



This document and any attachments contain information that is proprietary, confidential, commercially sensitive, and/or competitive, and is protected from public disclosure pursuant to Tex. Gov't Code Ann. §§ 552.101, 552.104, 552.110(a)-(b), and any other applicable exception listed in Subchapter C of Chapter 552 of the Texas Government Code, Tex. Bus. & Com. Code Ann. § 15.10(i), and all other applicable statutes, rules, and regulations.

**Shannon Health**

Quarterly Report for Quarter 4 of Fiscal Year 2025

Reporting Period: 7/1/25 – 9/30/25

Submission Date: December 29, 2025

Certificate of Public Advantage ("COPA")

## **Quarterly Performance Report for Quarter 4 of Fiscal Year 2025**

This Quarterly Performance Report (the “Report”) is submitted pursuant to the revised Terms and Conditions of Compliance (effective October 1, 2023) governing the Certificate of Public Advantage (“COPA”) issued to Shannon Health System on October 2, 2020 (“COPA Approval Date”) with respect to the asset purchase agreement dated April 20, 2020, by and among Shannon Medical Center (“SMC”) and Community Health System Professional Services Corporation, Inc. (“CHSPSC” or “CHS”) for substantially all of the assets used in the operation of San Angelo Community Medical Center (“SACMC”, subsequently to be known as “SMC South”) (collectively, the “Merger”), and the underlying transaction that closed on October 24, 2020 (the “Transaction Closing Date”). Information related to each of the Shannon Health System hospitals (SMC and SMC South, collectively, “Shannon Health”), is included in this Report where appropriate. The Office of Public Insurance Counsel (“OPIC”) is now the state agency supervising the activities under the COPA.

This Report reflects the performance of SMC and SMC South (formerly SACMC) for the fourth quarter of fiscal year 2025 (“Quarter 4 FY2025” or “Fourth Quarter FY2025”), the period of July 1, 2025 to September 30, 2025. Where applicable, this Report includes information or refers to information provided in the Baseline Performance Report that was submitted to HHSC on January 15, 2021, and reflects the pre-Merger baseline period of FY2018 – FY2020 (the “Baseline Performance Report”).

## Report Contents

I.	Abbreviation Key	6
II.	Quarterly Performance Report – Quarter 4 FY2025	7
	A. Summary of Requirements	7
	B. Description of Process	7
III.	Terms and Conditions for COPA-Approved Health System	8
	A. Quality	8
	1. Evidence demonstrating how health care quality has improved.	8
	2. Inpatient and outpatient numbers before and after the merger.	9
	3. Patient readmission numbers before and after the merger.	11
	4. Any association between increased patient volumes and better patient outcomes.	12
	5. Explanation of how patient services were optimized since the merger and how service optimization impacted patient care.	12
	6. A summary of quality improvement measures for each hospital to address performance in meeting quality performance standards.	12
	B. Efficiencies	14
	7. A description of the steps taken to reduce costs and improve efficiency.	14
	8. Data regarding emergency department closures since the merger.	14
	9. A description of how the hospitals have expanded telehealth and an explanation of how the expansion has improved access to healthcare for the rural community by: (1) Providing data demonstrating the expansion of telehealth and technology; and (2) Explaining how the expansion of telehealth and technology improved the hospitals' ability to treat a larger patient population.	14
	10. Progress report regarding the adoption of the new IT Platform.	15
	11. Provide the evidence of the onboarding SACMC's system and provide training evidence for personnel.	16
	12. A description of any workforce reduction since the issuance of the COPA based on occupation, i.e. doctors, nurses, support staff, etc. Include the numbers and job titles of any position eliminated, the total number of employees before and after the reduction, and explain any impact the reduction has on patient service delivery.	16
	13. Data and financial reports demonstrating savings from the reduction in duplication of resources.	17
	14. Data showing the coordination of services before and after the merger and evidence demonstrating how cost savings will be reinvested locally.	17
	15. Data demonstrating reinvestment in the combined healthcare system.	17
	16. Data and financial reports reflecting the savings in each area referenced above.	18
	17. Operating deficiencies that existed before the merger and how any operating efficiencies have been achieved since the merger.	18

18. An explanation of how any operating efficiencies achieved have impacted healthcare service delivery, patient care, staff, the local community, and counties served.	19
19. Data on the pricing, quality, and availability of ancillary health care services.	19
20. Data on the pricing, quality, and availability of physician services.	23
21. Data on the consolidation of clinic services, identifying the types of services per county.	25
22. Data indicating how the consolidation of these services improved patient outcomes.	25
C. Accessibility	26
23. A list of the severe risks described in the application facing Tom Green County and an explanation of how the merger led to the mitigation of these risks.	26
24. A description of each patient service that changed or has been discontinued since the merger and an explanation of the impact to patient care.	29
25. Data illustrating the impact to patient wait times, including emergency department wait times, before and after the merger.	30
26. Data demonstrating any expansion in service delivery since the merger.	31
27. Data demonstrating rehabilitation room capacity before and after the merger.	31
28. A list of rehabilitative services accessible to patients and a schedule of services demonstrating the referenced service delivery hours.	32
29. Data and financial reports regarding infrastructure investment, capital expenditures, and operating costs since the merger.	33
30. Evidence of any expansion of clinical services.	36
31. A copy of each hospital's charity care policy, identifying any changes to the policy in the previous quarter when changes occur.	36
32. The number of patients enrolled in each hospital's charity care program.	37
33. Data and financial reports for charity care services provided by each hospital.	37
34. Data demonstrating expansion efforts for the Shannon Care Coordination Program.	37
35. An explanation of how SMC South will utilize providers, nurses and other medical staff to strengthen the Shannon Care Coordination Program.	38
36. Data demonstrating clinical integration between facilities and providers and whether such integration led to cost savings and a reduction in medical errors.	38
37. A description of how the merger has impacted rural healthcare in the hospitals' 25-county service area during the previous quarter, including any reduction in services.	38
38. A list of health plans each hospital contracted with before the merger, an explanation of any change to the accepted health care plans after the merger, and a list of health plan contracts terminated since the merger.	39
39. Data identifying changes to service levels at the hospitals and at other facilities, including service levels available to the public and any reduction in service levels available to the public.	40
40. Data illustrating the organizations' payment models.	41
41. Data demonstrating the payment models established since the merger in comparison to payment models before the merger.	42

D. Competition	43
42. Data demonstrating the merger did not reduce competition among physicians, allied health professionals, other health providers, or any other persons providing goods and services with the hospitals.	43
43. Evidence of how patient choice is being preserved.	49
44. Evidence reflecting efforts to bring additional jobs to the area.	49
45. Any contracted services that have changed since the last report, with an explanation for each change.	50
46. Data illustrating physician contracts for each county in the region specifying the physician specialty or practice area for each contract.	50
E. Other Requirements	53
47. Any minutes or notes of meetings regarding the COPA and the portion of each hospital's governing body meeting minutes that discuss the COPA.	53
48. Any healthcare-related service contract changes in the previous quarter and the explanation for the change.	53
49. The number of physicians, allied professionals and other health care providers providing medical services that have privileges to practice at the hospital.	53
50. Information on additional investments regarding infrastructure, capital expenditures, and operating costs and how this affected patient care outcomes, population access to healthcare, and prevention services.	54
IV. Attachments	55

## I. Abbreviation Key

Abbreviation	Full Name/Definition
CDM	Charge Description Master
CMS	Center for Medicare & Medicaid Services
COPA	Certificate of Public Advantage
HHSC	Texas Health and Human Services Commission
OPIC	Texas Office of Public Insurance Counsel
SACMC	San Angelo Community Medical Center
Shannon Health	SMC and SMC South Combined
SMC	Shannon Medical Center
SMC South	Shannon Medical Center South (formerly SACMC)

## II. Quarterly Performance Report – Quarter 4 FY2025

### A. Summary of Requirements

As required by Texas Health and Safety Code § 314A.103, 28 Texas Admin. Code § 280.34, and the COPA Terms and Conditions of Compliance, Shannon Health must submit quarterly and annual reports regarding the Merger.

This Report and the associated attachments are based directly on the requirements listed in the guidance documents published by HHSC: “Certificate of Public Advantage Terms and Conditions of Compliance for Shannon Health System” effective October 1, 2023.

### B. Description of Process

Shannon Health’s senior management team, assisted by outside consultants and counsel, worked closely with relevant department heads to collect, analyze, and prepare for submission the information and data detailed in the HHSC guidance documents. Leaders of each department gathered the required information and validated the summaries and responses included in this Report to ensure accuracy and completeness to the fullest extent possible.

#### Shannon Health Leadership

Name	Position
Shane Plymell	President & Chief Executive Officer
Pamela Bradshaw, RN, DNP, MSN, MBA	Chief Operations Officer
Becky Fuentes, DNP, RN, NE-BC	Chief Nursing Officer
Allan S. Graves	General Counsel & Chief Legal Officer
Julian Beseiril	Chief Financial Officer, Shannon Clinic
Anna Pittman, MSN, RN	Chief Nursing Officer & Chief Operations Officer, Shannon Clinic
Kelly Koenig, DO	Chief Medical Officer, Shannon Clinic
Michael Wood, MD, MBA	Chief Medical Officer, Shannon Medical Center
Ricky Villarreal	Chief Administrative Officer, Shannon Clinic
Joseph Wooldridge	Chief Financial Officer, Shannon Medical Center
Kayla Luz	Director of Human Resources
Holly Lopez	AVP of Quality
Starr Long	Quality Programs Manager

### III. Terms and Conditions for COPA-Approved Health System

#### A. Quality

##### 1. Evidence demonstrating how health care quality has improved.

- CMS Star Rating:** The most recent CMS Star Rating is from August 2025. SMC, which includes SMC South, earned an overall rating of three stars (see **Table 1a** below). The CMS Star Rating summarizes a variety of measures across five areas of quality (Mortality, Safety, Readmission, Patient Experience, and Timely and Effective Care) into a single star rating. The time periods covered by each measure vary. For the August 2025 Star Rating, the data collection period for some measures goes back to July 1, 2020, which pre-dates the Merger. As noted in prior reports, CMS made significant changes to its Star Rating methodology and reporting schedule between the 2020 and April 2021 ratings. Because various measures are now weighted differently, these changes in methodology make it difficult to compare the April 2021 and beyond Star Rating to historical ratings.

**Table 1a: Overall CMS Star Ratings<sup>1</sup>**

Location	Pre-Merger Period						Post-Merger Period					
	FY2018		FY2019		FY2020		FY2021		FY2022	FY2023	FY2024	FY2025
	January	July	March	July	January	August	April	July	July	July	July	August
SMC	4	4	4	4	5	5	4	4	4	2	2	3
SACMC (SMC South)	4	4	4	4	4	4	3	Not Available <sup>2</sup>				

- Leapfrog Hospital Safety Grades:** SMC earned an “A” overall in the most recent Leapfrog Hospital Safety Grade release (from Fall 2025) (see **Table 1b** below). This shows Shannon Health’s achievements in prioritizing safety and protecting patients from preventable harm and errors.

**Table 1b: Leapfrog Safety Grades<sup>3</sup>**

Location	Pre-Merger Period						Post-Merger Period									
	FY2018		FY2019		FY2020		FY2021		FY2022		FY2023		FY2024		FY2025	
	Spring	Fall	Spring	Fall	Spring	Fall	Spring	Fall	Spring	Fall	Spring	Fall	Spring	Fall	Spring	Fall
SMC	C	C	C	C	C	C	C	B	B	B	A	A	A	A	A	A
SACMC (SMC South)	A	A	A	A	B	C	C	Not Available <sup>4</sup>								

<sup>1</sup> Source: CMS Care Compare: <https://www.medicare.gov/care-compare/#search>.

<sup>2</sup> As a result of the Merger in October 2020, legacy SACMC’s (now SMC South) CMS Certification Number (“CCN”) was retired. Therefore, going forward, all data on CMS’s website for Shannon Medical Center (120 E Harris Ave) is combined performance for both SMC and SMC South.

<sup>3</sup> Source: Leapfrog Research Group: <https://ratings.leapfroggroup.org/>.

<sup>4</sup> Leapfrog Safety Grades are location specific and not based on CCN. Shannon Health did not submit the voluntary survey portion for SMC South.

- Patient Admissions & Medicare Cost Report Data: Inpatient admissions and outpatient volumes are provided in **Item 2** of this Report. Shannon Health will provide a copy of its 2025 Medicare Cost Report once it is finalized.
- Patient Satisfaction Ratings: Using the CMS data reported in August 2025 (data reporting period of October 1, 2023 to September 30, 2024), SMC and SMC South (combined performance) received a rating of three stars on the Hospital Consumer Assessment of Healthcare Providers and Systems (“HCAHPS”) survey of patient satisfaction (see **Table 1c** below).

**Table 1c: Patient Satisfaction Rating Results<sup>5</sup>**

Location	Pre-Merger Period																Post-Merger Period																			
	FY18				FY19				FY20				FY21				FY22				FY23				FY24				FY25							
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4 <sup>6</sup>	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4				
SMC	4	4	4	4	3	3	3	3	4	4	4	4	4	4	4	4																				
SACMC (SMC South)	4	4	4	4	4	4	4	3	4	3	4	4	4	4	4	4	4	4	3	3	4	4	4	4	4	4	4	4	3	3	3	3	4	4	4	3

- Shannon Health received multiple awards from the American College of Cardiology and the American Heart Association for reaching and maintaining high standards of care for stroke, heart attack, heart failure and diabetes patients. Shannon received the NCDR Chest Pain – MI Registry Platinum Performance Achievement Award from the American College of Cardiology for the fourth consecutive year. Shannon is one of only 323 hospitals nationwide to receive this honor in 2025. To receive this award, Shannon demonstrated sustained achievement in the Chest Pain – MI Registry for two consecutive years and performed at the highest level for specific performance measures. In addition, Shannon Health was one of only 158 hospitals nationwide to receive the Commitment to Quality Award from the American Heart Association. Shannon Health also received multiple Get with the Guidelines awards for coronary artery disease, heart failure, and stroke care.

2. Inpatient and outpatient numbers before and after the merger.

[This Item contains proprietary, competitively sensitive information redacted from the public version.]

- Inpatient Volumes<sup>7</sup>: Overall, inpatient admissions for Shannon Health increased from Quarter 3 FY2025 to Quarter 4 FY2025 (5,958 to 6,157). **Table 2a** shows the quarterly change in inpatient admissions for SMC and SACMC during the Baseline Period, as well as Shannon Health (includes

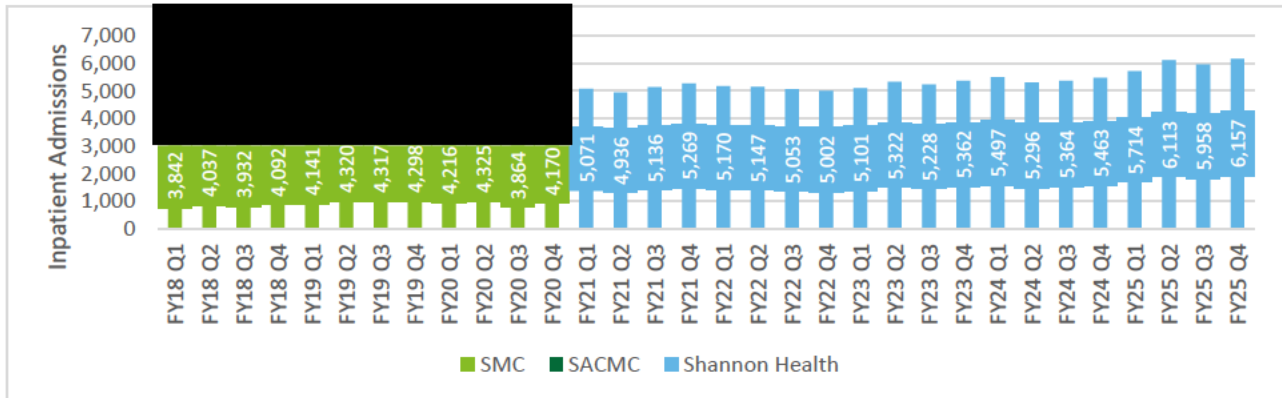
<sup>5</sup> Source: HCAHPS Patient Satisfaction Survey: [HCAHPS Survey Results](#).

<sup>6</sup> As a result of the Merger in October 2020, legacy SACMC’s (now SMC South) CMS CCN was retired. Therefore, going forward, all data on CMS’s website for Shannon Medical Center (120 E Harris Ave) is combined performance for both SMC and SMC South.

<sup>7</sup> Prior to the Transaction Closing Date, legacy SACMC operated on a calendar fiscal year of January 1 – December 31. Post-Merger, SMC South’s fiscal year has been adjusted to reflect SMC’s fiscal year of October 1 – September 30. As such, SMC South’s historical volume information has been adjusted to reflect a fiscal year of October 1 – September 30 for purposes of this Report.

