



natrona
collective
health trust

FY2024

TRANSACTION REPORT



JUNE 30, 2025



Section 3.5 of the of the Foundation/County agreement outlines the reporting requirements of the Natrona Collective Health Trust (formerly the Wyoming Medical Center Foundation) to the Board of County Commissioners. The agreement states:

Not later than ninety (90) days after the end of each fiscal year of the Foundation, the Foundation shall make a written report ("Annual Report") to the County that includes, without limitation, all of the following information as to the fiscal year then ended:

- a) The Foundation's most recent audited financial statements
- b) A list of gifts and donations made by the Foundation during such year, including but not limited to those gifts and donations made to WMC;
- c) A description of the manner in which WMC used the Foundation's Annual Contribution during such year, to the extent known to the Foundation;*
- d) A report on Banner's and WMC's compliance with the post-Closing commitments set forth in the Support Agreement and the Post-Closing Operations Agreement during such year, to the extent known to the Foundation;*
- e) A copy of the Foundation's Form 990-PF filing submitted to the IRS during such year (which may be for the prior taxable year, depending on applicable extensions), if not previously provided by the Foundation to the County at or shortly following the date of its filing with the IRS;
- f) A description of any amendments, restatements, or other modifications to the Foundation Restated Articles and/or the Foundation Restated Bylaws during such year; and
- g) The investment performance information regarding the Conveyance Amount as described in Section 3.4(e) above, to the extent not previously provided.

*On February 12, 2025, the Board of County Commissioners ratified a waiver and extension to the Foundation-County agreement, allowing for an additional ninety (90) days for submittal of the full 2024 fiscal year annual report. The purpose of the extension was to allow for a more robust examination of the materials provided by Banner Wyoming Medical Center and reported in sections IV and V of the Trust's annual report.



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Section I: Introduction & Letter from our CEO

June 27, 2025

Board of County Commissioners of Natrona County
200 N Center St, Ste 115
Casper, WY 82601

Dear Commissioners:

On behalf of the Natrona Collective Health Trust, we submit the following as our annual report in accordance with Section 3.5 of the Foundation-County Agreement dated October 1, 2020, and the waiver and extension ratified by the Board of County Commissioners on February 12, 2025.

The Trust is dedicated to improving the health and well-being of residents in Natrona County. In addition to our investments in Natrona County nonprofits and community engagement initiatives, this commitment is reflected in our contributions to Banner Wyoming Medical Center (Banner WMC) and our ongoing evaluation of whether Banner Health is fulfilling the commitments outlined in the 2020 transaction agreements.

In this document, you will find our report on the responsibilities related to the oversight of Banner/WMC transaction compliance, the report from independent monitor PYA, our audited financial statements, 2024 grantmaking, and an update on the earnings from the County's conveyance to our endowment for the period of January 1-December 31, 2024.

We hope you find the information in this report useful, and we appreciate the opportunity to share it with you. We look forward to discussing this material during our forthcoming conversation on July 21.

Best regards,



Beth Worthen
CEO, Natrona Collective Health Trust

Section II: Audited Financial Statements

On May 18, 2022, an amendment to the Support Agreement outlined updated reporting dates regarding the Foundation's audited financial statements from the previous year to October 1, allowing for more diverse investments of the Foundation's assets. Beginning in 2023 and for each subsequent year, the most current audited financial statements will be reported in Section II

An electronic version of the Trust's 2023 Audited Financial Statements can be found on the Trust's website and at the link below.

[Audited Financial Statements 2023](#)

Section III: Gifts and Contributions

In 2024, Natrona Collective Health Trust met needs in Natrona County through a variety of grants, programs, and partnerships. Details of the year's contributions are in the tables below.

In addition to the 2024 general operating, advocacy, resource and boost grants detailed below, the Trust distributed second-year installments to nonprofits who were awarded multi-year grants in 2023. Those payments totaled \$2,020,000. A historical list of grant recipients can be found on the Trust's website at <https://collectivehealthtrust.org/grantmaking/> under the Grant Recipients tab.

Banner Wyoming Medical Center Annual Contribution

<u>Organization</u>	<u>Amount</u>	<u>Description</u>
Banner Wyoming Medical Center	\$ 8,752,370	2024 Distribution

2-Year General Support Grants

General support grants are available to qualifying organizations whose work benefits the residents of Natrona County in the focus areas identified below. Grants of up to \$80,000 each year are offered during spring and fall grant cycles. The values below represent 2-year totals.

- Early childhood development – Building a strong start for ages 0-5 through evidence-based home visitation, quality childcare, parenting education, social/emotional education, and similar services.
- Adverse Childhood Experiences (ACES) – Preventing and mitigating abuse, neglect, substance use disorders, incarceration, domestic violence, and homelessness.
- Positive Childhood Experiences (PCEs) – Working to create positive childhood experiences through connecting youth to caring adults and activities, teaching skills, and ensuring a strong start for children.
- Mental and behavioral health services – Providing licensed counseling and therapy, suicide prevention, addiction support and treatment, and other services.
- Advocacy – Champions policies and systems that strengthen generational health and wellbeing for Natrona County residents including improving access to healthcare and PCEs, reducing ACEs, eliminating disparities to help correct determinants of health, and amplifying Wyoming voices and votes to defend their health.

<u>Organization</u>	<u>Amount</u>	<u>Description</u>
Better Wyoming	\$20,000	2024 Spring Grant Cycle
Boy Scouts of America	\$20,000	2024 Fall Grant Cycle
Boys & Girls Club of Central Wyoming	\$40,000	2024 Spring Grant Cycle
CASA of Natrona County	\$60,000	2024 Fall Grant Cycle
Casper Children's Chorale Inc	\$20,000	2024 Spring Grant Cycle
Casper Children's Theater Inc	\$80,000	2024 Spring Grant Cycle

<u>Organization</u>	<u>Amount</u>	<u>Description</u>
Casper College STAR Program	\$60,000	2024 Fall Grant Cycle
Casper Community Greenhouse Project	\$60,000	2024 Spring Grant Cycle
Casper Family YMCA	\$140,000	2024 Spring Grant Cycle
Casper Housing Authority CARES	\$120,000	2024 Fall Grant Cycle
Casper Natrona County Health Department	\$120,000	2024 Fall Grant Cycle
Central Wyoming Hospice Program	\$140,000	2024 Spring Grant Cycle
Children's Advocacy Project Inc	\$140,000	2024 Fall Grant Cycle
City of Casper Recreation Division	\$60,000	2024 Fall Grant Cycle
Community Action Partnership of Natrona County	\$160,000	2024 Fall Grant Cycle
Community Recreation Foundation	\$30,000	2024 Fall Grant Cycle
Girl Scouts of Montana and Wyoming	\$80,000	2024 Spring Grant Cycle
Greater Wyoming Big Brothers Big Sisters	\$80,000	2024 Spring Grant Cycle
Habitat for Humanity	\$120,000	2024 Spring Grant Cycle
Mother Seton Housing Inc.	\$120,000	2024 Fall Grant Cycle
Natrona County Public Library Foundation	\$60,000	2024 Fall Grant Cycle
Science Zone	\$140,000	2024 Spring Grant Cycle
The Salvation Army	\$140,000	2024 Spring Grant Cycle
Unaccompanied Students Initiative	\$140,000	2024 Spring Grant Cycle
VOA Northern Rockies	\$20,000	2024 Spring Grant Cycle
WyoFile	\$20,000	2024 Fall Grant Cycle
Wyoming Behavioral Health Alliance	\$20,000	2024 Fall Grant Cycle*
Wyoming Child & Family Development Inc	\$160,000	2024 Fall Grant Cycle
Wyoming Civic Engagement Network Inc.	\$80,000	2024 Spring Grant Cycle
Wyoming Housing Network Inc	\$120,000	2024 Fall Grant Cycle

*One-year grant award

Boost Grants

Boost grants are provided to support improving the internal capacity and infrastructure of nonprofits in Natrona County. Examples include technology enhancement, board development, and strategic planning activities.

Any Natrona County 501c3 nonprofit, excluding those who are current general operating or advocacy grant, are eligible to apply for a grant for up to \$15,000. The grant opportunity is offered as funds are available.

<u>Organization</u>	<u>Amount</u>	<u>Description</u>
307 Dance Academy	\$9,050	Capacity Building
Cadoma Foundation	\$4,985	Capacity Building
Fireside Collective	\$13,450	Capacity Building
Food Bank of the Rockies	\$15,000	Capacity Building
I-Reach 2	\$15,000	Capacity Building
Jason's Friends Foundation Inc	\$8,000	Capacity Building

<u>Organization</u>	<u>Amount</u>	<u>Description</u>
Make-a-Wish Foundation of Wyoming	\$4,501	Capacity Building
Nicolaysen Art Museum	\$11,299	Capacity Building
Northwest Community Action Programs of Wyoming Inc	\$15,000	Capacity Building
Opera Wyoming	\$12,000	Capacity Building
Wyoming Council of the Blind	\$6,975	Capacity Building
Wyoming Counseling Foundation	\$14,840	Capacity Building
Wyoming Foundation for Cancer Care	\$5,180	Capacity Building
Wyoming Symphony Orchestra	\$12,996	Capacity Building

Programs and Partnerships

Beyond formal grant cycles, opportunities exist to further the Trust’s mission through partnerships and programs, which include sponsorships, scholarships, participatory grantmaking, and other support to organizations and programs that are in alignment with the Trust’s primary focus areas.

<u>Organization</u>	<u>Amount</u>	<u>Description</u>
Casper Area Chamber of Commerce	\$850	Sponsorship
Casper Christ United Methodist Church	\$41,000	2024 Participatory Grantmaking
Casper Figure Skating Club Inc	\$2,500	Event Support
Casper Housing Authority CARES	\$26,000	2024 Participatory Grantmaking
Casper Natrona County Health Department	\$15,000	Strategic Planning
Central Wyoming Counseling Center	\$51,000	2024 Participatory Grantmaking
Child Development Center of Natrona County	\$400,000	Stroock Restriction Transfer
Children’s Advocacy Project Inc.	\$1,500	Sponsorship
Cognitive Behavioral Theater, LLC	\$25,000	Event Sponsorship
Community Action Partnership of Natrona County	\$121,000	2024 Participatory Grantmaking, Community Case Manager
Dollywood Foundation	\$60,700	Imagination Library
Dress for Success Casper	\$6,000	Capacity Building
Equality State Policy Center	\$250	Sponsorship
Fireside Collective	\$9,750	2024 Participatory Grantmaking
Hope House	\$21,000	2024 Participatory Grantmaking
Natrona Council for Safety & Justice	\$26,087	Program Operations
Natrona County Library Foundation	\$10,000	Imagination Library
Natrona County School District #1	\$100,000	Jae Foundation - Boot Check

<u>Organization</u>	<u>Amount</u>	<u>Description</u>
St. Mark's Episcopal Church	\$15,000	Diaper Ministry
The Align Team	\$8,750	Sponsorship, ACES Homelessness Study
Thrive Together Initiative	\$10,250	2024 Participatory Grantmaking
University of Wyoming Foundation	\$42,176	MSW/LPC Scholarships
Wyoming 211	\$25,000	2024 Participatory Grantmaking
Wyoming Heritage Foundation	\$5,000	Sponsorship
Wyoming Nonprofit Network	\$164,049	Trainings, FTE, Capacity Building, Sponsorship, Belonging Cohort, Wyo Funders
Wyoming Office of the Attorney General Division of Victim Services	\$500	Sponsorship
Wyoming Reads	\$7,500	Sponsorship
Youth Crisis Center	\$15,000	Strategic Planning
Youth Mental Health Collective	\$3,803	Focus Group

Resource Grants

A resource grant allows nonprofits to work with a Trust-funded consultant in the areas of grant writing services or translation services.

Qualifying organizations whose work benefits the residents of Natrona County are eligible to apply for grant writing consultant services for up to one year or 200 hours or up to a year of translation services.

The application for resource grants launches with the spring grant cycle and is open as long as designated funds are available. Organizations can apply for funding each year.

<u>Organization</u>	<u>Amount</u>	<u>Description</u>
Casper Youth Crisis Center	\$6,250	Shared services
Central Wyoming Counseling Center	\$4,000	Translation services
Child Development Center of Natrona County	\$4,000	Translation services
Community Action Partnership of Natrona County	\$27,850	Grant writing, Shared Services
Excel Academy LLC	\$21,600	Grant writing
Food Bank of Wyoming	\$6,250	Shared services
Habitat for Humanity	\$4,000	Translation services
Iris Clubhouse Inc	\$21,600	Grant writing
Natrona Council for Safety and Justice	\$21,600	Grant writing
Project Kenny	\$21,600	Grant writing

<u>Organization</u>	<u>Amount</u>	<u>Description</u>
Unaccompanied Student Initiative	\$27,850	Grant writing, Shared services
Wyoming Housing Network	\$4,000	Translation services

Masterson Place Guest Assistance

The Masterson Place Guest Assistance Fund was established for guests staying at Masterson Place, the Trust's healthcare hospitality home, who may need additional assistance with lodging or other expenses during their stay. The fund is maintained through donations to Masterson Place and administered at the discretion of the facility's director.

