



Basic Financial Statements,
Supplementary Schedules (with
Management's Discussion and
Analysis) and Report of Independent
Certified Public Accountants

Westchester County Health Care Corporation

December 31, 2021 and 2020

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REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Board of Directors
Westchester County Health Care Corporation

Opinion

We have audited the accompanying financial statements of the business-type activities of Westchester County Health Care Corporation ("WCHCC") as of and for the years ended December 31, 2021 and 2020, and the related notes to the financial statements, which collectively comprise WCHCC's basic financial statements as listed in the table of contents.

In our opinion, based on our audits and the reports of other auditors, the accompanying financial statements present fairly, in all material respects, the business-type activities and the discretely presented component unit of WCHCC as of December 31, 2021 and 2020, and for the years then ended in accordance with accounting principles generally accepted in the United States of America.

We did not audit the financial statements of WCHCC (Bermuda), Limited, a wholly owned subsidiary of WMC-New York, Inc., a blended component unit of WCHCC, which statements reflect total assets constituting \$229,663,000 and \$230,715,000 and total liabilities constituting \$88,228,000 and \$102,096,000 as of December 31, 2021 and 2020, respectively. Those statements were audited by other auditors whose report has been furnished to us, and our opinion, insofar as it relates to the amounts included for WCHCC (Bermuda), Limited, is based solely on the report of the other auditors.

Basis for opinion

We conducted our audits of the 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 WCHCC 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 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 WCHCC's ability to continue as a going concern for one year after the date the financial statements are issued.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 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 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 WCHCC's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the WCHCC'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.

Required supplementary information

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis on pages 6 through 14, and the required supplementary information on pages 51 through 53, be presented to supplement the basic financial statements. Such information is the responsibility of management and, although not a required 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 US GAAS. These limited procedures 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.

Grant Thornton LLP

New York, New York
April 7, 2022

Westchester County Health Care Corporation
MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED)
December 31, 2021 and 2020

Overview

This annual report consists of four parts - management's discussion and analysis, the basic financial statements, required supplementary schedules and other information.

Management's Discussion and Analysis of the Westchester County Health Care Corporation's ("WCHCC") annual financial report presents WCHCC and its blended component units' financial performance during the years ended December 31, 2021, 2020 and 2019. The purpose is to provide an objective analysis of the financial activities of WCHCC based on currently known facts, decisions, and conditions. Please read it in conjunction with the basic financial statements, which follow this section.

The basic financial statements (Statements of Net Position, Statements of Revenues, Expenses, and Changes in Net Position, Statements of Cash Flows, and the Notes to Financial Statements) present on a comparative basis the financial position of WCHCC at December 31, 2021 and 2020 and the changes in its financial position and cash flows for the years then ended. The Statements of Revenues, Expenses, and Changes in Net Position reflect the years' activities on the accrual basis of accounting, where revenues and expenses are recorded when services are provided or obligations are incurred, not when cash is received or paid. The financial statements also report WCHCC's net position (the difference between assets and liabilities) and how that has changed. The Statements of Cash Flows provides relevant information about the years' cash receipts and cash payments and classifies them as operating, noncapital financing, capital and related financing and investing activities. The Notes to Financial Statements explain information in the financial statements and provide more detailed data.

On March 11, 2020, the World Health Organization declared COVID-19, the disease caused by the novel coronavirus, a pandemic. As a result of the COVID-19 pandemic, WCHCC experienced a decline in patient visits, admissions, and medical procedures performed. Elective medical procedures were suspended by state and local governments at varying time periods beginning in mid-March through late May 2020, contributing to a significant decline in net patient service revenue due to COVID-19 when compared to historic and forecasted results for that period. Additionally, in response to the pandemic, WCHCC incurred additional costs for testing, personal protective equipment, third-party contract services and other operating costs associated with ensuring employee and patient safety while operating during a pandemic. Since late May 2020, WCHCC has begun to see increases in its patient visits, admissions, and medical procedures, however, volumes have not returned to pre-pandemic levels. Management is actively monitoring operating revenues and expenses based on the continuing uncertainties of COVID-19.

Bon Secours Charity Health System, Inc. ("Charity"), Bon Secours Health System Inc. ("BSHI"), and the Sisters of Charity of Saint Elizabeth ("SOC") have an affiliation agreement with WCHCC and WMC Health Network - Rockland, Inc. ("WMC - Rockland," a subsidiary of WCHCC), in which WMC - Rockland is the majority member of Charity, holding 60% of the economic interest in Charity and appointing 60% of the Charity Board of Directors. Bon Secours Mercy Health, Inc. ("BSMH") is the successor entity to BHSI. BSMH holds a 40% economic interest in Charity and, together with SOC, appoints 40% of the Charity Board of Directors. Charity is a discretely presented component unit.

Westchester County Health Care Corporation

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) - CONTINUED

December 31, 2021, 2020 and 2019
(amounts in thousands)

Financial Analysis
Summary of Assets, Liabilities, and Net Position
December 31, 2021, 2020, and 2019

	<u>2021</u>	<u>2020</u>	<u>2019</u>	2021-2020 Percentage Change
Assets				
Current assets	\$ 811,871	\$ 859,175	\$ 593,681	(5.5)%
Capital assets, net	921,453	869,721	816,680	5.9
Other assets	145,228	156,029	45,596	(6.9)
Total assets	<u>\$ 1,878,552</u>	<u>\$ 1,884,925</u>	<u>\$ 1,455,957</u>	<u>(0.3)%</u>
Deferred outflows of resources	<u>\$ 251,793</u>	<u>\$ 206,797</u>	<u>\$ 58,385</u>	<u>21.8%</u>
Liabilities				
Current liabilities	\$ 670,443	\$ 633,306	\$ 472,226	5.9%
Long-term portion of debt, net	773,201	773,069	710,293	-
Other long-term liabilities	751,317	1,039,239	611,001	(27.7)
Total liabilities	<u>\$ 2,194,961</u>	<u>\$ 2,445,614</u>	<u>\$ 1,793,520</u>	<u>(10.2)%</u>
Deferred inflows of resources	<u>\$ 263,955</u>	<u>\$ 19,673</u>	<u>\$ 28,670</u>	<u>1,241.7%</u>
Net position				
Restricted	\$ 20,863	\$ 16,509	\$ 14,909	26.4%
Unrestricted	(349,434)	(390,074)	(322,757)	(10.4)
Total net position	<u>\$ (328,571)</u>	<u>\$ (373,565)</u>	<u>\$ (307,848)</u>	<u>(12.0)%</u>

Westchester County Health Care Corporation

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) - CONTINUED

December 31, 2021, 2020 and 2019
(amounts in thousands)

Financial Analysis
Summary of Revenues, Expenses, and Changes in Net Position
Years ended December 31, 2021, 2020, and 2019

	2021	2020	2019	2021-2020 Percentage Change
Operating revenues				
Net patient service revenue	\$ 1,746,803	\$ 1,406,603	\$ 1,586,830	24.2%
Other revenue	123,172	130,215	132,144	(5.4)
Total operating revenues	1,869,975	1,536,818	1,718,974	21.7
Operating expenses				
Salaries and benefits	1,093,917	1,015,481	942,177	7.7
Supplies and other expenses	615,509	588,979	634,972	4.5
Depreciation and amortization	91,702	88,655	69,220	3.4
Total operating expenses	1,801,128	1,693,115	1,646,369	6.4
Operating income (loss) before OPEB and pension expenses	68,847	(156,297)	72,605	(144.0)
Salaries and benefits - OPEB expenses	19,912	16,349	15,918	21.8
Salaries and benefits - NYS pension expense	31,500	32,115	32,113	(1.9)
Operating income (loss) before NYS pension adjustment	17,435	(204,761)	24,574	(108.5)
NYS non-cash pension adjustments	(11,128)	47,308	9,466	(123.5)
Operating income (loss)	28,563	(252,069)	15,108	(111.3)
Nonoperating activities, net				
Investment income	14,894	7,281	14,272	104.6
Unrealized gains on marketable securities, net	714	12,766	7,612	(94.4)
Interest expense	(48,924)	(44,504)	(33,513)	9.9
Government stimulus grants	6,871	207,636	-	96.7
Other nonoperating activities, net	479	(7,153)	412	(106.7)
Total nonoperating activities, net	(25,966)	176,026	(11,217)	(114.8)
Income (loss) before other additions and deductions	2,597	(76,043)	3,891	(103.4)
Other additions				
NYS Capital Restructuring Financing Program Grant Award	42,397	10,326	8,644	310.6
Increase (decrease) in net position	44,994	(65,717)	12,535	(168.5)
Net position				
Beginning of year	(373,565)	(307,848)	(320,383)	21.3
End of year	\$ (328,571)	\$ (373,565)	\$ (307,848)	(12.0)%

Financial Analysis
Calculation of (Decrease) Increase in Net Position Excluding NYS Non-Cash Pension Adjustment
Years ended December 31, 2021, 2020, and 2019

	2021	2020	2019	2021-2020 Percentage Change
Calculation				
Increase (decrease) in net position	\$ 44,994	\$ (65,717)	\$ 12,535	(168.5)%
NYS non-cash pension adjustment	(11,128)	47,308	9,466	(123.5)
Increase (decrease) in net position excluding NYS non-cash pension adjustment	\$ 33,866	\$ (18,409)	\$ 22,001	(284.0)%

Westchester County Health Care Corporation

MANAGEMENT’S DISCUSSION AND ANALYSIS (UNAUDITED) - CONTINUED

December 31, 2021 and 2020

Management’s Discussion and Analysis includes the activities of WCHCC and its subsidiary entities (excluding Charity).

Overall Financial Position and Operations

WCHCC reported increase/(decrease) in net position excluding NYS non-cash pension adjustments of \$33.9 million, (\$18.4) million, and \$22.0 million for the years ended December 31, 2021, 2020, and 2019, respectively. WCHCC’s net position increased \$45.0 million from December 31, 2020 to December 31, 2021 and decreased \$65.7 million from December 31, 2019 to December 31, 2020.

Significant financial indicators are as follows:

	2021	2020	2019
Increase/(decrease) in net position excluding NYS non-cash pension adjustments (in millions)	\$ 33.9	\$ (18.4)	\$ 22.0
Current ratio	1.2	1.4	1.3
Quick ratio	1.2	1.3	1.2
Days cash on hand	100.9	131.9	53.4

Analysis of Financial Position

In this section, WCHCC’s management provides its analysis of December 31, 2021 financial amounts compared to December 31, 2020 financial amounts and, where appropriate, December 31, 2020 financial amounts compared to December 31, 2019 financial amounts.

Assets and Liabilities

Cash and Cash Equivalents

Cash and cash equivalents decreased \$150.7 million at December 31, 2021 compared to December 31, 2020, primarily due to Medicare Advance repayment (\$64.1 million), increased capital spending from operations (\$43.6 million), purchase of investments (\$37.4 million) and other statement of net position changes. Cash and cash equivalents increased \$290.7 million at December 31, 2020 compared to December 31, 2019, primarily due to receipt of Medicare Advances (\$119.1 million) and deferred employer social security tax payments (\$24.8 million) as a result of The Coronavirus Aid, Relief, and Economic Security Act (the “CARES Act”), proceeds from debt refinancing (\$54.0 million), a line of credit draw (\$70.0 million) and other statement of net position changes.

Investments

Investments increased \$41.8 million at December 31, 2021 compared to December 31, 2020 and increased \$65.8 million at December 31, 2020 compared to December 31, 2019, primarily due to purchases of new investments and favorable market performance.

Patient Accounts Receivable, net

Patient accounts receivable reflected days revenue outstanding of 47.9, 49.0, and 48.4 at December 31, 2021, 2020 and 2019, respectively. Days revenue outstanding at December 31, 2021 compared to December 31, 2020, and at December 31, 2020 compared to December 31, 2019 were relatively consistent.

Westchester County Health Care Corporation

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) - CONTINUED

December 31, 2021 and 2020

Other Current Assets

Other current assets increased \$14.3 million from December 31, 2020 to December 31, 2021 due to increases in inventory, prepaid expenses and other statement of net position changes and decreased \$69.9 million from December 31, 2019 to December 31, 2020 due to a decrease in other receivables and other statement of net position changes.

Assets Restricted as to Use

Assets restricted as to use increased \$9.8 million from December 31, 2020 to December 31, 2021 primarily due to increases in restricted contributions, restricted investments and funds held for the single campus project and decreased \$12.8 million from December 31, 2019 to December 31, 2020 primarily due to the release of debt service reserve funds due to a bond refinancing.

Other Assets, net

Other assets decreased \$673,000 from December 31, 2020 to December 31, 2021 primarily due to various balance sheet changes and increased \$7.3 million from December 31, 2019 to December 31, 2020 primarily due to the increase in leases receivable from the adoption on January 1, 2020 of Governmental Accounting Standards Board Statement No. 87, *Leases*, ("GASB 87").

Capital Assets, net

Capital assets increased \$51.7 million from December 31, 2020 to December 31, 2021 primarily due additions for the HealthAlliance single campus construction and various other capital projects and medical equipment purchases, and capital assets increased \$53.0 million from December 31, 2019 to December 31, 2020 primarily due to the new electronic health record ("EHR") system implemented in October 2020.

Right to Use Lease Assets, net

Right to use lease assets decreased \$12.9 million from December 31, 2020 to December 31, 2021 due to depreciation expense, and increased \$116.2 million from December 31, 2019 to December 31, 2020 due to the adoption on January 1, 2020 of GASB 87.

Accounts Payable and Accrued Expenses

Accounts payable and accrued expenses increased \$22.0 million from December 31, 2020 to December 31, 2021 and decreased \$18.5 million from December 31, 2019 to December 31, 2020 due to the timing of payments.

Accrued Salaries and Related Withholdings

Accrued salaries and related withholdings increased \$9.0 million from December 31, 2020 to December 31, 2021 due to an increase in salaries and the timing of payrolls, and increased \$39.6 million from December 31, 2019 to December 31, 2020 due to deferred employer social security tax payments and an increase in vacation liabilities.

Current Portion of Right to Use Lease Liabilities

Current portion of right to use lease liabilities decreased \$2.0 million from December 31, 2020 to December 31, 2021 due to decrease in lease liabilities and increased \$10.1 million from December 31, 2019 to December 31, 2020 due to the adoption of GASB 87 effective January 1, 2020.

