

This document is dated November 18, 2024

UNAUDITED QUARTERLY REPORT

For the Three-Month Periods Ended September 30, 2024 and 2023

The information in this report has been provided by CommonSpirit Health

CommonSpirit Health TABLE OF CONTENTS

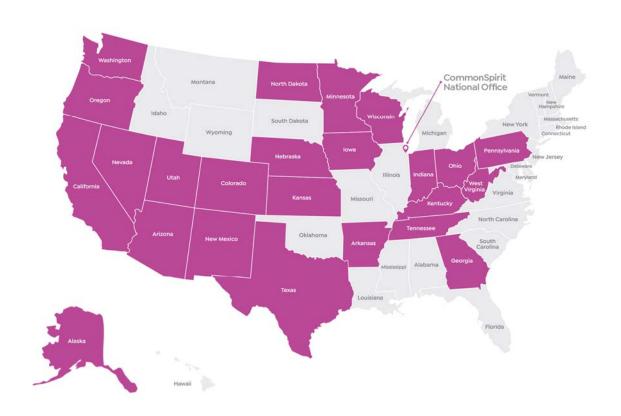
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Management Discussion and Analysis of Financial Condition and Results of Operations

Overview

CommonSpirit Health is a Colorado nonprofit public benefit corporation exempt from federal and state income taxes. CommonSpirit Health is a Catholic health care system sponsored by the public juridic person, Catholic Health Care Federation ("CHCF").

CommonSpirit Health owns and operates health care facilities in 24 states and is the sole corporate member (parent corporation) of other primarily nonprofit corporations. CommonSpirit Health and substantially all of its direct affiliates and subsidiaries have been granted exemptions from federal income tax as charitable organizations under Section 501(c)(3) of the Internal Revenue Code. With its national office in Chicago, and a team of approximately 155,000 employees and over 25,000 physicians and advanced practice clinicians, as of November 18, 2024, CommonSpirit Health is comprised of approximately 2,300 care sites, including 137 hospitals accounted for in continuing operations, consisting of academic health centers, major teaching hospitals, and critical access facilities; community health services organizations; accredited nursing colleges; home health agencies; living communities; a medical foundation and other affiliated medical groups; and other facilities and services that span the inpatient and outpatient continuum of care. An additional 20 hospitals are operated through unconsolidated joint ventures. The condensed consolidated financial statements in Exhibit I include CommonSpirit Health and its direct affiliates and subsidiaries (together, "CommonSpirit" or the "System").



Forward-Looking Statements

Certain of the discussions in this document may include "forward-looking statements" which involve known and unknown risks and uncertainties inherent in the operation of health care facilities. Actual actions or results may differ materially from those presented herein, and past or current trends may not continue. Specific factors that might cause such differences include competition from other health care facilities in the service areas of CommonSpirit, federal and state regulation of health care providers, staffing shortages, organized labor initiatives, and reimbursement policies of the state and federal governments and managed care organizations. In particular, statements that are preceded by, followed by, or include the word "believes," "estimates," "expects," "anticipates," "plans," "intends," "scheduled," or other similar expressions are or may constitute forward-looking statements.

CommonSpirit has presented its operating results for the three-month periods ended September 30, 2024 and 2023, in accordance with accounting principles generally accepted in the United States of America ("GAAP") and on a non-GAAP basis for EBITDA (earnings before interest, tax, depreciation and amortization, and nonoperating income). The non-GAAP financial measures are in addition to, not a substitute for, measures of financial performance prepared in accordance with GAAP.

CommonSpirit believes that its presentation of non-GAAP financial measures provides useful supplementary information to and facilitates additional analysis by investors. CommonSpirit uses certain non-GAAP financial measures to enhance an investor's overall understanding of the financial performance and prospects for the future of CommonSpirit's ongoing business activities by facilitating comparisons of results of ongoing business operations among current, past and future periods.

Financial Highlights and Summary

CommonSpirit recorded an operating loss of \$331 million during the three-month period ended September 30, 2024, compared to a \$402 million operating loss during the same period in the prior year. Normalized for the California provider fee program (see below), the operating loss for the three-month period ended September 30, 2023 was \$253 million.

CommonSpirit's EBITDA increased to \$200 million for the three-month period ended September 30, 2024, from \$113 million during the same period in the prior year. The EBITDA margin for the three-month period ended September 30, 2024, increased to 2.1% from 1.3% during the same period in the prior year. The increase from prior year is primarily due to California provider fee approval timing for 2023. Normalized for the California provider fee program, EBITDA for the three-month period ended September 30, 2023, was \$262 million, or an EBITDA margin of 3.0%.

CommonSpirit's financial performance continues to be impacted by expenses growing at a faster pace than revenue, despite strong volume, lower length-of-stay and higher productivity. The modest revenue increases are a function of reduced acuity, as well as continued challenges with payors on denials and timely payments. The major challenges the organization continues to face are limited increases in revenue levels and ensuring the organization receives the revenue and cash flow it is entitled to for services provided given the continued inflationary pressures on salaries and other costs.

CommonSpirit Health has multiple efforts underway to improve operating performance, including but not limited to:

- Volume growth with an emphasis on improving network integrity, expansion of ambulatory services, and capacity optimization for perioperative and imaging services.
- Improved revenue realization through a focus on clinical denials prevention, escalation and resolution of
 disputes with payors, collaboration with the organization's revenue cycle vendor partners, and ongoing
 managed care negotiations to reflect performance.
- Labor cost management via deployment of standard department staffing models across the organization as well as reduced contract labor spend.
- Other expense reduction efforts through renegotiation of supply chain contracts, rationalization of purchased service contracts and other expenses, and improved management of out of group expenses for at risk contracts.

• Focused improvement efforts, including service rationalization, for those markets where performance is currently below requirements.

For the three-month period ended September 30, 2024, CommonSpirit's volumes on an adjusted admission basis were favorable to the same period in the prior year by 2.9%. The acute average length of stay (ALOS) of 4.68 days for the three-month period ended September 30, 2024, was lower than the same period in the prior year of 4.73, primarily due to reduction efforts focusing on timely discharge of patients to the home and partnering with post-acute providers to facilitate discharges.

Key Indicators Financial Sumi	mary							
		Three-M	onth I	Periods E	nded			
		S	eptem ¹	ber 30,				
(\$ in millions)		2024	2	2023	2	023*	Ch	ange**
	Re	As ecorded	As ded Recorded		Ac	As ljusted		As djusted nparison
EBITDA	\$	200	\$	113	\$	262	\$	(62)
Margin %		2.1%		1.3%		3.0%		(0.9%)
Operating loss	\$	(331)	\$	(402)	\$	(253)	\$	(78)
Margin %		(3.5%)		(4.7%)		(2.9%)		(0.6%)
Excess (deficit) of revenues								
over expenses	\$	267	\$	(699)	\$	(550)	\$	817
Margin %		2.7%		(8.5%)		(6.5%)		9.2%

^{*} Adjusted to normalize the California Provider Fee Program net income.

^{**} Comparing September 30, 2024, as recorded to the same period in the prior year as adjusted.

California Provider Fee Program

CommonSpirit recorded \$155 million in net provider fee income during the three-month period ended September 30, 2024, compared to no activity recorded during the same period in the prior year. As a result of the CMS approval timing, EBITDA, operating revenues, and expenses for the three-month period ended September 30, 2023, has been adjusted where indicated in this report to normalize the California provider fee program revenue and expenses as though CMS approval had occurred as of January 1, 2023.

Following is a summary of the impact of normalizing provider fee net income:

California Provider Fee Program					
	1	Γhree-Month	Periods E	nded	
		Septer	nber 30,		
(\$ in millions)	2	2024	2	2023	Change
California Provider Fee as Recorded					
Net patient and premium revenues	\$	319	\$	-	\$ 319
Operating expenses		164		<u>-</u>	164
Provider Fee net income	\$	155	\$		\$ 155
Normalized California Provider Fee					
Net patient and premium revenues	\$	319	\$	284	\$ 35
Operating expenses	<u> </u>	164		135	29
Provider Fee net income	\$	155	\$	149	\$ 6
Impact of Normalizing California Provider Fee					
Net patient and premium revenues	\$	-	\$	284	\$ (284)
Operating expenses		-		135	(135)
Provider Fee net income (loss)	\$	-	\$	149	\$ (149)

Acquisitions, Affiliations and Divestitures

In February 2024, CommonSpirit entered into an agreement to transfer two hospitals, along with associated clinics in San Francisco, to The University of California - San Francisco Health. The transfer was finalized in August 2024.

Results of Operations

Operating Revenues and Volume Trends

Net patient and premium revenues increased \$844 million, or 10.5% over the same period in the prior year for the three-month period ended September 30, 2024. Normalizing the California provider fee revenues, net patient and premium revenue increased \$560 million, or 6.7%. Normalized net patient and premium revenue per adjusted admission increased 3.7% over the same period in the prior year.

