#### ADVOCATE HEALTHCARE OF EAST BOSTON, LLC

#### DON APPLICATION # 19120215-CL LONG TERM CARE CONSERVATION PROJECT

#### **DECEMBER 4, 2019**

 $\mathbf{BY}$ 

ADVOCATE HEALTHCARE OF EAST BOSTON, LLC 111 ORIENT AVENUE EAST BOSTON, MASSACHUSETTS 02128

# ADVOCATE HEALTHCARE OF EAST BOSTON, LLC APPLICATION # 19120215-CL LONG TERM CARE CONSERVATION PROJECT

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### **ATTACHMENT 1**

### ADDITIONAL DON AND PATIENT PANEL DATA

#### **EXHIBIT 1**

#### ADVOCATE HEALTHCARE OF EAST BOSTON

#### **PATIENT PANEL**

The Facility experienced several years of difficulty as its former owner, the Order of the Sons of Divine Providence, struggled to find qualified management for the Facility. In 2015, an affiliate of the Applicant began management of the Facility, which resulted in a steady improvement in operations, both financial and in the quality of care. This improvement is shown in the historical resident days' trends.

Year	Level II	Level III	Total	% Change
2015	31,351	5,902	37,253	1
2016	36,050	6,460	42,510	14.11%
2017	36,840	7,540	44,380	4.40%
2018	36,672	7,529	44,201	(.40)%
2019*	38,119	9,072	47,191	6.76%

<sup>\*</sup>Based on 8-19 YTD numbers

The Facility's ongoing service to the community for more than half a century, coupled with its current demand trend supports the proposed Project. With this Project, the Facility can continue this trend of consistent improvement and achieve levels of financial stability that will permit the Applicant to further enhance its efforts to bring the physical plant into full compliance with current healthcare standards.

For the purposes of its planning relative to the Project, the Applicant conducted a review of the East Boston health needs in order to confirm the need for the Project. A number of the identified health issues impacting East Boston residents are particularly prevalent among older adults and reflected in the diagnoses of the Facility's residents. There is a higher prevalence of diabetes and hypertension, with 38.9% of the East Boston community having diabetes, compared to the state average of 31.7%, and 80.1% of East Bostonians over age sixty-five having hypertension, compared with the state average of 76.2%. 65.5% of the over-sixty-five population of East Boston is living with four or more chronic conditions, and 28.1% self-reported difficulty with independent living, nearly double the statewide measure of 14.3%. Also, East Boston experiences 128 skilled nursing facility stays per 1,000 residents over the age of sixty-five, compared to the State average of 106.3

Also, as a part of the evaluation of this Project, the Applicant considered population trends. The greater Boston region is expected to see continuous growth over the next twenty-five years, with an estimated 100,000 new residents every five years through 2025, 75,000 new residents from 2025 to 2030, and 57,000 new residents from 2030 to 2035. East Boston is experiencing a particularly high rate of growth,

<sup>&</sup>lt;sup>1</sup> 2018 MASSACHUSETTS HEALTHY AGING COMMUNITY PROFILE EAST BOSTON (SUFFOLK), MASSACHUSETTS HEALTHY AGING COLLABORATIVE, 1 (2018), <a href="https://mahealthyagingcollaborative.org/wp-content/themes/mhac/pdf/community">https://mahealthyagingcollaborative.org/wp-content/themes/mhac/pdf/community</a> profiles/MA Towncode352 East%20Boston.pdf.

<sup>&</sup>lt;sup>2</sup> Id. at 4.

<sup>3</sup> Id. at 5.

<sup>&</sup>lt;sup>4</sup> LONG-TERM POPULATION PROJECTIONS FOR MASSACHUSETTS REGIONS AND MUNICIPALITIES, UNIVERSITY OF MASSACHUSETTS DONAHUE INSTITUTE 37 (Mar. 2015), available at <a href="http://pep.donahue-institute.org/downloads/2015/new/UMDI">http://pep.donahue-institute.org/downloads/2015/new/UMDI</a> LongTermPopulationProjectionsReport 2015%2004%20 29.pdf.

with an increase of 17% from 2000 to 2015, which is higher than Boston's overall growth of 10%.<sup>5</sup> The increase in population is attributed to a natural increase, including more births than deaths and a longer life expectancy, as well as international immigration.<sup>6</sup> Boston is also expected to see a relatively higher share of elders over the next decade as Baby Boomers age in place, increasing from 12.7% of the population in 2010 to 18.4% of the population in 2035.<sup>7</sup>

These various factors informed the underlying need for and purpose of the Project, along with a review of historical demand for the Facility's services. The Facility's projections associated with the Project, indicate that the demand for its services will remain strong in the future. Historical data and the Applicant's projections for the future indicate continuing need for the Facility and the type of services provided. See Projection Assumptions and related Patient Panel data provided below.

#### PATIENT PANEL DATA AND PROJECTION ASSUMPTIONS

Resident Days: Historical and Projections

Year	Level II	Level III	Total	% Change
2015	31,351	5,902	37,253	-
2016	36,050	6,460	42,510	14.11%
2017	36,840	7,540	44,380	4.40%
2018	36,672	7,529	44,201	(.40)%
2019*	38,119	9,072	47,191	6.76%
2020	36,368	8,531	44,899	(4.86)%
2021	36,368	8,531	44,899	0
2022	36,268	11,646	47,914	6.72%
2023	36,268	11,646	47,914	0

#### **Length of Stay: Historical and Projections**

Year	ALOS	% Change
2015	227	
2016	197	(4.51)%
2017	222	(12.69)%
2018	216	(9.85)%
2019*	257	29.79%
2020	258	_
2021	258	-
2022	258	-
2023	258	_

<sup>&</sup>lt;sup>5</sup> EAST BOSTON, BOSTON PLANNING AND DEVELOPMENT AGENCY (2015), http://www.bostonplans.org/getattachment/28c2e99c-af11-47e0-b65e-b609fbdc44bd.

<sup>&</sup>lt;sup>6</sup> *Id.* at 37-38.

<sup>&</sup>lt;sup>7</sup> Id. at 40-41.

#### Resident Days by Payor

Year	Medicare	Medicaid	Other	Total
2015	3,506	32,136	1,611	37,253
2016	5,263	32,027	5,220	42,510
2017	4,410	36,665	3,305	44,380
2018	4,099	37,120	2,982	44,201
2019*	7,044	38,233	1,914	47,191
2020	4,490	36,368	4,041	44,898
2021	4,490	36,368	4,041	47,898
2022	5,750	37,852	4,312	47,914
2023	5,750	37,852	4,312	47,914

#### Resident Average Age and Sex

	Residents Average Age	% Male	% Female
2019*	73.13	55 %	45%

#### <u>Current Resident Origin-Cities/Towns More Than 5%</u>

City/Town	# of Residents	% of Total
E Boston	10	8%
Winthrop	21	17%
Boston	16	12%
Chelsea	12	9%
Revere	10	8%
Other	58	46%

<sup>\*</sup>Est. based on YTD August

### **ATTACHMENT 2**

# COMMUNITY RELATIVE TO COMMUNITY ENGAGEMENT

From: Wood, Ben (DPH) < ben.wood@state.ma.us > Sent: Wednesday, November 27, 2019 10:43 AM To: Nina Edwards < nedwards@barrettsingal.com >

Cc: Michaels, Margo I (DPH) < margo.i.michaels@state.ma.us >; Allen, Jennica F. (DPH) < jennica.f.allen@state.ma.us >;

Maffei, Elizabeth (DPH) < <u>elizabeth.maffei@state.ma.us</u>> **Subject:** RE: Advocate Healthcare of East Boston DoN

Hello Nina, 💈

Thanks for the email. This is to confirm that LTC applicants fulfill their community-based health initiative (CHI) requirement by contributing to the statewide Healthy Aging Fund. There are no application materials specific to CHI required for a LTC.

Thank you. Ben

Check out the new Population Health Information Tool (PHIT): https://www.mass.gov/dph/phit

Ben Wood, MPH
Director, Division of Community Health Planning and Engagement
Bureau of Community Health and Prevention
Massachusetts Department of Public Health
Phone: (413) 586-7525 ext.3130

Mobile: (413) 406-6429 Fax: (413) 784-1037 ben.wood@state.ma.us



nsaction or matter addressed herein.

# ATTACHMENT 3 INDEPENDENT CPA ANALYSIS



CliftonLarsonAllen LLP 300 Crown Colony Drive, Suite 310 Quincy, MA 02169 617-984-8100 | fax 617-984-8150 CLAconnect.com

November 25, 2019

Ms. Margo Michaels, Director Determination of Need Program Department of Public Health 250 Washington Street, 6<sup>th</sup> Floor Boston, MA 02108

RE: Determination of Need Application – Advocate Healthcare of East Boston, LLC

Dear Ms. Michaels,

The accompanying report is included as relevant additional financial information to assist the department in rendering a decision regarding the proposed construction project of Advocate Healthcare of East Boston, LLC (the "Company").

The report is intended solely for the information and use of management and members of the Company, and the Massachusetts Department of Public Health Determination of Need Program in its review of the Company's Determination of Need application under regulation 100.210 (4) a. It is not intended to be and should not be used by anyone other than these specified parties.

Please contact me should you have any questions or need further information.

Sincerely,

CLA (CliftonLarsonAllen)

Mark Cummings, CPA

Principal

617-984-8100

mark.cummings@CLAconnect.com



#### ADVOCATE HEALTHCARE OF EAST BOSTON, LLC

BENCHMARKING MANAGEMENT'S

PROJECTED FINANCIAL ANALYSIS

FOR THE INITIAL OPERATING PERIOD

NOVEMBER 1, 2019 THROUGH DECEMBER 31, 2019

AND FOR THE YEARS ENDING

DECEMBER 31, 2020 THROUGH DECEMBER 31, 2023

#### **PROCESS OVERVIEW**

#### **Management's Projections**

CliftonLarsonAllen LLP (CLA) was requested by the management of Advocate Healthcare of East Boston, LLC to read the financial projections prepared by Advocate Healthcare of East Boston, LLC ("Management" or "AHEB") for the initial operating period November 1, 2019 through December 31, 2019 and the years ending December 31, 2020 through 2023 and benchmark the stabilized year of Management's projection.

