



**Secondary Market
Disclosure Information**

December 31, 2024

RWJ BARNABAS HEALTH, INC.

Consolidated Financial Statements and Supplementary Information as of and for the years ended
December 31, 2024 and 2023

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RWJBARNABAS HEALTH
Secondary Market Disclosure Information
December 31, 2024

Summary of Obligations under the
Master Trust Indenture and Other Credit Arrangements

Bond Obligations under the Master Trust Indenture

- RWJ Barnabas Health Taxable Revenue Bonds, Series 2016
- RWJ Barnabas Health Obligated Group Issue, Series 2016A
- RWJ Barnabas Health Senior Secured Notes, Series A through D
- RWJ Barnabas Health Obligated Group Issue, Series 2019
- RWJ Barnabas Health Obligated Group Issue, Series 2019A
- RWJ Barnabas Health Obligated Group Issue, Series 2019B-2 and 2019B-3
- RWJ Barnabas Health Obligated Group Issue, Series 2021A
- RWJ Barnabas Health Obligated Group Issue, Series 2024A
- RWJ Barnabas Health Obligated Group Issue, Series 2024B

Other Credit Arrangements

- Revolving line of credit agreement with JPMorgan Chase Bank, N.A. in the maximum available amount of \$100 million; no funds have been drawn down under such credit agreement. Includes a sublimit for letters of credit including the self-insured worker's compensation program. Secured under the Master Trust Indenture.
- Construction loans (combined with grants) from the New Jersey Economic Development Authority under its HUD-funded Energy Resilience Bank program for the construction of combined heating and power systems at each of Cooperman Barnabas Medical Center, Newark Beth Israel Medical Center, Robert Wood Johnson University Hospital Somerset, Jersey City Medical Center, and Trinitas Regional Medical Center, and related funding from PSE&G. The aggregate maximum availability of the loans is approximately \$22.6 million; approximately \$18.9 million has been drawn down under the loans.
- The Corporation established a self-liquidity backed commercial paper program which will serve as a source for interim liquidity needs. The program is authorized up to \$200 million. As December 31, 2024, there was no commercial paper outstanding.

LIQUIDITY SUMMARY

(In thousands)

ASSETS	December 31, 2024
Same Day Liquidity	
Deposit Accounts at A-1 rated Banks	\$ 86,330
US Government Securities and Agencies rated A-1 or better maturing under one year	264,685
Money Market Funds rated Am or better	132,921
Next Day Liquidity	
Investment Grade Debt not included above	448,533
Identified Same Day and Next Day Liquidity (1)	<u>\$ 932,469</u>
 LIABILITIES (SELF LIQUIDITY DEBT)	
Commercial Paper Notes (2)	<u>\$ -</u>
Total Debt Subject to Self-Liquidity	<u>\$ -</u>

(1) Total unrestricted cash and investments as of December 31, 2024 was \$4.46 billion. Certain of these investments are excluded from the above liquidity summary as they are not assets pledged for self-liquidity. The Corporation also has a \$100,000 credit facility in place with an expiration date of March 28, 2025. As of December 31, 2024, \$6,289 of the credit facility was used in the form of standby letters of credit that provide liquidity support for the Corporation's self-insured workers' compensation and other programs. There was no cash drawn under the credit facility during the term.

(2) The Corporation established a self-liquidity backed commercial paper program which will serve as a source for interim liquidity needs. The program is authorized up to \$200,000. An initial principal draw of \$50,000 was executed on May 7, 2024, with varying termination dates between 30 and 60 days. The initial draw, net of a discount, was subsequently rolled over and paid back in its entirety on September 9, 2024. There was no commercial paper outstanding as of December 31, 2024.

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 System Overview

Facility	Location	Licensed Beds
Acute Care Hospitals:		
Newark Beth Israel Medical Center	Newark	653 ⁽¹⁾
Community Medical Center	Toms River	617 ⁽²⁾
Cooperman Barnabas Medical Center	Livingston	597
Robert Wood Johnson University Hospital, New Brunswick Campus	New Brunswick	614 ⁽³⁾
Robert Wood Johnson University Hospital, Somerset Campus	Somerville	339
Monmouth Medical Center	Long Branch	514 ⁽⁴⁾
Monmouth Medical Center, Southern Campus	Lakewood	241 ⁽⁵⁾
Clara Maass Medical Center	Belleville	472
Jersey City Medical Center	Jersey City	352
Robert Wood Johnson University Hospital Rahway	Rahway	241
Robert Wood Johnson University Hospital at Hamilton	Hamilton	248
Trinitas Regional Medical Center	Elizabeth	553 ⁽⁶⁾
Total Acute Care Beds		5,441
Transitional Care Beds:		
Children's Specialized Hospital	New Brunswick	158 ⁽⁷⁾
Community Medical Center Transitional Care Unit	Toms River	25 ⁽²⁾
TRMC Hospital-based Long Term Care Facility	Elizabeth	124 ⁽⁶⁾
Total Transitional Care Beds		307
Specialty Hospitals:		
The Children's Hospital of NJ at Newark Beth Israel Medical Center	Newark	156 ⁽¹⁾
Barnabas Health Behavioral Health Center	Toms River	100 ⁽⁵⁾
The Bristol-Myers Squibb Children's Hospital at Robert Wood Johnson University Hospital	New Brunswick	79 ⁽³⁾
The Unterberg Children's Hospital at Monmouth Medical Center	Long Branch	70 ⁽⁴⁾
Total Specialty Hospital Beds		405

- (1) Newark Beth Israel Medical Center is licensed for 653 beds, 156 of which are licensed for Children's Hospital of New Jersey at Newark Beth Israel Medical Center. For presentation purposes, these 156 beds are included in the licensed bed complement for both Newark Beth Israel Medical Center and its designated Children's Hospital.
- (2) For presentation purposes, the 25 Transitional Care beds located at the general acute care hospital are included in the licensed bed complement for Community Medical Center.
- (3) Robert Wood Johnson University Hospital is licensed for 614 beds, 79 of which are licensed for The Bristol-Myers Squibb Children's Hospital. For presentation purposes, these 79 beds are included in the licensed bed complement for both Robert Wood Johnson University Hospital and its designated Children's Hospital. Robert Wood Johnson University Hospital has been granted temporary approval from the Department of Health to operate an additional 26 neonatal bassinets not included in the count.
- (4) Monmouth Medical Center is licensed for 514 beds, 70 of which are licensed for The Unterberg Children's Hospital at Monmouth Medical Center. For presentation purposes, these 70 beds are included in the licensed bed complement for both Monmouth Medical Center and its designated Children's Hospital.
- (5) Monmouth Medical Center, Southern Campus is licensed for 241 beds, 60 of which are psychiatric beds located at Barnabas Health Behavioral Health Center. For presentation purposes, these 60 beds are included in the licensed bed complements of both Monmouth Medical Center, Southern Campus combined with the 40 beds licensed to Barnabas Health Behavioral Health Center.
- (6) Trinitas Regional Medical Center is licensed for 553 beds, 124 of which are long term and sub acute care. For presentation purposes, these 124 beds are included in the licensed bed complement of Trinitas Regional Medical Center.
- (7) These licensed beds represent pediatric long term care and rehabilitation beds. Children's Specialized Hospital operates at multiple locations in New Jersey, including the long term care beds in Mountainside and Toms River, New Jersey.

RWJBARNABAS HEALTH
MANAGEMENT'S DISCUSSION AND ANALYSIS
(In thousands)

Our Organization

RWJ Barnabas Health, Inc. (RWJBH or the Corporation) is New Jersey's largest academic health care system with a core service area that covers eight counties and more than five million residents, providing treatment and services to more than three million patients each year, and accounting for more than 20% of all acute care discharges in the State of New Jersey (New Jersey or the State). The Corporation's geographic coverage spans Hudson, Essex, Union, Middlesex, Mercer, Somerset, Monmouth and Ocean counties. Physicians, nurses, and health professionals are committed to providing the highest quality of patient care, training the next generation of health care providers and, through partnership with Rutgers, The State University of New Jersey (Rutgers) advancing clinical research and cutting-edge therapies. RWJBH is also recognized for making an impact in local communities by emphasizing both the clinical care delivery platform and those services that comprise its social determinants of health platform. RWJBH believes that advancing both platforms is necessary for the improvement of the health of local residents through new educational and other related opportunities.

RWJBarnabas Health's Mission, Vision, and Values

At the core of the RWJBH mission is the evolution of the enterprise from a "health care" company to an organization dedicated to health – "Let's Be Healthy Together." As part of a comprehensive strategic planning process, Mission, Vision and Values statements were created to drive the enterprise forward.

Our Mission

We are an academic health system, partnering with our communities to build and sustain a healthier New Jersey.

Our Vision

RWJBH will be the premier health care destination providing patient-centered, high-quality academic medicine in a compassionate and equitable manner, while delivering a best-in-class work experience to every member of the team.

Our Values

Accountability: An acceptance of responsibility for honest and ethical conduct towards others.

Compassion: Sympathetic concern for the sufferings or misfortunes of others.

Curiosity: A strong desire to know or learn something.

Empathy: The ability to understand and share the feelings of another.

Excellence: The quality of being outstanding or extremely good.

Kindness: The quality of being friendly, generous and considerate.

Respect: A feeling of deep admiration for someone or something elicited by their abilities, qualities or achievements.

Teamwork: The combined action of a group of people, especially when effective and efficient.

Key Service Lines and Regional Leadership

RWJBH occupies the top, or near top, spot in State-wide markets in essentially all major service lines including behavioral health, cardiovascular, oncology, neurosciences, orthopedics, primary care, and women and children's services (as measured by a percentage of inpatient admissions using the most currently available data). The Corporation provides a full continuum of care through its hospitals, controlled affiliates and joint venture partners and its strategy is to integrate patient experience across care locations using a service line approach. Each major service line has a dyad partnership with a clinical and an operational leader working together, designed to ensure the patient's journey is connected from physician offices to ambulatory facilities and acute care hospitals.

RWJBH uses an operating model across the health system that drives strategy through a regional and clinical service line approach. Each of RWJBH's regions are led by a Regional President, each with a dual role: to oversee the integration and operation of all inpatient and outpatient providers located within their geographic region and to provide guidance to selected corporate service line leaders in the areas of behavioral health, cardiovascular, children's health, emergency and hospital medicine, oncology, orthopedics, neurosciences, and women's health.

Redefining Cancer Care Delivery

The centerpiece of RWJBH's Oncology service line is Rutgers Cancer Institute of New Jersey (CINJ). CINJ is one of a small group of comprehensive cancer centers in the U.S. designated by the National Cancer Institute and the only one in the State. The National Cancer Institute's Comprehensive Cancer Center designation is competitively awarded to centers characterized by their scientific leadership, resources, and a track record of research discoveries in basic, clinical, and population-based science. Designated centers must meet rigorous criteria in the areas of clinical care, research, prevention, and education, as well as demonstrate a substantial transdisciplinary approach that integrates each discipline-specific scientific area into one coordinated and comprehensive effort in the fight against cancer.

The service line integrates CINJ with all RWJBH programs to form the leading provider of cancer services in New Jersey, treating more than 11,000 new patients each year. The Oncology service line promotes adherence to evidenced based clinical pathways at all care locations through a common clinical information system and integrated clinical leadership. The service line operates a call center and navigation program allowing patients to access locally based programs for routine treatment and connectivity to a network of sub-specialist and researchers providing access to advanced care. The service line is dedicated to research and education with a statewide clinical trials network and 15 fellowship programs and is focused on promoting patient access with programs like Screen NJ that brings services to vulnerable populations.