Volumes				
	Three-Month Per	iods Ended		
	September	30,		
	2024	2023	Change	%
Acute admissions	209,494	202,401	7,093	3.5%
Adjusted admissions	438,829	426,425	12,404	2.9%
Acute inpatient days	980,035	956,482	23,553	2.5%
Adjusted patient days	2,141,266	2,108,767	32,499	1.5%
Acute average length of stay	4.68	4.73	(0.05)	(1.1%)
Outpatient visits	7,190,877	6,934,466	256,411	3.7%
ED visits	1,037,491	997,342	40,149	4.0%
Gross outpatient revenue as a % of				
total gross patient services revenue	52.1%	52.4%	(0.3%)	-

Payor mix based on gross revenues for the three-month period ended September 30, 2024, deteriorated slightly compared to the prior year. The following chart represents the gross revenue payor mix for consolidated operations for the three-month periods ended September 30, 2024 and 2023:

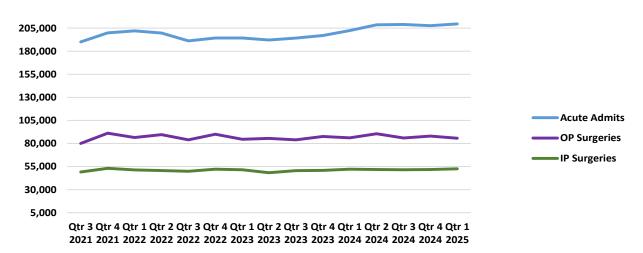
Q1 FY25



Gross Revenue Payor Mix

The following table is a summary of key volume metrics on a same-store basis (excluding surgical volumes in joint ventures with a minority interest):

Same-Store Volume Trend



All other operating revenues increased \$66 million, or 14.8%, from the prior year for the three-month period ended September 30, 2024, primarily due to higher grant revenue, including \$27 million related to reimbursement from the Federal Emergency Management Agency ("FEMA") for the COVID-19 pandemic, a \$20 million gain on sale of assets, and a \$38 million increase in pharmaceutical revenue. An additional \$137 million in FEMA funds have been obligated subsequent to September 30, 2024, and will be recognized in the quarter ending December 31, 2024.

Operating Revenues										
Three-Month Periods Ended										
			Septem	ber 30,						
(\$ in millions)	1	2024	1	2023	2	2023*	* Chan			
	Re	As corded	As Recorded				As Adjusted		Adj	As justed parison
Net patient and premium revenues	\$	8,886	\$	8,042	\$	8,326	\$	560		
All other operating revenues		512		446		446		66		
Total operating revenues	\$	9,398	\$	8,488	\$	8,772	\$	626		

^{*} Adjusted to normalize the California Provider Fee Program revenues.

^{**} Comparing September 30, 2024, as recorded to the same period in the prior year as adjusted.

Operating Revenues by Region

The following table presents operating revenues by region for the three-month periods ended September 30, 2024 and 2023. The results by region are presented consistent with the organization's recent consolidation of eight operating divisions into five regions, as shown below:

Operating Revenues By Regio	n							
		Three-		Periods E	Ended			
				mber 30,				
(\$ in millions)	2	2024	2	2023	20	023**	Chai	nge***
								As
		As		As		As	Adj	usted
	Re	corded	Re	corded	Ac	ljusted	Com	parison
Southern California	\$	1,868	\$	1,530	\$	1,738	\$	130
Northern California		1,390		1,186		1,262		128
California		3,258		2,716		3,000		258
Southwest		1,136		1,038		1,038		98
Midwest		826		776		776		50
Central		1,962		1,814		1,814		148
Southeast		1,061		1,028		1,028		33
Texas		737		707		707		30
South		1,798		1,735		1,735		63
Mountain		943		939		939		4
Northwest		1,276		1,151		1,151		125
National Business Lines*		80		78		78		2
Others		3		26		26		(23)
Subtotal		9,320		8,459		8,743		577
Corporate Services		78		29		29		49
CommonSpirit Total	\$	9,398	\$	8,488	\$	8,772	\$	626

^{*} Includes Home Care and Senior Living Business Lines.

Following are the significant performance drivers related to operating revenues normalized for the California Provider Fee, for the three-month period ended September 30, 2024, compared to the prior year:

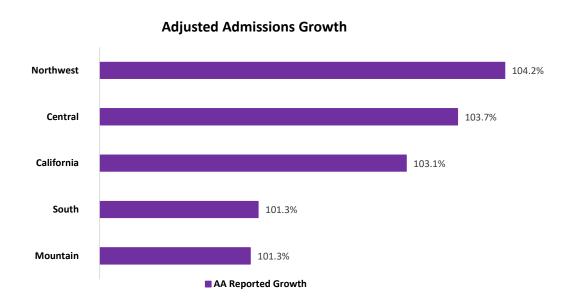
- California normalized operating revenues increased \$258 million from the prior year, primarily due to higher normalized provider fee revenue, a 3.1% increase in adjusted admissions and higher outpatient surgical volume, partially offset by continued revenue yield challenges.
- Central operating revenues increased \$148 million from the prior year, primarily due to a 3.7% increase in adjusted admissions, higher disproportionate share ("DSH") and provider fee revenue, and higher surgical volumes, partially offset by lower revenue from interests in health-related activities.
- Northwest operating revenues increased \$125 million from the prior year, primarily due to a 4.2% increase in adjusted admissions, higher outpatient volume, and higher provider fee revenue, partially offset by continued revenue yield challenges.

^{**} Adjusted to normalize the California Provider Fee Program revenues.

^{***} Comparing September 30, 2024, as recorded to the same period in the prior year as adjusted.

- South operating revenues increased \$63 million from the prior year, primarily due to additional volumes, with adjusted admissions increasing by 1.3% over the same period in the prior year and higher provider fee program revenue, partially offset by lower DSH revenue and continued revenue yield challenges.
- Mountain operating revenues increased \$4 million from the prior year, primarily due to adjusted admissions increasing by 1.3% and a gain on sale of assets, offset by an unfavorable shift in payor mix, and lower surgical volumes.

The table below reflects the adjusted admissions growth reported for the three-month period ended September 30, 2024, compared to the same period in the prior year:



Uncompensated Care	Three-Month Periods Ended September 30,								
(\$ in millions)	2	2024		r 30, 2023	Cł	ange			
Uncompensated Care:									
Charity care, at customary charges	\$	615	\$	498	\$	117			
Charity care, at cost, net	\$	147	\$	119	\$	28			
Charity care, at cost, as a percentage of total expenses		1.5%		1.3%		0.2%			

Operating Expenses

Salaries and benefits increased \$290 million, or 6.3%, over the same period in the prior year, for the three-month period ended September 30, 2024. The increase is primarily due to a 2.9% increase in adjusted admissions and continued salary inflation costs. Salaries and benefits per adjusted admission increased by 3.3%.

Supplies increased \$145 million, or 10.4%, during three-month period ended September 30, 2024, compared to the same period in the prior year. Supplies per adjusted admission increased 7.3% compared to the same period in the prior year. The increase on a volume adjusted basis is primarily due to the continued inflationary impact on pharmaceuticals and surgical and medical supplies.

Purchased services and other increased \$253 million, or 10.0%, for the three-month period ended September 30, 2024, compared to the same period in the prior year, when normalizing for the California provider fee program costs. Purchased services and other per adjusted admission on a normalized basis increased 6.9% compared to the same period in the prior year, primarily due to higher normalized provider fee expense, medical fees, and out-of-network and insurance costs, partially offset by lower collection agencies expense.

Operating Expenses									
	Three-N	Month Period	ls Ended						
	September 30,								
(\$ in millions)	2024	2023	2023*	Change**					

	Re	As corded	Re	As corded	Ac	As ljusted	As justed iparison
Salaries and benefits	\$	4,886	\$	4,596	\$	4,596	\$ 290
Supplies		1,535		1,390		1,390	145
Purchased services and other		2,777		2,389		2,524	253
Depreciation and amortization		346		342		342	4
Interest expense, net		185		173		173	12
Total operating expenses	\$	9,729	\$	8,890	\$	9,025	\$ 704

^{*} Adjusted to normalize the California Provider Fee Program expense.

^{**} Comparing September 30, 2024, as recorded to the same period in the prior year as adjusted.

