,724	\$ - 1,134,232	\$ - 752,989	\$ 22,013,322 6,595,739
Other revenue	940,040	9,390	<u>-</u>	1,302,341	07,012	2,122,724	1,134,232	132,969	0,393,739
Total revenues	7,167,868	2,156,010	520,965	11,540,752	3,213,521	2,122,724	1,134,232	752,989	28,609,061
Expenses									
Salaries and wages	5,323,319	-	-	3,468,884	131,618	246,111	-	-	9,169,932
Physician salaries and fees	4,020,061	1,815,772	928,498	11,269,547	5,061,922	3,001	-	-	23,098,801
Employee benefits	2,518,176	-	35,920	597,304	249,842	18,526	-	397	3,420,165
Contracted services	(932,636)	522,378	211,139	4,938,397	1,014,360	1,034,912	458,976	396,077	7,643,603
Supplies and other expenses	834,956	163,170	16,565	1,398,333	172,540	3,235	-	-	2,588,799
Depreciation	275,179	3,652		78,515		694		358,182	716,222
Total expenses	12,039,055	2,504,972	1,192,122	21,750,980	6,630,282	1,306,479	458,976	754,656	46,637,522
Operating (loss) income	(4,871,187)	(348,962)	(671,157)	(10,210,228)	(3,416,761)	816,245	675,256	(1,667)	(18,028,461)
Nonoperating gains and (losses)									
Investment return, net	(12,388)	(2,000)	(2,000)	(2,000)	(2,000)			(332,258)	(352,646)
Total nonoperating losses, net	(12,388)	(2,000)	(2,000)	(2,000)	(2,000)			(332,258)	(352,646)
(Deficiency in) excess of revenues and gains over expenses and losses	(4,883,575)	(350,962)	(673,157)	(10,212,228)	(3,418,761)	816,245	675,256	(333,925)	(18,381,107)
Other changes in net assets without donor restrictions Transfers with affiliates:									
Cash transfers from affiliates	22,995,000	-	-	-	-	-	-	-	22,995,000
Equity transfers (to) from affiliates	(95,845,917)	7,149,592	5,578,133	65,645,671	27,662,995	8,113,521	888,892	6,772,647	25,965,534
(Decrease) increase in net assets									
without donor restrictions	(77,734,492)	6,798,630	4,904,976	55,433,443	24,244,234	8,929,766	1,564,148	6,438,722	30,579,427
(DECREASE) INCREASE IN NET ASSETS	(77,734,492)	6,798,630	4,904,976	55,433,443	24,244,234	8,929,766	1,564,148	6,438,722	30,579,427
Net assets, beginning of year	77,384,575	(6,462,946)	(4,827,939)	(53,527,825)	(23,493,076)	(844,335)	(1,013,270)	(3,916,653)	(16,701,469)
Net assets, end of year	\$ (349,917)	\$ 335,684	\$ 77,037	\$ 1,905,618	\$ 751,158	\$ 8,085,431	\$ 550,878	\$ 2,522,069	\$ 13,877,958