



Marion County Hospital District Board of Trustees Meeting

2547 E. Silver Springs Blvd., Ocala, FL 34470

Date: May 18, 2026

Time: 5:00 PM

Mission Statement

We are committed to improving health outcomes for all residents of Marion County by enhancing access to care, expanding local capacity, and advancing innovations in health resources, prevention, and treatment.

Vision Statement

A future where Marion County's expanded health system, innovative education, and community partnerships ensure that every resident has the resources, knowledge, and access to live not only longer lives, but healthier, more vibrant ones.





May 18, 2026
at 5:00 PM

**Board of Trustees Meeting Agenda
Teresa Stephens, Chairman**

1. Call to Order, Roll Call, Agenda and Invocation

2. Public Comments

If you wish to address the board regarding any of the items on the agenda, you may do so when the Chairman opens the floor to public comment. Public comments will be limited to 3 minutes per speaker.

3. Approval of MCHD Previous Minutes

- April 27, 2026, Board Meeting.....Pages 3-6

4. New Business

- **CEO Update**.....Page 7
 - Speaker: AdventHealth
- **Investments**
 - Wilshire Overview.....Pages 8-30
 - Alternative Management RFP 26-01Resolution –Need Board Action.....Page 31
- **Operations**
 - Alternative Management RFP 26-02 – Needs Approval.....Pages 32-43
 - Beacon Point Lease Transition for Domestic Violence Outreach –Needs Approval.....Page 44
 - City of Ocala Fire House Lease Resolution –Lease Revocation.....Pages 45-46
 - Landscaping Plans for Beacon Point –Needs Approval.....Page 47
 - Balanced Scorecard Quarterly Update.....Pages 48-49
- **Strategic Initiatives**
 - FANS Video Winners.....Page 50
 - Beacon Point Parking Lot Update.....Page 51
 - Quarterly Updates:.....Pages 52-63
 - Beacon Point
 - Health Projects
 - Match
- **Finance**
 - April 2026 Financials –Needs Approval.....Pages 64-77

5. Old Business

6. Open Discussion

7. Adjournment



April 27, 2026
MCHD Board Minutes
Teresa Stephens, Chairman

Call to Order

The Marion County Hospital District Board of Trustees regular monthly meeting was called to order by Teresa Stephens on April 27, 2026, with a quorum present at 5:00 PM at 2547 E. Silver Springs Blvd. Ocala, FL.

5:00 PM Roll Call

Upon roll call the following Board Members were present in the office: Teresa Stephens, Rusty Branson, Ken Kirkpatrick, Mark Ortolani, Stephanie Harrell, Harvey Vandeven

Absent

Loretha Tolbert – Rich

Other Present in Office

Curt Bromund, Jessica Cole, Crystal Pfriendr, Matt White, Kimberly Glancy, Kenneth Mackay, Matthew McClain, Bruce Ackerman, Nathan Howes (via Zoom), Iffy Akwule Udochi (via Zoom), Mark Bendinelli (via Zoom), TJ Loew (via Zoom), Brian Creekbaum

Invocation

The meeting opened with invocation by Rusty Branson.

Public Comment (3 Minutes)

None.

ADOPTION OF PREVIOUS MINUTES

The MCHD March 30, 2026 Board Meeting Minutes were presented for approval. Ken Kirkpatrick made a motion, seconded by Rusty Branson, to adopt the previous minutes. With no further discussion or objections, the motion was unanimously approved.

New Business

CEO Update –Curt Bromund delivered his CEO update, as outlined in the board packet.



INVESTMENT REPORT

New Business

Teresa Stephens opened the Investment Report.

Cresset Semi – Annual Update – Mark Bendinelli of Cresset provided a review of the firm's investment overview via Zoom.

Graystone Semi-Annual Update – TJ Loew of Graystone provided a review of the firm's investment overview via Zoom.

Wilshire Overview – Iffy Akwule Udochi provided Wilshire's investment overview via Zoom.

Alternative RFP – Curt Bromund shared that six proposals were received in response to the Alternative Investment Management RFP. Five proposals were determined not to meet the minimum requirements outlined in the RFP. GCM Grosvenor was the only respondent determined to meet the minimum qualifications.

Because only one firm met the minimum requirements, the trustees discussed authorizing Teresa Stephens to work with Wilshire on negotiations with GCM Grosvenor and bring the results back to the Board for consideration to either move forward with the agreement or reissue the RFP.

Mark Ortolani made a motion, seconded by Harvey Vandeven to authorize Teresa Stephens to negotiate fees with GCM Grosvenor and bring the negotiated terms back to the Board for review. With no further discussion or objections, the motion was unanimously approved.

Old Business

None.



OPERATIONS REPORT

Rusty Branson opened the Operations Report.

New Business

457B Plan – Rusty Branson discussed the 457(b) plan for Marion County Hospital District staff. Staff have expressed interest in access to an additional tax-advantaged savings option to support long-term financial planning and flexibility. The anticipated cost to Marion County Hospital District would include a one-time setup fee of \$500, an annual administrative fee of \$2,000, and an estimated cost of \$45 per participating employee.

Ken Kirkpatrick made a motion, seconded by Stephanie Harrell to approve the 457(b) plan for Hospital District Employees. With no further discussion or objections, the motion was unanimously approved.

Old Business

None.

STRATEGIC INITIATIVES REPORT

Stephanie Harrell opened the Strategic Initiatives Report.

New Business

FANS Event, April 29, 2026 – FANS End-of-Year Banquet will be held on Wednesday, April 29, at 5:00 p.m. at the Klein Center at College of Central Florida. Stephanie Harrell shared that trustees are invited to attend.



Beacon Point Parking Lot Addition – During construction of the Beacon Point parking lot project, an existing telephone line and a 4-inch fire line were identified within the drainage retention area that required relocation. A budgetary estimate of \$5,000 was received from CenturyLink for the cable relocation and \$10,000 from Miller for the fire line relocation. At that time, no feasible alternative option was identified, and we had to move forward with the project and approve these two expenditures. Staff is requesting that the Board ratify the \$10,000 expenditure for the fireline relocation. The project remains under budget.

Rusty Branson made a motion, seconded by Stephanie Harrell, to ratify the \$10,000 expenditure for the fire line relocation. With no further discussion or objections, the motion was unanimously approved.

Quarterly Updates: AMP, FANS, CHP – Jessica Cole discussed the AMP, FANS, and CHP quarterly updates, provided in the board packet.

Old Business

None.

FINANCE REPORT

March 2026 Financials – Matt White reviewed the March 2026 financial statements, as presented in the board packet.

Harvey Vandeven made a motion, seconded by Stephanie Harrell to approve the March 2026 financials. With no further discussion or objections, the motion was unanimously approved.

Old Business

Harvey Vandeven mentioned that the parking lot at Beacon Point is expected to be paved within the next couple of weeks.

Open Discussion

None.

Teresa Stephens adjourned the meeting at 5:59 PM.

CEO Update

Introduction to AdventHealth Ocala Community Impact Presentation

This month, I asked AdventHealth Ocala to provide a brief overview of their community impact in Marion County since assuming operations of our leased hospital facilities in 2018, including the expansion of services, community benefit, and more than \$278 million in capital expenditures through 2025.

As a brief historical reminder for our Board and community, the Marion County Hospital District was created by the Florida Legislature in 1965 to improve the health of Marion County residents and operated Munroe Regional Medical Center as a public hospital for decades. However, by the late 2000s and early 2010s, independent financial analyses revealed that the hospital's financial position was deteriorating due to declining inpatient volumes, increasing uncompensated care, reductions in governmental reimbursement, and growing capital needs. Although the hospital remained solvent, experts concluded that long-term viability was increasingly uncertain and that substantial, additional funding would be needed to sustain operations and future facility improvements.

After extensive due diligence, evaluation of alternatives, and a failed tax referendum, key community leaders and the Hospital District Board of Trustees decided that the most sustainable option was to lease hospital operations to a private health system rather than require local taxpayers to subsidize a public hospital model with anticipated operating losses and capital obligations. In 2014, the Hospital District entered into a long-term lease agreement with Community Health Systems (CHS), and in 2018, AdventHealth assumed operations of the leased facilities. This approach shifted the burden of major hospital capital expenditures, facility modernization, technology investments, physician recruitment, and operational risk away from taxpayers, while supporting local access to essential healthcare services.

The long-term benefit of this strategy is significant. Rather than spending public dollars on hospital operations and infrastructure, the Hospital District focused its strategies on designing a sustainable health foundation model - preserving and prudently growing its corpus while incrementally increasing investments into evidence-based health improvement initiatives. Since the lease transition, the Hospital District's investment portfolio has grown from \$212 million to approximately \$326 million, allowing us to sustainably increase annual investments in health improvement projects from \$2 million to more than \$16 million per year, while keeping pace with inflation. These investments now support critical countywide initiatives focused on behavioral health and substance use disorders, diabetes and metabolic disease, oral health, unintentional injuries, early detection of disease, and safety net programs for uninsured and underinsured citizens. This strategy has positioned Marion County to benefit from both a growing regional healthcare system and a sustainable local health improvement model.

With that background, I would now like to invite AdventHealth Ocala to provide an overview of their impact in Marion County since assuming operations in 2018, including new services, investments, community benefit, and future plans for our community.

Wilshire

Marion County Hospital District

Monthly Investment Summary

Apr-2026

8

Total Fund Performance

| | Since Inception ¹ (%) | 3 Years (%) | 1 Year (%) | YTD (%) |
|-------------------------|----------------------------------|--------------|--------------|-------------|
| Total Fund | 11.37 | 10.34 | 14.03 | 3.31 |
| <i>CPI + 4%</i> | <i>7.21</i> | <i>6.94</i> | <i>7.56</i> | <i>4.04</i> |
| <i>Policy Benchmark</i> | <i>12.72</i> | <i>11.50</i> | <i>16.01</i> | <i>4.74</i> |

Active Management Quartile Rank

| Asset Class | 3 Years | 1 Year |
|------------------------------|-----------------|-----------------|
| U.S. Equity | 3 rd | 3 rd |
| Non-U.S. Equity ² | - | 3 rd |
| Fixed Income | 2 nd | 2 nd |
| Public Real Assets | - | 1 st |

Asset Class Performance

| Composite | Since Inception (%) | 3 Years (%) | 1 Year (%) | YTD (%) |
|-------------------------------|---------------------|-------------|------------|---------|
| U.S. Equity | 20.89 | 19.74 | 29.36 | 6.28 |
| Non-U.S. Equity | 20.05 | 14.96 | 25.67 | 7.26 |
| Private Equity | 0.15 | 0.22 | 2.11 | 1.49 |
| Private Credit | 5.01 | - | 6.17 | 1.31 |
| Directional Marketable Alts. | 2.94 | - | 6.62 | -0.92 |
| Fixed Income | 4.66 | 3.88 | 3.94 | 0.14 |
| Public Real Assets | 14.35 | - | 26.88 | 17.09 |
| Diversifying Marketable Alts. | 5.76 | - | 8.63 | 1.64 |

Total Fund Snapshot

| | Expected Return ³ (%) | Annual Manager Fee ⁴ (%) | Liquidity Profile (Normal / Crisis) |
|-------------------|----------------------------------|-------------------------------------|-------------------------------------|
| Total Fund | 7.40 | 1.23 | 71% / 33% |
| Cresset | - | 1.37 | - |
| Graystone | - | 1.45 | - |

¹Since inception date is 10/1/2022 due to lack of aggregated portfolio return data prior to Wilshire's engagement.

²There are no actively-managed Non-U.S. Equity strategies with 3 years of performance history, subsequent to the Trust investment.

³As of 3/31/2026

⁴As of 6/30/2025

Market Commentary

Month Ended April 30, 2026

U.S. Economy and Markets

- The broad U.S. equity market was up in April as the Wilshire 5000 IndexSM returned 10.30%, with a return of 31.37% for the past 12 months.
- Large-cap stocks underperformed their small-cap counterparts for the month, with the Wilshire Large Cap IndexSM and the Wilshire Small Cap IndexSM returning 10.24% and 11.10%, respectively.
- Performance across GICS sectors was mostly up during April. Communication services and information technology were the best performing sectors for the month while energy was the only negative sector.

International Economy and Markets

- Developed international equity markets, as measured by the MSCI EAFE Index, returned 7.45% this month. The MSCI Emerging Markets Index produced a gain in April, up 14.71%.
- The U.S. dollar weakened versus advanced foreign economies during the month, resulting in the developed markets' local currency return being lower than those converted back to dollars.

Fixed Income & Real Assets

- Core bonds posted a gain of 0.11% in April as the 10-year U.S. Treasury yield rose modestly by 5 basis points.
- High yield corporate bonds were up 1.69% as credit spreads were down for the month, by 49 basis point in the high yield market. Leveraged loans were up for the month at 1.29%, below longer-duration bonds.
- Listed real asset markets were up in April with the Wilshire Global Real Estate Securities IndexSM returning 8.62% and the FTSE Global Core Infrastructure Index up 3.60%.
- Commodities, as measured by the Bloomberg Commodity Index, were positive at 4.21% in April.

Monthly Index Performance

Periods Ended April 30, 2026

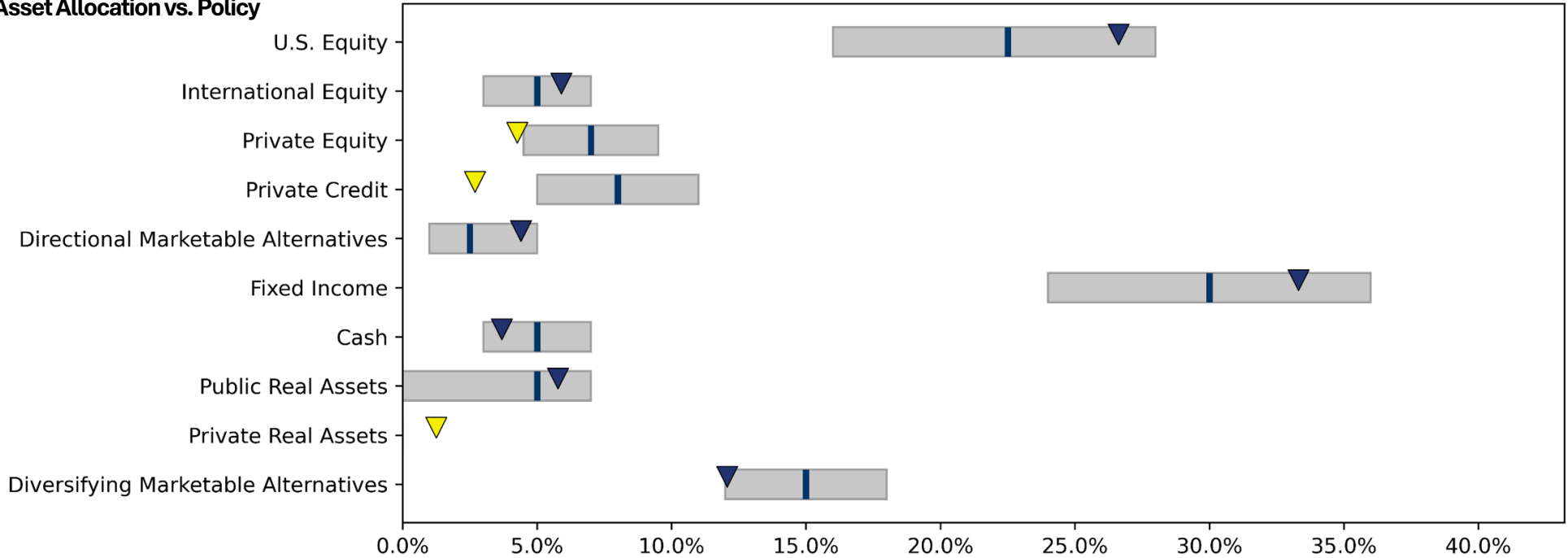
| | Performance (%) | | | | | |
|---|-----------------|-------|--------|---------|---------|----------|
| | 1 Month | YTD | 1 Year | 3 Years | 5 Years | 10 Years |
| U.S. Equity | | | | | | |
| Wilshire 5000 Total Market Index | 10.30 | 6.03 | 31.37 | 21.38 | 12.14 | 14.92 |
| S&P 500 Index | 10.49 | 5.70 | 31.05 | 21.69 | 13.14 | 15.26 |
| Wilshire 4500 Completion Index | 10.36 | 9.31 | 34.06 | 19.87 | 6.80 | 12.73 |
| MSCI USA Minimum Volatility Index | 2.05 | 0.88 | 4.00 | 10.45 | 7.42 | 10.12 |
| <i>U.S. Equity by Size/Style</i> | | | | | | |
| Wilshire U.S. Large-Cap Index | 10.24 | 5.49 | 30.70 | 21.67 | 12.67 | 15.39 |
| Wilshire U.S. Large-Cap Growth Index | 12.72 | 1.59 | 29.64 | 25.10 | 13.70 | 17.70 |
| Wilshire U.S. Large-Cap Value Index | 6.31 | 9.67 | 28.30 | 16.45 | 10.70 | 12.12 |
| Wilshire U.S. Small-Cap Index | 11.10 | 13.79 | 40.65 | 17.44 | 6.43 | 11.00 |
| Wilshire U.S. Small-Cap Growth Index | 12.97 | 14.65 | 40.67 | 17.40 | 5.03 | 11.66 |
| Wilshire U.S. Small-Cap Value Index | 9.29 | 13.09 | 41.00 | 17.59 | 7.95 | 10.13 |
| Wilshire U.S. Micro-Cap Index | 12.98 | 15.07 | 65.92 | 20.12 | 2.77 | 9.11 |
| Non-U.S. Equity (USD) | | | | | | |
| MSCI AC World ex USA (Net) | 9.65 | 8.88 | 32.20 | 17.39 | 8.38 | 9.10 |
| MSCI ACWI ex USA Minimum Volatility Index (Net) | 3.03 | 3.04 | 12.13 | 11.05 | 6.61 | 6.27 |
| MSCI EAFE (Net) | 7.45 | 6.12 | 24.60 | 15.30 | 8.83 | 8.85 |
| MSCI Emerging Markets (Net) | 14.71 | 14.52 | 46.68 | 20.67 | 6.05 | 9.23 |
| MSCI AC World ex USA Small Cap (Net) | 9.87 | 9.34 | 34.14 | 16.73 | 6.70 | 8.73 |
| U.S. Fixed Income & Real Assets | | | | | | |
| Blmbg. U.S. Aggregate Index | 0.11 | 0.07 | 4.06 | 3.46 | 0.18 | 1.67 |
| Blmbg. U.S. Treasury: Long | -0.68 | -1.08 | 0.88 | -1.90 | -5.14 | -0.82 |
| Blmbg. U.S. Long Corporate Index | 0.41 | -0.79 | 5.47 | 2.95 | -1.74 | 2.40 |
| Blmbg. U.S. TIPS Index | 1.15 | 1.42 | 4.06 | 3.54 | 1.43 | 2.75 |
| Blmbg. U.S. Credit Index | 0.45 | -0.03 | 5.25 | 4.50 | 0.65 | 2.62 |
| Blmbg. U.S. Corp: High Yield Index | 1.69 | 1.19 | 8.84 | 8.85 | 4.35 | 5.90 |
| Morningstar LSTA U.S. Leveraged Loan | 1.29 | 0.73 | 6.22 | 8.08 | 6.09 | 5.53 |
| Wilshire Global Real Estate Securities Index | 8.62 | 9.41 | 14.13 | 10.71 | 4.53 | 5.55 |
| FTSE Global Core Infrastructure 50/50 Index | 3.60 | 12.22 | 21.14 | 12.71 | 8.66 | 8.84 |
| Bloomberg Commodity Index Total Return | 4.21 | 29.65 | 44.82 | 15.75 | 13.17 | 7.58 |