Westchester County Health Care Corporation

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) - CONTINUED

December 31, 2021 and 2020

Current Portion of Other Long-Term Liabilities

Other current liabilities decreased \$5.1 million from December 31, 2020 to December 31, 2021 primarily due to the repayment of Medicare advances offset by other current year activity, and increased \$69.2 million from December 31, 2019 to December 31, 2020 primarily due to Medicare advances received under the CARES Act and offset by other current year activity.

Line of Credit

Line of credit increased \$10.0 million from December 31, 2020 to December 31, 2021 and increased \$70.0 million from December 31, 2019 to December 31, 2020, due to draws at the end of 2021 and 2020.

Long-Term Debt

Long-term debt increased \$3.3 million from December 31, 2020 to December 31, 2021, due to new financed purchases of \$25.8 million partially offset by principal payments and amortization of bond premiums and discounts of \$22.5 million.

Long-term debt increased \$53.6 million from December 31, 2019 to December 31, 2020, due to new financed purchases of \$17.2 million and bond issue refinancing of \$68.1 million partially offset by principal payments and amortization of bond premiums and discounts of \$31.7 million.

Non-Current Right to Use Lease Liabilities, net

Non-current right to use lease liabilities decreased \$7.6 million from December 31, 2020 to December 31, 2021 due to payments and increased \$110.7 million from December 31, 2019 to December 31, 2020 due to the adoption of GASB 87 effective January 1, 2020.

Other Long-Term Liabilities

Other long-term liabilities decreased \$280.4 million from December 31, 2020 to December 31, 2021, primarily due to a decrease of \$231.5 million in the New York State ("NYS") pension liability and a decrease of \$52.3 million due to Medicare advances under the CARES Act, partially offset by an increase in post-retirement health liabilities of \$20.9 million.

Other long-term liabilities increased \$317.5 million from December 31, 2019 to December 31, 2020, due to an increase of \$169.0 million for the NYS pension liability, an increase of \$60.3 million due to Medicare advances under the CARES Act, increase of \$17.6 million in deferred payments for the EHR system, and increase of \$7.1 million in employer deferred social security payments under the CARES Act and various other activity.

Deferred Outflows and Inflows of Resources

Deferred Outflows

Deferred outflows increased approximately \$45.0 million from December 31, 2020 to December 31, 2021 primarily due to increases in NYS deferred pension outflows of \$31.8 million and post-retirement outflows of \$14.7 million partially offset by a decrease in bond outflows of \$1.5 million, and increased approximately \$148.4 million from December 31, 2019 to December 31, 2020 primarily due to increases in NYS deferred pension outflows of \$108.7 million, post-retirement outflows of \$10.5 million, and bond outflows of \$29.2 million.

Westchester County Health Care Corporation

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) - CONTINUED

December 31, 2021 and 2020

Deferred Inflows

Deferred inflows increased \$244.3 million from December 31, 2020 to December 31, 2021 due to deferred NYS pension inflows of \$248.5 million, partially offset by decreases in deferred post-retirement inflows of \$2.5 million and by \$1.5 million for deferred lease outflows and decreased \$9.0 million from December 31, 2019 to December 31, 2020 due to deferred NYS pension inflows of \$16.1 million and deferred post-retirement inflows of \$2.6 million, partially offset by \$9.7 million for deferred lease outflows due to the adoption of GASB 87.

Revenues and Expenses

Net Patient Service Revenue

Net patient service revenue increased \$340.2 million from 2020 to 2021 due to an increase in outpatient visits, admissions, case mix and higher reimbursement rates, and decreased \$180.3 million from 2019 to 2020 due to a decrease in patient volume from the impact of COVID-19.

Other Revenue

Other revenue decreased \$7.0 million from 2020 to 2021, primarily due to a decrease in grants and other revenue, and decreased \$1.9 million from 2019 to 2020, primarily due to the impact of COVID-19 on other revenue.

Salaries and Benefits, Including Post-Retirement and New York State Pension

Salaries and benefits increased \$22.9 million from 2020 to 2021 due to investment in new physicians and support staff, insourcing of contracted staff, contractual salary increases and an increase in staffing for the COVID-19 vaccination program and increased \$111.6 million from 2019 to 2020, due to investment in new physicians and support staff, insourcing of contracted staff, contractual salary increases, an increase in salaries for overtime and agency due to COVID-19 and a \$47.3 million non-cash negative adjustment for the New York State Local Retirement System ("NYSLRS").

Supplies and Other Expenses

Supplies and other expenses increased approximately \$26.5 million from 2020 to 2021 due to the return of volume impacting the following areas:

- Increase in medical supplies of \$20.5 million
- Increase in consulting and professional fees of \$4.7 million
- Increase in other expenses of \$1.3 million

Supplies and other expenses decreased approximately \$46.0 million from 2019 to 2020, primarily due to:

- Decrease in medical supplies of \$1.3 million
- Decrease in consulting and professional fees of \$14.2 million
- Decrease in rent expense of \$9.0 million
- Decrease in insurance expense of \$4.3 million
- Decrease in other expenses of \$17.2 million

Westchester County Health Care Corporation

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) - CONTINUED

December 31, 2021 and 2020

Depreciation and Amortization Expense

Depreciation and amortization expense increased \$3.0 million from 2020 to 2021 due to capital asset additions in 2021. Depreciation and amortization expense increased \$19.4 million from 2019 to 2020 due to capital asset additions in 2020, the adoption of GASB 87 and a full year of the Ambulatory Care Center ("ACP") depreciation.

Nonoperating Activities, net

Nonoperating activities, net decreased \$202.0 million from 2020 to 2021, primarily due to significant one-time Government Stimulus grants in 2020 obtained from the CARES Act and a decrease in unrealized gains on investments, partially offset by an increase in investment income.

Nonoperating activities, net increased \$187.2 million from 2019 to 2020, primarily due to Government Stimulus grants obtained from the CARES Act and unrealized gains on investments partially offset by a decrease in interest income and an increase in investment expense.

Net Position

As shown in the Statements of Net Position, WCHCC's net position has the following components:

Restricted

Increased \$4.3 million and \$1.6 million from December 31, 2020 to December 31, 2021, and December 31, 2019 to December 31, 2020, respectively, primarily due to an increase in restricted contributions.

Unrestricted

Unrestricted net deficit decreased by \$40.7 million to (\$349.4) million at December 31, 2021 from (\$390.1) million, primarily due to the changes in net position for the year ended December 31, 2021.

Unrestricted net deficit increased by (\$67.3) million to (\$390.1) million at December 31, 2020 from (\$322.8) million at December 31, 2019, primarily due to the decrease in net position for the year ended December 31, 2020 primarily due to the impacts of COVID-19.

Capital Assets, net

At December 31, 2021, WCHCC had capital assets, net of accumulated depreciation of \$921.5 million, compared to \$869.7 million at December 31, 2020 and \$816.7 million at December 31, 2019. Major categories of capital assets, net are set forth in the table below (amounts in thousands):

	2021	2020	2019
Land and land improvements	\$ 12,354	\$ 12,000	\$ 12,385
Buildings and building improvements	436,373	450,000	470,626
Equipment	393,983	381,062	235,836
Construction in progress	78,743	26,659	97,833
	\$ 921,453	\$ 869,721	\$ 816,680

Capital assets, net increased in 2021 by \$51.7 million, consisting of additions for the HealthAlliance single campus construction project and other capital projects and medical equipment purchases of \$129.4 million,

Westchester County Health Care Corporation

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) - CONTINUED

December 31, 2021 and 2020

offset by depreciation expense of \$77.7 million. Capital assets, net increased in 2020 by \$53.0 million, consisting of additions for the EHR system and other capital projects and medical equipment purchases of \$112.0 million, partially offset by depreciation expense of \$59.0 million. More detailed information about WCHCC's capital assets is presented in Note 7 to the financial statements.

Long-Term Debt

At December 31, 2021, WCHCC had \$797.3 million in total long-term debt outstanding, as follows with comparative amounts at December 31, 2020 and December 31, 2019 (amounts in thousands):

	<u>2021</u>	<u>2020</u>	<u>2019</u>
2000 Series Bonds	\$ -	\$ -	\$ 108,170
2010 Series Bonds	71,570	71,605	142,810
2011 Series Bonds	-	-	62,570
2014 Series Bonds	24,000	24,551	25,077
2015 Series Bonds	20,892	21,614	22,305
2016 Series Bonds	275,991	278,555	280,810
2020 Series Bonds	300,000	300,000	-
Other, net	25,107	26,327	27,884
Bond premium/discount	20,691	21,529	22,504
Financed purchases	59,080	49,857	48,330
	<u>\$ 797,331</u>	<u>\$ 794,038</u>	<u>\$ 740,460</u>

Long-term debt increased \$3.3 million from December 31, 2020 to December 31, 2021 due to new financed purchases of \$25.8 million partially offset by principal payments and amortization of bond premiums and discounts of \$22.5 million, and increased \$53.6 million from December 31, 2019 to December 31, 2020 due to refinancing several bond issues into one new bond offering and new financed purchases for equipment of \$16.9 million, partially offset by principal payments and amortization of bond premiums and discounts.

More detailed information about WCHCC's long-term debt is presented in Note 8 to the financial statements.

Contacting WCHCC's Financial Management

This financial report provides a general overview of WCHCC's finances and operations. If you have questions about this report or need additional financial information, please contact Gary F. Brudnicki, Senior Executive Vice President, Westchester County Health Care Corporation, Executive Offices, Valhalla, New York 10595.

Westchester County Health Care Corporation

STATEMENTS OF NET POSITION

December 31, 2021 and 2020
(amounts in thousands)

	2021		2020	
	WCHCC	Bon Secours Charity	WCHCC	Bon Secours Charity
Assets				
Current assets:				
Cash and cash equivalents	\$ 236,582	\$ 80,543	\$ 387,260	\$ 151,927
Investments	250,100	34,106	208,274	26,459
Total cash, cash equivalents and investments	486,682	114,649	595,534	178,386
Patient accounts receivable, net	229,028	49,817	188,836	48,940
Assets restricted as to use, required for current liabilities	22,513	4,578	15,457	5,654
Other current assets	73,648	25,338	59,348	20,067
Total current assets	811,871	194,382	859,175	253,047
Assets restricted as to use, net	26,142	4,773	23,408	4,179
Capital assets, net	921,453	145,885	869,721	132,235
Right to use lease assets	103,320	31,404	116,182	15,054
Other assets, net	15,766	2,157	16,439	1,909
Total assets	1,878,552	378,601	1,884,925	406,424
Deferred outflows of resources				
Pension, OPEB and bond related	251,793	149	206,797	161
Liabilities				
Current liabilities:				
Line of credit	80,000	-	70,000	20,000
Current portion of long-term debt	24,130	1,616	20,969	2,387
Current portion of right to use lease liabilities	8,113	6,163	10,074	5,704
Accounts payable and accrued expenses	237,592	60,201	215,592	45,158
Accrued salaries and related withholdings	133,168	51,476	124,141	42,534
Current portion of other long-term liabilities	187,440	48,551	192,530	44,640
Total current liabilities	670,443	168,007	633,306	160,423
Long-term debt, net	773,201	125,529	773,069	124,687
Long-term right to use lease liabilities, net	103,161	26,413	110,726	9,791
Other long-term liabilities, net	648,156	67,209	928,513	88,516
Total liabilities	2,194,961	387,158	2,445,614	383,417
Deferred inflows of resources				
Pension, OPEB and lease related	263,955	1,661	19,673	1,813
Commitments and contingencies				
Net position				
Restricted				
Expendable for capital acquisitions	1,239	1,765	1,217	1,683
Expendable for specific operating activities	11,654	3,692	9,326	3,062
Nonexpendable for endowment	7,970	664	5,966	664
Total restricted	20,863	6,121	16,509	5,409
Unrestricted				
Net investment in capital assets	231,830	141,713	125,572	128,199
Unrestricted	(581,264)	(157,903)	(515,646)	(112,253)
Total unrestricted	(349,434)	(16,190)	(390,074)	15,946
Total net position	\$ (328,571)	\$ (10,069)	\$ (373,565)	\$ 21,355

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

Westchester County Health Care Corporation

STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION

Years ended December 31, 2021 and 2020
(amounts in thousands)

	2021		2020	
	WCHCC	Bon Secours Charity	WCHCC	Bon Secours Charity
Operating revenues				
Net patient service revenue (net of provision for bad debts of \$22,946 and \$33,964 in 2021 and \$99,145 and \$34,453 in 2020, respectively)	\$ 1,746,803	\$ 573,395	\$ 1,406,603	\$ 485,433
Other revenue	123,172	21,180	130,215	14,142
Total operating revenues	<u>1,869,975</u>	<u>594,575</u>	<u>1,536,818</u>	<u>499,575</u>
Operating expenses				
Salaries and benefits	1,093,917	350,456	1,015,481	332,292
Supplies and other expenses	615,509	249,753	588,979	239,298
Depreciation and amortization	91,702	32,640	88,655	32,979
Total operating expenses	<u>1,801,128</u>	<u>632,849</u>	<u>1,693,115</u>	<u>604,569</u>
Operating income (loss) before OPEB and pension expense	68,847	(38,274)	(156,297)	(104,994)
Salaries and benefits - OPEB expenses	19,912	-	16,349	-
Salaries and benefits - NYS pension expenses	31,500	-	32,115	-
Operating income (loss) before NYS pension adjustment	17,435	(38,274)	(204,761)	(104,994)
NYS non-cash pension adjustment	(11,128)	-	47,308	-
Operating income (loss)	<u>28,563</u>	<u>(38,274)</u>	<u>(252,069)</u>	<u>(104,994)</u>
Nonoperating activities				
Investment income	14,894	1,120	7,281	625
Unrealized gains on investments, net	714	504	12,766	1,295
Interest expense	(48,924)	(9,350)	(44,504)	(8,994)
Government stimulus grants	6,871	7,704	207,636	92,770
Other nonoperating activities, net	479	791	(7,153)	115
Total nonoperating activities, net	<u>(25,966)</u>	<u>769</u>	<u>176,026</u>	<u>85,811</u>
Increase (decrease) in net position before other changes	2,597	(37,505)	(76,043)	(19,183)
Other changes in net position				
NYS Capital Restructuring Financing Program Grant Award	42,397	6,081	10,326	5,817
Increase (decrease) in net position	<u>44,994</u>	<u>(31,424)</u>	<u>(65,717)</u>	<u>(13,366)</u>
Net position				
Beginning of year	(373,565)	21,355	(307,848)	34,721
End of year	<u>\$ (328,571)</u>	<u>\$ (10,069)</u>	<u>\$ (373,565)</u>	<u>\$ 21,355</u>