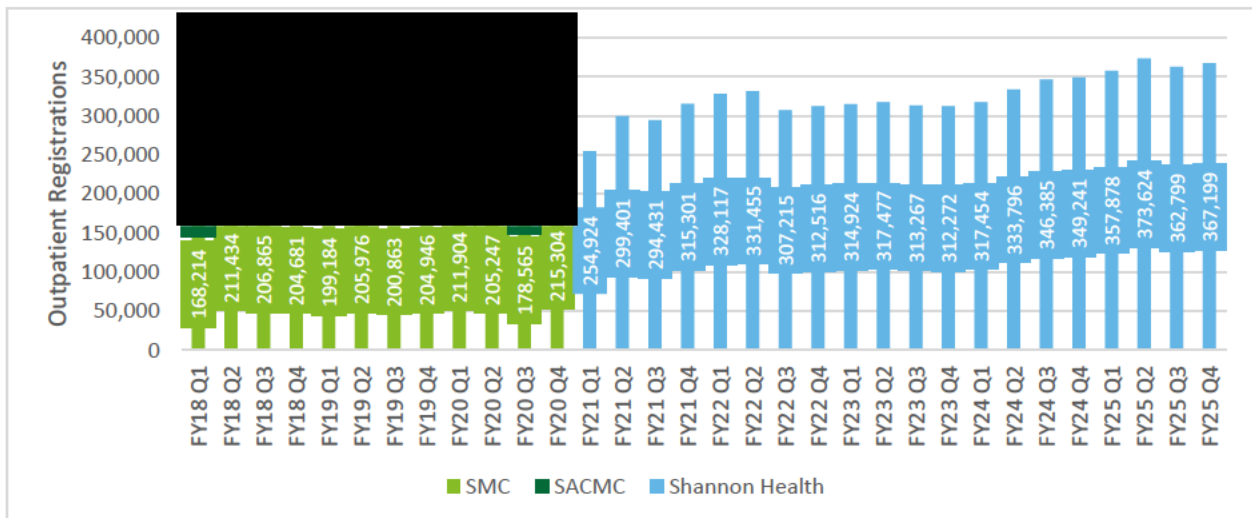
both SMC and SMC South) thereafter. Volume numbers are shown on a combined basis for Shannon Health from Quarter 1 FY2021 forward as both hospitals are reported under a single National Provider Identifier (“NPI”).

Table 2a: Inpatient Admissions



- Outpatient Volumes<sup>8</sup>:** Shannon Health’s outpatient volume increased from Quarter 3 FY2025 to Quarter 4 FY2025 (362,799 to 367,199). **Table 2b** below displays the quarterly change in outpatient volumes for SMC and SACMC during the Baseline Period, as well as Shannon Health (includes both SMC and SMC South) thereafter. Volume numbers are shown on a combined basis for Shannon Health from Quarter 1 FY2021 forward as both hospitals are reported under a single NPI.

Table 2b: Outpatient Volumes

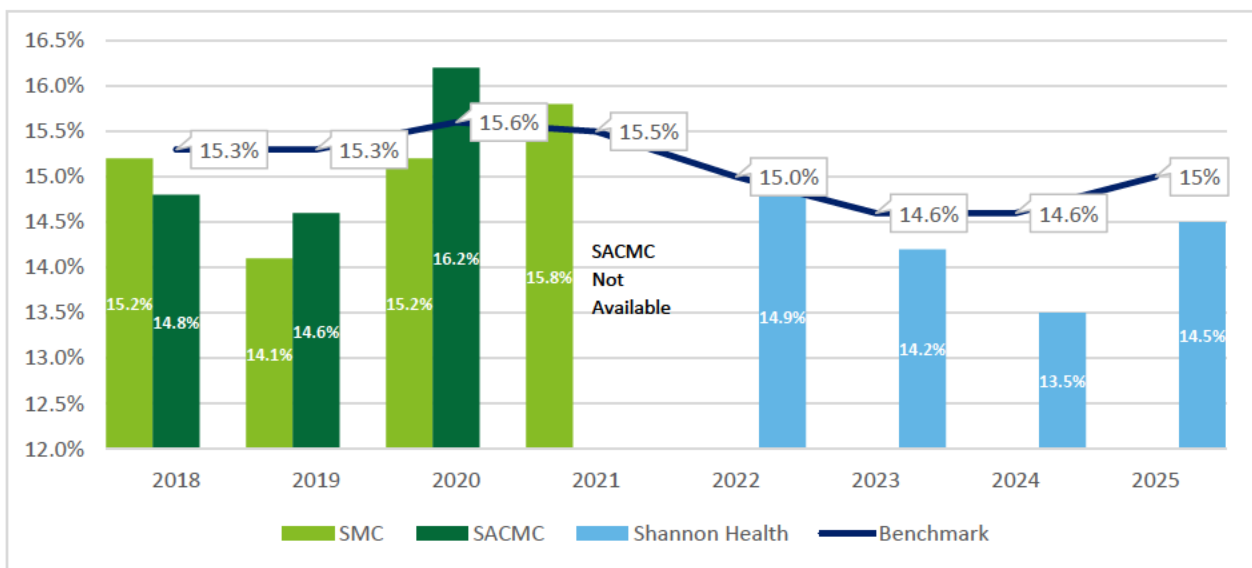


<sup>8</sup> Prior to the Transaction Closing Date, legacy SACMC operated on a calendar fiscal year of January 1 – December 31. Post-Merger, SACMC’s fiscal year was adjusted to reflect Shannon Health’s fiscal year of October 1 – September 30. As such, SMC South’s historical volume information has been adjusted to reflect a fiscal year of October 1 – September 30 for the purposes of this Report.

3. Patient readmission numbers before and after the merger.

- Patient Readmission Numbers:** The reported readmission rates include all unplanned readmissions<sup>9</sup> within 30 days of a hospital stay or inpatient procedure and are not adjusted to reflect underlying differences in acuity or co-morbidities. CMS typically reports readmission data on an annual basis, in July. The most recently released readmission numbers were reported in August 2025 and appear in Table 3.

Table 3: Patient Readmissions<sup>10</sup>



<sup>9</sup> Per CMS, the overall rate of unplanned readmission after discharge from the hospital (also called “hospital-wide readmission”) focuses on whether patients who were discharged from a hospital stay were hospitalized again within 30 days. All medical, surgical and gynecological, neurological, cardiovascular, and cardiorespiratory hospital patients are included in this measure. Patients may have returned to the same hospital or to a different hospital. They may have been readmitted for a condition that is related to their recent hospital stay, or for an entirely different reason.

<sup>10</sup> Source: CMS Care Compare “Unplanned Hospital Visit” benchmark ([Medicare.gov/care-compare/](https://www.cms.gov/care-compare/)). The following represents the reporting periods by fiscal year: 7/1/2016 to 6/30/2017 for FY2018, 7/1/2017 to 6/30/2018 for FY2019, 7/1/2018 to 6/30/2019 for FY2020, and a partial year 7/1/2019 to 12/1/2019 for FY2021, 7/1/2020 to 6/30/2021 for FY2022, 7/1/2021 to 6/30/2022 for FY2023, 7/1/22 to 6/30/23 for FY2024, and 7/1/23 to 6/30/24 for FY2025. CMS updates this data on an annual basis, in July. The graphic generally applies the July rate to the fiscal year in which it was released. Note, the FY2025 numbers were released in August 2025. As a result of the Merger in October 2020, legacy SACMC’s (now SMC South) CMS CCN was retired. Therefore, going forward, all data on CMS’s website for Shannon Medical Center (120 E Harris Street) is combined performance for both SMC and SMC South.

4. Any association between increased patient volumes and better patient outcomes.

- Shannon Health notes that its quality improvement measures have continued to track patient outcomes, and Shannon Health's goal is to continue to see improved outcomes with increasing patient volumes. During Quarter 4 FY2025, Shannon Health continued working toward its quality improvement measures, which were instituted to further enhance quality at all of Shannon Health's hospitals and, in turn, improve patient outcomes. For FY2025, Shannon Health continued system-wide quality goals for the following three specific quality measures: (1) hospital-acquired condition reduction for six key conditions (CLABSI, CAUTI, SSI-Colon, SSI-Hyst, MRSA, and CDI); (2) mortality rate reduction; and (3) readmission rate reduction. In establishing and working toward the goals in these key areas, Shannon Health continues to work collaboratively across SMC and SMC South to drive quality improvement performance for the system. In addition, Shannon Health continues to integrate Vizient, a clinical database solution to enhance performance improvement by analyzing data and providing benchmarks to like size hospitals. This program supports Shannon Health in quality improvement measures and goals.
- Shannon Health notes there is not yet enough information to report on the association between increased patient volumes and better patient outcomes. Shannon Health will provide updates in subsequent reports after more information becomes available.

5. Explanation of how patient services were optimized since the merger and how service optimization impacted patient care.

- Post-Merger, Shannon Health began evaluating opportunities across the combined system with the goal of optimizing patient services and enhancing the overall patient experience. Shannon Health has historically reported on a number of measures aimed at optimization of services. As additional efforts are made, they will be included in subsequent Performance Reports.

6. A summary of quality improvement measures for each hospital to address performance in meeting quality performance standards.

[This Item contains proprietary, competitively sensitive information redacted from the public version.]

- For Q4 FY2025, Shannon Health continued working toward its quality improvement measures, which further enhance quality at all of Shannon Health's hospitals. Shannon Health's system-wide quality goals include the following quality measures: (1) hospital-acquired condition reduction for six key conditions (CLABSI, CAUTI, SSI-Colon, SSI-Hyst, MRSA, and CDI); (2) mortality rate reduction; and (3) readmission rate reduction. For the goals in these key areas, Shannon Health works collaboratively across SMC and SMC South to drive quality improvement performance for the system. Shannon Health tracks various quality measures internally to develop proactive strategies and understand current performance.
- The quality measures included in this Report are summarized below in **Table 6**.

Table 6: Shannon Health Summary of Quality Measure Performance

Quality Metrics	Page Ref.	FY2019				FY2020				FY2021				FY2022				FY2023				FY2024				FY2025			
		Q1	Q2	Q3	Q4 <sup>11</sup>	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
CMS Star Rating – SMC	Pg 8	4	4	5	5	Not available (rating to be released in Q3)	4	4	Not available (rating to be released in Q3)	4				2				2				3							
CMS Star Rating – SMC South	Pg 8	4	4	4	4	Not available (rating to be released in Q3)	3	Not Available	Not available (rating to be released in Q3)	4				2				2				3							
Leapfrog Safety Grades – SMC	Pg 8	C	C	C	C	Not available (rating to be released in Q3)	C	B	Not available (will be included in Q3 Report)	B	B	Update expected in Spring 2023	A	A	Update Expected in Spring 2024	A	A	Update Expected in Spring 2025	A	A	A	A	A	A	A	A	A	A	
Leapfrog Safety Grades – SMC South	Pg 8	A	A	B	C	Not available (rating to be released in Q3)	C	Not Available																					
Pt. Satisfaction Rating – SMC	Pg 9	3	3	3	3	4	4	4	4	4	4	4	4	4	4	4	4	4	4	3	3	3	4	4	3	3	4	4	3
Pt. Satisfaction Rating – SMC South	Pg 9	4	4	4	3	4	3	4	4	4	4	4	Not available	4	3	3	4	4	4	4	4	4	4	3	3	3	4	4	3
Patient Readmissions – SMC	Pg 11	14.1%				15.2%				15.8% (CMS update in July 2021 – applied the July rate to the fiscal year in which it was released)				14.9% (CMS update in July 2022 – applied the July rate to the fiscal year in which it was released)				14.2% (CMS update in July 2023 – applied the July rate to the fiscal year in which it was released)				13.5% (CMS update in July 2024 – applied the July rate to the fiscal year in which it was released)				14.5% (CMS update in August 2025 – applied the August rate to the fiscal year in which it was released)			
Patient Readmissions – SMC South	Pg 11	14.6%				16.2%				Not Available				14.9% (CMS update in July 2022 – applied the July rate to the fiscal year in which it was released)				14.2% (CMS update in July 2023 – applied the July rate to the fiscal year in which it was released)				13.5% (CMS update in July 2024 – applied the July rate to the fiscal year in which it was released)				14.5% (CMS update in August 2025 – applied the August rate to the fiscal year in which it was released)			
Inpatient Volumes – Combined (total rounded)	Pgs 9-10					5k	5k	5k	5k	5k	5k	5k	5k	5k	5k	5k	5k	5k	5k	5k	5k	5k	5k	5k	5k	6k	6k	6k	6k
Outpatient Volumes – Combined (total rounded)	Pg 10					255k	299k	294k	315k	328k	331k	307k	313k	315k	317k	313k	312k	317k	334k	346k	349k	358k	374k	363k	367k				

<sup>11</sup> As a result of the Merger in October 2020, legacy SACMC’s (now SMC South) CMS CCN was retired. Therefore, going forward, all data for Shannon Medical Center (120 E Harris Ave) is combined performance for both SMC and SMC South.

**B. Efficiencies**

7. A description of the steps taken to reduce costs and improve efficiency.
  - Steps Taken to Reduce Costs: During Quarter 4 FY2025, Shannon Health has continued to conduct regular, joint executive leadership meetings to oversee SMC and SMC South and discuss post-Merger integration priorities and initiatives, including how to reduce costs and improve efficiency. The joint executive leadership team meetings occur on a regular basis. A key component of these meetings is the review of strategies across the six Shannon pillars: people, operations, quality, service, growth, and innovation. Strategies and tactics are developed during the annual strategic planning process and are then reported on an ongoing basis. This information is disseminated, along with other key updates, through twice monthly leadership meetings. This includes the manager and director team across the Shannon Health system.
  
8. Data regarding emergency department closures since the merger.
  - Current Emergency Department Locations: During Quarter 4 FY2025, there were no changes in the number of Emergency Departments that Shannon Health operated. As such, Shannon Health still operates one Emergency Department at SMC and one Emergency Department at SMC South, as reported in the Baseline Performance Report. Each location is listed in **Table 8a** and **8b** below.

**Table 8a: SMC Emergency Department**

Emergency Department Location	Address	Status
Shannon Medical Center (SMC)	120 E Harris Ave., San Angelo, TX 76903	Open

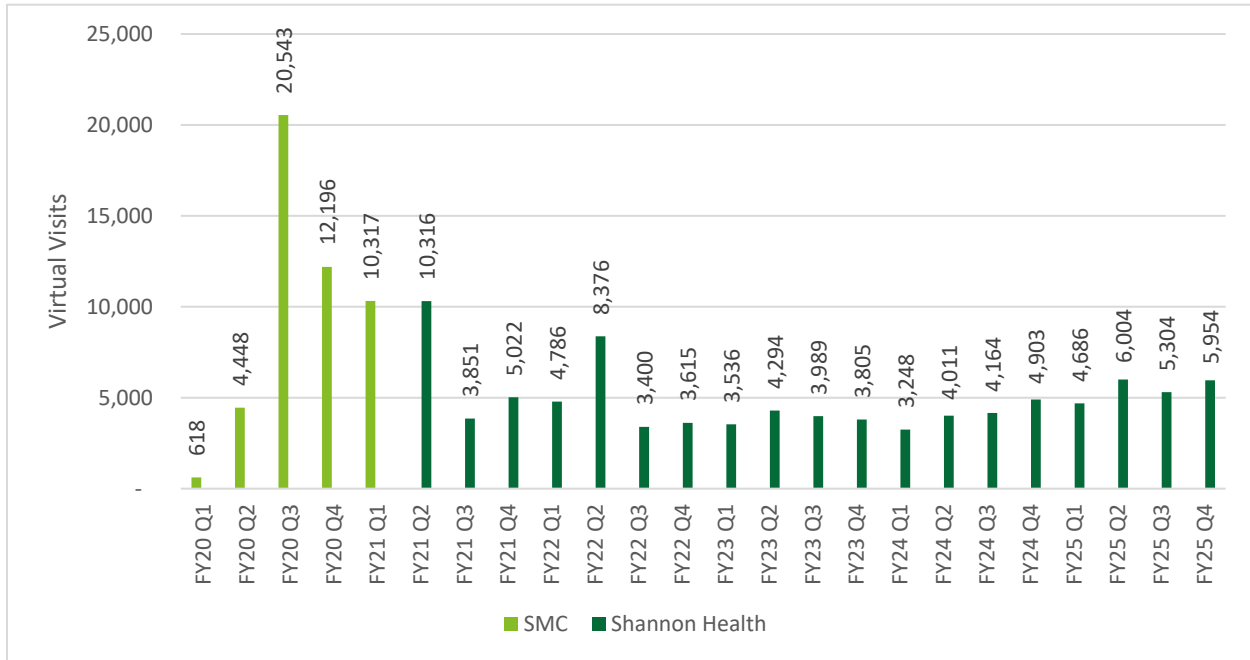
**Table 8b: SMC South Emergency Department**

Emergency Department Location	Address	Status
Shannon Medical Center South (SMC South)	3501 Knickerbocker Rd., San Angelo, TX 76904	Open

- Emergency Department Closures: Shannon Health has no plans to close any Emergency Departments as of the date of this Report.
9. A description of how the hospitals have expanded telehealth and an explanation of how the expansion has improved access to healthcare for the rural community by: (1) Providing data demonstrating the expansion of telehealth and technology; and (2) Explaining how the expansion of telehealth and technology improved the hospitals’ ability to treat a larger patient population.
    - Telehealth: During Quarter 4 FY2025, Shannon Health provided telehealth services, including primary and other non-emergency care services to 5,954 patients through its virtual care platforms (as shown in **Table 9**). As previously reported, Shannon utilizes Epic Video Client. The HIPAA-compliant platform allows providers to launch a virtual video visit directly from the patient’s chart

in Epic. Telehealth capabilities remain available and are utilized by patients choosing that method of care. Shannon Health has dedicated additional resources to this area to further expand virtual care options throughout the service area.