The partnership with CINJ creates a unique platform for recruitment of leading physicians and researchers. The program's approach includes partnering with physicians to identify care gaps, create alignment models, improve access and outcomes, and bring leading-edge technology to the community. As part of its strategic plan for oncology care in New Jersey, RWJBH is making significant investments in cancer facilities, technology, and physician recruitment across multiple markets. Most notable in the plans for expansion of cancer treatment, education and research is the development of the Jack and Sheryl Morris Cancer Center in New Brunswick, which will be New Jersey's first freestanding cancer hospital; it is scheduled to open in the second quarter of 2025. This facility, along with the Melchiorre Cancer Center at Cooperman Barnabas Medical Center (CBMC), slated to open in the fourth quarter of 2025, and the Vogel Medical Campus at Monmouth Medical Center (MMC), slated to open in the first quarter of 2027, is designed to bring "world class" cancer care close to the communities served by the Corporation.

Affiliation with Rutgers, the State University of New Jersey - Realizing our Academic Vision

Through its long-standing relationship with Rutgers, including Rutgers' two medical schools and schools of nursing, dentistry, pharmacy, allied health professions, public health and biomedical sciences, the Corporation is able to access the most current medical research and treatment technologies. Through the execution of a Master Affiliation Agreement (MAA) in 2018, RWJBH and Rutgers aligned in their mutual support of the educational, research, and clinical missions of an academic health system. RWJBH works with Rutgers' Robert Wood Johnson Medical School (RWJMS) and New Jersey Medical School to train and educate more than 1,600 medical residents, interns and fellows throughout the Corporation's hospitals each year. It is through the elements of the MAA that RWJBH has become the State's largest academic healthcare system, combining high-quality patient care and leading-edge research with sophisticated health and medical education.

RWJBH and Rutgers continue to attract clinicians, researchers, teachers, and students from around the world. Since the effective date of the MAA, RWJBH has made an investment of \$100 million and committed approximately \$50 million per year to the Rutgers affiliation. In total, more than one billion dollars over 20 years is anticipated to be invested to expand the education and research missions of the academic health system. The affiliation includes CINJ and the Rutgers Institute for Translational Medicine and Science, a recipient of the National Institute of Health's Clinical Translational Science Award distinguishing the partnership as only one of a small group of institutions with access to clinical studies in both oncology and non-oncology.

Staffing

The Corporation is challenged by the industry wide shortages in certain clinical specialties which have resulted in increased labor costs and investments in employee retention and other programs. The Corporation is committed to investment in its people and understands success is largely dependent on the dedication and commitment of our employees, nurses and physicians. The demand for healthcare in the state and across the country continues to increase. Nurses continue to be in high demand and in short supply. The Corporation recognizes that our nurses and other clinical staff are the face and the heart of our hospitals. RWJBH has implemented a refinement to its internal hiring processes to expedite our ability to acquire top nursing talent and stabilize the workforce. We have instituted nurse retention programs that focus on professional development through enhanced tuition assistance programs, implemented more flexible work schedules to provide work/life balance, and provided retention and sign-on bonuses to address the staffing needs. These refinements further advance the competitiveness of our total compensation package. The Corporation's strategy is to remain top tier in a competitive compensation market and to remain at the forefront of the communities we serve.

On August 4, 2023, the United Steel Workers Local 4-200 (USW), which represents approximately 1,700 nurses, elected to strike at Robert Wood Johnson University Hospital (RWJUH). Thanks to the support of our highly skilled, highly trained, and professional replacement nurses and the support of the nursing leadership across the Corporation, staffing levels throughout the hospital were appropriately maintained across all units and all shifts when considering both patient volume and acuity. On December 15, 2023, the union ratified a new, three-year collective bargaining contract, ending the strike. The agreement validated our efforts and aligned with the strategic goals leadership had put in place at the onset of the negotiations and reflects our shared commitment to continue to provide the highest quality patient care and facilitate a safe and supportive working environment for our nurses and all team members. In early January 2024, the RWJUH nurses were reintegrated into the work force safely, seamlessly and without

RWJBARNABAS HEALTH

MANAGEMENT'S DISCUSSION AND ANALYSIS, cont.

interruption to patient care. Incremental costs incurred, net of savings, were \$183,783 through December 31, 2023. No significant costs were incurred in 2024 related to the strike.

The Corporation has successfully concluded negotiations with the registered nurses at CBMC, represented by the New Jersey Nurses Union CWA Local 1091, without work stoppages. The current contract expires in November 2026. Additionally, Jersey City Medical Center (JCMC) negotiated a two-year agreement with the United Nurses Organization, which expires January 31, 2026.

2024 Plan of Finance

In the second quarter of 2024, the Corporation completed a series of financing transactions targeted at leveraging current market conditions. The objective of the Plan of Finance was to generate cash flow savings, refinance or defease certain outstanding bond issuances, establish a short-term self-liquidity backed commercial paper program and terminate the Corporation's three existing forward interest rate swap agreements. The transactions below resulted in an overall decrease in long-term debt.

- On April 8, 2024, the Corporation made an offer to purchase bonds in an aggregate principal amount of up to \$330,000 relating to select maturities of the Series 2016 and Series 2019 bonds. In connection with that offer, the Corporation purchased target bonds in an aggregate principal amount of \$261,397. The settlement date was May 8, 2024.
- On May 1, 2024, the Corporation completed the RWJ Barnabas Health Obligated Group Issue, Series 2024A bond issuance in the amount of \$370,330. Series 2024A was issued at a premium for a total source of funds of \$404,142. The Corporation used a portion of these proceeds to defease the Series 2019 B-1 bonds in the amount of \$70,812. The remainder of the proceeds was used for reimbursement of prior capital costs.
- On May 16, 2024, the Corporation completed the RWJ Barnabas Health Obligated Group Issue, Series 2024B bond issuance in the amount of \$250,690. The Series 2024B bonds were used to refund the Barnabas Health System, Series 2014A, Robert Wood Johnson University Hospital, Series 2014A and Robert Wood Johnson University Hospital, Series 2013A.
- On May 16, 2024, the Corporation defeased the Barnabas Health System, Taxable Revenue Bonds, Series 2012 for \$80,979.

Collectively, the above transactions resulted in a gain on extinguishment of debt of \$58,150.

The Corporation established a self-liquidity backed commercial paper program which will serve as source for interim liquidity needs. The program is authorized up to \$200,000. As of December 31, 2024, there was no commercial paper outstanding.

The Corporation had entered into forward interest rate swap agreements with JPMorgan, Bank of America, and U.S. Bank, respectively. The total notional amount of the swap agreements was \$281,960. In April 2024, the Corporation exercised its option to terminate the agreements for \$52,262, net, which resulted in a gain of \$12,892 for the year ended December 31, 2024.

Credit Ratings

In connection with the 2024 Plan of Finance, S&P affirmed its AA- long-term rating with a stable outlook. S&P notes that "the rating reflects the broad geographic coverage in northeastern New Jersey as

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MANAGEMENT’S DISCUSSION AND ANALYSIS, cont.

one of the leading healthcare systems in the state. The stable outlook reflects the strengthening and increasingly diverse enterprise profile spurred by clinical growth, mergers, joint ventures, and the academic affiliation with Rutgers University.” S&P has also assigned an A-1+ rating for the short-term liquidity program, the highest rating that could be assigned.



Moody’s downgraded the Corporation’s credit rating to A1 from Aa3. The outlook was revised from negative to stable. The downgrade reflected Moody’s Ratings’ view that “current moderate days cash and cash to debt measures no longer support the higher credit rating at a time when margins are still recovering and substantial capital spend will slow the rebuild of liquidity.” Simultaneously, Moody’s assigned a P-1 short-term liquidity rating, the highest rating that could be assigned. This rating “reflects the long-term A1 rating, the organization’s strong treasury management, sufficiency of assets, and adequacy of the notification and liquidation procedures of the program that allow for repayment of notes upon maturity or failed remarketing.”

Awards and Distinctions

RWJBH is the largest, most comprehensive academic health care system in New Jersey, having received many national and regional recognitions, including:

OVERALL	
	<p>RWJBH was again named to the GHX Millennium Club, which recognizes healthcare provider and supplier organizations that generate more than one million automated transactions annually through the GHX Exchange.</p>
	<p>Thirteen RWJBH facilities were named to CHiME Healthcare’s 2024 Most Wired – 10 of which were awarded highest-possible designation, Level Ten – for their use of information technology to better the patient experience. Facilities earning Level Ten honors were Clara Maass Medical Center, JCMC, MMC, Monmouth Medical Center Southern Campus (MMSC), Newark Beth Israel Medical Center (NBIMC), RWJUH, Robert Wood Johnson University Hospital Hamilton (RWJUH Hamilton) and Robert Wood Johnson University Hospital Somerset (RWJUH Somerset). RWJBH Ambulatory Care Center, Trinitas Regional Medical Center (TRMC) and the RWJBH Medical Group were awarded Level Nine, while Children’s Specialized Hospital earned Level Six honors. TRMC also received special recognition for having the most improved score overall.</p>
	<p>RWJBH Foundations have achieved High Performer status in the Association for Healthcare Philanthropy’s 2023 Report on Giving. Fewer than 50 organizations across the United States and Canada have been recognized for this award in 2023. High Performers are those whose performance is among the top 25% of all Report on Giving survey participants. The Foundations were recognized in two categories: Overall Revenue and Health System.</p>

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MANAGEMENT’S DISCUSSION AND ANALYSIS, cont.

	<p>In 2024, RWJBH facilities were recognized as “Leaders in LGBTQ Healthcare Equality” by the Human Rights Campaign Foundation – the educational arm of America’s largest civil rights organization – recognizing healthcare institutions that are leaders in efforts to offer equitable care to LGBTQ+ patients by evaluating inclusive policies and practices related to LGBTQ patients, visitors and employees.</p>
<p>QUALITY</p>	
 	<p>In 2024, U.S. News & World Report, the global authority in hospital rankings and consumer advice, named RWJUH as a Best Regional Hospital in NJ and is ranked #22 in the Metro area. RWJUH achieved High Performing recognition for 11 common adult conditions and procedures, and together with CINJ, High Performing recognition for the Adult Specialty of Cancer. RWJUH Hamilton was also named as a High Performing Hospital for Heart Failure and Chronic Obstructive Pulmonary Disease.</p> <p>Six RWJBH facilities have been recognized among the 2024 – 2025 Best Hospitals for Maternity Care, including Community Medical Center (CMC), MMC, NBIMC, RWJUH, RWJUH Somerset and TRMC. The prestigious list identifies hospitals that provide high-quality maternity care for uncomplicated pregnancies.</p>
 	<p>RWJBH children’s hospitals were named among the nation’s Best Children’s Hospitals for 2024-2025 by U.S. News & World Report. The Bristol-Myers Squibb Children’s Hospital at RWJUH (BMSCH) ranked #34 nationally for orthopedics and ranked #47 for urology. The Urology ranking recognizes a four-hospital practice that is based at BMSCH but that also provides care at three other RWJBH hospitals – with Children’s Hospital of New Jersey at NBIMC, McMullen Children’s Center at CBMC, and Unterberg Children’s Hospital at MMC. Additionally, BMSCH was ranked #2 in NJ and #15 in the Mid-Atlantic Region.</p>
	<p>In November 2024, six RWJBH facilities were awarded “A” for a Hospital Safety Score including CMC, MMC, MMCSC, RWJUH Hamilton, Robert Wood Johnson University Hospital Rahway (RWJUH Rahway) and RWJUH Somerset. It was RWJUH Rahway’s seventh straight A rating and the fourth consecutive award for both CMC and MMCSC.</p>

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MANAGEMENT’S DISCUSSION AND ANALYSIS, cont.