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

Westchester County Health Care Corporation

STATEMENTS OF CASH FLOWS

Years ended December 31, 2021 and 2020
(amounts in thousands)

	2021		2020	
	WCHCC	Bon Secours Charity	WCHCC	Bon Secours Charity
Cash flows from operating activities:				
Cash received from patients and third-party payors	\$ 1,678,495	\$ 570,011	\$ 1,552,685	\$ 513,530
Other receipts	127,378	19,064	178,534	13,555
Cash paid to employees for salaries and benefits	(1,158,581)	(341,493)	(1,065,855)	(325,596)
Cash paid for supplies and other expenses	(604,607)	(226,904)	(591,799)	(206,179)
Net cash provided by (used in) operating activities	<u>42,685</u>	<u>20,678</u>	<u>73,565</u>	<u>(4,690)</u>
Cash flows from noncapital financing activities:				
Proceeds from contributions restricted for specific operating activities	5,912	-	4,760	-
(Repayment of) proceeds from line of credit	-	(20,000)	-	20,000
Proceeds from Government stimulus grants	1,832	7,704	207,636	90,362
(Repayments of) proceeds from Medicare advances	(56,268)	(26,110)	119,077	61,900
Net cash receipts for nonoperating items	6,871	725	1,525	3,239
Repayments of principal on long-term debt	(142)	-	(124)	-
Interest paid	(1,089)	(9,098)	(1,168)	(8,726)
Net cash (used in) provided by noncapital financing activities	<u>(42,884)</u>	<u>(46,779)</u>	<u>331,706</u>	<u>166,775</u>
Cash flows from capital and related financing activities:				
Purchase of capital assets	(81,298)	(38,655)	(138,299)	(34,606)
Payments on right to use leased assets	(10,503)	(4,441)	(10,150)	(15,130)
(Loss) Proceeds from sale of assets	(23)	-	172	-
Proceeds from issuance of long-term debt	-	-	300,268	-
Proceeds from line of credit	80,000	-	210,000	-
Repayment of line of credit	(70,000)	-	(140,000)	-
Repayment of redeemed long-term debt	-	-	(231,635)	-
Repayments of principal on long-term debt	(22,385)	(2,475)	(31,580)	(2,098)
Bond issuance costs	-	-	(3,981)	-
Interest paid	(46,737)	(252)	(41,968)	(268)
NYS Capital Restructuring Financing Program Grant Award	42,397	6,081	10,326	5,817
Net cash (used in) capital and related financing activities	<u>(108,549)</u>	<u>(39,742)</u>	<u>(76,847)</u>	<u>(46,285)</u>
Cash flows from investing activities:				
Purchase of investments and assets restricted as to use	(66,497)	(25,650)	(136,213)	(22,139)
Sale of investments and assets restricted as to use	9,673	18,485	91,082	14,719
Interest received	14,894	1,624	7,429	1,920
Net cash (used in) investing activities	<u>(41,930)</u>	<u>(5,541)</u>	<u>(37,702)</u>	<u>(5,500)</u>
Net (decrease) increase in cash and cash equivalents	(150,678)	(71,384)	290,722	110,300
Cash and cash equivalents				
Beginning of year	387,260	151,927	96,538	41,627
End of year	<u>\$ 236,582</u>	<u>\$ 80,543</u>	<u>\$ 387,260</u>	<u>\$ 151,927</u>

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

Westchester County Health Care Corporation

STATEMENTS OF CASH FLOWS - CONTINUED

Years ended December 31, 2021 and 2020
(amounts in thousands)

	2021		2020	
	WCHCC	Bon Secours Charity	WCHCC	Bon Secours Charity
Reconciliation of operating income (loss) to net cash provided by operating activities:				
Operating income (loss)	\$ 28,563	\$ (38,274)	\$ (252,034)	\$ (104,994)
Adjustments to reconcile operating income (loss) to net cash provided by (used in) operating activities:				
Depreciation and amortization	91,702	32,640	88,655	32,979
Provision for bad debts, net	22,946	33,964	99,145	34,453
Deferred inflows and outflows, net	197,803	(140)	(158,223)	1,893
Changes in assets and liabilities:				
Patient accounts receivable	(63,139)	(34,841)	(77,691)	(12,598)
Other assets	(36,060)	(5,519)	86,235	1,534
Accounts payable and accrued expenses	(1,651)	15,043	2,056	1,807
Accrued salaries and related withholdings	9,027	8,942	39,550	9,218
Other liabilities	(206,506)	8,863	245,872	31,018
Net cash provided by (used in) operating activities	<u>\$ 42,685</u>	<u>\$ 20,678</u>	<u>\$ 73,565</u>	<u>\$ (4,690)</u>
Supplemental disclosure of cash flow information				
Change in amounts accrued for purchase of capital assets	<u>\$ (25,674)</u>	<u>\$ -</u>	<u>\$ 22,593</u>	<u>\$ -</u>
Assets acquired under financed purchases	<u>\$ 25,821</u>	<u>\$ 2,612</u>	<u>\$ 16,916</u>	<u>\$ 416</u>

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

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS

December 31, 2021 and 2020

NOTE 1 - ORGANIZATION

In 1997, the State of New York enacted legislation to authorize the creation of the Westchester County Health Care Corporation (“WCHCC”) in response to the efforts of Westchester County (the “County”) to provide a form of governance for Westchester Medical Center (the “Medical Center”) with the flexibility to cope with the rapidly changing health care environment, to become more competitive, and to provide the County and area residents with quality health care in an efficient and effective manner.

The accompanying financial statements include the accounts of the following component units, entities for which WCHCC is considered to be financially accountable. All significant inter-entity accounts and activities have been eliminated in consolidation.

Medical Center:	HealthAlliance:
<ul style="list-style-type: none"> • Westchester County Health Care Corporation (d/b/a Westchester Medical Center) • The Westchester Medical Center Foundation, Inc. (“WMC Foundation”) • Mid-Hudson Valley Early Education Center (“Early Education Center”) • North Road LHCSA, Inc. (“LHCSA”) • WMC New York Inc. (“WMC New York”) • WCHCC (Bermuda), Limited (“WCHCC Bermuda”) • Mid-Hudson Valley Staffco, LLC (“Mid-Hudson Valley Staffco”) • Center for Regional Healthcare Innovation, LLC (“CRHI”) • Hudson Valley Property Holdings, LLC (“HVPH”) • Westchester Medical Center Advanced Physician Services, P.C. (“WMC Advanced Physician Services”) • NorthEast Provider Solutions, Inc. (“NorthEast Provider”) • WMC - Health Network - Ulster, Inc. (“WMC - Ulster”) • WMC - Health Network - Rockland, Inc. (“WMC - Rockland”) • Woods Road Medical PLLC (“Woods Road”) 	<ul style="list-style-type: none"> • HealthAlliance, Inc. (“HealthAlliance”) • HealthAlliance Hospital: Broadway Campus (“Broadway”) • HealthAlliance Hospital: Mary’s Ave Campus (“Mary’s Ave”) • Kingston Regional Health Care Enterprises, Inc. (“Enterprises”) • Foxhall Ambulatory Surgery Center Foundation (“FASC Foundation”) • Margaretville Hospital (“Margaretville”) • Margaretville Nursing Home (the “Nursing Home”) • Mid-Hudson Physicians, P.C. (“Mid-Hudson Physicians”) • Margaretville Health Foundation (“MHF”) • HealthAlliance Physician Network IPA, LLC (“HAPN”) • Hudson River North Insurance Limited (“HRN”) - effective January 31, 2020, the operations of Kingston Insurance (Barbados) Limited were Relocated to the Cayman Islands • HealthAlliance Foundation (“HAF”)

As part of the single campus construction project described in Note 7, Broadway’s licenses and provider numbers were merged into the Mary’s Ave licenses and provider numbers, retroactive to September 22, 2020.

The auditor’s opinion on the stand-alone audited financial statements of HealthAlliance as of and for the years ended December 31, 2021 and 2020 includes an emphasis of matter paragraph relating to the uncertainty regarding HealthAlliance’s ability to continue as a going concern due to HealthAlliance’s working capital deficit and recurring operating losses. Total assets for HealthAlliance were approximately \$163.8 million and \$108.1 million as of December 31, 2021 and 2020, respectively, and operating revenues were approximately \$194.8 million and \$184.6 million for the years then ended, respectively. The ongoing financial viability of HealthAlliance is not guaranteed by WCHCC.

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

WCHCC is party to an Affiliation Agreement with Bon Secours Mercy Health, Inc. (“BSMH”), as successor to Bon Secours Health System Inc. (“BSHI”), the Sisters of Charity of Saint Elizabeth (“SOC”), Bon Secours Charity Health System, Inc. (“Bon Secours Charity” or “Charity”) and WMC Health Network - Rockland, Inc. (“WMC - Rockland,” a subsidiary of WCHCC), in which WMC - Rockland is the majority member of Charity, holding 60% of the economic interest in Charity and appointing 60% of the Charity Board of Directors. BSMH holds a 40% economic interest in Charity and, together with SOC, appoints 40% of the Charity Board of Directors. WCHCC provides management services to Charity pursuant to a Department of Health-approved exclusive management agreement between WCHCC and Charity. Charity is shown as a discretely presented component unit in WCHCC’s audited financial statements. More detailed information about Charity is presented in Note 17.

WCHCC, HealthAlliance and Charity and their controlled organizations (collectively, referred to as the “WCHCC Network”) comprise an integrated health care delivery network. The facilities are located in Westchester, Rockland, Orange, Putnam, Dutchess, Ulster, Sullivan and Delaware counties in New York State. WCHCC Network provides patient care, teaching, research and community health services.

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation

WCHCC is considered a special-purpose government entity engaged only in business-type activities. WCHCC’s financial statements are prepared on the accrual basis of accounting using the economic resources measurement focus and are based on accounting principles applicable to governmental units as established by the Governmental Accounting Standards Board (“GASB”) and the provisions of the American Institute of Certified Public Accountants *Audit and Accounting Guide, Health Care Entities*, to the extent that they do not conflict with GASB.

For purposes of display, transactions deemed by management to be ongoing, major, or central to the provision of health care services are reported as operating revenues and operating expenses. All other activities are reported as nonoperating activities.

The notes to the financial statements present financial information for WCHCC and its blended component units and do not include Charity, except for Note 17.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. WCHCC’s significant estimates include the allowance for estimated uncollectible patient accounts receivable, estimated third-party contractual allowances, estimated third-party payor receivables and payables, the estimated useful lives of depreciable assets, pension liabilities, self-insurance liabilities, workers’ compensation liabilities and post-retirement health insurance liabilities. Actual results may differ from those estimates.

Revisions to previously recorded estimates of net patient accounts receivable, third-party payor liabilities, accrued salaries, inventory reserves and insurance reserves and settlements for the year ended December 31, 2021 and net patient accounts receivable, third-party payor liabilities, and insurance reserves and settlements for the year ended December 31, 2020 resulted in a decrease in operating loss and an increase in operating income of approximately \$93.7 million and \$29.3 million, respectively.

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

Patient Accounts Receivable and Net Patient Service Revenue

Accounts receivable from patients and third-party payors at December 31, 2021 and 2020 was comprised of Medicare, 29% and 31%, Medicaid, 25% and 23%, and commercial insurance, health maintenance organizations and others, 46% and 46%, respectively. Patient accounts receivable are recorded net of allowances for estimated uncollectible accounts of approximately \$84.0 million and \$137.9 million at December 31, 2021 and 2020, respectively. Most of WCHCC's net patient service revenues are derived from third-party payment programs, including Medicare and Medicaid.

Patient accounts receivable are recorded at the reimbursable or contracted amounts and do not bear interest. The allowance for uncollectible accounts is WCHCC's estimate of the amount of probable credit losses in WCHCC's patient accounts receivable. WCHCC determines the allowance based on historical write-off experience. WCHCC evaluates its allowance for uncollectible accounts periodically. Past due balances are evaluated individually for collectability. Account balances are charged off against the allowance after all means of collection have been exhausted and the potential for recovery is considered remote.

Net patient service revenues are recognized in the period services are performed. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive revenue adjustments due to audits, reviews and investigations. Third-party contractual adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as adjustments become known or as years are no longer subject to such audits, reviews and investigations.

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

There are various proposals at the federal and state levels that could, among other things, reduce payment rates and increase managed care penetration, including Medicaid. The ultimate outcome of these proposals and other market changes cannot presently be determined. The Medical Center's cost reports have been audited and finalized by its Medicare fiscal intermediary through December 31, 2016, with the exception of December 31, 2004, and HealthAlliance's three cost reports through December 31, 2018 for Broadway, December 31, 2019 for Mary's Ave and December 31, 2019 for Margaretville.

Assets Restricted as to Use

Assets restricted as to use include certain assets of the WMC Foundation, the proceeds of indebtedness held by the trustees under debt agreements, assets restricted for the purchase of capital assets and assets restricted by donors and amounts designated by the Board of Directors.

Donor-restricted assets represent contributions to provide health care services and for capital acquisitions. Resources restricted by donors for plant replacement and expansion are added to the net position - net investment in capital assets balance to the extent expended within the period. Resources restricted by donors or grantors for specific operating activities are reported as other revenue to the extent used within the period they were received. WCHCC generally utilizes donor-restricted resources for expenses incurred before utilizing available unrestricted assets.

Westchester County Health Care Corporation
NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

Grants and Contributions

From time to time, WCHCC receives grants from the local, state and federal government as well as contributions from individuals, foundations and private organizations. Revenues from grants and contributions (including contributions of capital assets) are recognized when all eligibility requirements, including time requirements, are met. Grants and contributions may be restricted for either specific-operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific-operating purpose are reported as other revenue. At December 31, 2021 and 2020, net contributions and grants receivable of approximately \$4.0 million and \$3.7 million, respectively, are included in other assets in the accompanying Statements of Net Position.

WCHCC received grant funding during the years ended December 31, 2021 and 2020 through legislation established by the Coronavirus Aid, Relief and Economic Security ("CARES") Act. This funding is presented as nonoperating activities in accordance with technical guidance established by GASB. See Note 3 for additional information.

Cash and Cash Equivalents

WCHCC's cash and cash equivalents policies are governed by state statutes. Funds must be deposited in Federal Deposit Insurance Corporation ("FDIC") insured commercial banks or trust companies located within the state. Certain funds deposited with banking institutions exceed FDIC limits; however, WCHCC has a collateralization agreement with its depository institutions which management believes reduces the risks related to these balances to a minimal level. WCHCC's cash balances are collateralized under a third-party custodian agreement.

