

**The University of Chicago
Medical Center**
Financial Statements
June 30, 2014 and 2013

**The University of Chicago
Medical Center
Index
June 30, 2014 and 2013**

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Independent Auditor's Report

To the Board of Trustees of
The University of Chicago Medical Center:

We have audited the accompanying financial statements of The University of Chicago Medical Center, which comprise the [consolidated] balance sheets as of June 30, 2014 and 2013, and the related statements of operations, of changes in net assets, and cash flows for the years then ended.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on the financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on our judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, we consider internal control relevant to the Company's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Company's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of The University of Chicago Medical Center at June 30, 2014 and 2013, and the results of its operations and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

PricewaterhouseCoopers LLP

October 15, 2014

The University of Chicago Medical Center
Balance Sheets
June 30, 2014 and 2013
(in thousands of dollars)

	2014	2013
Assets		
Current assets		
Cash and cash equivalents	\$ 79,698	\$ 164,504
Patient accounts receivable, less allowance for doubtful accounts for 2014 - \$41,874 and 2013 - \$29,612	184,765	204,279
Current portion of investments limited to use	11	11
Current portion of malpractice self-insurance receivable	19,305	22,502
Current portion of pledges receivable	2,598	2,243
Prepays, inventory and other current assets	34,176	35,176
Total current assets	<u>320,553</u>	<u>428,715</u>
Investments limited to use, less current portion	1,021,660	797,305
Property, plant and equipment, net	1,199,907	1,189,623
Pledges receivable, less current portion	1,893	2,465
Malpractice self-insurance receivable, less current portion	96,134	98,821
Other assets, net	16,895	15,722
Total assets	<u>\$ 2,657,042</u>	<u>\$ 2,532,651</u>
Liabilities and Net Assets		
Current liabilities		
Accounts payable and accrued expenses	\$ 115,093	\$ 131,206
Current portion of long-term debt	10,050	10,385
Current portion of other long-term liabilities	311	2,033
Current portion of estimated third-party payor settlements	89,805	51,836
Current portion of malpractice self-insurance liability	19,305	22,502
Due to University of Chicago	15,761	14,799
Total current liabilities	<u>250,325</u>	<u>232,761</u>
Other liabilities		
Worker's compensation self-insurance liabilities, less current portion	8,241	9,528
Malpractice self-insurance liability, less current portion	96,134	98,821
Long-term debt, less current portion	831,035	820,341
Interest rate swap liability	95,810	88,769
Other long-term liabilities, less current portion	33,595	44,741
Total liabilities	<u>1,315,140</u>	<u>1,294,961</u>
Net assets		
Unrestricted	1,245,856	1,149,627
Temporarily restricted	87,954	81,971
Permanently restricted	8,092	6,092
Total net assets	<u>1,341,902</u>	<u>1,237,690</u>
Total liabilities and net assets	<u>\$ 2,657,042</u>	<u>\$ 2,532,651</u>

The accompanying notes are an integral part of these financial statements.

The University of Chicago Medical Center
Statements of Operations
Years Ended June 30, 2014 and 2013
(in thousands of dollars)

	2014	2013
Operating revenues		
Net patient service revenue	\$ 1,409,095	\$ 1,303,787
Provision for doubtful accounts	55,169	47,812
Net patient service revenue after provision for doubtful accounts	1,353,926	1,255,975
Other operating revenues and net assets released from restrictions	93,577	81,184
Total operating revenues	<u>1,447,503</u>	<u>1,337,159</u>
Operating expenses		
Salaries, wages and benefits	627,588	595,968
Supplies and other	367,633	332,707
Physician services from the University of Chicago	204,586	191,862
Insurance	15,345	18,382
Interest	33,354	19,883
Medicaid provider tax	46,071	26,691
Depreciation and amortization	83,563	70,466
Total operating expenses	<u>1,378,140</u>	<u>1,255,959</u>
Total operating income	69,363	81,200
Nonoperating gains		
Investment income and unrestricted gifts, net	101,159	57,137
Derivative ineffectiveness gain	535	2,993
Excess of revenues over expenses	171,057	141,330
Other changes in net assets		
Transfers to University of Chicago	(72,749)	(74,544)
Net assets released for capital purchases	2,462	14,277
Liability for pension benefits	1,337	3,878
Changes in valuation of derivatives	(5,914)	36,713
Other, net	36	56
Increase in unrestricted net assets	<u>\$ 96,229</u>	<u>\$ 121,710</u>

The accompanying notes are an integral part of these financial statements.

The University of Chicago Medical Center
Statements of Changes in Net Assets
Years Ended June 30, 2014 and 2013
(in thousands of dollars)

	2014	2013
Unrestricted net assets		
Excess of revenues over expenses	\$ 171,057	\$ 141,330
Transfers to University of Chicago	(72,749)	(74,544)
Net assets released for capital purchases	2,462	14,277
Liability for pension benefits	1,337	3,878
Changes in valuation of derivatives	(5,914)	36,713
Other, net	36	56
	<u>96,229</u>	<u>121,710</u>
Increase in unrestricted net assets		
Temporarily restricted net assets		
Contributions	4,007	3,137
Net assets released from restrictions used for operating purposes	(4,860)	(4,621)
Investment Income	9,298	4,604
Net assets released for capital purchases	(2,462)	(14,277)
Other	-	(2,217)
	<u>5,983</u>	<u>(13,374)</u>
Increase (decrease) in temporarily restricted net assets		
Permanently restricted net assets		
Contributions and other	<u>2,000</u>	<u>-</u>
Increase in net assets	104,212	108,336
Net assets at beginning of year	<u>1,237,690</u>	<u>1,129,354</u>
Net assets at end of year	<u>\$ 1,341,902</u>	<u>\$ 1,237,690</u>

The accompanying notes are an integral part of these financial statements.

The University of Chicago Medical Center
Statements of Cash Flows
Years Ended June 30, 2014 and 2013
(in thousands of dollars)

	2014	2013
Cash flows from operating activities		
Increase in net assets	\$ 104,212	\$ 108,336
Adjustments to reconcile change in net assets to net cash provided by operating activities		
Net change in unrealized gains on investments	(65,113)	(1,075)
Transfers to University of Chicago	72,749	74,544
Restricted contributions and other changes	(4,008)	(921)
Realized gains on investments	(45,346)	(60,665)
Net change in valuation of derivatives	7,041	(47,103)
Pension and other changes in unrestricted net assets	(36)	(3,934)
Loss on disposal of assets	1,071	935
Depreciation and amortization	83,170	70,329
Increase (decrease) in cash resulting from a change in		
Patient accounts receivable, net	19,514	4,727
Other assets	(862)	26,429
Accounts payable and accrued expenses	(10,582)	11,545
Due to the University of Chicago	962	(794)
Estimated settlements with third-party payors	39,859	24,504
Self-insurance liabilities	(1,287)	1,312
Other liabilities	(3,153)	11,061
Net cash provided from operating activities	<u>198,191</u>	<u>219,230</u>
Cash flows from investing activities		
Purchases of property, plant and equipment	(100,571)	(209,359)
Uses of construction/capitalized interest funds	19	14,730
Purchases of investments	(422,420)	(224,580)
Sales of investments	308,505	371,690
Net cash used in investing activities	<u>(214,467)</u>	<u>(47,519)</u>
Cash flows from financing activities		
Proceeds from issuance of long-term debt	24,020	686
Payments on long-term obligations	(24,026)	(14,343)
Transfers paid to the University of Chicago, net	(72,749)	(74,544)
Restricted contributions	4,225	6,646
Net cash used in financing activities	<u>(68,530)</u>	<u>(81,555)</u>
Net increase (decrease) in cash and cash equivalents	(84,806)	90,156
Cash and cash equivalents		
Beginning of year	164,504	74,348
End of year	<u>\$ 79,698</u>	<u>\$ 164,504</u>

The accompanying notes are an integral part of these financial statements.