Asset Allocation

MCHD Total Fund Composite

Periods Ended As of April 30, 2026

Asset Allocation vs. Policy

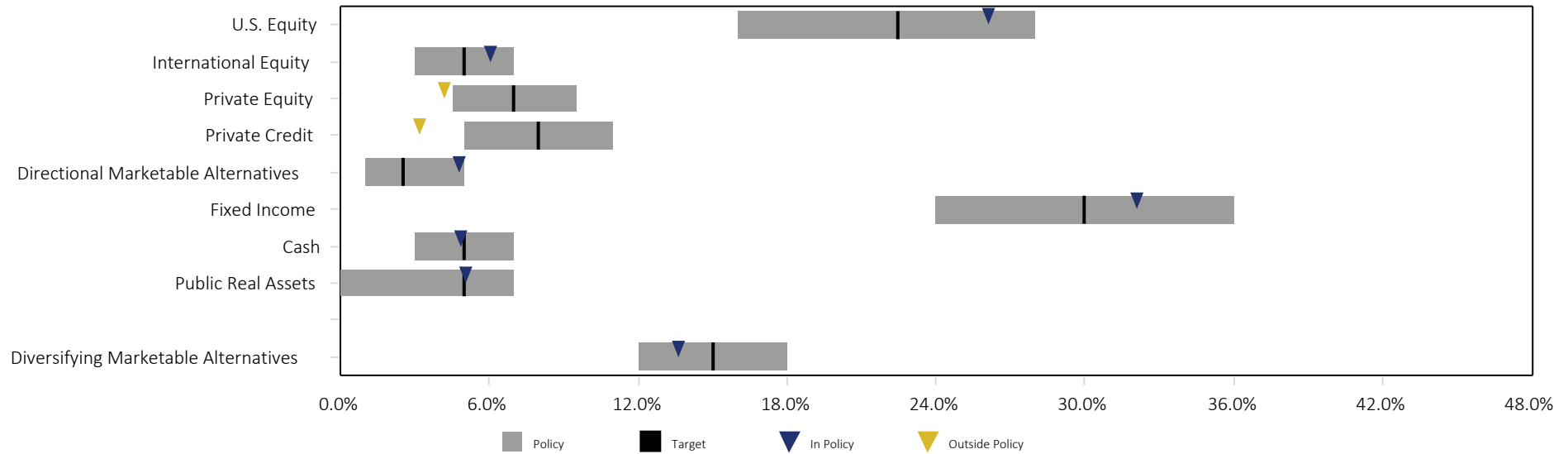


| | Asset Allocation \$ | Asset Allocation (%) | Minimum Allocation (%) | Maximum Allocation (%) | Target Allocation (%) | Target Rebalance \$ |
|--------------------------------------|------------------------|-------------------------|------------------------------|------------------------------|-----------------------------|---------------------------|
| Total Fund | 332,221,580 | 100.0 | | | 100.0 | |
| U.S. Equity | 88,455,342 | 26.6 | 16.0 | 28.0 | 22.5 | -13,705,487 |
| International Equity | 19,611,158 | 5.9 | 3.0 | 7.0 | 5.0 | -3,000,079 |
| Private Equity | 14,166,440 | 4.3 | 4.5 | 9.5 | 7.0 | 9,089,071 |
| Private Credit | 8,947,145 | 2.7 | 5.0 | 11.0 | 8.0 | 17,630,581 |
| Directional Marketable Alternatives | 14,626,653 | 4.4 | 1.0 | 5.0 | 2.5 | -6,321,114 |
| Core Fixed Income | 110,686,344 | 33.3 | 24.0 | 36.0 | 30.0 | -11,019,870 |
| Cash | 12,261,475 | 3.7 | 3.0 | 7.0 | 5.0 | 4,349,604 |
| Public Real Assets | 19,200,077 | 5.8 | 0.0 | 7.0 | 5.0 | -2,588,998 |
| Private Real Assets | 4,164,175 | 1.3 | 0.0 | 0.0 | 0.0 | -4,164,175 |
| Diversifying Marketable Alternatives | 40,102,771 | 12.1 | 12.0 | 18.0 | 15.0 | 9,730,466 |

Asset Allocation

Total Fund - Cresset
 Periods Ended As of April 30, 2026

Asset Allocation vs. Policy



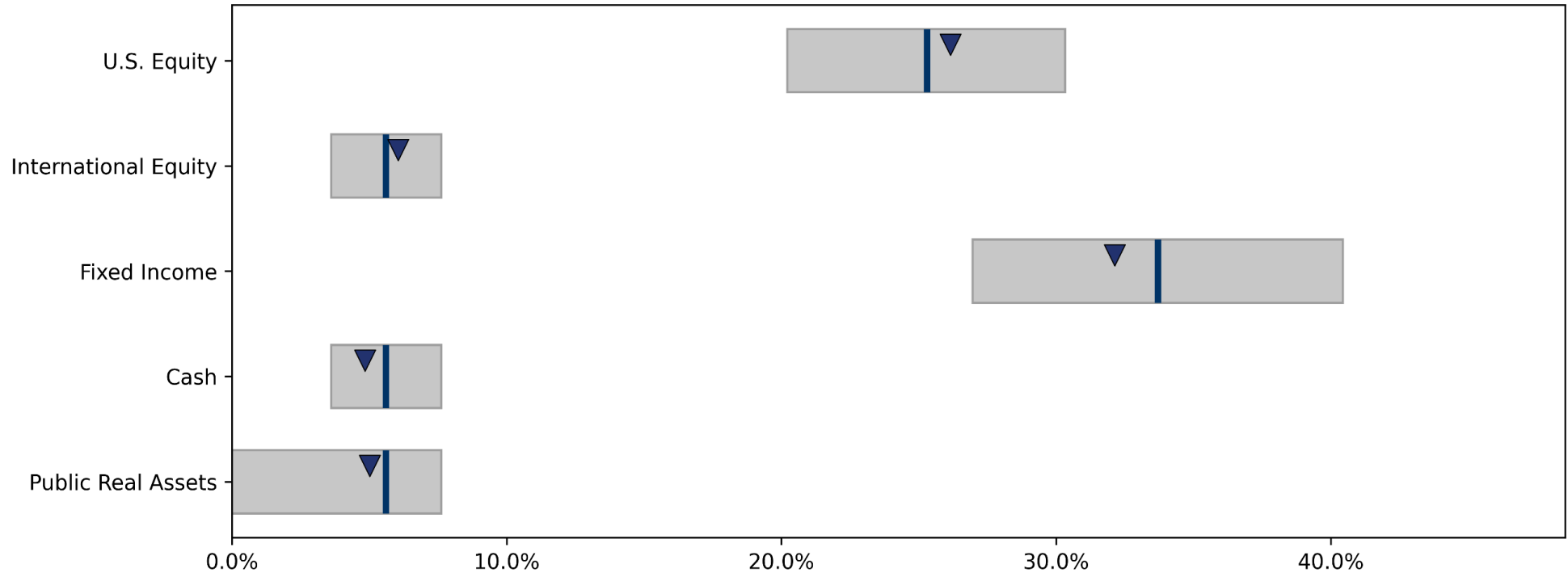
| | Asset Allocation \$ | Asset Allocation (%) | Minimum Allocation (%) | Maximum Allocation (%) | Target Allocation (%) | Target Rebalance \$ |
|--------------------------------------|------------------------|-------------------------|---------------------------|---------------------------|--------------------------|------------------------|
| Total Fund - Cresset | 162,133,730 | 100.0 | | | 100.0 | |
| U.S. Equity | 42,412,553 | 26.2 | 16.0 | 28.0 | 22.5 | -5,932,464 |
| International Equity | 9,818,883 | 6.1 | 3.0 | 7.0 | 5.0 | -1,712,197 |
| Private Equity | 6,807,594 | 4.2 | 4.5 | 9.5 | 7.0 | 4,541,767 |
| Private Credit | 5,175,249 | 3.2 | 5.0 | 11.0 | 8.0 | 7,795,449 |
| Directional Marketable Alternatives | 7,763,355 | 4.8 | 1.0 | 5.0 | 2.5 | -3,710,012 |
| Fixed Income | 52,105,194 | 32.1 | 24.0 | 36.0 | 30.0 | -3,465,075 |
| Cash | 7,862,622 | 4.8 | 3.0 | 7.0 | 5.0 | 244,065 |
| Public Real Assets | 8,142,269 | 5.0 | 0.0 | 7.0 | 5.0 | -35,583 |
| Diversifying Marketable Alternatives | 22,046,011 | 13.6 | 12.0 | 18.0 | 15.0 | 2,274,049 |

Asset Allocation

Cresset – Traditional Only Portfolio

Periods Ended As of April 30, 2026

Asset Allocation vs. Policy

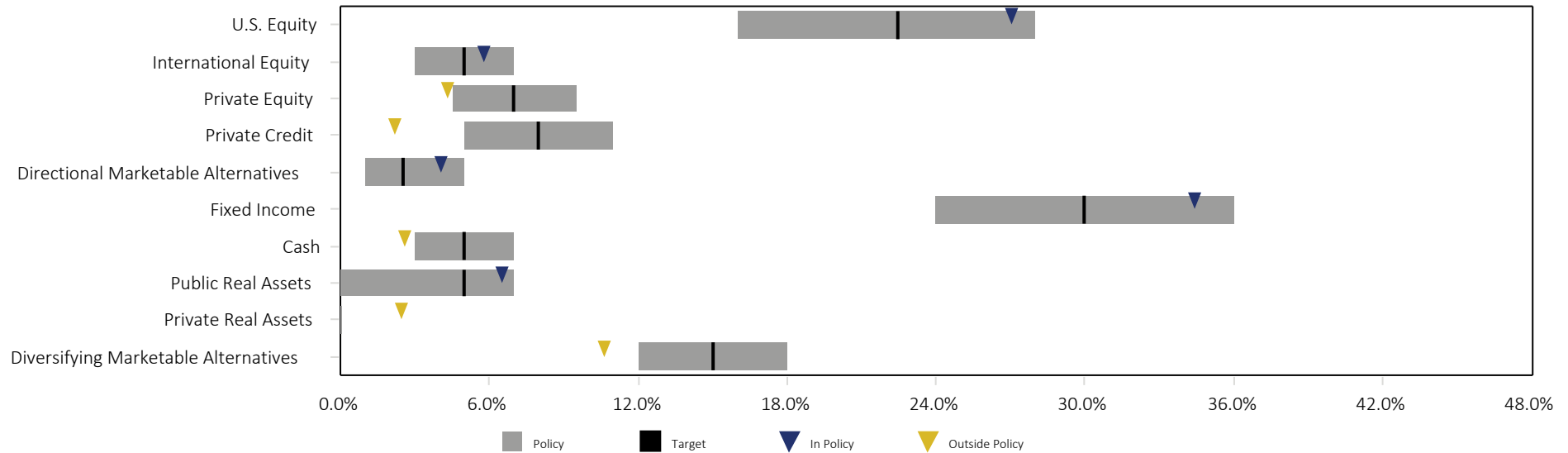


| | Asset Allocation \$ | Asset Allocation (%) | Minimum Allocation (%) | Maximum Allocation (%) | Target Allocation (%) | Target Rebalance \$ |
|----------------------|------------------------|-------------------------|------------------------------|------------------------------|-----------------------------|---------------------------|
| Total Fund | 162,133,732 | 100.0 | | | 75.8 | |
| U.S. Equity | 42,412,554 | 26.2 | 20.2 | 30.3 | 25.3 | -1,392,720 |
| International Equity | 9,818,884 | 6.1 | 3.6 | 7.6 | 5.6 | -739,395 |
| Core Fixed Income | 52,105,194 | 32.1 | 27.0 | 40.4 | 33.7 | 2,533,874 |
| Cash | 7,862,622 | 4.8 | 3.6 | 7.6 | 5.6 | 1,216,867 |
| Public Real Assets | 8,142,269 | 5.0 | 0.0 | 7.6 | 5.6 | 937,220 |

Asset Allocation

Total Fund - Graystone
 Periods Ended As of April 30, 2026

Asset Allocation vs. Policy



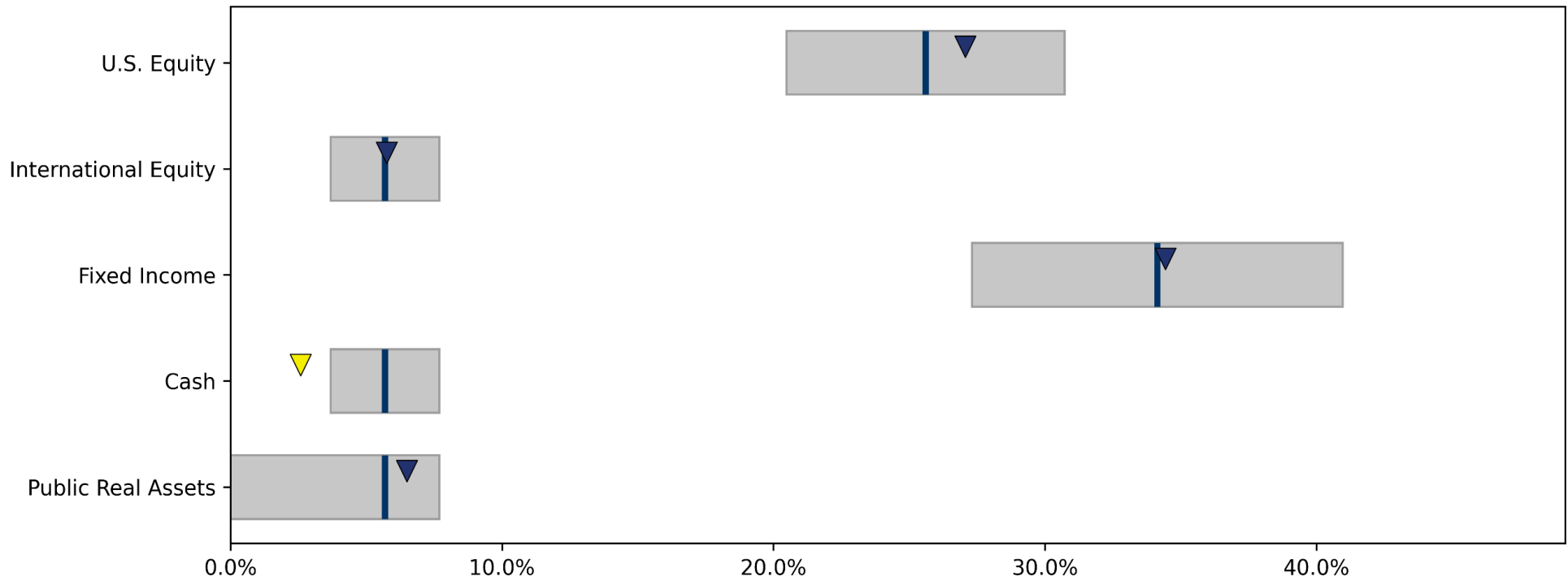
| | Asset Allocation \$ | Asset Allocation (%) | Minimum Allocation (%) | Maximum Allocation (%) | Target Allocation (%) | Target Rebalance \$ |
|--------------------------------------|------------------------|-------------------------|---------------------------|---------------------------|--------------------------|------------------------|
| Total Fund - Graystone | 170,087,846 | 100.0 | | | 100.0 | |
| U.S. Equity | 46,042,787 | 27.1 | 16.0 | 28.0 | 22.5 | -7,773,022 |
| International Equity | 9,792,274 | 5.8 | 3.0 | 7.0 | 5.0 | -1,287,882 |
| Private Equity | 7,358,846 | 4.3 | 4.5 | 9.5 | 7.0 | 4,547,303 |
| Private Credit | 3,771,896 | 2.2 | 5.0 | 11.0 | 8.0 | 9,835,132 |
| Directional Marketable Alternatives | 6,863,298 | 4.0 | 1.0 | 5.0 | 2.5 | -2,611,102 |
| Fixed Income | 58,581,149 | 34.4 | 24.0 | 36.0 | 30.0 | -7,554,795 |
| Cash | 4,398,853 | 2.6 | 3.0 | 7.0 | 5.0 | 4,105,539 |
| Public Real Assets | 11,057,808 | 6.5 | 0.0 | 7.0 | 5.0 | -2,553,416 |
| Private Real Assets | 4,164,175 | 2.4 | 0.0 | 0.0 | 0.0 | -4,164,175 |
| Diversifying Marketable Alternatives | 18,056,760 | 10.6 | 12.0 | 18.0 | 15.0 | 7,456,417 |

Asset Allocation

Graystone – Traditional Only Portfolio

Periods Ended As of April 30, 2026

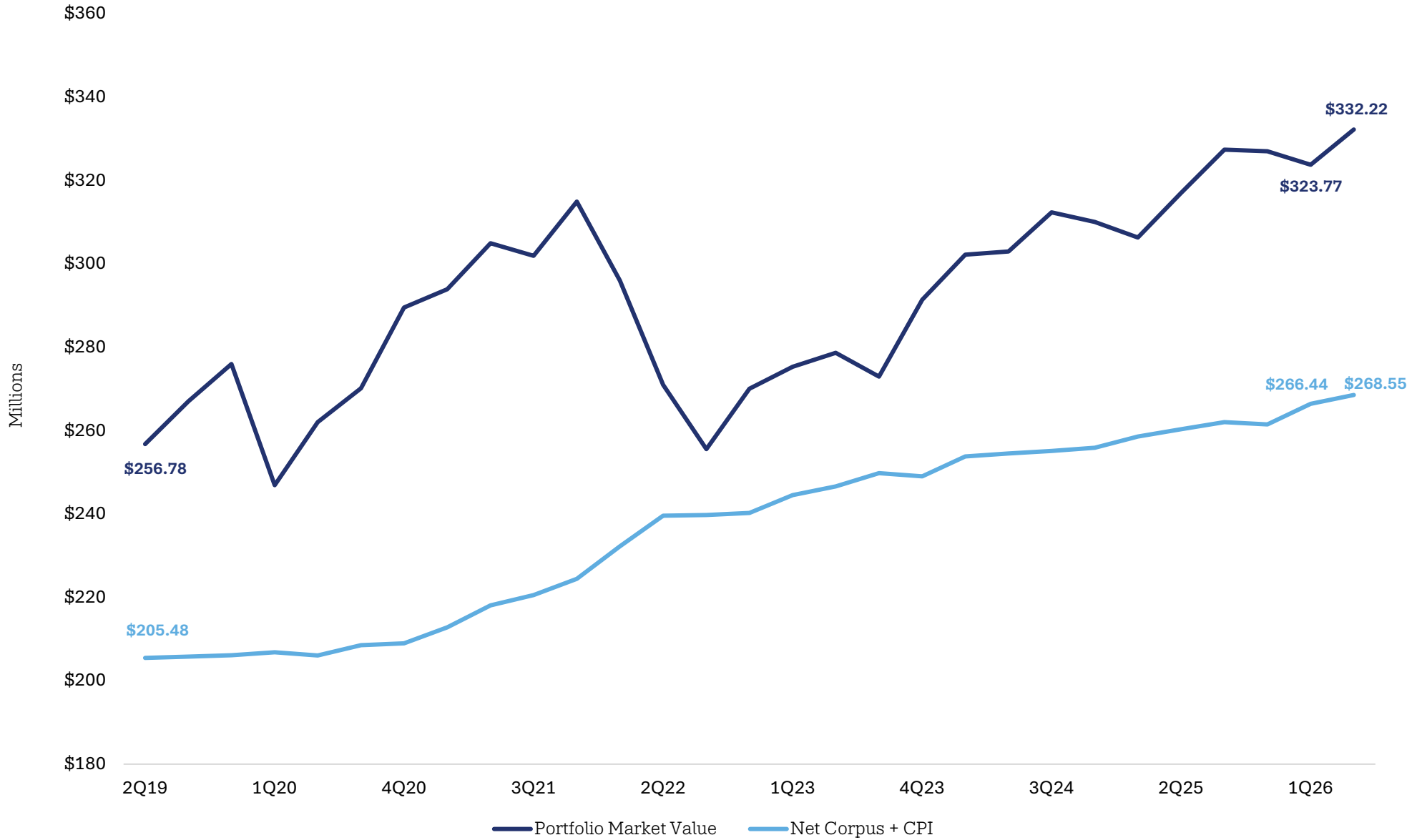
Asset Allocation vs. Policy



| | Asset Allocation \$ | Asset Allocation (%) | Minimum Allocation (%) | Maximum Allocation (%) | Target Allocation (%) | Target Rebalance \$ |
|----------------------|------------------------|-------------------------|------------------------------|------------------------------|-----------------------------|---------------------------|
| Total Fund | 170,087,848 | 100.0 | | | 76.8 | |
| U.S. Equity | 46,042,788 | 27.1 | 20.5 | 30.7 | 25.6 | -2,492,716 |
| International Equity | 9,792,274 | 5.8 | 3.7 | 7.7 | 5.7 | -114,480 |
| Core Fixed Income | 58,581,150 | 34.4 | 27.3 | 41.0 | 34.1 | -514,387 |
| Cash | 4,398,853 | 2.6 | 3.7 | 7.7 | 5.7 | 5,278,941 |
| Public Real Assets | 11,057,808 | 6.5 | 0.0 | 7.7 | 5.7 | -1,380,014 |

Portfolio Value vs. Inflation-Adjusted Corpus

As of April 30, 2026



The original value of the corpus, net of all legacy expenses, is \$192,839,933.