Table 9: Number of Patients Treated via Telehealth<sup>12</sup>



10. Progress report regarding the adoption of the new IT Platform.

- **IT Platform:** Prior to the Merger, SMC and SMC South utilized separate Electronic Medical Record (“EMR”) and Enterprise Resource Planning (“ERP”) systems, from different vendors. As of Quarter 3 FY2021 and going forward, Shannon Health’s EMR platform is disconnected from the CHS network. SMC South and its clinic locations completed their migration to Shannon’s EMR platform. Shannon Health now has limited access to legacy MedHost data, and Athena data is available upon request. During Q4 FY25, Shannon’s EMR platform, Epic, was updated system wide.
- Shannon Health made some changes to its wireless network at SMC South to prepare for the installation of new emergency room equipment.

<sup>12</sup> Volume includes telehealth visits tracked through Epic; additional telehealth visits may occur but are not included in the table if they are not recorded in Epic.

11. Provide the evidence of the onboarding SACMC’s system and provide training evidence for personnel.
  - Post-Merger, all legacy SACMC employees have been trained, onboarded, and integrated into Shannon Health.
  - All new employees hired post-Merger (except for Physicians and Advance Practice Professionals) attended a system-wide new hire orientation process, regardless of what campus they are hired to. These system-wide new hire orientation sessions are held at least once per month. The new hire orientation sessions provide an overview of Shannon Health, the Shannon Health policies and procedures, and the Employee Benefits offerings, with instructions on how to enroll in the offered Employee Benefits. When applicable, new hires are also trained on Epic, the EMR for Shannon Health.
  - Physicians and Advanced Practice Professionals are onboarded separately, with specific consideration for their individual onboarding timetable, specialty, and job requirements.
  
12. A description of any workforce reduction since the issuance of the COPA based on occupation, i.e. doctors, nurses, support staff, etc. Include the numbers and job titles of any position eliminated, the total number of employees before and after the reduction, and explain any impact the reduction has on patient service delivery.
  - Workforce: As of the Transaction Closing Date through the end of Quarter 4 FY2025, there were no reductions in workforce other than what is expected through the ordinary course of business (e.g., attrition). Shannon Health continues to hire additional staff as needed to provide necessary services. For example, in Quarter 4 FY2025, Shannon Health hired 294 new employees. As of September 30, 2025, Shannon Health had 4,846 employees (see **Table 12** below).

Table 12: Workforce as of Quarter 4 FY2025<sup>13</sup>

Employees as of Transaction Closing Date: 3,709 <sup>14</sup>			
Employees as of Q1 FY2021	Employees as of Q2 FY2021	Employees as of Q3 FY2021	Employees as of Q4 FY2021
3,694	3,718	3,718	4,027
Employees as of Q1 FY2022	Employees as of Q2 FY2022	Employees as of Q3 FY2022	Employees as of Q4 FY2022
3,904	3,994	3,951	3,989
Employees as of Q1 FY2023	Employees as of Q2 FY2023	Employees as of Q3 FY2023	Employees as of Q4 FY2023
4,023	4,181	4,293	4,358
Employees as of Q1 FY2024	Employees as of Q2 FY2024	Employees as of Q3 FY2024	Employees as of Q4 FY2024
4,415	4,489	4,576	4,647
Employees as of Q1 FY2025	Employees as of Q2 FY2025	Employees as of Q3 FY2025	Employees as of Q4 FY2025
4,710	4,773	4,844	4,846

<sup>13</sup> Note, employee headcount includes employed physicians and advanced practice clinicians.

<sup>14</sup> Employee count as of the Transaction Closing Date was slightly adjusted from the Baseline Performance Report in order to correct for data errors.

13. Data and financial reports demonstrating savings from the reduction in duplication of resources.

- Shannon Health has identified several potential opportunities and initiatives that it believes will generate efficiencies and reduce unnecessary costs. Various examples of these efforts resulting in reduction in duplication of services have been included in prior reports.
- Shannon Health intends to continue thoughtfully evaluating opportunities through the post-Merger integration process, and will provide updates and estimated cost savings in subsequent reports once more information becomes available.

14. Data showing the coordination of services before and after the merger and evidence demonstrating how cost savings will be reinvested locally.

- Pre-Merger Coordination of Services: Please refer to the Baseline Performance Report.
- Post-Merger Coordination of Services: By thoughtfully combining the resources of SMC and legacy SACMC, Shannon Health intends to be able to better coordinate services, increase efficiencies, and optimize patient care. As of the end of Quarter 4 FY2025, Shannon Health continues joint executive leadership meetings to oversee SMC and SMC South, which includes review of integration priorities and initiatives. Shannon Health continues to evaluate opportunities for further coordination of services.
- Cost Savings Reinvestment Evidence: Shannon Health plans to and has reinvested cost savings into various initiatives, such as community education programs, upgraded equipment, service expansion, and other capital expenditures.

15. Data demonstrating reinvestment in the combined healthcare system.

[This Item contains proprietary, competitively sensitive information redacted from the public version.]

- Reinvestment: As discussed in this Report, the Merger allows for the better coordination of resources and decision-making, resulting in improved efficiency, elimination of waste, and the achievement of cost savings. Shannon Health is committed to reinvesting these savings in its operations and community, with the goal of improving the overall patient experience and patient care. The following are examples of how Shannon Health continued reinvesting in the combined healthcare system during Quarter 4 FY2025:
  - **Capital expenditures**: Shannon Health incurred capital expenditures to improve its facilities or grow its operations, totaling approximately \$12.6 million across both SMC and SMC South.
  - Shannon Health made additional investments in its internal medicine residency program, including preparation of classroom and administrative space for residents. [REDACTED] Further investments will be made in the clinic space.

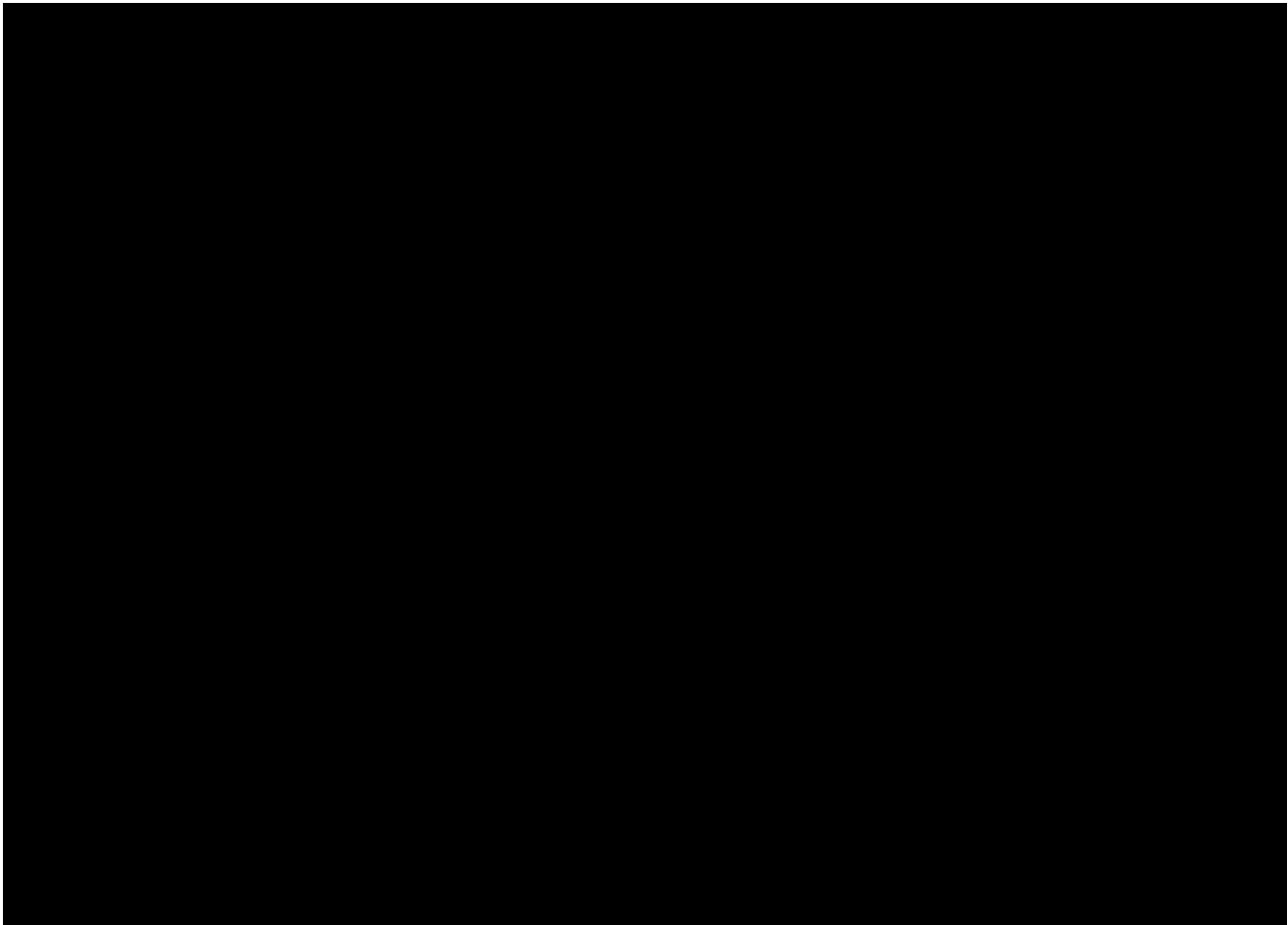
- Shannon Health completed its final phase of updates at the Women’s and Children’s Hospital. This project involved the addition of ten patient rooms, four labor and delivery rooms, and two new operating rooms.

16. Data and financial reports reflecting the savings in each area referenced above.

- Post-Merger Operating Efficiencies: During Quarter 4 FY2025, Shannon Health continued the process to identify, track, and report data and financial reports reflecting efficiencies achieved in the areas identified previously and additional areas as opportunities arise. In prior reports, Shannon Health identified multiple opportunities or initiatives that are likely to generate efficiencies and reduce unnecessary costs.
- Shannon Health will continue to thoughtfully evaluate potential opportunities throughout the post-Merger integration process and will provide updates and estimated cost savings in subsequent reports as additional information becomes available.

17. Operating deficiencies that existed before the merger and how any operating efficiencies have been achieved since the merger.

[This Item contains proprietary, competitively sensitive information redacted from the public version.]



18. An explanation of how any operating efficiencies achieved have impacted healthcare service delivery, patient care, staff, the local community, and counties served.

- The Merger has allowed for better coordination of decision-making and resources, resulting in various operating efficiencies, including clinical and SG&A efficiencies. Shannon Health continues to reinvest savings in its operations to enhance healthcare service delivery, patient care, staff, the local community, and counties serviced. For example, during Quarter 4 FY2025, Shannon Health undertook the following initiatives:
  - Invested \$12.6 million in capital expenditures across both SMC and SMC South to improve and expand facilities and grow operations.
  - Added endovascular neurosurgery and plastic surgery, specifically adding reconstruction after mastectomy.
  - Continued expansion of surgeries/procedures at Shannon Surgery Center South ambulatory surgery center.

19. Data on the pricing, quality, and availability of ancillary health care services.

[This Item contains proprietary, competitively sensitive information redacted from the public version]

- Ancillary Health Services Pricing and Availability: The actual charges<sup>15</sup> for Shannon Health’s ancillary health services are set forth in the Shannon Health Charge Description Master (“CDM”). Shannon Health contracts with various commercial health plans, which generally reimburse ancillary health services based on a negotiated fee schedule or percentage discount of actual charges.

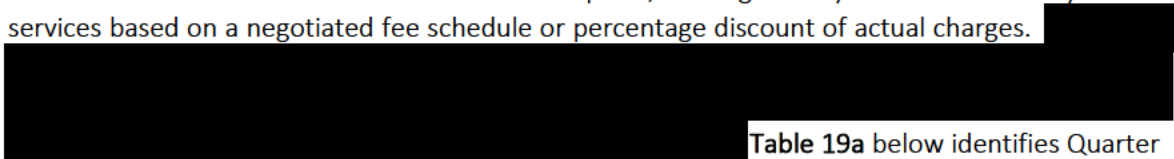


Table 19a below identifies Quarter 4 FY2025 volumes and CDM charges for select tests, treatments, or procedures for the following categories of ancillary health services: Laboratory, Imaging, and Pharmacy.

<sup>15</sup> Actual charges are charges prior to any contractual discount allowance for various payor classes.

Table 19a: Ancillary Health Services

Ancillary Service	Volume <sup>16</sup>						
	FY22	FY23	FY24	Q1 FY25	Q2 FY25	Q3 FY25	Q4 FY25
<b>Laboratory Services<sup>17</sup></b>							
CMP	175,296	186,017	206,743	53,098	58,896	57,654	56,795
CBC w/auto diff	191,700	199,258	225,350	58,320	63,099	61,345	61,679
LIPID panel	70,158	76,159	84,960	21,273	23,624	23,136	22,544
BMP	39,058	41,045	42,137	9,773	10,446	10,193	10,371
Magnesium	41,558	44,752	55,398	16,304	18,328	19,256	19,436
<b>Imaging Services</b>							
71045 X-Ray Chest 1V	27,885	26,695	20,763	6,965	7,865	7,023	7,065
77067 Scr Mammo with Tomo Bilateral	14,723	14,947	13,312	4,547	7,899	4,187	4,336
70450 CT Head w/o	10,524	11,528	8,894	3,141	3,048	3,113	3,229
71046 X-Ray Chest 2V	4,293	4,280	3,235	954	1,289	666	613
74177 CT Abd/Pel with IV	7,297	9,359	8,300	2,809	2,827	3,019	3,208
<b>Pharmacy Services<sup>18</sup></b>							
Daptomycin 500 mg vials	1,550,223	750,960	46,234	75,292	1,095 <sup>19</sup>	N/A <sup>20</sup>	476,875 <sup>21</sup>
Acetaminophen 1,000 mg/100 ml IV per 1 ml	1,457,304	1,723,785	1,954,185	487,939	538,758	522,777	575,691
Propofol 10 mg/ml IV Emulsion per 1 ml <sup>22</sup>	1,688,354	1,675,920	1,569,509	410,476	465,369	490,581	407,389
Ferric Carboxymaltose 50 mg Iron/ml IV per 1 ml	570,225	423,430	384,161	67,200	94,808	95,962	31,620

<sup>16</sup> Beginning in Quarter 2 FY2021, the first full quarter post-Merger, and going forward, volume amounts for pharmacy and radiology include both SMC and SMC South data.

<sup>17</sup> The clinic and hospital laboratories were consolidated during the Baseline Period, resulting in the appearance of significant changes in certain laboratory service volumes.

<sup>18</sup> Pharmaceutical prices can vary month to month, and the pricing shown in Table 19a captures pricing as of the end of each quarter. Price variances as compared to previous quarters are due to drug availability from different manufacturers as a result of drug shortages or increased prices from manufacturers. Shannon Health notes it is part of the Texas Purchasing Coalition, a network of independent health systems located in Arkansas, Missouri, and Texas, which aims to provide low, competitive drug pricing for members through comprehensive sourcing, performance improvement and cost management services. TPC engages in strategic sourcing, utilization management, and clinical and operational consulting, as well as service line, clinical and supply chain analytics.

<sup>19</sup> Shannon Health is moving away from Daptomycin 350 mg vials. This accounts for the volume decrease in Q2 FY25.

<sup>20</sup> Shannon Health is in the process of reviewing and approving a replacement for Daptomycin 350 mg vials. Once a standard replacement has been confirmed, Shannon Health will report on that volume going forward.

<sup>21</sup> Starting Q4 FY25, Shannon Health began using 500mg vials of Daptomycin (replacing the 350mg vials).