The University of Chicago Medical Center
Notes to Financial Statements
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1. Organization and Basis of Presentation

The University of Chicago Medical Center (“UCMC” or the “Medical Center”) is an Illinois not-for-profit corporation. UCMC operates the Center for Care and Discovery, the Bernard Mitchell Hospital, the Chicago Lying-In Hospital, the University of Chicago Comer Children’s Hospital, the Duchossois Center for Advanced Medicine, and various other outpatient clinics and treatment areas.

The University of Chicago (the “University”), as the sole corporate member of UCMC, elects UCMC’s Board of Trustees and approves its By-Laws. The UCMC President reports to the University’s Executive Vice President for Medical Affairs. The relationship between UCMC and the University is defined in the Medical Center By-Laws, an Affiliation Agreement, an Operating Agreement, and several Leases. See Note 3 for agreements and transactions with the University.

UCMC is a tax-exempt organization under Section 501(c)3 of the Internal Revenue Code. Accordingly, no provision for income taxes related to these entities has been made.

2. Summary of Significant Accounting Policies

New Accounting Pronouncements

During 2013, the Medical Center adopted the provisions of Accounting Standards Update 2011-04, Amendments to Achieve Common Fair Value Measurement and Disclosure Requirements in U.S. GAAP and IFRS (“ASU 2011-04”), ASU 2011-04 requires entities to provide additional disclosures related to fair value measurements of assets and liabilities classified as level 3 within the fair value hierarchy. See Note 5 for related fair value disclosures.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates. The most significant estimates are made in the areas of patient accounts receivable, accruals for settlements with third-party payors, malpractice liability, fair value of investments, goodwill, and accrued compensation and benefits.

Community Benefits

UCMC’s policy is to treat patients in immediate need of medical services without regard to their ability to pay for such services, including patients transferred from other hospitals under the provisions of the Emergency Medical Treatment and Active Labor Act (EMTALA). UCMC also accepts patients through the Perinatal and Pediatric Trauma Networks without regard to their ability to pay for services.

UCMC developed a Financial Assistance Policy (the “Policy”) under which patients are offered discounts of up to 100% of charges on a sliding scale. The policy is based both on income as a percentage of the Federal Poverty Level guidelines and the charges for services rendered. The policy also contains provisions that are responsive to those patients subject to catastrophic healthcare expenses. Since UCMC does not pursue collection of these amounts, they are not reported as net patient service revenue. The cost of providing care under this policy, along with the unreimbursed cost of government sponsored indigent healthcare programs, unreimbursed cost to

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support education, clinical research and other community programs for the years ended June 30, 2014 and 2013, are reported in Note 4.

Fair Value of Financial Instruments

Fair value is defined as the price that the Medical Center would receive upon selling an asset or pay to settle a liability in an orderly transaction between market participants.

The Medical Center uses a framework for measuring fair value that includes a hierarchy that categorizes and prioritizes the sources used to measure and disclose fair value. This hierarchy is broken down into three levels based on inputs that market participants would use in valuing the financial instruments based on market data obtained from sources independent of the Medical Center. Inputs refer broadly to the assumptions that market participants would use in pricing the asset, including assumptions about risk. Inputs may be observable or unobservable. Observable inputs are inputs that reflect the assumptions market participants would use in pricing the asset developed based on market data obtained from sources independent of the reporting entity. Unobservable inputs are inputs that reflect the reporting entity's own assumptions about the assumptions market participants would use in pricing the asset developed based on the best information available. The three tier hierarchy of inputs is summarized in the three broad levels as follows:

Level 1 – quoted market prices in active markets for identical investments.

Level 2 – inputs other than quoted prices for similar investments in active markets, quoted prices for identical or similar investments in markets that are not active, or inputs other than quoted prices that are observable including model-based valuation techniques.

Level 3 – valuation techniques that use significant inputs that are unobservable because they trade infrequently or not at all.

Cash and Cash Equivalents

Cash equivalents include U.S. Treasury notes, commercial paper, and corporate notes with original maturities of three months or less, except that such instruments purchased with endowment assets or funds on deposit with bond trustees are classified as investments. Cash equivalents are considered Level 1 in the fair value hierarchy.

Inventory

UCMC values inventories at the lower of cost or market, using the first-in first-out method.

Investments

Investments are recorded in the consolidated financial statements at estimated fair value. If an investment is held directly by the Medical Center and an active market with quoted prices exists, the market price of an identical security is used as reported fair value. Reported fair values for shares in mutual funds are based on share prices reported by the funds as of the last business day of the fiscal year. The Medical Center's interests in alternative investment funds such as private debt, private equity, real estate, natural resources, and absolute return are generally reported at the net asset value (NAV) reported by the fund managers, which is used as a practical expedient to estimate the fair value, unless it is probable that all or a portion of the investment will be sold for an amount different from NAV. As of June 30, 2014 and 2013, the Medical Center had no plans to sell investments at amounts different from NAV.

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A summary of the inputs used in valuing the Medical Center's investments as of June 30, 2014 and 2013 is included in Note 5.

A significant portion of UCMC's investments are part of the University's Total Return Investment Pool (TRIP). UCMC accounts for its investments in TRIP based on its share of the underlying securities and records the investment activity as if UCMC owned the investments directly. The University does not engage directly in unhedged speculative investments; however, the Board of the University of Chicago has authorized the use of derivative investments to adjust market exposure within asset class ranges.

A summary of the inputs used in valuing the Medical Center's investments as of June 30, 2014 and 2013 is included in Note 5.

Endowment Funds with Deficits

From time to time, the fair value of assets associated with individual donor-restricted endowment funds may fall below the value of the initial and subsequent donor gift amounts (deficit). When donor endowment deficits exist, they are classified as a reduction of unrestricted net assets. As of June 30, 2014 and 2013, there were no endowments in a deficit position.

Investments Limited as to Use

Investments limited as to use primarily include assets held by trustees under debt and other agreements and designated assets set aside by the Board of Trustees for future capital improvements and other specific purposes, over which the Board retains control and may at their discretion subsequently use for other purposes.

Derivative Instruments

In August 2006, UCMC entered into a forward starting swap transaction against contemplated variable rate borrowing for the Center for Care and Discovery. This is a cash flow hedge against interest on the variable rate debt. The fair value of these swap agreements is the estimated amount that the Medical Center would have to pay or receive to terminate the agreements as of the consolidated balance sheet date, taking into account current interest rates and the current creditworthiness of the swap counterparty. The swap values are based on the London Interbank Rate ("LIBOR"). The inputs to the fair value estimate are considered Level 2 in the fair value hierarchy. The effective date of the swap was August 2011. In July 2011, UCMC novated the original swap agreement to divide the original notional amount in two equal parts between financial institutions. The fair value of the terminated portion of the hedge on the date of the novation was recorded in net assets in the amount of \$35,123 and is being amortized into interest expense over the life of the related debt, commencing on February 23, 2013, the date the Center for Care and Discovery was placed into service. The new agreement is being accounted for as a hedge. The combined notional amount of the swap is \$325,000 and the effective start date was August 2011. Management determined that the interest rate swaps are effective, and have qualified for hedge accounting. Management has recognized a net recovery of ineffectiveness of approximately \$500 and \$3,000 in 2014 and 2013. This movement reflects the spread between tax exempt interest rates and LIBOR during the period. The effective portion of these swaps is included in other changes in unrestricted net assets. The interest rate swaps terminate on February 1, 2044. Cash settlement payments related to the swaps for 2013 were \$7,900. These payments were accumulated in net assets while the Center for Care and Discovery was under construction, and are being amortized into depreciation expense over the life of the building. Amortization

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commenced on February 23, 2013, the date the Center for Care and Discovery was placed into service. Cash settlement payments after the Center for Care and Discovery was placed into service are recorded in interest expense. These payments were \$4,300 and \$12,400 for 2013 and 2014, respectively.