We have not compiled or examined any of the financial data utilized in the benchmarking analyses and express no assurance of any kind on it. Furthermore, even if the assumptions disclosed herein were to materialize, there will be differences between projected and actual results, because events and circumstances frequently do not occur as expected and those differences may be material. These analyses are intended for the internal use of Management and the Massachusetts Department of Health Determination of Need Program (DoN) and is not intended to be and should not be used or relied on by anyone other than these specified parties.

#### **BENCHMARK STAFFING AND COST ANALYSIS**

Providers in Suffolk County were used to benchmark Management's projections. AHEB's projected initial operating period of November 1, 2019 through December 31, 2019 was compared to Suffolk County Medicare and Medicaid cost report data for the most recent available period of 2018. The data was then projected out to 2023 with an applied 2% revenue inflation factor and 2% expense inflation factor.

#### **MANAGEMENT'S PROJECTIONS**

#### Occupancy/Payer Mix/Revenue per Patient Day

Projected revenue consists of revenue from operating the skilled nursing facility. Management's baseline projected revenue for the initial operating period of November 1, 2019 through December 31, 2019 and the year ending 2020 was derived from the interim financial data for 2019, current reimbursement and nursing home regulations and management's experience in the industry. This information was utilized to project and establish a baseline for the projection. Future years were projected utilizing assumptions for rate increases and operating expenses, and any known changes for operating the renovated facility during the Projection Period.

The following table summarizes the configuration of rooms before renovations and after the proposed renovations:

						<u> </u>			
	<u>Pre-Renovatior</u> Bed	<u> - 190 Beds</u>		Post Renovation - 165. Beds Bed					
Туре	Capacity	Inventory	Total Beds	Туре	Capacity	Inventory	Total Beds		
Private	1	21	21	Private	1	28	28		
Semi	2	18	36	Semi	2	37	74		
Three-Bedded	3	15	45	Three-Bedded	3	21	63		
Four-Bedded	4	22	88	Four-Bedded	4	0	0		
Total Beds			190	Total Beds			165		

Resident Room Configuration

#### Observations:

 The plan for this Determination of Need Application is for the replacement of critical systems and fixed equipment, and renovations addressing improved compliance with healthcare construction requirements for resident rooms and related service areas.

The following table summarizes AHEB's 2019 projected data compared to 2018 Suffolk County data for beds and occupancy, payer mix and revenue per patient day. The numbers are then inflated out for Suffolk County to compare to AHEB's projected year five which is 2023.

	2019	2018					2023			
	Advocate					Advocate	Suffolk, MA	Suffolk, MA	Suffolk, MA	
	Healthcare of East	Suffolk, MA	Suffolk, MA	Suffolk, MA	Inflation	Healthcare of	25th	50th	75th	
	Boston	25th percentile	50th percentile	75th percentile	Adjustment	East Boston	percentile	percentile	percentile	
Occupancy~						Ì				
Occupancy %	91.8%	86.7%	90.4%	93.3%		91.2%	86.7%	90.4%	93.3%	
Total SNF/NH Days	^7,503	27,479	35,642	42,823		47,914	27,479	35,642	42,823	
SNF Payor Mix (% of Days)						1				
Medicare FFS	10.0%	6.4%	8.7%	12.2%		12.0%	6.4%	8.7%	12.2%	
Medicaid	81.0%	48.2%	62.1%	68.3%		79.0%	48.2%	62.1%	68.3%	
Other (including MC Advantage)	9.0%	45.4%	29.2%	19.5%		9.0%	45.4%	29.2%	19.5%	
Revenue per Patient Day										
Medicare FFS	\$625	\$560	\$633	\$649	2.0%	\$677	\$618	\$699	\$717	
Other	\$241	\$228	\$242	\$279	2.0%	\$257	\$251	\$267	\$308	

<sup>~</sup> Based on active beds

#### **Observations:**

- AHEB's projected occupancy is above the median for the county both before and after the proposed project's completion
- Members of AHEB's ownership team have managed the facility since the middle of 2015, as shown in the table below, occupancy has steadily increased during that time
- Since 2017 AHEB's historical occupancy level has been at or above the median. The occupancy is projected to be consistent with these levels throughout the projection period
- AHEB's Medicare utilization is consistently above the median and is projected to remain at these levels during the projection period
- AHEB has consistently reported a Medicaid mix above the 75<sup>th</sup> percentile, see the historical data below on payer mix for AHEB where they have consistently displayed a higher Medicaid census than any other payer and are projected to continue that trend
- AHEB reports a lower non-Medicare rate due to its higher Medicaid mix

<sup>^</sup> November 1, 2019 to December 31, 2019

### Historical Average Occupancy December 31,

	2015	2016	2017	2018
Occupancy %	76.17%	86,46%	90.73%	90.70%

## Projected Average Occupancy December 31,

	*2019	2020	2021	2022	2023
Occupancy %	91.80%	91.80%	91.63%	91.16%	91.16%
* November 1, 2019 through D	ecember 31, 2019				

## Historical Average Payer Mix\* December 31,

	2015	2016	2017	2018
Private	3.00%	5.00%	4.00%	3.00%
Medicare	9.00%	12.00%	10.00%	9.00%
Medicaid	86.00%	78.00%	83.00%	84.00%
HMO/Other	2.00%	5.00%	3.00%	4.00%
Total	100.00%	100.00%	100.00%	100.00%

<sup>\*</sup>Massachusetts' Medicaid Cost Report Data

#### **EXPENSES**

Operating expenses have been projected to be recognized during the month incurred. Management's baseline projected expenses for the initial operating period of November 1, 2019 through December 31, 2019 and year ending 2020 were derived from interim financial data of the facility (managed by ownership prior to acquisition) for the current period, and Management's historical experience of operating the facility. This information was utilized to project and establish a baseline for the projection. The specific basis for inflationary increases in major expense categories were formulated by Management.

The following table summarizes AHEB's projected 2019 data compared to 2018 Suffolk County data expenses by department per patient day. The numbers are then inflated out for Suffolk County to compare to AHEB's projected year five which is 2023.

	2019	2019 2018				2023			
	Advocate Healthcare of East Boston	Suffolk, MA 25th percentile	Suffolk, MA SOth percentile	Suffolk, MA 75th percentile	Inflation Adjustment	Advocate Healthcare of East Doston	Suffolk, MA 25th percentile	Suffolk, MA 50th percentile	Suffolk, MA 75th percentile
Costs per Patient Day*									
Administration	\$76	\$49	\$63	\$81	2.0%	\$84	\$54	\$70	\$90
Plant	\$16	\$14	\$16	\$20	2.0%	\$19	\$15	\$17	\$22
Dietary	\$19	\$19	\$20	\$24	2.0%	\$20	\$21	\$22	\$27
Laundry	\$3	\$3	\$3	\$4	2.0%	\$5	\$3	\$4	\$5
Housekeeping	\$7	\$6	\$6	\$9	2.0%	\$7	\$6	\$7	\$10
Nursing	\$111	\$93	\$100	\$123	2.0%	\$120	\$103	\$111	\$136
Social Services	\$7	\$3	\$4	\$5	2.0%	\$8	\$3	\$4	\$6
Other General Services	\$4	\$3	\$4	\$6	2.0%	\$4	\$3	\$5	\$6
Total Costs	\$244	\$188	\$217	\$273		\$268	\$208	\$239	\$301

<sup>\*</sup>AHEB numbers include benefits which are included in Administration. Benchmark data excludes benefits. Additionally, Ancillary expenditures are excluded for both AHEB and the Benchmark data.

#### **Observations:**

- AHEB reports a cost structure between the median and 75<sup>th</sup> percentile both historically (see table below) and in its projections
- AHEB does not anticipate any significant change in cost structure due to the renovations, as their cost in comparison to the median remains consistent
- Plant costs are projected to increase due to projected higher real estate taxes as a result of the increased value of the building. In addition, various cost centers have increased slightly due to the increase in volume
- Historically, AHEB has had slightly higher nursing cost per patient day in comparison to the median
  for the county (as noted in the below table). As indicated this trend is projected to continue with no
  drastic change in the operating structure for patient care
- For purpose of this observation, It is assumed, with no other information on the future of various healthcare factors or changes, that the facilities in Suffolk County will make no changes in nursing staffing

The Following table summarizes the historical cost per patient day by department:

Historical Costs per Patient Day by Department\*

December 31.

De	centrel 31,	
	2017	2018
Administration	<u> </u>	\$75
Plant	23	16
Dietary	18	18
Laundry	4	3
Housekeeping	6	6
Nursing	103	108
Social Services	4	4
Other General Services	4	5
Total Costs	\$239	\$235

<sup>\*</sup>Massachusetts' Medicaid Cost Report Data

#### **KEY FINANCIAL RATIOS**

In performing this analysis both Medicare and Medicaid cost report data maintained by CMS and the Massachusetts Center for Health Information and Analysis (CHIA) was utilized, with the aid of a proprietary software application. This allowed management the ability to compare key financial ratios with those of similarly located facilities. The ratios below are a common tool used by financial institutions and the health care industry to evaluate the operations of a health care entity.

#### **Earnings before Interest, Depreciation and Amortization (EBIDA) Margin:**

EBIDA is a measure of a company's operating performance. Essentially, it's a way to evaluate a company's performance without having to factor in financing decisions, accounting decisions or tax environments. EBIDA Margin can be a meaningful gauge of a provider's ability to contain costs, it offers a clearer reflection of operations by stripping out expenses that can obscure how the company is really performing. EBIDA margin is calculated by dividing EBIDA by total revenue.

The greater a company's EBIDA Margin, the lower the company's operating expenses in relation to total revenue. EBIDA margin eliminates the non-operating profitability and cash flow. This margin is important in measuring performance across a single industry with companies of different size and tax situations.