Portfolio Market Value is net of all historical drawdowns.

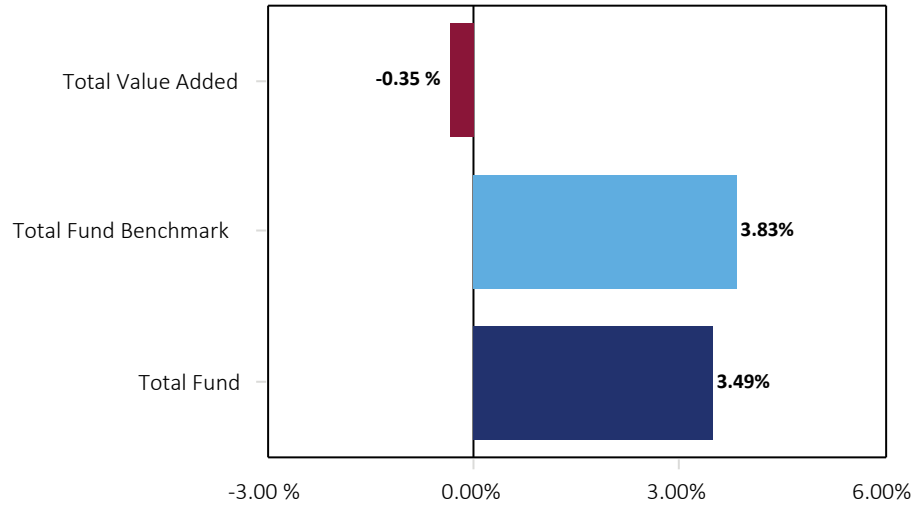
Inflation is the Southeast CPI and is measured cumulatively beginning April 2014.

