

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

A For the 2024 calendar year, or tax year beginning 07/01/2024 and ending 06/30/2025

B Check if applicable: C Name of organization UPMC GROUP D Employer identification number 20-8295721 E Telephone number (412) 647-2345 G Gross receipts \$ 31420261320. F Name and address of principal officer: FRED HARGETT 600 GRANT STREET, 58TH FLOOR, PITTSBURGH, PA 15219 H(a) Is this a group return for subsidiaries? X Yes No H(b) Are all subsidiaries included? X Yes No I Tax-exempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527 J Website: WWW.UPMC.COM H(c) Group exemption number 9707 K Form of organization: X Corporation Trust Association Other L Year of formation: 2006 M State of legal domicile: PA

Part I Summary

Table with 3 columns: Line number, Description, and Amount. Rows include: 1 Briefly describe the organization's mission or most significant activities: HEALTHCARE, EDUCATION, AND RESEARCH; 2 Check this box [X] if the organization discontinued its operations or disposed of more than 25% of its net assets; 3-7a Activities & Governance; 8-12 Revenue; 13-19 Expenses; 20-22 Net Assets or Fund Balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer FRED HARGETT, EXECUTIVE VP & CFO, Date 05/13/2026

Paid Preparer Use Only: Print/Type preparer's name ROBERT VUILLEMOT, Preparer's signature, Date 05/12/2026, Check self-employed, Firm's name ERNST & YOUNG US, LLP, Firm's EIN 34-656596, Firm's address 2100 ONE PPG PLACE PITTSBURGH, PA 15222, Phone no. 412-644-7800

May the IRS discuss this return with the preparer shown above? See instructions. Yes X No

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 27410987663. including grants of \$ 189,897,413.) (Revenue \$ 29701885522.)

SEE SCHEDULE O

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 27410987663.

Part IV Checklist of Required Schedules

Table with 3 columns: Question Number, Question Text, Yes, No. Rows 1-21 with 'X' marks in Yes/No columns.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

Table with 3 columns: Question number, Yes, No. Rows 1a-1c regarding Form 1096, W-2G forms, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 97353		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
b	If "Yes," enter the name of the foreign country ITALY See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders 11a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.		

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 4 columns: Question, Line Number, Yes, No. Rows include 1a (24), 1b (18), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 4 columns: Question, Line Number, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed FL, MD, NY, PA, VA,
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records.

JSA 412-647-2345

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LESLIE C DAVIS (UPM) PRESIDENT & CEO	60.00 NONE			X				12,586,076.	NONE	737,944.
(2) DIANE HOLDER (UPM) EVP, PRES INS SVC & CEO HPLAN	1.00 60.00				X			NONE	5,202,604.	302,164.
(3) DAVID FARNER (UPM) EVP & CHIEF OF STAFF	60.00 NONE				X			4,440,268.	NONE	322,846.
(4) STANLEY MARKS MD (UPC) BOARD CHAIR	20.00 20.00	X		X				1,586,935.	2,154,649.	342,951.
(5) FADI SWEISS MD NEUROSURGEON	40.00 NONE					X		3,655,216.	NONE	74,615.
(6) FREDERICK HARGETT (UPM) EVP & CFO	60.00 NONE			X				3,038,551.	NONE	358,666.
(7) ABHINAV HUMAR MD TRANSPLANT SURGEON	40.00 NONE					X		3,227,612.	NONE	45,751.
(8) MATTHEW EL-KADI MD NEUROSURGEON	40.00 NONE					X		2,685,222.	NONE	6,355.
(9) CHARLES BOGOSTA (UPM) FORMER EVP & PRES INT'L	NONE NONE						X	2,464,603.	7,950.	179,736.
(10) JEAN CUNICELLI EVP & PRES, UPMC ENTERPRISES	40.00 NONE					X		2,277,085.	NONE	259,204.
(11) VICTOR MORELL MD (UPP) BOARD MEMBER	40.00 NONE	X						2,412,774.	NONE	50,228.
(12) JOEL YUHAS (UPM) EVP, UPMC & PRES, UPMC HOSPITA	60.00 NONE				X			2,084,772.	NONE	250,239.
(13) IBRAHIM SULTAN MD CARDIOTHORACIC SURGEON	40.00 NONE					X		2,172,424.	NONE	33,373.
(14) JOEL B NELSON MD (UPM) EVP, UPMC CHIEF CLINICAL OFF &	60.00 NONE				X			1,931,071.	NONE	246,873.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes rows for Oscar Marroquin MD, Robert P Edwards MD, Mark Tamburri, Robert M Friedlander MD, Donald M Yealy MD, Anantha Shekhar MD, John Galley, W Thomas MCGough Esq, Timothy Billiar MD, Tami Minnier, and Ajaipal Kang MD.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 23066