The following chart shows the provider's projected EBIDA Margin against the Suffolk County Median EBIDA Margin.

2019		2018	
Advocate Healthcare of East Boston	Suffolk, MA 25th percentile	Suffolk, MA 50th percentile	Suffolk, MA 75th percentile
7.3%	-3.3%	1.6%	8.8%

Advocate Suffolk, MA Suffolk, MA Suffolk, MA Fast Boston Percentile Percentil

**EBIDA** 

#### **Observations**

- AHEB is projecting EBIDA above the median in both 2019 and 2023
- Additionally, for both 2019 and 2023 AHEB's projected EBIDA is approaching the top quartile
- Note: To derive the EBIDA inflation factor for Suffolk County, the % change applicable in EBIDA margin for AHEB was applied to Suffolk County. In this instance, there was no change

#### **Operating and Capital Budgets**

In Benchmarking management's projected financial analysis, we analyzed and considered AHEB's past and present operating and capital budgets. Note, AHEB only acquired the license to operate the facility on November 1, 2019 so there are no past operating and capital budgets. Ownership however, did manage the facility prior to acquisition, and the past and present operating budgets are consistent with the results contained in management's projected financial analysis as indicated by the tables presented previously in the report. Additionally, management has no significant plans at this time to materially alter operations, thus impacting care.

AHEB does not maintain formal capital budgets. However, except for the first year following construction, a review of past and present capital expenditures indicates that AHEB intends to invest in the built environment of the residents at amounts consistent with or greater than prior spending levels.

			1	Planned
	2017	2018		2023
Capital Expenditures	\$ 55,919	\$ 96,491	\$	100,000

#### **Balance Sheets**

In benchmarking management's projected financial analysis, we analyzed AHEB's balance sheets. We analyzed AHEB's projected days cash on hand ratio for 2019 and the last year of the projection, 2023. Note as indicated previously AHEB acquired the license to operate the facility on November 1, 2019, there are no prior balance sheets to compare. AHEB's days cash on hand ratio starts slightly higher than the median at December 31, 2019 and is approaching the top quartile by 2023, the last year of the projection. The days cash on hand ratio is a liquidity ratio that indicates an entity's ability to satisfy its current operating expenses with the current cash available.

2019		2018	
Advocate Healthcare of East Boston		Suffolk, MA 50th percentile	Suffolk, MA 75th percentile
25.5	9.7	20.6	91.5

2023								
Advocate Healthcare of East Boston		Suffolk, MA 50th percentile	Suffolk, MA 75th percentile					
43.2	9.7	20.6	91.5					

Days Cash on Hand

Absent specific operating conditions and criteria, Suffolk County days cash on hand data was assumed to remain constant

#### ADVOCATE HEALTHCARE OF EAST BOSTON, LLC

## PROJECTED FINANCIAL STATEMENTS AND INDEPENDENT ACCOUNTANTS' COMPILATION REPORT

INITIAL OPERATING PERIOD NOVEMBER 1, 2019 THROUGH DECEMBER 31, 2019 YEARS ENDING DECEMBER 31, 2020 THROUGH 2023

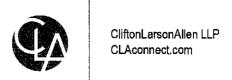


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#### ADVOCATE HEALTHCARE OF EAST BOSTON, LLC TABLE OF CONTENTS YEARS ENDING DECEMBER 31, 2019 THROUGH 2023

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#### INDEPENDENT ACCOUNTANTS' COMPILATION REPORT

Members Advocate Healthcare of East Boston, LLC 35 Avco Road Haverhill, MA 01835

Management is responsible for the accompanying projected financial statements of Advocate Healthcare of East Boston, LLC (the "Company"), which comprise the projected balance sheets as of December 31, 2019, 2020, 2021, 2022, and 2023, and the related projected statements of operations and changes in members' capital, and cash flows for the projected initial operating period of November 1, 2019 through December 31, 2019 and the projected years ending December 31, 2020, 2021, 2022, and 2023, and the related summaries of significant assumptions and accounting policies in accordance with the guidelines for presentation of a financial projection established by the American Institute of Certified Public Accountants (AICPA) (the "Projection"). We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. We did not examine or review the projected financial statements, nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on these projected financial statements or the assumptions.

Furthermore, even if the Company can complete the construction the Project (as defined in the summaries of significant assumptions and accounting policies) at the costs and timeline presented hereafter and is able to achieve the operating assumptions, collectively, the "Hypothetical Assumptions", there will usually be differences between the projected and actual results because events and circumstances frequently do not occur as expected, and those differences may be material. We have no responsibility to update this report for events and circumstances occurring after the date of this report.

The accompanying Projection, and this report, are intended solely for the information and use of management, officers and members of the Company, and the Massachusetts Department of Public Health Determination of Need Program (DPH-DoN) in its review of the Determination of Need application under regulation 105 CMR 100.210 (4) (a) and is not intended to be and should not be used by anyone other than these specified parties.

CliftonLarsonAllen LLP

lifton Larson Allen LLP

Boston, Massachusetts November 25, 2019



# ADVOCATE HEALTHCARE OF EAST BOSTON, LLC PROJECTED BALANCE SHEETS UNDER THE HYPOTHETICAL ASSUMPTIONS DESCRIBED IN NOTE 1 DECEMBER 31, 2019 THROUGH 2023 (000S OMITTED)

ASSETS	2019	2019 2020 2021		2021	2022		2023		
CURRENT ASSETS Cash Accounts Receivable, Net Total Current Assets		888 ,640 ,528	\$	1,039 1,709 2,748	\$	1,228 1,781 3,009	\$	1,509 1,859 3,368	\$ 1,746 1,939 3,685
PROPERTY AND EQUIPMENT Land Building and Improvements Equipment & Furniture  Accumulated Depreciation Property and Equipment, Net	3	300 ,406 <u>225</u> ,931 (21)		300 3,406 325 4,031 (149) 3,882		300 12,675 951 13,926 (540) 13,386		300 12,675 1,051 14,026 (1,194) 12,832	 300 12,675 1,151 14,126 (1,848) 12,278
CONSTRUCTION IN PROGRESS  Total Assets		338 ,776	\$	6,380 13,010	\$	16,395	\$	16,200	\$ 15,963
CURRENT LIABILITIES CURRENT LIABILITIES CURRENT Maturities of Long-Term Debt Accounts Payable and Accrued Expenses Due to Related Parties Note Payable Total Current Liabilities	3	,655 620 ,400 ,675	\$	11 2,708 620 3,400 6,739	\$	65 2,598 620 3,400 6,683	\$	69 2,482 620 3,400 6,571	\$ 72 2,305 620 3,400 6,397
LONG-TERM DEBT, Net Total Liabilities	6	,700		6,056 12,795		7,838 14,521		7,773 14,344	 7,705 14,102
MEMBERS' CAPITAL		76		215		1,874		1,856	 1,861
Total Liabilities and Members' Capital	\$ 6	,776	\$	13,010	\$	16,395	\$	16,200	\$ 15,963

# ADVOCATE HEALTHCARE OF EAST BOSTON, LLC PROJECTED STATEMENTS OF OPERATIONS UNDER THE HYPOTHETICAL ASSUMPTIONS DESCRIBED IN NOTE 1 INITIAL OPERATING PERIOD NOVEMBER 1, 2019 THROUGH DECEMBER 31, 2019 YEARS ENDING DECEMBER 31, 2020 THROUGH 2023 (000S OMITTED)

	2	2019	:	2020	:	2021	2022		2023	
REVENUE				•		_				-
Private	\$	96	\$	588	\$	609	\$	651	\$	664
Medicaid		1,411		8,441		8,698		9,141		9,324
Medicare Part A		469		2,870		3,130		3,814		3,890
Commercial		122		747		774		826		843
Part B - Therapy		80		490		500		510		520
Adult Day Care		103		630		643		656		669
Total Patient Service Revenue		2,281		13,766		14,354		15,598		15,910
Other Income		3_		18		18		18		18
Total Revenue		2,284		13,784		14,372		15,616		15,928
EXPENSES										
Administration		567		3,631		3,744		3,939		4,018
Plant		131		857		852		895		913
Dietary		145		887		909		940		959
Laundry & Linen		25		153		172		223		227
Housekeeping		54		330		330		316		322
Nursing		702		4,327		4,469		4,725		4,820
Nursing Support		127		860		881		911		929
Social Services/Admissions		54		355		363		373		380
Recreation Therapy		28		171		176		183		187
Ancillary Costs		203		1,242		1,303		1,439		1,468
Adult Day Care		79		483		493		503		513
Interest		21		129		303		533		530
Depreciation		21		128		391		654		654_
Total Expenses		2,157		13,553		14,386		15,634		15,920
NET INCOME (LOSS)	\$	127	\$	231	\$	(14)		(18)	\$	8

# ADVOCATE HEALTHCARE OF EAST BOSTON, LLC PROJECTED STATEMENTS OF CHANGES IN MEMBERS' CAPITAL UNDER THE HYPOTHETICAL ASSUMPTIONS DESCRIBED IN NOTE 1 INITIAL OPERATING PERIOD NOVEMBER 1, 2019 THROUGH DECEMBER 31, 2019 YEARS ENDING DECEMBER 31, 2020 THROUGH 2023 (000S OMITTED)

	2019		 2020	2021		 2022	2023	
Beginning Balance - Members' Capital	\$	-	\$ 76	\$	215	\$ 1,874	\$	1,856
Net Income (Loss)		127	231		(14)	(18)		8
Distributions		(51)	(92)		-	-		(3)
Contributions			 		1,673	 		
Ending Balance – Members' Capital	\$	<u>76</u>	\$ 215	\$	1,874	\$ 1,856	\$	1,861

# ADVOCATE HEALTHCARE OF EAST BOSTON, LLC PROJECTED STATEMENTS OF CASH FLOWS UNDER THE HYPOTHETICAL ASSUMPTIONS DESCRIBED IN NOTE 1 INITIAL OPERATING PERIOD NOVEMBER 1, 2019 THROUGH DECEMBER 31, 2019 YEARS ENDING DECEMBER 31, 2020 THROUGH 2023 (000S OMITTED)