<u>Organization</u>	<u>Amount</u>	<u>Description</u>
Masterson Place	\$2,500	Guest Assistance

Board & Staff Matching Grants

Donations made Trust board and staff members to qualifying 501(c)(3) organizations that benefit Natrona County are eligible for matching gifts from the Trust up to \$1,000 for staff, \$2,000 for board members, and \$4,000 for board chair annually. This policy was established to allow board and staff to broaden the Trust's impact through support of individually preferred organizations.

<u>Organization</u>	<u>Amount</u>	<u>Description</u>
12-24 Club Inc.	\$108	Board/Staff Match
CASA of Natrona County	\$1,000	Board/Staff Match
Casper Humane Society	\$54	Board/Staff Match
Casper Pride	\$107	Board/Staff Match
Central Wyoming Hospice and Transitions Program	\$300	Board/Staff Match
Iris Clubhouse	\$1,599	Board/Staff Match
Jae Foundation Inc	\$2,000	Board/Staff Match
Jason's Friends Foundation	\$54	Board/Staff Match
Meals on Wheels Foundation	\$54	Board/Staff Match
Mercer Family Resource Center Inc.	\$1,161	Board/Staff Match
Mother Seton Housing Inc.	\$54	Board/Staff Match
Olivia Caldwell Foundation	\$304	Board/Staff Match
Platte River Trails Trust	\$1,000	Board/Staff Match
Women's Self-Help Center Inc.	\$54	Board/Staff Match

Section IV: WMC's Use of Annual Contribution

Pursuant to Section 2.3 of the Support Agreement, the Trust provides Banner WMC with an annual contribution representing 3.3% of its net assets for the previous calendar year. This contribution was provided to WMC in October 2024. Details of this calculation and contribution are below.

NCHT Year End Audited Net Assets	270,900,910
Less the Foundation's Prior Net Assets	(8,066,977)
Total NCHT Net Assets	262,833,933
Times Annual Contribution %	0.0333
Total NCHT Contribution	8,752,370

Banner WMC's use of the Trust's annual contribution was reviewed and evaluated by the independent monitoring firm PYA and found to be in compliance with this covenant.

Since the transaction was completed, the Trust has contributed over \$37 million dollars to Banner WMC. The hospital has disbursed or allocated \$27 million of those monies on WMC property, plant or equipment investments within Natrona County. The Covenant does not specify a required timeframe for when the funds must be used. Full details of PYA's assessment can be found in Appendix I, and an itemized listing of expenditures can be found in Appendix II.

Section V: Banner/WMC Compliance with Post Closing Commitments

In January 2025, the Trust engaged independent monitoring firm PYA to support its evaluation of Banner Health's fulfillment of the commitments made during its 2020 acquisition of Wyoming Medical Center. Recognizing the complexity and importance of these post-closing obligations, the Trust sought a partner with deep expertise in healthcare-related monitorship agreements.

Following a robust RFP process, PYA was selected for its extensive experience in third-party monitoring of healthcare transactions. For over 40 years, PYA has provided a broad range of services nationwide, with a strong emphasis on regulatory compliance in healthcare operations.

The monitoring team is led by Shannon Sumner, PYA's Chief Compliance Officer and a nationally recognized expert in healthcare compliance and internal audit. She is joined by Lee Ann Odom, a former CEO and president of two health systems with deep experience in performance improvement related to mergers and acquisitions, and Karin Anderson, an attorney and former nurse with extensive legal and regulatory experience in health systems.

PYA began its work in January, meeting with Trust leadership and reviewing key transaction documents, including the Support Agreement, Post-Closing Operating Agreement, Foundation-County Agreement, previous reports from Banner to the Trust, and the Trust's Annual Reports to the County (2020–2023). In February, the team conducted a site visit to Casper, including a tour of Banner WMC and meetings with hospital leadership from administration, finance, nursing, and quality departments.

In March, PYA reviewed and analyzed Banner WMC's annual report to the Trust and issued a request for information to substantiate its contents. Following an extensive review of documentation and interviews with hospital and community stakeholders, PYA submitted its final report to the Trust. A summary of PYA's conclusions regarding post-closing commitments is provided in the table on the following page, and the full report is included in Appendix I.

PYA Covenant ID	Covenant Summary	Compliant With Covenant?¹
1	WMC's Use of Annual Contribution	MET
2	Banner to submit Annual Report	MET
3	WMC as Hub of WY Service Area	MET
4	WMC Management Reporting Within Banner	MET
5	Wyoming Advisory Board	PARTIAL
6	Collaboration with Hospitals Across Banner's Western Region	MET
7	Maintenance of Acute Care Hospital in Casper Meeting "Basic Hospital Criteria"	MET
8	Cause WMC to be Regional Referral Center for the Wyoming Service Area	MET
9	Maintain Essential Services	MET
10	No Sale or Change of Control or Conversion of WMC to For-Profit status for at least 10 years	MET
11	Growth of Clinical Capabilities, Services and Access	PARTIAL
12	Capital Expenditure Commitments	PARTIAL
13	Commitment to Community, Including Care for the Indigent	MET
14	Commitments to Quality, Safety and Patient Satisfaction	PARTIAL
15	Medical Staff Matters	MET
16	WMC Name, Branding & Marketing	MET
17	Commitments to Care for Prisoners & Involuntarily Committed	MET

Green indicates Banner is compliant with Covenant; Yellow indicated that Banner is partially compliant with Covenant (individual elements of a specific Covenant were not met); red indicates Banner is not compliant.

The Trust has reviewed PYA's findings and communicated them with Banner WMC leadership.

Overall, the Trust is confident that Banner WMC remains committed to fulfilling the obligations of the transaction agreement and has made progress in ensuring all Natrona County residents have access to high-quality, specialized care when and where they need it. The hospital has maintained—and in some areas, expanded—essential services and is actively pursuing future enhancements, including the development of an electrophysiology lab and a behavioral health monitoring unit. Banner WMC has also implemented strategies for physician recruitment and continues to prioritize patient safety and quality.

Opportunities for improvement include strengthening the Wyoming Advisory Board to enhance community engagement in the hospital's operations and strategic planning, and improving the clarity and consistency of reporting related to capital and programmatic expenditures. The Trust is actively working with Banner WMC to address these areas and will provide an update to the County at the annual meeting on July 21.

Section VI: Form 990

An electronic version of the Trust's 2023 990-PF can be found on the Trust's website and at the link below:

[Form 990 PF 2023](#)

Section VII: Amendments & Restatements to Articles & Bylaws

The Amended and Restated Bylaws of Natrona Collective Health Trust were reviewed by the Board of Directors at their annual board meeting on December 18, 2024. The bylaws were approved as presented and no changes were made during the reporting period.

Section VIII: Investment Performance of Conveyance

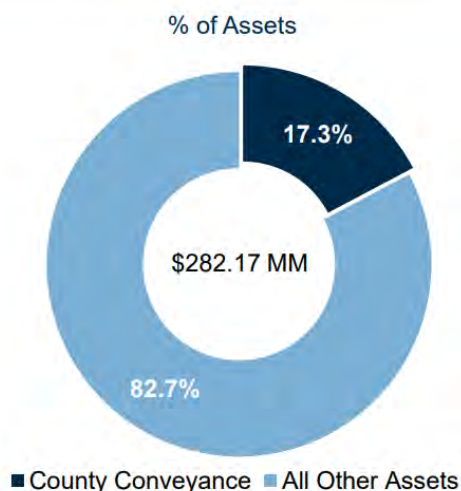
The Trust's portfolio saw good returns in 2024. The County Conveyance value as of 12/31/2024 equals \$48,728,922, a return of 10.9%. As outlined in Section 3.4(b) of the Foundation-County Agreement, the Trust "may cause the earnings on the Conveyance Principal to be expended in furtherance of the Authorized Purpose as determined by the Foundation Board of Directors from time to time in its discretion." The Trust's Board of Directors has allocated \$2,874,091 of our 2024 annual contribution to Banner WMC from the Conveyance Principal earnings.

Expenditures are in accordance with Authorized Purposes, defined in the section as "providing, supporting, or enhancing the delivery of healthcare services in the Primary Service Area, including without limitation for services and programs provided by WMC, property, plant and equipment to be acquired by WMC, indigent care and medical care for Covered Persons."

County Conveyance Update

commonfund/ocio

As of December 31, 2024



County Conveyance Change in Assets

Starting Calendar Year 2023 Market Value	\$46,398,946
Calendar Year 2024 Allocated Returns	\$5,204,067
Calendar Year 2024 Allocated Expenses	-\$2,874,091
Ending Endowment Market Value	\$48,728,922

Appendix I: PYA Final Report



**Banner Health - Wyoming Medical Center
Independent Assessment of Post-Closing Covenant
Compliance (2024)**

June 12, 2025

Prepared for
Natrona Collective Health Trust





PYA, P.C.
One Cherokee Mills
2220 Sutherland Avenue
Knoxville, TN 37919
(865) 673-0844 | pyapc.com

June 12, 2025

Ms. Paula Mongold
Natrona Collective Health Trust
159 N. Wolcott, Suite 350
Casper, WY 82601

Dear Ms. Mongold:

As outlined in our January 2, 2025, agreement, PYA, P.C. (PYA) was engaged as an independent third-party by Natrona Collective Health Trust (the Trust) for a three-year term beginning with fiscal year 2024 in connection with post-closing covenants undertaken by Banner Health (Banner) in its 2020 acquisition of Wyoming Medical Center (WMC). PYA was engaged by the Trust to conduct an objective and independent assessment of WMC's and Banner's compliance with the terms of the Covenants. PYA is pleased to submit this report to the Trust which details our methodology and findings related to WMC's 2024 Annual Report.

The procedures used in preparation of this report do not constitute an examination or compilation of prospective financial statements, nor did we apply agreed-upon procedures to such information, in accordance with attestation standards established by the American Institute of Certified Public Accountants. Additionally, the procedures used in our Report do not address the effectiveness of internal controls over financial reporting under Section 404 of the Sarbanes Oxley Act.

Respectfully,

PYA, P.C.

PYA, P.C.



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EXECUTIVE SUMMARY

BACKGROUND AND SCOPE

In October 2020, Banner Health (Banner) acquired Wyoming Medical Center (WMC) through a member substitution agreement with WMC and the WMC Foundation (now known as the Trust), along with an asset purchase agreement with the Board of Commissioners of Natrona County (County). As part of the transaction, the involved parties negotiated and agreed to a series of post-closing covenants (Covenants) designed to ensure that the merger would not negatively impact patient care or reduce access to essential healthcare services. The Covenants are detailed throughout this report.

Recognizing the complexity and significance of these commitments, the Trust identified the need for independent, ongoing oversight support. To fulfill this need, the Trust engaged PYA to serve as an independent, objective third-party to support its efforts in evaluating Banner's adherence to the commitments made in the 2020 acquisition of WMC. PYA's key responsibilities and scope included, but were not limited to:

- Review all prior transaction documentation including the Support Agreement, Post-Closing Operating Agreement, Foundation-County Agreement, prior reports from Banner to the Trust, and the Trust's Annual Reports to the County for the years 2020-2023
- Hold initial meetings with the Trust and WMC to discuss monitorship review criteria
- Request and review information from WMC and conduct internal/external stakeholder interviews
- Review WMC's Annual Report* and develop a report evaluating Banner's compliance with post-closing Covenants
- Attend annual meetings with the County to present Annual Report evaluation and collaborate with the Trust on identifying County concerns

**PYA's scope of work originates with WMC's 2024 Annual Report. PYA was not engaged, nor renders any assessment, of WMC's compliance with Covenants prior to the 2024 annual reporting period.*

ASSESSMENT OF COMPLIANCE WITH COVENANTS

A kick-off conference call was held with the Trust leadership on January 8, 2025, to discuss the project background, process, onsite visit, and timeline. On February 10, 2025, PYA conducted an onsite visit to WMC to meet with its CEO and department leaders to discuss WMC services and operations in the community of Casper, Wyoming. On March 3, 2025, the Trust provided PYA with WMC's 2024 Annual Report (Report), which represented WMC's compliance with the Covenants. Subsequently, on March 19, 2025, the Trust shared a revised version of WMC's Report to supplement previously incomplete information. PYA analyzed and reviewed the Report and developed a Request for Information (RFI) to help substantiate and validate the assertions made by WMC. PYA issued this initial RFI to WMC on April 25, 2025, and a copy is included as **Appendix B**. Based on the information provided by WMC, PYA issued supplemental RFIs. PYA also conducted remote interviews during the months of April and May 2025. A list of interviewees is listed in **Appendix C** and interview participants included representatives from WMC, the County, Banner, the citizens of Casper, Wyoming, and the Trust.

SUMMARY OF RESULTS

PYA reviewed WMC and Banner's compliance with the Covenants during 2024. PYA's findings and observations related to 2024 are based on the information obtained through review of requested documents, information and interviews. A detailed list of all findings and observations are contained in *Appendix A*. A summary of PYA's findings for 2024 are as follows:

PYA Covenant ID	Covenant Summary	Compliant With Covenant? ¹
1	WMC's Use of Annual Contribution	MET
2	Banner to submit Annual Report	MET
3	WMC as Hub of WY Service Area	MET
4	WMC Management Reporting Within Banner	MET
5	Wyoming Advisory Board	PARTIAL
6	Collaboration with Hospitals Across Banner's Western Region	MET
7	Maintenance of Acute Care Hospital in Casper Meeting "Basic Hospital Criteria"	MET
8	Cause WMC to be Regional Referral Center for the Wyoming Service Area	MET
9	Maintain Essential Services	MET
10	No Sale or Change of Control or Conversion of WMC to For-Profit status for at least 10 years	MET
11	Growth of Clinical Capabilities, Services and Access	PARTIAL
12	Capital Expenditure Commitments	PARTIAL
13	Commitment to Community, Including Care for the Indigent	MET
14	Commitments to Quality, Safety and Patient Satisfaction	PARTIAL
15	Medical Staff Matters	MET
16	WMC Name, Branding & Marketing	MET
17	Commitments to Care for Prisoners & Involuntarily Committed	MET

¹ Green indicates Banner is compliant with Covenant; Yellow indicated that Banner is partially compliant with Covenant (individual elements of a specific Covenant were not met); red indicates Banner is not compliant.