Expense Management and Productivity			
	Three-Mo	onth Period	ds Ended
	Se	ptember 3	0,
	2024	2023	2023*

	As Recorded	As Recorded	As Adjusted
Expense Management:			
Supply expense as a % of net patient and premium revenue	17.3%	17.3%	16.7%
Purchased services and other as a % of net patient and premium revenue	31.3%	29.7%	30.3%
Capital expense as a % of net patient and premium revenue	6.0%	6.4%	6.2%
Non-capital cost per adjusted admission	\$20,960	\$19,639	\$19,956
Productivity:			
Salaries, wages and benefits as a % of net patient and premium revenue	55.0%	57.1%	55.2%
Number of FTEs	135,889	131,588	131,588
FTEs per adjusted admission	25.17	25.43	25.43

^{*}Adjusted to normalize the California Provider Fee Program revenues and expense.

Nonoperating Results

CommonSpirit recorded investment income, net, of \$617 million during the three-month period ended September 30, 2024, compared to investment losses, net, of \$289 million during the same period in the prior year, in line with market fluctuations.

Income tax expense was \$9 million during the three-month period ended September 30, 2024, compared to \$3 million during the same period in the prior year.

The change in market value and cash payments of interest rate swaps was an unfavorable result of \$42 million during the three-month period ended September 30, 2024, compared to a favorable result of \$28 million during the same period in the prior year.

Net periodic postretirement costs amounted to \$27 million of income during the three-month period ended September 30, 2024, compared to \$33 million of expense during the same period in the prior year.

Nonoperating Results						
	Three-Month Periods Ended September 30,					
(\$ in millions)	20	024	2	2023	Ch	nange
Investment income (loss), net	\$	617	\$	(289)	\$	906
Income tax expense		(9)		(3)		(6)
Change in fair value and cash payments of interest rate swaps		(42)		28		(70)
Other components of net periodic postretirement credits (costs)		27		(33)		60
Other		5				5
Total nonoperating income (loss), net	\$	598	\$	(297)	\$	895

The detail of investment earnings is as follows:

Investment income (loss), net							
	Three-Month Periods Ended September 30,						
(\$ in millions)	2024			2023		ange	
Net realized gains on sale of securities	\$	249	\$	87	\$	162	
Net unrealized gains (losses) on securities		289		(440)		729	
Other, net of capitalized investment income		79		64		15	
Total investment income (loss), net	\$	617	\$	(289)	\$	906	

The presentation of realized and unrealized gains and losses is determined based on the cost basis at the original acquisition date of the securities.

Balance Sheet Metrics

The following table provides key balance sheet metrics for CommonSpirit:

Key Balance Sheet Metrics						
	September 30,		June 30,			
(\$ in millions)		2024 2024		2024	Ch	ange
Consolidated Balance Sheet Summary						
Total assets	\$	55,382	\$	54,734	\$	648
Total liabilities	\$	32,913	\$	32,482	\$	431
Total net assets	\$	22,469	\$	22,252	\$	217
Financial Position Ratios						
Unrestricted cash and investments	\$	15,782	\$	15,550	\$	232
Days cash on hand normalized		156		156		-
Total debt	\$	19,164	\$	18,803	\$	361
Debt to capitalization		48.5%		48.4%		0.1%

Liquidity

Unrestricted cash and investments were \$15.8 billion at September 30, 2024, and \$15.6 billion at June 30, 2024. CommonSpirit is actively monitoring liquidity given the operational disruption related to inflationary pressures, cash flow disruptions related to denials, timing related to employee retention credits, grant revenues, provider fee receipts and payments, and pending insurance proceeds related to the cybersecurity incident.

Liquidity and Capital Resources						
(\$ in millions)		September 30, 2024		ne 30, 2024	Ch	ange
Cash	\$	1,968	\$	1,983	\$	(15)
Short-term investments		272		300		(28)
Long-term investments, excluding assets limited as to use		13,542		13,267		275
Total unrestricted cash and investments	\$	15,782	\$	15,550	\$	232

Capital Resources

Cash provided by operating activities totaled \$201 million for the three-month period ended September 30, 2024, compared to \$325 million for the same period in the prior year. Significant activity for the three-month period ended September 30, 2024, includes the following:

- Investments increased \$453 million during the three-month period ended September 30, 2024, compared to a decrease of \$800 million during the same period in the prior year.
- Accrued salaries and benefits increased \$316 million during the three-month period ended September 30, 2024, compared to \$239 million during the same period in the prior year.
- Accounts payable decreased \$265 million during the three-month period ended September 30, 2024, compared to \$161 million during the same period in the prior year.
- Accounts receivable, net, increased \$17 million during the three-month period ended September 30, 2024, compared to \$182 million for the same period in the prior year.
- Provider fee program net receivables increased \$192 million during the three-month period ended September 30, 2024, compared to \$117 million for the same period in the prior year.
- Other accrued liabilities decreased \$68 million during the three-month period ended September 30, 2024, compared to an increase of \$46 million during the same period in the prior year.

Cash used in investing activities totaled \$488 million for the three-month period ended September 30, 2024, compared to \$304 million during the same period in the prior year, primarily related to the following:

- Capital expenditures were \$566 million during the three-month period ended September 30, 2024, compared to \$222 million for the same period in the prior year. Such capital expenditures primarily relate to growth in ambulatory and inpatient services, general maintenance of facilities, equipment and systems additions and replacements, purchase of previously leased real estate, and various other capital improvements.
- Proceeds from the sale of assets were \$112 million during the three-month period ended September 30, 2024, compared to \$3 million during the same period in the prior year, primarily due to the San Francisco transaction.

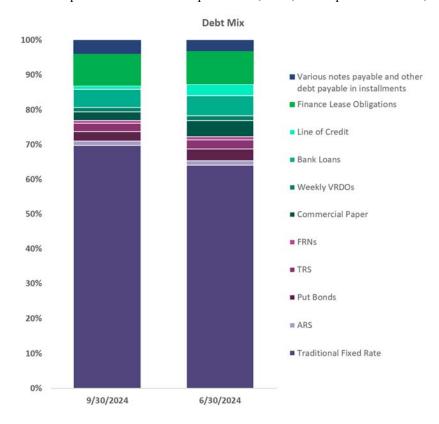
Cash provided by financing activities totaled \$272 million for the three-month period ended September 30, 2024, compared to cash used of \$91 million for the same period in the prior year, primarily due to the following:

- Net borrowings of debt were \$310 million during the three-month period ended September 30, 2024, compared to net repayments of \$20 million during the same period in the prior year.
- Distributions to noncontrolling interests were \$27 million for the three-month period ended September 30, 2024, compared to \$109 million during the same period in the prior year.

Debt Portfolio

The CommonSpirit Obligated Group represents approximately 86% of consolidated revenues of CommonSpirit as of September 30, 2024. The debt portfolio remains well diversified, with a high proportion of long-term fixed rate debt providing stability.

The chart below depicts CommonSpirit's debt mix as of September 30, 2024, as compared to June 30, 2024:



Strategic Focus and Priorities

Under the leadership of CEO Wright Lassiter III, the organization has established a set of five critical focus areas referred to as "5 for 25" to accelerate CommonSpirit 2026, the strategic road map created at the time of the 2019 merger. These focus areas are not just about change; they are about transformation, about enhancing quality of care, broadening access to care, reducing cost of care, ensuring financial viability, and propelling our mission and operations. Implementing these initiatives across the ministry will position CommonSpirit to create a stronger, successful, sustainable and more unified CommonSpirit and set the foundation for launching into a new strategic plan for CommonSpirit the following year:

- Achieve a unified ministry, by defining a unified culture, brand and operations, aligning approaches to increase efficiency and leverage scale;
- Ensure we are paid for the care we provide, through heightened work with payors and revenue cycle partners;
- Transform our portfolio through continued diversification in non-acute verticals, strategic capital deployment and other potential portfolio adjustments;
- Drive organic growth through network integrity and access with the expansion of access points as well as better care coordination to facilitate consumers' utilization of our care networks; and
- Launch a new digital consumer experience to enable increased access to care for those we serve.

The fiscal year-end 2024 Annual Report detailed a wide range of accomplishments. The organization continues to build on these in early fiscal 2025. Some examples of progress during the first quarter in the five critical focus areas are described below.

Achieve a Unified Ministry: This defines our strategic imperative to rapidly complete the integration of all aspects of our ministry – clinical, operational, and technological – across our entire footprint while aligning our geographic markets. It includes further work to centralize or standardize processes to ensure the delivery of a consistently superior patient experience, while maintaining exceptional clinical standards. It also includes evolving the design and operating model of CommonSpirit, as well as cultivating a consistent identity and culture. Under the banner of *One CommonSpirit*, the following initiatives continue to be built upon during the first quarter:

- Continuing to Refine the Operating Model: With the completion of the Region and market structures and leadership changes, the focus is on leveraging this model with an aim to strengthen relevance across CommonSpirit markets. In concert with this, the focus at the national level is in realizing economies of scale nationally, including coordinated supply chain, clinical equipment and infrastructure programs which are being implemented this fiscal year.
- Integrated Information Technology (IT) Platforms: CommonSpirit's IT roadmap identified opportunities to lower costs over the long term, improve clinical and operational challenges, reduce staff and clinician burnout, and standardize clinical platforms. One major pillar of this work includes standardization to a single electronic health record ("EHR") system. The first Go-Live with the new standard across CommonSpirit will be in CommonSpirit's South Region in June 2025, and this work was well underway during the first quarter of fiscal 2025.