<sup>22</sup> There was a build change within the Shannon Health formulary, between continuous dosing and bolus dosing. Shannon was only capturing the continuous dosing with ICU patients. Bolus dosing is used in procedural areas that require anesthesia. The report now captures both continuous dosing and bolus dosing representing propofol usage in all areas of the hospital. This report reflects corrected numbers for FY2020-2023.

Bupivacaine Liposome 1.3% (13.3 mg/ml)	606,955	551,393	563,302	148,083	157,251	148,135	147,252	
--	---------	---------	---------	---------	---------	---------	---------	--

Ancillary Health Services Quality: **Table 19b** and **Table 19c** below show the quality scores for certain CMS Care Compare and Leapfrog Safety Group quality measures specifically related to ancillary health services. As noted in previous Performance Reports, performance for SMC South is combined with SMC for Use of Medical Imaging measures. The Medication Safety measure (Safe Medication Ordering) is refreshed by Leapfrog in the Spring and Fall, and as such, the 100 for SMC reflects the score released in Fall 2025.

Table 19b: SMC Ancillary Health Services Quality Scores<sup>23</sup>

Quality Measure	Baseline Period													
	FY18				FY19				FY20					
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4		
Use of Medical Imaging <sup>24</sup>														
OP-8. MRI Lumbar Spine for Low Back Pain	44.2%	44.2%	44.2%	39.4%	39.4%	39.4%	39.4%	38.6%	38.6%	38.6%	38.6%	46.9%		
OP-10. Abdomen CT - Use of Contrast Material	3.6%	3.6%	3.6%	2.8%	2.8%	2.8%	2.8%	7.1%	7.1%	7.1%	7.1%	11.8%		
Medication Safety														
Safe Medication Ordering <sup>25</sup>	Not Available				Not Available				Not Available				100	
Quality Measure	Post-Merger Period													
	FY21				FY22				FY23					
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4 <sup>26</sup>	Q1 <sup>27</sup>	Q2 <sup>28</sup>	Q3 <sup>29</sup>	Q4 <sup>30</sup>		
Use of Medical Imaging														
OP-8. MRI Lumbar Spine for Low Back Pain	46.9%	46.9%	46.9%	39.3%	39.3%	39.3%	39.3%	45.2%	45.2%	45.2%	45.2%	38.5%		
OP-10. Abdomen CT - Use of Contrast Material	11.8%	11.8%	11.8%	3.9%	3.9%	3.9%	3.9%	9.9%	10.4%	10.4%	10.4%	9.1%		
Medication Safety														
Safe Medication Ordering	Not Available				100				Not Available				100	70
Quality Measure	Post Merger Period													
	FY24				FY25									
	Q1 <sup>31</sup>	Q2 <sup>32</sup>	Q3 <sup>33</sup>	Q4 <sup>34</sup>	Q1 <sup>35</sup>	Q2 <sup>36</sup>	Q3 <sup>37</sup>	Q4 <sup>38</sup>						
Use of Medical Imaging														
OP-8. MRI Lumbar Spine for Low Back Pain	38.5%	38.5%	38.5%	40.6%	40.6%	40.6%	40.6%	41.4%						
OP-10. Abdomen CT - Use of Contrast Material	9.1%	9.1%	9.1%	8.0%	8.0%	8.0%	8.0%	7.8%						
Medication Safety														
Safe Medication Ordering	-		70	100	-		100							

<sup>23</sup> Information reported by CMS Care Compare, and Leapfrog Safety Group agencies ([Medicare.gov](https://www.medicare.gov) and [Leapfrog Group](https://www.leapfroggroup.org)).

<sup>24</sup> Note that lower values are more favorable for measures OP-8 and OP-10 that are included within Table 19b. OP-8 measures the “[p]ercentage of outpatients with low-back pain who had an MRI without trying recommended treatments (like physical therapy) first.” As CMS explains, “[h]ospitals that are rated well on [OP-8] will have lower percentages. If a percentage is high, it may mean that the facility is doing unnecessary MRIs for low-back pain.” As for OP-10, it measures the “[p]ercentage of outpatient CT scans of the abdomen that were ‘combination’ (double) scans.” CMS explains that “[h]ospitals that are rated well on [OP-10] will have lower percentages.”

<sup>25</sup> Note that Leapfrog does not publicly provide past or historical Hospital Safety Grade reports on its website.

<sup>26</sup> Reporting period is July 1, 2020 through June 30, 2021.

<sup>27</sup> See Footnote 26.

<sup>28</sup> See Footnote 26.

<sup>29</sup> See Footnote 26.

<sup>30</sup> Reporting period is July 1, 2021 through June 30, 2022.

<sup>31</sup> See Footnote 30.

<sup>32</sup> See Footnote 30.

<sup>33</sup> See Footnote 30.

<sup>34</sup> Reporting period is July 1, 2022 through June 30, 2023. For OP-8, Shannon Health was slightly above the national average (36.2%) and the Texas average (38.9%) for the reporting period. For OP-10, Shannon Health was slightly above the national average (5.8%) and below the Texas average (8.2%).

<sup>35</sup> See Footnote 34.

<sup>36</sup> See Footnote 34.

<sup>37</sup> See Footnote 34.

<sup>38</sup> Reporting period is July 1, 2023 through June 30, 2024. For OP-8, Shannon Health was slightly above the national average (35.5%) and the Texas average (37.9%) for the reporting period. For OP-10, Shannon Health was slightly above the national average (5.9%) and below the Texas average (8.2%).

Table 19c: Legacy SACMC Ancillary Health Services Quality Scores<sup>39</sup>

Experience	Baseline Period												Post-Merger Period			
	FY18				FY19				FY20				FY21			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4 <sup>41</sup>
Use of Medical imaging <sup>40</sup>																
OP-8. MRI Lumbar Spine for Low Back Pain <sup>42</sup>	43.6%	43.6%	43.6%	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
DP-10. Abdomen CT – Use of Contrast Material	3.5%	3.5%	3.5%	1.9%	1.9%	1.9%	1.9%	1.7%	1.7%	1.7%	1.7%	4.8%	4.8%	4.8%	4.8%	NA
Medication Safety																
Safe Medication Ordering <sup>43</sup>	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	Not Available	45	Not Available			

20. Data on the pricing, quality, and availability of physician services.

[This Item contains proprietary, competitively sensitive information redacted from the public version.]

- Physician Services Pricing and Availability: The actual charges for Shannon Health’s physician services are set forth in the Shannon Health Physician Fee Schedule. Shannon Health contracts with various commercial health plans, which generally reimburse physician services based on a negotiated fee schedule or percentage discount of actual charges. [REDACTED]

[REDACTED]

Table 20 below identifies Quarter 4 FY2025 volumes and the average CPT charge for the select CPT codes for clinic visits or evaluation and management office visits.

- Please note that legacy SACMC (or SMC South) data is not included in the pre-Merger period (FY2020 through the first month of Quarter 1 FY2021) in Table 20, as legacy SACMC data was not available to Shannon Health Pre-Merger. Beginning with Quarter 2 FY2021 (the first full quarter post-Merger) and going forward, the physician services data includes both SMC and SMC South combined.

<sup>39</sup> See Footnote 23.

<sup>40</sup> See Footnote 24.

<sup>41</sup> As a result of the Merger in October 2020, legacy SACMC’s (now SMC South) CMS CCN was retired. Going forward, this CMS data for Shannon Medical Center (120 E Harris Ave) is combined performance for both SMC and SMC South.

<sup>42</sup> Note that beginning in Quarter 4 FY2018, CMS archived data indicates that legacy SACMC scores for “OP-8 MRI Lumbar Spine for Low Back Pain” are “Not Available” because “[t]he number of cases/patients [was] too few to report.” According to CMS’s Data Dictionary, this means that either: (1) “the number of cases/patients [did] not meet the required minimum amount for public reporting”; (2) “the number of cases/patients [was] too small to reliably tell how well a hospital [was] performing”; and/or (3) CMS needed to “protect personal health information.”

<sup>43</sup> See Footnote 25.

Table 20: Physician Services

CPT	Description	Volume							CDM Price						
		FY22	FY23	FY24	Q1FY25	Q2FY25	Q3FY25	Q4FY25	FY22	FY23	FY24	Q1FY25	Q2FY25	Q3FY25	Q4FY25
<b>Physician Office Visits</b>															
99214	PR OFFICE/OUTPATIENT ESTAB MOD 30-39 Min	235,426	248,883	275,930	75,773	82,105	80,285	78,440	\$207.00	\$207.00	\$245.03	\$245.73	\$245.84	\$245.67	\$236.73
99213	PR OFFICE/OUTPATIENT ESTAB LOW 20-29 Min	194,696	205,261	206,466	53,401	55,647	49,301	47,952	\$140.00	\$141.00	\$174.31	\$174.74	\$174.58	\$174.81	\$173.18
99212	PR OFFICE/OUTPATIENT ESTAB SF 10-19 Min	26,641	25,724	21,332	4,756	4,893	4,980	4,840	\$83.00	\$85.00	\$109.23	\$109.67	\$109.67	\$109.62	\$108.30
99204	PR OFFICE/OUTPATIENT NEW MOD 45-59 Min	22,367	24,345	30,455	7,988	8,805	8,355	8,819	\$318.00	\$318.00	\$321.17	\$322.41	\$322.46	\$322.20	\$315.43
99203	PR OFFICE/OUTPATIENT NEW LOW 30-44 Min	19,396	20,355	19,749	5,315	5,085	4,869	5,671	\$207.00	\$207.00	\$216.86	\$217.11	\$216.68	\$216.26	\$214.99
<b>Hospital Clinic Visits</b>															
99232	PR SBSQ HOSPITAL CARE/DAY 25 Min	56,122	58,836	69,471	16,427	21,513	19,483	18,320	\$141.00	\$141.00	\$141.08	\$141.00	\$141.00	\$141.00	\$141.00
99233	PR SBSQ HOSPITAL CARE/DAY 35 Min	37,442	33,109	37,253	10,811	12,480	10,111	11,487	\$204.00	\$204.00	\$204.00	\$204.00	\$204.00	\$202.98	\$204.00
99239	PR HOSPITAL DISCHARGE DAY >30 Min	11,502	14,309	16,538	4,526	5,479	5,035	5,175	\$209.00	\$209.00	\$208.99	\$209.00	\$208.98	\$209.00	\$209.00
99231	PR SBSQ HOSPITAL CARE/DAY 15 Min	8,478	9,689	9,801	1,979	2,139	1,683	1,250	\$77.00	\$77.00	\$77.00	\$77.00	\$77.00	\$77.00	\$77.00
99223	PR INITIAL HOSPITAL CARE/DAY 70 Min	12,790	15,925	17,406	4,497	5,432	5,049	5,248	\$396.00	\$396.00	\$396.00	\$396.00	\$396.48	\$396.00	\$396.00

- Physician Services Quality:** The composite Merit-Based Incentive Program (“MIPS”) score serves as an indicator of the quality and cost of physician services. SMC received a composite MIPS score of 95.75 out of 100 possible points for its 2023 performance year services. See below Table 20b for historical MIPS scores.

Table 20b: MIPS Score<sup>44</sup>

	Performance Year 2018	Performance Year 2019	Performance Year 2020	Performance Year 2021	Performance Year 2022	Performance Year 2023
<b>Historical MIPS Score</b>						
Shannon Clinic	99.5/100	90.0/100	93.4/100	96.12/100	100/100	95.75/100

- The 2023 performance year MIPS score was based on four categories; however, due to constraints from the COVID-19 pandemic, the practice was approved for an Extreme and Uncontrollable Circumstances hardship exception, which resulted in the reweighting of the Quality category and Cost category. The updated category weights of the final composite score were thus: (i) Quality (0%); (ii) Promoting Interoperability (85%); (iii) Improvement Activities (15%); and (iv) Cost (0%). When reporting on the composite score, CMS does not report MIPS scores broken down by category.

<sup>44</sup> Performance year is January 1 – December 31. Table 20b has been updated from fiscal year to “performance year” for consistency with CMS reporting. See <https://qpp.cms.gov/mips/overview>.

21. Data on the consolidation of clinic services, identifying the types of services per county.

- Consolidation of Services: During Quarter 4 FY2025, Shannon Health did not consolidate any clinic services. Shannon Health continues to evaluate opportunities for service line optimization or consolidation and will note any changes in subsequent reports. Services offered as of Quarter 4 FY2025 by Shannon Health are outlined in **Attachment 1**.

22. Data indicating how the consolidation of these services improved patient outcomes.

- Shannon Health did not consolidate any clinic services in Quarter 4 FY2025. Shannon Health continues to evaluate opportunities for service line optimization or consolidation and will note any changes in subsequent reports.

### C. Accessibility

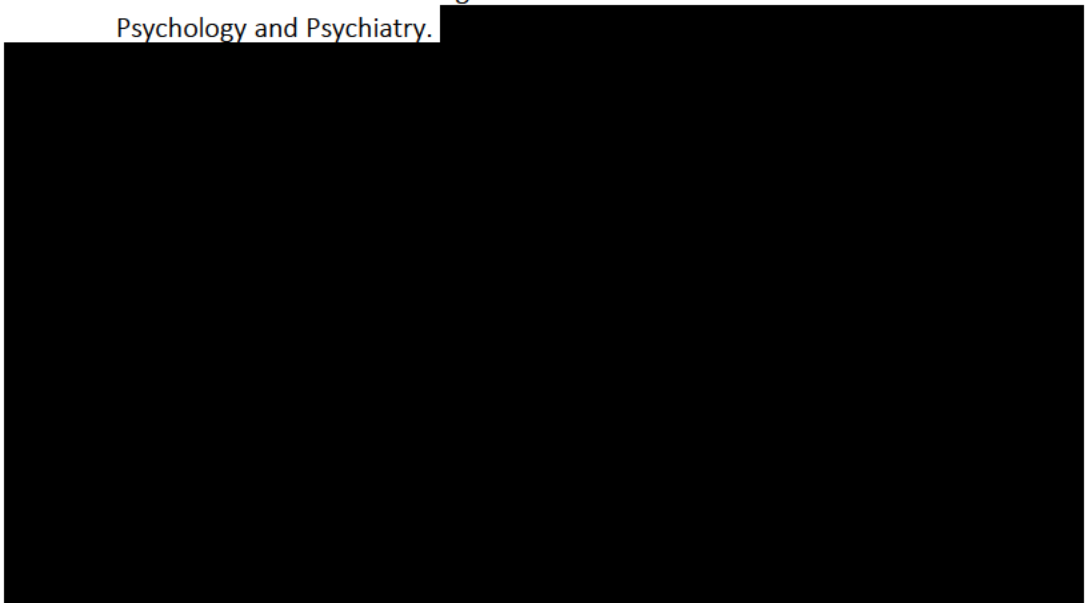
23. A list of the severe risks described in the application facing Tom Green County and an explanation of how the merger led to the mitigation of these risks.

[This Item contains proprietary, competitively sensitive information redacted from the public version.]

- The COPA application described the severe risks facing Tom Green County in the context of Shannon Health’s 2019 Community Health Needs Assessment (“CHNA”). The purpose of the CHNA is to understand the unique health needs of the community served by Shannon Health. The 2022 CHNA was conducted from January 2022 to August 2022 and involved, among other things, collection and analysis of data (demographic, socioeconomic, health, and healthcare resources) and community input through interviews. The 2022 CHNA identified five predominant health needs in the community, including: (1) lack of mental health providers; (2) lack of health knowledge/education; (3) adult obesity; (4) high cost of healthcare; and (5) shortage of primary care physicians. In Q4 FY25, Shannon Health finalized its 2025 CHNA, along with an implementation strategy for FY26 to FY28. In the Q1 FY26 Performance Report, Shannon Health will include findings from the 2025 CHNA and implementation efforts to address predominant health needs identified by the latest CHNA.
- The Merger allows Shannon Health to continue focusing on impacting the predominant health needs in the community. Shannon Health is in the process of implementing strategies to address the 2022 CHNA-identified needs. As 2022 CHNA implementation strategies proceed, Shannon Health will provide more detail. In Q4 FY2025, Shannon Health engaged in or continued the following initiatives:

- Lack of Mental Health Providers:

- Shannon Health is continuing efforts to recruit Advanced Practice Providers for Psychology and Psychiatry.



- Shannon Health added an 80-bed behavioral health center offering behavioral health and substance use disorder programs for children, adolescents, adults, and

military members. This will allow Shannon Health to expand upon its prior inpatient psychiatric service offerings. The addition provides for increased patient access. When patients need a higher level of care, they will be able to seamlessly transition to other services. Specifically, Shannon Health will enhance connectivity to a combined care team, implement collaborative processes, and leverage additional resources to provide a better patient experience. Shannon Health is committed to securing the future of comprehensive behavioral health services for the region and preserving access to local care the community needs. Shannon Health plans to build on this commitment with facility upgrades, service additions, technology upgrades, and additional staffing.