APPENDIX A: WYOMING MEDICAL CENTER COMPLIANCE WITH COVENANTS



PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
1 IV of Annual Report; 2.3 of Support Agreement	<i>Section 2.3 (a):</i> Trust is to provide WMC with an annual contribution representing 3.3% of its net assets for the previous calendar year.	Based on a review of the Trust's 2023 audited financial statements, the Trust provided WMC the required 2024 annual contribution in compliance with the Covenant.	Met
	<i>Section 2.3 (b):</i> WMC and Banner shall cause any and all Trust Contributions to be used by WMC for either: <ul style="list-style-type: none">i. investments in WMC's property, plant and equipment.ii. investments in WMC's strategic programs including programmatic start-up costs.	<p>WMC is in compliance with the Covenant to “cause to be used” the Trust Annual Contribution for investments in WMC's property, plant and equipment. WMC interprets shall cause “to be used” as money disbursed or allocated for a particular WMC investment. Since the transaction was completed, the Trust has contributed over \$37 million dollars to WMC. WMC has disbursed or allocated \$27 million of those monies on WMC property, plant or equipment investments within Natrona County. The Covenant does not specify a required timeframe for when the funds must be used for investments.</p> <p><u>Monies Disbursed:</u> WMC's supporting documentation shows actual cash disbursements from 2020 through 2024 total \$19,881,418.</p> <p><u>Monies Allocated but Not Yet Disbursed:</u> Additionally, WMC represented that from 2020 through 2024, \$7,845,446 has been allocated for investments but not yet disbursed.</p> <p><u>Aggregate:</u> The aggregate of disbursed, and allocated but not yet disbursed, for the same period is \$27,726,864. This amount is \$27,282 less than the total amount WMC reported in the 2024 Annual Report as \$27,754,146 (reporting discrepancy).</p> <p>Additionally, WMC's supporting documentation shows an additional \$9,660,227 has been partially approved for specific investments, but a purchase order has not been created. These monies are not included in the aggregate amount above. This is consistent with WMC's 2024 Annual Report.</p>	Met



PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
1 (cont.) IV of Annual Report; 2.3 of Support Agreement		PYA also requested, but did not receive, WMC's audited financial statements to confirm their reported \$19,881,418 in cash disbursed for capital projects. PYA understands that WMC's financial statements are included as part of the Banner Health consolidated financial audit and therefore individual audited financial statements are not issued. PYA was not engaged to conduct an external financial audit nor perform agreed upon procedures in accordance with attestation standards established by the American Institute of Certified Public Accountants.	
	<i>Section 2.3 (c):</i> The Trust's obligation to support WMC through the Foundation Contribution shall terminate upon the occurrence of any circumstances by which Banner or any successor ceases to own and operate WMC on a non-profit, tax-exempt basis.	Not applicable - such an event has not occurred.	N/A
2 IV of Annual Report; 2.4 of Support Agreement	<i>Section 2.4:</i> Banner shall provide the Trust a written annual report regarding (1) Banner's compliance with the post-closing Covenants or other commitments undertaken in Member Substitution Agreements, (2) WMC's overall operating performance in the year, which is due March 1 following the report's calendar year. Banner shall respond to inquiries or document requests from Foundation in a thorough and timely manner related to Banner's and WMC's compliance with commitments or to confirm information set forth in annual report.	Based upon our review of WMC annual reports submitted to the Trust, Banner has submitted annual reports to the Trust for the years of 2020, 2021, 2022, 2023 and 2024 and such reports addressed WMC's compliance with each Covenant.	Met

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
3 V of Annual Report; 3.1.a of Support Agreement	<i>Section 3.1 (a):</i> For the duration of the 10-Year Post-Closing Period for strategic planning purposes, Banner shall establish and maintain a new Wyoming Service Area, which shall include WMC as the hub, Banner's three rural hospitals in Wyoming (Platte County, Community and Wasakie), and future acquired or developed healthcare facilities and operations in Wyoming.	Based upon review of WMC documentation and interviews, Banner has established a Wyoming Service area with WMC as the hub. Supporting documentation included: (1) WMC's 2024 annual report which describes WMC and the three Banner critical access hospitals (CAH) as the hub and spoke system in Wyoming with particular emphasis on STEMI and stroke services; (2) documentation of WMC's role in providing Wyoming training and education programs such as Critical Care Connections; (3) documentation of WMC's role in expanding specialist ambulatory services access near the CAHs and additional areas in WY; (4) documentation of WMC's role in expanding tele-medicine services across WY; (5) and WMC's documented assistance to other Wyoming hospitals with staffing via temporary work assignments and a shared leadership role for ambulance services.	Met

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
4 V of Annual Report; 3.1.b of Support Agreement	<p><i>Section 3.1 (b):</i> For at least the duration of the 5-Year Post-Closing Period:</p> <p>i. Banner shall cause the WMC CEO and the CEO of Banner's Northern Colorado Medical Center to report to the President of Banner's Western Region (or any successor position at Banner having comparable authority and responsibility, however titled) and, in any event, shall ensure that the WMC CEO does not report to another Banner hospital CEO (except for filling interim leadership capacities while a departed Western Region leader is being replaced); and</p>	Based on interviews and documentation, Banner and WMC comply with the Covenant's requirements related to the WMC CEO reporting structure. Since the 2020 transaction, WMC's CEO has continually reported to the President of Banner's Western Region.	Met
	<p>ii. Banner shall cause the Western Region President to report to Banner's Chief Operating Officer (or any successor position at Banner having comparable authority and responsibility, however titled).</p>	Based on interviews and documentation, Banner complies with the Covenant's requirements related to Banner's President reporting structure. The Western Region President initially reported to Banner's Chief Operating Officer, and now reports to Banner's President for Acute Care which is a successor position at Banner having comparable authority.	Met
	<p>iii. In addition, for so long as Banner is the sole member of WMC or otherwise owns and/or operates WMC, Banner shall ensure that the Western Region President is not a senior executive of any hospital in the Western Region, except for filling interim leadership capacities while a departed facility leader is being replaced.</p>	Based on interviews and documentation, Banner's Western Region President does not serve as a senior executive of any hospital in the Western Region.	Met

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
5 V of Annual Report; 3.1.c, d of Support Agreement	<i>Section 3.1 (c):</i> As of the Effective Date, Banner shall establish and maintain a Wyoming Advisory Board ("the Wyoming Advisory Board") to be supported by WMC. The Wyoming Advisory Board shall be constituted and shall function consistent with the operating principles set forth on Exhibit B of the Support Agreement, as may be amended from time to time by the Wyoming Advisory Board subject to Banner's written approval.	The composition and activity of the Wyoming Advisory Board was assessed by way of document review and interviews. The documents reviewed include the 2024 Annual Report provided by WMC, meeting agendas, meeting minutes, meeting presentations, and a summary document submitted by the WMC CEO. Interviews were conducted with three long standing Advisory Board members, including the Board Chair. The Board met three times in 2024 due to scheduling conflicts. The Board filled vacant seats, consistent with the Covenant language.	Met
	<i>Section 3.1 (d):</i> The purpose of the Wyoming Advisory Board shall be to support and enhance the operations and activities in the Wyoming Service Area consistent with WMC's and Banner's mission, vision and values, and specifically to provide input and advice to Banner and WMC management with respect to the annual performance of the WMC CEO and the selection of any successor CEO for WMC, and to provide advice and community input regarding strategic planning, advocacy, community health initiatives, clinical programs, service expansion and performance, and other matters.	Based on the documents provided and the interview information, the Advisory Board meetings provided the members with information and updates about WMC. The members confirmed that they were asked for community feedback as part of the Advisory Board meeting. The members each described the mechanism to gather community feedback as informal and gleaned through their social and work spheres. The members could not cite specific examples of community input or advice regarding strategic planning, advocacy, community health initiatives, clinical programs, or service expansion and performance. WMC acknowledges that the Advisory Board has not provided input and advice to the CEO's annual performance review and identifies that as an opportunity for 2025.	Not Met
	<i>Section 3.1 (d):</i> Banner shall ensure that the Wyoming Advisory Board has direct access to, and provides input to, Banner's Western Region President.	WMC acknowledges that the Western Region President has not attended an Advisory Board meeting and views that as an opportunity. To that end, the Western Region President is scheduled to attend an upcoming Advisory Board meeting. Although WMC indicated that Advisory Board members have direct access to Banner's Western Region President by way of her cell number, the Advisory Board members interviewed had not provided input or advice to her.	Not Met

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
5 (cont.) V of Annual Report; 3.1.c, d of Support Agreement	<i>Section 3.1 (d):</i> Without limiting the generality of the foregoing, Banner shall ensure that the Wyoming Advisory Board provides input and advice in identifying and consummating expansion opportunities in the Wyoming Service Area.	Based on the Wyoming Advisory Board documents provided and the Board member interview information, there is no evidence that the Wyoming Advisory Board has participated, advised, or provided input on identifying and consummating expansion opportunities.	Not Met
6 V of Annual Report; 3.1.e of Support Agreement	<i>Section 3.1 (e):</i> Banner shall cause its facilities in Wyoming, Colorado, Nevada, California, and Nebraska to provide common opportunities to work across Banner's Western Region to develop strategies in telehealth, transport services, physician recruitment and other areas that would benefit Banner's Western Region referral hubs (currently, WMC and North Colorado Medical Center) and the delivery of rural health care in the broader regions surrounding them.	Based on WMC documentation, Banner's Western Region facilities collaborate on many programs including STEMI, Stroke, Trauma, Electrophysiology (EP), and quarterly Critical Care Connection meetings. WMC medical staff further identified that Banner's Clinical Collaboration Groups address clinical care pathways for all facilities, and some had participated in those groups.	Met
	<i>Section 3.1 (e):</i> Banner shall cause its facilities and operations throughout the Western Region to work together to review issues in rural health delivery, identify network gaps, assess proposals for joint clinical and physician investment, review targets for growth, and coordinate ways of most effectively serving the populations of Wyoming and the surrounding Western Region, with a specific focus on keeping healthcare local in the Wyoming Service Area.	Based on interviews and documents reviewed, there are demonstrated efforts to keep healthcare services local. Efforts include the Western Wayne collaboration involving physician recruiting strategies and tracking as well as provider needs assessment.	Met

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
7 V of Annual Report; 3.2.a of Support Agreement	<p><i>Section 3.2 (a):</i> For so long as Banner is the sole member of WMC or otherwise owns and/or operates WMC, Banner shall maintain a licensed and accredited acute care hospital located in Casper, Wyoming, that:</p> <p>i. participates in the Medicare and Medicaid programs or any comparable successor governmental reimbursement programs (so long as such programs exist);</p>	Based on a review of documents and information, WMC and Banner comply with this Covenant.	Met
	<p>ii. operates an emergency department on a 24/7 basis:</p>	Based on a review of documents and information, WMC and Banner comply with this Covenant.	Met
	<p>iii. maintains Level II trauma designation by the American College of Surgeons (or its successor) and/or designation as a Regional Trauma Center by the Wyoming Department of Health, Trauma Program, or such reasonably equivalent designation as the American College of Surgeons (or its successor) or the State of Wyoming may establish from time to time; and</p>	Based on a review of documents and information, WMC and Banner comply with this Covenant.	Met
	<p>iv. (iv) provides maternal and obstetrical services, including Labor and Delivery. (together, "The Basic Hospital Criteria")."</p>	Based on a review of documents and information, WMC and Banner comply with this Covenant.	Met

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
8 V of Annual Report; 3.2.b of Support Agreement	<i>Section 3.2 (b):</i> For so long as Banner is the sole member of WMC or otherwise owns and/or operates WMC, Banner shall cause WMC to be Banner's Regional Referral Center for the Wyoming Service Area. For purposes of this Section, Regional Referral Center means that Banner-owned or Banner-operated hospital or medical center with the broadest scope and greatest intensity of most specialty services of all Banner-owned or Banner-operated hospitals within a specified geographic area.	As described in WMC's 2024 Annual report, WMC is a 249 licensed bed facility that continues to be the largest Banner health facility in Wyoming and has the highest level of care. Banner operates three critical access hospitals in Wyoming, which each have 25 licensed beds or less.	Met
9 V of Annual Report; 3.2.c, d of Support Agreement	<i>Section 3.2 (c):</i> For the duration of the 10-Year Post-Closing Period, Banner shall cause WMC to maintain, directly or indirectly through joint ventures or contracted or other arrangements, the following programs ("Essential Services"), with at least their current scope and intensity as immediately prior to the Effective Date, and at their locations as of the Effective Date or other substitute locations in the greater Casper, Wyoming area:	<p>Banner's commitment to maintain the fifteen listed essential services with at least the same level of scope and intensity as immediately prior to closing date was assessed by comparing the base line service portfolio with the 2024 current state service portfolio. The base line and the 2024 current state were determined by way of document review and interviews. These documents included full time equivalent (FTE) provider counts along with programmatic scope and intensity. Interview discussion spanned the pre-close time frame through present time, with focus on the 2024 reporting year.</p> <p>The concept of scope included programmatic offerings with the goal of maintaining or expanding programmatic offerings (example: radiology imaging would maintain or expand the modalities offered; cardiology would maintain or expand the interventional procedures offered).</p> <p>The concept of intensity included access and availability of services, procedures, and programmatic offerings (examples: turnaround time for imaging modalities, access to electrophysiology (EP) lab, routine availability to bedside procedures in the ICU).</p>	Met