	:	2019		2020		2021		2022	2	023
CASH FLOWS FROM OPERATING ACTIVITIES	•	407		074	•	(4.4)		(40)	•	•
Net Income (Loss) Adjustments to Reconcile Net Income (Loss) to	\$	127	\$	231	\$	(14)	\$	(18)	\$	8
Net Cash Provided by Operating Activities:										
Depreciation and Amortization		21		128		395		658		658
(Increase) Decrease in Accounts Receivable		(46)		(69)		(72)		(78)		(08)
Increase (Decrease) in Accounts Payable and Accrued Expenses		8		53		(110)		(116)		(177 <u>)</u>
Net Cash Provided by Operating Activities		110		343		199		446		409
CASH FLOWS FROM INVESTING ACTIVITIES										
Purchase of Property and Equipment		-		(100)		(3,515)		(100)		(100)
Construction in Progress				(6,042)				-		-
Net Cash Used by Investing Activities		-		(6,142)		(3,515)		(100)		(100)
CASH FLOWS FROM FINANCING ACTIVITIES										
Proceeds from Contributed Capital		-		-		1,673		-		-
Distributions		(51)		(92)		-		-		(3)
Deferred Financing Costs Proceeds from Assets Acquired		- 429		(158)		-		-		-
Proceeds from Note Payable		400		_		-		-		-
Proceeds from Long Term Debt				6,200		1.843		-		_
Repayment of Long Term Debt		-		-,		(11)		(65)		(69)
Net Cash Provided (Used) by Financing Activities		778		5,950		3,505		(65)		(72)
NET INCREASE IN CASH		888		151		189		281		237
Cash - Beginning of Year				888		1,039		1,228		1,509
CASH - END OF YEAR	\$	888	\$	1,039	\$	1,228	\$	1,509	\$	1,746
REQUIRED SUPPLEMENTAL DISCLOSURE										
OF CASH FLOW INFORMATION										
Interest	<u>\$</u>	21	\$	129	\$	299	\$	529	\$	526
SUPPLEMENTAL DISCLOSURE OF NONCASH INVESTING										
AND FINANCING ACTIVITIES										
Property and Equipment Acquired	\$	(3,000)	\$	_	\$	_	\$	-	\$	_
Note Payable Acquired	\$	3,000	\$		\$		\$	_	\$	
Noncash Assets Acquired	\$	(2,838)	\$		\$	-	\$		\$	-
Noncash Liabilities Assumed	\$	3,267	\$		\$	_	\$	-	\$	
Construction in Progress Placed in Service	<u></u>		\$	-	\$	6,380	\$		<u> </u>	
	_		<u> </u>		<u> </u>		<u> </u>		<u> </u>	

#### NOTE 1 BASIS OF PRESENTATION AND NATURE AND LIMITATIONS OF PROJECTIONS

#### **Basis of Presentation**

The financial projection (the "Projection") presents, to the best of the knowledge and belief of management ("Management") of Advocate Healthcare of East Boston, LLC, (the "Applicant", or the "Company"), the expected financial position as of December 31, 2019 through 2023, and the expected results of operations and cash flows for the initial operating period November 1, 2019 through December 31, 2019 and the years ending December 31, 2020 through 2023 (the "Projection Period").

A projection although similar to a forecast, is a presentation of prospective financial information that is subject to one or more hypothetical assumptions. Management has included several assumptions that are considered to be hypothetical assumptions as defined by the American Institute of Certified Public Accountants' *Guide for Prospective Financial Information*.

Management's hypothetical assumptions (the "Hypothetical Assumptions") are as follows:

- The Applicant is able to develop, market, construct, and complete the proposed substantial renovation (the "Project", as defined more fully hereinafter).
- The Applicant is able to obtain all regulatory approvals for construction of its Project.
- The Applicant is able to obtain debt financing (the "Financing") via a construction loan for approximately \$8,043,000 (the "Construction Loan") consistent with the plans presented in this Summary of Significant Projection Assumptions and Accounting Policies.
- The Applicant is able to achieve the occupancy, payer mix, and average rates detailed in Note 4. If this is not achieved it may significantly impact the Projection results.
- The Applicant is able to maintain its projected operating structure and limit the additional expenses associated with operating the facility under the completed Project model to the scenario as outlined in Note 4.

## NOTE 1 BASIS OF PRESENTATION AND NATURE AND LIMITATIONS OF PROJECTIONS (CONTINUED)

#### **Basis of Presentation (Continued)**

Accordingly, the Projection reflects Management's judgement as of November 25, 2019 the date of the Projection, of the expected conditions and its expected course of action assuming the Hypothetical Assumptions. The assumptions disclosed herein, while not all-inclusive, are the assumptions which Management believes are significant to the Projection. The prospective results may not be achieved. Furthermore, even if the Hypothetical Assumptions were to occur, there will usually be differences between the projected and actual results, because events and circumstances frequently do not occur as expected, and those differences may be material.

#### NOTE 2 NATURE OF THE ORGANIZATION AND PROJECT DESCRIPTION

#### Nature of the Organization

Advocate Healthcare of East Boston, LLC, is a limited liability company that acquired the real estate and license to operate a 190-bed skilled nursing home and adult day care program located in East Boston, Massachusetts on November 1, 2019.

#### **Project Description**

The Applicant is submitting a request for a Notice of Determination of Need ("DoN") for a substantial capital expenditure in connection with planned renovations to the property located at 111 Orient Avenue in East Boston, Massachusetts (the "Facility"). The planned construction to be undertaken by the Applicant will include replacement of critical systems and fixed equipment, and renovations addressing improved compliance with health care construction requirements for resident rooms and related service areas. As a result of the Project, the total number of beds at the Facility will change as noted in the "Resident Room Configuration" table on page 8.

Construction is expected to begin during 2020 and is anticipated to be completed by the third quarter of 2021. The Projection presentation reflects the Project assets being placed in service by October 1, 2021. Additionally, the majority of the associated debt utilized to fund the Project is assumed to be incurred in 2020. The remaining \$1,843,000 of associated debt and approximately \$1,673,000 of equity contributions from members are assumed to occur in 2021.

The total Project costs assumed in the Projections are approximately \$10,053,000.

#### NOTE 2 NATURE OF THE ORGANIZATION AND PROJECT DESCRIPTION (CONTINUED)

#### **Project Description (Continued)**

The following table summarizes the configuration of rooms before renovations and after the proposed renovations of the Facility:

			Resident Roo	m Configuration			
	Pre-Renovation Bed	1- 190 Beds		1	Post Renovation Bed	ı - 165. Beds	
Туре	Capacity	Inventory	Total Beds	Туре	Capacity	Inventory	Total Beds
Private	1	21	21	Private	1	28	28
Semi	2	18	36	Semi	2	37	74
Three-Bedded	3	15	45	Three-Bedded	3	21	63
Four-Bedded	4	22	88	Four-Bedded	4	0	0
Total Beds			190	Total Beds			165

#### NOTE 3 LONG TERM DEBT, FINANCING AND NOTE PAYABLE

The accompanying Projection assumes that the Project will be financed by the Construction Loan, secured by a second mortgage on the real property, in the amount of approximately \$8,043,000, and contributed capital of approximately \$1,673,000. Additionally, approximately \$337,000 of existing pre-planning construction in progress costs were funded prior to the Projection Period. The interest rate assumed in the Projection for the Construction Loan is 5.0%. Payments on the Construction Loan are assumed to be interest only through completion of the Project. Subsequent to the Project completion, it is assumed the Construction Loan will be payable in monthly installments of principal and interest of approximately \$39,000 and mature on October 1, 2061. Any material changes in the terms of the actual Construction Loan would impact the results of the Projection. The Projection assumes an existing note payable executed November 1, 2019 of approximately \$3,400,000, remains payable throughout at an estimated interest rate of 2.88%, which is the current rate on the debt. Payments on the note are assumed to be interest only throughout the Projection Period. The note matures in a year, thus has been presented as current throughout the Projection Period. The note payable is secured by a first mortgage on the real estate and collateralized for the full amount by the majority member.

The following are assumed current maturities of long-term debt for each of the next five years:

	Ass	sumed
	Cı	ırrent
Projected Year Ending December 31,	Mat	urities
2020	\$	-
2021		11,000
2022		65,000
2023		69,000
2024		72,000

#### NOTE 4 MANAGEMENT'S BASIS FOR PROJECTION OF REVENUES AND EXPENSES

Projected revenue consists of revenue from operating the Facility and the adult day care program. Prior to acquiring the facility, the ownership group managed the Facility. Thus, Management's baseline projected revenue and expenses for the initial operating period and 2020 were derived from interim financial data for the current period, and management's historical experience of operating the Facility. This information was utilized to project and establish a baseline for the initial operating period of November 1, 2019 through December 31, 2019 and year ending 2020. Future years were projected utilizing assumptions for rate increases and operating expenses, and any known changes for operating the renovated Facility during the Projection Period.