	<p>In 2024, Healthgrades ranked CBMC and RWJUH Somerset in the top 5% in the State across various specialty care areas. CBMC ranked first in New Jersey and among the top 5% in the nation for both Cardiology and Cardiac Care and third in the state for Pulmonary Care and Gastrointestinal Surgery. RWJUH Somerset ranked second in New Jersey for both Gastrointestinal Surgery and Medical, and third for Cardiology and GI Care. Both hospitals ranked among America’s 250 Best Hospitals.</p>
	<p>Numerous facilities received the Gold Seal of Approval by the Joint Commission for various programs including joint replacement; disease-specific certifications in acute coronary syndrome, cardiac rehabilitation, and heart failure; advanced certification in palliative care; bariatric surgery; and stroke program.</p>
	<p>In 2023, RWJUH was named to Money’s inaugural list of Best Hospitals for Bariatric Surgery. MMC was named to Money’s inaugural list of the Best Hospitals in America, created in partnership with The Leapfrog Group. MMC, NBIMC, and RWJUH Somerset were named to Money’s Best Hospitals for Maternity Care list – among just 259 hospitals to receive the award.</p>
	<p>Several practices within the RWJBH Medical Group and Rutgers received the National Committee for Quality Assurance Patient-Centered Medical Home Recognition, which emphasizes the use of systematic, patient-centered, coordinated care that supports access, communication and patient involvement.</p>
	<p>In 2024, RWJBH was awarded with two Human Experience (HX) Awards from Press Ganey, the global leader in healthcare experience solutions and services. RWJUH has been honored with the HX NDNQI® Award for Outstanding Nursing Quality® and is one of just seven academic medical centers in the country to be honored by Press Ganey for outstanding nursing quality and fostering a culture rooted in improving patient safety and care. CBMC’s NICU has been honored with HX Pinnacle of Excellence Award.</p>

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MANAGEMENT’S DISCUSSION AND ANALYSIS, cont.

	<p>Six RWJBH facilities have achieved Magnet recognition for excellence in nursing. RWJUH received this recognition six consecutive times – making it one of only seven institutions globally to achieve this distinction. In 2024, MMC became the first hospital in New Jersey and the 11th in the country to earn Magnet with Distinction.</p>
	<p>In 2023, RWJBH was granted accreditation for nursing continuing professional development from the American Nurses Credentialing Center for its commitment to using evidence-based criteria when developing high-quality educational activities that promote the professional growth of nurses.</p>
	<p>In 2024, MMC was named by Newsweek as one of the World’s Best Hospitals and CBMC and MMC were both named to Newsweek’s 2023 list of America’s Best Maternity Care Hospitals. In addition, CSH has been recognized on Newsweek’s 2024 list of World’s Best Specialized Hospitals and RWJUH also received Newsweek America’s Best award for Ambulatory Surgery Centers in New Jersey in 2024 for the third year in a row. MMC and RWJUH have also been included in Newsweek’s list of America’s Best-In-State Hospitals for 2025.</p>
	<p>In 2023, ten RWJBH facilities were awarded Gold recognition for their Antimicrobial Stewardship Programs from the New Jersey Department of Health; MMC has continued to receive Gold since the establishment of the awards program in 2019.</p>
<p>SPECIALTY CARE</p>	
	<p>CINJ, together with RWJBH, is New Jersey’s only National Cancer Institute (NCI) - designated Comprehensive Care Center –recognized for its clinical and scientific research leadership.</p>

RWJBARNABAS HEALTH
MANAGEMENT’S DISCUSSION AND ANALYSIS, cont.

	<p>In 2024, four RWJBH facilities received recognition for stroke care, earning a spot on the American Heart Association’s Get With The Guidelines® - Stroke Gold Plus quality achievement award, for their commitment to ensuring stroke patients receive the most appropriate treatment according to nationally recognized, research-based guidelines, ultimately leading to more lives saved and reduced disability. These facilities include CBMC, JCMC, RWJUH, and RWJUH Somerset.</p>
	<p>RWJBH Mobile Health received the American Heart Association’s Mission Lifeline EMS Gold Award in 2024. This award is given to an elite group of prehospital providers for their commitment and success in implementing a higher standard of care, ensuring that individuals experiencing a heart attack or stroke receive treatment according to the latest nationally accepted evidence-based guidelines.</p>
<p>WORKFORCE</p>	
	<p>In 2024, RWJBH was recognized by Newsweek as America's Greatest Workplaces. RWJBH was also recognized by Newsweek as one of:</p> <ul style="list-style-type: none"> • America’s Greatest Workplaces for Diversity for the second consecutive year • America’s Greatest Workplaces for Women • America’s Greatest Workplaces for Mental Wellbeing • America’s Greatest Workplaces for Patients and Families
	<p>RWJBH has been named one of the 2024 Best Places to Work for People with Disabilities, achieving top scores on the 2024 Disability Equality Index®. The Disability Equality Index is the world’s most comprehensive benchmarking tool for Fortune 1000 companies to measure disability workplace inclusion within their organization and to assess performance across industry sectors.</p>
	<p>RWJBH is a CEO Cancer Gold Standard employer, an accreditation awarded by the CEO Roundtable on Cancer, for its dedication and commitment to maintaining a high standard of excellence in cancer prevention, early detection, and quality care for its employees and families.</p>

Epic Implementation

In order to accomplish the goals of its strategic plan, the Corporation recognized the need to strengthen its core competencies in technology, analytics, and innovation by establishing a unified operating model to drive standardization, continuous quality improvement and cost reductions across the entire system. A key component of this was to deploy an integrated Electronic Health Record with supporting revenue cycle, data analytics and consumer-facing digital capabilities. After a thorough review of the marketplace, the Epic suite of products was chosen to achieve these goals. The implementation was done in phases at a cost of approximately \$775,000.

The launch of this sweeping initiative, “Epic Together,” formally commenced on January 29, 2020 with simultaneous kick-off events held throughout RWJBH and across key Rutgers campuses. In order to build the Epic system, 3,330 subject matter experts, nurses, physicians, pharmacists, medical school staff at Rutgers and a myriad of other stakeholders throughout the Corporation were identified and assembled into 62 discipline-specific workgroups and councils.

On September 28, 2024, the Corporation completed the final wave of the Epic Together project with the activation of TRMC, CSH and University Behavioral Health Center at Rutgers. The goal that was set in March 2019, to have one unified electronic health record throughout the health system, has been completed.

RWJBH achieved Epic Gold Stars 10 for a third consecutive year placing the health system in the top 1% of all Epic customers in the world. In addition, RWJBH earned 11 out of 19 possible gold, silver and bronze awards from The Epic Trophies Program in revenue-based categories such as Hospital Billing (HB), Professional Billing (PB), Claims Denial and Automation, placing us in the top 5% for revenue cycle of Epic customers worldwide. The system continues to optimize its use of Epic and has completed more than 13,000 optimizations over the course of the project.

Management’s Discussion and Analysis of Recent Financial Performance

Management’s Discussion and Analysis of Recent Financial Performance is based upon the consolidated financial results of the Corporation since the members of the Corporation’s Obligated Group represent 87% of the total consolidated assets and 81% of the total consolidated operating revenues as of, and for the year ended, December 31, 2024. Accordingly, the discussion below includes the financial results of entities that are not members of the Obligated Group. On March 30, 2023, Barnabas Health, Inc., an obligated group member, changed its name to RWJBH Corporate Services, Inc.

Financial Highlights

The following table summarizes key operating performance results for the years ended December 31, 2024 and 2023 as compared to the S&P benchmark:

Operating Results	Years ended December 31,		S&P AA-
	2024	2023	
Operating revenue	\$ 9,566,595	8,587,359	N/A
Operating income (loss)	290,665	(86,038)	N/A
Operating margin	3.0%	-1.0%	0.1%
Operating cash flow	\$ 742,515	340,623	N/A
Operating cash flow margin	7.8%	4.0%	6.1%
Excess of revenue margin	7.6%	4.4%	1.4%

RWJBARNABAS HEALTH
MANAGEMENT'S DISCUSSION AND ANALYSIS, cont.

The following table summarizes overall performance ratios as of December 31, 2024 and 2023 as compared to the S&P benchmark:

Selected Other Information	Years ended December 31,		S&P AA-
	2024	2023	
Unrestricted Cash and Investments	\$ 4,457,285	4,268,072	N/A
Days cash on hand	182.8	186.6	238.1
Total outstanding long-term debt	\$ 3,426,097	3,497,079	N/A
Unrestricted cash to debt	130.1%	122.0%	229.0%
Debt to capitalization	36.8%	40.8%	25.8%
Debt service coverage ratio	6.0x	3.4x	3.2x

For the year ended December 31, 2024, the Corporation's total operating income and operating margin were \$290,665 and 3.0%, respectively, compared to the operating loss and operating margin of \$86,038 and -1.0% for the year ended December 31, 2023. Total operating revenues for the year ended December 31, 2024 grew by \$979,236 or 11.4% compared to the year ended December 31, 2023, while operating expenses, excluding work stoppage costs, increased by \$786,316 or 9.3% during the same period.

Overall, patient service revenue of \$8,860,549 was higher than prior year by \$918,890 or 11.6%. The favorable variance was primarily due to increases in acute care inpatient and outpatient revenue and professional billing revenue. Other operating revenue increased due to joint venture, grant, and pharmacy sales revenue. This was partially offset by the employer retention tax credit of \$17,000 received in 2023. For additional information, refer to the *Operating Revenue and Volume* discussion.

The increase in operating expenses was driven by increased salaries and employee benefits, physician fees and salaries, supplies, other expenses, and depreciation, many of which were impacted by continued staffing challenges and inflationary pressures. For additional information, refer to the *Operating Expenses* discussion.

The Corporation's excess of revenues over expenses (EROE) and EROE margin for the year ended December 31, 2024 were \$764,538 and 7.6%, respectively, compared to \$397,660 and 4.4% for the year ended December 31, 2023. The EROE was higher than prior year driven by operating income which increased significantly due to the end of the work stoppage. Additionally, gain on early extinguishment of debt, gain on the termination of the interest rate swaps and insurance proceeds collectively provided a benefit of \$84,211 in 2024. This was partially offset by investment income which decreased by \$82,770. For additional information, refer to the *Nonoperating Gains and Losses* discussion.

Operating Revenue and Volume

The following table presents consolidated operating revenue and select volume statistics for the years ended December 31, 2024 and 2023:

	Years ended December 31,	
	2024	2023
Operating Revenue:		
Inpatient patient service revenue	\$ 4,514,526	4,095,862
Outpatient patient service revenue	3,049,227	2,749,378
Professional billing revenue	1,163,950	974,524
State of NJ subsidy revenue	132,846	121,895
Total patient service revenue	8,860,549	7,941,659
Other operating revenue	706,046	645,700
Total operating revenue	<u>\$ 9,566,595</u>	<u>8,587,359</u>
Volume & utilization statistics:		
Acute care licensed beds	5,441	5,441
Average acute care beds in service	4,335	4,386
Acute care occupancy based on beds in service	74.8%	71.1%
Acute care length of stay	5.41	5.56
Acute care admissions	222,419	209,898
COVID-19 positive admissions	3,478	5,518
Adult and pediatric admissions	147,368	142,254
Newborn and NICU admissions	24,358	26,006
Maternity and obstetric cases	25,172	26,643
Patient days	1,186,276	1,138,110
Same day surgery cases	67,436	70,673
Emergency room visits (excl. admits)	681,339	653,081
Observations	146,628	104,544
Psychiatric hospital inpatient admissions	1,070	1,061

RWJBARNABAS HEALTH
MANAGEMENT'S DISCUSSION AND ANALYSIS, cont.