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
9 (cont.) V of Annual Report; 3.2.c, d of Support Agreement		<p>To glean key stakeholder perception and experience of essential services, this topic was vetted by way of multiple interviews. This topic was discussed with the Citizens Group, the Advisory Board Chair, and multiple practicing physicians. Many of these discussions centered around Banner instituting an e-ICU model around 2021. All those interviewed acknowledged that Banner has transitioned back to an in-person intensivist model and has the capability to perform bedside procedures to the same scope and intensity as pre-acquisition if not even more capability. There remains a minimal number of night shifts that are covered by locum intensivists and WMC indicated that e-ICU services remain in place as a “back-up” which was utilized twice in the past year. While ICU is not listed as an essential service in the transaction documents, it is an enabler of other essential services and a necessary hospital infrastructure element based on the documented intensity and scope, along with interview confirmation.</p> <p>This report solely addresses compliance in 2024. In 2024, Banner has maintained the fifteen essential services consistent with the levels immediately prior to the 2020 transaction</p>	
	i. Neurosurgery		Met
	ii. Neurology and Stroke		Met
	iii. Cardiology (including Interventional Cath Lab)		Met
	iv. Cardiovascular Surgery		Met
	v. Peripheral Vascular Surgery		Met
	vi. Radiology (including Interventional Radiology)		Met

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
9 (cont.) V of Annual Report; 3.2.c, d of Support Agreement	vii. Orthopedics		Met
	viii. Women's Services		Met
	ix. Pediatrics		Met
	x. Primary Care		Met
	xi. General Surgery		Met
	xii. Oncology (including Radiation Therapy)		Met
	xiii. Nephrology		Met
	xiv. Dialysis		Met
	xv. Telehealth		Met
	Section 3.2 (d): Notwithstanding Section 3.2(c) above, if and when any of the following contingencies occurs with regard to any particular Essential Service described in Section 3.2 (c) above, Banner may in its sole and exclusive discretion cause WMC to suspend, terminate, discontinue or materially and substantially modify, limit or reduce as applicable the Essential Service:	No conditions have occurred to trigger this Covenant section.	N/A
	i. The Essential Services is not, or will not be, Financially Viable		
	ii. The medical staff of the Hospital does not have permanent qualified physician or non-physician providers and/or clinical staff necessary to support the provision of the Essential Service for a continuous period of twenty-four (24) months or more (during which time the Essential Service will be sustained		N/A

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
9 (cont.) V of Annual Report; 3.2.c, d of Support Agreement	through the use of locums tenens providers).		
	iii. An Essential Service experiences a Significant Decreased in patient volumes		N/A
	iv. WMC is prohibited from maintaining the Essential Service under the terms of any restrictive Covenant in existence on the Effective Date		N/A
10 V of Annual Report; 3.3 of Support Agreement	<i>Section 3.3:</i> For the duration of the 10-Year Post-Closing Period, Banner shall not sell or otherwise change control of WMC or cause it to convert to operation on a for-profit basis, except as a result of a system event.	Based on our review of documentation and interviews, there has been no change of control or non-profit status since the transaction was completed in 2020.	Met
11 V of Annual Report; 3.4 of Support Agreement	<i>Section 3.4 (a):</i> Banner shall cause WMC to focus on community health needs assessment (CHNA), improvement, benefit and promotion throughout the Wyoming Service Area using commercially reasonable efforts, including: i. a primary focus on keeping care local within the Wyoming Service Area and minimizing outmigration of residents for health care services outside the Wyoming Service Area, including without limitation through the provision and enhancement of targeted services (subject to Banner determination it is viable financially);	Based on interviews and documentation, WMC is compliant with this Covenant. WMC's most recent community health needs assessment (CHNA) was completed in 2022, and its focus was to keep care local. WMC's annual report includes examples of new programs that were not previously available to the community, such that patients now do not need to leave the areas for these services. The services include EP, surgical procedures performed by the DaVinci (5 th generation), and Aquablation (a urology procedure). Accordingly, WMC is not transferring patients to other facilities for such procedures.	Met
	ii. Maximizing the potential of WMC's Level II trauma designation to reinforce WMC's position as Banner's Regional Referral Center for Wyoming Service Area subject to Banner's commercially reasonable business requirements;	The Annual report indicates and was confirmed by interview that Banner will continue to recruit for additional full-time employees to grow the program. Banner provided 2022, 2023 and 2024 year over year trauma volume demonstrating growth.	Met

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
11 (cont.) V of Annual Report; 3.4 of Support Agreement	iii. Advancing the training, development and recruitment of employed and (subject to compliance with regulatory requirements, including Stark), independent physicians with opportunity to rotate through Banner clinical training programs and other physician development programs;	Based on review of documents and interviews, WMC provided names of physicians who have participated in the Banner Advanced Leadership Program and Banner's Clinical Consensus Groups. PYA interviewed employed, contracted, and independent medical staff to discuss recruitment efforts, recruitment support, leadership training, and other continuing education opportunities. Of the medical staff interviewed, there were various levels of awareness of the Banner offerings.	Met
	iv. integrating Banner's Burn center and trauma network for transfer of patients (only when necessary for patient requiring Level I trauma not available in Casper) and rapidly returning them back to Wyoming as soon as medically appropriate;	Based on WMC documentation and transfer data regarding burn and trauma level 1 transfers, Banner's burn program was discontinued in 2022. As such, patients are transferred out of WMC only if a higher level of care is needed.	Met
	v. working with Select Medical (A Banner partner) to assess the development of a long term care hospital,	Based on a review of documents and interviews, WMC has an ongoing assessment for long term care hospital feasibility, including an expanded geographic area. At this time, it has been found to not be feasible based on market analysis Banner has committed to continue to assess viability.	Met
	vi. developing ambulatory networks (including urgent care, retail clinics, sports medicine, home health and physician clinics) in the Wyoming Service Area;	Based on review of WMC's ambulatory plan and other documents, WMC has completed an urgent care assessment and found that the community need is satisfied via walk-in capability at primary care offices.	Met
	vii. continuing to expand access through investment in growing WMC's telehealth presence throughout the Wyoming Services Area; and	The Annual Report and additional documents include stroke and neurology telemedicine expansion and growth locations and volume. Banner secured grant money from the State to support these efforts.	Met
	viii. Throughout the 24 month period after Closing, periodically re-evaluating the feasibility of establishing a Banner MD Anderson Cancer Center program in Casper and using good	This 24 month period was completed in October of 2022.	N/A

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
11 (cont.) V of Annual Report; 3.4 of Support Agreement	faith efforts to explore opportunities in connection with the same.		
	<i>Section 3.4 (b):</i> Banner shall work closely with the Wyoming Service Area to develop and implement physician recruitment and alignment strategies throughout the Wyoming Service Area to develop and implement physician recruitment and alignment strategies throughout the Wyoming Service Area. In connection with the same, Banner shall place high priority on the recruitment and selection of physicians to meet identified community needs in the Wyoming Service Area and shall dedicate internal resources accordingly, including (i) Banner's Talent Acquisition team that spans throughout the enterprise, and (ii) Banner's dedicated in-house recruitment team with a focus on national sourcing.	The Annual Report and additional documentation listed recruitment amounts for specific physicians, a formal provider needs assessment, a provider recruitment tracking tool, and an inventory of various strategies Banner implemented to secure physicians when there was a shortage or increased demand. The list of strategies includes recruitment support/assistance for independent groups, sign-on bonuses, premium payments, stipends, loan forgiveness programs, and stipend contracts for residents. These various methods were confirmed during medical staff interviews. Many of the medical staff interviewed indicated that recruitment and Banner's compensation model had recently improved for primary care.	Met
	<i>Section 3.4 (c):</i> Banner shall work closely with the Wyoming Advisory Board on an ongoing basis to identify opportunities to address key needs and expansion and network opportunities within the Wyoming Service Area.	Based on the Wyoming Advisory Board documents provided and the Board member interview information, there is no evidence that the Wyoming Advisory Board has participated in, advised, or provided input on identifying expansion and network opportunities.	Not Met
12 V of Annual Report; 3.5 of Support Agreement	<i>Section 3.5 (a):</i> During the 10-Year Post-Closing Period, Banner shall make, or shall cause WMC to make, minimum annual capital expenditures for capital and other strategic healthcare investments in WMC and the Primary Service Area (including without limitation a focus on physician recruitment, ambulatory growth, and telehealth) equal to Ten Million Dollars (\$10,000,000). Notwithstanding the foregoing, Banner in its sole discretion may determine to accelerate or defer the required minimum Annual Capital Expenditure for any year provided that Banner's Annual Capital Expenditures in WMC and the Primary Service Area equal or exceed:	Annual Expenditure: It is noted that WMC interprets "shall make or shall cause WMC to make" capital expenditures as monies disbursed or allocated. As such, WMC's supporting documentation shows WMC disbursed \$6,778,245 in 2024 for capital expenditures and allocated (but not yet disbursed) \$10,567,840 for 2024. As a fundamental accounting term, an "expenditure" generally refers to a financial outflow, or a liability incurred, for goods or services. It represents a disbursement of funds. WMC's reported amount of \$17,346,085 in expenditures for 2024 is inconsistent with common accounting terminology for expenditures.	Met



PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
12 (cont.) V of Annual Report; 3.5 of Support Agreement		<p>This Covenant permits Banner to accelerate or defer the annual capital expenditure in any given year, meaning it can have more than or less than \$10 million dollars in capital expenditures in a year. Although WMC disbursed \$6,778,245 for annual capital expenditures in Natrona County, an amount less than \$10 million dollars, WMC may use its discretion to defer the annual expenditure for 2024.</p> <p>PYA also requested, but did not receive, WMC's audited financial statements to confirm their reported \$6,778,245 in cash disbursed for capital projects. PYA understands that WMC's financial statements are included as part of the Banner Health consolidated financial statement audit and therefore individual audited financial statements are not issued. PYA was not engaged to conduct an external financial audit nor perform agreed upon procedures in accordance with attestation standards established by the American Institute of Certified Public Accountants.</p>	
12 (cont.) V of Annual Report; 3.5 of Support Agreement	i. Thirty Million Dollars (\$30,000,000) by December 31, 2023.	<p>WMC has not made or caused to be made a total capital expenditure of \$30,000,000 by December 31, 2023. WMC's supporting documentation indicates that from 2021 through 2023, Banner-funded actual cash disbursements of \$17,882,974. WMC should have disbursed an additional \$12,177,026 by December 31, 2023, to comply with the Covenant.</p> <p>Separately, in the 2024 WMC Annual Report, it is stated, "To date Banner Health has provided WMC with more than the required \$40M in capital. \$40,572,723 has been spent by the end of 2024." However, based on supporting capital analysis spreadsheets provided by WMC, this amount includes \$15,971,503 in funds which have been allocated but not yet disbursed.</p>	Not Met



PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
12 (cont.) V of Annual Report; 3.5 of Support Agreement	ii. Sixty Million Dollars (\$60,000,000) by December 31, 2026; and	Meeting this expenditure amount is not required until December 31, 2026.	N/A
	iii. One Hundred Million Dollars (\$100,000,000) by the end of the 10-Year Post-Closing Period. Note: this will be October 20, 2030.	Meeting this expenditure amount is not required until October 20, 2030.	N/A
	<i>Section 3.5 (b):</i> In addition to the Annual Capital Expenditures, Banner shall invest in the implementation at and by WMC of Banner's enterprise-wide Cerner EMR and Cerner Millennium revenue cycle platform, with such implementation to be undertaken and completed within the two (2)-year period immediately following the Effective Date. In addition, subject to agreements to which WMC is bound on the Effective Date, Banner shall use commercially reasonable efforts to cause implementation at and by WMC of Banner's PACS imaging system to be undertaken and completed within the two (2)-year period immediately following the Effective Date.	The deadline for completion was within two years of the effective date, and this Covenant deadline has passed.	N/A
	<i>Section 3.5 (c):</i> Both during and after the 10-Year Post-Closing Period, Banner shall ensure that WMC has the same access to Banner's annual capital allocation process as other Banner hospitals.	This is evidenced by the capital funding noted in previous sections.	Met