UCMC is required to provide collateral on one of the interest rate swap agreements when the liability of that swap exceeds \$50,000. At June 30, 2014 and 2013 \$0 was held as collateral. If UCMC's credit rating were to be downgraded one level; collateral would need to be provided under the swap with JP Morgan when the liability of that swap exceeds \$40,000 and under the Wells Fargo swap when the liability of that swap exceeds \$60,000. Upon further downgrade, the collateral requirements increase.

Property, Plant and Equipment

Property, plant and equipment are reported on the basis of cost less accumulated depreciation and amortization. Donated items are recorded at fair market value at the date of contribution. The carrying value of property, plant and equipment is reviewed if the facts and circumstances suggest that it may be impaired. Depreciation of property, plant and equipment is calculated by use of the straight-line method at rates intended to depreciate the cost of assets over their estimated useful lives, which generally range from three to eighty years. Interest costs incurred on borrowed funds during the period of construction of capital assets, net of any interest earned, are capitalized as a component of the cost of acquiring those assets. During 2013, UCMC evaluated the remaining useful lives of the buildings based on their condition by performing detailed assessments of the facilities and modifying estimated useful lives where appropriate to properly reflect the remaining useful lives of the facilities. Based on these changes, depreciation expense recorded was approximately \$5,800 less in 2013 than if the estimated useful lives were not modified.

Asset Retirement Obligation

UCMC recognizes a liability for the fair value of a legal obligation to perform asset retirement activities that are conditional on a future event if the amount can be reasonably estimated. Upon recognition of a liability, the asset retirement cost is recorded as an increase in the carrying value of the related long-lived asset and then depreciated over the life of the asset. The UCMC asset retirement obligations arise primarily from regulations that specify how to dispose of asbestos if facilities are demolished or undergo major renovations or repairs. UCMC's obligation to remove asbestos was estimated using site-specific surveys where available and a per square foot estimate where surveys were unavailable. These inputs to the fair value estimate are considered Level 3 in the fair value hierarchy.

Pledges Receivable

Unconditional promises to give are recognized initially at fair value as private gift revenue in the period the promise is made by a donor. Fair value of the pledge is estimated based on anticipated future cash receipts (net of an allowance for uncollectible amounts), discounted using a risk-adjusted rate commensurate with the duration of the payment plan. These inputs to the fair value estimate are considered Level 3 in the fair value hierarchy. In subsequent periods, the discount rate is unchanged and the allowance for uncollectible amounts is reassessed and adjusted if necessary.

Other Assets and Liabilities

Other assets and liabilities, including deferred financing costs, which are amortized over the term of the related obligations, do not differ materially from their estimated fair value and are considered Level 1 in the fair value hierarchy

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Net Assets

Permanently restricted net assets include the historical dollar amounts of gifts that are required by donors to be permanently retained. Temporarily restricted net assets include gifts, which can be expended but for which restrictions have not yet been met. Such restrictions include purpose restrictions where donors have specified the purpose for which the net assets are to be spent, or time restrictions imposed by donors or implied by the nature of the gift (such as pledges to be paid in the future) or by interpretations of law. Unrestricted net assets include all the remaining net assets of UCMC. See Note 15 for further information on the composition of restricted net assets.

Realized gains and losses are classified as changes in unrestricted net assets unless they are restricted by the donor or law.

Gifts and Grants

Unconditional promises to give assets other than cash to UCMC are reported at fair value at the date the promise is received. Conditional promises to give are recognized when the conditions are substantially met. The gifts are reported as either temporarily or permanently restricted support if they are received with donor stipulations that limit the use of the donated assets. Donor-restricted contributions whose restrictions are met within the same year received are reported as unrestricted gifts in the accompanying financial statements.

Gifts of cash or other assets that must be used to acquire long-lived assets are reported as additions to temporarily restricted net assets until the assets are placed into service.

Statement of Operations

All activities of UCMC deemed by management to be ongoing, major and central to the provision of healthcare services are reported as operating revenues and expenses. Activities deemed to be nonoperating include certain investment income (including realized gains and losses).

UCMC recognizes changes in accounting estimates related to third-party payor settlements as more experience is acquired. Adjustments to prior year estimates for these items resulted in an increase in net patient service revenues of \$10,700 in 2014 and \$3,700 in 2013.

In 2013, UCMC recognized a gain of \$2,400 related to the unwinding of the Weiss Liquidation Trust and received \$16,000 in cash from the liquidation.

In 2014, UCMC recognized a gain of \$2.5 million from the sale of its investment in VHS Acquisition Subsidiary No. 3, Inc. and received \$2.5 million in cash. The investment had been fully reserved at the time that it was acquired.

The statement of operations includes excess (deficit) of revenues over expenses. Changes in unrestricted net assets that are excluded from excess (deficit) of revenues over expenses include transfers to the University, contributions of long-lived assets released from restrictions (including assets acquired using contributions which by donor restriction were to be used for acquisition of UCMC assets), the effective portion of changes in the valuation of the interest rate swap, and pension benefit liabilities.

Net Patient Service Revenue, Accounts Receivable and Allowance for Doubtful Accounts

UCMC maintains agreements with the Social Security Administration under the Medicare Program, Blue Cross and Blue Shield of Illinois, Inc. (Blue Cross), and the State of Illinois under the Medicaid Program and various managed care payors that govern payment to UCMC for services rendered to

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patients covered by these agreements. The agreements generally provide for per case or per diem rates or payments based on allowable costs, subject to certain limitations, for inpatient care and discounted charges or fee schedules for outpatient care.

Net patient service revenue is reported at estimated net realizable amounts from patients, third-party payors, and others for services rendered and include estimated retroactive revenue adjustments due to future audits, reviews, and investigations. Retroactive adjustments are considered in the recognition of revenue on an estimated basis in the period the related services are rendered, and UCMC estimates are adjusted in future periods as adjustments become known or as years are no longer subject to UCMC audits, reviews and investigations. Contracts, laws and regulations governing Medicare, Medicaid, and Blue Cross are complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term. A portion of the accrual for settlements with third-party payors has been classified as long-term because UCMC estimates they will not be paid within one year.

The process for estimating the ultimate collectability of receivables involves significant assumptions and judgment. UCMC has implemented a standardized approach to this estimation based on the payor classification and age of outstanding receivables. Account balances are written off against the allowance when management feels it is probable the receivable will not be recovered. The use of historical collection experience is an integral part of the estimation of the reserve for doubtful accounts. Revisions in the reserve for doubtful accounts are recorded as adjustments to the provision for doubtful accounts.

Hospital Assessment Program/Medicaid Provider Tax

In December 2008, the State of Illinois, after receiving approval by the federal government, implemented a hospital assessment program. The program assessed hospitals a provider tax based on occupied bed days and provided increases in hospitals' Medicaid payments. In 2014, the federal government also approved the enhanced Medicaid Assessment Program retroactive to June 10, 2012. The program, including the enhanced assessment program, results in a net increase of \$30,200 in income from operations, which represents \$76,300 in additional Medicaid payments offset by \$46,100 in Medicaid provider tax for 2014. For 2013, the assessment program resulted in a net increase of \$28,300 in operating income, which represents \$55,000 in additional Medicaid payments offset by \$26,700 in Medicaid provider tax.