Acute Care payor mix, based on patient days, for the years ended December 31, 2024 and 2023 is presented below:

Payor Mix	December 31,	
	2024	2023
Medicare	24.8%	25.6%
Medicaid	6.5%	6.3%
Managed Medicare	23.9%	22.5%
Managed Medicaid	17.5%	20.0%
Managed Care	10.8%	10.8%
NJ Blue Cross & Commercial	10.0%	10.0%
Self-pay and Other	6.5%	4.8%
	<u>100.0%</u>	<u>100.0%</u>

Charity Care Rebalancing and Redirection to New Medicaid Outpatient Add-On Payments

Following a successful partnership between the hospital industry and State leaders, the New Jersey hospital Charity Care Program eligibility and funding level has been significantly redesigned, inclusive of funds being redirected and optimized to improve the overall financial support of New Jersey acute care hospitals that provide services to the Medicaid and uninsured populations.

Effective July 1, 2024, the Statewide Charity Care funding pool was reduced by \$205,000. In combination with this change, a new \$510,000 Medicaid hospital outpatient directed payment add-on program was implemented for all New Jersey acute care hospitals. The net increased funding level, of over \$305,000, was designed to better optimize federal Medicaid matching funds with no new State investment.

The impact of the above was a net recurring annual increase of \$51,800 to the Corporation attributable to the Acute Care Hospitals.

Operating Revenue

Inpatient service revenue, excluding subsidy revenue, of \$4,514,526 was favorable to prior year by \$418,664 or 10.2%. The increase was primarily due to inpatient volumes which were 6.0% higher than prior year due to strong performances in surgical, medicine and cardiology service lines. The acute care hospitals received additional County Option Program payments over the prior year. Also, four additional affiliates were added to the program in July 2023. Collectively, there was an increase in revenue of \$35,921 over the prior year.

Outpatient service revenue of \$3,049,227 was favorable to prior year by \$299,849 or 10.9%. The acute care hospitals accounted for \$265,005 of the increase. Acute care outpatient volume exceeded prior year by 8.2%. Emergency room (net of admissions) and observation volumes exceeded prior year by 4.3% and 40.3%, respectively. Additional net revenue from the Medicaid Outpatient Add-on payments (discussed above) was \$41,438. Offsetting the additional Medicaid Add-on payments was a reduction to the State of New Jersey charity subsidy of \$20,938. Non-acute care revenue was favorable to prior year by \$34,844 which was primarily due to physical therapy, radiology, and pediatric rehab services.

RWJBARNABAS HEALTH
MANAGEMENT'S DISCUSSION AND ANALYSIS, cont.

Professional billing revenue of \$1,163,950 was favorable to prior year by \$189,426 or 19.4%. The increase in revenue was primarily due to expansion of hospital-based services including Emergency Medicine, Hospitalist, Anesthesia, and Radiology service lines which collectively contributed \$103,123 to the variance. Community-based medical group practices contributed \$79,442 to the positive variance driven by an increase in wRVU's over prior year of 13.4%. The academic group and CINJ were favorable to prior year by \$3,596.

Other operating revenue of \$706,046 was favorable to prior year by \$60,346 or 9.3%. Other revenue includes income from grants including the Federal Emergency Management Agency (FEMA), pharmacy sales (some offset in expense), earnings from joint venture arrangements, contributions, net assets released from restriction, cafeteria, and parking. Grants were favorable to prior year by \$33,384 primarily due State of New Jersey Appropriation grants and the City of Newark grant revenue which was partially offset by lower FEMA grant revenue compared to prior year. Pharmacy sales were also favorable to prior year by \$36,556 primarily due to newly eligible 340B claims and increased volumes in the retail pharmacy. Joint venture revenue exceeded prior year by \$17,858 driven primarily by growth in medical practice joint ventures and ambulatory surgery activity. The above was partially offset by the employee retention credit of \$17,000 which was received in 2023 but did not reoccur in 2024, as well as a decrease in net assets released from restriction of \$12,612.

Certain joint ventures are reported using the equity method of accounting and are not fully consolidated in the Corporation's financial statements. Additional financial information for these joint ventures is included in the table below:

	Years ended December 31,					
	2024			2023		
	Operating Revenue	Net Income	Net Income Attributable to RWJBH	Operating Revenue	Net Income	Net Income Attributable to RWJBH
Ambulatory Surgery	\$ 442,901	198,683	55,411	\$ 401,439	178,378	50,004
Home Care & Hospice	164,937	6,660	3,386	165,485	8,827	4,495
Diagnostic Imaging	189,015	33,902	17,267	168,723	28,858	14,459
Medical Practice Joint Ventures	855,528	121,880	54,709	595,281	96,996	44,648
Other	53,870	7,327	2,500	45,878	5,117	1,809
	<u>\$ 1,706,251</u>	<u>368,452</u>	<u>133,273</u>	<u>\$ 1,376,806</u>	<u>318,176</u>	<u>115,415</u>

The increase in revenue from ambulatory surgery ventures of \$5,407 was attributable to two new centers acquired during 2023 as well as an increase in the volume of billable procedures of 5.1%.

The decrease in home care and hospice ventures of \$1,109 was due to a decrease in volume of 3.3%. The decrease in volume is attributed to lower homecare visits by 2.7%. Hospice patient days increased by 0.4% compared to 2023.

The increase in diagnostic imaging ventures of \$2,808 was due to an increase in volume of 1.2% compared to 2023. The volume increase was driven by CT, PET, and MRI procedures which exceeded prior year by 0.4%, 0.1% and 0.1%, respectively. Expenses associated with imaging procedures decreased by 0.2% from the prior year.

Medical Practice Joint Ventures were favorable to prior year by \$10,061. The favorable variance was due to expansion of this division. Six new practice joint ventures were added during 2024 and an additional thirteen practices during 2023.

RWJBARNABAS HEALTH
MANAGEMENT'S DISCUSSION AND ANALYSIS, cont.

Other ventures were favorable to prior year by \$691. While volumes were favorable to prior year by 0.7%, expenses were unfavorable to prior year by 0.1%.

Operating Expenses

Total operating expenses for the year ended December 31, 2024, of \$9,275,930 were unfavorable to prior year by \$602,533 or 6.9%. Summarized below are the consolidated operating expenses including work stoppage costs for the years ended December 31, 2024 and 2023:

	Years ended December 31,	
	2024	2023
Salaries and employee benefits	\$ 4,269,649	4,105,888
Physician fees and salaries	1,254,722	1,093,782
Supplies and other expenses	3,299,709	3,047,066
Interest	99,147	102,327
Depreciation and amortization	352,703	324,334
Total operating expenses	<u>\$ 9,275,930</u>	<u>8,673,397</u>

For the year ended December 31, 2024, salaries and employee benefits increased by \$163,761 or 4.0% compared to the year ended December 31, 2023. The increase was due to salary increases as well as the addition of full-time equivalent employees in response to higher inpatient volumes. Increased salary expenses also resulted in higher payroll taxes and social security taxes.

Physician fees and salaries for the year ended December 31, 2024, increased by \$160,940 or 14.7% compared to the year ended December 31, 2023. The increase was primarily due to expansion of hospital-based services including Emergency Medicine, Hospitalist, Anesthesia, and Radiology service lines. Community-based medical group practices were unfavorable to prior year due to new practices as well as increased variable compensation resulting from higher volumes as compared to prior year. The academic practices were also unfavorable to prior year due to continued expansion.

Supplies and other expenses for the year ended December 31, 2024 increased by \$252,643 or 8.3% compared to the year ended December 31, 2023. Supplies were unfavorable to prior year by \$163,193 driven by higher volumes. Adjusted admissions and adjusted patient days exceeded prior year by 6.1% and 4.4%, respectively. Other expenses were unfavorable to prior year by \$89,450. This increase is driven by rentals, maintenance contracts and repairs. In addition, expenses associated with the County Option program increased over prior year by \$34,410 (increase in patient service revenue as well).

Interest expense for the year ended December 31, 2024 decreased by \$3,180 or 3.1% compared to the year ended December 31, 2023. The decrease was due to additional capitalized interest related to various capital projects and the benefits of the plan of finance discussed above.

Depreciation and amortization for the year ended December 31, 2024 increased by \$28,369 or 8.7%, compared to the year ended December 31, 2023. The increase is due to investments in strategic capital projects which were completed in the latter part of 2023. These investments included Epic wave 5, phases of the CBMC surgical services renovations and NBIMC's master facility plan which included the new Emergency Department, Lobby and Central Registration areas, Nuclear Medicine, OR Surgery and Cath Lab. Additionally, in 2024, a portion of the RWJUH South Building OR Expansion became operational and the JCMC Hazard Mitigation and Hospital Hardening project was placed in service. Additional

RWJBARNABAS HEALTH
MANAGEMENT'S DISCUSSION AND ANALYSIS, cont.

phases of CBMC surgical services renovations and NBIMC's master facility plan went live as well as various IT refreshes and Epic wave 6.

Nonoperating Gains and Losses

The following table presents a summary of nonoperating revenue and expenses of the Corporation for the years ended December 31, 2024 and 2023.

	Years ended December 31,	
	2024	2023
Investment income	\$ 102,907	108,018
Realized gains on investments	304,615	15,733
Unrealized (losses) gains on investments	(5,668)	360,873
Gain on early extinguishment of debt	58,150	-
Gain on interest rate swap agreements	12,892	2,688
Insurance proceeds	13,169	-
Net periodic benefit cost	(12,192)	(12,112)
Gain on equity investment	-	8,498
Total nonoperating revenue, net	\$ 473,873	483,698

Net investment income and realized net investment gains were \$407,522 and \$123,751 for the years ended December 31, 2024 and 2023, respectively. For the year ended December 31, 2024, net unrealized losses on investments were \$5,668, as compared to net unrealized gains on investments of \$360,873 for the year ended December 31, 2023.

As discussed in the *2024 Plan of Finance* section, the debt transactions executed during the second quarter resulted in a gain on the early extinguishment of debt of \$58,150.

The Corporation had entered into various interest rate swap agreements in order to hedge future interest rate exposure on fixed rated bonds. The total notional amount of the swap agreements was \$281,960. In April 2024, the Corporation exercised its option to terminate the swap agreements for \$52,262 which resulted in a gain of \$12,892.

The Corporation also recognized insurance proceeds in nonoperating revenue of \$13,169 related to capital.

Fundraising

The Foundations support the programs and services of their affiliated tax-exempt organization and support the capital campaign and other fundraising activities of the Corporation.

RWJBARNABAS HEALTH
MANAGEMENT'S DISCUSSION AND ANALYSIS, cont.

The following table presents contributions received by the foundations and fundraising expenses as well as capital and operating support the foundations provided to the hospitals. Conditional gifts are not included until the conditions have been met.

	Years ended December 31,	
	2024	2023
Contributions without donor restrictions	\$ 21,493	10,991
Contributions with donor restrictions	32,192	88,033
Total contributions	\$ 53,685	99,024
Fundraising Expenses	\$ 18,439	18,873
Support to affiliates	\$ 58,979	83,284

The foundations made distributions of \$58,979 during 2024 primarily to support capital projects of the Corporation's hospitals, which was less than prior year by \$24,305. During 2023, the foundations recognized a \$38,000 gift that had been conditional on breaking ground at the MMC Tinton Falls campus. Additionally, the foundations received a \$16,319 unrestricted bequest in 2024.