- Lack of Health Knowledge/Education:
  - Utilizing various builds, Shannon Health implemented several new features within its Epic electronic medical record (“EMR”) platform. These add to patients’ ability to access and understand information related to their treatment and care.
    - MyChart Bedside. Starting in January 2023, patients admitted to the hospital may access MyChart Bedside through a tablet/mobile application. This free service allows patients to be more involved in their care. Patients can access information on medications, schedule for the day, and treatment information.
    - Inpatient video consults/visits. In addition to normal in-person rounding at the hospitals, this service provides additional clinical support to nurses and other staff. If a patient’s condition declines during the night shift, a nurse can connect with the attending provider via video. This allows the attending provider to put eyes on the patient. In addition, this service is also used for palliative care patients adding the option to connect multiple family members to a video connection when they are not able to be at the hospital in person. In March 2023, Shannon Health completed a pilot period and will proceed with a phased rollout of this service.
    - Correctional facility patients. Shannon Health created a workflow within its Epic platform to allow video visits with residents of a correctional facility. This provides additional access to care as providers can see patients without a transfer from the correctional facility.
    - Home care mobile lab draws. In February 2023, Shannon Health initiated mobile lab draws for a targeted group of patients who are being monitored for chronic conditions. Shannon Health monitors these patients and makes house calls when lab draws are needed. Most of these patients have difficulty making travel arrangements and this program addresses the gap in care.
  - As previously noted, Shannon Health participated in community education events related to topics such as diabetes management and prevention, fitness and nutrition, weight management, healthy sleep habits, and breast cancer awareness.

For example, for National Breast Cancer Awareness Month in October 2024, Shannon Health hosted a “pink-out” mammogram party. During this event, attendees could receive mammograms after-hours and enjoy refreshments. For the best chance of early detection and successful treatment, the American Cancer Society advises women receive yearly mammograms beginning at age 40. In addition, Shannon Health hosted an event for patients to learn about the latest advancements for chronic knee and hip pain. Orthopedic surgeons discussed treatment options and introduced the Majo Robotic Arm system. Through educational events and various community events, health professionals and representatives from different departments relay current health information to the public.

- Shannon regularly hosts events to support and engage the community. For example, Shannon Health leads Safe Kids San Angelo, which is part of the global nonprofit organization, Safe Kids Worldwide. Safe Kids San Angelo provides dedicated and caring staff, operation support, and other resources to assist in keeping kids safe. The organization provides car seat checkups, sports clinics, safety workshops, and recall information. Shannon Health is committed to providing resources along with other necessary medical services to parents throughout Tom Green County. In addition, Shannon Health recently hosted a pink ribbon run to raise awareness for early detection of breast cancer. The event raises money to help local patients in their battle against cancer, with the latest advancements in treatment and detection. Other Shannon Health events include a kids marathon consisting of a celebration lap for kindergarten through sixth graders with activities provided by local organizations, Shannon Health staff providing free life jacket fittings as part of a summer safety event, a flag raising ceremony in honor of National Donate Life Month, a “Walk to Remember” honoring parents and families affected by pregnancy and infant loss, and trauma education prevention programs.
- Shannon Health launched the Our Common Thread campaign, which includes a series of partnerships with organizations committed to the betterment of the local community. For example, Shannon Health’s partnership with Angelo State University empowers students through hands-on clinical rotations and support for academics and athletics. Shannon Health also partners with San Angelo Clubhouse, a non-profit organization empowering adults living with mental illness. Shannon Health supports the work of San Angelo Clubhouse through community event collaborations, providing opportunities for Clubhouse members to connect and share resources with patients, and advocating for mental health services. The Our Common Thread campaign features a number of other partnerships and initiatives in the local community.
- Shannon Health partners with the American Heart Association (“AHA”) to provide CPR training for high school students. Shannon Health’s support of the program provides funds to purchase CPR training kits that are given to area schools as part

of the AHA's CPR in Schools program. Shannon staff also provide hands-on training classes at area schools.

- In addition to public outreach events, Shannon Health publishes the Health Beat newsletter magazine, which is delivered to 30,000 households. Shannon Health has periodic airings on a local news station to feature various services/programs.
- Adult Obesity: Shannon Health continues with its Cooper Tracks program to deliver guidance and support needed to help participants begin exercising, increase confidence, and develop habits to live healthier lives. In addition, the Shannon Health Club participates in various health insurance programs that provide incentives to their members to exercise and stay active. Shannon Health hosts a monthly weight loss support group meeting, open to anyone in the community.
- High Cost of Healthcare: Shannon Health continues to work on addressing this priority item. For example, Shannon On Demand offers a virtual visit with a Shannon provider to address minor medical needs. Visits are \$59 without insurance. In addition, Shannon Health provides the "Ask a Nurse" Hotline, which is a free service for callers to speak with a registered nurse 24 hours a day, seven days a week. All of the nurses are registered nurses and can help callers by: answering medical questions, providing medical advice, directing callers to the most appropriate care options, and providing information on healthcare resources in the community and services available at Shannon Health. If a caller has symptoms and is unsure if their need is emergent, the nurse can provide them guidance on what to do next and if they should be seen in the emergency department, urgent care clinic, or by their primary care provider. If the caller needs to see a primary care provider and does not have one, the nurse can also help facilitate connecting the caller with a primary care provider.
- Shortage of Primary Care Providers: To address the shortage of primary care providers, Shannon Health continues to recruit family practice and internal medicine providers. Shannon Health has partnered with the Texas A&M University School of Medicine to build a residency program to help address the future need for primary care physicians in rural Texas communities.

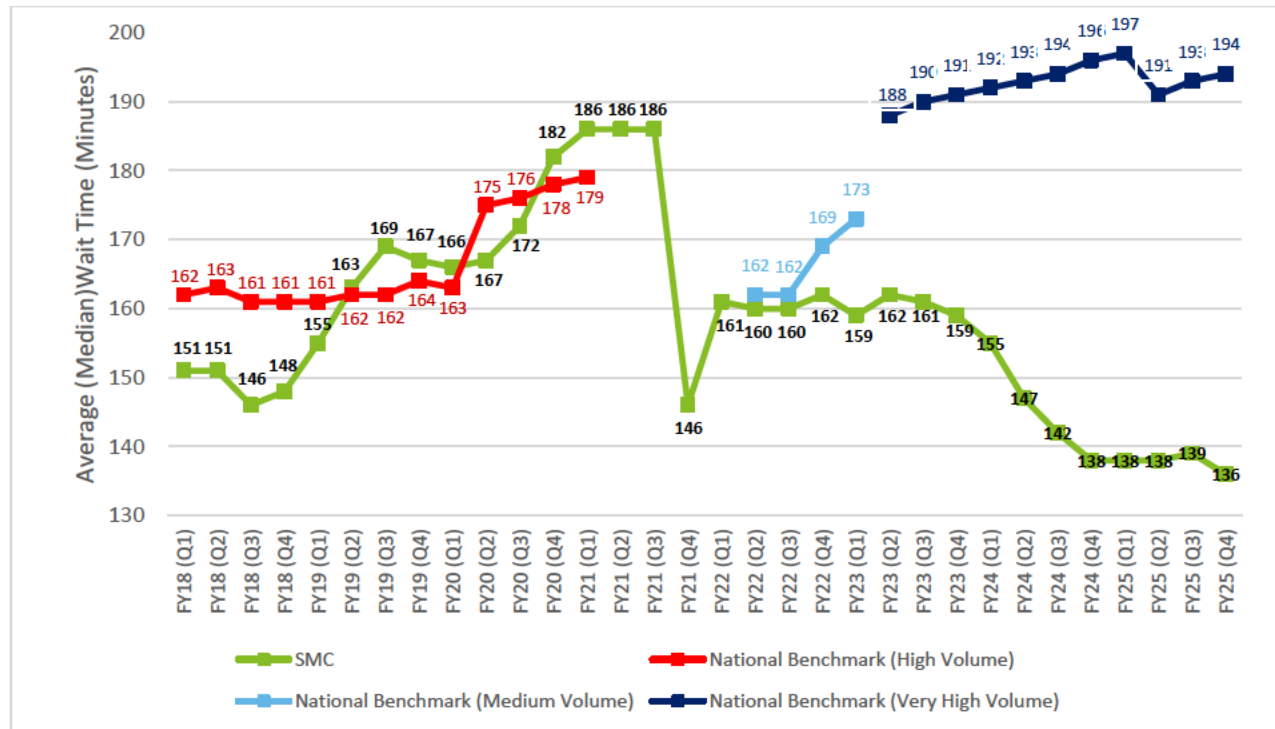
24. A description of each patient service that changed or has been discontinued since the merger and an explanation of the impact to patient care.

- Shannon Health did not discontinue any patient services during Quarter 4 FY2025. The Shannon Care Coordination Program evolved as Shannon continues to meet the needs of our patients treated in the hospital. The focus of programming has shifted to post-discharge outreach to all patients discharged home from the hospital.

25. Data illustrating the impact to patient wait times, including emergency department wait times, before and after the merger.

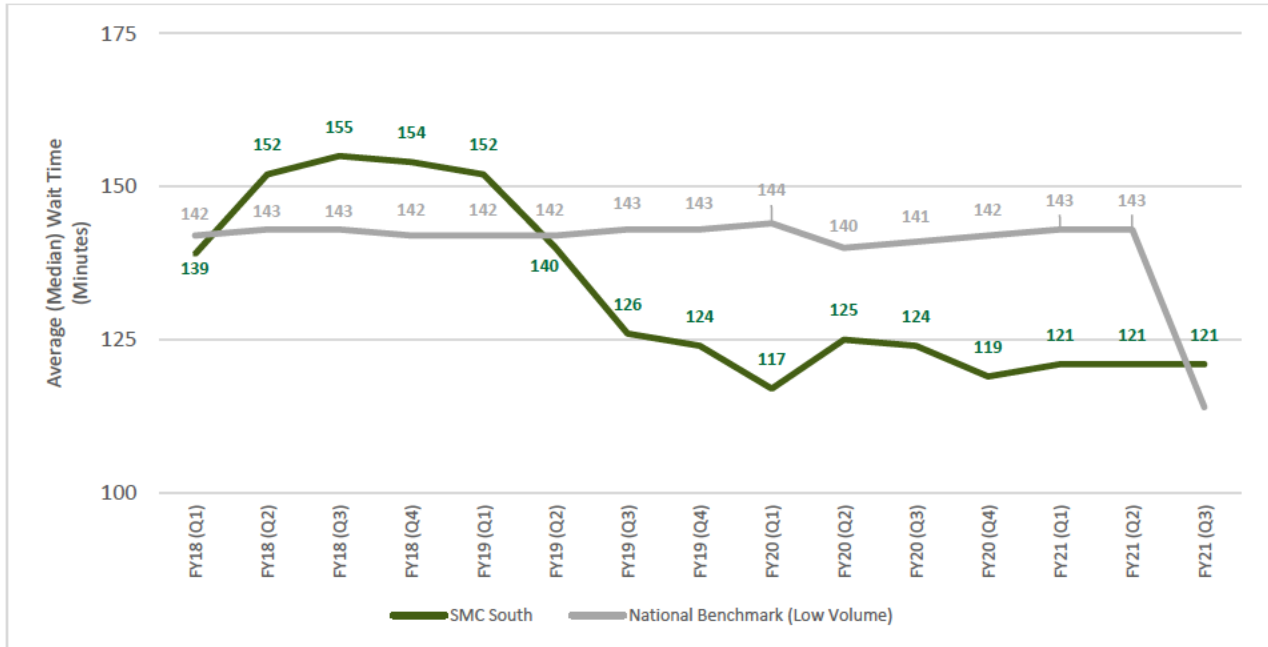
- **Emergency Department Wait Times:** Average Emergency Department (“ED”) wait times for Quarter 4 FY2025 for SMC are included below in **Table 25a**. (**Table 25b** shows data for SMC South when it was reported separate from SMC). For the purposes of this Report, average ED wait time is defined as the median time from arrival at the ED until time of discharge for outpatient ED patients.
- In the data released during Q4 FY2025, Shannon Health’s median ED wait time was 136 minutes, compared to a national benchmark of 194 minutes. The reporting period for ED wait time data released by CMS during Q4 FY2025 was October 1, 2023 to September 30, 2024. SMC was designated on the CMS Care Compare website as a very high volume emergency department (60,000+ patients annually). **Table 25a** shows the most recent updates.

Table 25a: SMC Average ED Wait Times<sup>45</sup>



<sup>45</sup> Post-Merger, SMC South operates under the same CMS CCN as SMC, and the wait times included in Table 25a include combined performance for SMC and SMC South. Note that the CMS data lags the date in which it is released. Shannon Health revised the ED wait times chart as follows: From Q2 FY2021 through Q1 FY2022, the CMS Care Compare website did not report any emergency department volumes for SMC (the volume was shown as “not available”). Rather, only the ED wait times for SMC were reported. Therefore, there were no national benchmarks included for comparison to SMC during this period. Shannon Health revised the Q4 FY2021 wait time to 146 minutes and the Q1 FY2022 wait time to 161 minutes, consistent with CMS Care Compare.

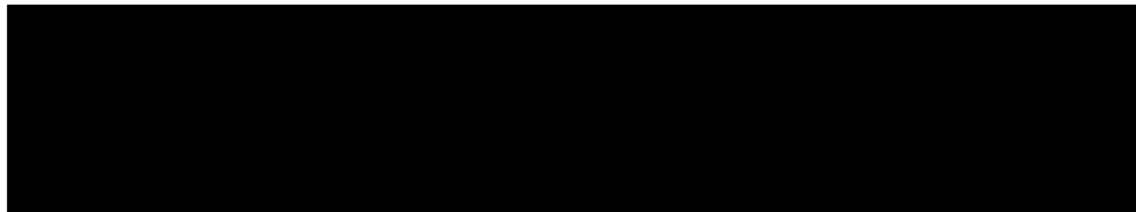
Table 25b: SMC South Average ED Wait Times<sup>46</sup>



26. Data demonstrating any expansion in service delivery since the merger.

[This Item contains proprietary, competitively sensitive information redacted from the public version.]

- During Quarter 4 FY2025, Shannon Health increased access to healthcare services for patients in its communities through the following initiatives to expand service delivery:
  - **Capital expenditures:** Invested \$12.6 million in capital expenditures across both SMC and SMC South to improve and expand facilities and grow operations.
  - **Addition of surgical services:** Shannon Health added endovascular neurosurgery and plastic surgery, specifically adding reconstruction after mastectomy, which is a new service for the community.



27. Data demonstrating rehabilitation room capacity before and after the merger.

- Pre-Merger Rehabilitation Room Capacity: Please refer to the Baseline Performance Report.

<sup>46</sup> As a result of the Merger in October 2020, legacy SACMC's (now SMC South) CCN was retired. Going forward, this CMS data for Shannon Medical Center (120 E Harris Ave) is combined performance for both SMC and SMC South.

- Post-Merger Rehabilitation Room Capacity: As noted in the Quarter 2 FY2021 Performance Report, on March 29, 2021, Shannon Health opened the Shannon Rehabilitation Hospital through a joint venture with Encompass Health, a national leader in healthcare and rehabilitation services. The Shannon Rehabilitation Hospital includes 40 private inpatient rehabilitation rooms, an expansive therapy gym featuring the latest technologies and equipment, an on-site cafeteria, in-house pharmacy, and a four-chair dialysis suite. The Shannon Rehabilitation Hospital provides inpatient rehabilitation services to treat conditions such as amputations; brain injuries; burns, cardiac and pulmonary conditions; complex orthopedic conditions; hip fractures; multiple trauma; neurological conditions (*e.g.*, Parkinson’s disease, Guillain-Barré, Multiple Sclerosis); orthopedic conditions such as joint replacements or lower extremity fractures; spinal cord injuries; and strokes. A multidisciplinary team of providers provide care for patients at Shannon Rehabilitation Hospital, including physicians trained in physical medicine and rehabilitation, physical therapists, occupational therapists, speech-language pathologists, nurses specialized in rehabilitation care, pharmacists, dietitians/nutritionists, case managers and more. The hospital has 40 private, inpatient rooms, an expansive therapy gym featuring the latest technologies and equipment, an onsite cafeteria, an in-house pharmacy, and a four-chair dialysis suite. Opening the Shannon Rehabilitation Hospital expanded rehabilitation capacity from 14 to 40 dedicated patient beds and enhanced patient care available to the community with significant investments in the latest equipment and technology.
- Shannon Health continues to operate the Outpatient Neuro Rehabilitation Clinic, which opened in Quarter 3 FY2021.
  - The clinic, located at 3501 Executive Drive, includes an expanded floor plan with more space for patients and therapists as well as expanded services including state-of-the-art physical therapy equipment. The space allows therapists to provide an enhanced level of care for patients in a more comfortable setting. Shannon Health also offers a community-based exercise program for patients post-therapy; there is a dedicated exercise room for this program.
  - Shannon Neuro Rehabilitation is a multidisciplinary team of occupational therapists, physical therapists, and speech language pathologists who provide outpatient neuro therapy services within San Angelo. Shannon Health is looking to grow the Physical Therapy staff to accommodate the increased growth.
  - Patients needing specialized physical therapy after suffering debilitating injuries or conditions now have a facility in San Angelo with enhanced capabilities in which to receive treatment.