Total Fund Attribution

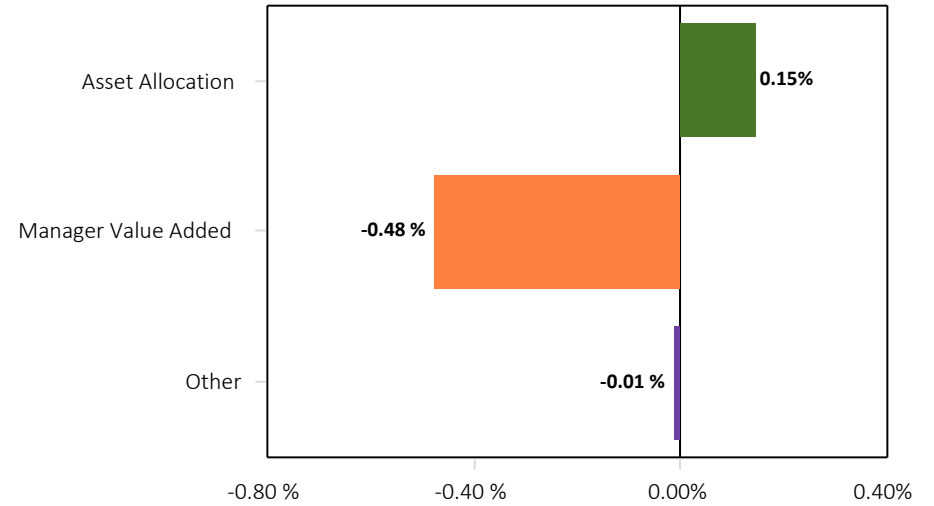
MCHD Total Fund Composite

Periods Ended 1 Month Ending April 30, 2026

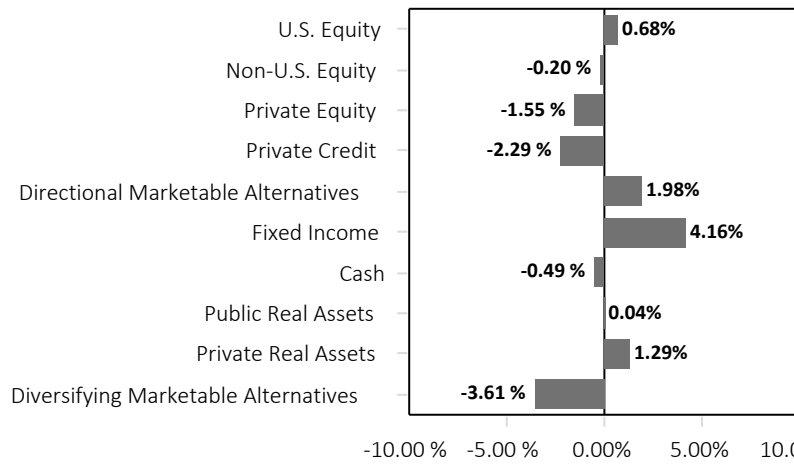
Total Fund Performance



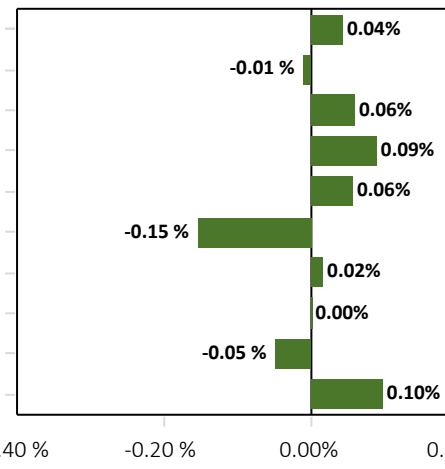
Total Value Added: -0.35 %



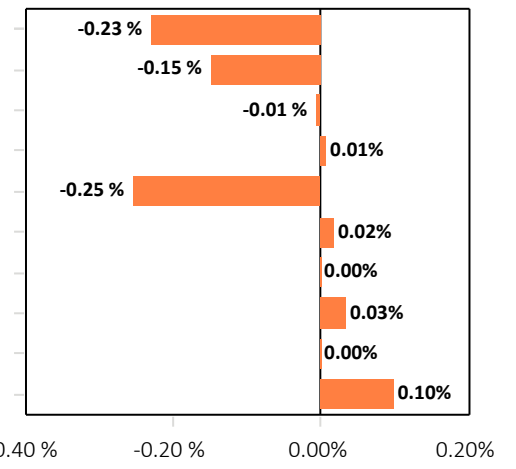
Total Asset Allocation



Asset Allocation Value Added: 0.15%



Total Manager Value Added: -0.48 %



■ Average Active Weight

■ Asset Allocation Value Added

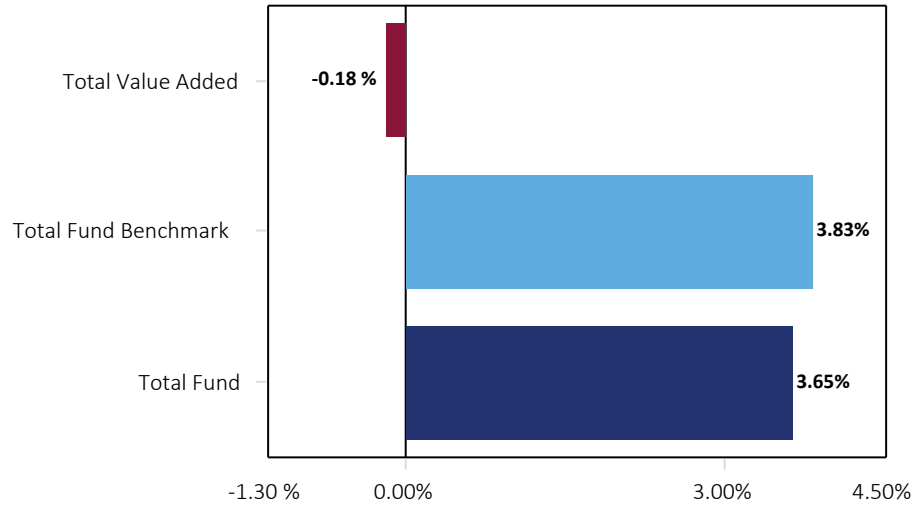
■ Manager Value Added

Total Fund Attribution

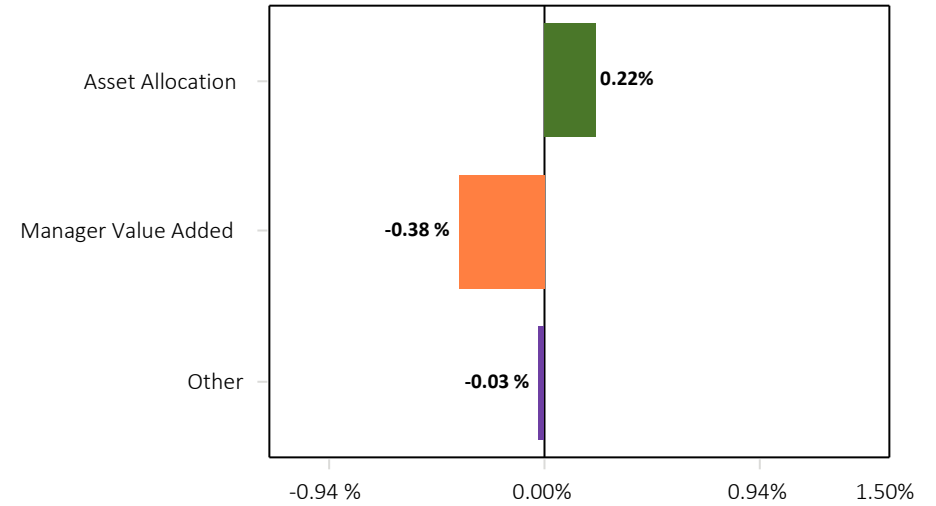
Cresset Total Fund Composite

Periods Ended 1 Month Ending April 30, 2026

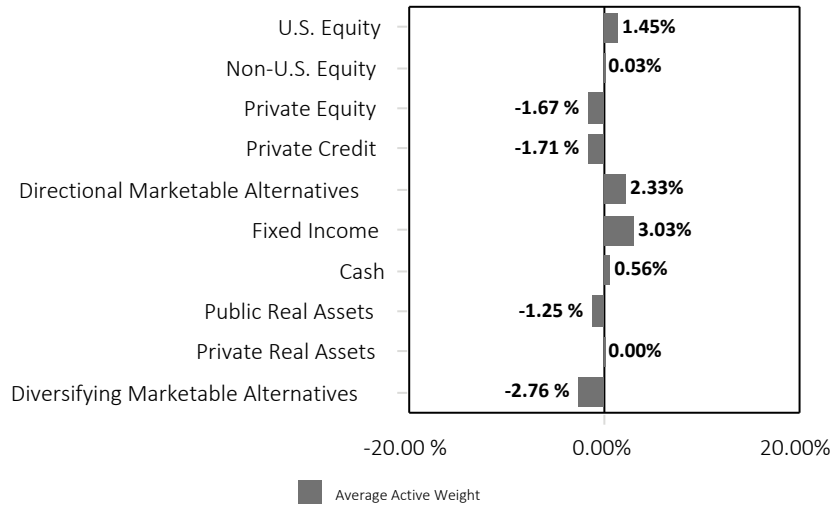
Total Fund Performance



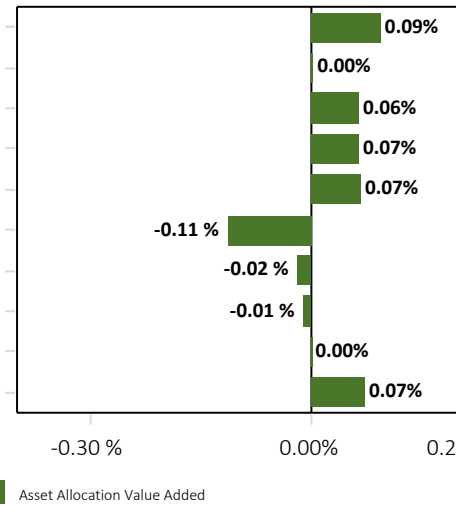
Total Value Added:-0.18 %



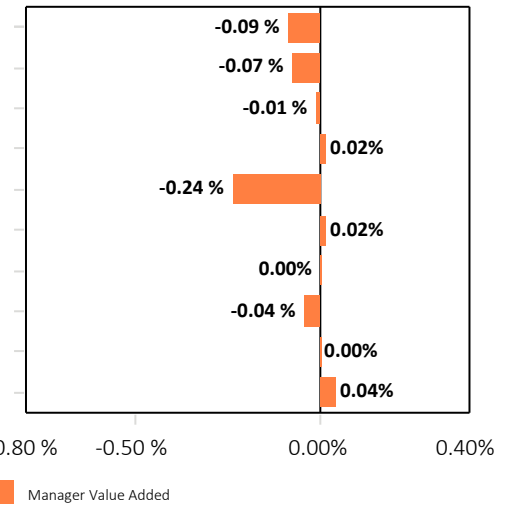
Total Asset Allocation



Asset Allocation Value Added:0.22%



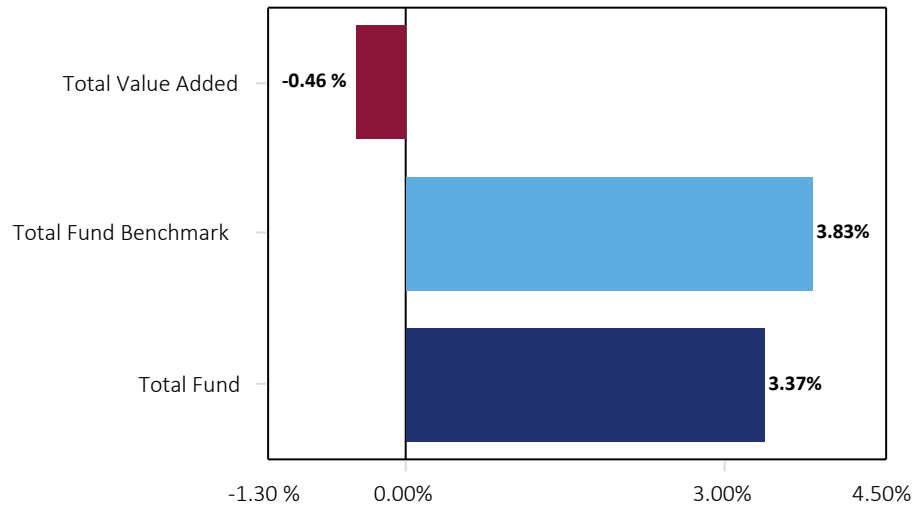
Total Manager Value Added:-0.38 %



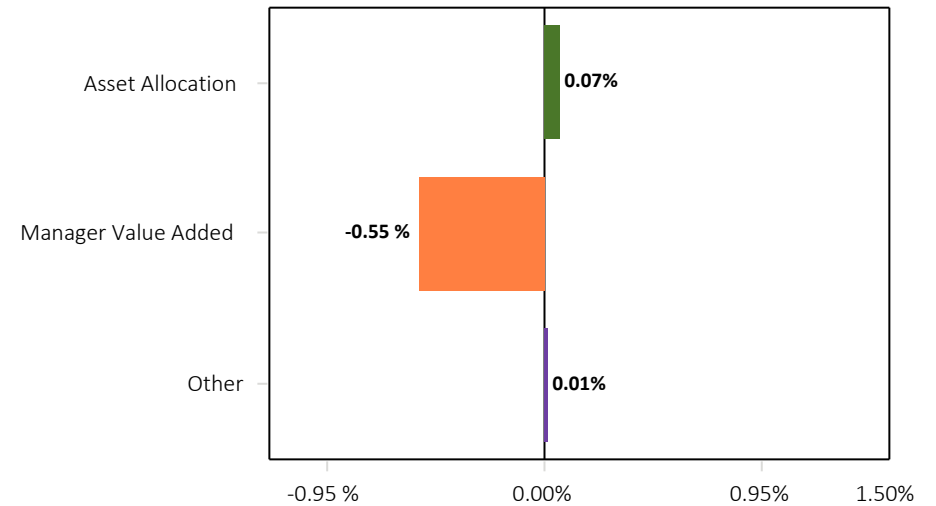
Total Fund Attribution

Graystone Total Fund Composite
 Periods Ended 1 Month Ending April 30, 2026

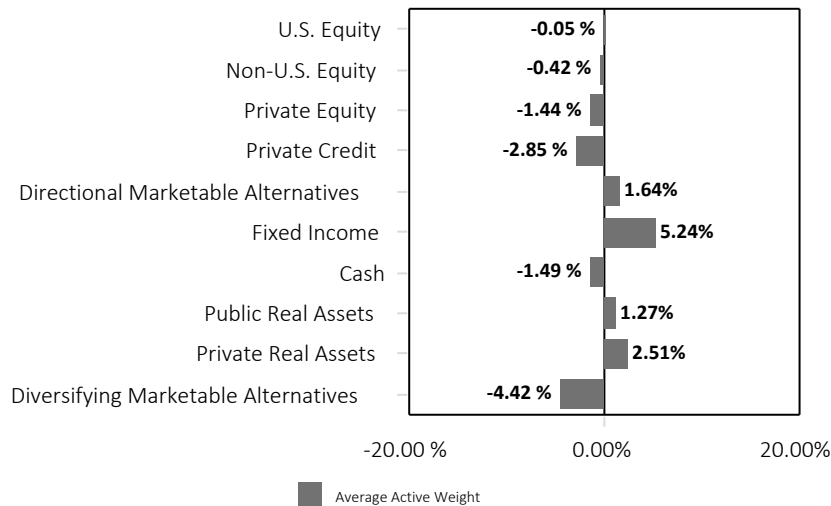
Total Fund Performance



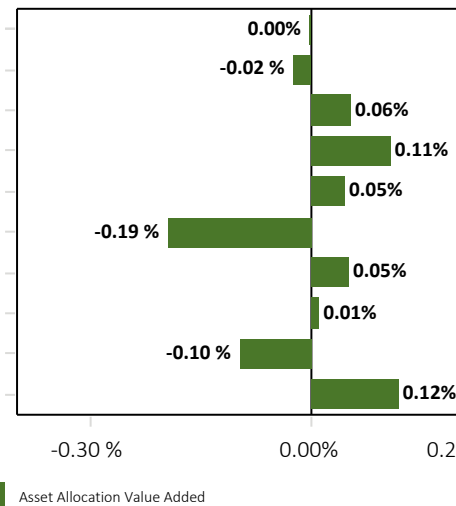
Total Value Added:-0.46 %



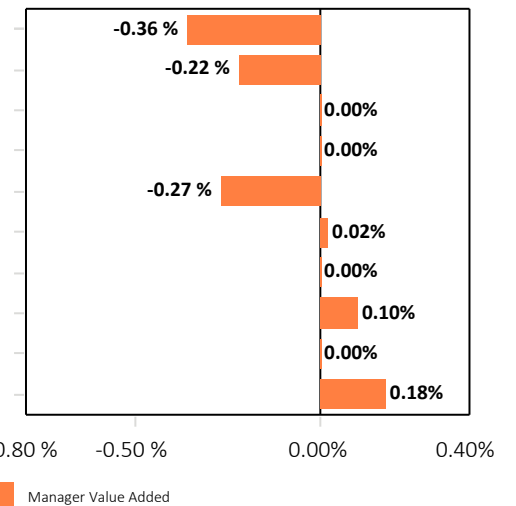
Total Asset Allocation



Asset Allocation Value Added:0.07%



Total Manager Value Added:-0.55 %



Asset Allocation & Performance

Marion County Hospital District

Periods Ended April 30, 2026

| | Allocation | | Performance (%) Net of Fees | | | | | | | | Inception Date |
|--|--------------------|---------------|-----------------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|------------------|
| | Market Value \$ | % | Since Inception | 3 Years | 2 Years | 1 Year | 6 Months | FYTD | YTD | 1 Month | |
| MCHD Total Fund Composite | 332,221,576 | 100.00 | 11.37 | 10.34 | 10.61 | 14.03 | 4.04 | 5.05 | 3.31 | 3.49 | 10/1/2022 |
| MCHD Total Fund Policy | | | 12.72 | 11.50 | 12.32 | 15.98 | 5.52 | 6.67 | 4.75 | 3.83 | |
| Value Added | | | -1.34 | -1.15 | -1.71 | -1.95 | -1.48 | -1.62 | -1.44 | -0.35 | |
| U.S. Equity Composite | 88,455,340 | 26.63 | 20.89 | 19.74 | 18.66 | 29.36 | 6.66 | 8.53 | 6.28 | 9.42 | 10/1/2022 |
| Wilshire 5000 Total Market Index | | | 22.62 | 21.38 | 20.89 | 31.37 | 6.23 | 8.51 | 6.03 | 10.30 | |
| Value Added | | | -1.73 | -1.64 | -2.23 | -2.00 | 0.44 | 0.02 | 0.26 | -0.88 | |
| Non-U.S. Equity Composite | 19,611,157 | 5.90 | 20.05 | 14.96 | 17.79 | 25.67 | 9.70 | 11.09 | 7.26 | 7.09 | 10/1/2022 |
| MSCI AC World ex USA IMI (Net) | | | 21.28 | 17.30 | 21.49 | 32.47 | 12.14 | 14.12 | 8.94 | 9.68 | |
| Value Added | | | -1.23 | -2.34 | -3.69 | -6.80 | -2.45 | -3.04 | -1.68 | -2.59 | |
| Private Equity Composite | 14,166,440 | 4.26 | 0.15 | 0.22 | 0.94 | 2.11 | 2.47 | 2.47 | 1.49 | -0.14 | 10/1/2022 |
| Private Equity Policy Index | | | 5.65 | 7.17 | 7.76 | 8.94 | 5.02 | 5.02 | 3.79 | 0.00 | |
| Value Added | | | -5.49 | -6.96 | -6.81 | -6.83 | -2.56 | -2.56 | -2.30 | -0.14 | |
| Private Credit Composite | 8,947,145 | 2.69 | 5.01 | | 5.15 | 6.17 | 3.64 | 3.88 | 1.31 | 0.33 | 4/1/2024 |
| Private Credit Policy Index | | | 10.31 | | 10.76 | 12.67 | 9.14 | 9.14 | 5.47 | 0.00 | |
| Value Added | | | -5.30 | | -5.62 | -6.51 | -5.50 | -5.25 | -4.15 | 0.33 | |
| Directional Marketable Alternatives Composite | 14,626,653 | 4.40 | 2.94 | | 4.09 | 6.62 | -0.87 | -0.36 | -0.92 | 1.00 | 4/1/2024 |
| Directional Marketable Alts Policy Index | | | 13.58 | | 15.01 | 23.47 | 8.32 | 9.04 | 6.19 | 6.69 | |
| Value Added | | | -10.64 | | -10.91 | -16.85 | -9.19 | -9.39 | -7.11 | -5.69 | |
| Fixed Income Composite | 110,686,343 | 33.32 | 4.66 | 3.88 | 5.91 | 3.94 | 0.62 | 1.16 | 0.14 | 0.17 | 10/1/2022 |
| Blmbg. U.S. Aggregate Index | | | 4.45 | 3.46 | 6.02 | 4.06 | 0.54 | 1.17 | 0.07 | 0.11 | |
| Value Added | | | 0.21 | 0.42 | -0.11 | -0.12 | 0.08 | -0.01 | 0.07 | 0.06 | |

Asset Allocation & Performance

Marion County Hospital District

Periods Ended April 30, 2026

| | Allocation | | Performance (%) Net of Fees | | | | | | | | Inception Date |
|---|-------------------|--------------|-----------------------------|--------------|--------------|--------------|--------------|--------------|--------------|-------------|------------------|
| | Market Value \$ | % | Since Inception | 3 Years | 2 Years | 1 Year | 6 Months | FYTD | YTD | 1 Month | |
| Cash Composite | 12,261,475 | 3.69 | 4.47 | 4.57 | 4.37 | 3.83 | 1.69 | 2.03 | 1.05 | 0.31 | 10/1/2022 |
| FTSE 3 Month T-Bill | | | 4.81 | 4.93 | 4.62 | 4.16 | 1.91 | 2.28 | 1.24 | 0.31 | |
| Value Added | | | -0.34 | -0.36 | -0.24 | -0.33 | -0.22 | -0.25 | -0.19 | 0.01 | |
| Public Real Assets Composite | 19,200,077 | 5.78 | 14.35 | | 16.70 | 26.88 | 18.32 | 18.85 | 17.09 | 5.30 | 4/1/2024 |
| Public Real Assets Policy Index | | | 16.94 | | 18.54 | 27.16 | 17.39 | 18.49 | 15.97 | 4.63 | |
| Value Added | | | -2.59 | | -1.84 | -0.29 | 0.93 | 0.36 | 1.12 | 0.67 | |
| Private Real Assets Composite | 4,164,175 | 1.25 | 19.08 | -3.95 | -4.09 | -4.07 | 0.00 | 0.00 | 0.00 | 0.00 | 10/1/2021 |
| Private Real Assets Policy Index | | | 5.82 | 5.31 | 12.09 | 13.55 | 6.37 | 6.32 | 4.19 | 2.51 | |
| Value Added | | | 13.26 | -9.27 | -16.18 | -17.63 | -6.37 | -6.32 | -4.19 | -2.51 | |
| Diversifying Marketable Alternatives Composite | 40,102,771 | 12.07 | 5.76 | | 6.49 | 8.63 | 2.72 | 3.27 | 1.64 | 2.06 | 4/1/2024 |
| Diversifying Marketable Alts Policy Index | | | 6.50 | | 6.48 | 13.61 | 8.34 | 9.60 | 6.76 | 1.17 | |
| Value Added | | | -0.74 | | 0.01 | -4.98 | -5.62 | -6.33 | -5.12 | 0.88 | |

Asset Allocation & Performance

Cresset Total Fund

Periods Ended April 30, 2026

| | Allocation | | Performance (%) Net of Fees | | | | | | | |
|--|-----------------|--------|-----------------------------|---------|--------|----------|--------|-------|---------|----------------|
| | Market Value \$ | % | Since Inception | 3 Years | 1 Year | 6 Months | FYTD | YTD | 1 Month | Inception Date |
| MCHD Total Fund Composite | 332,221,576 | | 11.37 | 10.34 | 14.03 | 4.04 | 5.05 | 3.31 | 3.49 | 10/1/2022 |
| Total Fund | 162,133,730 | 100.00 | 6.53 | 11.03 | 13.64 | 3.69 | 4.70 | 2.88 | 3.65 | 10/1/2017 |
| MCHD Total Fund Policy | | | 7.98 | 11.50 | 15.98 | 5.52 | 6.67 | 4.75 | 3.83 | |
| Value Added | | | -1.45 | -0.47 | -2.33 | -1.83 | -1.97 | -1.87 | -0.18 | |
| U.S. Equity | 42,412,553 | 26.16 | 13.23 | 20.56 | 29.23 | 6.81 | 8.67 | 6.26 | 9.98 | 10/1/2017 |
| Wilshire 5000 Total Market Index | | | 14.40 | 21.38 | 31.37 | 6.23 | 8.51 | 6.03 | 10.30 | |
| Value Added | | | -1.17 | -0.82 | -2.14 | 0.59 | 0.16 | 0.23 | -0.32 | |
| Non - U.S. Equity | 9,818,883 | 6.06 | 5.89 | 15.58 | 33.20 | 13.02 | 15.45 | 10.18 | 8.46 | 10/1/2017 |
| MSCI AC World ex USA IMI (Net) | | | 7.89 | 17.30 | 32.47 | 12.14 | 14.12 | 8.94 | 9.68 | |
| Value Added | | | -2.00 | -1.73 | 0.73 | 0.88 | 1.33 | 1.23 | -1.22 | |
| Private Equity | 6,807,594 | 4.20 | 12.03 | 7.00 | 3.01 | 2.10 | 2.10 | 1.30 | -0.29 | 11/20/2017 |
| Private Equity Policy Index | | | 13.59 | 7.17 | 8.94 | 5.02 | 5.02 | 3.79 | 0.00 | |
| Value Added | | | -1.56 | -0.17 | -5.93 | -2.93 | -2.93 | -2.49 | -0.29 | |
| Private Credit | 5,175,249 | 3.19 | 7.86 | 9.87 | 5.92 | 2.53 | 2.90 | 0.59 | 0.56 | 11/1/2017 |
| Private Credit Policy Index | | | 9.14 | 10.29 | 12.67 | 9.14 | 9.14 | 5.47 | 0.00 | |
| Value Added | | | -1.28 | -0.43 | -6.75 | -6.61 | -6.23 | -4.87 | 0.56 | |
| Directional Marketable Alternatives | 7,763,355 | 4.79 | 7.56 | 8.72 | 8.30 | -1.84 | -1.74 | -0.84 | 1.75 | 11/1/2017 |
| Directional Marketable Alts Policy Index | | | 7.96 | 13.91 | 23.47 | 8.32 | 9.04 | 6.19 | 6.69 | |
| Value Added | | | -0.40 | -5.20 | -15.17 | -10.16 | -10.78 | -7.03 | -4.94 | |
| Fixed Income | 52,105,194 | 32.14 | 0.89 | 3.91 | 4.00 | 0.59 | 1.20 | 0.17 | 0.16 | 10/1/2017 |
| Blmbg. U.S. Aggregate Index | | | 1.67 | 3.46 | 4.06 | 0.54 | 1.17 | 0.07 | 0.11 | |
| Value Added | | | -0.78 | 0.45 | -0.05 | 0.06 | 0.03 | 0.11 | 0.05 | |

Asset Allocation & Performance

Cresset Total Fund

Periods Ended April 30, 2026

| | Allocation | | Performance (%) Net of Fees | | | | | | | |
|---|-------------------|--------------|-----------------------------|-------------|--------------|--------------|--------------|--------------|-------------|------------------|
| | Market Value \$ | % | Since Inception | 3 Years | 1 Year | 6 Months | FYTD | YTD | 1 Month | Inception Date |
| Cash | 7,862,622 | 4.85 | 3.88 | 4.42 | 3.86 | 1.71 | 2.03 | 1.05 | 0.30 | 10/1/2017 |
| FTSE 3 Month T-Bill | | | 2.65 | 4.93 | 4.16 | 1.91 | 2.28 | 1.24 | 0.31 | |
| Value Added | | | 1.23 | -0.51 | -0.30 | -0.20 | -0.24 | -0.18 | -0.01 | |
| Public Real Assets | 8,142,269 | 5.02 | 15.10 | | 22.56 | 14.29 | 14.92 | 11.76 | 3.54 | 3/21/2024 |
| Public Real Assets Policy Index | | | 18.04 | | 27.16 | 17.39 | 18.49 | 15.97 | 4.63 | |
| Value Added | | | -2.93 | | -4.61 | -3.11 | -3.57 | -4.21 | -1.09 | |
| Diversifying Marketable Alternatives | 22,046,011 | 13.60 | 7.47 | | 9.38 | 2.94 | 3.90 | 1.13 | 1.52 | 3/21/2024 |
| Diversifying Marketable Alts Policy Index | | | 7.33 | | 13.61 | 8.34 | 9.60 | 6.76 | 1.17 | |
| Value Added | | | 0.14 | | -4.23 | -5.40 | -5.70 | -5.63 | 0.34 | |

Wilshire has identified a discrepancy in the Diversifying Marketable Alternatives Policy Index returns with Cresset and Graystone. We are actively working to resolve the difference.

Asset Allocation & Performance

Graystone Total Fund
 Periods Ended April 30, 2026

| | Allocation | | Performance (%) Net of Fees | | | | | | | |
|--|-----------------|--------|-----------------------------|---------|--------|-------|----------|-------|---------|----------------|
| | Market Value \$ | % | Since Inception | 3 Years | 1 Year | FYTD | 6 Months | YTD | 1 Month | Inception Date |
| MCHD Total Fund Composite | 332,221,576 | | 11.37 | 10.34 | 14.03 | 5.05 | 4.04 | 3.31 | 3.49 | 10/1/2022 |
| Total Fund - Graystone | 170,087,846 | 100.00 | 5.99 | 9.28 | 12.50 | 4.87 | 4.12 | 3.18 | 3.37 | 10/1/2021 |
| MCHD Total Fund Policy | | | 6.53 | 11.50 | 15.98 | 6.67 | 5.52 | 4.75 | 3.83 | |
| Value Added | | | -0.55 | -2.21 | -3.47 | -1.81 | -1.40 | -1.57 | -0.46 | |
| U.S. Equity | 46,042,787 | 27.07 | 11.44 | 19.36 | 28.52 | 7.56 | 5.95 | 5.81 | 8.87 | 10/1/2021 |
| Wilshire 5000 Total Market Index | | | 12.56 | 21.38 | 31.37 | 8.51 | 6.23 | 6.03 | 10.30 | |
| Value Added | | | -1.12 | -2.02 | -2.85 | -0.95 | -0.27 | -0.22 | -1.43 | |
| Non - U.S. Equity | 9,792,274 | 5.76 | 6.89 | 15.00 | 20.40 | 7.91 | 7.38 | 3.16 | 5.68 | 10/1/2021 |
| MSCI AC World ex USA IMI (Net) | | | 8.98 | 17.30 | 32.47 | 14.12 | 12.14 | 8.94 | 9.68 | |
| Value Added | | | -2.09 | -2.30 | -12.07 | -6.21 | -4.76 | -5.78 | -4.00 | |
| Private Equity | 7,358,846 | 4.33 | 0.62 | -1.85 | 1.50 | 3.66 | 3.66 | 1.84 | 0.00 | 9/30/2021 |
| Private Equity Policy Index | | | 9.63 | 7.17 | 8.94 | 5.02 | 5.02 | 3.79 | 0.00 | |
| Value Added | | | -9.01 | -9.02 | -7.43 | -1.36 | -1.36 | -1.95 | 0.00 | |
| Private Credit | 3,771,896 | 2.22 | 8.93 | 10.15 | 5.98 | 4.01 | 4.01 | 1.54 | 0.00 | 10/1/2021 |
| Private Credit Policy Index | | | 9.50 | 10.29 | 12.67 | 9.14 | 9.14 | 5.47 | 0.00 | |
| Value Added | | | -0.57 | -0.14 | -6.70 | -5.12 | -5.12 | -3.93 | 0.00 | |
| Directional Marketable Alternatives | 6,863,298 | 4.04 | 8.04 | | 6.66 | 1.94 | 1.98 | 0.54 | 0.16 | 7/1/2024 |
| Directional Marketable Alternatives Policy Index | | | 15.04 | | 23.47 | 9.04 | 8.32 | 6.19 | 6.69 | |
| Value Added | | | -7.00 | | -16.81 | -7.09 | -6.34 | -5.65 | -6.53 | |
| Fixed Income | 58,581,149 | 34.44 | 0.43 | 3.62 | 4.12 | 1.12 | 0.47 | -0.05 | 0.18 | 10/1/2021 |
| Blmbg. U.S. Aggregate Index | | | -0.04 | 3.46 | 4.06 | 1.17 | 0.54 | 0.07 | 0.11 | |
| Value Added | | | 0.48 | 0.16 | 0.06 | -0.04 | -0.07 | -0.12 | 0.07 | |

Asset Allocation & Performance

Graystone Total Fund
 Periods Ended April 30, 2026

| | Allocation | | Performance (%) Net of Fees | | | | | | | |
|---|-------------------|--------------|-----------------------------|--------------|--------------|--------------|--------------|--------------|-------------|------------------|
| | Market Value \$ | % | Since Inception | 3 Years | 1 Year | FYTD | 6 Months | YTD | 1 Month | Inception Date |
| Cash | 4,398,853 | 2.59 | 3.68 | 4.74 | 4.11 | 2.27 | 1.91 | 1.26 | 0.33 | 9/1/2021 |
| FTSE 3 Month T-Bill | | | 3.81 | 4.93 | 4.16 | 2.28 | 1.91 | 1.24 | 0.31 | |
| Value Added | | | -0.13 | -0.19 | -0.05 | -0.01 | 0.00 | 0.02 | 0.02 | |
| Public Real Assets | 11,057,808 | 6.50 | 12.29 | | 22.00 | 15.72 | 16.61 | 16.06 | 6.30 | 4/1/2024 |
| Public Real Assets Policy Index | | | 16.94 | | 27.16 | 18.49 | 17.39 | 15.97 | 4.63 | |
| Value Added | | | -4.65 | | -5.16 | -2.77 | -0.78 | 0.09 | 1.67 | |
| Private Real Assets | 4,164,175 | 2.45 | 19.08 | -3.95 | -4.07 | 0.00 | 0.00 | 0.00 | 0.00 | 10/1/2021 |
| Private Real Assets Policy Index | | | 5.82 | 5.31 | 13.55 | 6.37 | 6.32 | 4.19 | 2.51 | |
| Value Added | | | 13.26 | -9.27 | -17.63 | -6.37 | -6.32 | -4.19 | -2.51 | |
| Diversifying Marketable Alternatives | 18,056,760 | 10.62 | 7.15 | | 10.01 | 6.03 | 4.84 | 3.10 | 2.88 | 7/1/2024 |
| Diversifying Marketable Alternatives Policy Index | | | 7.52 | | 13.61 | 9.60 | 8.34 | 6.76 | 1.17 | |
| Value Added | | | -0.38 | | -3.60 | -3.57 | -3.50 | -3.67 | 1.71 | |

Wilshire has identified a discrepancy in the Diversifying Marketable Alternatives Policy Index returns with Cresset and Graystone. We are actively working to resolve the difference.

