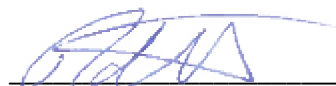


**Acknowledgment of Receipt of Determination of Need and  
Attestation Regarding Participation in MassHealth**

Pursuant to 105 C.M.R. § 100.310(A)(2), on behalf of Steward Health Care System LLC (the "Holder"), I hereby acknowledge that the Holder is in receipt of the Determination of Need Notice of Final Action, dated March 10, 2021, issued by the Massachusetts Department of Public Health (the "Department") with respect to Application No. 20092415-HS. This attestation is being provided to the Department and to all Parties of Record within thirty (30) days of the Determination of Need Notice of Final Action.

In addition, pursuant to 105 CMR 100.310(A)(11), I hereby attest that Morton Hospital (the Health Care Facility or Facilities for which the Notice of Determination has been issued) participates in MassHealth pursuant to 130 CMR 400.000 through 499.000.

IN WITNESS WHEREOF, the undersigned has duly executed this Attestation on this March 25, 2021.

A handwritten signature in blue ink, appearing to read 'Ralph de la Torre', is written over a horizontal line.

By Ralph de la Torre, M.D.

Steward Health Care System LLC