Ensure We Are Paid for the Care We Provide:

• One of the most critical levers is to receive the revenue and cash flow CommonSpirit is entitled to for services provided. We are focused on improving our revenue cycle function; clinical denials, clinical documentation, underpayment review, patient collections at the service site, outsourcing additional accounts to specialized vendors, and revenue cycle performance with our partners. The dynamics of payor-provider relationships also have to change. This includes being paid appropriately based on contracts CommonSpirit has in place, taking a firm stance on contract renewals so payors absorb a share of inflation, and the process and terms are improved so providers get paid for the care they deliver.

Transform Our Portfolio:

• Enhancing the Continuum of Care and Focused Ambulatory Development: CommonSpirit's goal is to seamlessly care for patients across all care settings, either at an individual care setting or by managing a patient's journey across multiple settings. In addition to the horizontal alignment around markets and

geographies, CommonSpirit is focusing time and effort on aligning the portfolio vertically across a range of pre- and post-acute services. CommonSpirit continues to expand our ambulatory and virtual care points and enhance connections across the continuum of care. As clinical innovation drives the continued transition of a range of traditionally acute-care services to lower acuity settings, we are expanding ambulatory care capacity. During fiscal year 2024, CommonSpirit added 56 new ambulatory care sites, including primary care and specialty care clinics, outreach clinics, home health, labs, an ambulatory surgery center, a physical therapy clinic and an acute care hospital. Additionally, CommonSpirit has new partnerships with LifePoint for acute behavioral and rehabilitation services with two new sites underway in Houston and Tennessee and two additional sites to be announced within the year. CommonSpirit is also focused on its Home Health and Senior Living services where work is underway to better align with and support our markets' needs for the full continuum of care to best transition and serve our patients in the most appropriate care settings.

- Innovative Partnerships Advance the Care Continuum: CommonSpirit has a range of partnerships in areas such as novel care models in primary care, behavioral health, micro hospitals, hospitals at home, and other care models. New areas of focus include an effort to aid the need for transparent Pharmacy Benefit Managers ("PBM") and Artificial Intelligence ("AI") with the goal to stay ahead of the ecosystem and partner with mission aligned companies to serve CommonSpirit's ministry. CommonSpirit is the first health system of its scale to adopt a transparent PBM solution and a new Generative AI partnership focused on leveraging data to create a more efficient supply chain. Additionally, CommonSpirit supports diversification through a successful co-investment program where we may invest alongside leading venture firms in the companies we are partnering with. This co-investment program has had very strong results and has generated financial and operational returns.
- Portfolio Assessment and Management: CommonSpirit is enhancing its portfolio analysis and investment strategy, to focus on market essentiality in evaluating its portfolio of health care markets. This includes assessing each market's current position and market potential, defining market-based strategies, and aligning and prioritizing our capital investments for maximum impact. A recent example of market-based investments is the expanded relationship with Kaiser Permanente ("Kaiser") under a new long-term agreement in Colorado. This unique arrangement will include integrating Kaiser physicians and employees into CommonSpirit hospitals to care for Kaiser members. This approach is integrated in CommonSpirit's Long Range Strategic Planning process, which will commence in the second quarter, and inform priorities for capital allocation for fiscal year 2026. In addition, while not the primary intent, this may result in acquisitions and divestitures where appropriate. An example of a recent action includes the transfer of ownership of its San Francisco facilities to University of California, San Francisco, a transaction that closed on August.

Drive Organic Growth Through Network Integrity and Access: In terms of volume growth, better utilizing the costly physical and people resources CommonSpirit already has is the most efficient way to grow. Several initiatives are in place to improve care continuity and improve organic growth, including:

- CommonSpirit's Patient Connection Centers ("PCC"), use efficient resources to improve patient access and physician productivity, and our network integrity tools help improve care continuity within our network.
- Improved Network Integrity and Growth: CommonSpirit is enhancing efforts to track care continuity and enhance practice patterns, to ensure we are serving our patients in-network, and implementing solutions unique to each market when necessary. These efforts are enhanced by tools that provide consistent, detailed analysis and trending of data to assess continuity of care and network integrity, Patient Connection Centers and digital front door enhancements, and improved use of our electronic health records to facilitate referrals and follow up care. To date, all of CommonSpirit's markets are using a range of these tools and results are provided and tracked on a quarterly basis.

Launch a Reimagined Digital Consumer Experience:

• Implementation of "one digital front door" to our services will provide a consistent landing page with search and scheduling features across all of our regions. In addition to CommonSpirit's patient connection centers, which help connect patients to their providers through a single point of access, in April 2024, CommonSpirit launched the first phase of its Consumer Digital Experience at https://www.commonspirit.org that provides an integrated, consistent and seamless consumer experience.

The reimagined digital experience features one content engine, one scheduling platform and the first ministry-wide Find a Doctor and Find a Location service, offering an intuitive way to compare and find the right provider and request an appointment with ease. As of June 2024, we've launched enhanced online scheduling for our employed physicians and advanced practice providers in California, Arizona and Nevada. The next phase in this milestone achievement involves integrating all market-based sites onto the platform.

The 5 for 25 priorities for fiscal year 2025 are geared toward putting CommonSpirit on an improved trajectory to maintain and grow its financial strength and achievement of its strategic objectives. CommonSpirit continues to build on the achievements made through fiscal year 2024 to drive improved performance through revenue and cost levers. For example, CommonSpirit achieved \$580 million across a range of initiatives as part of our overall financial performance goals in fiscal year 2024, including continuing to optimize large areas of opportunity in the areas of labor, revenue cycle, supply chain, contract labor and corporate and administrative services. Given continued inflationary and revenue pressures, the organization continues to focus on value capture initiatives, and has identified a set of actions to further address and improve operating performance in 2025, including supply chain, pharmacy, payor contracting and adherence, purchased services, overhead functions, ancillary services, and a range of other areas.

Updates to these priorities and specific accomplishments will continue to be highlighted in these quarterly reports as appropriate.

Exhibit I

Condensed Consolidated Financial Statements
For the Three-Month Periods Ended September 30, 2024 and 2023

(Attached)

UNAUDITED CONDENSED CONSOLIDATED FINANCIAL STATEMENTS

For the Three-Month Periods Ended September 30, 2024 and 2023

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CONDENSED CONSOLIDATED BALANCE SHEETS AS OF SEPTEMBER 30, 2024 AND JUNE 30, 2024 (in millions)

Assets	As of September 30, 2024 (Unaudited)			As of June 30, 2024		
Current assets:						
Cash and cash equivalents	\$	1,968	\$	1,983		
Short-term investments		272		300		
Patient accounts receivable, net		5,434		5,407		
Provider fee receivable		1,237		1,189		
Other current assets		3,602		3,534		
Total current assets		12,513		12,413		
Long-term investments		17,440		16,879		
Property and equipment, net		17,318		17,165		
Right-of-use operating lease assets		1,523		1,687		
Ownership interests in health-related activities		3,253		3,228		
Other long-term assets, net		3,335		3,362		
Total assets	\$	55,382	\$	54,734		

(Continued)

CONDENSED CONSOLIDATED BALANCE SHEETS AS OF SEPTEMBER 30, 2024 AND JUNE 30, 2024 (in millions)

Liabilities and Net Assets	As of September 30, 2024 (Unaudited)		As of June 30, 2024	
Current liabilities:				
Current portion of long-term debt	\$	1,332	\$	1,006
Demand bonds subject to short-term liquidity arrangements		247		247
Accounts payable		1,193		1,456
Accrued salaries and benefits		2,004		1,688
Provider fee payables		493		643
Other accrued liabilities - current		4,523		4,352
Total current liabilities		9,792		9,392
Other liabilities - long-term:				
Self-insured reserves and claims		1,161		1,169
Pension and other postretirement benefit liabilities		2,104		1,991
Derivative instruments, net		99		70
Operating lease liabilities		1,422		1,582
Other accrued liabilities - long-term		750		728
Total other liabilities - long-term		5,536		5,540
Long-term debt, net of current portion		17,585		17,550
Total liabilities		32,913		32,482
Net assets:				
Without donor restrictions - attributable to CommonSpirit Health		20,315		20,043
Without donor restrictions - noncontrolling interests		1,038		1,012
With donor restrictions		1,116		1,197
Total net assets		22,469		22,252
Total liabilities and net assets	\$	55,382	\$	54,734

See notes to unaudited condensed consolidated financial statements.