Table with 3 columns: Question number, Question text, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row for independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like James D Luketich MD, Edward T Karlovich, Marshall Webster MD, David Gibbons, Sandra Rader, Sheryl Kashuba Esq, John C Stilley, James Schuster MD, Macalus Hogan MD, Vwaire Orhurhu MD, and Robert Ferris MD.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting and unrelated organizations.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row for the number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(37) RICHARD WADAS MD (EMI) BOARD MEMBER AND PRESIDENT	40.00 NONE	X		X				1,116,873.	NONE	128,786.
(38) JOAN GABEL (UPM) BOARD MEMBER	1.00 NONE	X						NONE	1,106,466.	134,734.
(39) EILEEN SIMMONS (PRY) CHIEF FINANCIAL OFFICER	40.00 NONE			X				1,064,182.	NONE	143,306.
(40) ELIZABETH A WILD (UPC) BOARD MEMBER AND PRESIDENT	40.00 NONE	X		X				1,064,358.	NONE	123,049.
(41) GORDON GEBBENS (FYO) BOARD MEMBER, TREAS & CFO	40.00 NONE	X		X				1,034,607.	NONE	148,013.
(42) RICHARD BEIGI MD (UPP) BOARD MEMBER	40.00 NONE	X						1,062,098.	NONE	120,375.
(43) JOHN INNOCENTI (PRY) FORMER PRESIDENT	NONE NONE						X	1,028,335.	NONE	120,011.
(44) MARK SEVCO (UPM) FORMER EVP & PRESIDENT HSD	NONE NONE						X	1,087,144.	NONE	4,097.
(45) DEBORAH S BRODINE (CPS) BOARD CHAIR AND PRESIDENT	40.00 NONE	X		X				907,842.	NONE	152,292.
(46) BRIAN DURNIOK (NWH) BOARD MEMBER AND PRESIDENT	40.00 NONE	X		X				925,911.	NONE	128,879.
(47) JOSE SAHEL MD (UPP) BOARD MEMBER AND DEPT CHAIR	40.00 NONE	X		X				1,001,644.	NONE	40,221.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(48) DIANE HUPP (CHP) SECRETARY & VP OF OPERATIONS	40.00 NONE			X				907,073.	NONE	122,770.
(49) AMAN MAHAJAN MD (UPP) BOARD MEMBER AND DEPT CHAIR	40.00 NONE	X		X				980,853.	NONE	36,441.
(50) J PETER RUBIN MD (UPP) BOARD MEMBER AND DEPT CHAIR	40.00 NONE	X		X				933,901.	NONE	38,139.
(51) DEREK ANGUS MD (UPM) FORMER EVP & CHIEF INNOVATION	NONE NONE						X	913,884.	NONE	55,133.
(52) ELIZABETH PICCIONE MD (PSV) PRESIDENT	40.00 NONE			X				839,369.	NONE	129,303.
(53) SAMIR SABA MD (UPP) BOARD MEMBER	40.00 NONE	X						912,158.	NONE	50,066.
(54) ELLIOTT BILOFSKY MD (BDF) FORMER BOARD MEMBER	NONE NONE						X	NONE	899,646.	39,650.
(55) LOUIS D FALO JR MD (UPP) BOARD MEMBER AND DEPT CHAIR	40.00 NONE	X		X				491,695.	335,594.	107,657.
(56) THOMAS NICHOLSON MD (PIN) BOARD MEMBER	40.00 NONE	X						861,838.	NONE	71,910.
(57) MATTHEW HURFORD (CCB) PRESIDENT	40.00 NONE			X				820,369.	NONE	108,508.
(58) ARTHUR S LEVINE MD (UPM) FORMER BOARD MEMBER	NONE NONE						X	NONE	857,001.	62,055.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(59) KELLY NOEL (AUE) BOARD PRESIDENT	40.00 NONE	X		X				736,506.	NONE	105,868.
(60) WILLIAM DONALDSON MD (UPP) FORMER BOARD MEMBER AND INTERI	NONE NONE						X	764,096.	NONE	60,037.
(61) JULES SUMKIN MD (UPP) BOARD MEMBER AND SECRETARY	40.00 NONE	X		X				756,014.	NONE	60,042.
(62) MICHAEL GASKINS (HAN) PRESIDENT	40.00 NONE			X				684,375.	NONE	129,740.
(63) JAN E FISHER (ALT) FORMER PRESIDENT	NONE NONE						X	702,414.	NONE	107,315.