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
13 V of Annual Report; 3.6 of Support Agreement	<p><i>Section 3.6:</i> For so long as Banner or its successor is a tax-exempt entity, Banner shall cause its hospital facilities (including WMC) in the Wyoming Service Area to be operated in accordance with the “community benefit” standard as and to the extent applicable from time to time to hospitals described in Code Section 501(c)(3). The “community benefit” standard is currently set forth in Rev. Proc. 69-545, 1969-2 C.B. 117, and currently includes without limitation:</p> <p>i. acceptance of all Medicare and Medicaid patients;</p>	WMC is compliant with this Covenant to operate in accordance with the community benefit standard. WMC’s 2021 Banner’s financial assistance program increased the qualifying amount to 400% of the Federal Poverty Level (compared to previous 200%), and this policy is consistent with the IRS standards. Additionally, WMC tracks their year over year uncompensated care spend.	Met
	<p>ii. acceptance of all emergency patients without regard to ability to pay;</p>	Based on a review of documents and information, WMC and Banner comply with this Covenant.	Met
	<p>iii. maintenance of an open medical staff;</p>	Based on a review of documents and information, WMC and Banner are complied with this Covenant.	Met
	<p>iv. provision of public health programs of educational benefit to the community; and</p>	Based on a review of documents and information, WMC and Banner are complied with this Covenant.	Met
	<p>v. general promotion of public health, wellness and welfare to the community through the provision of healthcare services at a reasonable cost.</p>	Based on a review of documents and information, WMC and Banner comply with this Covenant.	Met

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
13 (cont.) V of Annual Report; 3.6 of Support Agreement	<i>Section 3.6 (b):</i> As of the Effective Date, Banner shall cause WMC to adopt Banner's current financial assistance policy, which currently provides generally that medically necessary hospital services are provided without charge for uninsured families up to 200% of the federal poverty level, and discounts medical necessary hospital services at various levels for uninsured families up to 400% of the federal poverty level. At all times thereafter, Banner shall ensure that WMC maintains and implements a financial assistance policy that complies with law, is at a minimum consistent with industry standards for similarly situated hospitals and is consistent with the policy generally applicable to Banner's Western Region hospitals, as approved by the Banner Board of Directors.	Based on document and Banner Health website review, Banner's current financial assistance policy, "Banner Health Financial Assistance Policy for Hospital Patients," is consistent with the requirements of this Covenant.	Met

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PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
14 V of Annual Report; 3.7 of Support Agreement	<i>Section 3.7 (a):</i> Banner shall work with the Wyoming Advisory Board to support and enhance the programs in place from time to time at WMC, and to share best practices within the Wyoming Service Area and Banner's other markets.	Based on the Wyoming Advisory Board documents provided and the Board member interview information, there is no evidence that the Wyoming Advisory Board has participated in, advised, or provided input on enhancing the programs or sharing best practices.	Not Met
	<i>Section 3.7 (b):</i> Banner shall operate WMC with a commitment to quality, safety and patient satisfaction that is generally similar to and consistent with its commitment to quality, safety, and patient satisfaction at other Banner facilities within the Western Region, including: i. Causing WMC to participate in Banner Health's standard processes focused on clinical quality and safety, with the support of Banner's standardized approach, measurement toolkits, and sharing of best practices, while recognizing the unique features of WMC's local environment; and	Background: In the late 1990's America embarked on a journey to formally study and improve health care quality. The Institute of Medicine was instrumental in those efforts and many agencies have joined along the way and continue to contribute to those efforts. Fundamental components of quality and safety improvement include consistently applying best practice standard methods and tools. Banner is transparent about their journey and share it on their website (https://www.bannerhealth.com/bhpprovider/about/qi-program), along with their performance of certain quality measures. The Banner website provides a link to "Hospital Compare", which is the industry source for publicly reported quality and patient satisfaction data (medicare.gov/care-compare). Based on document review, interviews, and direct observation, Banner operates WMC quality, safety, and patient satisfaction framework consistent with the framework at other Banner facilities within the Western Region and the Banner Health System. Banner provided examples of standardized approach methodology, measurement and dashboards, and best practice sharing and implementation. Some of these best practices were directly observed during the campus site visit on 2/11/25.	Met
	ii. Subjecting WMC to Banner's standardized processes, procedures and reporting tools to support the journey of quality and safety continuous improvements, so as to drive outcomes locally	Based on document review and interviews, it is stated that the purpose of using the standardized processes, procedures and reporting tools is to "adopt high reliability, organizing to achieve top quartile safety and top quartile quality performance". Banner provided quality data demonstrating performance that was the same or improved since the transaction.	Met

PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
15 V of Annual Report; 3.8 of Support Agreement	<i>Section 3.8 (a):</i> Banner and WMC hereby agree that the consummation of the Member Substitution and the Asset Purchase shall not, of themselves, affect or change the Medical Staff membership and privileges held by existing members of the Hospital medical staff in good standing immediately prior to the Effective Date. Banner and WMC shall ensure that, if the Hospital Medical Staff Bylaws are amended at any time so as to include any new board certification requirements, those providers serving on the Hospital's Medical Staff immediately prior to the Effective Date shall be exempt from such requirements.	The Annual report indicates that no medical staff members have been impacted to date. PYA confirmed by way of interview with the Medical Staff Office Manager that as bylaws were amended, providers serving on medical staff immediately prior to the transaction effective date were exempt from any new board certification requirements.	Met
	<i>Section 3.8 (b):</i> Banner shall in good faith endeavor to facilitate the long-term recruitment and retention of physicians within the Primary Service Area, in particular to support the Essential Services. Banner shall develop and implement specific physician recruitment and alignment strategies throughout the Wyoming Service Area in an effort to respond to provider shortage areas. Such strategies may include joint recruitment, support and training of specialty physicians in collaboration with Banner's Colorado facilities	The Annual report and additional documentation provided listed recruitment amounts for specific physicians, a formal provider needs assessment, a provider recruitment tracking tool, and an inventory of various strategies Banner implemented to secure physicians when there was a shortage or increased demand. The list of strategies includes recruitment support/assistance for independent groups, sign-on bonuses, premium payments, stipends, loan forgiveness programs, and stipend contracts for residents. These various methods were confirmed during medical staff interviews. Many of the medical staff interviewed indicated that recruitment and Banner's compensation model had recently improved for primary care. They also acknowledged the electrophysiology (EP) lab program as an example of collaboration with Banner's Colorado facilities.	Met
	<i>Section 3.8 (c):</i> Banner shall in good faith explore the potential extension of Banner's Clinically Integrated Network model for the Wyoming Service Area.	The Annual report, along with interview information, indicates that the Clinically Integrated Network (CIN) assessment continues to progress. Additionally, Banner Medical Group is present in the Casper area.	Met



PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
15 (cont.) V of Annual Report; 3.8 of Support Agreement	<i>Section 3.8 (d):</i> Banner shall in good faith seek to cultivate both employed and independent physician leaders in the Wyoming Service Area, including by providing select physician leaders with the opportunity to participate in programs such as Banner's Advanced Leadership Program and Banner's continuing medical education program offerings on the same basis and terms as are made available to employed and independent physicians throughout Banner Health.	The Annual report provided names of physicians who have participated in the Banner Advanced Leadership Program and Banner's Clinical Consensus Groups. PYA interviewed employed, contracted, and independent medical staff to discuss leadership training and other continuing education opportunities. Of the medical staff interviewed there were various levels of awareness of the Banner offerings.	Met
	<i>Section 3.8 (e):</i> Banner shall ensure that for so long as WHMG continues to employ physicians, Banner Medical Group's structure, efficiencies, leadership and educational opportunities and support services shall be made available to WHMC and its employed physicians through appropriate agreements or intercompany arrangements.	Same as above.	Met

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PYA Covenant ID and Reference	Covenant Description/Summary	Compliance with Covenants	Met / Not Met
16 V of Annual Report; 3.10.a of Support Agreement	<i>Section 3.10 (a):</i> Banner: i. shall cause WMC to retain its current name for so long as Banner is the sole member of WMC or otherwise owns and/or operates WMC, and shall cause any authorized successor to Banner (as contemplated herein) to agree to the same	Based on document review and interviews, WMC has not changed its name.	Met
	ii. shall develop and implement a co-branding strategy incorporating the WMC name with other names, including but not limited to “Banner” or other names; and	Based on the Annual Report and document review, WMC launched co-branding of “Banner Health, Wyoming Medical Center” in 2021 and 2022.	Met
	iii. shall develop and implement a marketing strategy to enhance WMC’s potential as a referral center for the Wyoming Service Area.	Based on interview information, Banner WMC developed and implemented a marketing strategy to highlight the capabilities of WMC with focus on the new programs (EP and the surgical robot) and trauma. The channels utilized include social media, focused marketing, patient interviews and testimonials, television and movie theater advertisement, and newspaper advertisement.	Met
17 V of Annual Report; 3.2 of Support Agreement	<i>Section 3.2:</i> For the 10-Year Post-Closing Period, Banner shall cause WMC to provide or arrange to provide hospital medical treatment with respect to prisoners and mentally ill individuals subject to involuntary hospitalization for which the County is responsible under Wyoming law without seeking reimbursement from the County.	Based on review of documentation which included year over year spend and interviews, WMC continues to provide services for prisoners and the County- responsible mentally ill population without seeking reimbursement.	Met

APPENDIX B: INTERVIEW LISTING

In addition to document review, PYA interviewed the individuals and/or groups listed below to either: (1) confirm our understanding of the supporting documents received or (2) to obtain their perspectives regarding Banner/WMC's compliance with the covenants. PYA requested to interview individuals involved in hospital operations and services and received information from the following parties to identify interviewees representing various viewpoints pertinent to this engagement: The Trust, The Banner Transaction Advisory Committee (BTAC), Banner/WMC, or in some cases, the interviewee requested to provide information related to compliance with the covenants.

Interviewee Name	Interviewee Title	Date Interviewed	Purpose/Topic
Margo Karsten	Banner Health Western Region President	3/18/2025	Advisory Board Engagement and Western Region Operations
Kylie Gibson	Trust CFO	4/23/2025	Trust's Capital Allocations
James Anderson, MD	Surgeon and WMC Board Member	4/24/2025	Community Perspective
John Bailey, MD	Surgeon and WMC Board Member		
Paul Bertoglio	Ex-Mayor of Casper and Natrona County Commissioner		
Bob Price	Retired Manager of KTWQ Radio		
Tyler Quest, MD	Dermatologist		
Tom Swanson	Petroleum Landman		
Brian Wieder, MD	Neurosurgeon		
Commissioner Dave North	Chair, Natrona County Commissioners	4/24/2025	Natrona County Perspective
Steve Cobb, M.D.	Chief Medical Officer WMC	4/29/2025	Covenant Compliance
Jordan Eddington, M.D.	Chair of Anesthesia department WMC	5/1/2025	Physician Perspective/Medical Staff Matters
Dustin Roberts, M.D.	Chief of Staff (WMC medical staff)	5/1/2025	Physician Perspective/Medical Staff Matters
Tom Crull	Advisory Board Chair	5/2/2025	Advisory Board
Dilton Riebel, M.D.	Pediatric Hospitalist at WMC	5/5/2025	Physician Perspective/Medical Staff Matters
Jill Birdsong	WMC CFO	5/7/2025	Capital Expenditures
Lance Porter	WMC CEO		
Trish Taveneer	Medical Staff Office Manager, WMC	5/8/2025	Medical Staff Matters
Jesse Miller, M.D.	Vice Chief of Staff WMC	5/9/2025	Physician Perspective/Medical Staff Matters



Interviewee Name	Interviewee Title	Date Interviewed	Purpose/Topic
Jill Birdsong	WMC CFO	5/13/2025	Capital Expenditures
Lance Porter	WMC CEO		
Mary Schubert	Banner General Counsel	5/15/2025	Covenant Compliance
Jill Birdsong	WMC CFO	5/19/2025	Capital Expenditures
Kylie Gibson	Trust CFO		
Paula Mongold	Trust VP of Operations		
Lance Porter	WMC CEO		
Beth Worthen	Trust CEO		
Lance Porter	WMC CEO	5/21/2025	Covenant Compliance
Eugene Duquette, D.O.	Emergency Medicine	5/21/2025	Physician Perspective/Medical Staff Matters
Aimee Gough, M.D.	Colon and Rectal Surgeon	5/29/2025	Physician Perspective/Medical Staff Matters
Kevin Helling, M.D.	General Surgeon	5/30/2025	Physician Perspective/Medical Staff Matters

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APPENDIX C: INFORMATION REQUESTED FROM OR DISCUSSED WITH BANNER

PYA either requested the following documents and/or discussed the following topics with the interviewees noted above. During the course of our interviews, we may have requested additional information pertinent to our analysis not listed below. Additionally, some information is deemed to be proprietary by Banner/WMC and thereby shared confidentially with PYA.