UNAUDITED CONDENSED CONSOLIDATED STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS FOR THE THREE-MONTH PERIODS ENDED SEPTEMBER 30, 2024 AND 2023 (in millions)

		Periods Ended
	2024	2023
Operating revenues:		
Net patient revenue	\$ 8,485	\$ 7,648
Premium revenue	401	394
Revenue from health-related activities, net	37	51
Other operating revenue	459	379
Contributions	16	16
Total operating revenues	9,398	8,488
Operating expenses:		
Salaries and benefits	4,886	4,596
Supplies	1,535	1,390
Purchased services and other	2,777	2,389
Depreciation and amortization	346	342
Interest expense, net	185	173
Total operating expenses	9,729	8,890
Operating loss	(331)	(402)
Nonoperating income (loss):		
Investment income (loss), net	617	(289)
Income tax expense	(9)	(3)
Change in fair value and cash payments	. ,	· /
of interest rate swaps	(42)	28
Other components of net periodic		
postretirement credits (costs)	27	(33)
Other	5	
Total nonoperating income (loss), net	598	(297)
Excess (deficit) of revenues over expenses	\$ 267	\$ (699)
Less excess of revenues over expenses	<u>· · · · · · · · · · · · · · · · · · · </u>	
attributable to noncontrolling interests	78	-
Excess (deficit) of revenues over expenses		
attributable to CommonSpirit Health	\$ 189	\$ (699)

(Continued)

UNAUDITED CONDENSED CONSOLIDATED STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS FOR THE THREE-MONTH PERIODS ENDED SEPTEMBER 30, 2024 AND 2023 (in millions)

	Without Donor Restrictions						
	Con	ributable to nmonSpirit Health		ontrolling terests	With Donor strictions		otal Net Assets
Balance, June 30, 2023	\$	18,960	\$	1,062	\$ 1,117	\$	21,139
Deficit of revenues over expenses Contributions Net assets released from restrictions for capital		(699) - 5		- - -	40 (5)		(699) 40
Net assets released from restrictions for operations and other Other		(37)		(93)	 (8) (5)		(8) (135)
Increase (decrease) in net assets		(731)		(93)	22		(802)
Balance, September 30, 2023	\$	18,229	\$	969	\$ 1,139	\$	20,337
Balance, June 30, 2024	\$	20,043	\$	1,012	\$ 1,197	\$	22,252
Excess of revenues over expenses Contributions		189		78 -	- 29		267 29
Net assets released from restrictions for capital Net assets released from restrictions for		9		-	(9)		-
operations and other Other		- 74		(52)	 (8) (93)	_	(8) (71)
Increase (decrease) in net assets		272		26	 (81)	_	217
Balance, September 30, 2024	\$	20,315	\$	1,038	\$ 1,116	\$	22,469

See notes to unaudited condensed consolidated financial statements.

UNAUDITED CONDENSED CONSOLIDATED STATEMENTS OF CASH FLOWS FOR THE THREE-MONTH PERIODS ENDED SEPTEMBER 30, 2024 AND 2023 (in millions)

	Three-Month Periods End September 30,			
	2	2024	2	023
Cash flows from operating activities:				
Change in net assets	\$	217	\$	(802)
Adjustments to reconcile change in net assets to cash				
provided by (used in) operating activities:				
Depreciation and amortization		346		342
Changes in equity of health-related entities		(39)		(68)
Net gains on business combinations		(20)		-
Net gain on sales of facilities and investments in				
unconsolidated organizations		(14)		-
Change in fair value of swaps		42		(45)
Noncash adjustments of pension and other				
postretirement benefit plans		41		69
Changes in certain assets and liabilities:				
Accounts receivable, net		(17)		(182)
Prepaid and other current assets		50		(55)
Changes in broker receivables/payables for unsettled				
investment trades		198		105
Provider fee assets and liabilities, net		(192)		(117)
Accounts payable		(265)		(161)
Accrued salaries and benefits		316		239
Other accrued liabilities		(68)		46
Self-insured reserves and claims		(1)		(29)
Other, net		60		183
Cash provided by (used in) operating activities before net change				
in investments		654		(475)
Net (increase) decrease in investments		(453)		800
Cash provided by operating activities		201		325
			(Coı	ntinued)

UNAUDITED CONDENSED CONSOLIDATED STATEMENTS OF CASH FLOWS FOR THE THREE-MONTH PERIODS ENDED SEPTEMBER 30, 2024 AND 2023 (in millions)

	Three-Month Periods Endo September 30,		
	2024	2023	
Cash flows from investing activities:			
Purchases of property and equipment	(566)	(222)	
Investments in health-related activities	(28)	(34)	
Business acquisitions, net of cash acquired	(6)	(21)	
Proceeds from asset sales, net	112	3	
Cash distributions from health-related activities	20	22	
Other, net	(20)	(52)	
Cash used in investing activities	(488)	(304)	
Cash flows from financing activities:			
Borrowings	463	531	
Repayments	(153)	(551)	
Swaps cash collateral received (posted)	(13)	22	
Distributions to noncontrolling interests	(27)	(109)	
Contribution by noncontrolling interests	2	16	
Cash provided by (used in) financing activities	272	(91)	
Net decrease in cash and cash equivalents	(15)	(70)	
Cash and cash equivalents at beginning of period	1,983	1,677	
Cash and cash equivalents at end of period	\$ 1,968	\$ 1,607	
Supplemental disclosures of cash flow information:			
Cash paid for interest, net of capitalized interest	\$ 111	\$ 141	
Supplemental schedule of noncash investing and financing activities: Property and equipment acquired through finance lease			
or note payable	\$ 15	\$ 7	
Investments in health-related activities		\$ 73	
Accrued purchases of property and equipment	\$ 26 \$ 73	\$ 7 \$ 73 \$ 65	

See notes to unaudited condensed consolidated financial statements.

COMMONSPIRIT HEALTH NOTES TO UNAUDITED CONDENSED CONSOLIDATED FINANCIAL STATEMENTS

1. ORGANIZATION

CommonSpirit Health is a Colorado nonprofit public benefit corporation exempt from federal and state income taxes. CommonSpirit Health is a Catholic health care system sponsored by the public juridic person, Catholic Health Care Federation.

CommonSpirit Health owns and operates health care facilities in 24 states and is the sole corporate member (parent corporation) of other primarily nonprofit corporations. CommonSpirit Health and substantially all of its direct affiliates and subsidiaries have been granted exemptions from federal income tax as charitable organizations under Section 501(c)(3) of the Internal Revenue Code. As of November 18, 2024, CommonSpirit Health is comprised of approximately 2,300 care sites, consisting of 137 hospitals, including academic health centers, major teaching hospitals, and critical access facilities, community health services organizations, accredited nursing colleges, home health agencies, living communities, a medical foundation and other affiliated medical groups, and other facilities and services that span the inpatient and outpatient continuum of care. An additional 20 hospitals are operated through unconsolidated joint ventures. CommonSpirit Health also has offshore and onshore captive insurance companies. The accompanying condensed consolidated financial statements include CommonSpirit Health and its direct affiliates and subsidiaries (together, "CommonSpirit").

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation – The accompanying condensed consolidated financial statements of CommonSpirit were prepared in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP") and include the accounts of all wholly-owned affiliates and affiliates over which CommonSpirit exercises control or has a controlling financial interest, after elimination of intercompany transactions and balances. These unaudited condensed consolidated financial statements do not include all of the information and footnotes required by U.S. GAAP for complete financial statements. For further information, refer to the audited consolidated financial statements as of and for the years ended June 30, 2024 and 2023. Operating results for the three-month periods ended September 30, 2024, are not necessarily indicative of the results to be expected during the year ending June 30, 2025.

Use of Estimates – The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. CommonSpirit considers critical accounting policies to be those that require more significant judgments and estimates in the preparation of its condensed consolidated financial statements, including the following: recognition of net patient revenue, which includes contractual discounts and adjustments; price concessions and charity care; other operating revenues; fair value of acquired assets and assumed liabilities in business combinations; recorded values of depreciable and amortizable assets, investments and goodwill; reserves for self-insured workers' compensation and professional and general liabilities; contingent liabilities; and assumptions for measurement of pension and other postretirement benefit liabilities. Management bases its estimates on historical experience and various other assumptions that it believes are reasonable under the particular circumstances. Actual results could differ from those estimates.

Patient Accounts Receivable and Net Patient Revenue — Patient service revenue is reported at the amounts that reflect the consideration CommonSpirit expects to be paid in exchange for providing patient care. These amounts are due from patients, third-party payors (including health insurers and government programs) and others and include consideration for retroactive revenue adjustments due to settlement of audits and reviews. Generally, performance obligations for patients receiving inpatient acute care services and outpatient services are recognized over time as services are provided. Net patient revenue is primarily comprised of hospital and physician services.