At December 31, 2021 and 2020, cash and cash equivalents consist of cash and all highly-liquid instruments with maturities of three months or less at the date of purchase. Approximately 95% and 93% of cash and cash equivalents reside with a major financial institution at December 31, 2021 and 2020, respectively.

Investments

WCHCC's investments consist primarily of equities and fixed income holdings, which are stated at fair value in the Statements of Net Position.

Inventories

Inventories, included in other current assets, are primarily prepaid supplies that are carried at the lower of cost, principally on a first-in, first-out ("FIFO") basis, or market.

Capital Assets

In connection with the establishment of the public benefit corporation in 1997, WCHCC recorded buildings, fixed equipment, and land received from the County at book value. Capital assets acquired subsequent to the establishment of the public benefit corporation are recorded at cost. Assets with a purchase price of \$1,000 or more that have an economic life greater than one year are capitalized and assets with a purchase price of less than \$1,000 are expensed.

Gifts of long-lived assets such as land, buildings and equipment are recorded at fair value at the date of the contribution and are excluded from operating income.

Westchester County Health Care Corporation
NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

Depreciation is recorded using the straight-line method over the estimated useful life of each class of depreciable assets.

	Estimated Useful Lives	
	Medical Center	HealthAlliance
Land improvements	10 years	2 to 30 years
Buildings and building improvements	5 to 60 years	3 to 60 years
Equipment	10 to 20 years	3 to 25 years

Equipment obtained through financed purchases are amortized using the straight-line method over the shorter period of the lease term or the estimated useful life of the leased equipment. Such amortization is included in depreciation and amortization expense in the financial statements.

Deferred Outflows/Inflows of Resources

In addition to assets, the Statements of Net Position include a separate section for deferred outflows of resources. This separate financial statement element represents a consumption of net position that applies to future periods and will not be recognized as an outflow of resources until then. In addition to the liabilities, the Statements of Net Position include deferred inflows of resources which represent an acquisition of a net position that applies to future periods and will not be recognized as an inflow of resources until that time.

Net Position

Unrestricted net position has no external restrictions as to use or purpose and is distinguished from net position restricted externally for specific purposes. Restricted net positions relate primarily to federal and state grants for research and community programs and restricted contributions and endowments received from donors. Net investment in capital assets consists of capital assets, net of accumulated depreciation, and trustee held assets for capital projects reduced by the outstanding balances of debt attributable to those assets.

Concentrations of Credit Risk

WCHCC grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. WCHCC generally does not require collateral or other security in extending credit to patients; however, it routinely obtains assignment of patients' benefits under their health insurance policies.

Charity Care

WCHCC provides care to patients who meet certain criteria under its charity care policy without charge and Medicaid amounts less than established rates ("Charity Care"). Because WCHCC does not pursue collection of amounts determined to qualify as Charity Care, such amounts are not reported as revenue.

WCHCC maintains records identifying and monitoring the level of Charity Care it provides. WCHCC estimates the cost of Charity Care for the years ended December 31, 2021 and 2020, at approximately \$193.1 million and \$177.8 million, respectively.

Westchester County Health Care Corporation
NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

Leases

WCHCC determines if an arrangement is a lease at inception of the contract. Right to Use (“RTU”) assets represent WCHCC’s right to use the underlying assets for the lease term and lease liabilities represent WCHCC’s obligation to make lease payments arising from the leases. RTU assets and lease liabilities are recognized at commencement date based on the present value of lease payments attributable to rent over the lease term. WCHCC uses an estimated incremental borrowing rate, which is derived from a rate that approximates actual financed purchase arrangements for equipment with similar characteristics. WCHCC does not record leases deemed to be short term, with an initial term of 12 months or less, in its Statements of Net Position.

WCHCC’s 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 WCHCC’s sole discretion. In general, WCHCC does not consider renewal options to be reasonably likely to be exercised, therefore, renewal options are generally not recognized as part of RTU assets and lease liabilities. The useful life of right to use leased assets and leasehold improvements is the shorter of the useful life or the lease term, including reasonably certain extensions. The majority of the medical equipment leases have terms of three years with no renewal options or bargain purchase options, so these assets are amortized over their lease term.

Certain of WCHCC’s lease arrangements for real estate include payments based on actual common area maintenance expenses. These variable lease payments are recognized as other operating expenses in the Statements of Revenues, Expenses, and Changes in Net Position, and are not included in the RTU asset or liability balances. WCHCC’s lease agreements do not contain any material residual value guarantees, restrictions or covenants.

Taxation

The Medical Center is a public benefit corporation of the State of New York and is exempt from federal income taxes under Section 115 of the Internal Revenue Code (the “Code”). Accordingly, no provision for income taxes has been recorded in the accompanying financial statements.

WCHCC’s component units are exempt from income tax under Section 501(c)(3) of the Code, except for WCHCC’s for-profit blended component units, WMC Advanced Physician Services, NorthEast Provider, Mid-Hudson Physicians, MPSS, HAPN and Enterprises. Income taxes of WCHCC’s for-profit blended component unit are not material to the financial statements.

Compensated Absences

WCHCC employees earn paid time off at varying rates depending on years of service, union affiliation and affiliated entity. Eligible paid time off accumulates and certain days are payable upon separation or retirement. The estimated amount of paid time off and related taxes payable as separation payments or upon retirement is recorded as part of accrued salaries and related benefits withholdings in the accompanying Statements of Net Position.

Impairment of Long-Lived Assets

Long-lived assets are reviewed for impairment if circumstances suggest that there is a significant, unexpected decline in the service utility of a long-lived asset. The service utility of a long-lived asset is the usable capacity that at acquisition was expected to be used to provide service. An assessment of recoverability is performed prior to any write-down of assets and an impairment charge is recorded on those assets for which the estimated fair value is below its carrying amount. WCHCC recorded impairment charges to long-lived assets of approximately \$4.0 million related to the single campus construction project

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

during the year ended December 31, 2020. The impairment of assets is recorded as part of other nonoperating activities in the accompanying Statements of Revenues and Expenses and Changes in Net Position.

Fair Value of Financial Instruments

Fair value of financial instruments disclosure authoritative guidance defines fair value of a financial instrument as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. WCHCC's assets restricted as to use consist primarily of cash and cash equivalents, United States Treasury Obligations and United States Government Agency Securities, which are stated at fair value in the Statements of Net Position. The carrying amounts reported in the Statements of Net Position for cash and cash equivalents, patient accounts receivable, accounts payable and accrued expenses, and estimated payables and receivables due to and from third-party payors approximate their fair value. The carrying amounts of WCHCC's bonds and notes payable approximates fair value based upon their interest rates.

Reclassifications

Certain prior year amounts have been reclassified to conform to current year presentation.

NOTE 3 - COVID-19 PANDEMIC

In March 2020, the World Health Organization declared COVID-19, the disease caused by the novel coronavirus, a pandemic. As a result of the COVID-19 pandemic, WCHCC experienced a decline in patient visits, admissions, and medical procedures performed. Elective medical procedures were suspended by state and local governments at varying time periods beginning in mid-March 2020 through late May 2020, contributing to a significant decline in net patient service revenue due to COVID-19 when compared to historic and forecasted results for that period. Additionally, in response to the pandemic, WCHCC incurred additional costs for testing, personal protective equipment, third-party contract services and other operating costs associated with ensuring employee and patient safety while operating during a pandemic. Management is actively monitoring operating revenues and expenses, and based on the potential impacts of COVID-19, it is unable to determine if it will have a material impact on its operations for the year ending December 31, 2022.

WCHCC received grant payments, which are considered nonexchange transactions, from the federal government distributed under the Coronavirus Aid, Recovery and Economic Security ("CARES") Act. For the years ended December 31, 2021 and 2020, WCHCC received total payments of \$6.9 million and \$207.6 million, respectively, which is included in nonoperating activities in the Statements of Revenues, Expenses and Changes in Net Position. The CARES Act payments are subject to audit and compliance with federal regulations. WCHCC believes it has met the conditions to retain these funds.

The CARES Act also provided for an expansion of the Medicare Accelerated and Advance Payment Program ("Medicare Advances") for patient services. Under the program, WCHCC received approximately \$119.1 million and recorded these payments in other short-term and long-term liabilities in the Statements of Net Position at December 31, 2020. Prior to the beginning of the recoupment period, WCHCC continued to bill for services provided to Medicare patients and was paid by Medicare, as usual. The recoupment period began in April 2021 as amounts billed to Medicare for services provided are being offset against the advance payments received until the advance is fully recouped by the Medicare program. During the year ended December 31, 2021, Medicare recouped approximately \$56.3 million, with the remaining balance owed recorded in other short-term and long-term liabilities in the Statements of Net Position at December 31, 2021. WCHCC has until September 2022 to repay the remaining balance interest free, after which time WCHCC will have an additional 12 months to repay any unpaid Medicare Advances, the balance of which will be subject to interest charges.

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

Additionally, the Internal Revenue Service (“IRS”) allowed WCHCC to defer remittance of employer Social Security tax of \$24.8 million through the year ended December 31, 2020, \$12.4 million of which was recorded in accrued salaries and related withholdings, and \$12.4 million was included in other long-term liabilities in the Statement of Net Position at December 31, 2021 and 2020. 50% of the deferred employer Social Security tax was paid on January 3, 2022 and the remaining balance will be paid on January 2, 2023.

NOTE 4 - NET PATIENT SERVICE REVENUE

Hospital Reimbursement

WCHCC has agreements with third-party payors that provide for payments to WCHCC at amounts different from its established rates. Estimated third-party payor liabilities and Medicare advances at December 31, 2021 and 2020 were approximately \$120.3 million and \$231.9 million, respectively, and were included in other liabilities (Note 14). A summary of the payment arrangements follows:

Hospital Reimbursement - Medicare

Under the Medicare program, WCHCC receives reimbursement under a prospective payment system (“PPS”) for inpatient and outpatient services. Under inpatient PPS, fixed payment amounts per inpatient discharge are established based on the patient’s assigned diagnosis-related group (“DRG”). When the estimated cost of treatment for certain patients is higher than the average, providers typically will receive additional outlier payments. Under outpatient PPS, services are paid based on service groups called ambulatory payment classifications (“APCs”).

Hospital Reimbursement - Medicaid and Other Third-Party Payors

Medicaid, workers’ compensation and no-fault payors pay rates that are promulgated by the New York State Department of Health (“Department of Health”). Fixed payment amounts per inpatient discharge are established based on the patient’s assigned case mix intensity similar to a Medicare DRG. WCHCC is eligible to receive certain Disproportionate Share (“DSH”) payments in recognition of the costs associated with the provision of care to uninsured patients. Funding for these payments is provided by local and federal sources.

All other third-party payors, principally Blue Cross, other private insurance companies, Health Maintenance Organizations (“HMOs”), Preferred Provider Organizations (“PPOs”), and other managed care plans, negotiate payment rates directly with WCHCC. Such arrangements vary from DRG-based payment systems, per diems, case rates, and percentage of billed charges. If such rates are not negotiated, then the payors are billed at WCHCC’s established charges.

NYS regulations provide for the distribution of funds from an indigent care pool which is intended to partially offset the cost of services provided to the uninsured. The funds are distributed to the hospitals based on each hospital’s level of bad debts and charity care in relation to all other hospitals. During the years ended December 31, 2021 and 2020, WCHCC received distributions of approximately \$39.0 million and \$40.6 million, respectively, from the indigent care pool, which are included in net patient service revenue in the accompanying Statements of Revenues, Expenses, and Changes in Net Position.

Both federal and New York state regulations provide for certain adjustments to current and prior years’ payment rates and indigent care pool distributions based on industry-wide and hospital-specific data. WCHCC has established estimates based on information presently available of the amounts due to or from Medicare, Medicaid, workers’ compensation, and no-fault payors and amounts due from the indigent care pool for such adjustments.

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

There are various proposals at the federal and NYS levels that could, among other things, reduce reimbursement rates, modify reimbursement methods, and increase managed care penetration, including Medicare and Medicaid. The ultimate outcome of these proposals and other market changes cannot presently be determined.

WCHCC receives payments related to Medicaid services, including DSH, and other Medicare related reimbursements. Due to the fact that certain of these revenues may be subject to adjustment as a result of examination by government agencies, management has determined that not all of these receipts are realizable as of December 31, 2021 and 2020 and, therefore, have only been recognized as revenue when uncertainties over these amounts are mitigated.

Revenue from the Medicare and Medicaid (including DSH) programs accounted for approximately 27% and 24% (8% DSH), and 28% and 22% (7% DSH), respectively, of WCHCC's net patient service revenue for the years ended December 31, 2021 and 2020. Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by material amounts in the near term. WCHCC believes that it is in compliance, in all material respects, with all applicable laws and regulations and is not aware of any pending or threatened investigations involving allegations of potential wrongdoing. While no such regulatory inquiries have been made, compliance with such laws and regulations can be subject to future government review and interpretation. Noncompliance with such laws and regulations could result in repayments of amounts improperly reimbursed, substantial monetary fines, civil and criminal penalties, and exclusion from the Medicare and Medicaid programs.

Nursing Home Reimbursement

The Nursing Home has agreements with third-party payors, which provide for reimbursement to the Nursing Home at amounts different from its established charges for its skilled nursing unit. A summary of the basis of reimbursement with significant payors is as follows:

Medicaid

Net patient service revenue under the Medicaid program is based on a modified pricing system using the resource utilization group's patient classification system. Under this methodology, the Nursing Home is reimbursed at a predetermined rate depending on the intensity of the services rendered to residents regardless of the cost of delivering those services. Medicaid's predetermined rate is computed using cost report data from the facility's designated base year and elements from annual cost report filings. Management believes that its final Medicaid rates for the years ended December 31, 2021 and 2020 will not be significantly different from those recorded in the accompanying financial statements.

Medicare

Reimbursement for resident services under Part A of the Medicare program is based on the skilled nursing facility PPS. Under a PPS, the Nursing Home is paid a single per-diem rate depending on the intensity of the services rendered to residents regardless of the cost of delivering those services that covers all routine, ancillary, and capital-related costs. The per diem payment is adjusted for each Medicare beneficiary based on his or her care needs as measured by the minimum data set assessment form. The Nursing Home also receives reimbursement for certain ancillary services provided to its residents through Part B of the Medicare program.