(64) PATRICIA JACKSON-GEHRIS (ULH) BOARD SECRETARY	40.00 NONE	X		X				699,623.	NONE	105,304.
(65) PHILIP M CACCHIONE MD (EPN) BOARD CHAIR AND PRESIDENT	40.00 NONE	X		X				739,025.	NONE	63,934.
(66) JOHN COMERCI MD (MAG) FORMER BOARD MEMBER	NONE NONE						X	752,571.	NONE	46,008.
(67) ELIZABETH RITTER (PHM) BOARD MEMBER	40.00 NONE	X						647,491.	NONE	136,245.
(68) SUSAN HOOLAHAN (PSV) PRESIDENT	40.00 NONE			X				727,623.	NONE	50,097.
(69) DAVID A LEWIS MD (UPP) BOARD MEMBER AND DEPT CHAIR	40.00 NONE	X		X				705,788.	NONE	50,554.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(70) BRIAN FRITZ (UPP) CHIEF FINANCIAL OFFICER	40.00 NONE			X				638,142.	NONE	93,097.
(71) JOHN GOLDMAN MD (HAN) BOARD MEMBER	40.00 NONE	X						639,396.	NONE	85,061.
(72) DAVID KRUSZEWSKI MD (SHB) BOARD CHAIR & PRESIDENT	40.00 NONE	X		X				637,869.	NONE	71,046.
(73) MICHAEL WARD MD (NWH) FORMER BOARD MEMBER	NONE NONE						X	637,090.	NONE	61,746.
(74) FRANCIS SOLANO MD (CMI) FORMER BOARD MEMBER AND PRESID	NONE NONE						X	593,843.	NONE	94,904.
(75) JAMES F PINGPANK MD (PRY) FORMER BOARD MEMBER	NONE NONE						X	637,254.	NONE	44,402.
(76) DAVID LOPATOFSKY MD (SPS) BOARD PRESIDENT	40.00 NONE	X		X				608,247.	NONE	60,277.
(77) DAVID PATTON (SMH) PRESIDENT	40.00 NONE			X				512,770.	NONE	110,324.
(78) JOHN WARD (MER) FORMER BOARD MEMBER	NONE NONE						X	546,122.	NONE	73,447.
(79) ANDREW RUSH (SOM) PRESIDENT	40.00 NONE			X				514,721.	NONE	102,265.
(80) JOHN LOVELACE (FYO) FORMER BOARD MEMBER AND PRESID	NONE NONE						X	NONE	602,900.	6,895.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like Andrew Ritchie, Michael Corso, Emilia Diego, Mark O'Hern, Aj Pinevich, Bryant Wesley, C Talbot Heppenstall Jr, Liron Pantanowitz, Terence Dermody, Laura Miller, and Tracey Beiriger.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting and unrelated organizations.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row at the bottom.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like HEATH SKINNER MD, DEBORAH WILLWERTH, MAREK A RADOMSKI DO, ANTHONY GUARRACINO DO, CHRISTOPHER DOMAREW MD, KENNETH OKEN MD, KEVIN KIST DO, JARED WEINER, MICHELE P JEGASOTHY ESQ, STEPHEN EMERY, and MARK BONDI.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting and unrelated organizations.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row at the bottom.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like JOSEPH TALARICO DO, ROGER ALTMAYER, CHRISTOPHER SNEIDER MD, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Rows for independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like DAWNDRA JONES, JOON SUP LEE MD, KENNETH PLOWEY MD, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for total number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include Michael Schlechter MD, Ronald Reynolds (ULH), Gregory Mitstifer (PIN), Charles Hagerty (SHB), Karen Wastler (WEL), Amy Meister (ASC), Mario Wilfong (ALT), Bhagat Kondaveeti MD, Joshua Wedge (CAR), Donna Ottoviani (CMI), and Nathan Moore MD.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row at the bottom.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like GEORGE K MICHALOPOULOS MD, CHARLES FLACH, NOREEN FREDRICK, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Rows for independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(147) MELISSA KOVTUN (ASC) SECRETARY	40.00 NONE			X				321,358.	NONE	33,166.