Performance obligations are generally satisfied over a period of less than one year. As such, CommonSpirit has elected to apply the optional exemption provided in Financial Accounting Standards Board Accounting Standards Codification, *Revenue from Contracts with Customers*, and is not required to disclose the aggregate amount of the transaction price allocated to performance obligations that are unsatisfied or partially unsatisfied at the end of the reporting period.

CommonSpirit determines the transaction price based on standard charges for services provided, reduced by contractual adjustments provided to third-party payors, discounts provided to uninsured and underinsured patients in accordance with CommonSpirit's financial assistance policy, and implicit price concessions provided to uninsured and underinsured patients. CommonSpirit determines its estimates of contractual adjustments and discounts based on contractual agreements, its discount policy and historical experience. CommonSpirit determines its estimate of implicit price concessions based on its historical collection experience with these classes of patients using a portfolio approach as a practical expedient to account for patient contracts as collective groups rather than individually. CommonSpirit relies on the results of detailed reviews of historical write-offs and collections in estimating the collectability of accounts receivable. Updates to the hindsight analysis are performed at least quarterly using primarily a rolling 18-month collection history and write-off data. Subsequent changes to estimates of the transaction price are generally recorded as adjustments to net patient revenue in the period of the change.

Subsequent changes that are determined to be the result of an adverse change in a third-party payor's ability to pay are recorded as bad debt expense in purchased services and other in the accompanying condensed consolidated statements of operations and changes in net assets. Bad debt expense the three-month periods ended September 30, 2024 and 2023 were not significant.

Agreements with third-party payors typically provide for payments at amounts less than established charges. A summary of the payment arrangements included in net patient revenue follows:

Medicare: Payments for inpatient services are generally made on a prospectively determined rate based on clinical diagnosis. Certain facilities receive cost-based reimbursement. Hospital outpatient services are generally paid based on prospectively determined rates. Physician services are paid based upon established fee schedules.

Medicaid: Payments for inpatient services are generally made on a prospectively determined rate based on clinical diagnosis or on a per case or per diem basis. Hospital outpatient services and physician services are paid based upon established fee schedules, a cost basis reimbursement methodology or discounts from established charges.

Commercial: Payments for inpatient and outpatient services provided to patients covered under commercial insurance policies are paid using a variety of payment methodologies, including per diem and case rates.

Self-Pay and Other: Payment agreements with uninsured or underinsured patients, along with other responsible entities, including institutions, other hospitals and other government payors, are based on a variety of payment methodologies.

Net patient revenue includes estimated settlements under payment agreements with third-party payors. Settlements with third-party payors are accrued on an estimated basis in the period in which the related services are rendered and adjusted in future periods as final settlements are determined. These settlements are estimated and evaluated based on the terms of the payment agreement with the payor, correspondence from the payor and historical settlement activity.

Subsequent Events – CommonSpirit has evaluated subsequent events occurring between the end of the most recent fiscal year and November 18, 2024, the date the condensed consolidated financial statements were issued. See Notes 9 and 10.

3. ACQUISITIONS, AFFILIATIONS AND DIVESTITURES

In February 2024, CommonSpirit entered into an agreement to transfer two hospitals, along with associated clinics in San Francisco, to The University of California- San Francisco Health. The associated assets and liabilities were classified as held for sale as of June 30, 2024, within other current assets and other accrued liabilities – current, respectively, in the associated condensed consolidated balance sheets. The transfer was finalized in August 2024 and the operations of the facilities held for sale are not material to the condensed consolidated statement of operations and changes in net assets.

In August 2023, CommonSpirit and AdventHealth effected an agreement to transition to direct management of their respective care sites that comprised Centura Health (the "Transition"), with CommonSpirit directly operating and managing its hospitals and affiliated clinics in Colorado, western Kansas and Utah, and AdventHealth directly operating and managing its Adventist hospitals and their affiliated clinics in Colorado. The Transition did not have a material effect on the financial condition or operations of CommonSpirit, taken as a whole.

4. NET PATIENT REVENUE

Patient revenue, net of contractual discounts and adjustments and implicit price concessions, is comprised of the following (in millions):

	•	Three-Month Periods Ended September 30,					
	:	2024		2023			
Government	\$	4,444	\$	3,921			
Contracted		3,367		2,949			
Self-pay and other		674		778			
	\$	8,485	\$	7,648			

Government payor type includes Medicare fee for service, Medicare capitated, Medicare managed care fee for service, Medicaid fee for service, Medicaid capitated and Medicaid managed care fee for service patient accounts. Contracted payor type includes contracted rate payors and commercial capitated patient accounts.

5. OTHER CURRENT ASSETS

Other current assets consist of the following (in millions):

	September , 2024	As of June 30, 2024		
Inventories	\$ 835	\$	839	
Receivables, other than patient accounts receivable	949		1,048	
Broker receivables for unsettled investment trades	1,199		962	
Assets held for sale	-		133	
Prepaid expenses	530		468	
Other	89		84	
Total other current assets	\$ 3,602	\$	3,534	

6. CASH AND INVESTMENTS

CommonSpirit's cash and investments include consolidated membership interests in the CommonSpirit Health Operating Investment Pool, LLC ("CSH OIP") as of September 30, 2024 and June 30, 2024. Short-term and long-term investments also include assets limited as to use set aside by CommonSpirit for future long-term purposes as outlined below (in millions):

	Septen	s of nber 30, 024	As of June 30, 2024		
Cash and cash equivalents	\$	1,968	\$	1,983	
Short-term investments		272		300	
Long-term investments		17,440		16,879	
Total cash and investments		19,680		19,162	
Less:					
Held for self-insured claims		2,042		1,963	
Under bond indenture agreements for debt service		173		102	
Donor-restricted		610		596	
Other		1,073		951	
Total assets limited as to use		3,898	-	3,612	
Unrestricted cash and investments	\$	15,782	\$	15,550	

7. FAIR VALUE MEASUREMENTS

CommonSpirit accounts for certain assets and liabilities at fair value or on a basis that approximates fair value. A fair value hierarchy for valuation inputs categorizes the inputs into three levels based on the extent to which inputs used in measuring fair value are observable in the market. Each fair value measurement is reported in one of the three levels and is determined by the lowest level of input that is significant to the fair value measurement in its entirety. These levels are:

Level 1: Quoted prices are available in active markets for identical assets or liabilities as of the measurement date. Financial assets in this category include money market funds, U.S. Treasury securities and listed equities.

Level 2: Pricing inputs are based upon quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active and model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data for substantially the full term of the assets or liabilities. Financial assets and liabilities in this category generally include asset-backed securities, corporate bonds and loans, municipal bonds and derivative instruments.

Level 3: Pricing inputs are generally unobservable for the assets or liabilities and include situations where there is little, if any, market activity for the investment. The inputs into the determination of fair value require management's judgment or estimation of assumptions that market participants would use in pricing the assets or liabilities. The fair values are therefore determined using model-based techniques that include option pricing models, discounted cash flow models and similar techniques.

The following represents assets and liabilities measured at fair value or at the NAV practical expedient on a recurring basis (in millions):

	September 30, 2024								
	Quoted Prices in Active Markets for Identical Instruments (Level 1)		Significant Other Observable Inputs (Level 2)		Significant Unobservable Inputs (Level 3)			Total	
Assets									
Cash and short-term investments	\$	2,433	\$	163	\$	-	\$	2,596	
U.S. government securities		852		781		-		1,633	
U.S. corporate bonds		54		633		-		687	
U.S. equity securities		1,582		1		-		1,583	
Foreign government securities		-		104		-		104	
Foreign corporate bonds		3		220		-		223	
Foreign equity securities		1,519		1		-		1,520	
Structured debt		-		237		-		237	
Private equity		-		-		133		133	
Real estate		23		1		-		24	
Community Investment Program		-		-		231		231	
Other investments		259		449		<u> </u>		708	
Assets measured at fair value	\$	6,725	\$	2,590	\$	364		9,679	
Assets at NAV								10,001	
Total assets							\$	19,680	
Liabilities									
Derivative instruments	\$	_	\$	139	\$	_	\$	139	
Other		2				91		93	
Total liabilities	\$	2	\$	139	\$	91	\$	232	

	June 30, 2024								
	Quoted Prices in Active Markets for Identical Instruments (Level 1)		Significant Other Observable Inputs (Level 2)		Significant Unobservable Inputs (Level 3)		,	Total	
Assets									
Cash and short-term investments	\$	2,288	\$	197	\$	-	\$	2,485	
U.S. government securities		792		888		-		1,680	
U.S. corporate bonds		50		629		-		679	
U.S. equity securities		1,586		1		=		1,587	
Foreign government securities		2		71		-		71	
Foreign corporate bonds		1 464		228		-		231	
Foreign equity securities Structured debt		1,464		3		-		1,467	
		-		478		110		478	
Private equity		20		-		118		118	
Multi-strategy hedge funds		30		-		-		30	
Real estate		5		7		100		12	
Community Investment Program		-		-		198		198	
Other investments		217		9				226	
Assets measured at fair value	\$	6,435	\$	2,511	\$	316		9,262	
Assets at NAV			<u>-</u>					9,900	
Total assets							\$	19,162	
Liabilities									
Derivative instruments	\$	-	\$	97	\$	-	\$	97	
Other		2				91		93	
Total liabilities	\$	2	\$	97	\$	91	\$	190	

June 30 2024

Assets and liabilities measured at fair value on a recurring basis reflected in the table above are reported in short-term investments, long-term investments, current liabilities and other liabilities – long-term in the accompanying condensed consolidated balance sheets.