Subsequent Events

UCMC has performed an evaluation of subsequent events through October 15, 2014, which is that date the financial statements were issued, and none were identified.

3. Agreements and Transactions with the University

The Affiliation Agreement with the University provides, among other things, that all members of the medical staff will have academic appointments in the University. The Affiliation Agreement has an initial term of 40 years ending October 1, 2026 unless sooner terminated by mutual consent or as a result of a continuing breach of a material obligation therein or in the Operating Agreement. The Affiliation Agreement automatically renews for additional successive 10-year terms following expiration of the initial term, unless either party provides the other with at least two years' prior written notice of its election not to renew.

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The Operating Agreement, as amended, provides, among other things, that the University gives UCMC the right to use and operate certain facilities. The Operating Agreement is coterminous with the Affiliation Agreement.

The Lease Agreements provide, among other things, that UCMC will lease from the University certain of the health care facilities and land that UCMC operates and occupies. The Lease Agreements are coterminous with the Affiliation Agreement.

UCMC purchases various services from the University, including certain employee benefits, utilities, security, telecommunications and insurance. In addition, certain UCMC accounting records are maintained by the University. During the years ended June 30, 2014 and 2013, the University charged UCMC approximately \$31,100 and \$25,200, respectively, for utilities, security, telecommunications, insurance and overhead.

The University's Division of Biological Sciences ("BSD") provides physician services to UCMC. In 2014 and 2013, UCMC recorded approximately \$204,600 and \$191,900, respectively, in expense related to these services.

UCMC's Board of Trustees adopted a plan of support under which it would provide annual net asset transfers to the University for support of academic programs in biology and medicine. All commitments under this plan are subject to the approval of UCMC's Board of Trustees and do not represent legally binding commitments until that approval. Unpaid portions of commitments approved by the UCMC Board of Trustees are reflected as current liabilities. UCMC recorded net asset transfers of \$71,750 in 2014 and 2013 for this support.

4. Community Benefits

The unreimbursed cost of providing care under the Financial Assistance Policy, along with the unreimbursed cost of government sponsored indigent healthcare programs, unreimbursed cost to support education, clinical research and other community programs for the years ended June 30, 2014 and 2013, are as follows:

	Years Ended June 30,	
	2014	2013
Uncompensated care:		
Medicaid sponsored indigent healthcare	\$ 55,371	\$ 50,124
Medicare sponsored indigent healthcare - Cost Report	64,671	44,782
Medicare sponsored indigent healthcare - Physician Services	27,365	20,737
Total uncompensated care	<u>147,407</u>	<u>115,643</u>
Provision for doubtful accounts	13,591	12,297
Charity care	25,468	25,731
	<u>186,466</u>	<u>153,671</u>
Unreimbursed education and research:		
Education	78,823	78,917
Research	48,000	48,309
Total unreimbursed education and research	<u>126,823</u>	<u>127,226</u>
Total community benefits	<u>\$ 313,289</u>	<u>\$ 280,897</u>

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The Medical Center determines the costs associated with providing charity care by aggregating the applicable direct and indirect costs, including salaries, wages, and benefits, supplies, and other operating expenses, based on data from its costing system to determine a cost-to-charge ratio. The cost to charge ratio is applied to the charity care charge to calculate the charity care amount reported above.

5. Investments Limited as to Use

The composition of investments limited as to use is as follows at June 30:

	2014				2013
	Endowments			Total	
	Separately Invested	TRIP	Other		
Investments carried at fair value:					
Cash Equivalents	\$ 8,492	\$ 18,900	\$ 295	\$ 27,687	\$ 32,779
Global Public Equities	130,120	128,945	-	259,065	175,047
Private Debt	-	23,055	-	23,055	21,329
Private Equity					
U.S. Venture Capital	3,834	38,994	-	42,828	32,853
U.S. Corporate Finance	-	35,858	-	35,858	32,022
International	283	44,442	-	44,725	38,120
Real Assets					
Real Estate	-	59,020	-	59,020	56,978
Natural Resources	-	66,979	-	66,979	58,786
Absolute Return					
Equity Oriented	-	55,327	-	55,327	36,154
Global Macro/Relative Value	-	46,685	-	46,685	35,143
Multi-Strategy	-	60,708	-	60,708	50,457
Credit-Oriented	-	21,035	-	21,035	16,377
Protection-Oriented	-	12,287	-	12,287	11,227
Fixed Income					
U.S. Treasuries, including TIPS	77,600	49,502	-	127,102	104,869
Other Fixed Income	32,905	89,274	-	122,179	80,371
Funds in Trust	-	-	17,131	17,131	14,804
Total Investments	<u>\$ 253,234</u>	<u>\$ 751,011</u>	<u>\$ 17,426</u>	<u>\$ 1,021,671</u>	<u>\$ 797,316</u>

Investments classified as other consist of construction and debt proceeds to pay interest, donor restricted, worker's compensation, self-insurance, and trustee-held funds. Investments are presented in the financial statements as follows:

	2014	2013
Current portion of investments limited to use	\$ 11	\$ 11
Investments limited to use, less current portion	<u>1,021,660</u>	<u>797,305</u>
Total investments limited to use	<u>\$ 1,021,671</u>	<u>\$ 797,316</u>

The composition of net investment income is as follows for the years ended June 30:

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	2014	2013
Interest and dividend income, net	\$ 14,638	\$ 13,311
Realized gains on sales of securities	27,097	43,120
Unrealized gains on securities	59,424	706
	<u>\$ 101,159</u>	<u>\$ 57,137</u>

Outside of TRIP, UCMC also invests in private equity limited partnerships. As of June 30, 2014, UCMC has commitments of \$1,700 remaining to fund private equity limited partnerships.

Fair Value of Financial Instruments

The overall investment objective of the Medical Center is to invest its assets in a prudent manner that will achieve a long-term rate of return sufficient to fund a portion of its annual operating activities and increase investment value after inflation. The Medical Center diversifies its investments among various asset classes incorporating multiple strategies and external investment managers, including the University of Chicago Investment Office. Major investment decisions for investments held in TRIP and managed by the University are authorized by the University Board of Trustee's Investment Committee, which oversees the University's investment program in accordance with established guidelines.

Cash equivalent investments include cash equivalents and fixed-income investments, with maturities of less than one year, which are valued based on quoted market prices in active markets. The majority of these investments are held in U.S. money market accounts. Global public equity investments consist of separate accounts, commingled funds with liquidity ranging from daily to monthly, and limited partnerships. Securities held in separate accounts and daily-traded commingled funds are generally valued based on quoted market prices in active markets. Commingled funds with monthly liquidity are valued based on independently determined NAV. Limited partnership interests in equity-oriented funds are valued based upon NAV provided by external fund managers.

Investments in private debt, private equity, real estate, and natural resources are in the form of limited partnership interests, which typically invest in private securities for which there is no readily determinable market value. In these cases, market value is determined by external managers based on a combination of discounted cash flow analysis, industry comparables, and outside appraisals. Where private equity, real estate, and natural resources managers hold publicly traded securities, these securities are generally valued based on market prices. The value of the limited partnership interests are held at the manager's reported NAV, unless information becomes available indicating the reported NAV may require adjustment. The methods used by managers to assess the NAV of these external investments vary by asset class. The University's Investment Office on behalf of the Medical Center monitors the valuation methodologies and practices of managers.

The absolute return portfolio is comprised of investments of limited partnership interests in hedge funds and drawdown private equity style partnerships whose managers have the authority to invest in various asset classes at their discretion, including the ability to invest long and short. The majority of the underlying holdings are marketable securities. The remainder of the underlying holdings is held in marketable securities that trade infrequently or in private investments, which are valued by the manager on the basis of an appraised value, discounted cash flow, industry comparables, or some other method. Most hedge funds that hold illiquid investments designate them in special side pockets, which are subject to special restrictions on redemption.