**28. A list of rehabilitative services accessible to patients and a schedule of services demonstrating the referenced service delivery hours.**

- Inpatient Rehabilitation: The Shannon Rehabilitation Hospital, a 40-bed inpatient rehabilitation hospital, opened in Quarter 2 FY2021 through a joint venture with Encompass Health. The Shannon Rehabilitation Hospital is open 24 hours a day, 7 days a week. Care is provided by a multidisciplinary

team of providers including physicians trained in physical medicine and rehabilitation, physical therapists, occupational therapists, speech-language pathologists, nurses specialized in rehabilitation care, pharmacists, dietitians/nutritionists, case managers and more. The conditions treated include:

- Amputations
  - Brain injuries
  - Burns, Cardiac and pulmonary conditions
  - Complex orthopedic conditions
  - Hip fractures, Multiple trauma
  - Neurological conditions (e.g., Parkinson’s disease, Guillain-Barré, multiple sclerosis)
  - Orthopedic conditions such as joint replacements or lower extremity fractures
  - Spinal cord injuries
  - Strokes
- Outpatient Rehabilitation: SMC has three locations providing outpatient rehabilitation services; all three locations had service delivery hours of Monday through Friday, 8:00 AM to 5:00 PM:
    - Shannon South Physical & Occupational Therapy: providing outpatient physical therapy, occupational therapy, and hand therapy;
    - Shannon Clinic – Jackson: providing outpatient sports medicine; and
    - Shannon Outpatient Neuro Rehabilitation Clinic: providing outpatient neuro therapy and rehabilitation

29. Data and financial reports regarding infrastructure investment, capital expenditures, and operating costs since the merger.

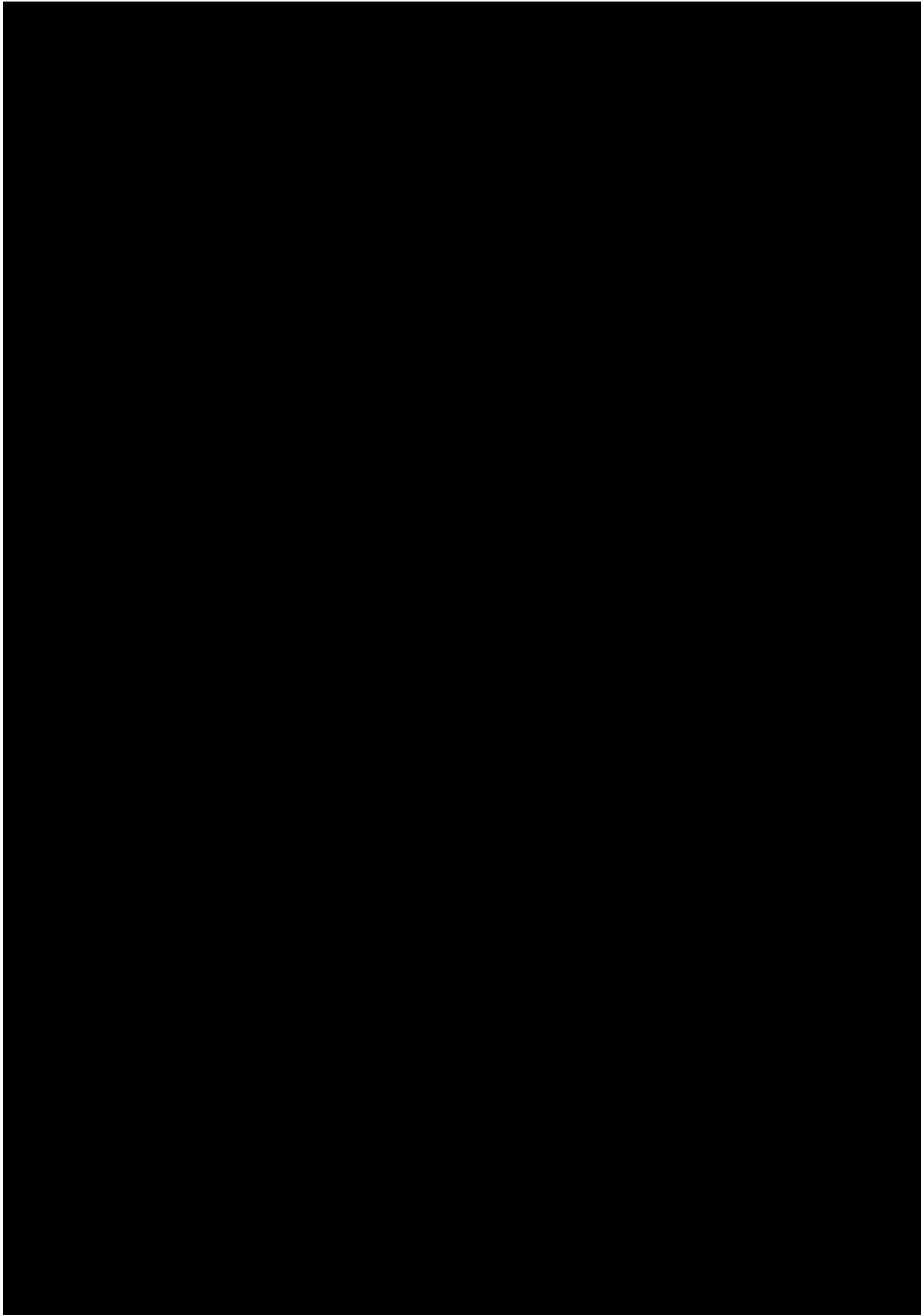
[This Item contains proprietary, competitively sensitive information redacted from the public version.]

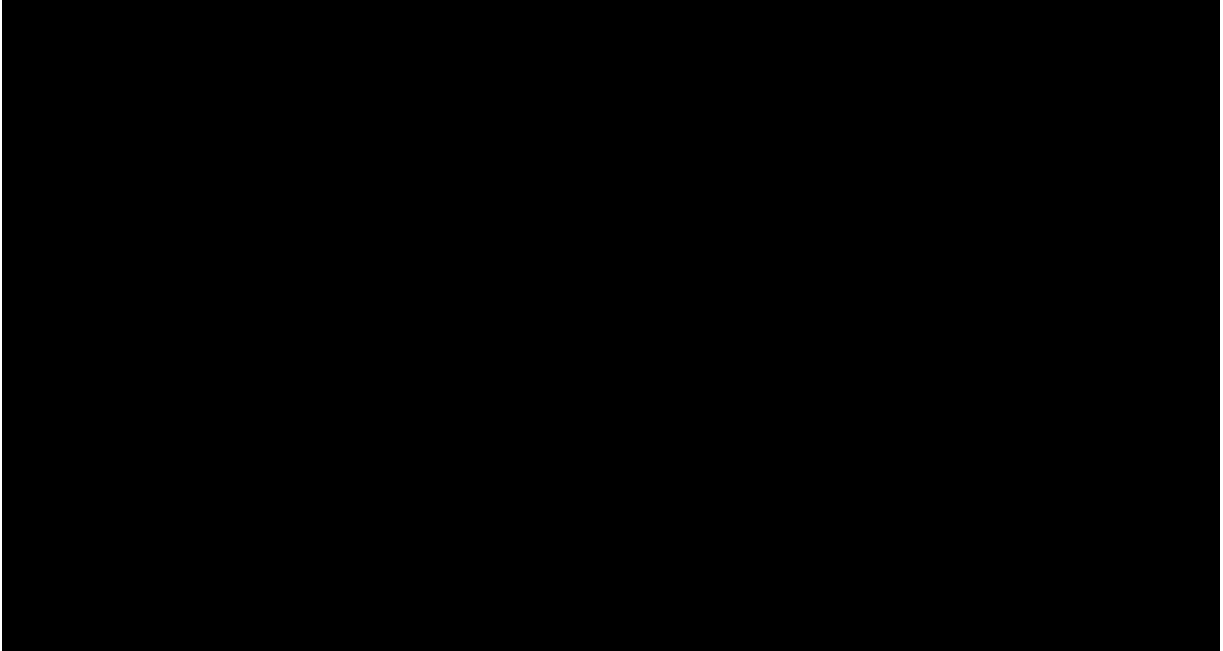
- Infrastructure Investment and Capital Expenditures: During Quarter 4 FY2025, Shannon Health invested approximately \$12.6 million in capital expenditures. See **Table 29a** for a summary of capital, infrastructure, and operating expenditures for Shannon Health (SMC and SMC South combined) and **Table 29b** for a detailed breakout of capital expenditures for Quarter 4 FY2025.
- Consistent capital expenditures indicate Shannon Health’s additional post-Merger investment in its operations and community, with the goal of improving the overall patient experience and patient care.

Table 29a: Shannon Health Capital, Infrastructure, and Operating Expenditures for Q4 FY2025<sup>47</sup>

	Q1 FY2022	Q2 FY2022	Q3 FY2022	Q4 FY2022
Capital Expenditures	\$21,507,422	\$17,571,016	\$13,800,257	\$16,858,678
Infrastructure Expenditures	\$17,686,080	\$10,485,069	\$11,130,484	\$10,206,712
Operating Expenditures	\$170,026,494	\$175,688,015	\$176,149,383	\$176,657,268
	Q1 FY2023	Q2 FY2023	Q3 FY2023	Q4 FY2023
Capital Expenditures	\$15,309,121	\$17,939,185	\$36,975,862	\$28,749,665
Infrastructure Expenditures	\$10,619,924	\$13,473,806	\$31,286,024	\$24,719,692
Operating Expenditures	180,976,285	\$188,339,357	\$191,933,287	\$196,694,946
	Q1 FY2024	Q2 FY2024	Q3 FY2024	Q4 FY2024
Capital Expenditures	\$20,025,225	\$19,289,274	\$29,201,316	\$44,894,486
Infrastructure Expenditures	\$14,176,313	\$17,160,302	\$25,243,998	\$42,376,221
Operating Expenditures	\$204,537,263	\$215,796,570	\$214,999,142	\$220,799,619
	Q1 FY2025	Q2 FY2025	Q3 FY2025	Q4 FY2025
Capital Expenditures	\$6,072,315	\$8,483,265	\$11,264,459	\$12,635,848
Infrastructure Expenditures	\$3,887,379	\$4,020,367	\$3,689,993	\$4,094,106
Operating Expenditures	\$228,474,383	\$237,776,389	\$241,105,439	\$251,120,801

<sup>47</sup> "Infrastructure Expenditures" are included within the "Capital Expenditures" Line in Table 29a. The expenditure amounts reported in this Table 29a reflect the unaudited financial figures as recorded by Shannon Health.

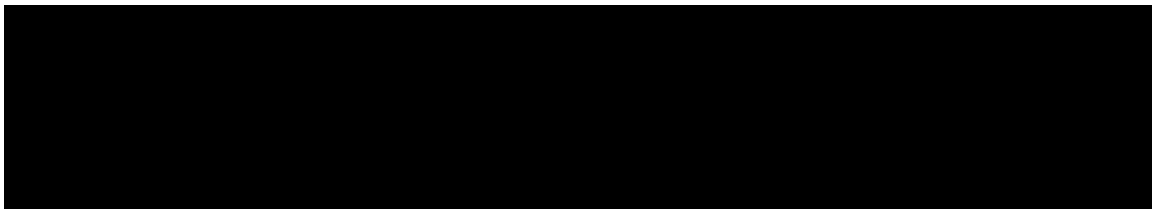




30. Evidence of any expansion of clinical services.

[This Item contains proprietary, competitively sensitive information redacted from the public version.]

- In prior quarterly reports, Shannon Health noted various examples of clinical services expansion. Shannon Health is continuing to thoughtfully evaluate clinical services across SMC and SMC South for additional clinical optimization and/or expansion opportunities. The following are examples of service expansion in Q4 FY2025:
  - **Capital expenditures:** Invested \$12.6 million in capital expenditures across both SMC and SMC South to improve and expand facilities and grow operations.
  - **Addition of surgical services:** Shannon Health added endovascular neurosurgery and plastic surgery, specifically adding reconstruction after mastectomy, which is a new service for the community.



31. A copy of each hospital's charity care policy, identifying any changes to the policy in the previous quarter when changes occur.

- Post-Merger, the Charity Care policy for Shannon Health was extended to encompass both SMC and SMC South. This policy was not revised during Q4 FY2025.

32. The number of patients enrolled in each hospital’s charity care program.

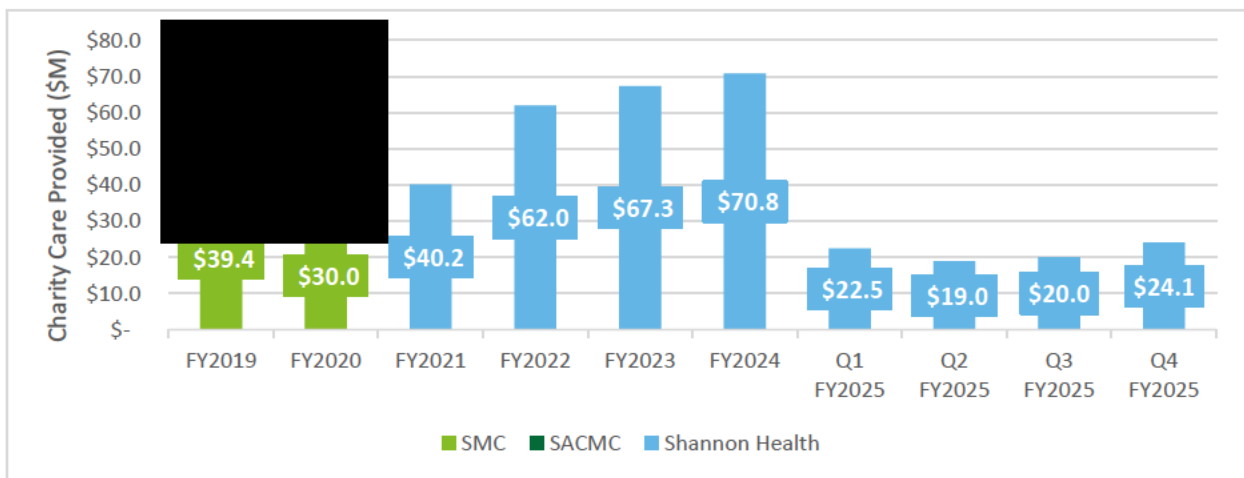
- During Quarter 4 FY2025, Shannon Health enrolled a total of 8,479 patients in charity care and financial assistance programs. Post-Merger, Shannon Health’s Charity Care Policy applies to SMC South, which Shannon Health believes allows for additional access for patients in need of financial assistance (e.g., Shannon Health patients become eligible at 10% of annual gross income (“AGI”), whereas legacy SACMC patients became eligible at 50% of AGI).

33. Data and financial reports for charity care services provided by each hospital.

[This Item contains proprietary, competitively sensitive information redacted from the public version.]

- The financial investment in charity care for Shannon Health for Quarter 4 FY2025 is shown below in Table 33. Shannon Health incurred approximately \$24.1 million in charity care during Quarter 4 FY2025.

Table 33: Charity Care<sup>48</sup>



34. Data demonstrating expansion efforts for the Shannon Care Coordination Program.

- During Quarter 4 FY2025, the Shannon Care Coordination Program evolved as Shannon Health continues to meet the needs of patients treated in the hospital. The focus of programming has shifted to post-discharge outreach to all patients discharged home from the hospital. Navigators are also in place for specialty care areas to support care needs for patients with Congestive Heart Failure (“CHF”), Chronic Obstructive Pulmonary Disease (“COPD”), as well as patients at high risk for readmission. There is continued focus to reduce and prevent unnecessary admissions by coordinating care for patient transitions to home. Team members identify psychosocial barriers and provide disease-specific education and resources to support the medical and social needs of patients. Shannon Health continued its partnership with Angelo State University (“ASU”)

<sup>48</sup> Charity care amounts are rounded.

(relaunched in Q3 FY2022), which is designed to help patients by pairing them with a student health coach.