Requirement	ID	Question / Request
1. WMC's Use of Annual Contribution (IV of Annual Report; 2.3 of Support Agreement)		
	1.01	WMC's Capital Expenditure Budget for the years ended December 31, 2021, 2022, 2023, and 2024, including a detailed listing of each proposed capital project. For each capital project identified, provide: <ul style="list-style-type: none"> a.project number, b.project description, c.detailed itemization of cost estimates (i.e., equipment, furniture and fixtures, construction), d.projected year(s) of expenditure(s), e.explanation of how it aligns with WMC's strategic goals, and f.funding source.
	1.02	For the years ended December 31, 2021, 2022, 2023, and 2024 provide a listing from WMC's fixed asset accounting software for any asset placed in service during these years including: <ul style="list-style-type: none"> a.date placed in service, b.purchase date, if different than placed in service date, c.unique asset identification, such as asset tag or serial number, d.description of fixed asset, e.purchased or capitalized amount, f.asset category and class (i.e., equipment, furniture and fixtures, building improvements), and g.associated capital project.
	1.03	For the year ended December 31, 2024, provide a detailed listing of WMC's investments in strategic programs, including programmatic start-up costs. Each item should include the following details: <ul style="list-style-type: none"> a. investment description b. strategic program c. investment amount d. investment category (e.g., recruiting, training, outreach). e. alignment with strategic goals f. funding source



2. Banner to submit Annual Report ("Annual Report"; 2.4 of Support Agreement)		
		<i>No request or document required already requested in a different section</i>
3. WMC as Hub of WY Service Area (V of Annual Report; 3.1 of Support Agreement)		
	3.01	New WY service area by county and/or zip code
	3.02	Transfer detail to show where patients transferred out of the CAH's were transferred to (including sites other than WMC). Ideally, for 2022-2024.
	3.03	Most recent strategic plan that demonstrates the WMC hub/spoke strategy
	3.04	OP data that demonstrates referrals to WMC specialists
4. WMC Management Reporting Within Banner (V of Annual Report; 3.1 of Support Agreement)		
		<i>No request or document required already requested in a different section</i>
5. Wyoming Advisory Board (V of Annual Report; 3.1 of Support Agreement)		
	5.01	2024 meeting agendas, minutes and presentations
	5.02	Attendance roster for each meeting
	5.03	Description of access or interaction with the Western Region President (if she is not on the attendance roster).
	5.04	Description of cadence for Board member meetings with the community and/or the mechanism by which the Board members collect community input.
	5.05	Recommendations that the Board made, based on community input, that were advanced and implemented.
	5.06	Mechanism by which the Board provided advice and input on the annual review of the WMC CEO.
	5.07	Provide education materials that the Board receives or describe the orientation process to ensure the Board members understand the role and the covenant.



6. Collaboration with Hospitals Across Banner's Western Region (V of Annual Report; 3.1 of Support Agreement)		
	6.01	Listing of Banner facilities in Wyoming, Colorado, Nevada, Nebraska and Oklahoma.
	6.02	Have there been acquisitions since this agreement that would expand/alter this footprint?
	6.03	What customary groups would Banner form to support such collaboration?
	6.04	Description of structure in place to support collaboration (regional steering committee, etc.)
	6.05	A strategic plan that includes developing strategies in telehealth, transport services, physician recruitment and other areas that would benefit the hub strategy.
	6.06	Outmigration data, similar to what is provided in the EP (Electrophysiology) section of the report, to demonstrate Banner's focus on keeping healthcare local in the Wyoming Service Area.
7. Maintenance of Acute Care Hospital in Casper Meeting "Basic Hospital Criteria" (V of Annual Report; 3.2 of Support Agreement)		
		<i>No request or document required already requested in a different section</i>
8. Cause WMC to be Regional Referral Center for the WY Service Area (V of Annual Report; 3.2 of Support Agreement)		
		<i>No request or document required already requested in a different section</i>
9. Maintain Essential Services (V of Annual Report; 3.2 of Support Agreement)		
	9.01	Baseline of essential services scope and intensity immediately prior to the effective date of the transaction and their locations as of the effective date (or other substitute locations).
	9.02	Define Banner's measure for scope and intensity and clarify if it includes physician or provider FTE count, provider productivity, and/or capacity measures.
	9.03	What was baseline capability in each of these essential services and what is it today?



10. No Sale or Change in Control or Conversion of WMC to For-Profit Status for 10 Years (V of Annual Report; 3.3 of Support Agreement)		
		<i>No request or document required already requested in a different section</i>
11. Growth of Clinical Capabilities, Services, and Access (V of Annual Report; 3.4 of Support Agreement)		
	11.01	IRS Schedule H 990 form for last three years
	11.02	Outmigration volume, by service line
	11.03	Trauma volume for 2022, 2023, and 2024 (annually)
	11.04	Most recent Provider Needs Assessment for both IP and ambulatory services (including APPs)
	11.05	Strategic plan (inclusive of inpatient and ambulatory)
	11.06	Physician recruitment strategic plan
	11.07	Transfer center data - transfers out and reason (particularly higher level of care) and transfers back, if available.
	11.08	A baseline list of telemedicine services at the time of the transaction
	11.09	A list of ambulatory/OP telemedicine services available
12. Capital Expenditure Commitments (V of Annual Report; 3.5 of Support Agreement)		
		<i>No request or document required already requested in a different section</i>
13. Commitment to Community Including Care for the Indigent (V of Annual Report; 3.6 of Support Agreement)		
	13.01	Confirmation that financial assistance policy posted on WMC website is consistent with Banner policies
	13.02	Notice of any recent changes to policy
	13.03	Bad debt and charity care amounts by year since close of transaction
	13.04	Any complaints or assertions of EMTALA violations
	13.05	Confirmation from medical staff office that medical staff is open
	13.06	Listing of public health programs, dates those are held, how they measure educational benefit to the community
	13.07	Community Benefit Report (annual report for nonprofit assessment)



14. Commitments to Quality, Safety, and Patient Satisfaction (V of Annual Report; 3.7 of Support Agreement)		
	14.01	For CY 2024 WMC quality report card along with Western Region facilities quality report card. Quality report card to include inpatient and outpatient information, including patient satisfaction (such as HCAHPS scores and patient satisfaction in MIPS). Recommend using publicly reported data such as CMS Star rating elements, CMS OP quality compare measures, and/or MIPS, as examples.
	14.02	Some sort of safety event comparison between WMC and the other Western Region facilities. This could be event volume, near miss count, active safety process improvement projects, as possible examples.
	14.03	WMC culture of safety survey results compared to the Western Region facilities.
15. Medical Staff Matters (V of Annual Report; 3.8 of Support Agreement)		
	15.01	Physician Needs Assessment and Physician recruitment strategy plan, including long-term recruitment and retention efforts.
	15.02	Banner's current CIN model including zip code reach
	15.03	Strategic plan that addresses the CIN
16. WMC Name, Branding, Marketing (V of Annual Report; 3.10 of Support Agreement)		
		No request or document required already requested in a different section
17. Commitments to Care for Prisoners and Involuntarily Committed (V of Annual Report; 3.2 of Support Agreement)		
		No request or document required already requested in a different section
18. Fundraising and Philanthropy (V of Annual Report; 3.11 of Support Agreement)		
		No request or document required already requested in a different section

Appendix II: Expenditure of Trust Contributions

Project Description	Allocated	Disbursed	Allocated Not Yet Disbursed	Budget Year
Ambulance	\$ 237,572	\$ 237,572	\$ -	2020
ASP Sterrad SPD East Campus	\$ 52,903	\$ 52,903	\$ -	2020
ASP Sterrad ST100NX Allclear 1-DR Duo SPD Central	\$ 121,081	\$ 121,081	\$ -	2020
Central Campus: BLW Headlights	\$ 18,155	\$ 18,155	\$ 0	2020
Central Campus: V60 Software Upgrade	\$ 27,445	\$ 27,445	\$ -	2020
East Campus: Medivator	\$ 51,433	\$ 51,433	\$ -	2020
East Campus: Olympus Scopes	\$ 244,479	\$ 244,479	\$ 0	2020
Olympus Scopes - Central	\$ 155,361	\$ 155,361	\$ (0)	2020
Software Upgrade PFT Equip	\$ 8,091	\$ 8,091	\$ (0)	2020
Specialty Beds, Mattresses	\$ 24,380	\$ 24,380	\$ 0	2020
Zoll Defibrillators/Monitors	\$ 16,950	\$ 16,950	\$ -	2020
3rd Center Corridor Door	\$ 18,175	\$ 18,175	\$ -	2021
Biomerieux Vitek 2 Lab Eq	\$ 96,430	\$ 96,430	\$ 0	2021
Cisco Ise and Stealthwatch	\$ 48,916	\$ 48,916	\$ -	2021
Compellant SAN	\$ 80,243	\$ 80,242	\$ 1	2021
Cortrak Enteral Access System - Safe Feeding Tube Placement	\$ 26,133	\$ 26,133	\$ 0	2021
ECMO Controller	\$ 45,000	\$ 45,000	\$ -	2021
ED Renovation Phase 1	\$ 182,741	\$ 182,741	\$ -	2021
Espresso Machine	\$ 14,134	\$ 13,621	\$ 513	2021
Generator Controls	\$ 217,519	\$ 217,519	\$ -	2021
Giraffe Incubator Carestation	\$ 67,674	\$ 67,674	\$ -	2021
GSource Lumbar Spine Retractor	\$ 7,345	\$ 7,345	\$ -	2021
Healthmark SST Trays for Case Carts	\$ 11,077	\$ 11,077	\$ -	2021
Manometry Probe Medtronic	\$ 18,502	\$ 18,502	\$ -	2021
Mayfield Clamp and Adaptors	\$ 78,998	\$ 78,998	\$ (0)	2021
Medtronic Dual Channel Pacers X 7	\$ 35,250	\$ 35,250	\$ -	2021
Nanosonics Trophon	\$ 32,669	\$ 32,669	\$ -	2021
Olympus HD Ultralight X 2	\$ 31,949	\$ 31,949	\$ -	2021
Olympus HE 12E Cameras	\$ 31,343	\$ 30,843	\$ 500	2021
Panda Ires Bedded Warmers	\$ 147,228	\$ 147,228	\$ -	2021
Pedigo Enclosed Surgical Case Carts	\$ 80,465	\$ 80,465	\$ 0	2021
Pharmacy Project Overage	\$ 27,919	\$ 27,919	\$ -	2021
Philips Telemetry Patient Monitoring - Equipment Received	\$ 3,995,622	\$ 2,994,504	\$ 1,001,118	2021
Phillips Telemetry Addtl Cerner Interface	\$ -	\$ 346,836	\$ (346,836)	2021
Pyxis Dispensing Cabinets and Anesthesia Carts	\$ 1,914,580	\$ 1,216,217	\$ 698,363	2021
Pyxis Dispensing Cabinets and Anesthesia Carts - EAST	\$ 260,005	\$ 197,457	\$ 62,548	2021
Resuscitation Units - The Birth Place	\$ 11,005	\$ 11,005	\$ -	2021
Sonosite XP Ultrasound X 2	\$ 70,642	\$ 70,642	\$ -	2021
Stryker MultiGen2 - East Campus	\$ 42,088	\$ 41,588	\$ 500	2021
VM Host	\$ 27,551	\$ 27,551	\$ 0	2021
24 hr pH Digitraper	\$ 5,519	\$ 5,495	\$ 24	2022
Addtl Cabling - Pt Monitoring System	\$ 142,650	\$ 142,650	\$ -	2022
Alaris BD Infusion Pumps	\$ 122,823	\$ 122,823	\$ -	2022
Ambulance	\$ 291,572	\$ 252,349	\$ 39,223	2022
Ambulance Box Remount	\$ 143,550	\$ 143,053	\$ 497	2022
Bariatric Beds (2)	\$ 75,156	\$ 75,157	\$ (1)	2022
Cardiac ECHO Ultrasound Unit w/Tee Probe x2	\$ 346,129	\$ 346,130	\$ (1)	2022
CIVCO Steppers	\$ 14,040	\$ 12,368	\$ 1,672	2022
Closed Centrifuge	\$ 15,060	\$ 15,000	\$ 60	2022
CS-TD100E TEE Probe Cleaner and Disinfector	\$ 31,324	\$ 31,324	\$ -	2022
Diagnostic Bronchoscope Replacement - Buyout	\$ 10,000	\$ 9,228	\$ 772	2022
EBUS Scope	\$ 67,924	\$ 57,689	\$ 10,235	2022
Endoeye Scope	\$ 23,801	\$ 23,801	\$ -	2022
EP Lab - Cornerstone Project	\$ 7,394,749	\$ 3,486,844	\$ 3,907,905	2022
FDR GO+ Portable X-Ray Systems (2)	\$ 368,126	\$ 368,126	\$ -	2022
Green Light Laser Buyout	\$ 10,000	\$ 10,000	\$ -	2022
Haemonetics Cell Saver 5 X 3	\$ 60,000	\$ 60,075	\$ (75)	2022