Other Matters

A health care entity's revenues may be subject to adjustment as a result of examination by government agencies or contractors. The audit process and the resolution of significant related matters often are not finalized until several years after the services were rendered. Reasonable estimates of such adjustments

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

are made to third-party revenue recognition in order to not recognize revenue that may not ultimately be realized. The delay between rendering services and reaching final settlement, as well as the complexities and ambiguities of billing and reimbursement regulations, makes it difficult to estimate net realizable third-party revenues. Actual results may differ significantly from those estimates.

Management recognizes revenues relating to third-party settlements and patient service revenues when the realization of such amounts are reasonably assured. Management makes a reasonable estimate of amounts that ultimately will be realized, considering, among other things, adjustments associated with regulatory reviews, audits, billing reviews, investigations or other proceedings.

The operation of WCHCC's patient care services business is subject to federal and state laws prohibiting fraud by healthcare providers, including laws containing criminal provisions, which prohibit filing false claims or making false statements in order to receive payment or obtain certification under Medicare and Medicaid programs, or failing to refund overpayments or improper payments. Violation of these criminal provisions is a felony punishable by imprisonment and/or fines. WCHCC should also be subject to fines and treble damage claims if WCHCC knowingly filed a false claim or knowingly used false statements to obtain payment. State and federal governments are devoting increased attention and resources to anti-fraud initiatives against healthcare providers. The Health Insurance Portability and Accountability Act of 1996 and the Balanced Budget Act of 1997 expanded the penalties for healthcare fraud, including broader provisions for the exclusion of providers from the Medicare and Medicaid programs. WCHCC has policies and procedures that it believes are sufficient to ensure that it operates in substantial compliance with these anti-fraud and abuse requirements.

Various suits and claims arising in the normal course of operations are pending. While the outcome of these suits and claims cannot be determined at this time, management believes that such suits and claims are either specifically covered by insurance or the final disposition of such claims will not have a material effect on WCHCC's financial position, results of operations or liquidity.

Delivery System Reform Incentive Program

WCHCC led one of the Performing Provider Systems in New York State that implemented the Delivery System Reform Incentive Program ("DSRIP"). WCHCC recorded approximately \$34.7 million for the year ended December 31, 2020, under DSRIP in other operating revenue in the accompanying Statements of Revenues, Expenses, and Changes in Net Position. The DSRIP program ended on March 31, 2020.

WCHCC's Performing Provider Systems involved partnerships with over 200 organizations throughout its primary and secondary service areas. These included other hospitals, physician groups, community health centers, behavioral health providers, county health and mental health departments and community-based organizations. The DSRIP Program goals included more efficient and effective delivery of care to Medicaid recipients and the reduction of unnecessary emergency room visits, hospitalizations and readmissions.

Westchester County Health Care Corporation
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2021 and 2020

NOTE 5 - DEPOSITS AND INVESTMENTS

Deposits and investments consist of the following at December 31, 2021 and 2020 (amounts in thousands):

	2021	2020
Description		
Bank deposits	\$ 247,006	\$ 387,196
Money market accounts	12,107	15,719
Equity mutual funds	10,565	5,874
Equities	75,339	58,258
Other	9,162	7,584
Fixed income:		
U.S. Treasury securities	92,414	82,815
Corporate bonds	87,227	75,867
	\$ 533,820	\$ 633,313
 Description on Statement of Net Position		
Cash and cash equivalents	\$ 236,582	\$ 387,260
Investments	250,100	208,274
Assets restricted as to use, required for current liabilities	21,897	15,238
Assets restricted as to use, net	25,241	22,541
	\$ 533,820	\$ 633,313
 Investment maturities of fixed income securities		
One year or less	\$ 38,402	\$ 33,571
After one through five years	92,976	80,231
After five through ten years	48,263	44,880
	\$ 179,641	\$ 158,682

Estimated fair values have been determined by WCHCC using appropriate valuation methodologies by third parties, quoted market prices, and information available to management.

WCHCC categorizes its fair value measurements within the fair value hierarchy established by generally accepted accounting principles. The hierarchy is based on the valuation inputs used to measure the fair value of the asset. Level 1 inputs are quoted prices in active markets for identical assets; Level 2 inputs are significant other observable inputs; Level 3 inputs are significant unobservable inputs. At December 31, 2021 and 2020, all of WCHCC's financial instruments measured at fair value were categorized as Level 1.

Custodial credit risk - investments - is the risk that, in the event of the failure of a counterparty, WCHCC will not be able to recover the value of the investments that are in that counterparty's possession. WCHCC's investment securities are exposed to custodial credit risk if the securities are uninsured and unregistered and held by the counterparty, or by its trust department or agent, but not in WCHCC's name. At December 31, 2021 and 2020, all investments are either insured or held by WCHCC or its agent in WCHCC's name and, therefore, are not exposed to custodial credit risk. Accordingly, WCHCC's investment policy properly addresses custodial credit risk for investments.

Concentration of credit risk - is the risk of loss attributed to the magnitude of WCHCC's investment in a single issuer. WCHCC's investments are diversified and are not currently exposed to this risk.

Interest rate risk - is the risk that changes in interest rates will adversely affect the fair market value of an investment. WCHCC invests in fixed-rate debt and U.S. Treasury securities with primarily one to seven year maturities.

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NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2021 and 2020

Credit risk - is the risk that an issuer or other counterparty to an investment will not fulfill its obligations. WCHCC's investment policy allows for up to 10% of investments in Baa/BBB Bonds.

NOTE 6 - ASSETS RESTRICTED AS TO USE

Assets restricted as to use consist of the following at December 31, 2021 and 2020 (amounts in thousands):

	2021	2020
Time and purpose restricted		
The Westchester Medical Center Foundation, Inc.	\$ 20,410	\$ 15,918
Other purposes	14,929	8,604
	35,339	24,522
Under debt agreements		
Debt service reserve funds	10,873	10,896
Other	2,443	3,447
	13,316	14,343
	48,655	38,865
Less portion required for current liabilities	(22,513)	(15,457)
	\$ 26,142	\$ 23,408

WCHCC's assets restricted as to use are reported at fair value, as described in Note 2. At December 31, 2021 and 2020, the composition of assets restricted as to use consisted of the following (amounts in thousands):

	2021	2020
Bank deposits	\$ 15,660	\$ 9,315
Money market accounts	7,576	6,117
Equity mutual funds	5,592	3,788
Equities	3,309	2,650
Other	2,581	1,954
Fixed income:		
U.S. Treasury securities	11,148	11,159
Other	2,789	3,882
	\$ 48,655	\$ 38,865

WCHCC's assets restricted as to use reported under debt agreements represent insured or registered funds or securities held by WCHCC or its agent in WCHCC's name.

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NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

NOTE 7 - CAPITAL ASSETS

Capital asset activity for the years ended December 31, 2021 and 2020 was as follows (amounts in thousands):

	2021			
	Beginning Balance	Additions and Transfers	Retirements and Transfers	Ending Balance
Capital assets, not being depreciated:				
Land	\$ 3,039	\$ -	\$ (128)	\$ 2,911
Construction in process	26,659	55,054	(2,970)	78,743
Capital assets, being depreciated:				
Building and improvements	936,262	12,936	(1,256)	947,942
Equipment	1,110,943	66,005	(2,576)	1,174,372
Land improvements	21,370	1,115	-	22,485
Total capital assets	<u>2,098,273</u>	<u>135,110</u>	<u>(6,930)</u>	<u>2,226,453</u>
Less accumulated depreciation and amortization for:				
Building and improvements	(486,262)	(26,010)	703	(511,569)
Equipment	(729,881)	(51,098)	590	(780,389)
Land improvements	(12,409)	(633)	-	(13,042)
Total accumulated depreciation and amortization	<u>(1,228,552)</u>	<u>(77,741)</u>	<u>1,293</u>	<u>(1,305,000)</u>
Carrying value of all capital assets, net	<u>\$ 869,721</u>	<u>\$ 57,369</u>	<u>\$ (5,637)</u>	<u>\$ 921,453</u>
	2020			
	Beginning Balance	Additions and Transfers	Retirements and Transfers	Ending Balance
Capital assets, not being depreciated:				
Land	\$ 3,251	\$ -	\$ (212)	\$ 3,039
Construction in process	97,833	(70,824)	(350)	26,659
Capital assets, being depreciated:				
Building and improvements	943,160	13,195	(20,153)	936,202
Equipment	921,077	191,454	(1,528)	1,111,003
Land improvements	20,984	526	(140)	21,370
Total capital assets	<u>1,986,305</u>	<u>134,351</u>	<u>(22,383)</u>	<u>2,098,273</u>
Less accumulated depreciation and amortization for:				
Building and improvements	(472,534)	(27,214)	13,486	(486,262)
Equipment	(685,241)	(46,072)	1,432	(729,881)
Land improvements	(11,850)	(601)	42	(12,409)
Total accumulated depreciation and amortization	<u>(1,169,625)</u>	<u>(73,887)</u>	<u>14,960</u>	<u>(1,228,552)</u>
Carrying value of all capital assets, net	<u>\$ 816,680</u>	<u>\$ 60,464</u>	<u>\$ (7,423)</u>	<u>\$ 869,721</u>

Included in construction in process are costs associated with HealthAlliance's transition of its Broadway and Mary's Ave campuses into a single campus located at the Mary's Ave campus. The single campus project is projected to cost approximately \$92.9 million of which approximately \$74.8 million is being funded by proceeds from an approximate \$88.8 million CRFP grant. At December 31, 2021, WCHCC was

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

committed to non-cancelable construction contracts related to capital projects of approximately \$34.0 million, \$17.4 million of which is related to the Mary's Ave Single-Campus project.

The net book value of capital assets held under financed purchase obligations, included in equipment, was approximately \$66.4 million and \$50.6 million, and capital assets held under financed purchases, included in equipment, was \$66.4 million and \$41.9 million at December 31, 2021 and 2020, respectively.

NOTE 8 - LONG-TERM DEBT

Long-term debt activity as of December 31, 2021 and 2020 was as follows (amounts in thousands):

	December 31, 2020	Additions	Reductions	December 31, 2021	Amounts Due Within One Year
2010 Series Bonds ^(b)	\$ 71,605	\$ -	\$ (35)	\$ 71,570	\$ 35
2014 Series Bonds ^(d)	24,551	-	(551)	24,000	579
2015 Series Bonds ^(e)	21,614	-	(722)	20,892	754
2016 Series Bonds ^(f)	278,555	-	(2,564)	275,991	2,685
2020 Series Bonds ^(g)	300,000	-	-	300,000	-
Other ^(h)	26,327	-	(1,220)	25,107	742
Bond premium	21,529	-	(838)	20,691	836
Financed purchases ⁽ⁱ⁾	49,857	25,821	(16,598)	59,080	18,499
	<u>\$ 794,038</u>	<u>\$ 25,821</u>	<u>\$ (22,528)</u>	<u>\$ 797,331</u>	<u>\$ 24,130</u>

	December 31, 2019	Additions	Reductions	December 31, 2020	Amounts Due Within One Year
2000 Series Bonds ^(a)	\$ 108,170	\$ -	\$ (108,170)	\$ -	\$ -
2010 Series Bonds ^(b)	142,810	-	(71,205)	71,605	35
2011 Series Bonds ^(c)	62,570	-	(62,570)	-	-
2014 Series Bonds ^(d)	25,077	-	(526)	24,551	551
2015 Series Bonds ^(e)	22,305	-	(691)	21,614	723
2016 Series Bonds ^(f)	280,810	-	(2,255)	278,555	2,565
2020 Series Bonds ^(g)	-	300,000	-	300,000	-
Other ^(h)	27,884	-	(1,557)	26,327	2,220
Bond premium/discount	22,504	-	(975)	21,529	836
Financed purchases ⁽ⁱ⁾	48,330	16,916	(15,389)	49,857	14,039
	<u>\$ 740,460</u>	<u>\$ 316,916</u>	<u>\$ (263,338)</u>	<u>\$ 794,038</u>	<u>\$ 20,969</u>

(a) WCHCC Series 2000 Bonds were refunded as part of the issuance of the Series 2020 Bonds in September 2020.

Interest expense relating to the Series 2000 Revenue Bonds was approximately \$1.7 million in 2020.

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NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

- (b) At December 31, 2021, the outstanding WCHCC Revenue Bonds, Series 2010, Senior Lien consists of \$37.4 million Series 2010A (Federally Taxable - Direct Payment - Build America Bonds) bonds with an interest rate of 8.57% and maturing on November 1, 2040; \$2.7 million Series 2010B (Tax-Exempt) bonds with interest rates varying from 4.00% to 6.13% and maturing through November 1, 2030 and November 1, 2037; \$31.5 million Series 2010C-1 (Federally Taxable - Direct Payment - Build America Bonds) bonds with an interest rate of 8.57% maturing on November 1, 2040. Subsidy payments of approximately \$2.0 million were received through the Build America Bonds program related to these bonds for the years ended December 31, 2021 and 2020. The Series 2010C-2 (Tax Exempt) Bonds and Series 2010D, Senior Lien (Taxable) Bonds were refunded as part of the issuance of the Series 2020 Bonds in September 2020.

WCHCC has granted a collateral interest in its gross receipts, as well as pledged all funds and accounts established with respect to the various Series 2010 Bonds, including a debt service reserve fund of approximately \$10.9 million as of December 31, 2021 and 2020 (see Note 6).

Interest expense relating to the various Series 2010 Bonds was approximately \$6.0 million and \$6.8 million in 2021 and 2020, respectively.

- (c) The WCHCC Revenue Bonds, Series 2011, Senior Lien were refunded as part of the issuance of the Series 2020 Bonds in September 2020.

Interest expense relating to the Series 2011 Bonds was approximately \$1.0 million in 2020.

- (d) At December 31, 2021, the balance of WCHCC Revenue Bonds, Series 2014A, Senior Lien with an interest rate of 5.0% and maturing November 1, 2044 was outstanding.

Interest expense relating to the Series 2014 Bonds was approximately \$1.2 million in 2021 and 2020, respectively.

- (e) At December 31, 2021, the balance of a private placement bond offering relating to Dutchess County Local Development Corporation Revenue Bonds, Series 2015, consists of \$16.9 million Series 2015A (Tax-Exempt) with an interest rate of 3.75%, maturing August 1, 2030, and \$4.0 million Series 2015B (Taxable) with an interest rate of 5.95% maturing August 1, 2030.