The Level 2 and 3 instruments listed in the fair value hierarchy tables above use the following valuation techniques and inputs:

For marketable securities, such as U.S. and foreign government securities, U.S. and foreign corporate bonds, U.S. and foreign equity securities, mortgage and asset-backed securities, and structured debt, in the instances where identical quoted market prices are not readily available, fair value is determined using quoted market prices and/or other market data for comparable instruments and transactions in establishing prices, discounted cash flow models and other pricing models. These inputs to fair value are included in industry-standard valuation techniques, such as the income or market approach. CommonSpirit classifies all such investments as Level 2.

For private equity investments where no fair value is readily available, the fair value is determined using models that take into account relevant information considered material. Due to the significant unobservable inputs present in these valuations, CommonSpirit classifies all such investments as Level 3.

The fair value of collateral held under securities lending program is classified as Level 2. The collateral held under this program is placed in commingled funds whose underlying investments are valued using techniques

similar to those used for the marketable securities noted above. Amounts reported do not include noncash collateral of \$410 million and \$596 million as of September 30, 2024 and June 30, 2024, respectively.

The fair value of assets and liabilities for derivative instruments, such as interest rate swaps classified as Level 2, is determined using an industry standard valuation model, which is based on a market approach. A credit risk spread (in basis points) is added as a flat spread to the discount curve used in the valuation model. Each leg is discounted and the difference between the present value of each leg's cash flows equals the fair value of the swap.

Related to investments valued using the NAV per share practical expedient, management also performs, on a regular basis when information is available, various validations and testing of NAV provided and determines that the investment managers' valuation techniques are compliant with fair value measurement accounting standards.

The following table and explanations identify attributes relating to the nature and risk of investments for which fair value is determined using a calculated NAV as of September 30, 2024 (in millions):

		Pr	NAV actical pedient	Unfunded Commitments				0 0 0 0		0		0				Redemption Frequency (If Currently Eligible)	Redemption Notice Period
Private equity	(1)	\$	1,672	\$	1,612	-	-										
Multi-strategy hedge funds	(2)		2,299		-	Weekly, Monthly, Quarterly, Semi-annually, Annually	1 - 90 days										
Real estate	(3)		1,037		125	Quarterly	45 - 90 days										
Commingled funds - debt securities	(4)		918		81	Daily, Monthly, Quarterly	1 - 90 days										
Commingled funds - equity securities	(5)		4,075		-	Daily, Weekly, Bi-Weekly, Monthly, Quarterly	1 - 90 days										
Total		\$	10,001	\$	1,818												

⁽¹⁾ This category includes private equity funds that specialize in providing capital to a variety of investment groups, including, but not limited to, venture capital, leveraged buyout, mezzanine debt, distressed debt and other situations. There are no provisions for redemptions during the life of these funds. Distributions from each fund will be received as the underlying investments of the funds are liquidated, estimated as of September 30, 2024, to be over the next 13 years.

(2) This category includes investments in hedge funds that pursue diversification of both domestic and foreign fixed income and equity securities through multiple investment strategies. The primary objective for these funds is to seek attractive long-term, risk-adjusted absolute returns. Under certain circumstances, an otherwise redeemable investment or portion thereof could become restricted. The following table reflects the various redemption frequencies, notice periods and any applicable lock-up periods or gates to redemption as of September 30, 2024:

Percentag	ercentage of the Value		Redemption	Redemption	Redemption
of Ca	tegory (2)	Redemption	Notice	Locked Up Until	Gate % of Account
Total	Subtotal	Frequency	Period	(if applicable)	(if applicable)
7.8%	7.8%	Annually	60 days	up to 2 years	up to 50.0%
44.6%	2.2%	Quarterly	45 days	up to 2 years	up to 20.0%
	30.0%	Quarterly	55- 65 days	up to 2 years	up to 12.5% - 50.0%
	12.4%	Quarterly	90 days	up to 1 year	up to 12.5% - 25.0%
41.1%	8.9%	M onthly	5 days	-	up to 20.0%
	21.3%	M onthly	30 - 45 days	-	up to 16.7 - 25.0%
	10.9%	M onthly	90 days	-	up to 20.0%
5.7%	5.7%	Weekly	3 days	-	-
0.8%	0.8%	Daily	1 day	-	-

- (3) This category includes investments in real estate funds that invest primarily in institutional-quality commercial and residential real estate assets within the U.S. and investments in publicly traded real estate investment trusts. Investments representing 19% of the value of investments in this category do not have provisions for redemptions during the life of these funds. Distributions will be received as the underlying investments of the funds are liquidated, estimated as of September 30, 2024, to be over the next 13 years.
- (4) This category includes investments in commingled funds that invest primarily in domestic and foreign debt and fixed income securities, the majority of which are traded in over-the-counter markets. Also included in this category are commingled fixed income funds that provide capital in a variety of mezzanine debt, distressed debt and other special debt securities situations. Investments representing approximately 16% of the value of investments in this category do not have provisions for redemptions during the life of these funds. Distributions will be received as the underlying investments of the funds are liquidated, estimated as of September 30, 2024, to be over the next four years.
- (5) This category includes investments in commingled funds that invest primarily in domestic or foreign equity securities with multiple investment strategies. A majority of the funds attempt to match or exceed the returns of specific equity indices. Investments representing approximately 68% of the value of investments in this category do not have provisions for redemptions during the life of these funds.

8. OTHER LONG-TERM ASSETS, NET

Other long-term assets, net, consist of the following (in millions):

	As of S 30,	As of June 30, 2024		
Notes receivable, primarily secured	\$	78	\$	92
Provider fee receivable, long-term		627		675
Goodwill		984		964
Intangible assets - definite-lived, net		98		101
Intangible assets - indefinite-lived		673		672
Donor-restricted assets		485		573
Other		390		285
Total other long-term assets, net	\$	3,335	\$	3,362

Goodwill is measured as of the effective date of a business combination as the excess of the aggregate of the fair value of consideration transferred over the fair value of the tangible and intangible assets acquired and liabilities assumed. See Note 3.

Intangible assets consist primarily of trademarks, trademark agreements, noncompete agreements, certificates of need, and other contracts, and are recorded at fair value using various methods based on the nature of the asset. Definite-lived intangible assets are amortized using the straight-line method over the estimated useful lives of the assets.

Goodwill and intangible assets whose lives are indefinite are not amortized and are evaluated for impairment at least annually or when circumstances indicate a possible impairment may exist. No impairment on goodwill or intangible assets was recorded for the three-month periods ended September 30, 2024 and 2023.

The aggregate amortization expense related to intangible assets is \$3 million for the three-month periods ended September 30, 2024 and 2023, respectively, and is recorded in depreciation and amortization in the accompanying condensed consolidated statements of operations and changes in net assets.

9. DEBT

Debt activity for the three-month periods ended September 30, 2024 and 2023, consist of the following:

2025 Financing Activity – In July 2024, CommonSpirit entered into a \$103 million term loan to redeem the Series 2019B-1 Washington Health Care Facilities Authority Revenue Bonds in full. The term loan is scheduled to mature in July 2026.

In July 2024, CommonSpirit issued \$160 million of taxable commercial paper notes. Proceeds were used to finance the purchase of certain previously leased real estate.

In August 2024, CommonSpirit drew \$200 million on its syndicated line of credit for working capital purposes.

In October 2024, CommonSpirit drew \$300 million on its syndicated line of credit for working capital purposes.

In October 2024, \$28 million of outstanding bond obligations were legally defeased due to the transferred ownership and control of associated clinics in San Francisco to The University of California-San Francisco Health.

In November 2024, CommonSpirit drew \$175 million on its syndicated line of credit for working capital purposes.

2024 Financing Activity – In July 2023, CommonSpirit drew \$265 million on its syndicated line of credit for the redemption in full of the Catholic Health Initiatives Series 2013D Taxable Bonds.