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Fixed-income investments consist of directly held actively traded treasuries, separately managed accounts, commingled funds, and bond mutual funds that hold securities, the majority of which have maturities greater than one year. These are valued based on quoted market prices in active markets.

Funds in trust investments consist primarily of project construction funds, worker's compensation trust funds, and externally managed endowments.

The Medical Center believes that the reported amount of its investments is a reasonable estimate of fair value as of June 30, 2014 and 2013. Because of the inherent uncertainties of valuation, these estimated fair values may differ significantly from values that would have been used had a ready market existed.

	Quoted Prices in Active Markets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	2014 Total Fair Value
<u>Assets</u>				
Investments:				
Cash Equivalents	27,687	-	-	27,687
Global Public Equities	149,741	79,272	30,052	259,065
Private Debt	-	-	23,055	23,055
Private Equity				
U.S. Venture Capital	249	-	42,579	42,828
U.S. Corporate Finance	-	-	35,858	35,858
International	-	-	44,725	44,725
Real Assets				
Real Estate	1,164	-	57,856	59,020
Natural Resources	-	-	66,979	66,979
Absolute Return				
Equity Oriented	7,861	13,099	34,367	55,327
Global Macro/Relative Value	5,554	11,547	29,585	46,686
Multi-Strategy	-	6,666	54,042	60,708
Credit-Oriented	-	-	21,035	21,035
Protection-Oriented	-	12,288	-	12,288
Fixed Income				
U.S. Treasuries, including TIPS	59,014	68,087	-	127,101
Other Fixed Income	122,179	-	-	122,179
Funds in Trust	17,130	-	-	17,130
Total investments	390,579	190,959	440,133	1,021,671
Other assets	3,675	-	-	3,675
Total assets at fair value	<u>\$ 394,254</u>	<u>\$ 190,959</u>	<u>\$ 440,133</u>	<u>\$ 1,025,346</u>
<u>Liabilities</u>				
Interest rate swap payable	\$ -	\$ 95,810	\$ -	95,810
Total liabilities at fair value	\$ -	\$ 95,810	\$ -	\$ 95,810

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	Quoted Prices in Active Markets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	2013 Total Fair Value
<u>Assets</u>				
Investments:				
Cash Equivalents	32,779	-	-	32,779
Global Public Equities	95,960	50,134	28,953	175,047
Private Debt	-	-	21,329	21,329
Private Equity				
U.S. Venture Capital	-	-	32,853	32,853
U.S. Corporate Finance	-	-	32,022	32,022
International	-	-	38,120	38,120
Real Assets				
Real Estate	-	-	56,978	56,978
Natural Resources	-	-	58,786	58,786
Absolute Return				
Equity Oriented	6,369	6,169	23,617	36,155
Global Macro/Relative Value	6,125	5,740	23,278	35,143
Multi-Strategy	-	2,666	47,791	50,457
Credit-Oriented	-	-	16,376	16,376
Volatility-Oriented	-	11,227	-	11,227
Fixed Income				
U.S. Treasuries, including TIPS	58,129	46,740	-	104,869
Other Fixed Income	9,892	70,479	-	80,371
Funds in Trust	14,804	-	-	14,804
Total investments	224,058	193,155	380,103	797,316
Other assets	3,045	-	-	3,045
Total assets at fair value	<u>\$ 227,103</u>	<u>\$ 193,155</u>	<u>\$ 380,103</u>	<u>\$ 800,361</u>
<u>Liabilities</u>				
Interest rate swap payable	\$ -	\$ 88,769	\$ -	88,769
Total liabilities at fair value	\$ -	\$ 88,769	\$ -	\$ 88,769

During 2014 there were no transfers between investment Levels 1 and 2. During fiscal year 2014 and 2013, transfers occurred between investment levels 2 and 3 as a result of changes in observable market data and/or redeemability. Changes to the reported amounts of investments measured at fair value using unobservable inputs (Level 3) as of June 30, 2014 and 2013 are as follows:

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	Separately Invested	Invested in TRIP	2014 Total
Fair value, July 1, 2013	\$ 4,540	\$ 375,563	\$ 380,103
Realized gains	-	34,920	34,920
Unrealized gains	774	30,467	31,241
Purchases	30	44,344	44,374
Sales	(1,226)	(49,053)	(50,279)
Transfers	-	(225)	(225)
Fair value, June 30, 2014	<u>\$ 4,118</u>	<u>\$ 436,016</u>	<u>\$ 440,134</u>
	Separately Invested	Invested in TRIP	2013 Total
Fair value, July 1, 2012	\$ 6,233	\$ 386,206	\$ 392,439
Realized gains	-	33,429	33,429
Unrealized gains	166	(23,415)	(23,249)
Purchases	-	29,498	29,498
Sales	(1,859)	(50,278)	(52,137)
Transfers	-	123	123
Fair value, June 30, 2013	<u>\$ 4,540</u>	<u>\$ 375,563</u>	<u>\$ 380,103</u>

The interest rate swap arrangement has inputs which can generally be corroborated by market data and is therefore classified within level 2.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while UCMC believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different estimate of fair value at the reporting date.

The significant unobservable inputs used in the fair value measurement of UCMC's long-lived partnership investments include a combination of cost, discounted cash flow analysis, industry comparables and outside appraisals. Significant increases (decreases) in any inputs used by investment managers in determining net asset values in isolation would result in a significantly lower (higher) fair value measurement.

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UCMC has made investments in various long-lived partnerships and, in other cases, has entered into contractual agreements that may limit its ability to initiate redemptions due to notice periods, lockups and gates. Details on typical redemption terms by asset class and type of investment are provided below:

	Remaining Life	Redemption Terms	Redemption Restrictions and Terms
Cash	N/A	Daily	None
Global Public Equities:			
Index Funds	NA	Daily	None
Separate Accounts	N/A	Daily with notice periods of 1 to 7 years	Lock-up provisions ranging from 0 to 1 year
Partnerships	N/A	Daily to triennial with notice periods of 2 to 90 days	Lock-up provisions ranging from 0 to 5 years, some investments have a portion of capital held in side pockets with no redemptions permitted
Private Debt:			
Partnerships	N/A	Redemptions not permitted	Capital held in side pockets with no redemption permitted
Drawdown partnerships	1 to 10 years	Redemptions not permitted	N/A
Private Equity	1 to 19 years	Redemptions not permitted	N/A
Real Estate:			
Drawdown partnerships	1 to 18 years	Redemption not permitted	N/A
Separate accounts	N/A	Daily with notice period of 5 days	None
Natural resources	1 to 17 years	Redemptions not permitted	N/A
Absolute Return:			
Partnerships	N/A	Monthly to annually with varying notice periods.	Lock-up provisions ranging from 0 to 5 years, some investments have a portion of capital in side pockets with no redemptions permitted
Drawdown Partnerships	1 to 3 years	Redemptions not permitted	N/A
Fixed Income:			
Separate Accounts	N/A	Daily to monthly with notice periods of 1 to 30 days	None
Commingled Funds	N/A	Daily to monthly with notice periods of 1 to 10 days	None
Partnerships	N/A	Quarterly with notice periods of 10 days	Only one-third capital available in any 12-month period
Funds Held in Trust:	N/A	Daily	None

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6. Endowments

UCMC's endowment consists of individual donor restricted endowment funds and board-designated endowment funds for a variety of purposes plus the following where the assets have been designated for endowment: pledges receivable, split interest agreements, and other net assets. The endowment includes both donor-restricted endowment funds and funds designated by the Board of Trustees to function as endowments. The net assets associated with endowment funds including funds designated by the Board of Trustees to function as endowments, are classified and reported based on the existence or absence of donor imposed restrictions.