Unrestricted Cash and Investments

The Corporation's financial position remains strong with \$13.0 billion in total assets and \$6.2 billion in net assets. Total cash and investments (without donor restrictions) amounted to \$4.5 billion (or 182.8 days) at December 31, 2024, an increase of \$189,213 over the balance at December 31, 2023. Net cash provided by operating activities for the year ended December 31, 2024 was \$749,741. The Corporation received proceeds from the issuance of new debt of \$690,006. In connection with these issuances, the Corporation refinanced and defeased certain bond series for \$656,212. Interest on long term debt paid through December was \$103,862. The termination of the interest rate swap agreements resulted in cash proceeds of \$52,262. The Corporation continues to invest in capital with \$867,193 in additions during 2024. Investments in the ambulatory services division of \$120,591 were also executed through December. Net investment income of \$401,854 had a positive impact on investments.

Total unrestricted cash and investments for the Corporation as of December 31, 2024 and 2023 were as follows:

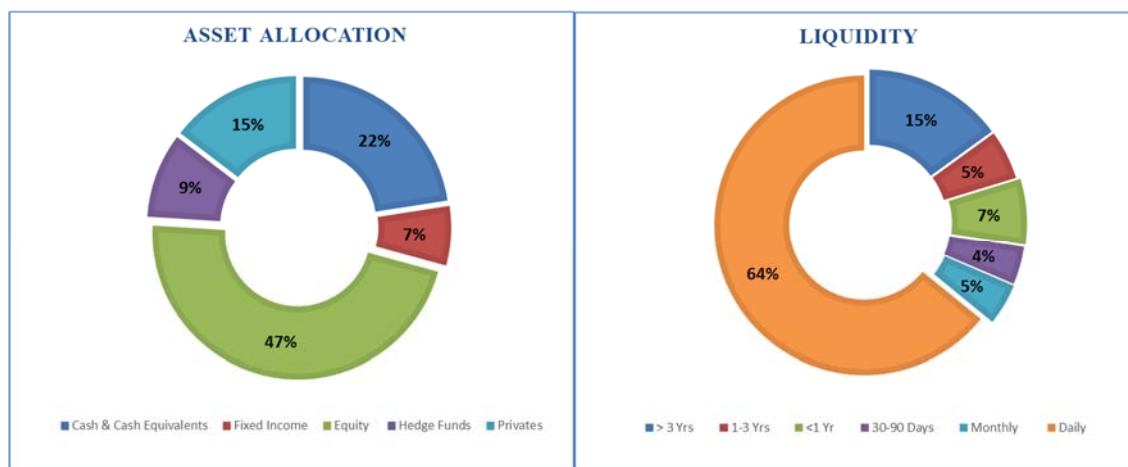
	December 31,	December 31,
	2024	2023
Cash and cash equivalents	\$ 291,326	177,312
Current investments	400,990	543,380
Noncurrent investments	3,764,969	3,547,380
Total unrestricted cash and investments	\$ 4,457,285	4,268,072

The Corporation manages two distinct investment portfolios within the Unrestricted Cash and Investment (UCI) Portfolio: the Capital Reserve Fund (CRF) and the Long-Term Investment Portfolio (LTIP). The CRF is invested in high quality, low duration fixed income securities to support operating cash flow needs. The LTIP is invested with a longer-term horizon targeting higher risk adjusted returns through a diversified asset allocation to support strategic capital needs.

RWJBARNABAS HEALTH
MANAGEMENT’S DISCUSSION AND ANALYSIS, cont.

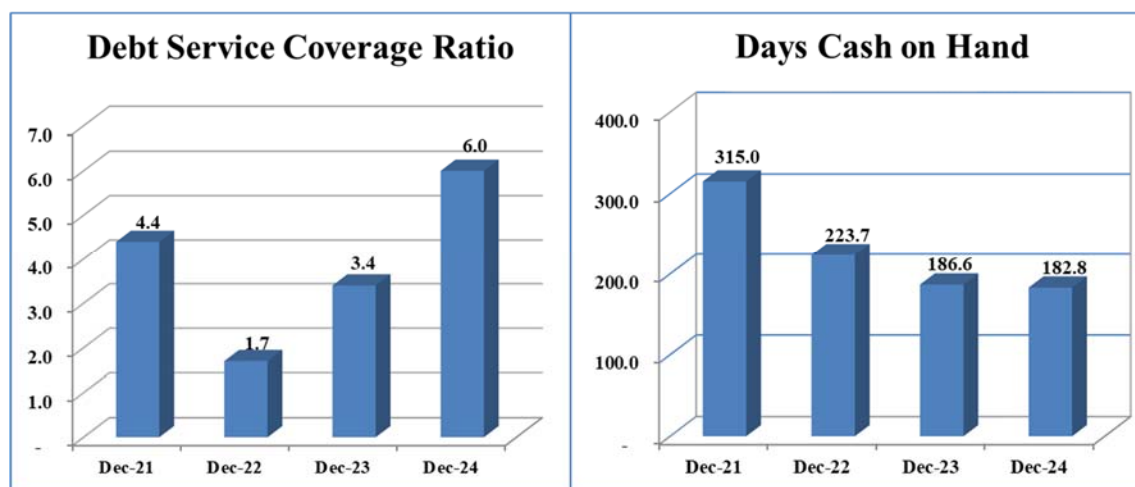
In accordance with the Corporation’s Investment Policy Statement, at least 40% of the asset value of the total UCI portfolio must be classified as “monthly” liquidity. As of December 31, 2024, 69% of the total UCI portfolio was classified as monthly or daily liquidity.

The following charts present the allocation of unrestricted cash and investments by asset type and the portfolio’s liquidity as of December 31, 2024:



Financial Condition

The following charts present the debt service coverage ratio and total days cash on hand for the selected dates below:



The increase in debt service coverage ratio from 2023 to 2024 is attributable to an increase in income from operations of \$192,920, before work stoppage costs, over prior year. The decline in days cash on hand from 2022 to 2023 was due to higher operating expenses including work stoppage costs, increase in capital investments and expansion of ambulatory services. The decline was partially offset by positive investment performance.

RWJBARNABAS HEALTH

MANAGEMENT'S DISCUSSION AND ANALYSIS, cont.

On April 1, 2024, the Corporation amended its secured revolving promissory note with JP Morgan Chase Bank, N.A. increasing the principal amount to \$100,000. The note will be used for routine capital needs. There were no borrowings outstanding as of December 31, 2024.

The following table presents key financial indicators as of December 2024, 2023 and 2022 as compared to S&P's "AA", "AA-" and "A+" medians.

	December 31, 2024	December 31, 2023	December 31, 2022	AA	AA-	A+
Debt service coverage	6.0	3.4	1.7	6.8	3.2	3.2
Debt-to-capitalization	36.8%	40.8%	42.8%	19.8%	25.8%	29.2%
Cash-to-debt	130.1%	122.0%	133.6%	321.7%	229.0%	178.2%
Days cash on hand	182.8	186.6	223.7	303.8	238.1	193.7

The following table presents other select ratios as of December 31, 2024, 2023 and 2022:

	December 31, 2024	December 31, 2023	December 31, 2022
Days in patient accounts receivable	39.8	40.6	40.7
Days in accounts payable	65.3	72.5	63.8
Reinvestment ratio	2.46	2.84	2.37

* Based on a rolling 12-months.

RWJ BARNABAS HEALTH, INC.

Consolidated Balance Sheets

(In thousands)

Assets	December 31, 2024 (unaudited)	December 31, 2023 (audited)
Current assets:		
Cash and cash equivalents	\$ 291,326	177,312
Short-term Investments	400,990	543,380
Assets limited or restricted as to use	94,486	97,016
Patient accounts receivable	963,409	883,795
Estimated amounts due from third party payors	201,837	302,468
Other current assets	341,161	314,575
Total current assets	2,293,209	2,318,546
Assets limited or restricted as to use, non-current portion		
Investments	477,766	460,335
Property, plant and equipment, net	3,764,969	3,547,380
Right of use asset	4,844,911	4,336,734
Other assets, net	275,921	315,922
Total assets	12,984,084	12,221,796
Liabilities and Net Assets		
Current liabilities:		
Accounts payable	650,235	667,643
Accrued expenses and other current liabilities	1,397,004	1,410,171
Estimated amounts due to third party payors	24,907	22,384
Long-term debt	52,172	51,314
Lease obligation	49,678	52,731
Self-insurance liabilities	119,213	114,303
Total current liabilities	2,293,209	2,318,546
Estimated amounts due to third party payors, net of current portion	118,340	125,092
Self insurance liabilities, net of current portion	425,262	403,573
Long-term debt, net of current portion	3,373,925	3,445,765
Lease obligation, net of current portion	253,856	289,678
Accrued pension liability	66,422	55,387
Other liabilities	240,479	177,703
Total liabilities	6,771,494	6,815,744
Net assets:		
Without donor restrictions		
Controlling interest	5,865,002	5,034,583
Noncontrolling interest	28,945	35,225
Total net assets without donor restrictions	5,893,947	5,069,808
With donor restrictions	318,643	336,244
Total net assets	6,212,590	5,406,052
Total liabilities and net assets	\$ 12,984,084	12,221,796

See accompanying notes to consolidated financial statements.

RWJ BARNABAS HEALTH, INC.
Consolidated Statements of Operations
Years ended December 31, 2024 and 2023
(In thousands)

	<u>2024</u>	<u>2023</u>
	(unaudited)	(audited)
Revenue:		
Patient service revenue	\$ 8,860,549	7,941,659
Other revenue, net	706,046	645,700
Total revenue	<u>9,566,595</u>	<u>8,587,359</u>
Expenses:		
Salaries and wages	3,559,035	3,270,096
Physician fees and salaries	1,254,722	1,093,782
Employee benefits	710,614	660,256
Supplies	1,581,275	1,418,051
Other	1,718,434	1,620,768
Interest	99,147	102,327
Depreciation and amortization	352,703	324,334
Total expenses	<u>9,275,930</u>	<u>8,489,614</u>
Income from operations before work stoppage costs	290,665	97,745
Work stoppage costs	-	183,783
Income (loss) from operations	<u>290,665</u>	<u>(86,038)</u>
Nonoperating revenue (expenses):		
Investment income, net	401,854	484,624
Other, net	72,019	(926)
Total nonoperating revenue, net	<u>473,873</u>	<u>483,698</u>
Excess of revenue over expenses	764,538	397,660
Other changes:		
Pension changes other than net periodic benefit cost	(8,843)	50
Net assets released from restriction for purchases of property and equipment	27,709	34,317
Other, net	40,735	28,119
Increase in net assets without donor restrictions	<u>\$ 824,139</u>	<u>460,146</u>

See accompanying notes to consolidated financial statements.