The following tables summarize the current and projected baseline payer mix and per diems:

Private Medicare Medicaid HMO				-	Current Payer Mi 4.0 10.0 81.0 5.0	00 % \$ 00 % \$ 00	Per Diem 320 625 232 325
Total				=	100.00 %		
	11/1/2019- 9/30/2021 Projected	10/1/2021- 12/31/2023 Projected	2019	2020	2021	2022	2023
Duitteda	Payer Mix	Payer Mix	Per Diem	Per Diem	Per Diem	Per Diem	Per Diem
Private Medicare	4.00 % 10.00	4.00 % 12.00	\$ 320 625	\$ 327 639	\$ 334 653	\$ 340 663	\$ 346 677
Medicaid	81.00	79.00	232	232	237	241	246
HMO	5.00	5.00	325	332	339	345	352
Total	100.00 %	100.00 %					

The following tables summarize the historical and projected occupancy at December 31:

		2015	2016	2017	2018
Occupancy %		76.17%	86.46%	90.73%	90.72%
Based on Active Bed	S				
	2019	2020	2021	2022	2023
Occupancy %	91.80%	91.80%	91.63%	91.16%	91.16%
Total Davs	* 7,503	44.898	45.659	47.914	47.914

<sup>\*</sup> November 1, 2019 through December 31, 2019 Based on Active Beds

## NOTE 4 MANAGEMENT'S BASIS FOR PROJECTION OF REVENUES AND EXPENSES (CONTINUED)

Management calculated the baseline revenues for the initial operating period of November 1, 2019 through December 31, 2019 utilizing current reimbursement and economic conditions, and current nursing home regulations. In the subsequent years of the Projection Period (years ending December 31, 2020-2023), Management applied a 2% rate increase per year across all payer classes, except Medicaid in 2020, for which no increase was applied. The projection assumes an average daily census of 123.01 for the initial operating period of November 1, 2019 through December 31, 2019, year ending December 31, 2020, and through September 30, 2021. Thereafter, the projected average daily census is 131.27. Additionally, the projection assumes a slight change in the case mix on October 1, 2021 upon completion of the project.

Effective October 1, 2019, the Medicare reimbursement system for skilled nursing facilities underwent a significant change in methodology. Management's projected Medicare revenue was based on the existing reimbursement methodology. The impact of the new reimbursement methodology on projected revenue can't be determined at this time.

#### Other Revenue Items

Other revenue items include Adult Day Care and Medicare Part B services. These are assumed to increase based on the consumption of services and for general inflation assumed to be approximately 2% annually during the Projection Period.

#### **Operating Expenses**

Operating expenses have been projected to be recognized during the month incurred. Management's baseline projected expenses for the initial operating period of November 1, 2019 through December 31, 2019 and year ending 2020 were derived from interim financial data of the facility operations (managed by ownership prior to acquisition) for the current period and Management's historical experience of operating the facility. This information was utilized to project and establish a baseline for the initial operating period November 1, through December 31, 2019 and 2020. In subsequent years, in general, operating expenses are projected to increase 2% annually for salaries and benefits and nonwage costs throughout the projection period. The specific basis for inflationary increases in major expense categories were formulated by Management and are discussed below.

#### Salaries and Related Taxes and Benefits

A full time equivalent employee ("FTE") is assumed to represent 2,080 hours of time paid annually. Salaries were assumed to increase 2% annually during the Projection Period. Employee benefits such as federal and state payroll taxes, health insurance, workers compensation, pension costs, and other miscellaneous benefits for the entire Facility were assumed to approximate 13% of wages during the Projection Period. Commencing in October of 2021, and January of 2022 approximately \$119,000 and \$356,000, respectively, in additional salaries and related benefit costs were added to projected expenses to account for the additional resources necessary upon completion of the Project.

## NOTE 4 MANAGEMENT'S BASIS FOR PROJECTION OF REVENUES AND EXPENSES (CONTINUED)

#### Administration

Management has projected nonsalary costs of general and administrative services to include property and liability insurance, management fees, accounting and legal fees, computer expenses, human resources, professional fees, telephone and internet service, marketing costs and other miscellaneous costs associated with administrative services. Generally, these costs are anticipated to increase 2% annually throughout the Projection Period for inflation. Additionally volume increases of approximately \$30,000 and \$88,000 in 2021 and 2022, respectively, are included in the projection.

#### **Dietary**

Nonsalary cost of dining services relate to the projected costs for providing food services to the residents, including raw food, dietary supplies and other such costs. Management assumes that these costs would vary with occupancy levels. Additionally, these costs are anticipated to increase at 2% annually throughout the Projection Period. Additionally operational decreases of approximately \$2,500 and \$7,500 in 2021 and 2022, respectively, are included in the projection.

#### Plant Operations, Housekeeping, & Laundry and Linen

Nonsalary related costs of plant, housekeeping, and laundry and linen operations are projected to include the cost of service contracts, repairs, supplies and other miscellaneous costs associated with providing these services. In addition, these costs are anticipated to increase at 2% annually throughout the Projection Period for inflation. Additionally operational decreases of approximately \$28,000 and \$84,000 in 2021 and 2022, respectively, are included in the projection.

#### **Utilities and Real Estate Taxes**

Utilities and real estate taxes are included under the caption Plant on the Projected Statement of Operations. Nonsalary related utility costs are projected to include the cost of gas and oil, electricity, water, and sewer services, and trash removal. In addition, these costs are anticipated to increase at 2% annually throughout the Projection Period for inflation.

Real estate taxes were estimated based on current rates and assumed to increase 2% annually throughout the Projection Period. Additionally, commencing in 2022, an estimated increase of approximately \$100,000 per year was included in the projected Statement of Operations to account for the estimated increase in the assessment value of the property.

#### Nursing Support, Social Services, Recreation, & Ancillaries

Nonsalary related health service costs are projected based upon Management's estimate of the cost of nursing supplies, ancillary supplies, consultants, and other miscellaneous costs associated with providing health care services. Management assumes that these costs would vary with changes in occupancy levels. These costs are anticipated to increase 2% annually throughout the Projection Period. Additionally, operational increases of approximately \$9,000 and \$28,000 in 2021 and 2022, respectively are included in the projection.

## NOTE 4 MANAGEMENT'S BASIS FOR PROJECTION OF REVENUES AND EXPENSES (CONTINUED)

#### Depreciation

Property and equipment are projected to be depreciated over the estimated useful lives by the straight-line method.

#### **Operating Assets and Liabilities**

The accompanying Projection assume an increase of 2% of revenue to the accounts receivable balance in the initial operating period and .50% throughout the subsequent years of the Projection Period. Accounts payable is assumed to be 20% of total expenses net of depreciation, interest, real estate taxes, and income taxes (projected accounts payable) in each of the Projection years. Additionally, the accounts payable balance is projected to increase by 2% of the projected accounts payable in the initial operating period and 2020 and decrease by 4% in each of the subsequent Projection years. Excess cash flow generated is assumed to increase cash except as noted above.

All other items, if any, were assumed to be constant during the Projection Period.

#### NOTE 5 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### **Basis of Accounting**

The Company maintains its accounting and financial records according to the accrual basis of accounting.

#### **Property and Equipment**

Property and equipment are recorded at cost. Depreciation is computed using the straight-line method over the estimated useful life of the assets. The Company reviews long-lived assets for impairment whenever events or changes in circumstances indicate the carrying amount of an asset may not be recoverable.

Recoverability of assets to be held and used is measured by a comparison of the carrying amount of an asset to the future undiscounted net cash flows expected to be generated by the asset. If such assets are considered to be impaired, the impairment to be recognized is measured by the amount by which the carrying value of the assets exceeds the fair value of the assets. Assets to be disposed of are reported at the lower of carrying amount or the fair value less costs to sell. No impairment losses were recorded in the Projection.

#### **Due to Related Parties**

The Company has a related party payable of approximately \$620,000 to a member with no fixed repayment terms. It is assumed the balance will remain constant throughout the projection period. Interest on the above loan was estimated at 5% throughout the projection.

#### NOTE 5 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

#### Due to Related Parties (Continued)

Additionally, the projection includes management fee expense to a related party estimated at 4% of revenues for 2019 and 5% of revenues thereafter.

The projection includes distributions to members to cover estimated income tax liabilities derived from projected net income.

#### Cash and Cash Equivalents

The Company considers all short-term debt securities purchased with an original maturity of three months or less to be cash or cash equivalents.

#### Accounts Receivable

Accounts receivable are recorded net of an allowance for expected losses. The allowance is estimated from historical performance and projections of trends. Credit is extended to customers and collateral is not required. The Company determines delinquent accounts based on individual facts and circumstances. The Company does not plan to charge interest on accounts that are deemed to be delinquent.

#### **Income Taxes**

The projection does not include a provision for income taxes because the Company does not incur federal or state income taxes. Instead, its earnings and losses are included in the members' personal income tax returns and are based on their personal tax strategies.

#### **Estimates**

The preparation of projected 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 projected financial statements and reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

#### **Promotional Advertising**

Promotional advertising costs are expensed as incurred.

#### **Deferred Financing Costs**

Deferred financing costs are amortized over the period the obligation is outstanding using the effective interest method, and is reflected as a component of interest expense.

#### NOTE 5 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

#### New Accounting Pronouncements

In May 2014, the FASB issued ASU 2014-09, Revenue from Contracts with Customers. The guidance requires the Company to recognize revenue to depict the transfer of goods or services to customers in an amount that reflects the consideration to which the Company expects to be entitled in exchange for those goods or services. The guidance also requires expanded disclosures relating to the nature, amount, timing, and uncertainty of revenue and cash flows arising from contracts with customers. Additionally, qualitative and quantitative disclosures are required regarding customer contracts, significant judgments and changes in judgments, and assets recognized from the costs to obtain or fulfill a contract. ASU 2014-09 is effective for fiscal years, and interim periods within those years, beginning after December 15, 2018. The Projection assumes the Company adopted ASU 2014-09 during the Projection period.

ASU 2014-09 requires the Company to exercise more judgment and recognize revenue using a five-step process. The Projection assumes the Corporation adopted ASU 2014-09 using the modified retrospective method for all contracts prior to the Projection Period and is using a portfolio approach to group contracts with similar characteristics and analyze historical cash collections trends. Modified retrospective adoption requires entities to apply the standard retrospectively to the most current period presented in the financial statements, requiring the cumulative effect of the retrospective application as an adjustment to the opening balance of equity at the date of initial application. The Projection does not reflect any cumulative-effect adjustment in members' equity as there is no prior period shown in the projection.