Cash Flow Summary

Marion County Hospital District

One Month Ending April 30, 2026

| | Begin Value | Contributions | Distributions | Fees | Expenses | Capital Apprec./ Deprec. | End Value |
|---------------------------|-------------|---------------|---------------|------|----------|--------------------------|-------------|
| MCHD Total Fund Composite | 323,772,702 | 5,257,388 | -8,193,680 | | | 11,385,167 | 332,221,576 |
| Total Fund - Cresset | 157,848,404 | 5,000,000 | -6,472,456 | | | 5,757,782 | 162,133,730 |
| Total Fund - Graystone | 165,924,298 | 257,388 | -1,721,224 | | | 5,627,385 | 170,087,846 |

Appendix

Interim Asset Allocation Compliance Methodology

- The strategic asset allocation consists of 67.5% traditional assets (U.S Equity, International Equity, Core Fixed Income, Cash, Public Real Assets) and 32.5% alternative assets (Directional/Diversifying Marketable Alternatives, Private Equity, Private Credit)
 - Cresset and Graystone were directed to not make any further commitments or trades until the alternative specialist OCIO has been chosen
- Wilshire has created an interim asset allocation compliance that factors in the underweight to alternatives. Below is the methodology used to arrive at the targets:
 1. “Gross Up” the target weights to create a “Traditional Asset Only” portfolio: $\text{Asset Class Target Weight} / \text{Sum of Traditional Asset Class Weights (67.5\%)} = \text{Target asset class weight of the traditional asset only portfolio (Variable X)}$
 - a) **Example using U.S Equity: $22.5\% / 67.5\% = 33.33\%$**
 2. Determine the current underweight to alternatives (as of 1/31/2026): $\text{Target Alternatives Allocation in Portfolio (32.5\%)} - \text{Actual Alternatives Allocation in Portfolio} = \text{Over/Underweight to Alternatives (Variable Y)}$
 - b) **Example using Cresset: $32.5\% - 24.2\% = 8.3\%$ underweight to Alternatives**
 3. Multiply the target asset class weight of the traditional only portfolio (x) by the underweight to alternatives (y): $X * Y = \text{Amount of the alternatives underweight to be allocated pro-rata to the traditional asset class}$
 - c) **Example using U.S Equity and Cresset: $33.33\% * 8.3\% = 2.8\%$**
 4. Sum together the asset class target weight and pro-rated underweight: $\text{Pro-rata underweight} + \text{Asset class target weight} = \text{Interim target weight}$
 - d) **Example using U.S Equity and Cresset: $22.5\% + 2.8\% = 25.3\%$**

Interim Asset Allocation Compliance Methodology (cont.)

| Strategic Benchmark (as of 12/31/2025) | |
|--|---------------|
| Asset Class | Target Weight |
| U.S Equity | 22.5% |
| Non-U.S Equity | 5.0% |
| Private Equity | 7.0% |
| Private Credit | 8.0% |
| Directional Marketable Alternatives | 2.5% |
| Core Fixed Income | 30.0% |
| Cash | 5.0% |
| Public Real Assets | 5.0% |
| Diversifying Marketable Alternatives | 15.0% |
| Target Traditional Allocation | 67.5% |
| Target Alternatives Allocation | 32.5% |
| Cresset - Current Traditional Allocation | 75.8% |
| Cresset - Current Alternatives Allocation | 24.2% |
| Underweight to Alternatives | 8.3% |

| Example (using Cresset) | | | | |
|-------------------------|---------------|---|--|---|
| Asset Class | Target Weight | "Grossed Up" Target Weight (Target Weight / Target Traditional Allocation) | Pro-Rata Allocation of Underweight to Alternatives (Underweight to Alternatives * "Grossed Up" Target Weight) | Interim Target Weight (Target Weight + Pro Rata Allocation of Underweight to Alternatives) |
| U.S Equity | 22.5% | 33.3% | 2.8% | 25.3% |
| Non-U.S Equity | 5.0% | 7.4% | 0.6% | 5.6% |
| Core Fixed Income | 30.0% | 44.4% | 3.7% | 33.7% |
| Cash | 5.0% | 7.4% | 0.6% | 5.6% |
| Public Real Assets | 5.0% | 7.4% | 0.6% | 5.6% |
| Total | 67.5% | 100.0% | 8.3% | 75.8% |

Alternative Management RFP 26-01 Resolution

MARION COUNTY HOSPITAL DISTRICT RESOLUTION

**RESOLUTION OF THE MARION COUNTY HOSPITAL DISTRICT WITHDRAWING
THEIR REQUEST FOR PROPOSAL FOR ALTERNATIVE INVESTMENT
MANAGEMENT SERVICES**

WHEREAS, on January 26, 2026, the Marion County Hospital District (“MCHD”) issued a Request for Proposal seeking proposals for an Alternative Investment Management Services (the “RFP”).

WHEREAS, On April 27, 2026, MCHD’s Board of Trustees voted to enter into negotiations with Grosvenor Capital Management in connection with the Request for Proposals (RFP) for Alternative Investment Management Services.

WHEREAS, MCHD’s Board of Trustees has determined that it is in the best interest of MCHD to withdraw the RFP.

NOW THEREFORE, BE IT RESOLVED AS FOLLOWS:

1. The recitals set forth above are incorporated by reference herein.
2. MCHD’s Board of Trustees hereby authorizes the Withdrawal of the RFP, effective immediately upon the date of execution of this Agreement.

THIS RESOLUTION INTRODUCED and ADOPTED by the Marion County Hospital District Board of Trustees on May 18, 2026.

MARION COUNTY HOSPITAL DISTRICT

By: _____
Teresa Stephens, Chairman

**Request for Proposal (RFP):
Alternative Investment Management Services**

**Marion County Hospital District
May __, 2026**

RFP 26-02

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1. Section 1: Administrative Information
2. Section 2: Background, Overview and Goals
3. Section 3: Scope of Services
4. Section 4: Required Proposal Information
5. Section 5: Evaluation Criteria
6. Section 6: Instructions to Respondents
7. Section 7: Attachments

SECTION 1: ADMINISTRATIVE INFORMATION

Introduction

The Marion County Hospital District (MCHD or the District) is soliciting proposals from experienced firms to provide discretionary alternative investment management services, including outsourced chief investment officer (OCIO) services for the District’s alternative investment portfolio.

Schedule of Activities

| Activity | Date |
|--|--|
| RFP Issue Date | May 22, 2026 |
| Inquiries Due | June 5, 2026, by 5:00 p.m. Eastern Time |
| Responses to Inquiries Posted | June 19, 2026 |
| Proposal Submission Deadline | July 10, 2026, by 5:00 p.m. Eastern Time |
| Selection of Finalists | July 27, 2026 |
| Oral Presentations, if needed | To be announced |
| Approval by District Board of Trustees | July 27, 2026 |
| Anticipated Contract Start Date | On or about August 31, 2026, subject to contract execution |

Official Means of Communication

All official communication regarding this RFP will be posted on the Marion County Hospital District website at <https://www.mchdt.org/>. Notices may include addenda, revisions, answers to inquiries, clarifications, schedule changes, finalist information, and the notice of intended award. Respondents are responsible for regularly monitoring the District website for all such postings.

From the release of this RFP until the end of the seventy-two (72) hour period following the posting of the notice of intended award, excluding Saturdays, Sundays, and state holidays, respondents and persons acting on their behalf may not contact any employee, officer, trustee, committee member, or representative of MCHD regarding any aspect of this solicitation, except by written inquiry to RFP@mchdt.org. Violation of this provision may be grounds for rejecting a proposal.

Submission Requirements

To be considered responsive, proposals must be received by MCHD on or before the proposal submission deadline stated in the Schedule of Activities. Proposals received after the deadline will not be considered.

Electronic submission is permitted and preferred. Respondents may submit a complete proposal electronically by email to RFP@mchdt.org. If file size limits prevent email transmission, respondents should request written instructions through RFP@mchdt.org before the submission deadline. The email subject line should read: RFP 26-02: Alternative Investment Management Services.

Hard-copy submission is also permitted. Respondents submitting by mail, courier, or hand delivery must provide one (1) hard-copy, and one (1) electronic PDF copy on a USB drive. The sealed package must be clearly marked in the lower left corner: RFP 26-02: Alternative Investment Management Services.

Deliver the hard-copy and PDF copy on USB to:

Marion County Hospital District
Attn: Debra Velez, Chief Operating Officer
2547 East Silver Springs Boulevard
Ocala, Florida 34470

Firms that previously submitted proposals in response to RFP 26-01, and choose not to update or revise their proposals, are not required to resubmit hard-copy or electronic proposal materials (an email request to use a RFP 26-01 proposal for RFP 26-02 must be received at RFP@mchdt.org by the submission deadline). If such firms choose to update or revise a proposal, they must adhere to the Schedule of Activities deadlines and submission requirements outlined above.

All submitted materials will become part of the official public records of MCHD and will not be returned. Respondents are solely responsible for ensuring timely receipt of their proposals. MCHD is not responsible for delays caused by mail, courier, electronic transmission, file-size limitations, internet service interruptions, or any other delivery issue.

Oral Presentations

Firms deemed most qualified after initial evaluation may be asked to make oral presentations to the Investment Committee. Presentations will be at the firms' expense. If presentations are deemed necessary, the date, time, format, and instructions will be posted on the District website and provided by email to the applicable respondents.

Award of Contract

The Investment Committee will review and score responsive proposals and may recommend a firm for award. The proposal selected will be the proposal determined to be most advantageous to the District, taking into account the evaluation criteria and the District's best interests. A contract must be completed and signed by all parties before services begin. If the District and the selected firm are unable to enter into a contract, the District may cancel the award and negotiate with the next-ranked respondent, reject all proposals, or take any other action permitted by this RFP and applicable law.

SECTION 2: BACKGROUND, OVERVIEW AND GOALS

Organization

MCHD was established in 1965 to provide healthcare for the citizens of Marion County. Since that time, the District has leased the hospital it operated and has invested its assets while reinvesting in the community. Today, the District has a total invested portfolio of approximately \$335 million, with the alternatives portfolio constituting approximately \$117 million. The alternatives allocation has been built up in recent years.

MCHD is governed by a Board of Trustees comprised of community leaders who volunteer their time and talents to help ensure the District achieves its mission. The District supports health programs for the citizens of Marion County and works closely with community partners to address priorities

including dental health, diabetes and obesity, substance use and behavioral health, unintentional injuries, and prevention and early detection of chronic disease.

The District is a dependent special district of the State of Florida and retains fiduciary responsibility for the investment of the funds entrusted to it. More information about the District can be found at <https://www.mchdt.org/>. The District is a governmental entity of the State of Florida and is subject to Florida public records and open government requirements. All materials submitted and all communications with proposing firms may be subject to public disclosure.

Assets to Be Managed

This RFP is focused on the District's alternative investment portfolio, which may include marketable alternatives, private credit, and private equity. Currently, the District employs two separate OCIO investment managers, each responsible for approximately one-half of the total portfolio. The investment pool represents funds intended to support the long-term goals of the District while maintaining the corpus in the event it is necessary for the District to resume control of the hospital it leases.

Authority and Relationship

The District seeks to enter into a contract for an indefinite term, terminable at will by either party upon thirty (30) days' written notice, and to establish a long-term relationship with the selected firm, subject to applicable periodic re-bid requirements.

SECTION 3: SCOPE OF SERVICES

- Invest and manage the alternative investment portfolio in accordance with the District's Investment Policy Statement.
- Provide monthly electronic portfolio valuation and performance statements and periodic presentations as requested.
- Report all pertinent personnel changes related to the account.
- Collaborate with the District's Investment Advisor for reporting and analysis.
- Respond to periodic due diligence questionnaires, as set out in Exhibit A, which may be amended from time to time.
- Participate in periodic portfolio update calls.
- On an annual basis, provide detailed information regarding all fees to which MCHD's invested assets are subject across the alternatives portfolio.
- Report on private markets pricing and cash flow projections, as required.

SECTION 4: REQUIRED PROPOSAL INFORMATION

Proposals must specifically address and include the information requested in this section. Respondents should organize their proposals using the headings below and should provide direct, complete answers. Where the response is "yes" or "no," respondents should state the answer clearly and provide supporting detail where requested.

A. Qualification Criteria

The qualification criteria are divided into Mandatory Qualifications and Preferred Qualifications. Mandatory Qualifications are minimum requirements. Preferred Qualifications will be considered during evaluation but are not minimum requirements unless expressly stated otherwise.

Mandatory Qualifications

1. Alternatives Coverage: Confirm that the respondent currently offers discretionary investment services in each of the following asset classes: marketable alternatives, private credit, and private equity.
2. Experience: Confirm at least seven (7) years of discretionary investment or OCIO experience in each of the following asset classes: marketable alternatives, private credit, and private equity. Advisory-only experience will not be counted. Responses that do not explicitly state discretionary investment or OCIO experience by asset class may be deemed nonresponsive.
3. AUM: Confirm minimum aggregate discretionary/OCIO alternatives assets under management of at least \$10 billion across marketable alternatives, private credit, and private equity. Advisory assets under advisement will not be counted unless clearly identified separately from discretionary AUM.
4. Breadth: Confirm minimum manager research team full-time equivalents as follows: marketable alternatives: 4 FTEs; private credit: 4 FTEs; private equity: 10 FTEs. If personnel cover multiple asset classes, allocate the response on an FTE basis.
5. Depth: Confirm the minimum number of General Partner relationships or full investment underwrites completed in the past 36 months, using data through September 30, 2025, or a more recent date if available: marketable alternatives: 10; private credit: 12; private equity: 30.
6. Transparency: Confirm willingness to respond proactively, thoroughly, and transparently to semi-annual detailed questionnaires and annual detailed fee reviews from MCHD's Investment Advisor. Respondents must explicitly state that they have read Exhibit A and, if appointed, agree to provide the information requested in Exhibit A to MCHD's Investment Advisor, including Question 17.
7. Client Base: Confirm at least ten (10) institutional clients, each with more than \$50 million in assets, for which the respondent provides alternative discretionary investment services.
8. Contract Terms: Confirm willingness to enter into a contract substantially consistent with the draft contract in Exhibit B. Any requested exceptions must be clearly identified in the proposal.

Preferred Qualifications

1. Experience: More than ten (10) years of discretionary investment experience in each asset class: marketable alternatives, private credit, and private equity. Respondents should provide the number of years of discretionary experience for each asset class.
2. Asset-Class AUM: Discretionary/OCIO asset-class-level AUM of at least \$1.5 billion for marketable alternatives, \$1.5 billion for private credit, and \$3 billion for private equity. Advisory AUA should be reported separately and will not be treated as discretionary AUM.

3. Non-Profit Client Base: At least ten (10) institutional-size non-profit clients, each with more than \$50 million in assets, for which the respondent provides alternative discretionary investment services.

MCHD reserves the right, in its sole discretion, to waive minor variances or determine that a respondent substantially satisfies the intent of the qualification requirements when deemed to be in the best interest of MCHD.

B. Company-Wide Information

1. State the year your firm was organized and the year(s) in which you began investing discretionary capital in marketable alternatives, private credit, and private equity.
2. Provide the number of institutional clients, defined as clients with more than \$50 million in assets, and describe the type of clientele served. Include total non-profit clients and the number of non-profit clients with total assets between \$100 million and \$500 million. State the percentage of clients using discretionary investment services versus advisory services, and the percentage of discretionary clients using the firm across marketable alternatives and private markets.
3. As of September 30, 2025, provide total alternatives AUM and AUM within marketable alternatives, private credit, and private equity. Provide the same information for non-profit clients in total and by asset class.
4. As of September 30, 2025, confirm the number of investment-related staff and break the figure down by client-facing consultants/analysts and manager research professionals. Within manager research, provide FTEs by marketable alternatives, private credit, and private equity.
5. For client service staff, confirm the client-to-consultant ratio.
6. As of September 30, 2025, within client servicing, marketable alternatives, private equity, private credit, and firmwide total, confirm staff hires and departures over 1-year, 3-year, and 5-year periods.
7. Provide years of experience and firm tenure of the investments team as a whole and for client service, marketable alternatives manager research, private credit manager research, and private equity manager research.
8. Provide the number of CFAs, CAIAs, and MBAs on the investments team as a whole and for the same sub-teams listed above.
9. State the location of your headquarters and the office(s) where the proposed client service team is based.
10. List any current or recent litigation or regulatory actions from the past five years.
11. Provide your most recent credit rating. Private firms should provide the most recent audited financial statements.
12. For the most recent three fiscal years, confirm the percentage of firm revenue generated from discretionary alternatives investment services.

C. Proposed MCHD Team and Qualifications

1. List the individuals assigned to the MCHD account. Provide bios and responsibilities for each individual.
2. For each proposed client service team member and the team as a whole, provide years of alternative investment management experience, tenure at the firm, and professional designations.
3. State how many clients each team member serves and provide a list of clients currently serviced by the proposed service team.
4. Describe the proposed team's experience working with Florida public entities subject to Florida public records and open government requirements.
5. Provide three client references served by the proposed service team, preferably clients similar to the District in type and size.
6. Describe your client service philosophy.
7. Explain how you measure and track client service success.

D. Alternatives Investment Philosophy

1. Describe your alternatives investment philosophy, including any differences across marketable alternatives, private credit, and private equity.
2. Summarize your current views on the attractiveness of each asset class, including how you monitor the space and which sub-strategies are most and least attractive.
3. Using private credit as a case study, describe how you would invest an allocation of approximately \$35 million today, including sub-strategy breakdown, leverage, spread, yield, track record, primary/secondary/co-investment allocation, and closed-end versus open-end exposure. Underlying manager names may be anonymized.
4. Describe how the democratization of alternatives has affected forward-looking risks and opportunities in marketable alternatives, private credit, and private equity.

E. Alternatives Manager Research

1. Describe the breadth of research coverage in marketable alternatives, private credit, and private equity, including sub-investment styles researched and number of funds underwritten over the past five years.
2. For each asset class, describe research resources, proprietary products, conflicts management, GP relationships, underwrites over the past 1, 3, and 5 years, capacity allocation process, LPAC board participation, exposure to primaries/secondaries/co-investments, and use of third-party fund-of-funds products.
3. Describe the research process for sourcing, due diligence, and post-investment monitoring. Highlight differentiators versus peers.

4. Provide anonymized sample research reports for one primary fund in each of marketable alternatives, private credit, and private equity, written in the past two years.
5. List tools and information sources used for manager research and post-investment monitoring and state whether they are developed in-house or by third parties.
6. Describe how the firm evaluates manager success and over what timeframe manager selection skill should be assessed. State whether the firm would be willing to tie a portion of its fee to aggregate portfolio outperformance against comparable peer data.
7. Provide net-of-fee track records for marketable alternatives, private credit, and private equity. Marketable alternatives should be as of September 30, 2025, and private markets as of June 30, 2025. Include 1-, 3-, 5-, 7-, 10-, 15-, and 20-year periods where available.

F. Proposed MCHD Portfolio

1. For the existing approximately \$117 million alternatives portfolio, assume strategic allocations of 50% marketable alternatives, 30% private credit, and 20% private equity. For this question, ignore current positioning and assume capital can be deployed freely on day one. Describe the portfolio you would build for MCHD.
2. Provide as much detail as possible, including expected return and risk for each asset class and the portfolio as a whole. Underlying GP names may be anonymized.
3. Explain why the proposed portfolio was selected and estimate the timeline to achieve the proposed exposures.
4. Confirm the proposed portfolio breakdown by proprietary vehicle versus third-party direct vehicles; primaries, secondaries, and co-investments; region, sector, PE stage, and sub-strategy; multi-sector generalists versus sector specialists; estimated management and performance fees; and estimated distributed cash yield from private credit.

G. Reporting and Portfolio Monitoring

1. Describe the frequency and format of reporting to the Investment Advisor and MCHD Board of Trustees. Include a sample performance report.
2. Confirm that granular reporting of valuations and returns will be provided monthly or quarterly down to the individual underlying manager or investment, including performance assessment and compliance with Board-approved investment policies.
3. For marketable alternatives, describe post-investment monitoring, watch-list criteria, termination criteria, and examples.
4. For private markets, describe post-investment monitoring.
5. Describe differentiators in reporting and monitoring.

H. Fees

1. Provide proposed all-in fees for the requested services, including initial, ongoing, custodial, management, and other applicable fees.
2. Break down fees between proprietary fund vehicles and broader portfolio oversight/direct investments.
3. State whether the firm is willing to include a performance component in its fees and how that would work.
4. If fees differ by service component, asset class, primary, secondary, or co-investment exposure, list each fee and provide an overall percentage and dollar estimate using the proposed portfolio framework.
5. Confirm whether the fee proposal is negotiable.
6. State whether the firm negotiates underlying manager fees and, if so, describe how. Based on the proposed portfolio, confirm the number of investments or funds with negotiated fee discounts and the magnitude of those discounts versus standard rates.

I. Other Services

1. Summarize the firm's unique competitive advantages and why MCHD should hire the firm as its alternatives OCIO investment manager.
2. Describe any additional or alternative services that may benefit MCHD and this appointment.
3. Describe your experience providing those services.

SECTION 5: EVALUATION CRITERIA

The Investment Committee will select a firm based on evaluation of responsive proposals according to the criteria below. Qualified proposals must meet the Mandatory Qualifications, demonstrate experience advising and reporting to similar governmental or non-profit organizations on discretionary management of alternative portfolio funds, and show that the firm and engaged personnel have all authorizations, permits, licenses, and certifications required by law to perform the services specified in this RFP.

| Category | Weight |
|--|--------|
| Exceeds Mandatory Qualifications | 5% |
| Experience and stability of firm/team | 5% |
| Experience with similar non-profit clients | 5% |
| Alternatives philosophy alignment | 10% |
| Breadth and depth of manager research | 15% |
| Alternatives track record | 25% |
| Proposed alternatives portfolio | 20% |
| Reporting and communication | 5% |
| Fees | 10% |

The District reserves the right to be the sole judge as to the overall acceptability of any proposal and the individual merits of specific provisions within competing offers. The District's decision will be final. The District reserves the right to reject any and all proposals in whole or in part, withdraw the RFP, waive informalities, obtain new proposals, and take any other action in the best interests of the District. This RFP does not obligate the District to accept or contract for any services or pay any costs incurred by respondents in preparing or submitting a proposal.