Project Description	Allocated	Disbursed	Allocated Not Yet Disbursed	Budget Year
Hercules Patient Repositioner System ICU	\$ 69,450	\$ 69,450	\$ -	2022
Hologic Specimen Imager	\$ 90,000	\$ 90,000	\$ -	2022
InnerSpace Mobile Carts	\$ 27,162	\$ 27,162	\$ -	2022
InnerSpace Mobile Carts (x14) for Anesthesia Pyxis	\$ 43,811	\$ 43,811	\$ (0)	2022
IR Room 6 Single Plane Equipment Replacement	\$ 2,024,503	\$ 1,832,226	\$ 192,277	2022
Moses 2.0 Pulse 120H Laser	\$ 254,664	\$ 234,000	\$ 20,664	2022
NOVA Glucose Meters (House wide)	\$ 37,800	\$ 37,800	\$ -	2022
Olympus Gastrosopes (2)	\$ 74,658	\$ 71,675	\$ 2,983	2022
Olympus Generator Buyout	\$ 17,270	\$ 17,270	\$ -	2022
Olympus HD Ultralight X 4	\$ 61,684	\$ 61,684	\$ -	2022
Olympus Lease Buyout Olympus TJF 180 for 190 Swap	\$ 8,183	\$ -	\$ 8,183	2022
Philips ELI 350 15 Lead EKG Machines w/Cart (4)	\$ 46,927	\$ 46,927	\$ -	2022
Philips EPIQ CVx Ultrasound System	\$ 200,389	\$ 198,789	\$ 1,600	2022
Safe Place Infant Security	\$ 313,464	\$ 262,416	\$ 51,048	2022
Stryker Bariatric Gurney X 10	\$ 118,154	\$ 114,281	\$ 3,873	2022
Stryker TPX System - Small Bone Saw/Drill System X 2	\$ 67,150	\$ 60,590	\$ 6,560	2022
Technimount for Zoll Monitors	\$ 25,000	\$ 25,000	\$ -	2022
TELE ICU System	\$ 242,076	\$ 231,176	\$ 10,900	2022
TeleKarts for 4 sites: Buffalo, Riverton, Lander & New Castle	\$ 24,232	\$ 23,712	\$ 520	2022
TIMS Medical Video System	\$ 26,985	\$ 26,985	\$ -	2022
Trauma Lockers - Compartment Supply Cart Aluminum	\$ 29,343	\$ 29,343	\$ -	2022
Unitex Multilab Series II 2CP-R Diagnostic Vascular System	\$ 27,447	\$ 27,447	\$ -	2022
Washer Replacement #65	\$ 14,500	\$ 14,500	\$ -	2022
Ambulance Baseline Replacement	\$ 354,049	\$ 60,326	\$ 293,723	2023
Avasure Cameras	\$ 178,660	\$ 50,685	\$ 127,975	2023
AZURION 3 W-CLARITY, FLEXVISION	\$ 420,171	\$ 420,171	\$ -	2023
Centrella smart beds	\$ 418,132	\$ 418,132	\$ -	2023
Condensate Pumps	\$ 293,700	\$ -	\$ 293,700	2023
CT (Room 2) Replacement and Room Renovation	\$ 184,488	\$ 184,488	\$ -	2023
Dielectric Union	\$ 130,000	\$ 130,000	\$ -	2023
FR1 Ambulance (Fleet Rejuvenation)	\$ 351,858	\$ 60,326	\$ 291,532	2023
FR2 Ambulance (Fleet Rejuvenation)	\$ 351,858	\$ 60,326	\$ 291,532	2023
FR3 Ambulance (Fleet Rejuvenation)	\$ 352,199	\$ 60,326	\$ 291,873	2023
New carts in ED Rooms	\$ 36,720	\$ 36,720	\$ -	2023
Parking structure Striping Machine	\$ 5,649	\$ 5,649	\$ -	2023
PFT Equipment	\$ 40,964	\$ 37,662	\$ 3,302	2023
SOC Cooling	\$ 22,606	\$ -	\$ 22,606	2023
SPM Implementation	\$ 170,546	\$ 31,081	\$ 139,465	2023
Ventilators	\$ 173,807	\$ 173,807	\$ (0)	2023
Verathon Glidescope Go	\$ 27,305	\$ 26,655	\$ 650	2023
Verus Nurse station chairs	\$ 25,596	\$ 25,596	\$ -	2023
Wellness Ctr O2 Outlets	\$ 59,110	\$ 46,170	\$ 12,940	2023
3N-4N Phase 0	\$ 212,842	\$ 212,842	\$ -	2024
Belmont Rapid Infuser	\$ 104,370	\$ 104,370	\$ -	2024
Belmont Rapid Infusors	\$ 73,082	\$ 73,082	\$ -	2024
Blood Gas System	\$ 22,006	\$ 22,006	\$ -	2024
Chemistry Analyzer	\$ 112,266	\$ 4,874	\$ 107,392	2024
ED Security and Clean room Flooring	\$ 8,775	\$ 8,775	\$ -	2024
EMERGENCY BK Ultrasound	\$ 232,433	\$ 232,433	\$ -	2024
EMERGENCY Heat pumps	\$ 17,500	\$ 17,500	\$ -	2024
Farastar	\$ -	\$ -	\$ -	2024
Fetal Monitors	\$ 214,416	\$ 214,416	\$ -	2024
Glidescopes	\$ 29,095	\$ 28,260	\$ 835	2024
Hercules Patient Lifts	\$ 64,110	\$ 64,110	\$ -	2024
Hillrom Lifts	\$ 7,084	\$ 7,133	\$ (49)	2024
HVAC Study	\$ 32,537	\$ 18,889	\$ 13,648	2024
Infant Warmer	\$ 26,049	\$ 22,924	\$ 3,125	2024
Massage Chair	\$ 6,899	\$ 6,899	\$ -	2024
Mizuho Hana Table	\$ 100,175	\$ 100,175	\$ (0)	2024
OR 3 Room Renovations	\$ 610,302	\$ 395,892	\$ 214,410	2024
Purification System for East Campus	\$ 25,940	\$ 10,350	\$ 15,590	2024

Project Description	Allocated	Disbursed	Allocated Not Yet Disbursed	Budget Year
Sage Exam Room Flooring	\$ 50,556	\$ 43,330	\$ 7,226	2024
Sonosites	\$ 378,900	\$ 370,650	\$ 8,250	2024
STAT Analyzer	\$ 32,427	\$ 32,427	\$ -	2024
Sternal Saws	\$ 31,295	\$ 31,239	\$ 56	2024
TEE Probe replacement	\$ 99,785	\$ 99,786	\$ (1)	2024
TrapTex Toilet Devices	\$ 29,700	\$ -	\$ 29,700	2024
Urgent Sherlock 3cg	\$ 12,990	\$ 12,650	\$ 340	2024
Wireless Scanners	\$ 47,584	\$ 47,584	\$ (0)	2024
Total disbursed or allocated	\$ 27,726,864	\$ 19,881,418	\$ 7,845,446	
Zimmer Rosa robot	\$ 660,000	\$ -	\$ 660,000	2025
Facility work - Gases in SPD	\$ 150,000	\$ -	\$ 150,000	2025
Regulatory construction - countertops	\$ 62,000	\$ -	\$ 62,000	2025
Phillips monitors	\$ 710,712	\$ -	\$ 710,712	2025
Nurse call upgrade	\$ 356,792	\$ -	\$ 356,792	2025
OR light system and boom replacement	\$ 934,000	\$ -	\$ 934,000	2025
InnoWave Pro Ultrasonic - SPD	\$ 106,767	\$ -	\$ 106,767	2025
System 9 Power equipment (8)	\$ 182,901	\$ -	\$ 182,901	2025
Filtration Equipment	\$ 10,954	\$ -	\$ 10,954	2025
Industrial Stand Mixer	\$ 10,000	\$ -	\$ 10,000	2025
Pyxis	\$ 30,000	\$ -	\$ 30,000	2025
Cameras for pyxis	\$ 11,000	\$ -	\$ 11,000	2025
C-Arm (2)	\$ 339,186	\$ -	\$ 339,186	2025
Portable Xray (1)	\$ 347,494	\$ -	\$ 347,494	2025
Vents (1)	\$ 23,700	\$ -	\$ 23,700	2025
Ultrasound Machines (2)	\$ 52,206	\$ -	\$ 52,206	2025
EKG Machines (3)	\$ 12,000	\$ -	\$ 12,000	2025
Bladder Scanner (2)	\$ 7,310	\$ -	\$ 7,310	2025
O-ARM with Stealth	\$ 1,774,694	\$ -	\$ 1,774,694	2025
Neptunes w/ docking station(4)	\$ 89,118	\$ -	\$ 89,118	2025
OR tables (4)	\$ 125,000	\$ -	\$ 125,000	2025
Allen Frame for Wilson Table	\$ 5,878	\$ -	\$ 5,878	2025
Tenet beach chair	\$ 34,217	\$ -	\$ 34,217	2025
Tourniquet	\$ 15,800	\$ -	\$ 15,800	2025
Anesthesia machine (4)	\$ 260,000	\$ -	\$ 260,000	2025
Efficient care knees and shoulders	\$ 567,408	\$ -	\$ 567,408	2025
WYMC 3N & 4N Refresh Q1 - Q3	\$ 1,926,090	\$ -	\$ 1,926,090	2025
Central Anesthesia machines	\$ 780,000	\$ -	\$ 780,000	2025
Transport van	\$ 75,000	\$ -	\$ 75,000	2025
Total partially approved (no PO issued)	\$ 9,660,227	\$ -	\$ 9,660,227	
Totals	\$ 37,387,090	\$ 19,881,418	\$ 17,505,672	

Trust Contributions	
2020	2,068,869
2021	8,954,655
2022	9,552,234
2023	8,066,244
2024	8,752,370
Total	\$ 37,394,372

Appendix III: Banner Annual Expenditures

Project Description	Allocated	Disbursed	Allocated Not Yet Disbursed	Budget Year
Banner Signage	\$ 332,017	\$ 332,017	\$ -	2021
Elevator doors - East	\$ 14,320	\$ 14,320	\$ 0	2021
West Generator Concrete	\$ 25,300	\$ 25,300	\$ -	2021
Roof Replacements - Sage & Center Tower	\$ 569,940	\$ 569,940	\$ (0)	2021
Center Stair Treads	\$ 46,295	\$ 46,295	\$ 0	2021
Financial Services Panel (Md)	\$ 39,075	\$ 39,075	\$ -	2021
Card Access - East	\$ 78,435	\$ 68,682	\$ 9,753	2021
Security Care Access Central	\$ 498,412	\$ 497,505	\$ 907	2021
Card Access - Clinics	\$ 89,451	\$ 89,451	\$ -	2021
Plumbing Replacements	\$ 20,419	\$ 20,419	\$ -	2021
AHU's Center Tower-multiple	\$ 509,022	\$ 444,829	\$ 64,193	2021
DA Tank Phase 1 - East	\$ 16,500	\$ 16,500	\$ -	2021
AHU CSC	\$ 331,558	\$ 287,698	\$ 43,860	2021
Center Tower - ATS 5 Units	\$ 336,585	\$ 336,585	\$ -	2021
Panda Ires Bed Warmers	\$ 9,597	\$ 9,597	\$ -	2021
Pedigo Enclosed Surgical Case Carts	\$ 4,115	\$ 4,115	\$ 0	2021
Surgery drills & Neptunes	\$ 397,706	\$ 397,706	\$ -	2021
Giraffe Incubator Carestation	\$ 480	\$ 480	\$ -	2021
45 Lb Industrial Washer	\$ 19,200	\$ 19,200	\$ -	2021
HVAC System Controls Upgrade	\$ 91,954	\$ 91,954	\$ -	2021
Incinerator AHU	\$ 114,684	\$ 114,684	\$ -	2021
Security Cameras Conwell	\$ 4,312	\$ 4,308	\$ 4	2021
Pharmacy Project Overage	\$ 18,612	\$ 18,612	\$ -	2021
Elevator Modernization	\$ 112,679	\$ 112,679	\$ -	2021
Ed Renovation Phase 1	\$ 15,449	\$ 15,449	\$ -	2021
Phase II Fire Alarm	\$ 425,753	\$ 389,759	\$ 35,994	2021
Pharmacy Refrigerator	\$ 7,769	\$ 7,769	\$ -	2021
LTV 1200 Transport Vents	\$ 25,343	\$ 25,343	\$ -	2021
Stabilizer Mount	\$ 29,990	\$ 29,990	\$ -	2021
Motorlat Portable Radios	\$ 34,313	\$ 34,313	\$ -	2021
Cubical Panel Curtain refresh	\$ 58,236	\$ 58,236	\$ -	2021
East Campus OR's Remodel	\$ 1,147,899	\$ 1,147,899	\$ (1)	2021
SOS Relocation to SSB 2nd Floor	\$ 26,341	\$ 26,341	\$ (0)	2021
EKOS CU 4.0 Control System	\$ 32,995	\$ 32,995	\$ -	2021
Jaundice Meters	\$ 14,473	\$ 14,473	\$ -	2021
C-Arm x2	\$ 237,685	\$ 237,686	\$ (1)	2021
BMC Radiofreq Puncture Generator	\$ 15,000	\$ 15,000	\$ -	2021
ISTAT Machine	\$ 11,021	\$ 11,021	\$ -	2021
Security Patrol Vehicle	\$ 43,100	\$ 44,355	\$ (1,255)	2021
Intellivue X3 Cardiac Monitors Nursery	\$ 21,033	\$ 16,267	\$ 4,766	2021
85lb Washer Unimacs	\$ 42,635	\$ 41,635	\$ 1,000	2021
Belmont RI-2 Infuser	\$ 37,010	\$ 36,510	\$ 500	2021
Furniture East Campus FY 21	\$ 21,661	\$ 21,661	\$ -	2021
Furniture Central Campus FY 21	\$ 69,754	\$ 69,754	\$ -	2021
Medistim MiraQ Flow Device & Probe	\$ 191,000	\$ 191,000	\$ -	2021
Beacon Communications Nurse Call	\$ 443,326	\$ 262,380	\$ 180,946	2021
Sonopet IQ Ultrasonic Asp Console	\$ 182,503	\$ 182,503	\$ -	2021
PFT Box	\$ 1,472	\$ 1,472	\$ -	2021
Sage System Upgrade	\$ 7,754	\$ 7,754	\$ -	2022
Renew Allscripts ERP	\$ 169,600	\$ 169,600	\$ -	2022
Sysmex UN2000 Analyzer	\$ 129,098	\$ 129,097	\$ 1	2021
IT Network Infrastructure FY 21	\$ 93,023	\$ 93,023	\$ -	2021
IT Hardware FY21	\$ 223,504	\$ 223,504	\$ -	2021
East Fire doors Phase 2	\$ 10,159	\$ 10,159	\$ -	2021
Emergency Radio Booster	\$ 4,306	\$ 4,306	\$ -	2022
Medical Gas Alarm Panel	\$ 7,696	\$ 7,696	\$ -	2021
OR Access Controls	\$ 15,963	\$ 15,963	\$ -	2021
Launery Renovation for dryers, incl dryers	\$ 76,576	\$ 76,576	\$ -	2021