Interest expense relating to the Series 2015 Bonds was approximately \$901,000 and \$933,000 in 2021 and 2020, respectively.

- (f) At December 31, 2021, \$276.0 million of Westchester County Local Development Corporation Revenue Bonds, Series 2016 (Westchester Medical Center Obligated Group Project) (Series 2016 Bonds), Tax Exempt bonds with interest rates varying from 3.0% to 5.0% and maturing annually November 1, through 2034, November 1, 2037 and November 1, 2046 are outstanding.

Interest expense relating to the Series 2016 Bonds was approximately \$12.5 million and \$13.4 million in 2021 and 2020, respectively.

- (g) In September 2020, WCHCC participated in a new bond offering relating to \$300.0 million of Westchester County Local Development Corporation Revenue Bonds, Series 2020 (Taxable) (Westchester Medical Center Obligated Group Project) ("Series 2020 Bonds") with an interest rate of 3.85% and maturing November 1, 2050. At December 31, 2021 and 2020, \$300.0 million was outstanding.

The proceeds of the Series 2020 Bonds, together with all available funds, were used: (i) to refund Series 2000A Bonds outstanding in the amount of \$108.2 million, Series 2010C-2 Bonds outstanding in the amount of \$3.6 million, Series 2010D Bonds outstanding in the amount of \$57.3 million, Series 2011A Bonds outstanding in the amount of \$47.3 million and Series 2011B Bonds outstanding in the amount

Westchester County Health Care Corporation
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2021 and 2020

of \$15.3 million; (ii) to fund capitalized interest in connection with the Series 2020 Bonds; (iii) to pay costs related to the issuance of the Series 2020 Bonds and; (iv) for general corporate purposes.

Interest expense relating to the Series 2020 Bonds was approximately \$13.0 million and \$3.8 million in 2021 and 2020, respectively.

- (h) On November 6, 2019, WCHCC purchased a building for \$2.0 million from the Board of Education of the Spackenkill Union Free School District (the "District"). At closing, \$1.5 million was financed through a non-interest bearing note payable provided by the District, due in four equal annual installments of \$375,000 through 2023.

HealthAlliance has the following debt obligations, which are included in Other:

DASNY Loans

HealthAlliance has various reimbursement and loan agreements, as amended, with the Dormitory Authority of the State of New York ("DASNY") that were consolidated into one repayment agreement in December 2021. The total outstanding aggregated amount is \$21.4 million and \$21.5 million at December 31, 2021 and 2020, respectively, with interest accruing at a fixed interest rate of 2.0%. Monthly payments of principal and interest beginning in 2022 are \$50,000 and increase annually in varying amounts each year. The remaining outstanding balance of approximately \$15.7 million is due on December 31, 2026. All DASNY loans are collateralized by a lien on certain properties owned by HealthAlliance.

- (i) WCHCC has entered into certain equipment financed purchase agreements that are collateralized by the underlying assets and bear interest at rates between 1.63% and 6.28%. The interest expense under these financed purchase agreements was approximately \$2.6 million in both 2021 and 2020.

Long-Term Debt Service Coverage Ratio

Under Section 6.13(a) of the Series 2000 Bonds Master Trust Indenture ("MTI") between WCHCC and Deutsche Bank as the Master Trustee, the Obligated Group, which is defined as the operating unit of Westchester County Health Care Corporation (the "Medical Center"), must maintain a Long-Term Debt Service Coverage Ratio, tested on a semi-annual basis in accordance with the provisions of the MTI, of at least 1.25 for all Bond series. During the years ended December 31, 2021 and 2020, WCHCC met the required Long-Term Debt Service Coverage Ratio.

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December 31, 2021 and 2020

Future Principal and Interest Payments

The following is a schedule by year of future contractual principal and interest (based on interest rates at December 31, 2021) payments on the bonds and other long-term debt at December 31, 2021 (amounts in thousands):

	<u>Principal</u>	<u>Interest</u>	<u>Total</u>
2022	\$ 4,795	\$ 33,158	\$ 37,953
2023	5,297	32,761	38,058
2024	5,450	32,551	38,001
2025	6,898	32,650	39,548
2026	22,875	32,970	55,845
2027-2031	43,677	155,235	198,912
2032-2036	58,559	145,693	204,252
2037-2041	123,858	119,556	243,414
2042-2046	146,151	80,325	226,476
2047-2051	300,000	46,152	346,152
	<u>\$ 717,560</u>	<u>\$ 711,051</u>	<u>\$ 1,428,611</u>

Included in deferred outflows of resources as of December 31, 2021 and 2020 are \$36.4 million and \$37.9 million deferred outflows related to the early redemption of certain bond issuances.

Financed Purchases

The future minimum payments under the financed purchases agreements, together with the present value of the minimum financed purchases payments at December 31, 2021 are as follows (amounts in thousands):

2022	\$ 20,510
2023	17,743
2024	13,524
2025	7,721
2026	3,651
	<u>63,149</u>
Less: amount representing interest	(4,069)
Present value of net minimum financed purchased payments	59,080
Less: current portion	(18,499)
	<u>\$ 40,581</u>

NOTE 9 - LINES OF CREDIT

WCHCC currently has two \$70.0 million working capital revolving lines of credit from a financial institution. The available lines of credit were \$140.0 million as of December 31, 2021 and 2020. The amount drawn on the lines of credit was \$80.0 million at December 31, 2021 and was repaid on January 12, 2022 and \$70.0 million at December 31, 2020. The lines of credit bore interest rates of 1.35% and 1.85% at December 31, 2021 and 1.42% at December 31, 2020. One of the lines of credit matures on July 22, 2022 and the other on October 21, 2022.

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NOTE 10 - LEASES

Lease Receivables

WCHCC leases real estate to independent third parties. The rental income under these lease agreements was approximately \$2.3 million and \$1.3 million in 2021 and 2020, respectively. WCHCC had lease receivables of approximately \$8.7 million and \$10.0 million as of December 31, 2021 and 2020, respectively, which are included as a component of other assets, and deferred inflows of resources of approximately \$8.2 million and \$9.7 million associated with these leases as of December 31, 2021 and 2020, respectively.

Right to Use Leased Assets

Right to use leased asset activity whereby WCHCC is the lessee in a lease agreement, for the years ended December 31, 2021 and 2020 was as follows (amounts in thousands):

	2021			
	Beginning Balance	Additions	Retirements	Ending Balance
Right to use leased assets:				
Leased buildings	\$ 116,267	\$ 1,931	\$ (995)	\$ 117,203
Leased equipment	14,682	1,946	(1,782)	14,846
Total right to use lease assets	130,949	3,877	(2,777)	132,049
Less accumulated amortization for:				
Leased buildings	(9,362)	(10,242)	995	(18,609)
Leased equipment	(5,405)	(6,497)	1,782	(10,120)
Total accumulated amortization	(14,767)	(16,739)	2,777	(28,729)
Right to use leased assets, net	\$ 116,182	\$ (12,862)	\$ -	\$ 103,320
	2020			
	Beginning Balance	Additions	Retirements	Ending Balance
Right to use leased assets:				
Leased buildings	\$ 109,073	\$ 7,246	\$ (52)	\$ 116,267
Leased equipment	10,314	4,782	(414)	14,682
Total right to use lease assets	119,387	12,028	(466)	130,949
Less accumulated amortization for:				
Leased buildings	-	(9,415)	53	(9,362)
Leased equipment	-	(5,780)	375	(5,405)
Total accumulated amortization	-	(15,195)	428	(14,767)
Right to use leased assets, net	\$ 119,387	\$ (3,167)	\$ (38)	\$ 116,182

Right to Use Lease liabilities

WCHCC has entered into certain lease agreements that are collateralized by the underlying assets and bear interest ranging from 1.67% to 5.45%. The interest expense under these leases was approximately \$6.3 million and \$6.7 million in 2021 and 2020, respectively.

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NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

The following is a schedule by year of future contractual principal and interest (based on interest rates at December 31, 2021) payments on lease liabilities at December 31, 2021 (amounts in thousands):

	Principal	Interest	Total
2022	\$ 8,113	\$ 5,780	\$ 13,893
2023	4,070	5,475	9,545
2024	3,981	5,259	9,240
2025	3,345	5,056	8,401
2026	3,183	4,886	8,069
2027-2031	19,647	21,387	41,034
2032-2036	27,502	15,150	42,652
2037-2041	41,433	5,907	47,340
	\$ 111,274	\$ 68,900	\$ 180,174

NOTE 11 - RETIREMENT PLANS

Defined Benefit Plans

The New York State Comptroller’s Office administers the New York State and Local Employers’ Retirement System (“ERS”) for which WCHCC is a participating employer. The net position of ERS is held in the New York State Common Retirement Fund (the “Fund”), which was established to hold all assets and record changes in fiduciary net position allocated to ERS.

The Comptroller of the State of New York serves as the trustee of the Fund and is the administrative head of ERS. ERS benefits are established under the provisions of the New York State Retirement and Social Security Law (“RSSL”). Once a public employer elects to participate in ERS, the election is irrevocable. The New York State Constitution provides that pension membership is a contractual relationship and plan benefits cannot be diminished or impaired. Benefits can be changed for future members only by enactment of a state statute.

ERS is a cost-sharing, multiple employer defined benefit pension plan. ERS is included in the NYS financial statements as a pension trust fund. The Public Employees’ Group Life Insurance Plan (“GLIP”) provides death benefits in the form of life insurance. Amounts related to GLIP have been apportioned to ERS. Separately issued financial statements for ERS can be accessed on the State Comptroller’s website at www.osc.state.ny.us/pension/cafr.htm.

ERS offers a wide range of programs and benefits. ERS benefits vary based on the date of membership, years of credited service and final average salary, vesting of retirement benefits, death and disability benefits, and optional methods of benefit payments. Both plans provide a permanent annual cost-of-living increase to both current and future retired members meeting certain eligibility requirements. Participating employers are required under law to contribute to ERS on an actuarially determined rate, which is determined annually by the State Comptroller and the average contribution rates for the NYS fiscal years ended March 31, 2021 and 2020 were approximately 16.2% and 14.6%, respectively, of payroll. ERS provides retirement benefits as well as death and disability benefits. For those members joining prior to January 1, 2010, benefits generally vest after five years of credited service. For those joining after January 1, 2010, benefits generally vest after 10 years of credited service. The RSSL provides that all participants in ERS are jointly and severally liable for any actuarial unfunded amounts. Such amounts are collected through annual billings to all participating employers. Employees who joined ERS after July 27, 1976 and before January 1, 2010, and have less than ten years of service or membership are required to contribute 3.0% of their salary. Those joining on or after January 1, 2010 and before April 1, 2012 are

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

required to contribute 3.5% of their annual salary for their entire working career. Those joining on or after April 1, 2012 are required to contribute between 3.0% and 6.0%, dependent upon their salary, for their entire working career. Employee contributions are deducted from their salaries and remitted on a current basis to ERS. The NYS non-cash pension adjustment of approximately \$(11.1) million and \$47.3 million for the years ended December 31, 2021 and 2020, respectively, in the Statements of Revenues, Expenses, and Changes in Net Position represents the difference between the actuarial expense and the required calculated funding.

Net Pension Liabilities, Pension Expense, Deferred Outflows of Resources, and Deferred Inflows of Resources Related to Pensions

Net pension liabilities, pension expense, deferred outflows of resources, and deferred inflows of resources amounts recorded reflect ERS' published financial statements and actuarial valuations as of March 31, 2021 and 2020 (the "Measurement Dates").

WCHCC's respective net pension liability, deferred outflows of resources, deferred inflows of resources and net pension expense related to ERS as of and for the years ended December 31, 2021 and 2020, are as follows (amounts in thousands):

	2021	2020
Proportionate share of the net pension liability		
Amount	\$ 868	\$ 232,341
Percentage	0.87%	0.88%
Deferred outflows of resources	171,834	140,073
Deferred inflows of resources	254,398	5,937
Net pension expense		
Salaries and benefits - NYS pension expenses	\$ 31,500	\$ 32,115
NYS non-cash pension adjustment	(11,128)	47,308
Total net pension expense	\$ 20,372	\$ 79,423

WCHCC's proportionate share of ERS' 2021 and 2020 net pension liability is consistent with the manner in which contributions to ERS are determined. ERS computed each employer's projected long-term contribution effort to ERS as compared to the total projected long-term contribution of all employers to ERS.

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NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2021 and 2020

The components of pension related deferred outflows of resources and deferred inflows of resources at the Measurement Dates are as follows (amounts in thousands):

	2021	2020
Deferred outflows of resources		
Differences between expected and actual experience	\$ 10,605	\$ 13,674
Changes of assumptions	159,671	4,678
Net difference between projected and actual investment earnings on pension plan investments	-	119,109
Changes in proportion and differences between employer contributions and proportionate share of contributions	1,558	2,612
	\$ 171,834	\$ 140,073
Deferred inflows of resources		
Differences between expected and actual experience	\$ -	\$ 4,040
Changes of assumptions	3,011	-
Net difference between projected and actual investment earnings on pension plan investments	249,456	-
Changes in proportion and differences between employer contributions and proportionate share of contributions	1,931	1,897
	\$ 254,398	\$ 5,937

At December 31, 2021 amounts reported as deferred outflows of resources and deferred inflows of resources related to pensions will be reflected in salaries and benefits, in the Statements of Revenues, Expenses, and Changes in Net Position as follows (amounts in thousands) for the years ending December 31:

2022	\$ (14,564)
2023	(5,756)
2024	(13,925)
2025	(48,319)
	\$ (82,564)

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

Actuarial Assumptions

WCHCC's net pension liabilities at the Measurement Dates were determined by using an actuarial valuation as of April 1, 2020 and 2019, with update procedures used to roll forward the total pension liability to March 31, 2021 and 2020, respectively. The actuarial valuations used the following actuarial assumptions:

Inflation rate	2.7% (March 31, 2021) and 2.5% (March 31, 2020)
Salary increases	4.4% (March 31, 2021) and 4.2% (March 31, 2020)
Investment rate of return, including inflation	5.9% (March 31, 2021) and 6.8% (March 31, 2020) net of investment expenses, including inflation
Cost of living adjustments	1.4% (March 31, 2021) and 1.3% (March 21, 2020)
Decrements	Actuarial assumptions based on the results of an experience study for the period April 1, 2015- March 31, 2020 (2021); April 1, 2010 through March 31, 2015 (2020)
Mortality improvement	Society of Actuaries Scale MP-2020 (2021); Society of Actuaries Scale MP-2018 (2020)

Long-Term Expected Rate of Return

The long-term expected rate of return on pension plan investments was determined using a building-block method in which best-estimate ranges of expected future real rates of return (expected return, net of investment expenses and inflation) are developed for each major asset class. These ranges are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by the target asset allocation by adding expected inflation. Best estimates of arithmetic real rates of return for each major asset class including target asset allocation at the Measurement Dates are summarized below:

Asset Class	2021		2020	
	Target Allocation	Long-term Expected Real Rate of Return	Target Allocation	Long-term Expected Real Rate of Return
Domestic equity	32%	4.05%	36%	4.05%
International equity	15%	6.30%	14%	6.15%
Private equity	10%	6.75%	10%	6.75%
Real estate	9%	4.95%	10%	4.95%
Absolute return strategies	0%	0.00%	2%	3.25%
Opportunistic portfolio	3%	4.50%	3%	4.65%
Credit	4%	3.63%	0%	0.00%
Real assets	3%	5.95%	3%	5.95%
Bonds and mortgages	0%	0.00%	17%	0.75%
Fixed income	23%	0.00%	0%	0.00%
Cash	1%	0.50%	1%	0.00%
Inflation-Indexed Bonds	0%	0.00%	4%	0.50%
	100%		100%	

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

Discount Rate

The discount rate used to calculate the total pension liability at March 31, 2021 and 2020 was 5.9% and 6.8%, respectively. The projection of cash flows used to determine the discount rate assumes that contributions from plan members will be made at the current contribution rates and that contributions from employers will be made at statutorily required rates, actuarially determined. Based upon those assumptions, ERS' fiduciary net position was projected to be available to make all projected future benefit payments of current plan members. Therefore, the long-term expected rate of return on pension plan investments was applied to all periods of projected benefit payments to determine the total pension liability.