SECTION 6: INSTRUCTIONS TO RESPONDENTS

A. Respondents shall thoroughly examine and be familiar with the specifications. Failure to receive or examine this document shall not relieve the respondent of obligations pertaining to this RFP or any subsequent contract.

B. Any unauthorized changes or modifications to the RFP specifications may result in rejection of the proposal as nonresponsive.

C. The responsibility for submitting the proposal to MCHD on or before the specified date and time rests solely with the respondent. MCHD is not responsible for delays caused by transmission, delivery, or any other occurrence.

D. The response deadline will be strictly observed. Under no circumstances will a proposal delivered after the deadline be considered.

E. Respondents may not withdraw or modify proposals for ninety (90) days after the opening time and date, unless MCHD agrees otherwise in writing.

F. MCHD reserves the right to reject the proposal of any respondent that has previously failed to properly perform a contract, failed to deliver timely on similar contracts, or is not in a position to perform properly under this contract.

G. Federal, state, county, and local laws, ordinances, rules, and regulations that affect the services covered herein apply. Lack of knowledge by the respondent will not relieve the respondent from responsibility.

H. By submitting a proposal, the respondent warrants to MCHD that it will comply with all applicable federal, state, and local laws, regulations, and orders in providing the services under the proposed contract.

I. By submitting a proposal, the respondent certifies that its proposal is made without collusion, fraud, outside control, or other illegal action, and without any improper understanding, agreement, or connection with any other respondent.

J. Pursuant to Section 287.134(2)(a), Florida Statutes, an entity or affiliate placed on the discriminatory vendor list may not submit a bid or proposal on a contract to provide goods or services to a public entity and may not transact business with a public entity.

ATTACHMENTS

Exhibit A: Due Diligence Questionnaire

Exhibit B: Draft Contract

Beacon Point Lease Transition for Domestic Violence Outreach

Staff continues to work closely with community partners and the Florida Department of Children and Families regarding the transition of domestic violence services operating by CASA Marion. Effective June 30, 2026, services will transition to Marion County Sexual Assault Center, Inc., which is currently undergoing a rebranding process and will begin operating under the name “Lotus Project.” The transition is intended to ensure continuity of critical domestic violence and sexual assault services within Marion County while supporting long-term operational sustainability and integrated victim support services.

As part of this transition, staff is requesting Board authorization to transfer the current lease agreement for space located at Beacon Point from CASA Marion to Marion County Sexual Assault Center, Inc. (Lotus Project), effective June 30, 2026, to allow for uninterrupted service delivery and continued occupancy of the space for victim advocacy and support services.

City of Ocala Fire House Lease Resolution

MARION COUNTY HOSPITAL DISTRICT RESOLUTION

**RESOLUTION OF THE MARION COUNTY HOSPITAL DISTRICT TERMINATING
LEASE AGREEMENT WITH THE CITY OF OCALA**

WHEREAS, on the Marion County Hospital District (“MCHD”) and the City of Ocala entered into a lease agreement dated September 30, 2019, (the “Lease”) for the real property described in the attached Exhibit “A.”

WHEREAS, the Lease is intended to run for a term of thirty (30) years.

WHEREAS, MCHD and the City of Ocala have mutually agreed to terminate the Lease.

NOW THEREFORE, BE IT RESOLVED AS FOLLOWS:

1. The recitals set forth above are incorporated by reference herein.
2. MCHD’s Board of Trustees hereby authorizes the termination of the Lease pursuant to Section 3.2 because MCHD no longer needs the premises for the provision of the services anticipated by the Lease.

THIS RESOLUTION INTRODUCED and ADOPTED by the Marion County Hospital District Board of Trustees on May 18, 2026.

MARION COUNTY HOSPITAL DISTRICT

By: _____
Teresa Stephens, Chairman

**EXHIBIT A
PROPERTY**

**SEC 18 TWP 15 RGE 22
PLAT BOOK C PAGE 086
CARVER PLAZA
BLK I LOTS 5.6.7
FIRE STATION #3**

Marion County Parcel ID # 28420-003-00

Landscaping Plans for Beacon Point

As part of the Beacon Point parking lot project, the City of Ocala has required additional landscaping improvements in order to meet final project and permitting requirements. Staff is currently obtaining bids for the landscaping work; however, it is anticipated that the total cost will exceed \$10,000, requiring Board approval in accordance with finance policies. To avoid delays in the completion of the parking lot project and maintain project timelines, staff is requesting authorization to proceed with the required landscaping improvements once bids are finalized and reviewed with the assistance of Trustee, Harvey Vandeven.

FY 2025-2026 BALANCED SCORECARD

| LEAD | RESPONSIBLE PARTY | STRATEGY MAP ALIGNMENT | MEASURE | TARGET | % of GOAL | UPDATES | |
|-----------------|---------------------------|---|---|--|---|---|--|
| CUSTOMER | | | | | | | |
| 1 | MCHD Executive Leadership | MCHD Executive Leadership MCHD Staff MCHD Grantees | Identify Health Needs for Marion County | Community awareness and satisfaction with dental, diabetes & obesity, substance abuse and mental health, unintentional injury prevention and prevention and early detection of chronic disease programs | 10,186 surveys | 53% | Total Q1 and Q2 number is 5,528. This includes a total of 1446 MCHD surveys, 1105 SMA surveys with an average score of 4.49 out of 5 and 2977 Heart of Florida surveys with an average of 83.9% "excellent" rating on services received. |
| 2 | MCHD Executive Leadership | MCHD Executive Leadership MCHD Trustees MCHD Staff | Identify Health Needs for Marion County | Collaborate with community stakeholders to close service gaps and better meet citizens' needs. | Facilitate at least THREE collaborative initiatives annually that produce measurable improvements in access, efficiency, or outcomes for Marion County residents. | 40% | MCHD coordinated a Veterans Resource fair for the west side of Ocala, this effort included coordination with Veterans Resource Center, Senior Services, HCA, Advent and multiple other community stakeholders. MCHD is in the process of the roll out of a county wide CPR/AED initiative where the end goal will be receiving a HeartSafe designation from the Citizen's CPR Foundation. This initiative, in order to be successful, will include representatives of Marion County and it's municipalities. |
| 4 | MCHD Executive Leadership | MCHD Executive Leadership MCHD Staff MCHD Grantees | Make an Impact | # of impacts in Marion County | 215,000 Programmatic impacts | 74% | Current Impact for as of Q2 is 159,478 Programmatic consumers |
| 5 | Data Analyst | MCHD Staff MCHD Grantees | Make an Impact | % of results achieved against stated goals. | 90% | 75% | Currently our projects are at 75% goal achievement. |
| INTERNAL | | | | | | | |
| 6 | MCHD Leadership | MCHD Executive Leadership MCHD Staff MCHD Contracted Marketing Firm | Expand exposure to increase access to programs | Increase community awareness of MCHD programming and services through website redesign, social media campaigns, and videos | Each program will meet their social engagement impression count: MCHD: 600,000 AMP: 756,000 FANS: 900,000 CHP: 756,000 BEACON POINT: 756,000 HEALTHY OCALA: 600,000 | MCHD: 86% AMP: 98% FANS: 52% CHP: 77% BEACON: 68. HEALTHY OCALA: 47% | Most programs are on track to meet their impressions goal, Healthy Ocala will need to see an increase: MCHD 516,078; AMP 738,161; FANS 469,980; CHP 584,962; BEACON POINT 510,758; HEALTHY OCALA 279,267 |
| 7 | Data Analyst | MCHD Staff | Make an Impact | Ensure quarterly and annual reviews of all grantees are completed to verify their adherence to agreements, across all aspects ,including the review of reported impacts and quality of services. Quarterly site visits will be completed and documented. | 100% of quarterly and annual reviews of projects will be completed and uploaded to mindshare. 100% of quarterly site visits will be completed and uploaded to Mindshare. | 50% | Annual reviews have been completed, Q2 site visits have been completed, financial and objective reviews have been completed and beacon point quarterly reviews are in progress. |
| 8 | MCHD Leadership | MCHD Executive Leadership MCHD Trustees MCHD Staff | Expand exposure to increase access to programs | Increase community awareness by launching new outreach efforts through podcasts and speaking engagements. | 12 engagements by 09/30/2026 | 50% | MCHD employees have participated in 7 structured outreach speaking events and/or podcasts to date. Engagements are on track, averaging one a month. |
| EMPLOYEE | | | | | | | |
| | MCHD Leadership | MCHD Leadership | Continuing Education and Professional Development | MCHD will onboard or develop specific supervision tools to streamline performance evaluations and track progress towards established goals. | implementation by 4/10/2026 | 100% | A new employee performance tool was onboarded in January 2026, Trakstar. This platform will allow us to track employee progress towards goals throughout the year, document supervision notes and provide a platform to complete annual reviews. |

| | | | | | | | |
|------------------|--------------------------------------|---|---|---|---|------|---|
| 9 | MCHD Leadership | MCHD Leadership | Continuing Education and Professional Development | Ensure at least 90% of employees demonstrate measurable progress toward their professional development goals through quarterly check-ins, mentorship, and alignment with organizational objectives. | 90% of employees will show measurable progress toward their professional development goals, verified through quarterly check-ins and supervisor documentation. | 50% | Employees have created their goals for 2026, we are completing the onboarding process with the new review platform which will allow us to document and track employee progress towards their goals as well as any supervisory feedback. |
| 10 | MCHD Staff | MCHD Executive Leadership MCHD Trustees MCHD Staff | Continuing Education and Professional Development | Staff will participate in trainings throughout the year tailored to actual growth within the Five Pillars of Marion County Hospital District (MCHD) or their specific area of focus. | At least 90% of staff will complete a minimum of 15 hours of training focused on MCHD Pillars, Leadership Development, Project Management, Grant Management, or other areas that align with their personal development goals within their roles at the Marion County Hospital District. | 27% | 3 of 11 employees have completed all 15 hours of training, the rest are on track to complete their trainings ahead of schedule. |
| 11 | MCHD Leadership and Identified Staff | MCHD Leadership MCHD Staff | Continuing Education and Professional Development | MCHD staff will complete site visits to innovative programs in Florida and the US specific to MCHD Pillars. | 5 visits during the fiscal year focused on each of the different MCHD Pillars. | 100% | 5 visits have been completed to date |
| FINANCIAL | | | | | | | |
| 12 | Crippen and Co | MCHD Leadership MCHD Trustees MCHD Contracted Accounting Firm and Investment Consultant | Earn a rate of return | MCHD will ensure an annual rate of return capable of sustaining our financial endowment. | Invest 4% (annually) of our portfolio (evaluation determined on August 31 each year) | 42% | Q1= 1.75; Q2 = -.69%; Year to date = 1.04% |
| 13 | MCHD Executive Leadership | MCHD Executive Leadership | Draw additional dollars from outside sources | Increase funding to support the provisions of health programming in Marion County. | \$500,000 Tier 1 \$750,000 Tier 2 \$1,000,000 Tier 3 | 0% | An appropriations request for \$1.25 million for Domestic Violence funding for Marion County has been submitted by MCHD. |

FANS Video Winners

The Marion County Hospital District's FANS (Fitness and Nutrition in Schools) program recently hosted its annual student video contest, encouraging participants to creatively promote healthy lifestyles, nutrition, physical activity, and wellness habits through digital storytelling. The contest provided students with an opportunity to use their creativity and communication skills to highlight the importance of making healthy choices while engaging their peers in a meaningful way.

This year's submissions showcased an impressive level of talent, originality, and passion for health and wellness. During today's meeting, the Board will have the opportunity to view a compilation video featuring all of the winning entries and recognize the outstanding efforts of the participating students and schools. The contest continues to serve as an innovative way to reinforce the goals of the FANS program while empowering youth voices throughout Marion County.

Beacon Point Parking Lot Update

The Beacon Point parking lot project has been completed. Final paving, striping, drainage improvements, and plumbing-related infrastructure work have all been finalized.



Beacon Point Scorecard (SMA)

| SMA | Measure | Goal | Q1 | Q2 | |
|-----------------------------------|--|------|-----|------|-------------|
| SMA - BEACON POINT - MAT | SMA will engage 85% of outpatient clients in MAT treatment within 1 business day of referral | 85% | 99% | 97% | |
| | Attain a 80% rate of consumers in MAT with a program length of stay at 90 days or more. | 80% | 82% | 82% | |
| | Report the number of unique consumers on Vivitrol on a quarterly basis. | R | 7 | 7 | Report only |
| | Report the number of unique consumers on Sublocade on a quarterly basis. | R | 8 | 4 | Report only |
| | Report the number of unique consumers on Buprenorphine on a quarterly basis. | R | 293 | 304 | |
| | MAT Services will serve at least 500 clients annually. | 500 | 403 | 414 | |
| | # OF REFERRALS RECEIVED FROM ON-CAMPUS PROVIDERS | R | 78 | | Report only |
| | # OF referrals made to on-campus providers | R | 62 | | Report only |
| SMA - BEACON POINT - DETOX | 90% of discharged clients will not be readmitted within 14 days of discharge | 85% | 99% | 98% | |
| | 75% of discharged Beacon Point Detox clients will not be re-admitted within 90 days of discharge. | 75% | 85% | 88% | |
| | SMA Detox will serve at least 400 clients annually | 400 | 98 | 121 | |
| | 80% successful discharge rate from Beacon Point Detox. | 75% | 86% | 88% | |
| SMA - BEACON POINT - RES 1 | 100% of History and Physicals will be completed within three calendar days of admission into the Beacon Point Residential Level I Program. | 100% | 83% | 100% | |
| | 70% of consumers will successfully complete the Beacon Point Residential Level I episode of care. | 70% | 65% | 72% | |
| | Provide Residential I services to 96 consumers annually at the Beacon Point location. | 96 | 33 | 31 | |

Beacon Point Scorecard (SMA)

| SMA | Measure | Goal | Q1 | Q2 | |
|--|---|------|------|------|---|
| SMA - BEACON POINT - PEER | The number of consumers engaged by peers, delineated by the point of engagement - hospital emergency departments, Beacon Point and all other locations | 2400 | 907 | 1019 | |
| | Report on the number of clients contacted by Peers who have been diagnosed with Substance Use Disorder. | R | 254 | 366 | Report only |
| | 10% of clients who have been diagnosed with Substance Use Disorder who engaged in treatment (MAT, Detox, Res 1, Outpatient) following contact by the Peer Program. | 10% | 17% | 19% | |
| | 80% of individuals engaged will access a less intensive level of care within 30 days of service. | 80% | 90% | 73% | This number will increase as there are several contact that still need to be entered |
| | 60% of individuals will remain in care for at least 90 days. | 60% | 67% | 12% | This number will increase as there are several contacts that need to be entered and have not come close to the 90 day mark. |
| SMA - BEACON POINT - ACCESS CENTER | 90% of warm hand-offs were completed from Access Center to programs at Beacon Point: MAT Clinic, Detox, Residential Level 1, Peer Support, Counseling (Lifestream), Dental (Langley), and Medical (Heart of Florida). | 90% | 99% | 83% | still on track to meet goal this year |
| | 95% of individuals will be referred to a program at Beacon Point- MAT Clinic, Detox, Residential Level 1, Peer Support, Counseling (Lifestream), Dental (Langley), and Medical (Heart of Florida). | 95% | 100% | 96% | |
| | The Centralized Access Center wil serve at least 469 clients annually | 469 | 230 | 296 | |
| SMA - BEACON POINT - MED MANAGEMENT | 90% of clients will receive a psychiatric evaluation within two business days of referral | 90% | 96% | 88% | still on track to meet goal this year |
| | 75% of clients will keep their scheduled medication management appointments. | 75% | 76% | 75% | |
| | Psychiatric Medication Management clinic will serve no less than 200 clients | 200 | 350 | 279 | |
| | # OF REFERRALS RECEIVED FROM ON-CAMPUS PROVIDERS | R | | 46 | |
| | # OF referrals made to on-campus providers | R | | 46 | |

Beacon Point Scorecard (Heart of Florida/LifeStream)

| Heart of Florida | Measure | Goal | Q1 | Q2 | |
|---------------------------------|---|---------------|-----|-----|---|
| Heart of Florida - Beacon Point | Total number of consumers that received primary care services | 200 | 50 | 49 | HFHC is currently seeing more patients this Q1 and Q2 then they did last fiscal year, they should be on track to meet their goal of 200 unique clients this year. |
| | Total number of no shows | LESS than 23% | 33% | 18% | |
| | Total # of walk in appointments | R | 20 | 12 | Report only |
| | Consumers will be seen within 7 days of referral | 80% | | 89% | |
| | Total number of referrals received from on-campus providers | R | 50 | 17 | Report only |
| | # OF referrals made to on-campus providers | R | 0 | 0 | Report only |
| | Total number of patient visits | R | 69 | 68 | Report only |
| | # of days services provided on campus | R | 12 | 10 | Report only |

| Lifestream | Measure | Goal | Q1 | Q2 | |
|--|---|------|------|------|-------------|
| Lifestream - Beacon Point - Outpatient | Initiate services within 7 days for 95% of individuals served | 95% | 100% | 100% | |
| | Provide counseling to 550 consumers annually | 550 | 220 | 242 | |
| | Number of individual counseling services | R | 1307 | 1335 | Report only |
| | Number of group counseling services | R | 611 | 475 | Report only |
| | Number of family counseling services | R | 4 | 10 | r |
| | 95% of client will have ASAM or FARS completed at initiation of services | 95% | 100% | 98% | |
| | Lifestream will improve/maintain 90% or greater of consumer functioning (as shown in ASAM/FARS scores). | 90% | 96% | 93% | |
| | Lifestream will maintain a 65% or greater successful discharge/transfer disposition of consumers served seeking substance use disorder treatment. | 65% | 81% | 86% | |
| | Lifestream will maintain a 70% or greater successful discharge/transfer disposition of consumers served seeking adult mental health treatment. | 70% | 90% | 86% | |
| | # OF REFERRALS RECEIVED FROM ON-CAMPUS PROVIDERS | R | 150 | 129 | Report only |
| | # OF referrals made to on-campus providers | R | 32 | 62 | Report only |

Health Projects Scorecard

| Program | Measure | Goal | Q1 | Q2 | NOTES |
|----------------------------------|--|-------------------|--------------|--------------|--|
| Interfaith | Increase referrals to DEEP training offered I the community | R | 57 | 56 | Report only |
| | Increase referrrals to medical home providders for diabetic and medical supplies | R | 37 | 24 | Report only |
| | Increase referrals o Beacon Providers for mental health support | R | 20 | 26 | Report only |
| FreeDOM Dental Clinic | Improve access to dental services to uninsured through dental clinics | 102 clinics | 20 | 16 | |
| | Reduce clients using Emergency Departments for dental services | 1400 clients | 390 | 346 | |
| | Increase the type of dental services offered to uninsured clients. | 10,000 procedures | 3358 | 3364 | |
| | Improve access to emergency dental evaluation and treatment | 500 clients | 111 | 28 | Lack of volunteer dentists is causing FreeDOM to offer fewer clinics and serve fewer emergency patients than originally planned. |
| | Report total VALUE of volunteer hours contributed to dental program | \$240,000 | \$725,359.50 | \$850,760.65 | |
| FreeDOM Denture Program - Dental | Provide denture patient visits, including evaluations, fabrications, and fittings. | 260 | 91 | 186 | |
| | Increase dental prostheses, including complete uppers, complete lowers, upper and lowers, flippers, relines, and repairs. | 60 clients | 29 | 37 | |
| | Increase the type of denture services offered to uninsured/under insured clients. Report the type of dentures received: complete uppers, complete lowers, upper and lowers, flippers, relines, repairs, etc. | R | 29 | 37 | Report only |