Project Description	Allocated	Disbursed	Allocated Not Yet Disbursed	Budget Year
McKinley Bldg Access Controls	\$ 6,265	\$ 6,265	\$ -	2021
Tunnel & Garden Access Controls	\$ 10,458	\$ 10,458	\$ -	2021
Schlotsky Bldg RTU	\$ 12,458	\$ 11,325	\$ 1,133	2021
Security Operation Center	\$ 1,030	\$ 1,030	\$ -	2021
WYMC East Laboratory Refrigerators	\$ 14,244	\$ -	\$ 14,244	2022
Hover Jacks	\$ 7,404	\$ 7,404	\$ -	2022
Lab Reagten refrigerator	\$ 7,079	\$ 7,046	\$ 33	2022
East OR Renovation	\$ 92,970	\$ 92,970	\$ -	2022
Avigilon Security Camera's	\$ 271,919	\$ 261,110	\$ 10,809	2022
OR Flooring	\$ 116,879	\$ 116,879	\$ 0	2022
Trauma Lockers - Compartment Supply Cart Aluminum	\$ 1,469	\$ 1,469	\$ -	2022
Replace door Controls - East	\$ 26,527	\$ 26,527	\$ -	2022
East Laboratory Freezer	\$ 7,042	\$ -	\$ 7,042	2022
Patient Bathrooms 5th Flr	\$ 486,820	\$ 486,820	\$ 0	2022
WYMC East DA Tank and 2-Boiler Replacement	\$ 2,075,500	\$ 1,959,614	\$ 115,886	2022
Dishwasher	\$ 160,523	\$ 150,524	\$ 9,999	2022
Heating System Gasket Replacement	\$ 575,000	\$ 155,895	\$ 419,105	2022
Heating Upgrade 3rd and 4th Floor North	\$ -	\$ -	\$ -	2022
Remodel Front Office - Sage Primary Care	\$ 57,261	\$ 57,261	\$ -	2022
SPD Water Quality Renewal Project - Central	\$ 113,250	\$ 35,080	\$ 78,170	2021
SPD Water Quality Renewal Project - East	\$ 46,097	\$ 11,872	\$ 34,225	2021
GF-UCT180 CURVILINEAR EUS SCOPES	\$ 135,418	\$ 135,418	\$ (0)	2023
GFUE160-AL5 RADIAL ARRAY EUS SCOPE	\$ 63,250	\$ 62,750	\$ 500	2023
AMBULANCE LOCKER RM	\$ 8,152	\$ 8,152	\$ (0)	2022
Mammotone Neoprobe	\$ 84,311	\$ 84,311	\$ 0	2023
Myosure Hysteroscopy equipment	\$ 41,846	\$ 41,846	\$ -	2023
Diversatek	\$ 6,700	\$ 6,200	\$ 500	2023
Belintra Halyard Shelves	\$ 185,098	\$ 184,668	\$ 430	2023
Bone Mill	\$ 79,321	\$ 76,998	\$ 2,323	2023
Trios Cervical Head Holder	\$ 16,172	\$ 16,172	\$ -	2023
Versajet Console	\$ 12,000	\$ 12,000	\$ -	2023
Valve retractor System	\$ 18,109	\$ 18,109	\$ -	2023
Verus Nurse station chairs	\$ 1,689	\$ 1,689	\$ -	2023
Replacement OR C-arms	\$ 168,347	\$ 168,347	\$ -	2023
AVVIGGO	\$ 170,000	\$ 170,000	\$ -	2023
Casper Surgical Humidity & TC	\$ 1,079,947	\$ 919,135	\$ 160,812	2023
McKinley RTUs replacement	\$ 82,385	\$ 82,385	\$ -	2023
C Street Furnace	\$ 6,800	\$ 6,800	\$ -	2023
East Campus Chillers	\$ 346,457	\$ 346,457	\$ -	2023
C Street Fire Alarm	\$ 26,340	\$ 26,340	\$ -	2023
Sage Medical RTU replacement	\$ 96,795	\$ 96,795	\$ -	2023
Sage Renovation	\$ 91,055	\$ 79,894	\$ 11,161	2023
MS303 Ambulance Wrap	\$ 6,000	\$ 6,000	\$ -	2023
Bed replacement	\$ 79,676	\$ 79,676	\$ 0	2023
Phillips ECG Machines	\$ 43,588	\$ 42,732	\$ 856	2023
Dishwasher duct System	\$ 50,000	\$ 50,000	\$ -	2023
Progressa Beds	\$ 155,968	\$ 155,967	\$ 1	2023
Centrella smart patient care beds	\$ 411,750	\$ 411,732	\$ 18	2023
Anesthesia machine for mri	\$ 77,031	\$ 70,651	\$ 6,380	2023
East Campus Chiller #2 VFD	\$ 8,508	\$ 8,508	\$ -	2023
Design of Peds Rooms on 3W	\$ 3,755,108	\$ 563,647	\$ 3,191,461	2023
Ambulance Garage Phase 0	\$ 33,739	\$ 23,800	\$ 9,939	2023
Roof 8	\$ 44,530	\$ 24,740	\$ 19,790	2023
Sonosite PX Ultrasound Sys	\$ 49,470	\$ 49,470	\$ -	2023
AZURION 3 W-CLARITY, FLEXVISION	\$ 525,000	\$ 316,733	\$ 208,267	2023
Swiftlink Cable for Ultrasound machine	\$ 15,612	\$ 15,612	\$ -	2023
Wound Care to Infusion	\$ 15,981	\$ 15,981	\$ (0)	2023
IR Reading Room	\$ 28,189	\$ 28,189	\$ 0	2023
Steris Rack	\$ 23,477	\$ 18,949	\$ 4,528	2023
BIS Module	\$ 10,624	\$ 10,416	\$ 208	2023
Roam Innospace Supply Carts	\$ 99,464	\$ 99,464	\$ (0)	2023
Microdebrider	\$ 16,020	\$ 16,020	\$ 0	2023

Project Description	Allocated	Disbursed	Allocated Not Yet Disbursed	Budget Year
Cell Saver	\$ 20,007	\$ 20,007	\$ -	2023
EMERGENCY ULTRA SONIC	\$ 121,838	\$ 121,838	\$ (0)	2023
Dining Rm Corridor to Board Rm	\$ 66,965	\$ 66,965	\$ (0)	2023
XPER Upgrade X3 for Hemodynamics	\$ 203,053	\$ 203,053	\$ -	2023
EKG Capital Buy Part 2	\$ 42,732	\$ 42,732	\$ -	2023
TEE Probe Replacement	\$ 66,524	\$ 66,524	\$ 0	2023
Intellivue Monitors	\$ 16,565	\$ 16,565	\$ -	2023
CT (Room 2) Replacement and Room Renovation	\$ 1,393,751	\$ 1,137,472	\$ 256,279	2023
DataAir Fan Coil Units- Imaging	\$ 270,622	\$ -	\$ 270,622	2023
BK Endocavity Transducer	\$ 15,525	\$ 15,525	\$ -	2023
Velys Hip Navigation System	\$ 98,550	\$ -	\$ 98,550	2023
East campus storage container	\$ 5,560	\$ 5,300	\$ 260	2023
Elevator 17 & 18 Modernization	\$ 984,608	\$ 858,012	\$ 126,596	2023
CardioQuip water heater/cooler	\$ 88,608	\$ 85,739	\$ 2,869	2023
Heat pumps	\$ 17,500	\$ 17,500	\$ -	2023
Total disbursed or allocated	\$ 23,226,638	\$ 17,822,974	\$ 5,403,663	
BK Ultra Sound	\$ 7,200	\$ 7,200	\$ -	2024
Nizuho Hana Table	\$ 4,146	\$ 4,146	\$ (0)	2024
WYMC 3N & 4N Refresh	\$ 2,828,873	\$ 377,510	\$ 2,451,363	2024
A4B Shut off valve	\$ 5,187	\$ 5,187	\$ -	2024
WYMC Design & Construction Projects	\$ 640,807	\$ -	\$ 640,807	2024
Phillips Spare Equipment	\$ 34,503	\$ 35,390	\$ (887)	2024
Roof 4 Renewal	\$ 109,842	\$ 90,225	\$ 19,617	2024
6th Floor flooring renewal	\$ 171,588	\$ 51,470	\$ 120,118	2024
MOB Flooring Renewal	\$ 60,014	\$ 47,972	\$ 12,042	2024
East Entry Roof Renewal	\$ 18,300	\$ 18,300	\$ -	2024
Stretchers	\$ 1,034,860	\$ 1,034,860	\$ -	2024
Expansion Tank Renewal	\$ 9,500	\$ 9,500	\$ -	2024
Epredia Cryostar NX 50 Cryostat	\$ 31,239	\$ -	\$ 31,239	2024
C Street RTUs	\$ 35,188	\$ 35,188	\$ -	2024
Conwell UPS renewal	\$ 68,974	\$ 55,450	\$ 13,524	2024
East 2nd St MOB flooring	\$ 25,288	\$ 25,288	\$ -	2024
ATS Renewal	\$ 515,097	\$ 177,821	\$ 337,276	2024
Chemistry Refrigerator Replacement	\$ 14,744	\$ -	\$ 14,744	2024
West Courtyard drainage	\$ 12,559	\$ 12,559	\$ -	2024
Med Services FCU renewal	\$ 43,300	\$ 43,300	\$ -	2024
UPS (Main) Renewal	\$ 209,706	\$ 178,189	\$ 31,517	2024
Casper Surgery Center ATS	\$ 116,616	\$ -	\$ 116,616	2024
Compounding Hoods	\$ 19,047	\$ 18,496	\$ 551	2024
Beds	\$ 785,248	\$ 785,248	\$ -	2024
Liposuction	\$ 57,018	\$ 57,018	\$ -	2024
Ed breakroom Flooring	\$ 38,767	\$ 28,104	\$ 10,663	2024
Posey Beds	\$ 29,847	\$ 29,608	\$ 239	2024
Mast Quadrant Retractor System	\$ 85,556	\$ 85,566	\$ (10)	2024
Dermatome and Mesher	\$ 58,883	\$ 58,383	\$ 500	2024
Stryker Harvest Equipment	\$ 205,349	\$ 205,349	\$ -	2024
Edwards Heart Monitoring System	\$ 203,130	\$ 203,130	\$ -	2024
Aquablation	\$ 471,350	\$ 470,850	\$ 500	2024
5E Patient Rooms	\$ 1,699,631	\$ 67,726	\$ 1,631,905	2024
CSPD Floor Decon Washers	\$ 1,154,349	\$ 760,582	\$ 393,767	2024
EMS Portable Radios	\$ 41,909	\$ -	\$ 41,909	2024
Nuc Med	\$ 1,237,715	\$ 23,223	\$ 1,214,492	2024
East Campus Backflows	\$ 45,540	\$ 45,540	\$ -	2024
EEG unitys (6)	\$ 335,627	\$ 266,683	\$ 68,944	2024
Slit Lamp	\$ 19,697	\$ 19,697	\$ -	2024
Cell Washer	\$ 9,631	\$ -	\$ 9,631	2024
Plasma Thawer	\$ 8,366	\$ -	\$ 8,366	2024
Fixed D/R	\$ 600,000	\$ -	\$ 600,000	2024
Fixed D/R	\$ 605,864	\$ -	\$ 605,864	2024
Ambulance Command Vehicle	\$ 57,899	\$ -	\$ 57,899	2024
Bariatric Mattress and Blower	\$ 16,872	\$ 16,872	\$ -	2024

Project Description	Allocated	Disbursed	Allocated Not Yet Disbursed	Budget Year
Olympus Scopes	\$ 340,736	\$ 416,645	\$ (75,909)	2024
WYMC Elevator 9 & 10	\$ 1,008,159	\$ 835,347	\$ 172,812	2024
Nustep and Treadmills	\$ 23,933	\$ 21,964	\$ 1,969	2024
Mechanical Door Renewal	\$ 17,945	\$ -	\$ 17,945	2024
LithoVue Elite	\$ 17,500	\$ 17,500	\$ -	2024
Trumpf Table	\$ 85,159	\$ 85,159	\$ -	2024
Centrifuge Replacement	\$ 11,566	\$ -	\$ 11,566	2024
SSB Boilers renewal	\$ 161,290	\$ -	\$ 161,290	2024
2nd FL Flooring Renewal	\$ 30,971	\$ -	\$ 30,971	2024
Building Purchase	\$ 1,864,000	\$ 50,000	\$ 1,814,000	2024
Total partially approved (no PO issued)	\$ 17,346,085	\$ 6,778,245	\$ 10,567,840	
Totals	\$ 40,572,723	\$ 24,601,219	\$ 15,971,503	

Minimum Annual Capital Exp.	
2021	\$ 10,000,000
2022	\$ 10,000,000
2023	\$ 10,000,000
2024	\$ 10,000,000
Total	\$ 40,000,000