Discount Rate Sensitivity

WCHCC's proportionate share of the net pension liability calculated using the respective discount rate, as well as what WCHCC's proportionate share of the net pension liability would be if it were calculated using a discount rate that is 1% lower or 1% higher than the current rate as of December 31, 2021 and 2020 are as follows (amounts in thousands):

	2021		2020	
	Rate	Amount	Rate	Amount
1% decrease	4.90%	\$ 241,034	5.80%	\$ 426,411
Current discount rate	5.90%	868	6.80%	232,341
1% increase	6.90%	(220,621)	7.80%	53,601

Deferred Pension Contributions

NYSRSSL Chapter 57 of the Laws of 2010 authorized the NYS and local employers to amortize over ten years, at 3.21% (2016), 3.15% (2015), 3.67% (2014), 3.00% (2013) and 3.75% (2012) interest, the portion of their annual bill, that exceeded 14.5%, 13.5%, 12.5%, 11.5% and 10.5% of payroll for its 2016, 2015, 2014, 2013 and 2012 pension bills, respectively. Total amounts due at December 31, 2021 and 2020 related to these deferred pension contributions are approximately \$15.3 million and \$20.8 million, respectively, and are included as part of other long-term liabilities (Note 14) in the accompanying Statements of Net Position.

Defined Contribution Pension Plan

WCHCC provides the WMCHHealth Network Affiliated Employers 401(k) Plan (the "WMCHHealth Network 401(k) Plan") for employees of WMC Advanced Physician Services, NorthEast Provider, WMC New York, and employees of MidHudson Valley Staffco LLC. WMCHHealth Network 401(k) Plan is a defined contribution plan open to eligible participants. Employees are eligible to contribute to the WMCHHealth Network 401(k) Plan upon hire and vest immediately. Eligible employees will receive employer contributions of 4% of gross salary matching contribution up to the Code limit. As of December 31, 2021 and 2020, there were approximately 4,767 and 4,163 participants, respectively, in the WMCHHealth Network 401(k) Plan. For the years ended December 31, 2021 and 2020, the WMCHHealth Network 401(k) Plan had total payroll expense of approximately \$442.0 million and \$383.5 million of which approximately \$410.3 million and \$293.4 million, respectively, was covered by the WMCHHealth Network 401(k) Plan. Total employer contributions to the WMCHHealth Network 401(k) Plan for December 31, 2021 and 2020 were approximately \$12.3 million and \$9.6 million, respectively.

HealthAlliance also sponsors various defined contribution retirement plans for eligible participants. Total employer contributions for HealthAlliance were approximately \$1.3 million for the years ended December 31, 2021 and 2020.

Westchester County Health Care Corporation
NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

NOTE 12 - OTHER POSTEMPLOYMENT BENEFITS

WCHCC provides Other Postemployment Benefits (“OPEB”) that provides basic medical and hospitalization plan coverage to eligible retirees through a single employer defined benefit plan. The plan does not issue its own stand-alone financial statements. Eligible retirees may only be covered under the indemnity plan of WCHCC. To qualify, employees and retirees hired before January 1, 2007 must (i) have at least five years of paid service with WCHCC (service prior to January 1, 1998 with the County counts towards the five-year requirement) and (ii) be eligible to receive a retirement allowance from a retirement system administered by the State of New York or one of its civil divisions. Employees hired on or after January 1, 2007 require 20 years of service to qualify for a post-retirement health benefit. Individual coverage is provided to certain retirees at no cost. Subsequent to December 31, 2014, certain retirees are required to contribute to the cost of this coverage. Retirees may elect family coverage at a cost of 20% of the difference between the premium equivalent cost of family and individual coverage. Approximately 78% and 77% of the participants have elected individual coverage as of December 31, 2021 and 2020, respectively.

The following employees were covered by the benefit terms at the measurement date as of January 1, 2021 and 2020:

	2021	2020
Retired employees	1,913	1,826
Active employees	4,433	4,629
	6,346	6,455

Actuarial valuations of an ongoing plan involve estimates of the value of reported amounts and assumptions about the probability of occurrence of events far into the future, including assumptions about future employment, mortality, and the healthcare cost trend. Amounts determined regarding the funded status of the plan and the annual required contribution of the employer are subject to continual revision as actual results are compared with past expectations and new estimates are made about the future. The schedule of funding progress, presented as required supplementary information following the Notes to the Financial Statements, presents multiyear trend information about whether the actuarial value of plan assets is increasing or decreasing over time relative to the actuarial accrued liabilities for benefits. WCHCC’s actuarial evaluations were performed on January 1, 2021 and 2020 and reported actuarial accrued liabilities of \$367.2 million and \$346.4 million, respectively, which are funded on a current basis.

Projection of benefits for financial reporting purposes are based on the substantive plan (the plan as understood by the employer and the plan members) and include the types of benefits provided at the time of each valuation and the historical pattern of sharing of benefit costs between the employer and plan members to that point. The actuarial methods and assumptions used include techniques that are designed to reduce the effects of short-term volatility in actuarial accrued liabilities and the actuarial value of assets, consistent with the long-term perspective of the calculations.

Westchester County Health Care Corporation
NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

Total OPEB Liability

WCHCC's total OPEB liabilities at the measurement date were determined by using an actuarial valuation as of January 1, 2021 and 2020. The actuarial valuations used the following actuarial assumptions:

Inflation rate	3.0% annually
Salary increases	3.0% annually
Discount rate	2.69% per annum (2021); 3.31% per annum (2020)
Healthcare cost trend rates	Pre-Medicare: 7.00% grading down to 3.42% over 16 years (2021); 6.51% grading down to 3.42% over 15 years (2020) Medicare: (3.19%) for year 1 then 5.82% grading down to 3.81% over 15 years (2021); 5.71% grading down to 3.79% over 15 years (2020)
Mortality improvement	All groups: SOA RPH-2014 Adjusted to 2006 Total Dataset Headcount weighted Mortality (adjusted 1.15) with MP 2020 improvement scale adjusted (2021); NYSNA and CSEA: SOA RPH-2014 Adjusted to 2006 Blue Collar Headcount-weighted Mortality (adjusted 1.15) with MP 2016 improvement scale adjusted NonRep: SOA RPH-2014 Adjusted to 2006 total Dataset Headcount-weighted Mortality (adjusted 1.15) with MP 2016 improvement scale adjusted (2020)

The following table shows the components of WCHCC's annual OPEB cost for the years ended December 31, 2021 and 2020, the amount actually contributed to the plan, and changes in WCHCC's net OPEB obligation (amounts in thousands).

	2021	2020
Beginning balance	\$ 346,363	\$ 331,751
Changes for the year:		
Service cost	5,518	5,280
Interest cost	11,405	13,496
Changes of benefits	(3,126)	(4,482)
Differences between expected and actual experience	6,426	4,162
Changes in assumptions	15,419	12,052
	35,642	30,508
Benefit payments	(14,788)	(15,896)
Net changes	20,854	14,612
Ending balance	\$ 367,217	\$ 346,363

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

Discount Rate

The discount rate used to calculate the total post-retirement liability was 2.69% and 3.31% for the years ended December 31, 2021 and 2020, respectively. The discount rate at December 31, 2021 and 2020 was based upon the top segment of the 20-year high-quality municipal bond index at the measurement date.

Discount Rate Sensitivity

WCHCC's total OPEB liability calculated using the respective discount rate, as well as what WCHCC's OPEB liability would be if it were calculated using a discount rate that is 1% lower or 1% higher than the current rate as of December 31, 2021 and 2020 are as follows (amounts in thousands):

	2021		2020	
	Rate	Amount	Rate	Amount
1% decrease	1.69%	\$ 418,832	2.31%	\$ 393,143
Current discount rate	2.69%	367,217	3.31%	343,363
1% increase	3.69%	324,761	4.31%	307,635

Healthcare Cost Trend Rate Sensitivity

WCHCC's total OPEB liability calculated using the respective discount rate, as well as what WCHCC's OPEB liability would be if it were calculated using a healthcare cost trend rate that is 1% lower or 1% higher than the current rate as of December 31, 2021 and 2020 are as follows (amounts in thousands):

	2021		2020	
	Rate	Amount	Rate	Amount
1% decrease	1%	\$ 323,522	1.00%	\$ 306,378
Healthcare cost trend rate	0%	367,217	0.00%	346,363
1% increase	1%	421,517	1.00%	395,581

OPEB Expense and Deferred Inflows of Resources

For the years ended December 31, 2021 and 2020, WCHCC recognized OPEB expense, including related changes in deferred inflows and outflows, of approximately \$19.9 million and \$16.3 million, respectively. The components of post-retirement related deferred outflows of resources and deferred inflows of resources at the measurement dates are as follows (amounts in thousands):

	2021	2020
Deferred outflows of resources		
Differences between expected and actual experience	\$ 7,639	\$ 3,330
Changes in assumptions	19,567	10,735
Contributions subsequent to measurement date	16,366	14,788
	\$ 43,572	\$ 28,853
Deferred inflows of resources		
Differences between expected and actual experience	\$ 58	\$ 1,299
Changes in assumptions	1,348	2,696
	\$ 1,406	\$ 3,995

Westchester County Health Care Corporation
NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

At December 31, 2021, amounts reported as deferred outflows of resources and deferred inflows of resources related to OPEBs will be reflected in salaries and benefits expense in the Statements of Revenues, Expenses, and Changes in Net Position as follows (amounts in thousands) for the years ending December 31:

2022	\$	6,205
2023		7,611
2024		7,615
2025		4,369
	<u>\$</u>	<u>25,800</u>

HealthAlliance also sponsors frozen unfunded OPEB plans for certain employees. The liability for these plans was \$1,553 and \$1,661 as of December 31, 2021 and 2020, respectively.

NOTE 13 - SELF-INSURANCE LIABILITY

The following is the activity of the self-insurance liability, which is presented as a component of other long-term liabilities on the Statements of Net Position for the years ended December 31, 2021 and 2020 (amounts in thousands):

	December 31, 2020	Additions	Reductions	December 31, 2021	Amounts Due Within One Year
Workers' compensation self-insurance ^(a)	\$ 24,111	\$ 6,460	\$ (7,099)	\$ 23,472	\$ 4,400
Malpractice self-insurance ^(b)	84,291	13,682	(12,163)	85,810	13,034
Health insurance ^(c)	13,279	113,769	(111,535)	15,513	15,513
Other self-insurance ^(d)	6,940	1,878	(2,765)	6,053	4,520
	<u>\$ 128,621</u>	<u>\$ 135,789</u>	<u>\$ (133,562)</u>	<u>\$ 130,848</u>	<u>\$ 37,467</u>

	December 31, 2019	Additions	Reductions	December 31, 2020	Amounts Due Within One Year
Workers' compensation self-insurance ^(a)	\$ 24,620	\$ 6,178	\$ (6,687)	\$ 24,111	\$ 4,500
Malpractice self-insurance ^(b)	83,191	8,695	(7,595)	84,291	9,500
Health insurance ^(c)	8,054	120,353	(115,128)	13,279	13,279
Other self-insurance ^(d)	5,190	3,550	(1,800)	6,940	2,305
	<u>\$ 121,055</u>	<u>\$ 138,776</u>	<u>\$ (131,210)</u>	<u>\$ 128,621</u>	<u>\$ 29,584</u>

^(a) The Medical Center is self-insured for workers' compensation and has excess insurance coverage that attaches at \$750,000 per occurrence with \$1.0 million in annual aggregate coverage. As part of the Medical Center's workers' compensation self-insurance plan, the Medical Center obtains a semi-annual actuarial valuation to determine its self-insurance liabilities, including amounts for claims incurred but not reported. Such valuation is based on the Medical Center's specific and industry-wide data.

Westchester County Health Care Corporation

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

The following represents information as it relates to the Medical Center's workers' compensation self-insurance plan as of December 31, 2021 and 2020 (amounts in thousands):

	2021	2020
Gross self-insurance liability	\$ 20,196	\$ 21,414
Present value of self-insurance liability	19,463	20,673
Discount factor	3.5%	3.5%

As part of Mid-Hudson Valley Staffco's workers' compensation self-insurance plan, Mid-Hudson Valley Staffco obtains a semi-annual actuarial valuation to determine its self-insurance liabilities, including amounts for claims incurred but not reported. Such valuation is based on Mid-Hudson Valley Staffco's specific and industry-wide data.

The following represents information as it relates to Mid-Hudson Valley Staffco's workers' compensation self-insurance plan as of December 31, 2021 and 2020 (amounts in thousands):

	2021	2020
Gross self-insurance liability	\$ 4,445	\$ 3,812
Present value of self-insurance liability	4,009	3,438
Discount factor	3.5%	3.5%

All other Medical Center entities have workers' compensation coverage provided by a commercial insurance carrier under a claims-made basis and with no excess insurance coverage purchased.