Health Projects Scorecard

| Program | Measure | Goal | Q1 | Q2 | NOTES |
|---|---|---|------|------|---|
| Kimberly's Center | Reduce additional trauma incidents to children deemed unsafe by educating the child on specific strategies to manage unsafe situations. | 200 planning sessions with children | 52 | 65 | |
| | Reduce active trauma to children who are being removed from their unsafe homes and awaiting out of home placements. | 100% of children receive trauma informed care. | 100% | 100% | |
| | Increase access to initial trauma therapy sessions for children within 48 hours of removal. | 90% | 100% | 100% | |
| | Provide additional support and follow up to non-offending caregivers. | 100% | 100% | 100% | |
| | Contract with outside provider for onsite quarterly agency wide debriefings that incorporate elements of Vicarious Trauma education. | 2 | 0 | 0 | Debriefing scheduled for Q3 |
| | Community Outreach Advocate will complete two sessions with each 1st, 2nd, and 3rd grade classroom in the Marion County Public School System. | 5000 students | 3383 | 3017 | |
| | Community Outreach Advocate in partnership with the guidance counselors will complete two sessions with middle school students in the Marion County Public School System. | 5000 students | 2427 | 3172 | |
| | Community Outreach Advocate in partnership with the guidance counselors will complete two sessions with high school students in the Marion County Public School System. | 5000 students | 4497 | 3227 | |
| | Kimberly's Center Staff will complete adult training sessions throughout the community with the Marion County Public School Systems, College of Central Florida, and other Youth Serving Organizations. | Educate 250 adults | 61 | 0 | Adult sessions will be scheduled for Q3, once school is out for the summer. |
| | Transition Life Center | To establish and strengthen community connections with the purpose of securing essential resources and support for families of individuals with disabilities. | 12 | 8 | 6 |
| Introduce and assist families/individuals with med-waiver services. | | 40 | 11 | 7 | TLC has increased their promotion of this service to the community and fully expects to meet this goal this year. |
| Client awareness and meetings. Host informational meetings/workshops for special needs individuals and families. This goal will be measured by the total number of individuals/families attending each event. | | 100 | 57 | 95 | |
| To enhance the health and wellness of individuals with intellectual and developmental disabilities (IDD) through targeted education and support programs focused on diabetes management. | | 2 | 0 | 1 | |
| To promote obesity prevention and healthy lifestyle habits among individuals with IDD through inclusive wellness events that encourage physical activity. | | 1 | 1 | 0 | |

Health Projects Scorecard

| Program | Measure | Goal | Q1 | Q2 | NOTES |
|--|---|---|-----------|-----------|-------------|
| Marion County Children's Alliance | Improve awareness of SADD | 100 students | 114 | 114 | |
| | SADD Youth Advisory Board leadership cohort | 16 students remain enrolled for the school year. | 17 | 17 | |
| | Improve adult knowledge of securely locking medications, safe disposal of medications. | 1500 adults | 647 | 242 | |
| | Improve access to secure medication locking devices at Hidden in Plain Sight presentations. | 375 adults | 65 | 127 | |
| | Offer six Adult Mental Health First Aid classes and four educational workshops. | 10 | 1 | 3 | |
| Ocala Consulting and Prevention | Patient successfully achieve their treatment goals | 80% | 75% | 68% | |
| | Patients show a reduction in symptom severity | 25% | 69% | 65% | |
| | Patient reports satisfaction with services using the MCHD Customer Satisfaction Survey | 60% | 100% | 100% | |
| | OCP initiates treatment within 7 days of the initial assessment | 100% | 100% | 100% | |
| Dove Wellness Counseling | Patient successfully achieve their treatment goals | 85% | 80% | 85% | |
| | Patients show a reduction in symptom severity | 75% | 80% | 85% | |
| | Patient reports satisfaction with services using the MCHD Customer Satisfaction Survey | 60% | 100% | 100% | |
| | DWC initiates treatment within 7 days of the initial assessment | 100% | 100% | 100% | |
| Heart of Florida - Adult Dental | Increase access to adult dental services | R unduplicated clients served | 257 | 279 | Report only |
| | Increase access to adult dental procedures | R type of procedures and how many complete per type | 960 | 1244 | Report only |
| | Report total number of visits | R | 353 | 423 | Report only |
| | Report value of dental services | R | \$227,418 | \$324,087 | Report only |
| | | | | | |

Health Projects Scorecard

| Program | Measure | Goal | Q1 | Q2 | |
|--|--|------------------|-----|-----|--|
| Estella Byrd Whitman | Refer patients to the Community Home Project for specialty services. | 75% | 41% | 67% | |
| | Conduct quarterly health education sessions focused on diabetes and hypertension management. After completion, patients are referred to a DEEP training held by a community partner. Goal | 120 participants | 118 | 64 | |
| | Decrease patient no-show rates by 10% through enhanced appointment reminders and transportation assistance. | <950 no shows | 103 | 144 | |
| | Increase new patient visits by 5% this year. | 22 new patients | 52 | 261 | |
| | Patients will receive two primary care visits annually. | 40% | 85% | 63% | |
| Vet Resource Center | Prepare literature for radio, distribute to Marion County veteran clubs and mailing to begin the education and indentification of eligible veterans. | 100 | 15 | 30 | |
| | Prepare the required releases our participants have to sign and design our method of tracking each participant at each step of their testing and any indicated treatment | 415 | 140 | 87 | |
| | Schedule presentation with the area fire departments, polica and sheriff departments, veteran clubs and organizations such as the VFW and american Legion posts in Mation County | 40 | 12 | 5 | |
| | Recruit 415 eligible veterans for participation | 415 adults | 56 | 87 | |
| | Work with the CEP, the Marion County Commissioners and the Ocala City Council to identify companies that will offer our free cancer test to all of their staff and employees who are veterans. | 20 | 2 | 2 | |
| Senior Services - Senior Mobile Crisis Response Team Vehicle | Unduplicated clients served | R | 35 | 30 | Report only |
| | Number of calls for service | R | 54 | 61 | Q2: 61 services rendered: 1 DME delivery; 19 home visits; 9 transports; 12 crisis supports; 7 safety planning; 5 fall assessment; 1 701s screening; and 7 other. |
| | Number of home visits made | R | 31 | 19 | Report only |
| | Number of transports provided using the vehicle | R | 7 | 9 | Report only |

Health Projects Scorecard

| Program | Measure | Goal | Q1 | NOTES |
|---------------------------------|--|---|-----------|-------------|
| Heart of Florida - Adult Dental | Increase access to adult dental services | R unduplicated clients served | 257 | Report only |
| | Increase access to adult dental procedures | R type of procedures and how many complete per type | 960 | Report Only |
| | Report total number of visits | R | 353 | Report Only |
| | Report value of dental services | R | \$227,418 | Report only |
| SMA - COMMUNITY COUNSELORS | 50% of clients will be successfully discharged | 50% | 40% | |
| | 100% of clients will receive a Treatment Plan within 30 days of admission into the Community Based Counselor program | 100% | 100% | |
| | 95% of clients will have a full comprehensive assessment completed at admission into the Community Based Counselor program. | 95% | 90% | |
| | 100% of clients will receive FARS (adults) or CFARS (minors) within 30 days of admission into the Community Based Counselor program. | 100% | 100% | |
| | 75% of clients will show an increase in functioning utilizing FARS or CFARS | 75% | - | |
| | SMA will report the number of consumers who were served through the Community Based Counseling Program | >95 | 51 | |
| SMA - AMNESTY | 95% of those referred through the Amnesty program by law enforcement will be screened/assessed for behavioral health services | 95% | | |
| | 65% successful completion rate (still engaged after 90 days) for program participants | 65% | 25% | |
| | Navigator will attend and provide Amnesty program information at a minimum of 10 community events annually | 10 | 8 | |
| | Navigator will demonstrate a 90% contact attempt rate at 7,30 and 90 days from referral date | 90% | 100% | |
| | SMA will report the number of consumers that were served through the Amnesty Program | >35 | 8 | |

Health Projects Scorecard

| Program | Measure | Goal | Q1 | Q2 | NOTES |
|----------------------------------|--|------|------|------|-------|
| WellFlorida | 90% of referred women will have been contacted, or have documented attempts to contact, within 3 business days of receipt of referral. | 90% | 100% | 100% | |
| | 90% of enrolled women will be screened for substance use during the initial home visit (enrollment). | 90% | 100% | 100% | |
| | 90% of enrolled women will be screened for perinatal mood disorders during the initial home visit (enrollment). | 90% | 100% | 100% | |
| | 90% of enrolled women who screen positive for substance use or perinatal mood disorders will be referred to designated community resources for follow up support.y | 90% | 100% | 100% | |
| SMA - COMMUNITY COUNSELORS | 50% of clients will be successfully discharged | 50% | 56% | 76% | |
| | 100% of clients will receive a Treatment Plan within 30 days of admission into the Community Based Counselor program | 100% | 100% | 100% | |
| | 95% of clients will have a full comprehensive assessment completed at admission into the Community Based Counselor program. | 95% | 100% | 100% | |
| | 100% of clients will receive FARS (adults) or CFARS (minors) within 30 days of admission into the Community Based Counselor program. | 100% | 100% | 100% | |
| | 75% of clients will show an increase in functioning utilizing FARS or CFARS | 75% | - | - | |
| | SMA will report the number of consumers who were served through the Community Based Counseling Program | >95 | 55 | 67 | |
| | 95% of those referred through the Amnesty program by law enforcement will be screened/assessed for behavioral health services | 95% | | | |
| SMA - AMNESTY | 65% successful completion rate (still engaged after 90 days) for program participants | 65% | 25% | 100% | |
| | Navigator will attend and provide Amnesty program information at a minimum of 10 community events annually | 10 | 8 | 5 | |
| | Navigator will demonstrate a 90% contact attempt rate at 7,30 and 90 days from referral date | 90% | 100% | 100% | |
| | SMA will report the number of consumers that were served through the Amnesty Program | >35 | 8 | 5 | |

In-Kind Providers

| Program | Measure | Location | Goal | Q1 | Q2 | NOTES |
|---|--|---------------------|------|------|------|--|
| CASA (Community Action Stop Abuse of Marion County) | Number of survivors residing at the emergency shelter per quarter | Beacon Point | 100 | 105 | 121 | |
| | Number of survivors referred to Beacon Point programs per quarter | | 20 | 106 | 101 | |
| | Number of DV services rendered at CASA Marion Outreach or CPI locations per quarter | | 900 | 2459 | 3370 | |
| | Number of survivors served at CASA Marion Outreach per quarter | | 100 | 251 | 260 | |
| Marion County Sexual Assault Center | A Trauma Informed Sexual Assault Victim Advocate accompanied victim during SANE exam | Foundation Building | 85 | 16 | 15 | Although they did not meet their established goal, it should be noted that 15/15 victims had an advocate accompany them for their SANE exam. |
| | Victims are provided Crisis Intervention and Crisis Counseling | | 150 | 133 | 99 | |
| | Victims are provided Information and Referrals | | 150 | 154 | 165 | |
| | Victims are provided self growth and support groups | | 60 | 42 | 47 | |
| | Conduct Community Awareness events and Professional Training | | 12 | 13 | 24 | |

Match Providers (SMA)

| SMA-MATCH | Measure | Goal | Q1 | Q2 | NOTES |
|---|---|------|------|------|-------|
| DETOX | 90% of clients will not be re-admitted within 14 days of successful discharge | 90% | 96% | 99% | |
| | SMA will serve at least 400 consumers through the Detox program at 60th Ave. | 400 | 64 | 93 | |
| Crisis Stabilization Unit | 90% of clients will not be readmitted within 14 days of successful discharge | 90% | 94% | 89% | |
| | SMA will serve at least 1100 consumers through the Crisis Stabilization Unit at 60th Ave. | 1100 | 416 | 448 | |
| Children's Crisis Stabilization Unit | 90% of clients will not be readmitted within 14 days of successful discharge | 90% | 87% | 91% | |
| | SMA will serve at least 600 consumers through the Children's Crisis Stabilization | 600 | 223 | 189 | |
| Addiction Receiving Center (Res 2) | 95% of master treatment plans completed within 15 days of admission | 95% | 91% | 70% | |
| | 95% of H&Ps will be completed within 3 days of admission | 95% | 82% | 100% | |
| | SMA will serve at least 285 consumers at 60th Ave. | 285 | 82 | 101 | |
| Outpatient Counseling Adult | 75% of clients will keep their appointments | 75% | 74% | 71% | |
| | 100% of Master treatment plans completed within 30 days of admission | 100% | 100% | 63% | |
| | 95% clients closed within 60 days of last service | 95% | 100% | - | |
| | SMA will provide services for at least 768 consumers through outpatient Adult Counseling at 60th Ave. | 768 | 400 | 399 | |
| Outpatient Counseling Children | 75% of clients will keep their appointments | 75% | 76% | 78% | |
| | 100% of Master treatment plans completed within 30 days of admission | 100% | 100% | - | |
| | 95% clients closed within 60 days of last service | 95% | 100% | - | |
| | SMA will provide services for at least 768 consumers through the Addictions Receiving Center at 60th Ave. | 768 | 363 | 362 | |

Match Providers (SMA/Heart of Florida)

| SMA-MATCH | Measure | Goal | Q1 | Q2 | NOTES |
|--|---|------------------|-------|-------|-------|
| Outpatient Medical Adult | Maintain overall rating of 4.05 or greater on client satisfaction survey | 4.05 | 4.66 | 4.5 | |
| | SMA will serve at least 2800 consumers through Outpatient Medical Adult at 60th Ave. | 2800 | 2892 | 2421 | |
| Outpatient Medical Children/Adolescent | Maintain overall rating of 4.05 or greater on client satisfaction survey | 4.05 | 4.4 | 4.94 | |
| | SMA will serve at least 1062 consumers through Outpatient Medical Children at 60th Ave. | 1062 | 1125 | 992 | |
| Program | Measure | Goal | Q1 | Q2 | NOTES |
| Heart of Florida - MATCH | Improve access to primary care | 95,000 visits | 19163 | 19687 | |
| | Improve access to dental services | 14000 procedures | 2936 | 3382 | |
| | Improve access to behavioral health services | 9500 visits | 2424 | 2800 | |
| | Improve access to health care (MATCH) | 25000 patients | 13750 | 14171 | |

**MARION COUNTY HOSPITAL DISTRICT
OCALA, FLORIDA**

**INTERIM FINANCIAL REPORT
April 30, 2026**

Marion County Hospital District
Ocala, Florida

Management is responsible for the accompanying financial statements and required supplemental information of the governmental activities and the major fund of the Marion County Hospital District (the District) as of April 30, 2026, March 31, 2026, and September 30, 2025, and for the periods ended April 30, 2026 in accordance with accounting principles generally accepted in the United States of America. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. We did not audit or review the financial statements and supplementary information nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. We do not express an opinion, a conclusion, nor provide any assurance on these financial statements.

Management has elected to omit substantially all the disclosures, and schedules of proportionate share of net pension liability and contributions which are required supplementary information, required by accounting principles generally accepted in the United States of America. If the omitted disclosures and supplementary information were included in the financial statements, they might influence the user's conclusions about the District's financial position and results of operations. Accordingly, the financial statements are not designed for those who are not informed about such matters.

We are not independent with respect to the District.

Crippen & Co., LLP

Ocala, Florida
May 13, 2026

MARION COUNTY HOSPITAL DISTRICT
STATEMENTS OF NET POSITION - GOVERNMENTAL ACTIVITIES
April 30, 2026

| | April 30, 2026 | March 31, 2026 | September 30, 2025 |
|--|---------------------------|---------------------------|-------------------------------|
| Assets: | | | |
| Cash and Cash Equivalents | \$ 4,763,443 | \$ 2,255,147 | \$ 552,995 |
| Investments | | | |
| Graystone | 169,983,985 | 165,762,754 | 112,697,209 |
| Truist | - | - | 108,487,637 |
| Cresset | 161,973,965 | 157,885,308 | 106,236,770 |
| Accrued Interest on Investments | 130,619 | 187,630 | 182,859 |
| Investment in Cooperative | 290,707 | 290,707 | 290,707 |
| Assets Limited as to Use | | | |
| Board Designated Cash | 86,330 | 68,187 | 85,636 |
| Cash, Cash Equivalents, and Prepayments | | | |
| DCF/Appropriations | 282,153 | 250,706 | 125,001 |
| Cash, Cash Equivalents, and Prepayments | | | |
| Opioid | 1,696,884 | 1,696,873 | 3,338,960 |
| Restricted Investments and Beneficial | | | |
| Interest in Gift Annuities | 310,480 | 310,480 | 310,480 |
| Prepaid Expenses and Other Current Assets | 423,325 | 430,829 | 378,298 |
| Capital Assets - Non-Depreciable | 437,625 | 437,625 | 437,625 |
| Capital Assets - Depreciated/Amortized (Net) | 2,931,209 | 2,933,985 | 2,977,223 |
| ROU Asset - Vehicle | 10,975 | 11,853 | 17,010 |
| Total Assets | 343,321,700 | 332,522,084 | 336,118,410 |
| Deferred Outflow of Resources: | | | |
| Deferred Outflow - Pension | 553,389 | 553,389 | 553,389 |
| Total Deferred Outflow of Resources | 553,389 | 553,389 | 553,389 |

MARION COUNTY HOSPITAL DISTRICT
STATEMENTS OF NET POSITION - GOVERNMENTAL ACTIVITIES
April 30, 2026

| | April 30, 2026 | March 31, 2026 | September 30, 2025 |
|--|---------------------------|---------------------------|-------------------------------|
| Liabilities: | | | |
| Accounts Payable, Net of Grants | \$ 1,505,679 | \$ 216,018 | \$ 855,216 |
| DCF Appropriations | 11,911 | 10,221 | - |
| Opioid Funds | 905,571 | - | - |
| Accrued Payables | 185,375 | 267,223 | 341,259 |
| Unearned DCF Appropriation Funds | 270,242 | 240,485 | 70,231 |
| Unearned Opioid Funds | 791,313 | 1,696,873 | 2,794,294 |
| ROU Liability - Vehicle | 8,910 | 9,616 | 13,741 |
| Self-Insured Liabilities | 7,746 | 19,547 | 15,314 |
| Net Pension Liability | 1,201,944 | 1,201,944 | 1,201,944 |
| CF MOU Liability | 1,424,251 | 1,424,251 | - |
| Unearned Lease Revenue | 30,523,355 | 30,614,469 | 31,161,153 |
| Total Liabilities | 36,836,297 | 35,700,647 | 36,453,152 |
| Deferred Inflow of Resources | | | |
| Deferred Inflow - Pension | 227,849 | 227,849 | 227,849 |
| Total Deferred Inflow of Resources | 227,849 | 227,849 | 227,849 |
| Net Position: | | | |
| Net Investment in Capital Assets | 3,370,899 | 3,373,847 | 3,418,117 |
| Restricted: | | | |
| For Donor Purposes - Capital, Scholarships, and Community Outreach Program | 310,480 | 310,480 | 310,480 |
| Unrestricted | 303,129,564 | 293,462,650 | 296,262,201 |
| Total Net Position | 306,810,943 | 297,146,977 | 299,990,798 |

MARION COUNTY HOSPITAL DISTRICT
STATEMENTS OF ACTIVITIES - GOVERNMENTAL ACTIVITIES
Period Ended April 30, 2026

| Functions/Programs | Month Ended | | | Year to Date | | |
|--|--------------------|------------------------------------|-----------------------|---------------------|------------------------------------|-----------------------|
| | Expenses | Lease and Other Revenue | Total | Expenses | Lease and Other Revenue | Total |
| Governmental activities: | | | | | | |
| General and Administrative | \$ 77,879 | \$ 91,114 | \$ 13,235 | \$ 589,842 | \$ 637,798 | \$ 47,956 |
| Health Improvement Initiatives | 141,744 | - | (141,744) | 1,092,762 | - | (1,092,762) |
| Grant Programs | 2,389,780 | 917,482 | (1,472,298) | 11,095,714 | 2,558,533 | (8,537,181) |
| Opioid Management | 13,172 | - | (13,172) | 95,512 | - | (95,512) |
| Depreciation and Amortization | 12,182 | - | (12,182) | 86,824 | - | (86,824) |
| Total Governmental Activities | <u>2,634,757</u> | <u>1,008,596</u> | <u>(1,626,161)</u> | <u>12,960,654</u> | <u>3,196,331</u> | <u>(9,764,323)</u> |
| General Revenues (Expenditures): | | | | | | |
| Interest and Dividend Income | | | 445,175 | | | 4,580,814 |
| Investment Income | | | 10,844,952 | | | 12,005,741 |
| Miscellaneous Expenditure | | | - | | | (2,087) |
| Total General Revenues (Expenditures) | | | <u>11,290,127</u> | | | <u>16,584,468</u> |
| Change in Net Position | | | 9,663,966 | | | 6,820,145 |
| Net Position, Beginning | | | <u>297,146,977</u> | | | <u>299,990,798</u> |
| Net Position, End | | | <u>\$ 306,810,943</u> | | | <u>\$ 306,810,943</u> |

Read accountant's compilation report.