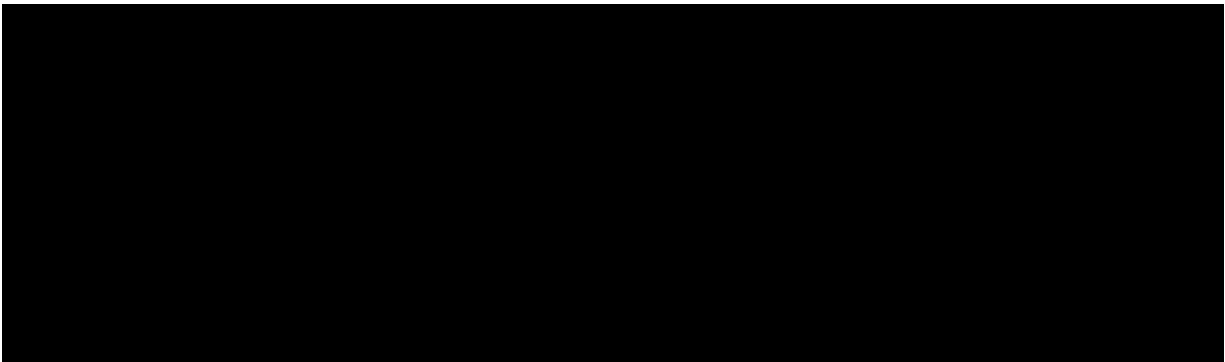
35. An explanation of how SMC South will utilize providers, nurses and other medical staff to strengthen the Shannon Care Coordination Program.

- The Shannon Care Coordination Program evolved as Shannon continues to meet the needs of our patients treated in the hospital. The focus of programming has shifted to post-discharge outreach to all patients discharged home from the hospital.
- The broadened focus of programming is designed to improve patient outcomes by utilizing a team to focus on population health efforts as it relates to chronic disease.

36. Data demonstrating clinical integration between facilities and providers and whether such integration led to cost savings and a reduction in medical errors.

[This Item contains proprietary, competitively sensitive information redacted from the public version.]

- As discussed in this and prior Reports, Shannon Health has undertaken efforts to increase clinical integration between SMC and SMC South and reduce costs for the combined organization. Shannon Health continues to evaluate opportunities for further clinical integration.



- The Leapfrog Safety Grade is one relevant indicator to show efforts and outcomes for reducing medical errors. It includes a category for “Practices to Prevent Errors”. Within that category, there are six measures: (1) doctors order medications through a computer; (2) safe medication administration; (3) handwashing; (4) communication about medicines; (5) communication about discharge; and (6) staff work together to prevent errors. In the Fall 2025 Leapfrog Safety Grade, SMC performed average or better than average in all six measures.

37. A description of how the merger has impacted rural healthcare in the hospitals’ 25-county service area during the previous quarter, including any reduction in services.

- As a result of the Merger, during Quarter 4 FY2025, Shannon Health was able to further enhance or increase the services offered to the hospitals’ rural communities, including the following:

- **Continued Telehealth:** Telehealth capabilities remain available and are utilized by patients choosing that method of care. As previously noted, Shannon Health has dedicated additional resources to this area to further expand virtual care options throughout the service area. Shannon Health also maintains strong relationships with critical access hospital partners in order to keep open the option of traveling to provide services and to provide services virtually in rural counties.
- **Community education programs:** Shannon AirMed 1 staff members provide educational opportunities to healthcare providers in the Shannon service area. Offerings include continuing education credits for nursing and EMS providers. AirMed 1 staff provided the following educational classes during Quarter 4 FY2025: Trauma care and tourniquet use/landing zone set up and safety – Sterling City EMS; hospital helipad landing zone safety – Lillian M. Hudspeth Memorial Hospital; Heart of Texas windfarm mock drill – Brady; mock drill with aircraft landing on site for safety and clinical training – Big Lake EMS & Rancho Wind Farm employees; helipad safety for hospital and EMS with aircraft landing – Ballinger; Stop the Bleed – San Angelo area churches.
- There were no reductions in Shannon Health services within the service area during Q4 FY2025.

38. A list of health plans each hospital contracted with before the merger, an explanation of any change to the accepted health care plans after the merger, and a list of health plan contracts terminated since the merger.

- **Table 38** of this Report lists the health plans<sup>49</sup> that Shannon Health contracted with as of the end of Q4 FY2025.

**Table 38: Health Plans Accepted by Shannon Health**

Organization
Aetna
Ambetter Superior Heath
American Health Plan
Assured Benefits Administrators
Blue Choice
Blue Cross Advantage HMO
Blue Cross HMO Blue Essentials
Blue Cross Medicare Advantage
Blue Cross Traditional
Caprock Healthplans
CIGNA
Evernorth Behavioral Health
First Health
FirstCare Medicaid

<sup>49</sup> This list does not include direct employer agreements, workers’ compensation, or other arrangements for discrete services (e.g., school services, behavioral health).

Galaxy Health Network
Healthcare Highways
HealthSmart Preferred Care
HealthSmart Preferred Care (Accel)
Humana
Humana Medicare Advantage
TriCare
Independent Medical Systems, Ltd.
Magellan Behavioral Health Providers of Texas
MultiPlan
Omni Networks
Partners Direct Health Plan
PHCS
Point Comfort
Prime Health Services, Inc
Provider Network of America
Scott & White
Select Plus Network
Superior Health Plan Medicaid
Texas True Choice
United Healthcare
United Healthcare – Medicare
Wellpoint (f/k/a Amerigroup)

39. Data identifying changes to service levels at the hospitals and at other facilities, including service levels available to the public and any reduction in service levels available to the public.

- **Table 39** includes the pre- and post-Merger service levels for both SMC and SMC South (legacy SACMC) for Trauma/Emergency Department (“ED”), Neonatal, and Maternal. In terms of pre-Merger service levels, only the service levels as of FY2020 are provided to establish a baseline for comparison of any changes post-Merger. As of Quarter 4 FY2025, service levels have changed as follows:
  - **Neonatal/Maternal:** During Q1 FY2024, Shannon Health moved all maternal and neonatal care services to the Shannon Women’s & Children’s Hospital on the SMC campus. This facility has undergone a physical expansion to accommodate the delivery volume for the region. Shannon Health tracked census data for over a year prior to the relocation and expansion to ensure the creation of enough beds to meet the needs of the community. Movement of these services to one central location allows for the most efficient use of resources, reduction in duplication of services, and higher quality care.
  - **Trauma/ED:** During Q2 FY2022, SMC South was granted a Level 4 designation for trauma care. Trauma and ED have been combined in **Table 39**.

Table 39: Pre- and Post-Merger Key Service Levels

Location	Pre-Merger Service Level (FY2020)				Q3 FY2021 Service Level				Q4 FY2021 Service Level			
	ED	Neonatal	Maternal	Trauma	ED	Neonatal	Maternal	Trauma	ED	Neonatal	Maternal	Trauma
SMC	3	2	2	3	3	2	2	3	3	2	2	3
SMC South	3	2	Not Applicable	3	4 (pursuing)	1	1	4 (pursuing)	4 (pursuing)	1	1	4 (pursuing)
Location	Q1 FY2022 Service Level				Q2 FY2022 Service Level				Q3 FY2022 Service Level			
	ED	Neonatal	Maternal	Trauma	ED	Neonatal	Maternal	Trauma	ED	Neonatal	Maternal	Trauma
SMC	3	2	2	3	3	2	2	3	3	2	2	3
SMC South	4 (pursuing)	1	1	4 (pursuing)	4	1	1	4	4	1	1	4
Location	Q4 FY2022 Service Level				Q1 FY2023 Service Level				Q2 FY2023 Service Level			
	ED	Neonatal	Maternal	Trauma	ED	Neonatal	Maternal	Trauma	ED	Neonatal	Maternal	Trauma
SMC	3	2	2	3	3	2	2	3	3	2	2	3
SMC South	4	1	1	4	4	1	1	4	4	1	1	4
Location	Q3 FY2023 Service Level				Q4 FY2023 Service Level				Q1 FY2024 Service Level			
	ED	Neonatal	Maternal	Trauma	ED	Neonatal	Maternal	Trauma	Neonatal	Maternal	Trauma	
SMC	3	2	2	3	3	2	2	3	2	2	3	
SMC South	4	1	1	4	4	1	1	4	-	-	4	
Location	Q2 FY2024 Service Level			Q3 FY2024 Service Level			Q4 FY2024 Service Level			Q1 FY2025 Service Level		
	Neonatal	Maternal	Trauma	Neonatal	Maternal	Trauma	Neonatal	Maternal	Trauma	Neonatal	Maternal	Trauma
SMC	2	2	3	2	2	3	2	2	3	2	2	3
SMC South	-	-	4	-	-	4	-	-	4	-	-	4
Location	Q2 FY2025 Service Level			Q3 FY2025 Service Level			Q4 FY2025 Service Level					
	Neonatal	Maternal	Trauma	Neonatal	Maternal	Trauma	Neonatal	Maternal	Trauma			
SMC	2	2	2	2	2	2	2	2	3			
SMC South	-	-	-	-	-	-	-	-	4			

40. Data illustrating the organizations’ payment models.

- Shannon Health currently participates in the payment models listed in Table 40 below, which have remained unchanged from the Baseline Performance Report.

Table 40: Shannon Health Payment Models<sup>50</sup>

Payment Models
APR-DRG/MS-DRG
Case Rate
Medicare Fee Schedules
Percent of Billed Charges
Per Diem
Quality Metric-Based Compensation
Texas Medicaid Fee Schedules

41. Data demonstrating the payment models established since the merger in comparison to payment models before the merger.
- As of the end of Quarter 4 FY2025, no new payment models have been established.

---

<sup>50</sup> Excludes workers compensation payment models.

## D. Competition

42. Data demonstrating the merger did not reduce competition among physicians, allied health professionals, other health providers, or any other persons providing goods and services with the hospitals.

Shannon Health faces competition from a number of hospitals and health systems in its primary and secondary service areas. Post-Merger, Shannon Health continues to compete with large and significant health systems throughout the region, most of which are gaining strength. These health systems are located throughout the Texas region and are rapidly expanding. Shannon Health considers these health systems, among others, to be competitors for high-end or tertiary inpatient and outpatient services. The robust competition for inpatient acute facility services will continue from many other hospitals, listed below, all located in surrounding counties. Likewise, Shannon Health also faces competition from freestanding emergency departments, urgent care locations, ambulatory surgery centers, rural health clinics, and other healthcare providers located in Tom Green County and the surrounding counties.

Shannon Health has identified the following set of competitors, without limitation:

- Covenant Health; 3615 19th St., Lubbock, TX 79410; Lubbock County
- Odessa Regional Medical Center; 520 E. 6th St., Odessa, TX 79761; Ector County
- Medical Center Hospital; 500 W. 4th St., Odessa, TX 79761; Ector County
- Midland Memorial Hospital; 400 Rosalind Redfern Grover Pkwy, Midland, TX 79701; Midland County
- United Regional Health Care; 1600 11th St, Wichita Falls, TX 76310; Wichita County

Additionally, Shannon Health will continue to compete with the large health systems, including without limitation:

- Lubbock University Medical Center
- University Health System in San Antonio
- Houston Methodist – The Woodlands
- Parkland Health & Hospital System
- Texas Health Harris Methodist Hospital Alliance
- Texas Health Resources

Shannon Health competes with inpatient acute facilities within the primary and secondary service area, including without limitation:

- Ballinger Memorial Hospital District; 608 Ave. B, Ballinger, TX 76821; Runnels County
- Big Spring State Hospital; 1901 N Hwy. 87, Big Spring, TX 79720; Howard County
- Hendrick Medical Center Brownwood; 1501 Burnett Rd., Brownwood, TX 76801; Brown County
- Concho County Hospital; 614 Eaker St., Eden, TX 76837; Concho County
- Coleman County Medical Center; 310 S Pecos St., Coleman, TX 76834; Coleman County
- Heart of Texas Healthcare System; 2008 Nine Rd., Brady, TX 76825; McCulloch County
- Iraan General Hospital; 600 TX-349, Iraan, TX 79744; Pecos County
- Kimble Hospital; 349 Reid Rd, Junction, TX 76849; Kimble County

- Lillian M. Hudspeth Memorial Hospital; 308 Hudspeth St., Sonora, TX 76950; Sutton County
- McCamey Hospital District; 2500 S Hwy. 305, McCamey, TX 79752; Upton County
- Mitchell County Hospital; 997 W I-20, Colorado City, TX 79512; Mitchell County
- North Runnels Hospital; 7821 E TX-153, Winters, TX 79567; Runnels County
- Pecos County Memorial Hospital; 387 W I-10, Fort Stockton, TX 79735; Pecos County
- Rankin County Hospital District; 1611 TX-Spur 576, Rankin, TX 79778; Upton County
- Reagan Memorial Hospital; 1300 N Main Ave., Big Lake, TX 76932; Reagan County
- Rolling Plains Memorial Hospital; 200 E Arizona Ave., Sweetwater, TX 79556; Nolan County
- Scenic Mountain Medical Center; 1601 W 11th Pl., Big Spring, TX 79720; Howard County
- Schleicher County Medical Center; 102 N US-277, Eldorado, TX 76936; Schleicher County
- Val Verde Regional Medical Center; 801 N Bedell Ave., Del Rio, TX 78840; Val Verde County
- West Texas VA Health Care System; 2400 S Gregg St., Big Spring, TX 79720; Howard County

Additionally, the following is a non-exhaustive list of “freestanding healthcare facilities” in the primary and secondary service area, sorted by county, that Shannon Health will continue to compete with:

#### Primary Service Area

##### Brown County

- Accel Health Clinic Brownwood; 3804 US-377, Brownwood, TX 76801
- Brownwood Women’s Clinic; 98 S Park Dr., Brownwood, TX 76801
- Central TX Women’s Clinic PA; 2201 Coggin Ave., Suite B, Brownwood, TX 76801
- Fresenius Kidney Care Brownwood; 110 S Park Dr., Brownwood, TX 76801
- Hendrick Clinic Early; 2005 Hwy. 183 N, Early, TX 76802
- Z-2-H Family Med & Urgent Care Clinic; 1604 14th St, Brownwood, TX 76801

##### Coleman County

- Coleman WIC Clinic; 303 E College Ave., Coleman, TX 76834
- Coleman Medical Associates; 310 S Pecos St, Coleman, TX 76834
- Family HealthCare Clinic, PLLC; 123 Santa Anna Ave, Coleman, TX 76834
- Hensley Family Health Clinic; 105 N 2nd St., Santa Anna, TX 79606

##### Coke County

- Not Applicable

##### Concho County

- Concho Medical Clinic; 814 W Broadway St., Eden, TX 76837
- Eden Medical Clinic PA; 506 Eaker St, Eden, TX 76837

##### Crockett County

- Not Applicable

Howard County

- Access Medical Clinic; 1700 West FM700, Suite B, Big Spring, TX, 79720
- Howard County Community Health Clinic; 103 W 11th St, Big Spring, TX 79720
- Stewart Medical Group – Scenic Mountain Medical Group – Main Street; 910 S Main Street, Big Spring, TX 79720
- Fresenius Kidney Care West Texas; 501 Birdwell Ln., Suite 10, Big Spring, TX 79905

Irion County

- Not Applicable

Kimble County

- Frontera Healthcare Network – Junction Clinic; 1003 College St., Junction, TX 76849
- Junction Medical Clinic; 109 Reid Rd., Junction, TX 76849

McCulloch County

- Brady Medical Clinic; 2010 Nine Rd., Brady, TX 76825
- Frontera Healthcare Network – Brady Clinic; 2026 S Bridge St, Brady, TX 76825

Menard County

- Frontera Healthcare Network – Menard Clinic; 119 Ellis St., Menard, TX 76859

Mitchell County

- Family Medical Associates; 997 I-20, Colorado City, TX 79512

Reagan County

- Hickman Rural Health Clinic; 1300 N Main Ave, Big Lake, TX 76932

Runnels County

- Ballinger Hospital Clinic; 2001 Hutchins Ave, Suite C, Ballinger, TX 76821
- North Runnels Hospital District Clinic; 7571 TX-153, Winters, TX 79567

Schleicher County

- Schleicher County Family Clinic; 100 N US-277, Eldorado, TX 76936

Sterling County

- Family Clinic; 304 4th St, Sterling City, TX 76951

Sutton County

- Sonora Medical Clinic; 301 Hudspeth St., Suite B, Sonora, TX 76950

Tom Green County

- Angelo Kidney Connection, PLLC; 2901 Sherwood Way, Suite 100, San Angelo, TX 76901
- Angelo MRI; 4114 S Jackson St., San Angelo, TX 76903
- Concho Valley ER; 5709 Sherwood Way, San Angelo, TX 76901
- Fresenius Kidney Care San Angelo; 2018 Pulliam St., San Angelo, TX 76905
- Goodfellow AFB Ross Clinic; 271 Ft. Richardson Ave., San Angelo, TX 76908
- La Esperanza Clinic; 1610 S Chadbourne St., San Angelo, TX 76903
- La Esperanza Clinic; 34 Buick St., San Angelo, TX 76901
- La Esperanza Health & Dental Clinic; 35 E 31st St., San Angelo, TX, 76901
- DaVita San Angelo Dialysis; 3518 Knickerbocker Rd., San Angelo, TX 76904
- VA San Angelo Clinic; 4240 Southwest Boulevard, San Angelo, TX 76904