In August 2023, CommonSpirit entered into a \$265 million term loan to refinance the \$265 million draw on its syndicated line of credit. The term loan is scheduled to mature in August 2024.

10. DERIVATIVE INSTRUMENTS

The following table shows the outstanding notional amount of derivative instruments measured at fair value, net of credit value adjustments, as reported in the accompanying condensed consolidated balance sheets (in millions):

	Maturity Date of Interest Derivatives Rate		A	otional mount standing		nir lue
				As of Septem	ber 30, 202	4
Derivatives not designated as hedges Interest rate swaps	2025 - 2047	3.2% - 4.0%	\$	1,779	\$	(139)
Total return swaps Total derivative instruments Cash collateral Derivative instruments, net	2028 - 2030	SIFMA plus spread	\$	451 2,230 - 2,230	\$	(139) 40 (99)
Derivatives not designated as hedges Interest rate swaps	2025 - 2047	3.2% - 4.0%	\$	As of Jun	e 30, 2024 \$	(97)
Total return swaps Total derivative instruments Cash collateral Derivative instruments, net	2028 - 2030	SIFMA plus spread	<u> </u>	451 2,244 - 2,244	<u> </u>	(97) 27 (70)

CommonSpirit's interest rate swaps mature between 2025 and 2047. CommonSpirit has the right to terminate the swaps prior to maturity for any reason. The termination value would be the fair value or the replacement cost of the swaps, depending on circumstances. The derivative agreements have certain early termination triggers caused by an event of default or a termination event. The events of default include failure to make payment when due, failure to give notice of a termination event, cash on hand dropping below a specified number of days and defaults under other agreements (cross-default provision). Termination events can include credit ratings dropping below a defined minimum credit rating threshold by either party.

CommonSpirit has \$160 million notional of interest rate swaps that are insured and have a negative fair value of \$21 million as of September 30, 2024. In the event the insurer is downgraded below specified minimum credit rating, the counterparties have the right terminate the swaps if CommonSpirit Health does not provide alternative credit support acceptable to them within 30 days of being notified of the downgrade. If both the insurer and CommonSpirit Health are downgraded below a specified minimum credit rating, the counterparties have the right to terminate the swaps.

CommonSpirit has \$1.6 billion notional amount of interest rate swaps that are not insured, of which the counterparties have various rights to terminate \$251 million notional amounts outstanding. These include the outstanding notional amounts of \$100 million and \$91 million at each five-year anniversary date commencing in March 2028 and September 2028, respectively. Swaps in the outstanding notional amounts of \$60 million have a mandatory put in March 2028. The termination value would be the fair value or the replacement cost of the swaps, depending on the circumstances. These interest rate swaps with the optional and mandatory put options have a negative fair value of \$22 million as of September 30, 2024. The remaining uninsured swaps in the notional amount of \$1.4 billion have a negative fair value of \$96 million as of September 30, 2024.

In October 2024, CommonSpirit terminated \$10 million notional amount of total return swaps in connection with the defeased debt, as discussed in Note 9. The total return swaps were terminated at par with no gain or loss realized in connection with the early terminations.

11. LEASES

CommonSpirit enters into operating and finance leases primarily for buildings and equipment and determines if an arrangement is a lease at inception of the contract. For leases with terms greater than 12 months, CommonSpirit records the related right-of-use ("ROU") asset and lease liability at the present value of lease payments over the contract term using a risk-free interest rate, subject to certain adjustments. CommonSpirit does not separate contract lease and non-lease components except for a class of underlying assets related to supply agreements, which include associated equipment. Certain building lease agreements require CommonSpirit to pay maintenance, repairs, property taxes and insurance costs, which are variable amounts based on actual costs incurred during each applicable period. Such costs are not included in the determination of the ROU asset or lease liability. Lease costs also include escalating rent payments that are not fixed at commencement but are based on the Consumer Price Index or other measure of cost inflation. Future changes in the indices are included within variable lease costs. Certain leases include one or more options to renew the lease at the end of the initial term, with renewal terms that generally extend the lease at the then market rate of rental payment. Certain leases also include an option to buy the underlying asset at or a short time prior to the termination of the lease. All such options are at CommonSpirit's discretion and are evaluated at the commencement of the lease, with only those that are reasonably certain of exercise included in determining the appropriate lease term and lease type.

Following is supplemental condensed consolidated balance sheet information related to leases (in millions):

Lease Type Operating Leases:	Balance Sheet Classification	As of September 30, 2024			As of June 30, 2024	
Operating lease ROU assets	Right-of-use operating lease assets	\$	1,523	\$	1,687	
Operating lease obligations - current	Other accrued liabilities - current		269		269	
Operating lease obligations - long-term	Other liabilities: Operating lease liabilities		1,422		1,582	
Finance Leases:						
Finance lease ROU assets	Property and equipment, net	\$	1,663	\$	1,680	
Current finance lease liabilities	Current portion of long-term debt		107		104	
Long-term finance lease liabilities	Long-term debt, net of current portion		1,660		1,670	

12. INTEREST EXPENSE, NET

The components of interest expense, net, include the following (in millions):

	Three-Month Periods Ended September 30,						
	20	024	2023				
Interest and fees on debt	\$	196	\$	184			
Capitalized interest expense		(11)		(11)			
Interest expense, net	\$	185	\$	173			

13. RETIREMENT PROGRAMS

Total expense for all CommonSpirit retirement and post retirement plans includes service cost components and other nonservice net benefit credits. Service costs are recorded in salaries and benefits on the accompanying unaudited condensed consolidated statements of operations and changes in net assets. Other nonservice net periodic benefit credits are recorded in nonoperating income (loss) in the unaudited condensed consolidated statements of operations and changes in net assets.

Total retirement and post retirement plans expense includes the following (in millions):

	Three-Month Periods Ended September 30,					
	2	024		2023		
Service cost	\$	188	\$	179		
Other nonservice net benefit expense (credits)		(27)		33		
Retirement and postretirement plans expense	\$	161	\$	212		

14. COMMITMENTS, CONTINGENT LIABILITIES, GUARANTEES AND OTHER

The following summary encompasses matters related to litigation, regulatory and compliance matters, and developments thereto.

General – The health care industry is subject to voluminous and complex laws and regulations of federal, state and local governments. Compliance with such laws and regulations can be subject to future government review and interpretation as well as regulatory actions unknown or unasserted at this time. These laws and regulations include, but are not necessarily limited to, the rules governing licensure, accreditation, controlled substances, privacy, government program participation, government reimbursement, antitrust, anti-kickback, prohibited referrals by physicians, false claims, and in the case of tax-exempt organizations, the requirements of tax exemption. Management believes CommonSpirit is materially in compliance with all applicable laws and regulations of the Medicare and Medicaid programs. Compliance with such laws and regulations is complex and can be subject to future governmental interpretation as well as significant regulatory action, including fines, penalties and exclusion from the Medicare and Medicaid programs. Certain CommonSpirit entities have been contacted by governmental agencies regarding alleged violations of Medicare practices for certain services. Additionally, certain CommonSpirit entities have identified and self-disclosed potential instances of noncompliance with applicable regulations. In the opinion of management after consultation with legal counsel, the ultimate outcome of these matters will not have a material adverse effect on CommonSpirit's condensed consolidated financial statements.

In recent years, government activity has increased with respect to investigations and allegations of wrongdoing. In addition, during the course of business, CommonSpirit becomes involved in civil litigation. Management assesses the probable outcome of unresolved litigation and investigations and records contingent liabilities reflecting estimated liability exposure. Following is a discussion of matters of note.

Cybersecurity Incident – On October 2, 2022, CommonSpirit experienced a ransomware attack ("the Cybersecurity Incident") that impacted certain of its systems. Upon discovering the attack, CommonSpirit took immediate steps to protect its IT systems, contain the incident, begin an investigation, and maintain continuity of care. CommonSpirit engaged leading cybersecurity specialists to support its investigation, and notified law enforcement and the United States Department of Health and Human Services. In April 2023, CommonSpirit completed notifications to individuals whose data was potentially impacted by the Cybersecurity Incident.

The Cybersecurity Incident has had an estimated adverse financial impact of approximately \$160 million to date, which includes lost revenues from the associated business interruption, the costs incurred to remediate the issues and other related business expenses, and is exclusive of any potential insurance related recoveries. CommonSpirit's cyber insurers were immediately notified and CommonSpirit recorded insurance recoveries within unrestricted revenue of \$60 million during fiscal 2024, and \$5 million in the three-month period ended September 30, 2024. The insurance recovery process will continue through fiscal year 2025. CommonSpirit is unable to predict the final amount of insurance recoveries at this time.

The organization is aware of lawsuits filed as potential class actions against CommonSpirit regarding the Cybersecurity Incident. There can be no assurance that the resolution of this matter will not affect the financial condition or operations of CommonSpirit, taken as a whole.

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