MARION COUNTY HOSPITAL DISTRICT
BALANCE SHEETS - GOVERNMENTAL FUND
April 30, 2026

| | April 30, 2026 | March 31, 2026 | September 30, 2025 |
|---|---------------------------|---------------------------|-------------------------------|
| Assets: | | | |
| Cash and Cash Equivalents | \$ 4,763,443 | \$ 2,255,147 | \$ 552,995 |
| Investments | | | |
| Graystone | 169,983,985 | 165,762,754 | 112,697,209 |
| Truist | - | - | 108,487,637 |
| Cresset | 161,973,965 | 157,885,308 | 106,236,770 |
| Accrued Interest on Investments | 130,619 | 187,630 | 182,859 |
| Investment in Cooperative | 290,707 | 290,707 | 290,707 |
| Assets Limited as to Use | | | |
| Board Designated Cash | 86,330 | 68,187 | 85,636 |
| Cash, Cash Equivalents, and Prepayments | | | |
| DCF/Appropriations | 282,153 | 250,706 | 125,001 |
| Cash, Cash Equivalents, and Prepayments | | | |
| Opioid | 1,696,884 | 1,696,873 | 3,338,960 |
| Restricted Investments and Beneficial | | | |
| Interest in Gift Annuities | 310,480 | 310,480 | 310,480 |
| Prepaid Expenses and Other Current Assets | 423,325 | 430,829 | 378,298 |
| Total Assets | 339,941,891 | 329,138,621 | 332,686,552 |
| Liabilities: | | | |
| Accounts Payable, Net of Grants | \$ 1,505,679 | \$ 216,018 | \$ 855,216 |
| DCF Appropriations | 11,911 | 10,221 | - |
| Opioid Funds | 905,571 | - | - |
| Accrued Payables | 185,375 | 267,223 | 341,259 |
| Unearned DCF Appropriation Funds | 270,242 | 240,485 | 70,231 |
| Unearned Opioid Funds | 791,313 | 1,696,873 | 2,794,294 |
| Self-Insured Liabilities | 7,746 | 19,547 | 15,314 |
| CF MOU Liability | 1,424,251 | 1,424,251 | - |
| Unearned Lease Revenue | 30,523,355 | 30,614,469 | 31,161,153 |
| Total Liabilities | 35,625,443 | 34,489,087 | 35,237,467 |

**MARION COUNTY HOSPITAL DISTRICT
BALANCE SHEETS - GOVERNMENTAL FUND
April 30, 2026**

| | April 30, 2026 | March 31, 2026 | September 30, 2025 |
|--|---------------------------|---------------------------|-------------------------------|
| Fund Balance: | | | |
| Non-Spendable: | | | |
| Prepaid Expenses and Other Current Assets | 423,325 | 430,829 | 378,298 |
| Restricted: | | | |
| For Donor Purposes - Capital, Scholarships, and Community Outreach Program | 310,480 | 310,480 | 310,480 |
| Unassigned | 303,582,643 | 293,908,225 | 296,760,307 |
| Total Fund Balance | 304,316,448 | 294,649,534 | 297,449,085 |
| Total Liabilities and Fund Balance | 339,941,891 | 329,138,621 | 332,686,552 |

**MARION COUNTY HOSPITAL DISTRICT
RECONCILIATION OF THE BALANCE SHEETS OF GOVERNMENTAL FUND
TO THE STATEMENTS OF NET POSITIONS
April 30, 2026**

| | April 30, 2026 | March 31, 2026 | September 30, 2025 |
|--|---------------------------|---------------------------|-------------------------------|
| Total Fund Balance - Governmental Fund | \$ 304,316,448 | \$ 294,649,534 | \$ 297,449,085 |
| Amounts Reported for Governmental Activities in the Statement of Net Position are Different Because: | | | |
| Capital Assets used in Governmental Activities are not financial resources and, therefore, are not reported in the Fund. | 3,379,809 | 3,383,463 | 3,431,858 |
| Deferred outflows and inflows of resources related to pensions are applicable to future period and not reported in governmental funds. | | | |
| Deferred Outflows of Resources for Pensions | 553,389 | 553,389 | 553,389 |
| Deferred Inflows of Resources for Pensions | (227,849) | (227,849) | (227,849) |
| Long-term liabilities are not due and payable in the current year and, accordingly, are not reported as fund liabilities. All liabilities, both current and long-term are reported in the statement of net position. Long-term liabilities consist of: | | | |
| Net Pension Liability | (1,201,944) | (1,201,944) | (1,201,944) |
| Lease Payable | (8,910) | (9,616) | (13,741) |
| Total Net Position of Governmental Activities | \$ 306,810,943 | \$ 297,146,977 | \$ 299,990,798 |

MARION COUNTY HOSPITAL DISTRICT
STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN FUND
BALANCE - GOVERNMENTAL FUND
Period Ended April 30, 2026

| | Month Ended April 30, 2026 | Year to Date April 30, 2026 |
|---|---|--|
| Revenues | | |
| DCF Appropriation Revenue | \$ 11,911 | \$ 91,662 |
| Opioid Revenue | 905,571 | 2,466,871 |
| Lease Revenue | 91,114 | 637,798 |
| Investment Income | 10,844,952 | 12,005,741 |
| Interest and Dividend Income | 445,175 | 4,580,814 |
| Total Revenues | 12,298,723 | 19,782,886 |
| Expenditures | | |
| Operating Expenditures | | |
| Salaries and Benefits | 36,981 | 255,558 |
| Purchased Services and Other | 49,426 | 347,448 |
| Total Operating Expenses | 86,407 | 603,006 |
| Opioid Management Expenses | | |
| Salaries and Benefits | 10,564 | 73,709 |
| Purchased Services and Other | 2,608 | 21,803 |
| Total Opioid Management Expenses | 13,172 | 95,512 |
| FANS Project | | |
| Salaries and Benefits | 16,750 | 116,915 |
| Purchased Services and Other | 38,958 | 157,061 |
| Project Expense | - | 202,773 |
| Total FANS Project | 55,708 | 476,749 |
| AMP Project | | |
| Salaries and Benefits | 22,763 | 157,955 |
| Purchased Services and Other | 9,804 | 59,455 |
| Total AMP Project | 32,567 | 217,410 |
| Beacon Point Project | | |
| Salaries and Benefits | 8,052 | 53,994 |
| Purchased Services and Other | 9,539 | 106,142 |
| Total Beacon Point Project | 17,591 | 160,136 |

MARION COUNTY HOSPITAL DISTRICT
STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN FUND
BALANCE - GOVERNMENTAL FUND
Period Ended April 30, 2026

| | <u>Month Ended April 30, 2026</u> | <u>Year to Date April 30, 2026</u> |
|--|---|--|
| Community Home Project | | |
| Salaries and Benefits | 28,979 | 200,551 |
| Purchased Services and Other | 6,899 | 61,614 |
| Total Community Home Project | <u>35,878</u> | <u>262,165</u> |
| Grants Expenses | | |
| Salaries and Benefits | 15,540 | 103,483 |
| Programmatic Outreach | 1,073 | 9,613 |
| Behavioral Health Grants | 738,267 | 2,237,071 |
| Strategic Initiative Grants | 629,329 | 5,978,676 |
| Opioid Grant | 905,571 | 2,466,871 |
| Match Grants | 100,000 | 300,000 |
| Total Grants Expenses | <u>2,389,780</u> | <u>11,095,714</u> |
| Total Expenditures | <u>2,631,103</u> | <u>12,910,692</u> |
| Other Financing Sources | | |
| Issuance of Leases | <u>(706)</u> | <u>(4,831)</u> |
| Net Change in Fund Balance | 9,666,914 | 6,867,363 |
| Fund Balance, Beginning of Period | <u>294,649,534</u> | <u>297,449,085</u> |
| Fund Balance, End of Period | <u><u>\$ 304,316,448</u></u> | <u><u>\$ 304,316,448</u></u> |

**MARION COUNTY HOSPITAL DISTRICT
RECONCILIATION OF THE STATEMENTS OF REVENUES, EXPENDITURES, AND
CHANGES IN FUND BALANCE OF GOVERNMENTAL FUND TO THE
STATEMENTS OF ACTIVITIES**

| | Month Ended April 30, 2026 | Year to Date April 30, 2026 |
|--|---|--|
| Net Change in Fund Balance - Governmental Fund | \$ 9,666,914 | \$ 6,867,363 |
| Amounts Reported for Governmental Activities in the Statement of Activities are Different Because: | | |
| Governmental fund reported capital purchases as expenditures. However, in the statement of activities, the cost of those assets is depreciated over their estimated useful lives and reported as depreciation expense. | | |
| ROU Asset | (878) | (6,035) |
| Expenditures for Capital Assets | 9,406 | 40,810 |
| Depreciation Expense | (12,182) | (86,824) |
| Net Effect | (3,654) | (52,049) |
| The issuance of long-term debt provides current financial resources to governmental funds and thus contributes to the change in fund balance. In the statement of net position, however issuing debt increases long-term liabilities and does not affect the statement of activities. | | |
| Debt Issued or Incurred: | | |
| Issuance of Leases | 706 | 4,831 |
| Total Net Position of Governmental Activities | \$ 9,663,966 | \$ 6,820,145 |

Read accountant's compilation report.

REQUIRED SUPPLEMENTAL INFORMATION

**MARION COUNTY HOSPITAL DISTRICT
BUDGET TO ACTUAL - TARGET AREAS - APRIL 2026**

| | Total | Behavioral (Co-occurring) | Dental | Diabetes (Obesity) | Unintentional Injuries | Prevention | Community Outreach | Other | Operations | Year to Date | |
|--|----------------------|------------------------------|---------------------|-----------------------|---------------------------|-------------------|-----------------------|---------------------|---------------------|---------------------|---------------------|
| | | | | | | | | | | Spent | Remaining |
| MCHD Programs and Operations: | | | | | | | | | | | |
| MCHD Operations | \$ 1,816,380 | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ 1,816,380 | \$ 611,891 | \$ 1,204,489 |
| Active Marion Project | 521,660 | - | - | 521,660 | - | - | - | - | - | 217,410 | 304,250 |
| Fitness and Nutrition in Schools | 1,195,750 | 119,575 | - | 1,076,175 | - | - | - | - | - | 476,749 | 719,001 |
| Community Home Project | 564,550 | 225,820 | - | 338,730 | - | - | - | - | - | 262,165 | 302,385 |
| | <u>4,098,340</u> | <u>345,395</u> | <u>-</u> | <u>1,936,565</u> | <u>-</u> | <u>-</u> | <u>-</u> | <u>-</u> | <u>1,816,380</u> | <u>1,568,215</u> | <u>2,530,125</u> |
| Beacon Point Programs and Operations: | | | | | | | | | | | |
| Beacon Point Operations | 380,470 | 380,470 | - | - | - | - | - | - | - | 160,136 | 220,334 |
| Beacon Point SMA Residence (Detox and Residential) | 750,000 | 750,000 | - | - | - | - | - | - | - | 577,731 | 172,269 |
| Beacon Point SMA Grant (Peer Program) | 703,000 | 703,000 | - | - | - | - | - | - | - | 435,769 | 267,231 |
| Beacon Point SMA (MAT) | 135,000 | 135,000 | - | - | - | - | - | - | - | 101,250 | 33,750 |
| Beacon Point SMA (Beacon Point Access Center) | 300,000 | 300,000 | - | - | - | - | - | - | - | 229,578 | 70,422 |
| Beacon Point SMA Behavioral Health (APRN) | 482,416 | 482,416 | - | - | - | - | - | - | - | 327,247 | 155,169 |
| Beacon Point HoF Primary Care | 49,200 | 49,200 | - | - | - | - | - | - | - | 20,061 | 29,139 |
| Beacon Point LifeStream Grant | 757,031 | 757,031 | - | - | - | - | - | - | - | 545,435 | 211,596 |
| | <u>3,557,117</u> | <u>3,557,117</u> | <u>-</u> | <u>-</u> | <u>-</u> | <u>-</u> | <u>-</u> | <u>-</u> | <u>-</u> | <u>2,397,207</u> | <u>1,159,910</u> |
| Strategic Initiatives Grants: | | | | | | | | | | | |
| Strategic Initiatives Grants Operations | 189,000 | 33,800 | 33,800 | 33,800 | 43,800 | 43,800 | - | - | - | 113,096 | 75,904 |
| Interfaith Emergency Services | 140,989 | 140,989 | - | - | - | - | - | - | - | 104,682 | 36,307 |
| Kimberly's Center Trauma Intervention & Advocacy Program | 157,225 | 157,225 | - | - | - | - | - | - | - | 119,315 | 37,910 |
| Kimberly's Center Abuse Prevention Program | 144,700 | 144,700 | - | - | - | - | - | - | - | 123,082 | 21,618 |
| Marion County Children's Alliance | 97,000 | 97,000 | - | - | - | - | - | - | - | 74,686 | 22,314 |
| United Hands, Inc. | 678,067 | - | 678,067 | - | - | - | - | - | - | 427,770 | 250,297 |
| United Hands, Inc. - Denture Program | 80,495 | - | 80,495 | - | - | - | - | - | - | 40,558 | 39,937 |
| First Responder Program | 520,350 | 520,350 | - | - | - | - | - | - | - | 281,365 | 238,985 |
| Transitions Life Center Navigator | 70,000 | - | - | 70,000 | - | - | - | - | - | 50,936 | 19,064 |
| SMA Community Counselors (HoM, OAV, Wear Gloves) | 396,663 | 396,663 | - | - | - | - | - | - | - | 227,061 | 169,602 |
| SMA (Amnesty) | 100,000 | 100,000 | - | - | - | - | - | - | - | 38,509 | 61,491 |
| Estella Byrd Whitman | 185,000 | - | - | 185,000 | - | - | - | - | - | 138,750 | 46,250 |
| HoF Adult Dental | 217,000 | - | 217,000 | - | - | - | - | - | - | 163,093 | 53,907 |
| Vet Resource Center | 300,000 | - | - | - | - | 300,000 | - | - | - | 160,334 | 139,666 |
| Look-up Marion Program | 5,000 | - | - | - | 5,000 | - | - | - | - | 5,000 | - |
| Unintentional Injury Projects | 75,000 | - | - | - | 75,000 | - | - | - | - | 7,669 | 67,331 |
| Well Florida | 175,000 | 175,000 | - | - | - | - | - | - | - | 119,953 | 55,047 |
| Florida Department of Health Swim Vouchers | 25,000 | - | - | - | 25,000 | - | - | - | - | - | 25,000 |
| Trustee Developmental Funds (Requires Trustee Approval) | 133,784 | - | - | - | - | - | - | 133,784 | - | - | 133,784 |
| | <u>3,690,273</u> | <u>1,765,727</u> | <u>1,009,362</u> | <u>288,800</u> | <u>148,800</u> | <u>343,800</u> | <u>-</u> | <u>133,784</u> | <u>-</u> | <u>2,195,859</u> | <u>1,494,414</u> |
| Match Grants: | | | | | | | | | | | |
| SMA Campus Grant Match | 1,400,000 | 1,400,000 | - | - | - | - | - | - | - | 300,000 | 1,100,000 |
| HoF LIP | 187,742 | 75,097 | 37,548 | 75,097 | - | - | - | - | - | - | 187,742 |
| | <u>1,587,742</u> | <u>1,475,097</u> | <u>37,548</u> | <u>75,097</u> | <u>-</u> | <u>-</u> | <u>-</u> | <u>-</u> | <u>-</u> | <u>300,000</u> | <u>1,287,742</u> |
| Long-term Pledges and Reimbursed Grants: | | | | | | | | | | | |
| Trustee Developmental Funds (2024-2025 Carryforward) | 695,513 | - | - | - | - | - | - | 695,513 | - | - | 695,513 |
| Shady Hill Elementary Playground | 60,000 | - | - | - | - | - | 60,000 | - | - | 60,000 | - |
| Beacon Point Parking Lot | 220,000 | 220,000 | - | - | - | - | - | - | - | 27,323 | 192,677 |
| CF Plan B MOU #1 | 1,424,251 | - | - | - | - | - | - | 1,424,251 | - | - | 1,424,251 |
| CF Plan B MOU #2 | 2,320,000 | - | - | - | - | - | - | 2,320,000 | - | 2,320,000 | - |
| | <u>4,719,764</u> | <u>220,000</u> | <u>-</u> | <u>-</u> | <u>-</u> | <u>-</u> | <u>60,000</u> | <u>4,439,764</u> | <u>-</u> | <u>2,407,323</u> | <u>2,312,441</u> |
| Total | <u>\$ 17,653,236</u> | <u>\$ 7,363,336</u> | <u>\$ 1,046,910</u> | <u>\$ 2,300,462</u> | <u>\$ 148,800</u> | <u>\$ 343,800</u> | <u>\$ 60,000</u> | <u>\$ 4,573,548</u> | <u>\$ 1,816,380</u> | <u>\$ 8,868,604</u> | <u>\$ 8,784,632</u> |
| | 100% | 42% | 6% | 13% | 1% | 2% | 0% | 26% | 10% | | |

Read accountant's compilation report.

**MARION COUNTY HOSPITAL DISTRICT
BUDGET TO ACTUAL - OPIOID MANAGEMENT - APRIL 2026**

| | <u>Budget</u> | <u>FY 2024-25</u> | <u>FY 2025-26</u> | <u>Total</u> | <u>Remaining to Receive/(Pay)</u> |
|---|------------------|---------------------|-----------------------|-------------------|---------------------------------------|
| Opioid Income | | | | | |
| Marion County Opioid Funds | \$ 4,243,869 | \$ 3,709,750 | \$ 463,771 | \$ 4,173,521 | \$ 70,348 |
| | 4,243,869 | 3,709,750 | 463,771 | 4,173,521 | 70,348 |
| Opioid Abatement Service Providers | | | | | |
| Centralized Receiving System - SMA Healthcare | 2,300,000 | 544,666 | 1,755,334 | 2,300,000 | - |
| CORE & Peer Programs | 750,000 | - | 431,680 | 431,680 | 318,320 |
| Transitional Housing | 980,676 | 500,000 | 150,857 | 650,857 | 329,819 |
| | 4,030,676 | 1,044,666 | 2,337,871 | 3,382,537 | 648,139 |
| Opioid Management Expenses | | | | | |
| Salaries, Taxes, FRS and Health Ins. | 160,972 | 77,122 | 73,709 | 150,831 | 10,141 |
| Accounting Fees | 29,500 | 18,927 | 8,377 | 27,304 | 2,196 |
| Insurance/Legal Fees/Other Purch Serv. | 5,200 | 917 | 4,018 | 4,935 | 265 |
| Consulting Fees | 17,521 | 7,200 | 9,407 | 16,607 | 914 |
| | 213,193 | 104,166 | 95,511 | 199,677 | 13,516 |
| Surplus/(Deficit) | \$ - | \$ 2,560,918 | \$ (1,969,611) | \$ 591,307 | \$ (591,307) |