RWJ BARNABAS HEALTH, INC.
Consolidated Statements of Changes in Net Assets
Years ended December 31, 2024 and 2023
(In thousands)
(unaudited)

	Controlling interest	Noncontrolling interest	Without donor restrictions	With donor restrictions	Total net assets
Net assets at December 31, 2022	\$ 4,583,671	25,991	4,609,662	289,997	4,899,659
Changes in net assets:					
Excess of revenues over expenses	395,869	1,791	397,660	-	397,660
Contribution received in acquisition			-	-	-
Pension related changes other than net periodic benefit cost	50	-	50	-	50
Change in interest in net assets of unconsolidated foundations	-		-	(2,275)	(2,275)
Net assets released from restriction	34,317	-	34,317	(56,733)	(22,416)
Restricted contributions	-	-	-	105,306	105,306
Investment income on restricted investments, net	-	-	-	1,050	1,050
Contributions to non-controlling interest	-	8,100	8,100	-	8,100
Distributions from noncontrolling interest	-	(657)	(657)	-	(657)
Other	20,676	-	20,676	(1,101)	19,575
Changes in net assets	<u>450,912</u>	<u>9,234</u>	<u>460,146</u>	<u>46,247</u>	<u>506,393</u>
Net assets at December 31, 2023	<u>5,034,583</u>	<u>35,225</u>	<u>5,069,808</u>	<u>336,244</u>	<u>5,406,052</u>
Changes in net assets:					
Excess of revenues over expenses	764,808	(270)	764,538	-	764,538
Pension changes other than net periodic benefit cost	(8,843)	-	(8,843)	-	(8,843)
Change in interest in net assets of unconsolidated foundations	(122)	-	(122)	(5,317)	(5,439)
Net assets released from restriction	27,709	-	27,709	(44,773)	(17,064)
Restricted contributions	-	-	-	32,253	32,253
Investment income on restricted investments, net	-	-	-	1,165	1,165
Other	46,867	(6,010)	40,857	(929)	39,928
Changes in net assets	<u>830,419</u>	<u>(6,280)</u>	<u>824,139</u>	<u>(17,601)</u>	<u>806,538</u>
Net assets at December 31, 2024	<u>\$ 5,865,002</u>	<u>28,945</u>	<u>5,893,947</u>	<u>318,643</u>	<u>6,212,590</u>

See accompanying notes to consolidated financial statements.

RWJ BARNABAS HEALTH, INC.
Consolidated Statements of Cash Flows
Years ended December 31, 2024 and 2023
(In thousands)

	2024	2023
	(unaudited)	(audited)
Cash flows from operating activities:		
Change in net assets	\$ 806,538	506,393
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Pension changes other than net periodic benefit cost	8,843	(50)
Depreciation and amortization expense	352,703	324,334
Amortization of bond financing costs, premiums and discounts	(15,606)	(11,586)
Net change in unrealized (losses) gains on investments	5,668	(360,873)
Realized gains on investments	(304,615)	(15,733)
Gains on interest rate swaps	(12,892)	(2,688)
Equity-based compensation	9,398	-
Equity in income of joint venture	(133,273)	(115,415)
Distributions received from investments in joint ventures	112,115	88,304
Contributions from noncontrolling interests	-	(8,100)
Distributions to noncontrolling interests	-	657
Gain on sale of assets	(24)	(657)
Gain on acquisition of subsidiary	-	(8,498)
Contributions restricted for long-term use	(21,602)	(45,897)
Gain on early extinguishment of debt, net	(58,150)	-
Other changes in net assets	6,304	-
Changes in operating assets and liabilities:		
Patient accounts receivable	(78,845)	(95,590)
Reduction in the carrying amount in the right-of-use assets	65,121	65,300
Other assets	(3,207)	(18,281)
Accounts payable, accrued expenses, and other current liabilities	(48,684)	196,580
Estimated amounts due from and to third-party payors, net	96,402	(120,472)
Accrued pension liability	2,192	2,111
Lease obligation, self-insurance and other long-term liabilities	6,355	(8,051)
Net cash provided by operating activities	794,741	371,788
Cash flows from investing activities:		
Purchases of property, plant, and equipment	(867,193)	(920,660)
Purchases of investments	(12,310,227)	(9,563,893)
Proceeds from the sale of investments	12,527,335	10,116,301
Investment in equity method and cost method joint ventures	(120,591)	(229,282)
Acquisition of subsidiaries, net	(2,875)	(50,741)
Proceeds from sale of assets	671	1,116
Net cash used in investing activities	(772,880)	(647,159)
Cash flows from financing activities:		
Proceeds from issuance of debt	690,006	-
Repayments of long-term debt	(705,885)	(49,762)
Borrowings under commercial paper program	49,701	-
Repayments under commercial paper program	(49,701)	-
Payments for deferred financing costs	(5,308)	-
Contributions from noncontrolling interests	-	8,100
Distributions to noncontrolling interest	-	(657)
Settlement of interest rate swaps	52,262	-
Proceeds from contributions restricted for long-term use	21,602	45,897
Proceeds from contributions and grants	47,737	6,891
Net cash provided by financing activities	100,414	10,469
Net increase (decrease) in cash, cash equivalents, and restricted cash	122,275	(264,902)
Cash, cash equivalents, and restricted cash at beginning of year	257,986	522,888
Cash, cash equivalents, and restricted cash at end of period	\$ 380,261	257,986
Cash and cash equivalents	\$ 291,326	177,312
Restricted cash included in assets limited or restricted as to use	88,935	80,674
Total cash, cash equivalents, and restricted cash	\$ 380,261	257,986
Supplemental disclosures of cash flow information:		
Cash paid for interest	\$ 103,862	111,074
Finance lease obligations incurred	12,042	112,710
Supplemental disclosure of noncash investing and financing activity:		
Change in noncash acquisitions of property, plant and equipment	(19,134)	27,130

See accompanying notes to the consolidated financial statements.

RWJ BARNABAS HEALTH, INC.

Notes to Consolidated Financial Statements

December 31, 2024 and 2023

(Information pertaining to the year ended December 31, 2024 is unaudited)

(1) Organization

RWJ Barnabas Health, Inc. (the Corporation) is a not-for-profit, tax-exempt corporation located in West Orange, New Jersey. RWJ Barnabas Health, Inc. is the sole corporate member or sole shareholder of the Corporation's affiliated organizations. The Corporation was organized to develop and operate a multihospital healthcare system providing a comprehensive spectrum of healthcare services, principally to the residents of New Jersey and surrounding areas.

The services and facilities of the Corporation include 12 acute care hospitals, (including an academic medical center), 3 acute care children's hospitals, a pediatric rehabilitation hospital with a network of outpatient centers, a freestanding 100-bed behavioral health center, two trauma centers, a satellite emergency department, ambulatory care centers, geriatric centers, the state's largest behavioral health network, comprehensive home care and hospice programs, fitness and wellness centers, physical therapy services, retail pharmacy services, medical groups, multi-site imaging centers, an accountable care organization, a burn treatment facility, comprehensive cancer services, breast centers, and comprehensive cardiac surgery services, including a heart transplant center, a lung transplant center, and kidney transplant centers.

(2) Significant Accounting Policies

(a) Basis of Accounting of Financial Statement Presentation

The accompanying unaudited consolidated financial statements are prepared on the accrual basis of accounting in accordance with U.S. generally accepted accounting principles (GAAP) for interim financial reporting. Footnotes and other disclosures that would substantially duplicate the disclosures contained in an audited financial statement have been omitted. Accordingly, they do not include all of the information and notes required by GAAP for complete financial statements of the Corporation. Eliminations and reporting adjustments have been made to present the information in accordance with GAAP. The data should be read in conjunction with the audited consolidated financial statements for the year ended December 31, 2023 and related notes. Information as of and for the year ended December 31, 2024 are not based on audited information but, in the opinion of management, is presented on a basis consistent with the audited consolidated financial statements and includes adjustments necessary for a fair presentation therein. Adjustments to these financial statements may occur as a result of a more comprehensive review undertaken as part of the audit process for the year ending December 31, 2024.

The consolidated financial statements include all affiliates and other entities for which operating control is exercised by the Corporation. Investments in entities where the Corporation does not have operating control are recorded under the equity or cost method of accounting. The Corporation has included its equity share of income or losses from investments in unconsolidated affiliates in other operating revenue. Intercompany balances and transactions have been eliminated.

(b) Use of Estimates

The preparation of the consolidated financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, and disclosure of contingent assets and liabilities, at the date of the consolidated financial statements

RWJ BARNABAS HEALTH, INC.

Notes to Consolidated Financial Statements

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(Information pertaining to the year ended December 31, 2024 is unaudited)

and reported amounts of revenue and expenses during the reporting year. Actual results could differ from those estimates.

(c) Accounting Pronouncements

In June 2016, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2016-13, *Financial Instruments – Credit Losses (Topic 326): Measurement of Credit Losses on Financial Instruments*. The main objective of ASU 2016-13 and related ASU updates is to provide financial statement users with more decision-useful information about the expected credit losses on financial instruments and other commitments to extend credit held by a reporting entity at each reporting date. The amendments affect loans, debt securities, trade receivables, net investments in leases, off balance sheet credit exposures, reinsurance receivables, and any other financial assets not excluded from the scope that have the contractual right to receive cash. This guidance is effective for fiscal years beginning after December 15, 2022. The adoption of this guidance did not materially impact the Corporation's financial position or results of operation.

In January 2017, the FASB issued ASU 2017-04, *Intangibles – Goodwill and Other (Topic 350): Simplifying the Test for Goodwill Impairment*. This standard eliminates Step 2 from the goodwill impairment test by comparing the implied fair value of a reporting unit's goodwill with the carrying amount of that goodwill. This guidance is effective for fiscal years beginning after December 15, 2022. The adoption of this guidance did not materially impact the Corporation's financial position or results of operation.

(3) Work Stoppage Costs

During 2023, Robert Wood Johnson University Hospital (RWJUH) began negotiations with representatives from the United Steel Workers Local 4-200 (USW), which represents approximately 1,700 nurses. The USW nurses elected to strike on August 4, 2023 and RWJUH executed a strike contingency plan to ensure uninterrupted operations for the facility, including the recruitment of more than 1,000 replacement nurses. On December 15, 2023, the USW ratified a new, three-year collective bargaining contract and effective January 8, 2024, the nurses were reintegrated into the workforce. Incremental costs incurred, net, were \$183,783 through December 31, 2023, which are reported in work stoppage costs in the statement of operations. The costs are comprised of agency costs of \$250,468 and other costs of \$27,490, offset by salary and benefit savings of \$94,175. No significant costs were incurred in 2024 related to the strike.

Operating income (loss) before work stoppage costs includes the financial results of operating entities, but excludes work stoppage costs that are considered to be nonrecurring in nature.

(4) Revenue

(a) Patient Service Revenue

The Corporation's patient service revenue is recognized at the amount that reflects the consideration to which the Corporation expects to be entitled in exchange for providing patient care. These amounts are due from patients and third-party payors and include an estimate of variable consideration for retroactive revenue adjustments due to settlement of audits, reviews, and investigations. Generally, the

RWJ BARNABAS HEALTH, INC.

Notes to Consolidated Financial Statements

December 31, 2024 and 2023

(Information pertaining to the year ended December 31, 2024 is unaudited)

Corporation bills the patients and third-party payors several days after the services are performed and/or the patient is discharged from the facility.

Revenue is recognized as performance obligations are satisfied. Performance obligations are determined based on the nature of the services provided by the Corporation. Revenue for performance obligations satisfied over time is recognized based on actual charges incurred in relation to total expected (or actual) charges. The Corporation believes that this method provides a reasonable representation of the transfer of services over the term of the performance obligation based on the inputs needed to satisfy the obligation. The Corporation measures the performance obligation from admission into the hospital to the point when it is no longer required to provide services to that patient, which is generally at the time of discharge.

Because all of its performance obligations relate to contracts with a duration of less than one year, the Corporation has elected to apply the optional exemption provided in FASB Accounting Standards Codification (ASC) 606-10-50-14 and, therefore, is not required to disclose the aggregate amount of the transaction price allocated to performance obligations that are unsatisfied or partially unsatisfied at year-end, which primarily relate to acute care patients (in-house). The performance obligations for these contracts are generally completed when the patients are discharged, which generally occurs within days or weeks of year-end.