**Secondary Service Area**

Mason County

- Frontera Healthcare Network – Mason Clinic; 216 E College Ave., Mason, TX 76856

Mills County

- Coryell Health Medical Clinic – Mills County; 1510 Hannah Valley Rd., Goldthwaite, TX 76844
- Family Practice Clinic of Mills County; 1501 W Front St., Goldthwaite, TX 76844

Nolan County

- Family Medical Associates; 997 I-20, Colorado City, TX 79512
- Fresenius Kidney Care Rolling Plains; 100 E Arizona Ave., Sweetwater, TX 79556
- Rolling Plains Rural Health Clinic; 201 E Arizona Ave., Sweetwater, TX 79556

Pecos County

- Family Care Center Walk In Clinic; 387 West, I-10, Fort Stockton, TX 79735
- DaVita Fort Stockton Dialysis; 387 W Interstate 10, Suite C, Fort Stockton, TX 79735

- Iraan General Hospital District Rural Health Clinic; 600 Hwy. 349 N, Iraan, TX, 79744

San Saba County

- Baylor Scott & White Clinic – San Saba; 200 E Wallace St., San Saba, TX 76877
- Hendrick Clinic – San Saba; 403 W Wallace St., San Saba, TX 76877

Terrell County

- Sanderson Rural Health Center; 213 Persimmon Ave., Sanderson, TX 79848

Upton County

- McCamey Hospital Rural Health Clinic; 2500 Hwy. 305 S, McCamey, TX 79752

Val Verde County

- 47th Medical Group, Laughlin AFB; 590 Mitchell Blvd, Bldg 375, Laughlin Air Force Base, TX 78843
- Family Care Clinic; 119 E Academy St., Del Rio, TX 78840
- Fresenius Kidney Care Val Verde; 608 N Bedell Ave., Del Rio, TX 78840
- Fresenius Kidney Care Del Rio; 2201 N Bedell Ave., Suite D, Del Rio, TX 78840
- South TX Urgent Care-Del Rio; 612 N Bedell Ave. A, Del Rio, TX 78840
- VVRMC Walk-In Clinic/VVRMC Rural Health Clinic; 1801 N Bedell Ave., Del Rio, TX 78840
- UMC Bedell Ave. Clinic; 2209 N. Bedell Ave., Del Rio, TX 78840
- UMC Del Rio Main Street Clinic; 913 S. Main St. Del Rio, TX 78840
- UMC East Academy Clinic; 119 East Academy St., Del Rio, TX 78840
- UMC Northside Clinic; 3809 Veterans Blvd, Del Rio, TX 78840
- UMC San Felipe Clinic; 1117 W. De La Rosa St, Del Rio, TX 78840
- Stat Specialty Hospital; 2600 Veterans Blvd., Del Rio, TX 78840

Shannon Health may continue to compete with other health care facilities located in Tom Green County, including without limitation:

**Home Health Agencies**

1. AccentCare Personal Care Services; 4202 Sherwood Way, Suite A, San Angelo, TX 76904
2. Angelo Home Care; 2312 W Ave N, San Angelo, TX 76904
3. Angels Care Home Health of San Angelo; 2412 College Hills Blvd., Suite 220, San Angelo, TX 76904
4. Arcadia Home Care & Staffing; 133 W Concho Ave Ste 203, San Angelo, TX 76903
5. Carter Healthcare; 2725 Sherwood Way, Suite 700, San Angelo, TX 76904

6. Caprock Home Health Services Inc.; 215 S Irving, San Angelo, TX 76903
7. CenterWell Home Health; 1518 W Beauregard, San Angelo, TX 76901
8. Comfort Keepers San Angelo; 3121 Executive Drive; San Angelo, TX 76904
9. Concho Valley Home Health Care; 430 W Beauregard Ave., Suite B, San Angelo, TX 76903
10. Enhabit Home Health; 334 W Highland Blvd., San Angelo, TX 76903
11. Home Preferred Senior Care; 3180 Executive Dr., Suite 109, San Angelo, TX 76904
12. Home Instead; 34 S Main St, San Angelo, TX 76903
13. Inhome Care Inc.; 1744 Sunset Dr, San Angelo, TX 76904
14. Interim HealthCare of San Angelo; 303 W Harris Ave Ste 3, San Angelo, TX 76903
15. Outreach Home Care; 17 S. Chadbourne Street, Suite 500, San Angelo, TX 76903
16. Paradigm Home Health; 3134 Executive Dr Suite B, San Angelo, TX 76904
17. TLC In Home Care Inc.; 1932 Sherwood Way, San Angelo, TX 76901
18. Visiting Angels; 3290 Sherwood Way, San Angelo, TX 76901
19. West Texas Healthcare LLC; 423 S Irving Street, San Angelo, TX 76903

#### **Hospice Agencies**

1. Angels Care Hospice; 2412 College Hills Blvd #212, San Angelo, TX 76904
2. Concho Hearts Hospice, LLC; 706 Knickerbocker Rd, Suite 2, TX 76903
3. Enhabit Hospice; 326 W Highland Blvd., San Angelo, TX 76903
4. Gentiva Hospice; 116 W Concho Ave., San Angelo, TX 76903
5. Hospice of San Angelo Inc.; 1933 University Ave, San Angelo, TX 76904
6. Interim Hospice of West Texas; 303 W Harris Ave Suite 3, San Angelo, TX 76903
7. St. Gabriel's Hospice and Palliative Care; 303 W Harris Ave Suite 1, San Angelo, TX 76903

#### **Skilled Nursing Facilities**

1. Arbor Terrace Healthcare Center; 609 Rio Concho Dr., San Angelo, TX 76903
2. Cedar Manor Nursing and Rehabilitation; 1915 Greenwood St., San Angelo, TX 76901
3. Elsie Gayer Health Care Center; 902 N Main St., San Angelo, TX 76903
4. Meadow Creek Nursing and Rehabilitation; 4343 Oak Grove Blvd., San Angelo, TX 76904
5. Park Plaza Ltc Partners Inc.; 2210 Howard St., San Angelo, TX 76901
6. Regency House; 3745 Summer Crest Dr., San Angelo, TX 76901
7. Sagecrest Alzheimer's Care Center; 438 Houston-Harte, San Angelo, TX 76903
8. San Angelo Nursing and Rehab; 5455 Knickerbocker Rd., San Angelo, TX 79604

#### **Select Other Health Care Facilities**

1. Baptist Retirement Community; 902 N Main St., San Angelo, TX 76903

2. Cook Children’s Pediatric Specialties San Angelo; 1002 S Abe St. #B, San Angelo, TX 76903
3. Trisun Care Center Regency House; 3745 Summer Crest Dr., San Angelo, TX 76901
4. West Texas Ltc Partners Inc.; 1915 Greenwood St., San Angelo, TX 76901

43. Evidence of how patient choice is being preserved.

- The patient choice policy for Shannon Health was extended post-Merger to encompass both SMC and SMC South. The policy continues to conform with CMS mandated patient choice requirements. No revisions were made to the patient choice policy during Quarter 4 FY2025.

44. Evidence reflects efforts to bring additional jobs to the area.

- Open Positions: In Quarter 4 FY2025, Shannon Health posted 217 positions. These roles indicate significant demand for talent within Shannon Health following the Transaction Closing. A list of posted positions as of the end of Quarter 4 FY2025 is provided in **Attachment 2**.
- New Positions: During Quarter 4 FY2025, Shannon Health created 46 positions to support identified needs for the combined system, including both administrative and clinical roles. For example, Shannon Health added the following positions:
  - Admissions RN (1)
  - Mental Health Tech (2)
  - Pharmacy Technician I (3)
  - Registered Nurse (13)
  - Licensed Vocational Nurse – SMM (4)
  - Mammographer I (1)
  - Nurse Recruiter (1)
  - Licensed Vocational Nurse (3)
  - Communication Center Tech I (3)
  - Medical Assistant – SMM (6)
  - CT Technologist (2)
  - Oncology Pharmacist (1)
  - Radiographer II (1)
  - Patient Care Tech I (1)
  - Registered Nurse – SMM (1)
  - Medical Assistant (2)
  - Experience Liaison (1)
  - Licensed Athletic Trainer (1)
  - Mammographer II (1)
  - Clinical Documentation Specialist (2)
  - Home Health Case Manager (1)
  - Physical Therapist (1)
  - Physical Therapy Assistant (1)

- Patient Care Coordinator (1)
  - Intern (1)
  - Project Manager (1)
  - Clinical Documentation Specialist – Peri-Operative (1)
  - Patient Experience Specialist II – SMM (1)
  - Home Based Physical Therapist (1)
  - Laboratory Manager – Clinic (1)
  - Denials Specialist (1)
- New Hires: During Quarter 4 FY2025, Shannon Health hired 294 new employees.

45. Any contracted services that have changed since the last report, with an explanation for each change.

- Changes to Contracted Services: Shannon Health is continuing to evaluate potential contract alignment opportunities through the post-Merger integration process and will provide updates in subsequent reports as additional information becomes available.

46. Data illustrating physician contracts for each county in the region specifying the physician specialty or practice area for each contract.

[This Item contains proprietary, competitively sensitive information redacted from the public version.]

- **Table 46a** lists the practice areas and counties served by providers employed by Shannon Health as of the end of Quarter 4 FY2025. Care in the various specialties outlined in **Table 46a** are being provided by Shannon Health providers in those counties. The region is also served by a number of community physicians not employed by Shannon Health. **Table 46b** lists the number of practicing physicians along with their practice area. Practicing physicians include employed physicians, locum tenens physicians, and contracted physicians related to Shannon Health-offered specialties. While Shannon Health does not maintain a comprehensive directory of these community physicians beyond those with medical staff privileges at Shannon Health, public sources that identify community physicians, including the Texas Medical Board Healthcare Provider Search and health plan provider directories are available.
- Shannon Health notes that the numbers presented in **Table 46b** are practicing physicians with inpatient privileges. At the time of the acquisition, all SACMC physicians had both inpatient and outpatient privileges, even if they did not use inpatient privileges. When Shannon Health on-boarded these physicians, it honored the SACMC credentialing contracts for 90 to 120 days. This timeframe allowed the SACMC physicians to complete the Shannon Health credentialing process, which occurred during Q2 FY2021 and Q3 FY2021. During the credentialing process, it was determined which physicians saw patients in the hospital.
- Shannon Health continually assesses, based on need, where rural-based specialty care visits should be offered. Shannon Health also maintains strong relationships with critical access hospital partners to keep open options for the provision of services in rural counties by traveling or through

virtual means.



Table 46a: Practice Area Service Arrangements by County – Q4 FY2025

Practice Area	County Service Locations						
	Tom Green	Howard	McCulloch	Runnels	Sutton	Crockett	Val Verde
Access Clinic	✓						
Allergy	✓						
Anesthesiology	✓						
Cardiology	✓	✓	✓	✓	✓	✓	✓
CV Surgery	✓						
Dermatology	✓	✓					
Electrophysiology	✓						
Emergency	✓						
Endocrinology	✓						
Family Practice	✓	✓				✓	
Gastroenterology	✓						
Hematology Oncology	✓	✓					✓
Hospitalist	✓						
Internal Medicine	✓						
Laboratory	✓						
Nephrology	✓		✓				
Neurology	✓						
Neurosurgery	✓						✓
OB/GYN	✓ *	✓					
Ophthalmology	✓						
Orthopedics	✓	✓	✓	✓	✓		
Otolaryngology	✓						
Pain Management	✓						
Palliative Care	✓						
Pathology	✓						
Pediatrics	✓ *						
Phys & Rehab	✓						
Physician Recruitment	✓						
Podiatry	✓						
Psychiatry	✓						
Pulmonology	✓						
Radiation Oncology	✓						
Radiology Services	✓						
Rheumatology	✓						
Senior Clinic	✓						
Surgery	✓	✓			✓		✓
Urgent Care	✓						
Urology	✓	✓			✓		
Wound Care	✓						

\* In addition to providing services at Shannon these specialties also provide routine clinics at the FQHC located in Tom Green County.

Table 46b: Practicing Physicians by Practice Area

Practice Area	Practicing Physicians
Allergy	2
Anesthesiology	79
Cardiology	5
CV Surgery	6
Dermatology	6
Electrophysiology	1
Emergency	23
Endocrinology	1
Family Practice	11
Gastroenterology	11
Hematology Oncology	3
Hospitalist	36
Infectious Disease	2
Internal Medicine	7
Neonatology	1
Nephrology	5
Neurology	3
Neurosurgery	6
OB/GYN	10
Ophthalmology	4
Orthopedics	5
Otolaryngology	4
Pain Management	2
Palliative Care	2
Pathology	5
Pediatrics	13
Plastic, Hand and Upper Extremity Surgery	2
Podiatry	4
Psychiatry	1
Pulmonology	9
Radiation Oncology	2
Radiology Services	17
Rheumatology	1
Surgery	6
Urology	5
Wound Care	4
<b>TOTAL</b>	<b>304</b>

## E. Other Requirements

47. Any minutes or notes of meetings regarding the COPA and the portion of each hospital's governing body meeting minutes that discuss the COPA.
- Meeting Minutes: Shannon Health provides in **Attachment 3** relevant portions of meeting minutes regarding the COPA.
48. Any healthcare-related service contract changes in the previous quarter and the explanation for the change.
- Changes to Contracted Health Care Services: As noted in the Baseline Performance Report, SMC and legacy SACMC maintained agreements with a variety of third-party service providers to support their operations.
  - Shannon Health continues to evaluate potential healthcare-related service contract alignment opportunities throughout the post-Merger integration process and will provide updates in subsequent reports, as necessary.
49. The number of physicians, allied professionals and other health care providers providing medical services that have privileges to practice at the hospital.
- Privileged Providers: As of Quarter 4 FY2025, Shannon Health provided privileges to 718 health care providers at SMC and 305 health care providers at SMC South, as detailed in **Table 49** below.
  - As noted in previous Performance Reports, beginning in Quarter 1 FY2021, the provider privileging and credentialing policies at SMC South were adjusted to align with SMC's policies, which allows for a more streamlined, uniform process.

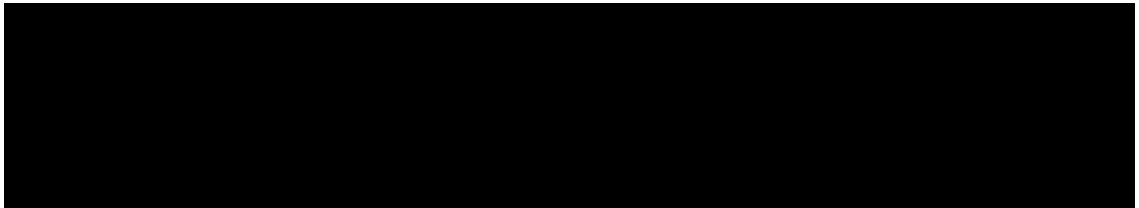
**Table 49: Shannon Health Privileged Providers**

Privileged Provider Category	SMC Downtown	SMC South
Physicians	421	212
AHPs	112	16
Telemedicine Physicians	185	77
<b>Total</b>	<b>718</b>	<b>305</b>

50. Information on additional investments regarding infrastructure, capital expenditures, and operating costs and how this affected patient care outcomes, population access to healthcare, and prevention services.

[This Item contains proprietary, competitively sensitive information redacted from the public version.]

- By thoughtfully combining the resources of SMC and legacy SACMC, Shannon Health continues to better coordinate services, increase efficiencies, and optimize patient care. The Merger allows for better coordination of resources and decision-making, resulting in improved efficiency, elimination of waste, and the achievement of cost savings. Shannon Health is committed to reinvesting these savings in its operations and community, with the goal of improving the overall patient experience and patient care. The following are examples of how Shannon Health continued reinvesting in the combined healthcare system during Quarter 4 FY2025:
  - **Capital expenditures:** To improve its facilities, grow its operations, and expand access, Shannon Health incurred capital expenditures totaling approximately \$12.6 million across both SMC and SMC South.
  - **Addition of surgical services:** Shannon Health added endovascular neurosurgery and plastic surgery, specifically adding reconstruction after mastectomy, which is a new service for the community.



- **Community education programs:** Shannon AirMed 1 staff members provide educational opportunities to healthcare providers in the Shannon service area. Offerings include continuing education credits for nursing and EMS providers. AirMed 1 staff provided the following educational classes during Quarter 4 FY2025: Trauma care and tourniquet use/landing zone set up and safety – Sterling City EMS; hospital helipad landing zone safety – Lillian M. Hudspeth Memorial Hospital; Heart of Texas windfarm mock drill – Brady; mock drill with aircraft landing on site for safety and clinical training – Big Lake EMS & Rancho Wind Farm employees; helipad safety for hospital and EMS with aircraft landing – Ballinger; Stop the Bleed – San Angelo area churches.

#### IV. Attachments