Illinois is governed by the "Uniform Prudent Management of Institutional Funds Act" (UPMIFA). The Board of Trustees of UCMC has interpreted UPMIFA as sustaining the preservation of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, UCMC classifies as permanently restricted net assets, (a) the original value of gifts donated to the permanent endowment, (b) the original value of subsequent gifts to the permanent endowment, and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted net assets is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by UCMC in a manner consistent with the standard of prudence prescribed by UPMIFA.

UCMC has the following donor-restricted endowment activities during the years ended June 30, 2014 and 2013 delineated by net asset class:

	<u>Unrestricted</u> Funds Functioning	Temporarily Restricted	Permanently Restricted	2014 Total
Endowment net assets, beginning of year	\$ 707,290	\$ 68,634	\$ 6,082	\$ 782,006
Investment return:				
Investment income	37,212	1,207	-	38,419
Net appreciation (realized and unrealized)	63,947	8,092	-	72,039
Total investment return	101,159	9,299	-	110,458
Gifts and other additions	87,500	-	2,000	89,500
Appropriation of endowment assets for expenditure	(40,272)	(3,850)	-	(44,122)
Replenishment of endowment assets for capital	67,215			67,215
Other	(1,196)	385	-	(811)
Endowment net assets, end of year	<u>\$ 921,696</u>	<u>\$ 74,468</u>	<u>\$ 8,082</u>	<u>\$ 1,004,246</u>

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	<u>Unrestricted</u> Funds Functioning	Temporarily Restricted	Permanently Restricted	2013 Total
Endowment net assets, beginning of year	\$ 796,105	\$ 67,279	\$ 6,072	\$ 869,456
Investment return:				
Investment income	38,437	3,518	-	41,955
Net appreciation (realized and unrealized)	18,700	1,086	-	19,786
Total investment return	57,137	4,604	-	61,741
Gifts and other additions	25,000	-	10	25,010
Appropriation of endowment assets for expenditure	(37,037)	(3,610)	-	(40,647)
Appropriation of endowment assets for capital	(132,056)			(132,056)
Other	(1,859)	361	-	(1,498)
Endowment net assets, end of year	<u>\$ 707,290</u>	<u>\$ 68,634</u>	<u>\$ 6,082</u>	<u>\$ 782,006</u>

Description of amounts classified as permanently restricted net assets and temporarily restricted net assets (Endowments only) as of June 30, 2014 and 2013:

	Perpetual	Time- Restricted by Donor	Time- Restricted by Law	2014 Total
Restricted for pediatric health care	\$ 1,845	\$ -	\$ 16,918	\$ 18,763
Restricted for adult health care	1,925	-	54,780	56,705
Restricted for educational and scientific programs	4,312	-	2,769	7,081
	<u>\$ 8,082</u>	<u>\$ -</u>	<u>\$ 74,467</u>	<u>\$ 82,549</u>

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	Perpetual	Time- Restricted by Donor	Time- Restricted by Law	2013 Total
Restricted for pediatric health care	\$ 1,855	\$ -	\$ 15,580	\$ 17,435
Restricted for adult health care	1,925	-	50,715	52,640
Restricted for educational and scientific programs	2,312	-	2,339	4,651
	<u>\$ 6,092</u>	<u>\$ -</u>	<u>\$ 68,634</u>	<u>\$ 74,726</u>

Investment and Spending Policies

UCMC has adopted endowment investment and spending policies that attempt to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of endowment assets. UCMC expects its endowment funds over time, to provide an average rate of return of approximately 6% annually. To achieve its long-term rate of return objectives, UCMC relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized gains) and current yield (interest and dividends). Actual returns in any given year may vary from this amount.

For endowments invested in TRIP, the Board of Trustees of UCMC has adopted the University's method to be used to appropriate endowment funds for expenditure, including following the University's payout formula. The University utilizes the total return concept in allocating endowment income. In accordance with the University's total return objective, between 4.5% and 5.5% of a 12-quarter moving average of the fair value of endowment investments, lagged by one year, is available each year for expenditure in the form of endowment payout. The exact payout percentage, which is set each year by the Board of Trustees with the objective of a 5% average payout over time, was 5.5% for the fiscal years ended June 30, 2014 and 2013. If endowment income received is not sufficient to support the total return objective, the balance is provided from capital gains. If income received is in excess of the objective, the balance is reinvested in the endowment.

For endowments invested apart from TRIP, UCMC calculates a payout of 4% annually on a rolling 24-month average market value. In establishing this policy, the Board considered the expected long term rate of return on its endowment.

7. Property, Plant and Equipment

The components of property, plant and equipment as of June 30 are as follows:

	2014	2013
Land and land rights	\$ 36,008	\$ 36,008
Buildings and improvements	1,288,213	1,255,542
Equipment	515,713	576,374
Construction in progress	58,313	74,688
	<u>1,898,247</u>	<u>1,942,612</u>
Less accumulated depreciation	<u>(698,340)</u>	<u>(752,989)</u>
Total property, plant and equipment, net	<u>\$ 1,199,907</u>	<u>\$ 1,189,623</u>

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UCMC's net property, plant and equipment cost includes \$10,600 representing assets under capital leases with the University, which are stated at the UCMC's historical cost. The cost of buildings that are jointly used by the University and UCMC is allocated based on the lease provisions. In addition, land and land rights includes \$17,800 and \$19,200 for 2014 and 2013, respectively, which represents the unamortized portion of initial lease payments made to the University. UCMC entered into a services agreement in 2013 for the exclusive right to operate certain food service operations at the Medical Center, which included a capital commitment in the amount of \$11,800 for equipment and renovations provided by the contractor. In 2014 UCMC terminated this food service operation agreement and settled all outstanding balances, including the capital commitment. The amount outstanding under this commitment as of June 30, 2014 and 2013 was \$0 and \$11,300, respectively.

The Center for Care and Discovery was placed into service in 2013; approximately \$134,800 was spent in 2013 related to the building.

Capitalized interest costs in 2014 and 2013 were \$60 and \$14,600, respectively.

8. Long-Term Debt

Long-term debt as of June 30 consists of the following:

	Final fiscal year maturity	Interest rate	2014	2013
Fixed rate:				
Illinois Health Facilities Authority:				
Series 2003	2015	5.0	\$ 7,410	\$ 14,530
Illinois Finance Authority:				
Series 2009A and B	2027	4.9	149,330	150,840
Series 2009C	2037	5.4	85,000	85,000
Series 2009D-1 and 2 (synthetically fixed rate)	2044	3.9	70,000	70,000
Series 2009E-1 and 2 (synthetically fixed rate)	2044	3.9	70,000	70,000
Series 2010 A and B (synthetically fixed rate)	2045	3.9	92,500	92,500
Series 2011 A and B (synthetically fixed rate)	2045	3.9	92,500	92,500
Series 2011C	2042	5.5	90,000	90,000
Series 2012A	2037	4.5	70,325	72,080
Unamortized premium			9,797	11,163
Total fixed rate			<u>736,862</u>	<u>748,613</u>
Variable rate:				
Series 2013A	2020	3.1	24,706	686
Illinois Educational Facilities Authority (IEFA)	2038	0.1	79,517	81,427
Total variable rate			<u>104,223</u>	<u>82,113</u>
Total notes and bonds payable			841,085	830,726
Less current portion of long-term debt			(10,050)	(10,385)
Long-term portion of debt			<u>\$ 831,035</u>	<u>\$ 820,341</u>

The fair value of long-term debt is based on the pricing of fixed-rate bonds of market participants, including assumptions about the present value of current market interest rates, and loans of comparable quality and maturity. The fair value of long-term debt would be a Level 2 hierarchy. The carrying value of long-term debt is below the estimated fair value of the debt by \$37,400 and \$10,729 as of June 30, 2014 and June 30, 2013, respectively, based on the quoted market prices for the same or similar issues.