The majority of the Corporation's services are rendered to patients with third-party payor insurance coverage. Reimbursement under these programs for all payors is based on a combination of prospectively determined rates, reimbursed costs, discounted charges, and per diem payments. Amounts received under Medicare and Medicaid programs are subject to review and final determination by program intermediaries or their agents and the contracts the Corporation has with commercial payors also provide for retroactive audit and review of claims. Agreements with third-party payors typically provide for payments at amounts less than established charges. Generally, patients who are covered by third-party payors are responsible for related deductibles and coinsurance, which vary in amount. The Corporation also provides services to uninsured patients, and offers those uninsured patients a discount, either by policy or law, from standard charges. The Corporation estimates the transaction price for patients with deductibles and coinsurance and from those who are uninsured 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. Implicit price concessions are determined on historical collection experience. Subsequent changes to the estimate of the transaction price are generally recorded as adjustments to patient service revenue in the period of the change and are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined. Adjustments arising from a change in the transaction price were not significant for the years ended December 31, 2024 or 2023. Subsequent changes that are determined to be the result of an adverse change in the patient's ability to pay are recorded as bad debt expense. There was no bad debt expense for the years ended December 31, 2024 or 2023.

Consistent with the Corporation's mission, care is provided to patients regardless of their ability to pay. The Corporation has determined it has provided implicit price concessions to uninsured patients and patients with other uninsured balances (e.g., co-pays and deductibles). The implicit price concessions included in estimating the transaction price represent the difference between amounts

RWJ BARNABAS HEALTH, INC.

Notes to Consolidated Financial Statements

December 31, 2024 and 2023

(Information pertaining to the year ended December 31, 2024 is unaudited)

billed to patients and the amounts the Corporation expects to collect based on its collection history with those patients. Patients who meet the Corporation's criteria for charity care are provided care without charge or at amounts less than established charges. The Corporation has determined that it has provided sufficient implicit price concessions for these accounts. Price concessions, including charity care, are not reported as revenue.

The Corporation has elected the financing component practical expedient and does not adjust the promised amount of consideration from patients and third-party payors for the effects of a significant financing component due to the Corporation's expectation that the period between the time the service is provided to a patient and the time that the patient or a third-party payor pays for that service will be one year or less. However, the Corporation does, in certain instances, enter into payment agreements with patients that allow payments in excess of one year. For those cases, the financing component is not deemed to be significant to the contract. The Corporation has determined that the nature, amount, timing, and uncertainty of patient service revenue and cash flows are affected by payors and service lines.

Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation. As a result, there is a possibility that recorded estimates could change by a material amount. During the years ended December 31, 2024 and 2023 certain prior year third-party cost reports were audited and settled, or tentatively settled by third-party payors. Adjustments resulting from such audits, settlements, and management reviews are reflected as adjustments to patient service revenue in the period that adjustments become known. The effect of cost report settlements increased patient service revenue by \$39,131 and \$34,529, respectively, for the years ended December 31, 2024 and 2023. Although certain other prior year cost reports submitted to third-party payors remain subject to audit and retroactive adjustment, management does not expect any material adverse settlements.

(b) Other Revenue

Other revenue includes income from grants, equity in the income of healthcare joint ventures, unrestricted contributions, net assets released from restriction, cafeteria sales, and parking receipts. Grant revenue and contributions of the Corporation are nonexchange transactions in which no commensurate value is exchanged. In such cases, contribution accounting is applied under ASC Topic 958, Not-for-Profit Entities. Equity in the income of joint ventures is evaluated under ASC Topic 323, *Investments – Equity Method and Joint Ventures*.

Additionally, pharmacy sales and other contracts related to healthcare services are included in other revenue and consist of contracts, which vary in duration and in performance. Revenue is recognized when the performance obligations identified within the individual contracts are satisfied and collections are probable.

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Notes to Consolidated Financial Statements

December 31, 2024 and 2023

(Information pertaining to the year ended December 31, 2024 is unaudited)

(5) Fair Value Measurements

ASC 820, *Fair Value Measurement* establishes a three-level valuation hierarchy for disclosure of fair value measurements. The valuation hierarchy is based upon the transparency of inputs to the valuation of an asset or liability as of the measurement date. The three levels are defined as follows:

Level 1: Quoted prices in active markets for identical assets or liabilities. Level 1 assets and liabilities include cash and cash equivalents and debt and equity securities that are traded in an active exchange market.

Level 2: Observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities. Level 2 assets and liabilities include debt securities with quoted market prices that are traded less frequently than exchange-traded instruments. This category generally includes certain U.S. government and agency mortgage-backed debt securities and corporate bonds.

Level 3: Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities. Level 3 assets and liabilities include financial instruments whose value is determined using pricing models, discounted cash flow methodologies, or similar techniques, as well as instruments for which the determination of fair value requires significant management judgment or estimation. The Corporation currently holds no Level 3 investments

The following tables present the Corporation's fair value hierarchy for those assets measured at fair value on a recurring basis, and exclude pledges receivable, net, other investments, and accrued interest receivable, as of December 31, 2024 and 2023:

	December 31, 2024				
	Fair value	Level 1	Level 2	Level 3	NAV
Investment categories:					
Cash and cash equivalents					
and money market funds	\$ 428,170	428,170	—	—	—
Equity securities	187,993	187,993	—	—	—
Equity mutual funds	1,414,622	1,414,622	—	—	—
Fixed income mutual funds	276,566	276,566	—	—	—
Certificates of deposit	—	—	—	—	—
Unit investment trust	1,185	1,185	—	—	—
Commercial mortgage-backed securities	62,508	—	62,508	—	—
Corporate bonds	245,290	—	245,290	—	—
Asset-backed securities	178,823	—	178,823	—	—
Government bonds	101,264	—	101,264	—	—
Government mortgage-backed securities	16,354	—	16,354	—	—
Municipal bonds	6,923	—	6,923	—	—
Alternative investments	1,595,373	—	—	—	1,595,373
Total	<u>\$ 4,515,071</u>	<u>2,308,536</u>	<u>611,162</u>	<u>—</u>	<u>1,595,373</u>

RWJ BARNABAS HEALTH, INC.

Notes to Consolidated Financial Statements

December 31, 2024 and 2023

(Information pertaining to the year ended December 31, 2024 is unaudited)

	December 31, 2023				
	<u>Fair value</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>NAV</u>
Investment categories:					
Cash and cash equivalents					
and money market funds	\$ 388,804	388,804	-	-	-
Equity securities	575,884	575,884	-	-	-
Equity mutual funds	983,361	983,361	-	-	-
Fixed income mutual funds	378,202	378,202	-	-	-
Certificates of deposit	-	-	-	-	-
Unit investment trust	1,076	1,076	-	-	-
Commercial mortgage-backed securities	48,441	-	48,441	-	-
Corporate bonds	506,186	-	506,186	-	-
Asset-backed securities	207,652	-	207,652	-	-
Government bonds	179,346	-	179,346	-	-
Government mortgage-backed securities	184,884	-	184,884	-	-
Municipal bonds	13,253	-	13,253	-	-
Alternative investments	942,814	17,928	-	-	924,886
Total	\$ <u>4,409,903</u>	<u>2,345,255</u>	<u>1,139,762</u>	<u>-</u>	<u>924,886</u>

(6) Short-term borrowings

The Corporation established a self-liquidity backed commercial paper program which will serve as a source for interim liquidity needs. The program is authorized up to \$200,000. An initial draw in the principal amount of \$50,000 was executed in May 7, 2024 with varying termination dates between 30 and 60 days, which further increased cash and established short term debt on the balance sheet. The initial draw, net of discount, was subsequently rolled over and paid back on September 9, 2024. There was no commercial paper outstanding as of December 31 2024.

RWJ BARNABAS HEALTH, INC.

Notes to Consolidated Financial Statements

December 31, 2024 and 2023

(Information pertaining to the year ended December 31, 2024 is unaudited)

(7) Long-term debt

Long-term debt consists of the following:

	December 31,	
	2024	2023
Revenue and refunding bonds	\$ 2,644,498	2,757,630
Senior secured notes	300,000	300,000
Notes payable	11	1,567
Finance lease obligations	271,386	263,376
Total long-term debt	3,215,895	3,322,573
Plus unamortized bond premium	227,207	192,358
Less:		
Unamortized bond discount	-	729
Deferred financing costs, net	17,005	17,123
Current portion	52,172	51,314
Long-term portion	\$ 3,373,925	3,445,765

Under the terms of the Master Trust Indenture (MTI), Children’s Specialized Hospital, Clara Maass Medical Center, Community Medical Center, Jersey City Medical Center, Monmouth Medical Center, Newark Beth Israel Medical Center, RWJ Barnabas Health, Inc., RWJBH Corporate Services (fka Barnabas Health, Inc.), RWJUH, Robert Wood Johnson University Hospital at Hamilton, Robert Wood Johnson University Hospital Rahway, and Cooperman Barnabas Medical Center, are members of an Obligated Group. Substantially all of the Corporation’s debt is subject to the provisions of the MTI.

To secure its payment obligations, the Obligated Group has granted to the Trustee a first lien and security interest in the gross revenue of each member of the Obligated Group.

Obligated Group members are jointly and severally liable under the MTI. The Corporation does have the right to name designated affiliates. Though designated affiliates are not obligated to make debt service payments on the obligations under the MTI, the Corporation may cause each designated affiliate to transfer such amounts as necessary to enable the Obligated Group members to comply with the terms of the MTI, including payment of the outstanding obligations.

The Corporation’s Obligated Group is required to maintain certain financial covenants in connection with the NJHCFFA and credit arrangements with a consortium of banks, including JPMorgan Chase Bank, N.A. (JPMorgan) and U.S. Bank.

On August 1, 2023, the Corporation paid the outstanding balance of \$6,790 of RWJ Barnabas Health Obligated Issue, Series 2017A bonds (previously Children’s Specialized Hospital Issue, Series 2013A).

The Corporation had entered into forward interest rate swap agreements with JPMorgan, Bank of America, and U.S. Bank, respectively. The total notional amount of all swap agreements was \$281,960. The notional amounts on these swap agreements were tied to the outstanding principal on the underlying bond series.

RWJ BARNABAS HEALTH, INC.

Notes to Consolidated Financial Statements

December 31, 2024 and 2023

(Information pertaining to the year ended December 31, 2024 is unaudited)

On April 24, 2024, the Corporation exercised its option to terminate the interest rate swap agreements for \$52,262, net, which resulted in a gain of \$12,892, and is included in nonoperating revenue.

On March 31, 2023, the Corporation entered into a secured revolving promissory note (the Note) for the principal amount of \$50,000 with JPMorgan for routine working capital needs. The terms of the Note include a commitment fee of 0.12%. The interest rate is based on Secured Overnight Financing Rate (SOFR) and an adjusted term SOFR fixed rate of 0.10% for the interest period plus 0.55% per annum. As of December 31, 2024, \$6,289 of the Note was used in the form of standby letters of credit that provides liquidity support for the Corporation's self-insured workers' compensation and other programs. There was no cash drawn from the Note during the term. The Note expired on April 1, 2024 and was replaced with a \$100,000 secured revolving promissory note (New Note) with JPMorgan expiring on March 28, 2025. All other terms of the New Note have not changed from the prior Note.

(8) 2024 Plan of Finance

On April 8, 2024, the Corporation made an offer to purchase bonds in an aggregate principal amount of up to \$330,000 relating to select maturities of the Series 2016 and Series 2019 bonds. In connection with that offer, the Corporation purchased tendered target bonds in an aggregate principal amount of \$261,397. The settlement date was May 8, 2024.