#### **Patient Services Revenue**

Agreements with third-party payers typically provide for payments at amounts less than established charges. A summary of the payment arrangements with major third-party payers follows:

#### Medicare

Currently, the Facility participates in the Medicare program. This federal program is administered by the Centers for Medicare and Medicaid Services (CMS). Through September 30, 2019, The Facility was paid under the Medicare Prospective Payment System (PPS) through an insurance intermediary for residents who are Medicare Part A eligible and meet the coverage guidelines for skilled nursing facility services. The PPS is a per diem price-based system. Annual cost reports are required to be submitted to the designated Medicare Administrative Contractor; however, they do not contain a cost settlement.

The federal rates utilize facility case-mix resident assessment data, completed by the Facility, to assign patients into a Resource Utilization Group (RUGs). The Facility must complete the resident assessments according to a specific time schedule designed for Medicare payment. Organizations that do not comply with this requirement will be paid at a default payment (the lowest of the federal rates) for the days of a patient's care for which the organization is not in compliance.

#### NOTE 5 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

#### Patient Services Revenue (Continued)

#### Medicare (Continued)

The PPS program mandates the implementation of fee schedules for Facility therapy services to residents not in a covered Part A stay and to nonresidents who receive outpatient rehabilitation services from the Facility. The Centers for Medicare and Medicaid Services imposed a limit for both physical therapy (including speech therapy) and occupational therapy services. However, an exception may be granted to the limit if the patient meets certain criteria.

Effective October 1, 2019, the Medicare reimbursement system for skilled nursing facilities underwent a significant change in methodology. Management's projected Medicare revenue was based on the existing reimbursement methodology. The impact of the new reimbursement methodology on projected revenue can't be determined at this time.

#### Medicaid - Standard Payments to Nursing Facilities

The Company receives reimbursement from the Commonwealth of Massachusetts under a standard rate of reimbursement payment system for the care and services rendered to publicly aided patients pursuant to regulations promulgated by the Center for Health Information and Analysis. Under the regulations, current year rates are a combination of actual base year costs blended with industry standards adjusted for inflation. The base year costs are subject to audit and may result in a retroactive rate adjustment for the current year.

#### Private/HMO/Other

Payment agreements with private residents and certain commercial insurance carriers provide for payment using prospectively determined daily rates. Revenue from these payer classes are recorded at the estimated net realizable amounts.

Settlements with third-party payers for retroactive adjustments due to audits, reviews, or investigations are considered variable consideration and are included in the determination of the estimated transaction price for providing patient care. These settlements are estimated based on the terms of the payment agreement with the payer, correspondence from the payer and the Company's historical settlement activity, including an assessment to ensure that it is probable that a significant reversal in the amount of cumulative revenue recognized will not occur when the uncertainty associated with the retroactive adjustment is subsequently resolved. Estimated settlements are adjusted in future periods as adjustments become known (that is, new information becomes available), or as years are settled or are no longer subject to such audits, reviews, and investigations.

#### NOTE 5 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

#### **Patient Services Revenue (Continued)**

Generally residents who are covered by third-party payers are responsible for related deductibles and coinsurance, which vary in amount. The Company estimates the transaction price for residents with deductibles and coinsurance based on historical experience and current market conditions. The initial estimate of the transaction price is determined by reducing the standard charge by any contractual adjustments, discounts, and implicit price concessions. Subsequent charges to the estimate of the transaction price are generally recorded as adjustments to resident services revenue in the period of the change. Subsequent changes that are determined to be the result of an adverse change in the resident's ability to pay are recorded as bad debt expense.

The Company has determined that the nature, amount, timing, and uncertainty of revenue and cash flows are affected by the following factors: payers, service line, method of reimbursement, and timing of when revenue is recognized.

Revenue from resident's deductibles and coinsurance are classified based on the primary payer.

#### **Financing Component**

The Projection assumes the Company elected the practical expedient allowed under FASB ASC 606-10-32-18 and does not adjust the promised amount of consideration from residents and third-party payers for the effects of a significant financing component due to the Company's expectation that the period between the time the service is provided to a resident and the time that the Resident or a third-party payer pays for that service will be one year or less. However, the Projection assumes the Company does, in certain instances, enter into payment agreements with residents that allow payments in excess of one year. For those cases, the financing component is not deemed to be significant to the contract.

#### **Contract Costs**

The projection assumes the Company has applied the practical expedient provided by FASB ASC 340-40-25-4 and all incremental customer contract acquisition costs are expensed as they are incurred as the amortization period of the asset that the Company otherwise would have recognized is one year or less in duration.



## ATTACHMENT 4 AFFILIATED PARTIES FORM



### Massachusetts Department of Public Health Determination of Need Affiliated Parties

Version: DRAFT 3-15-17

Appli	ication Date:	12/04/2019		Application Nur	nber: 191	20215-CL								
App	licant In	formatio	n											
Appli	icant Name:	Advocate He	ealthcare of East Boston, l	LLC										
Conta	act Person:	Nina G. Edw	ards					Title: Attorr	ney					
Phon	e:	6175986700		Ext: 23	9 E-n	mail: nedwa	rds@ba	arrettsingal.com						
Affi	liated Pa	rties												
1	<b>ffiliated Pari</b> st all officers,		the board of directors, tru	ustees, stockhol	ders, partne	rs, and other I	Person	s who have an equity or o	therwise controlling intere	st in the applic	cation.			
Add/ Del Rows	(Last)	Name (First)	Mailing Add	lress	(	City	State	Affiliation	Position with affiliated entity (or with Applicant)	Stock, shares, or partnership	Percent Equity (numbers only)	Convictions or violations	List other health care facilities affiliated with	Business relationship with Applicant
+ -	Walsh	Michael	81 Middle Raod		Newbury		MA		Board of Managers		0%	No	None	No
+ -	Mantzoukas	William	328 Nahant Road		Nahant		MA		Board of Managers		0%	No	Nona	No
+ -	McDonnell	Laura	28 Mooney Road		Salem	13-111-	MA	Owner	Board of Managers	Partnership	12%	No	None	Yes
+ -	Dos Santos	Laura	90 Longview Road		New Bedford		MA	Owner	Board of Managers	Partnership	10%	No	None	Yes
+ -	Gomes	Thomas	279 Shore Drive		Salem		NH		Board of Managers			No	None	No
+ -	2008 Mantzoukas Family Trust		30 Monument Square suite 2	14	Concord		MA	Owner		Partnership	12%	No	None	No
+-	Walsh Irrevocable Gift Trust of 2013		6 Pine Hill Road		Bedford		MA	Owner		Partnership	53%	No	None	No
+ -	Gomes 2015 Trust		279 Shore Drive		Salem		NH	Owner		Partnership	12%	No	None	No

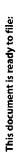
#### **Document Ready for Filing**

When document is complete click on "document is ready to file". This will lock in the responses and date and time stamp the form. To make changes to the document un-check the "document is ready to file" box.

Edit document then lock file and submit Keep a copy for your records. Click on the "Save" button at the bottom of the page.

To submit the application electronically, click on the "E-mail submission to Determination of Need" button.

Affiliated Parties Advocate Healthcare of East Boston, LLC 12/04/2019 11:50 am Page 1 of 2





E-mall submission to Determination of Need

## ATTACHMENT 5 CHANGE IN SERVICE FORM



#### **Massachusetts Department of Public Health Determination of Need Change in Service**

Version:

**DRAFT** 

OF PUBS															
ition Number: 19	9120215-CL				] (	Original Ap	oplication Date:	12/04/2019							
cant Inform	ation														
nt Name: Advoc	ate Healthcare of I	East Bosto	n, LLC												
t Person: Nina G	i. Edwards							Title: Attor	ney						
617598	86700			Ext: 239	E-mail:	nedwar	ds@barrettsinga	il.com							
ty: Complete t	the tables below	for each f	acility liste	d in the App	lication Fo	orm									
ility Name: Advo	cate Healthcare of	East Bost	on					CMS Number	225413	•	Facility type:	ong Term Care I	Facility		
ge in Service	e														
		and planr	ned service o	changes. Add	d additiona	al services	with in each gro	ouping if applica	able.						
			Operating Beds	Changei	in Number (+/-)	of Beds				Patient Days			Length of	Number of Discharges	Number of Discharges
	Exis	ting	Existing	Licensed	d Op	erating	Licensed	Operating	Actual)	Projected	Current Bed	s Projected	(Days)	Actual	Projected
Acute															
Medical/Surgica	al										0%	0%			
,	ernity)										0%	0%			
	ive Care												-		
											0%	0%			
											0%	0%			
Total Acute						1000					0%	0%			
Acuta Dakabilita											0%	0%			
Acute Renabilita	ition							and the second			1 7/2	-/-			I .
Acute Renabilita	ition										0%	<del></del>			
Total Rehabilitation					1 1 1 2							0%			
	icant Inform ant Name: Advoc t Person: Nina C 61759 ity: Complete cility Name: Advo ge in Service mplete the chart be Acute Medical/Surgica Obstetrics (Mate Pediatrics Neonatal Intens ICU/CCU/SICU	icant Information  Advocate Healthcare of It Person:  Nina G. Edwards  6175986700  Ity: Complete the tables below Cility Name:  Advocate Healthcare of It Person:  Advocate Healthcare of It	icant Information  Advocate Healthcare of East Bosto t Person:  Nina G. Edwards  6175986700  ity: Complete the tables below for each for each form the collity Name:  Advocate Healthcare of East Bosto  Advocate Healthcare of East Bosto  Ge in Service  Inplete the chart below with existing and plant  Licensed Beds  Existing  Acute  Medical/Surgical  Obstetrics (Maternity)  Pediatrics  Neonatal Intensive Care  ICU/CCU/SICU  Total Acute	icant Information  Advocate Healthcare of East Boston, LLC  t Person:  Nina G. Edwards  6175986700  ity: Complete the tables below for each facility listerility Name:  Advocate Healthcare of East Boston  ge in Service  Inplete the chart below with existing and planned service  Licensed Beds  Existing  Existing  Acute  Medical/Surgical  Obstetrics (Maternity)  Pediatrics  Neonatal Intensive Care  ICU/CCU/SICU  Total Acute	icant Information  Advocate Healthcare of East Boston, LLC  t Person:  Nina G. Edwards  6175986700  Ext: 239  ity: Complete the tables below for each facility listed in the App  cility Name: Advocate Healthcare of East Boston  ge in Service  Inplete the chart below with existing and planned service changes. Add  Licensed Beds Operating Beds  Existing Existing Licensed  Acute  Medical/Surgical  Obstetrics (Maternity)  Pediatrics  Neonatal Intensive Care  ICU/CCU/SICU  Total Acute	icant Information ant Name: Advocate Healthcare of East Boston, LLC  t Person: Nina G. Edwards  6175986700 Ext: 239 E-mail:  ity: Complete the tables below for each facility listed in the Application For callity Name: Advocate Healthcare of East Boston  ge in Service  Inplete the chart below with existing and planned service changes. Add additional Beds Operating Beds Change in Number (+/-)  Existing Existing Licensed Operating Change in Number (+/-)	icant Information  ant Name: Advocate Healthcare of East Boston, LLC  t Person: Nina G. Edwards  6175986700 Ext: 239 E-mail: nedwar  ity: Complete the tables below for each facility listed in the Application Form  cility Name: Advocate Healthcare of East Boston  ge in Service  mplete the chart below with existing and planned service changes. Add additional services  Licensed Beds Operating Change in Number of Beds (+/-)  Existing Existing Licensed Operating Acute  Medical/Surgical Obstetrics (Maternity) Pediatrics Neonatal Intensive Care ICU/CCU/SICU  Total Acute	ation Number: 19120215-CL Original Application Date: icant Information  ant Name: Advocate Healthcare of East Boston, LLC  t Person: Nina G. Edwards  6175986700 Ext: 239 E-mail: nedwards@barrettsingative: Complete the tables below for each facility listed in the Application Form  cility Name: Advocate Healthcare of East Boston  ge in Service  mplete the chart below with existing and planned service changes. Add additional services with in each ground provided in the Application Form Completion  Licensed Beds Operating Change in Number of Beds (+/-) Completion  Existing Existing Licensed Operating Licensed  Acute  Medical/Surgical Operating Licensed Operating Licensed  Obstetrics (Maternity)  Pediatrics Neonatal Intensive Care ICU/CCU/SICU  Total Acute	icant Information  ant Name: Advocate Healthcare of East Boston, LLC  t Person: Nina G. Edwards  6175986700  Ext: 239  E-mail: nedwards@barrettsingal.com  ity: Complete the tables below for each facility listed in the Application Form  cility Name: Advocate Healthcare of East Boston  CMS Number  CMS Number of Beds After Project Complete the chart below with existing and planned service changes. Add additional services with in each grouping if application (calculated)  Existing Existing Licensed Operating Licensed Operating Licensed Operating  Acute  Medical/Surgical  Obstetrics (Maternity)  Pediatrics  Neonatal Intensive Care  ICU/CCU/SICU  Total Acute	icant Information ant Name: Advocate Healthcare of East Boston, LLC  t Person: Nina G. Edwards Title: Attorney  6175986700 Ext: 239 E-mail: nedwards@barrettsingal.com  ity: Complete the tables below for each facility listed in the Application Form  clility Name: Advocate Healthcare of East Boston  CMS Number: 225413  ge in Service  mplete the chart below with existing and planned service changes. Add additional services with in each grouping if applicable.  Licensed Beds Operating Beds (+/-)  Existing Existing Licensed Operating Completion (calculated)  Acute  Medical/Surgical Obstetrics (Maternity)  Pediatrics  Neonatal Intensive Care  ICU/CCU/SICU	icant Information  and Name: Advocate Healthcare of East Boston, LLC  t Person: Nina G. Edwards	stion Number:     19120215-CL	Actue  ation Number: ip120215-CL: Original Application Date: 12/04/2019    Cant Information	Actuse    19120215-CL   Original Application Date:   12/04/2019	Advocate Healthcare of East Boston, LLC  t Person:   Nina G. Edwards   Ext:   239   E-mail:   nedwards@barrettsingal.com      CMS Number:   225413   Facility type:   Long Term Care Facility

dd/Del Rows		Licensed Beds	Operating Beds		umber of Beds -/-)		umber of Beds After Project   F Completion (calculated)		Patient Days	Occupancy rate for Operating Beds			Number of Discharges	Number of Discharges
		Existing	Existing	Licensed	Operating	Licensed	Operating	(Current/ Actual)	Projected	Current Beds	Projected	(Days)	Actual	Projected
	Adult									0%	0%			
	Adolescent									0%	0%			
	Pediatric									0%	0%			
	Geriatric									0%	0%			
+1[-]										0%	0%			
T	otal Acute Psychiatric						1 2 2			.0%	0%	· :		
C	hronic Disease									0%	0%			
+ -										0%	0%			
	otal Chronic Disease	1 1 1 1 1 1 1		J-15 - 15 J-						0%	0%			
S	ubstance Abuse													
	detoxification	1					1 1			0%	. 0%			
	short-term intensive									0%	0%			
	Short term witch sive									0%	0%			
	otal Substance Abuse			*			1			Tarana and a				
				· · · · · · · · · · · · · · · · · · ·	<u> </u>				<u> </u>	.0%	0%		•	<u> </u>
	killed Nursing Facility	,												
	Level II	107				107		38,119	· ·	0%	0%	243	157	2:
	Level III	83		-25		58		9,072	11,646	0%	0%	185	63	1:
	Level IV									0%	0%			
+ -										0%	0%			
	otal Skilled Nursing	190		-25		165	1.1	47,191	47,914	0%	0%	428	220	41

Change in Service Advocate Healthcare of East Boston, LLC 19120215-CL 12/04/2019 11:46 am Page 2 of 3

#### **Document Ready for Filing**

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To submit the application electronically, click on the "E-mail submission to Determination of Need" button.

This document is ready to file:

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Date/time Stamp: 12/04/2019 11:46 am

E-mail submission to Determination of Need

Page 3 of 3 Change in Service Advocate Healthcare of East Boston, LLC 19120215-CL 12/04/2019 11:46 am

## ATTACHMENT 6 AFFIDAVIT OF TRUTHFULNESS AND COMPLIANCE



# Massachusetts Department of Public Health Determination of Need Affidavit of Truthfulness and Compliance with Law and Disclosure Form 100.405(B)

Version: 7-6-17

Instructions: Complete Information below. When complete check the box "This document is ready to print:". This will date stamp and lock the form. Print Form. Each person must sign and date the form. When all signatures have been collected, scan the document and e-mail to: dph.don@state.ma.us Include all attachments as requested.

Application Number:	NOT AVAILABLE 🗕 #	19120215=CL	Original Application Date	12/04/2019
Applicant Name: Advo	cate Healthcare of Ea	st Boston, LLC		
Application Type: Cons	ervation Long Term C	are Project		
Applicant's Business Typ	e: Corporation	CLimited Partnership	C Partnership C Trust © LLC	Other
Is the Applicant the sole	member or sole share	eholder of the Health Fac	cility(ies) that are the subject of this Applic	tation? O Yes O No
LLC			· · · · · · · · · · · · · · · · · · ·	
All parties must sign. A	dd additional names a	s needed.		
Michael Walsh	<del></del>	Down	(Ohell)	2/2/19
Name:		Signature:	D	ate
T	his document is read	ly to print: 🔀	Date/time Stamp: 12/02/2019 10:00 a	im ]

#### **ATTACHMENT 7**

### NEWSPAPER AFFIDAVIT RELATIVE TO NOTICE OF INTENT

#### RETURN OF PUBLICATION AFFIDAVIT

I, the undersigned, hereby certify under the pains and penalties of perjury, that I am employed by the publishers of **The Boston Herald** and the following Public/Legal announcement was published in two sections of the newspaper on **Wednesday**, **November 20**, **2019** accordingly:

- 1) "PUBLIC ANNOUNCEMENT CONCERNING A HEALTH CARE PROEJCT" for Advocate Healthcare of East Boston, 111 Orient Avenue, East Boston, MA on page <u>38</u>, Legal Notice Section.
- 2) "PUBLIC ANNOUNCEMENT CONCERNING A HEALTH CARE PROEJCT" for Advocate Healthcare of East Boston, 111 Orient Avenue, East Boston, MA on page 11, Local News Section.

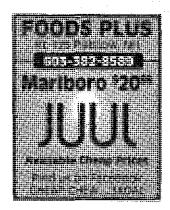
Signature

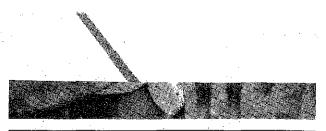
Amanda Stamas

Advertising Consultant

Commissioner Ryan Woods. "The people of Nova Scotia, in sending this tree down to us every year, remind us of that message and the importance of that."

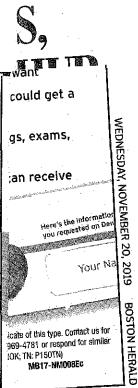
The city of Boston's 78th annual tree lighting on Boston Common is scheduled from 6 to 8 p.m. Dec. 5.





#### PUBLIC ANNOUNCEMENT CONCERNING A PROPOSED HEALTH CARE PROJECT

Advocate Healthcare of East Boston, LLC is a 190 bed long term care facility located at 111 Orient Avenue, East Boston, MA 02128. It intends to file an application with the Massachusetts Department of Public Health on December 4, 2019 ("Filing Date") to perform substantial renovations and repairs to portions of its ground and first floors, along with material repairs or replacement of key building systems and related fixed equipment with no expansion in the gross square feet of the Facility ("Project"). Such renovations will result in a decrease of 25 beds in order to further compliance with current health care facility standards. The applicant does not anticipate any price impacts on its Patient Panel as a result of the Project, nor does it expect any service impacts from the Project, including the bed reduction due to its current occupancy levels. The Applicant is requesting approval of a Maximum Capital Expenditure in the amount of \$10,087,722.00 (November 2019 Dollars). Any ten Taxpayers of Massachusetts may register in connection with the intended Application by January 3, 2020 or within 30 days from the Filing Date, whichever is later, by contacting the Department of Public Health, Determination of Need Program, Attention Program Director, 250 Washington Street, 6th Floor, Boston, MA 02108. The application may be inspected at such address.