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Scheduled annual repayments for the next five years are as follows at June 30:

<u>Year</u>	<u>Amount</u>
2015	\$ 10,050
2016	12,778
2017	13,255
2018	13,868
2019	14,513

Under its various indebtedness agreements, the Medical Center is subject to certain financial covenants, including maintaining a minimum debt service coverage ratio, maintaining minimum levels of days cash on hand, maintaining debt to capitalization at certain levels; limitations on selling, leasing, or otherwise disposing of Medical Center property; and certain other nonfinancial covenants. Each of the bond series is collateralized by unrestricted receivables under a Master Trust Indenture and subject to certain restrictions. The Medical Center was in compliance with its debt covenants as of June 30, 2014 and 2013.

Recent Financing Activity

In January 2013, the Medical Center entered into an issuance of a tax-exempt direct purchase loan with a financial institution, issued as \$75,000 of Series 2013A bonds allocated to the Medical Center for the purpose of constructing a new parking garage. This bond functions similar to a construction loan with principal being drawn down as construction proceeds. Interest at LIBOR plus 60 basis points is payable each month based on the outstanding principal balance. A mandatory purchase date of repayment is established for January 24, 2020.

Letters of Credit

Payment on each of the variable rate demand revenue bonds is also collateralized by a letter of credit. The letters of credit that support the Series 2009D and the Series 2009E bonds were due to expire in August 2012. The Medical Center replaced the letter of credit that supports the Series 2009D bonds with a new letter of credit in June 2012, which expires in June 2017. The letter of credit that supports the 2009E bonds was extended subsequent to June 30, 2012 and now expires in December 2014. The letters of credit that support the Series 2010A and Series 2010B bonds expire in November 2015 and the letters of credit that support the Series 2011A and Series 2011B bonds expire in May 2016. The letters of credit are subject to certain restrictions, which include financial ratio requirements and consent to future indebtedness. The most restrictive financial ratio is to maintain a debt service coverage ratio of 1.25:1. UCMC was in compliance with all applicable debt covenants at June 30, 2014.

Payment on each of the IEFA bonds is collateralized by a letter of credit maturing November 2017. The letter of credit is subject to certain restrictions, which include financial ratio requirements. The most restrictive financial ratio is to maintain a debt service coverage ratio of 1.75:1. UCMC was in compliance with all applicable debt covenants at June 30, 2014.

Included in UCMC's debt is \$79,500 of commercial paper revenue notes and \$325,000 of variable rate demand bonds. In the event that UCMC's remarketing agents are unable to remarket the bonds, the trustee of the bonds will tender them under the letters of credit. Scheduled repayments under the letters of credit are between 1 and 3 years, beginning after a grace period of at least one year, and bear interest rates different from those associated with the original bond issue. Any

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bonds tendered are still eligible to be remarketed. Bonds subsequently remarketed would be subject to the original bond repayment schedules.

UCMC paid interest, net of capitalized interest, of approximately \$33,500 and \$18,300 in 2014 and 2013, respectively.

UCMC has a \$15,000 line of credit from a commercial bank. As of June 30, 2014 and 2013, no amount was outstanding under this line.

9. Commitments

Leases

UCMC has capital and noncancelable operating leases for certain buildings and equipment. Future minimum payments required under noncancelable operating and capital leases as of June 30 are as follows:

	Operating	Capital
2015	\$ 2,074	\$ 147
2016	2,102	-
2017	548	-
2018	559	-
2019 and thereafter	6,249	-
Total minimum lease payments	<u>\$ 11,532</u>	147
Less - Amount representing interest		<u>2</u>
Present value of net minimum capital lease payments		<u>\$ 145</u>

The amount of total assets capitalized under these leases at June 30, 2014 and 2013, is \$2,300 and \$3,000 with related accumulated depreciation of \$2,000 and \$2,400, respectively. Rental expense was approximately \$5,500 and \$5,500 for the years ended June 30, 2014 and 2013, respectively, including a \$500 annual rental of a parking garage from the University.

10. Insurance

UCMC is included under certain of the University's insurance programs. Since 1977, UCMC, in conjunction with the University, has maintained a self-insurance program for its medical malpractice liability. This program is supplemented with commercial excess insurance above the University's self-insurance retention, which for the years ended June 30, 2014 and 2013 was \$5,000 per claim and unlimited in the aggregate. Claims in excess of \$5,000 are subject to an additional self-insurance retention limited to \$12,500 per claim and \$12,500 in aggregate.

The estimated liability for medical malpractice self-insurance is actuarially determined based upon estimated claim reserves and various assumptions, and represents the estimated present value of self-insurance claims that will be settled in the future. It considers anticipated payout patterns as well as interest to be earned on available assets prior to payment. The discount rate used to value the self-insurance liability is a risk-adjusted rate commensurate with the duration of anticipated payments. These inputs to the fair value estimate of the liability are considered Level 2 in the fair value hierarchy.

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A comparison of the estimated liability for incurred malpractice claims (filed and not filed) and net assets for the combined University and UCMC self-insurance program as of June 30, 2014 and 2013, is presented below:

	2014	2013
Actuarial present value of self-insurance liability for medical malpractice	\$ 238,552	\$ 254,328
Total assets available for claims	<u>\$ 332,592</u>	<u>\$ 352,414</u>

If the present-value method were not used, the ultimate liability for medical malpractice self-insurance claims would be approximately \$43,100 higher at June 30, 2014. The interest rate assumed in determining the present value was 4.25% for 2014 and 4.5% for 2013. The Medical Center has recorded its pro-rata share of the malpractice self-insurance liability as required under ASU 2010-24 in the amount of \$115,400 at June 30, 2014 and \$121,300 at June 30, 2013 with an offsetting receivable from the malpractice trust to cover any related claims.

The malpractice self-insurance trust assets consist primarily of funds held in TRIP.

UCMC recognizes as malpractice expense its negotiated pro-rata share of the actuarially determined normal contribution, with gains and losses amortized over five years, with no retroactive adjustments, as provided in the operating agreement. For fiscal year 2015, the Medical Center expense will be \$16,800 related to malpractice.

UCMC designated \$17,100 and \$14,800 as of June 30, 2014 and 2013, respectively, as a workers' compensation self-insurance reserve trust fund. The self-insurance program investments consist of approximately 60% bonds and 40% marketable equities. The specifically identified claim requirements and actuarially determined reserve requirements for unreported workers' compensation claims were \$8,200 and \$9,500 as of June 30, 2014 and 2013, respectively. The University also charges UCMC for its portion of other commercial insurance and self-insurance costs.

11. Pension Plans

Active Plans

A majority of UCMC's personnel participate in the University's defined benefit and contribution pension plan. Under the defined benefit portion of this plan, benefits are based on years of service and the employee's compensation for the five highest paid consecutive years within the last ten years of employment. UCMC and the University make annual contributions to this portion of the plan at a rate necessary to maintain plan funding on an actuarially recommended basis. UCMC recognizes its share of net periodic pension cost as expense and any difference in the contribution amount as a transfer of unrestricted net assets. The reduction to net assets for 2014 and 2013 was \$1,000 and \$2,800, respectively. Contributions of \$32,500 were made in the fiscal years ended June 30, 2014 and 2013. UCMC expects to make contributions of \$32,500 for the fiscal year ended June 30, 2015 that will be entirely expensed as net periodic pension costs.