On May 1, 2024, the Corporation completed the RWJ Barnabas Health Obligated Group Issue, Series 2024A bond issuance in the amount of \$370,330. Series 2024A was issued at a premium for a total source of funds of \$404,142. The Corporation used a portion of these proceeds to defease the Series 2019 B-1 bonds in the amount of \$70,812. The remainder of the proceeds was used for reimbursement of prior capital costs.

On May 16, 2024, the Corporation completed the RWJ Barnabas Health Obligated Group Issue, Series 2024B bond issuance in the amount of \$250,690. The Series 2024B bonds were used to refund the Barnabas Health System, Series 2014A, Robert Wood Johnson University Hospital, Series 2014A and Robert Wood Johnson University Hospital, Series 2013A.

On May 16, 2024, the Corporation defeased the Barnabas Health System, Taxable Revenue Bonds, Series 2012 for \$80,979.

Collectively, the above transactions resulted in a gain on extinguishment of debt of \$58,150.

(9) Employee Benefit Plans

The Corporation maintains several benefit plans for its employees. The following are brief descriptions of those plans and related expenses for the years ended December 31, 2024 and 2023:

- The Corporation provides pension benefits to its employees through defined contribution plans. Contributions to these plans are based on percentages of annual salaries. It is the policy of the Corporation to fund accrued costs under these plans on a current basis. Pension expense related to these defined contribution plans was approximately \$98,990 and \$96,947 for years ended December 31, 2024 and 2023, respectively.

RWJ BARNABAS HEALTH, INC.

Notes to Consolidated Financial Statements

December 31, 2024 and 2023

(Information pertaining to the year ended December 31, 2024 is unaudited)

- Certain affiliates of the Corporation contribute to various multiemployer defined benefit pension plans under the terms of collective bargaining agreements that cover union-represented employees. Contributions to these plans approximated \$6,964 and \$6,815 for the years ended December 31, 2024 and 2023, respectively.
- Certain employees of the Corporation participate in deferred compensation plans. Eligible employees may defer compensation under a salary reduction agreement, subject to certain dollar limitations. Payments, upon retirement or termination of employment, are based on amounts credited to individual accounts. In connection with these plans, certain affiliates deposit amounts with trustees on behalf of participating employees. Under the terms of these plans, the Corporation is not responsible for investment gains or losses incurred. The assets are restricted for payments under the plans. The plans are funded based upon the benefit formula as outlined in the plan documents.

The RWJ Barnabas Health Retirement Income Plan (the RWJBH Plan) covers substantially all employees of the Corporation. The RWJBH Plan is currently frozen and no participants accrue credited service or contribute to the RWJBH Plan.

The assets of the RWJBH Plan are managed under a liability-driven investment (LDI) strategy. Under the LDI strategy, the expected rate of return on plan assets is based upon the assumption that plan assets will be invested primarily in fixed income and other related securities based upon their ability to perform similarly to the characteristics of the plan liabilities over time. The policy of the Corporation is to evaluate the annual funding liability on a calendar year basis. Based on this evaluation, contributions of \$10,000 was made to the RWJBH Plan during the years ended December 31, 2024 and 2023, respectively.

(10) Partnership with Rutgers, the State University of New Jersey

The Corporation, Rutgers, the State University of New Jersey (Rutgers), and Rutgers Health Group (RHG) entered into a Master Affiliation Agreement (MAA) with the goal of integrating medical education, advanced research and healthcare delivery.

The MAA requires reciprocal commitments and the alignment of each party's respective strategic, operational, and financial interests, and activities as part of a coordinated and mutually supportive academic health system. The Corporation and Rutgers have continued to execute on strategies contemplated in the MAA including integrating the clinical operations of the Faculty of Robert Wood Johnson Medical School (RWJMS) and the Rutgers CINJ through Integrated Practice Agreements (IPA). Under the terms of these agreements, Rutgers will continue to employ providers and certain support staff, but the Corporation is responsible for the operations of the clinical practices and related financial results. This included establishing a unified medical records system across the Corporation's entire medical group (including RWJMS and CINJ) and creating a unified and integrated patient experience.

As of December 31, 2024 and 2023, the Corporation owed Rutgers \$112,599 and \$211,275, net, respectively, under the MAA and IPA agreements. These amounts are included in accrued expenses and other current liabilities in the consolidated balance sheets.

RWJ BARNABAS HEALTH, INC.

Notes to Consolidated Financial Statements

December 31, 2024 and 2023

(Information pertaining to the year ended December 31, 2024 is unaudited)

(11) Commitments

The Corporation entered into an agreement with Epic to deploy an integrated Electronic Health Record (EHR) with supporting revenue cycle, data analytics, and consumer facing digital capabilities. This integration established, among other things, one EHR across all ambulatory sites to support the ability to manage physicians as one integrated practice and support the consolidation of the various revenue cycle systems to an integrated solution.

The implementation was completed in phases. The completion date of the entire project was September 2024. Through December 31, 2024, the Corporation incurred approximately \$775,000 in capital and operating costs to complete the project.

(12) Subsequent Events

Management evaluated all events occurring subsequent to December 31, 2024 and through February 14, 2025, the date the consolidated financial statements were available to be issued. The Corporation did not have any material recognizable subsequent events during the period.

RWJ BARNABAS HEALTH, INC.

Note to Consolidated Financial Statements - Obligated Group

The following financial information as of and for the years ended December 31, 2024 and 2023 (unaudited) on pages 38 and 39 of the Corporation's Obligated Group was prepared for purposes of accommodating a certain group of bond and note holders. The financial information reflects the financial position and results of operations and changes in net assets of the Obligated Group and not of the entire Corporation and is not intended to be presented in conformity with U.S. generally accepted accounting principles.

In 2024, the Corporation ceased allocating medical group practice losses to the acute care hospitals. The bridge schedule on page 40 reflects the results of the Obligated Group's Statement of Operations and Changes in Net Assets for the year ended December 31, 2023 as adjusted for the impact of the medical group practice loss allocation and as reported in our audited financial statement for the year ended December 31, 2023 as posted to EMMA on April 24, 2024.

RWJ BARNABAS HEALTH, INC.

Consolidated Balance Sheets - Obligated Group

December 31, 2024 and 2023

(In thousands)

Assets	2024	2023
	(unaudited)	(audited)
Current assets:		
Cash and cash equivalents	\$ 242,147	6,714
Short-term investments	302,879	788,484
Assets limited or restricted as to use	66,281	66,560
Patient accounts receivable, net	779,352	708,231
Estimated amounts due from third party payors	181,930	283,706
Other current assets	324,011	274,318
Total current assets	1,896,600	2,128,013
Assets limited or restricted as to use, non-current portion	191,163	185,737
Investments	3,849,868	3,289,105
Property, plant and equipment, net	4,483,327	4,031,104
Right-of-use asset	154,034	171,959
Due from affiliates, long term, net	48,606	50,910
Other assets, net	692,942	566,323
Total assets	11,316,540	10,423,151
Liabilities and Net Assets		
Current liabilities:		
Accounts payable	564,218	585,673
Accrued expenses and other current liabilities	955,877	911,389
Estimated amounts due to third party payors	23,530	22,048
Long-term debt	50,747	55,043
Lease obligation	18,621	19,680
Due to affiliates, net	230,492	490,117
Self-insurance liabilities	53,115	44,063
Total current liabilities	1,896,600	2,128,013
Estimated amounts due to third party payors, net of current portion	73,093	80,577
Self insurance liabilities, net of current portion	158,017	150,220
Long-term debt, net of current portion	3,299,278	3,356,206
Lease obligation, net of current portion	146,045	161,535
Accrued pension liability	66,422	55,387
Other liabilities	157,512	127,143
Total liabilities	5,796,967	6,059,081
Net assets	5,519,573	4,364,070
Total liabilities and net assets	\$ 11,316,540	10,423,151

See accompanying note to consolidated financial statements - obligated group.

RWJ BARNABAS HEALTH, INC.

Consolidated Statements of Operations and Changes in Net Assets - Obligated Group

Years ended December 31, 2024 and 2023

(In thousands)

(unaudited)

	<u>2024</u>	<u>2023</u>
Revenue:		
Net patient service revenue	\$ 7,089,581	6,400,899
Other revenue, net	666,484	526,456
Total revenue	<u>7,756,065</u>	<u>6,927,355</u>
Expenses:		
Salaries and wages	2,792,235	2,570,141
Physician fees and salaries	686,245	624,895
Employee benefits	587,166	543,521
Supplies	1,403,067	1,249,261
Other	1,342,094	1,236,175
Interest	93,735	97,473
Depreciation and amortization	313,516	290,147
Total expenses	<u>7,218,058</u>	<u>6,611,613</u>
Income from operations before work stoppage costs	538,007	315,742
Work stoppage costs	<u>-</u>	<u>183,783</u>
Income from operations	<u>538,007</u>	<u>131,959</u>
Nonoperating revenue (expenses):		
Investment income, net	398,918	479,279
Other, net	55,382	(9,247)
Total nonoperating revenue, net	<u>454,300</u>	<u>470,032</u>
Excess of revenue over expenses	<u>992,307</u>	<u>601,991</u>
Pension changes other than net periodic benefit cost	(8,843)	50
Net assets released from restriction for purchases of property and equipment	27,301	29,720
Net assets transferred from non-obligated group	130,146	(2,011)
Other, net	14,592	(191,964)
Total other changes in net assets:	<u>163,196</u>	<u>(164,205)</u>
Increase in net assets	<u>\$ 1,155,503</u>	<u>437,786</u>

See accompanying note to consolidated financial statements - obligated group.

RWJ BARNABAS HEALTH, INC.

Consolidated Statements of Operations and Changes in Net Assets - Obligated Group

Bridge Schedule for Medical Group Loss Allocation

Year ended December 31, 2023

(In thousands)

	2023 Adjusted	Medical Group Practice Loss Allocation	2023 As Reported
	(unaudited)	(unaudited)	(audited)
Revenue:			
Net patient service revenue	\$ 6,400,899	-	6,400,899
Other revenue, net	526,456	-	526,456
Total revenue	<u>6,927,355</u>	<u>-</u>	<u>6,927,355</u>
Expenses:			
Salaries and wages	2,570,141	-	2,570,141
Physician fees and salaries	624,895	173,635	798,530
Employee benefits	543,521	-	543,521
Supplies	1,249,261	-	1,249,261
Other	1,236,175	41,187	1,277,362
Interest	97,473	-	97,473
Depreciation and amortization	290,147	-	290,147
Total expenses	<u>6,611,613</u>	<u>214,822</u>	<u>6,826,435</u>
Income (loss) from operations before work stoppage costs	315,742	(214,822)	100,920
Work stoppage costs	183,783	-	183,783
Income (loss) from operations	<u>131,959</u>	<u>(214,822)</u>	<u>(82,863)</u>
Nonoperating revenue (expenses):			
Investment income, net	479,279	-	479,279
Other, net	(9,247)	-	(9,247)
Total nonoperating revenue, net	<u>470,032</u>	<u>-</u>	<u>470,032</u>
Excess (deficiency) of revenue over expenses	<u>601,991</u>	<u>(214,822)</u>	<u>387,169</u>
Pension changes other than net periodic benefit cost	50	-	50
Net assets released from restriction for purchases of property and equipment	29,720	-	29,720
Net assets transferred from non-obligated group	(2,011)	-	(2,011)
Other, net	(191,964)	-	(191,964)
Total other changes in net assets:	<u>(164,205)</u>	<u>-</u>	<u>(164,205)</u>
Increase (decrease) in net assets	<u>\$ 437,786</u>	<u>(214,822)</u>	<u>222,964</u>

See accompanying note to consolidated financial statements - obligated group.