WEDNESDAY, NOVEMBER 20, 2019

**GOSTON HERALD** 

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**LEGAL NOTICES** 

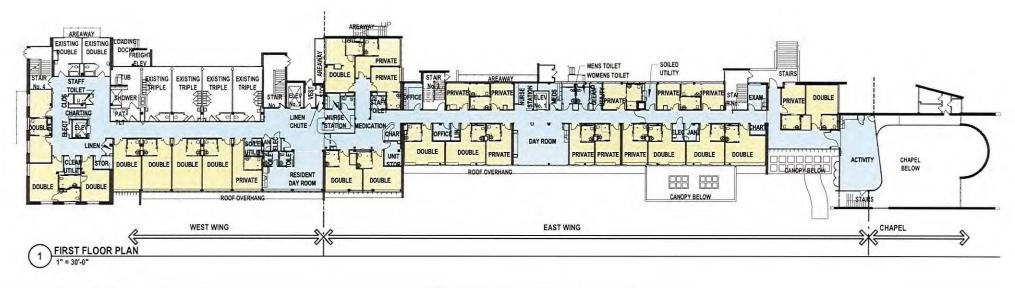
LEGAL NOTICES

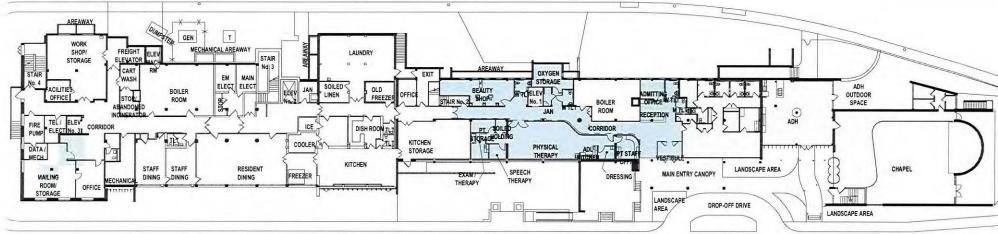
Public Announcement Concerning a Proposed Health Care Project

Public Announcement Concerning a Proposed Health Care Project
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the Facility ("Project"). Such renovations will result in a decrease of
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the Facility for further compliance with current health care facility
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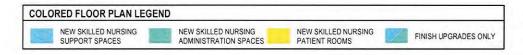
Nov 20

## ATTACHMENT 8 SCHEMATIC DRAWINGS



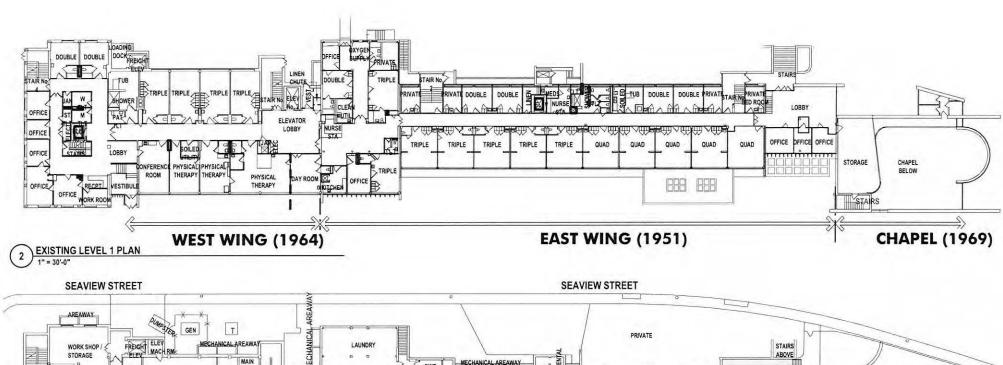


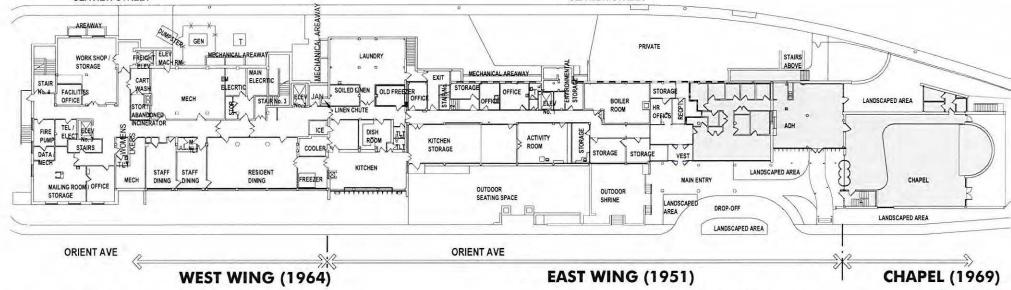
GARDEN LEVEL PLAN
1" = 30'-0"



PROPOSED GARDEN AND FIRST FLOOR PLAN
SNF RENOVATIONS
SCALE: 1\*= 30'-0'







1 EXISTING GARDEN LEVEL PLAN

EXISTING GARDEN AND FIRST FLOOR PLANS
SNF RENOVATIONS
SCALE: 1\* = 30'-0"



## ATTACHMENT 9 ARTICLES OF ORGANIZATION

### Certificate of Organization of ADVOCATE HEALTHCARE OF EAST BOSTON LLC

Pursuant to the provisions of the Massachusetts Limited Liability Company Act (the "Act"), the undersigned hereby certifies as follows:

- 1. <u>Federal Employer Identification Number</u>. The limited liability company is in the process of applying for a federal employer identification number.
- 2. <u>Name of the Limited Liability Company</u>. The name of the limited liability company formed hereby is Advocate Healthcare of East Boston, LLC (the "LLC").
- 3. Address of Office of the LLC. The address of the office of which the LLC is required to maintain in the Commonwealth of Massachusetts under Section 5 of the Act is 35 Avco Road, Haverhill, MA 01835.
- 4. Agent of the LLC for Service of Process. The name of the resident agent of the LLC for service of process is Michael Walsh. The address of the LLC's resident agent is 35 Avco Road, Haverhill, MA 01835.

Michael Walsh, resident agent of the LLC, hereby consents to his appointment as resident agent.

- 5. <u>Date of Dissolution</u>. The LLC has no specific date of dissolution.
- 6. <u>Execution of Documents</u>. Michael Walsh is individually authorized to execute any documents to be filed with the Secretary of State of the Commonwealth of Massachusetts.
- 7. Business of the LLC. The purpose of the LLC is to acquire, own, develop, mortgage, encumber, hypothecate, lease, sell, maintain, improve, alter, remodel, expand, manage, provide consulting services, and otherwise operate, provide services to, and deal with, or dispose of, nursing homes and other housing, elder care, or health care businesses, health care facilities, real estate, and related assets, including, without limitation, obtaining financing or refinancing for the above purposes, selling, exchanging, transferring, or otherwise disposing of all or any part of the real estate, and investing and reinvesting any funds held in reserve pursuant to the terms of this Agreement. The LLC shall also be authorized to engage in any other activity in which a limited liability company organized under the laws of the Commonwealth of Massachusetts may lawfully engage.

- 8. Execution of Documents Relating to Real Property. Michael Walsh is individually authorized to execute, acknowledge, deliver and record any recordable instrument on behalf of the LLC purporting to affect an interest in real property, whether to be recorded with a registry of deeds or a district office of the Land Court.
- 9. <u>Effective Date</u>. The effective date of this certificate shall be on the filing date.

Under the penalties of p	erjury, the u	ndersign	ed hereby	affirms 1	that the fa	cts stated in
this certificate are true this	2.15-	day of _	<u>Augus</u>	<u></u>	2016.	

Michael Walsh, Duly Authorized

### CHECK/VOUCHER# 3566£

#### The Commonwealth of Massachusetts Limited Liability Company (General Laws, Chapter 156C)

Filed this_	9	day of	August	, 2016
SECRETARY OF THE COMMONWEALTH 2016 AUG -9 AM 11: 22 CORPORATIONS DIVISION	<b>G</b> pt	- Juniya	olech	1272351
		iam Francis C		
			•	
Name Do	soghie, I	Barret:	& Singal,	P.C.
· · · · · · · · · · · · · · · · · · ·				
Phone 6	7-720	-509		

## ATTACHMENT 10 FILING FEE

**COMMONWEALTH OF MASSACHUSETTS** 

**Advocate Healthcare Of East Boston** 

Invoice Number	Description	PO No	Date	Amount Discount	Net Amount
11272019	DON Application		11/27/19	\$20.175.44	\$20,175,44

Check Date:	11/27/19 (	Check Number:	1172 Amoun	t: \$20,175.44
an an sin arang garaga an an ang mga mga mga mga mga mga mga mga mga mg	Brought worse, that has beginned to be to include a special set, which we have a first only the brown	والمراجع والمراجع والمستروع والمستراع والمستراع	ay ika makan di kabilan da kangapagan yan. Makilan alagan kepada ganggan kanan sejid	
A THE REVERSE	SIDE OF THIS DOCUMENT INCLUD	ES MICROPRINTED ENDORSEM	IENT LINES AND ARTIFICIAL WATERMARI	KHOLD AT AN ANGLE TO VIEW ☐

ADVOCATE HEALTHCARE OF EAST BOSTON LLC

111 ORIENT AVENUE EAST BOSTON, MA 02128-1006 **EAST BOSTON SAVINGS BANK** EAST BOSTON, MA 02128

1172

53-7012/2110 3

1172

Twenty-Thousand-One-Hundred-Seventy-Five and 44/100 dollars

DATE

AMOUNT

\$20,175.44

COMMONWEALTH OF MASSACHUSETTS

11/27/19 VOID AFTER 60 DAYS

PAY TO THE ORDER OF

#\*\*\*\*\* # 211070120#

77 72542810