Under the defined contribution portion of the plan, UCMC and plan participants make contributions that accrue to the benefit of the participants at retirement. UCMC's contributions, which are based on a percentage of each covered employee's salary, totaled approximately \$6,700 and \$6,400 for the years ended June 30, 2014 and 2013, respectively.

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Plan Name	EIN	Contributions of UCMC	
		2014	2013
University of Chicago Retirement Income Plan for Employees	36-2177139-002	\$ 7,920	\$ 6,711
University of Chicago Pension Plan for Staff Employees	36-2177139-003	24,580	25,789
		<u>\$ 32,500</u>	<u>\$ 32,500</u>

The benefit obligation, fair value of plan assets and funded status for the University's defined benefit plan included in the University's financial statements as of June 30, are shown below:

	2014	2013
Projected benefit obligation	\$ 916,791	\$ 795,133
Fair value of plan assets	<u>671,793</u>	<u>557,966</u>
Deficit of plan assets over benefit obligation	<u>\$ (244,998)</u>	<u>\$ (237,167)</u>

The weighted-average assumptions used in the accounting for the plan are shown below:

	2014	2013
Discount rate	4.3 %	4.9 %
Expected return on plan assets	6.5 %	6.5 %
Rate of compensation increase	3.5 %	3.5 %

The weighted average asset allocation for the plan is as follows:

	2014	2013
Domestic equities	28 %	29 %
International equity	16 %	15 %
Fixed income	<u>56 %</u>	<u>56 %</u>
	<u>100 %</u>	<u>100 %</u>

The pension and other postretirement benefit obligation considers anticipated payout patterns as well as investment returns on available assets prior to payment. The discount rate used to value the pension and other postretirement benefit obligation is a risk-adjusted rate commensurate with the duration of anticipated payments. These inputs to the fair value estimate are considered Level 2 in the fair value hierarchy.

Total benefits and plan expenses paid by the plan were \$39,300 and \$36,200 for the fiscal years ended June 30, 2014 and 2013, respectively.

Expected future benefit payments excluding plan expenses are as follows:

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Fiscal Year

2015	70,010
2016	46,975
2017	48,850
2018	50,719
2019	52,682
2020-2024	306,906

Certain UCMC personnel participate in a contributory pension plan. Under this plan, UCMC and plan participants make annual contributions to purchase annuities equivalent to retirement benefits earned. UCMC's pension expense for this plan was \$5,000 and \$4,900 for the years ended June 30, 2014 and 2013, respectively.

Curtailed and Frozen Plan

In June 2002, UCMC assumed sponsorship of the Louis A. Weiss Memorial Hospital Pension Plan (Employer Identification Number 36-3488183, Plan Number 003), which covers employees of a former affiliate. Participation and benefit accruals are frozen. All benefit accruals are fully vested.

Components of net periodic pension cost and other amounts recognized in unrestricted net assets include the following:

	Years Ended June 30,	
	2014	2013
Net periodic pension cost		
Interest cost	\$ 2,485	\$ 2,340
Expected return on plan assets	(2,794)	(2,860)
Amortization of unrecognized net actuarial loss	675	817
Net periodic pension cost	366	297
Other changes in plan assets and benefit obligations recognized in unrestricted net assets		
Liability for pension benefits	1,337	3,878
Total recognized in net periodic pension cost and unrestricted net assets	\$ (971)	\$ (3,581)

The following tables set forth additional required pension disclosure information for this plan:

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	Years Ended June 30,	
	2014	2013
Change in projected benefit obligation		
Benefit obligation at beginning of year	\$ 54,090	\$ 58,098
Interest cost	2,485	2,340
Net actuarial loss (gain)	3,237	(3,029)
Benefits paid	<u>(3,402)</u>	<u>(3,319)</u>
	<u>56,410</u>	<u>54,090</u>
Change in plan assets		
Fair value of plan assets at beginning of year	48,360	47,696
Actual return on plan assets	6,693	2,892
Employer contribution	1,500	1,091
Benefits paid	<u>(3,402)</u>	<u>(3,319)</u>
	<u>53,151</u>	<u>48,360</u>
Funded status at end of year	<u>\$ (3,259)</u>	<u>\$ (5,730)</u>

Amounts recognized in the balance sheet are included in noncurrent liabilities.

Accumulated plan benefits equal projected plan benefits. Assumptions used in the accounting for the net periodic pension cost were as follows:

	2014	2013
Discount rate	4.2 %	4.8 %
Expected return on plan assets	6.0 %	6.0 %
Rate of compensation increase	N/A	N/A

Weighted average asset allocations for plan assets are as follows:

	2014	2013
Cash	1 %	2 %
Fixed income	56	51
Domestic equities	29	34
International equities	<u>14</u>	<u>13</u>
	<u>100 %</u>	<u>100 %</u>

All plan assets are valued using level 1 inputs. The target asset allocation is 40% equities and 60% fixed income. The expected return on plan assets is based on historical investment returns for similar investment portfolios.

UCMC expects to make contributions of \$1,500 to the plan in the fiscal year ending June 30, 2015. Expected future benefit payments are:

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Fiscal Year

2015	\$	3,635
2016		3,611
2017		3,607
2018		3,609
2019		3,637
2020-2024		18,349

12. Concentration of Credit Risk

As a hospital, UCMC is potentially subject to concentration of credit risk from patient accounts receivable and certain investments. Investments, which include government and agency securities, stocks, corporate bonds, real assets, absolute return, and private equities, are not concentrated in any corporation or industry or with any single counter-party. UCMC receives a significant portion of its payments for services rendered from a limited number of government and commercial third-party payors, including Medicare, Medicaid, and Blue Cross. Medicaid approximated 16% of the Medical Center's net revenue for 2014 and 2013. Medicaid represented 21% and 17% of UCMC's net accounts receivable at June 30, 2014 and 2013, respectively. Management does not anticipate any collection risk related to the Medicaid accounts receivable at June 30, 2013. UCMC has not historically incurred any significant credit losses outside the normal course of business.

13. Pledges

Pledges receivable at June 30 are shown below:

	2014	2013
Unconditional promises expected to be collected in:		
Less than one year	\$ 2,420	\$ 2,272
One year to five years	2,142	2,634
More than five years	-	-
	<u>4,562</u>	<u>4,906</u>
Less unamortized discount (discount rate 5.5%)	<u>(71)</u>	<u>(197)</u>
Total	<u>\$ 4,491</u>	<u>\$ 4,709</u>

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14. Restricted Net Assets

Temporarily restricted net assets are available for the following purposes as of June 30:

	2014	2013
Pediatric health care	\$ 19,541	\$ 17,943
Adult health care	56,505	51,756
Educational and scientific programs	4,774	4,691
Capital and other purposes	7,134	7,581
Total	<u>\$ 87,954</u>	<u>\$ 81,971</u>

Income from permanently restricted net assets is restricted for:

	2014	2013
Pediatric health care	\$ 1,855	\$ 1,855
Adult health care	1,925	1,925
Educational and scientific programs	4,312	2,312
Total	<u>\$ 8,092</u>	<u>\$ 6,092</u>

15. Functional Expenses

Total operating expenses by function are as follows for the years ended June 30:

	2014	2013
Health care services	\$ 1,285,218	\$ 1,177,672
General and administrative	92,922	78,287
Total	<u>\$ 1,378,140</u>	<u>\$ 1,255,959</u>

16. Contingencies

UCMC is subject to complaints, claims and litigation which have risen in the normal course of business. In addition, UCMC is subject to reviews by various federal and state government agencies to assure compliance with applicable laws, some of which are subject to different interpretations. While the outcome of these suits cannot be determined at this time, management, based on advice from legal counsel, believes that any loss which may arise from these actions will not have a material adverse effect on the financial position or results of operations of UCMC.