HealthAlliance is insured under a retrospective premium policy through a commercial carrier.

- (b) WCHCC Bermuda, a WCHCC captive insurance company, provides the Medical Center with professional liability insurance ("HPL") and general liability insurance ("GL"), and insures employed physicians' professional liability ("PPL"). Employed physicians not insured by WCHCC Bermuda maintain malpractice insurance coverage through commercial insurance carriers.

Outstanding projected liabilities are comprised of estimates of the ultimate case value (indemnity and expenses) established by an independent case adjuster, plus a provision for losses incurred, but not reported, based on the recommendations of an independent actuary using historical and industry data. WCHCC Bermuda's actuarial liabilities have been discounted at 3.5% at December 31, 2021 and 2020.

WCHCC Bermuda is required by its license to maintain capital and surplus greater than a minimum statutory amount determined as the greater of a percentage of outstanding losses or a given fraction of net written premiums. At December 31, 2021 and 2020, WCHCC Bermuda was required to maintain a minimum statutory capital and surplus (net position) of approximately \$8.4 million and \$8.3 million, respectively. As of December 31, 2021 and 2020, actual statutory capital and surplus (net position), which is included as part of net position - unrestricted on the Statements of Net Position, was approximately \$141.4 million and \$128.6 million, respectively.

HPL coverage is provided on an occurrence basis with a self-insured retention ("SIR") of \$12.0 million in 2021 and 2020, for each and every claim with no aggregate limit. Excess commercial liability insurance policies attach above the SIR.

HealthAlliance purchases primary medical malpractice insurance coverage through a commercial carrier. Operations of HealthAlliance's captive insurance company, HRN, are not deemed significant. Excess commercial insurance policies attach above the captive SIR. Claims in excess of insurance coverage have not been asserted against HealthAlliance.

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NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2021 and 2020

- (c) WCHCC is self-insured for health insurance for all its employees. Claims which have been incurred, and incurred but not reported represent a liability to WCHCC at December 31, 2021 and 2020 and, as such, liabilities have been included in the accompanying Statements of Net Position.
- (d) Professional and general liability claims have been asserted against WCHCC by various claimants. The claims are in various stages of processing and some may ultimately be brought to trial. The outcome of these actions cannot be predicted with certainty by management or by legal counsel to WCHCC or by the respective insurance companies handling such matters. There are known incidents that may result in the assertion of additional claims, and other claims may arise. It is the opinion of management, in consultation with WCHCC's legal counsel, that the final disposition of such claims will not have a material adverse effect on WCHCC's financial position, results of operations, or liquidity.

NOTE 14 - OTHER LONG-TERM LIABILITIES

The following is the composition and activity of WCHCC's other long-term liabilities for the years ended December 31, 2021 and 2020 (amounts in thousands):

	December 31, 2020	Additions	Reductions	December 31, 2021	Amounts Due Within One Year
Self-insurance liabilities (Note 13)	\$ 128,621	\$ 135,789	\$ (133,562)	\$ 130,848	\$ 37,467
Third-party liabilities, net (Note 4)	112,777	18,764	(52,714)	78,827	28,619
Medicare advances (Note 3)	119,077	-	(56,268)	62,809	55,173
Post-retirement health insurance (Note 12)	348,024	35,727	(14,981)	368,770	-
Net pension liability (Note 11)	232,341	-	(231,473)	868	-
Other liabilities	159,398	96,586	(77,770)	178,214	60,450
Deferred pension contributions (Note 11)	20,805	-	(5,545)	15,260	5,731
Total other long-term liabilities	<u>\$ 1,121,043</u>	<u>\$ 286,866</u>	<u>\$ (572,313)</u>	<u>\$ 835,596</u>	<u>\$ 187,440</u>

Westchester County Health Care Corporation
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2021 and 2020

	December 31, 2019	Additions	Reductions	December 31, 2020	Amounts Due Within One Year
Self-insurance liabilities (Note 13)	\$ 121,055	\$ 138,776	\$ (131,210)	\$ 128,621	\$ 29,584
Third-party liabilities, net (Note 4)	65,782	67,091	(20,097)	112,776	34,947
Medicare advances (Note 3)	-	119,077	-	119,077	59,113
Post-retirement health insurance (Note 12)	333,621	30,722	(16,319)	348,024	-
Net pension liability (Note 11)	63,349	204,234	(35,242)	232,341	-
Other liabilities	124,358	227,551	(192,510)	159,399	63,341
Deferred pension contributions (Note 11)	26,169	-	(5,364)	20,805	5,545
Total other long-term liabilities	<u>\$ 734,334</u>	<u>\$ 787,451</u>	<u>\$ (400,742)</u>	<u>\$ 1,121,043</u>	<u>\$ 192,530</u>

NOTE 15 - AFFILIATION AGREEMENT

WCHCC has an affiliation agreement with New York Medical College (the "College"), under the terms of which WCHCC pays the College for certain physician teaching and administrative services. For the years ended December 31, 2021 and 2020, the College was paid approximately \$10.6 million and \$12.1 million, respectively, which is included in supplies and other expenses in the accompanying Statements of Revenues, Expenses, and Changes in Net Position. The affiliation agreement terminates in 2029, and automatically renews for an additional twelve-year term.

NOTE 16 - WESTCHESTER COUNTY RELATIONSHIP

In 1997, the State of New York adopted legislation that created WCHCC as a New York public benefit corporation effective January 1, 1998. At that time, the facilities and operations of WCHCC were transferred from the County to WCHCC pursuant to a long-term lease agreement. Subsequently, an Amended and Restated Lease Agreement (the "Lease") was consummated. The Lease is a 60-year (term ends 2058) real property lease for land and facilities with an option for extension.

During 2021 and 2020, WCHCC purchased services from the County of approximately \$9.7 million and \$8.9 million, respectively, which are included in supplies and other expenses in the accompanying Statements of Revenues, Expenses, and Changes in Net Position.

NOTE 17 - BON SECOURS CHARITY

Charity is a discretely presented component unit of WCHCC. Charity's financial statements are prepared on the accrual basis of accounting using the economic resources measurement focus and are based on accounting principles applicable to governmental units as established by GASB and the provisions of the American Institute of Certified Public Accountants *Audit and Accounting Guide, Health Care Entities*, to the extent that they do not conflict with GASB.

Westchester County Health Care Corporation
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2021 and 2020

At December 31, 2021 and 2020, Charity had bonds outstanding of approximately \$122.3 million related to the Bon Secours Charity Health System, Inc. Taxable Bonds, Series 2015, consisting of approximately \$38.6 million bonds with an interest rate of 5.25% and maturing on November 1, 2025 and approximately \$83.7 million bonds with an interest rate of 6.25% and maturing on November 1, 2035. WCHCC guarantees the scheduled payments of principal and interest on the Charity Series 2015 Bonds. The proceeds of the bonds were used to repay \$120.0 million in amounts due to BSMH.

At December 31, 2020, Charity had a \$20.0 million line of credit for general operating purposes from a financial institution, with an interest rate of 3.26%. At December 31, 2020, \$20.0 million was outstanding. On February 9, 2021, Charity repaid the \$20.0 million and the line was terminated. On February 10, 2021, Charity entered into a new \$40.0 million line of credit agreement with another financial institution with an expiration date of October 21, 2022. At December 31, 2021, no amounts were outstanding. Payment of any amounts due on the line is guaranteed by WCHCC.

During the years ended December 31, 2021 and 2020, Charity incurred approximately \$19.5 million and \$23.0 million of expenses to WCHCC, respectively, for services provided under a management service agreement and for other contracted services. Charity had amounts due from WCHCC of approximately \$352,000 and \$450,000 at December 31, 2021 and 2020, respectively.

REQUIRED SUPPLEMENTARY INFORMATION

Westchester County Health Care Corporation

**REQUIRED SUPPLEMENTARY INFORMATION (UNAUDITED)
SCHEDULE OF PROPORTIONATE SHARE OF NET PENSION LIABILITY AND
SCHEDULE OF EMPLOYER CONTRIBUTIONS**

**December 31, 2021 and 2020
(amounts in thousands)**

Schedule of Proportionate Share of the Net Pension Liability*

Reporting Fiscal Year (Measurement Date, March 31,)	WCHCC's Proportion of the Net Pension Liability		WCHCC's Covered Employee Payroll	WCHCC's Proportionate Share of the Net Pension Liability as a Percentage of its Covered Employee Payroll	Plan Fiduciary Net Position as a Percentage of the Total Pension Liability
	%	\$			
2021 (2021)	0.872%	\$ 868	\$ 285,357	00.30%	99.95%
2020 (2020)	0.877%	\$ 232,341	\$ 273,189	85.05%	86.39%
2019 (2019)	0.890%	\$ 63,348	\$ 285,948	22.15%	96.27%
2018 (2018)	0.922%	\$ 29,752	\$ 285,990	10.40%	98.24%
2017 (2017)	0.860%	\$ 80,974	\$ 292,341	27.70%	94.70%
2016 (2016)	0.880%	\$ 141,496	\$ 259,948	54.43%	90.70%
2015 (2015)	0.890%	\$ 30,029	\$ 249,512	12.04%	97.90%

Schedule of Employer Contributions*

Reporting Fiscal Year	Contractually Required Contribution	Contributions in Relation to the Contractually Required Contribution	Contribution Deficiency (Excess)	WCHCC's Covered Employee Payroll	Contributions as a Percentage of Employee Covered Payroll
2021	\$ 35,144	\$ 35,144	\$ -	\$ 285,357	13.32%
2020	\$ 35,242	\$ 35,242	\$ -	\$ 273,189	12.90%
2019	\$ 35,730	\$ 35,730	\$ -	\$ 285,948	12.50%
2018	\$ 36,422	\$ 36,422	\$ -	\$ 285,990	12.74%
2017	\$ 34,183	\$ 34,183	\$ -	\$ 292,341	11.69%
2016	\$ 39,349	\$ 39,349	\$ -	\$ 259,948	15.14%
2015	\$ 41,017	\$ 41,017	\$ -	\$ 249,512	16.44%

*These schedules are intended to show information for 10 years. Additional years will be displayed as they become available.

Westchester County Health Care Corporation

**REQUIRED SUPPLEMENTARY INFORMATION (UNAUDITED)
SCHEDULE OF FUNDING PROGRESS - OTHER POSTEMPLOYMENT BENEFITS (OPEB)**

**December 31, 2021 and 2020
(amounts in thousands)**

Schedule of Funding Progress - Other Postemployment Benefits

Actuarial Valuation Date	Actuarial Value of Assets (a)	Actuarial Accrual Liability (AAL) Initial Entry Age (b)	Unfunded (AAL) (UAAL) (b-a)	Funded Ratio (a/b)	Covered Payroll (c)	(UAAL) as a Percentage of Covered Payroll ((b-a)/c)
01/01/21	\$ -	\$ 367,217	\$ 367,217	0.0%	\$ 225,388	162.90%
01/01/20	\$ -	\$ 346,363	\$ 346,363	0.0%	\$ 229,236	151.10%
01/01/19	\$ -	\$ 331,751	\$ 331,751	0.0%	\$ 227,408	145.80%
01/01/18	\$ -	\$ 333,675	\$ 333,675	0.0%	\$ 219,100	152.30%
01/01/17	\$ -	\$ 331,855	\$ 331,855	0.0%	\$ 210,755	157.50%
01/01/16	\$ -	\$ 328,464	\$ 328,464	0.0%	\$ 199,357	164.80%
01/01/15	\$ -	\$ 300,216	\$ 300,216	0.0%	\$ 188,736	159.10%
01/01/14	\$ -	\$ 297,146	\$ 297,146	0.0%	\$ 179,466	165.60%
01/01/13	\$ -	\$ 276,824	\$ 276,824	0.0%	\$ 174,737	158.40%
01/01/12	\$ -	\$ 281,128	\$ 281,128	0.0%	\$ 184,522	152.40%

The above represents the valuation of the plan as of January 1.

Westchester County Health Care Corporation

**REQUIRED SUPPLEMENTARY INFORMATION (UNAUDITED)
SCHEDULE OF CHANGES IN TOTAL OPEB LIABILITY AND RELATED RATIOS**

**December 31, 2021 and 2020
(amounts in thousands)**

	<u>2021</u>	<u>2020</u>	<u>2019</u>	<u>2018</u>	<u>2017</u>	<u>2016</u>
Total OPEB Liability						
Service cost	\$ 5,518	\$ 5,280	\$ 5,099	\$ 4,952	\$ 4,940	\$ 4,705
Interest	11,405	13,496	11,415	12,447	11,647	11,598
Change of benefit terms	(3,126)	(4,482)	1,242	-	-	-
Differences between expected and actual experience	6,426	4,162	(235)	(4,734)	-	-
Changes in assumptions	15,419	12,052	(5,392)	4,372	1,250	(2,615)
	<u>35,642</u>	<u>30,508</u>	<u>12,129</u>	<u>17,037</u>	<u>17,837</u>	<u>13,688</u>
Benefit payments	(14,788)	(15,896)	(14,053)	(15,217)	(14,446)	(12,480)
	<u>(14,788)</u>	<u>(15,896)</u>	<u>(14,053)</u>	<u>(15,217)</u>	<u>(14,446)</u>	<u>(12,480)</u>
Net change in total OPEB liability	20,854	14,612	(1,924)	1,820	3,391	1,208
Total OPEB liability - beginning	<u>346,363</u>	<u>331,751</u>	<u>333,675</u>	<u>331,855</u>	<u>328,464</u>	<u>327,256</u>
Total OPEB liability - ending	<u>\$ 367,217</u>	<u>\$ 346,363</u>	<u>\$ 331,751</u>	<u>\$ 333,675</u>	<u>\$ 331,855</u>	<u>\$ 328,464</u>
Covered payroll	\$ 225,388	\$ 229,236	\$ 227,408	\$ 219,100	\$ 210,755	\$ 199,375
Total OPEB liability as a percentage of covered-employee payroll	162.93%	151.09%	145.88%	152.59%	157.46%	164.76%

Notes to Schedules

Changes to benefit terms: No changes to the terms of the benefits provided.

Changes of assumptions: The following are the discount rates for each period presented above:

2021	2.69%
2020	3.31%
2019	4.10%
2018	3.44%
2017	3.78%
2016	3.57%

These schedules are intended to show information for 10 years. Additional years will be displayed as they become available.