(148) DAVID BOBRZYNSKI (MYC) BOARD TREASURER	40.00 NONE	X		X				295,170.	NONE	58,655.
(149) MELINDA HAMILTON MD (UPP) FORMER BOARD MEMBER	NONE NONE						X	324,200.	NONE	27,810.
(150) RONALD DEEMS (ASC) TREASURER	40.00 NONE			X				322,807.	NONE	26,468.
(151) MARK ZACHARIA ESQ (MYC) BOARD VICE CHAIR	40.00 NONE	X		X				295,136.	NONE	53,373.
(152) PABLO SANCHEZ MD (UPP) FORMER BOARD MEMBER	NONE NONE						X	332,649.	NONE	12,254.
(153) JAMES HOUSER (CEM) PRESIDENT	40.00 NONE			X				322,184.	NONE	21,649.
(154) BRADLEY DINGER (NWH) CFO AND TREASURER	40.00 NONE			X				299,763.	NONE	42,968.
(155) SYLVIA OWUSU-ANSAH MD (UPP) FORMER BOARD MEMBER	NONE NONE						X	313,864.	NONE	25,534.
(156) LAURENE TIMMONS (EAS) BOARD SECY, TREAS & CFO	40.00 NONE	X		X				298,010.	NONE	34,786.
(157) MONICA BOLLAND MD (UPP) BOARD MEMBER	40.00 NONE	X						312,179.	NONE	18,017.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like MONICA KLATT, JONATHAN PETRIE, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for total number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include Donna Muller (LIT), Nafis Hill (PSV), Cecil Miller (CHS), Donald Goodman (CEM), Tina Carroll (HAN), Michael Tracy (HRF), Robert Griffith (HHW), Tracey Conti MD (UPP), Russell Meyers (EMI), Zachary Lenhart (JMC), and Robert Sullivan MD (ALT).

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row at the bottom.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 7 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include Jonathan Bailey, Kerry Maloney, Mark Papalia, Timothy Balconi, Byron Wade, Carrie Ennis, Susan Martin, William A Nigro, Neil Karls, Roger Davis, and Amanda Casagrande.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a header row and several empty rows.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include Susan Thompson, Carol Vanzile, Daniel R Sullivan, Jonas Johnson, James Wylar, Jane Liebschutz, Kristin Lasher, Nancy Pastorius, Holly Lorenz, Thomas ReCTOR, and Mandy Fauble.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row for independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like STEVEN JOHNSON, REBECCA BURKELY, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes empty rows for data entry.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like JOHN LEETE, PATRICK LARSEN, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Rows for independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like BRIAN ENTERLINE, STEVEN SHAVER, JAMES FISHER, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a header row and several empty rows for data entry.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like PATRICK LARSEN, ELIZABETH WALLACE, DANIEL GLUNK MD, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Rows for independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include Stephen Mckonly Esq, Andres Valdes-Dapena MD, Michael Gaskins, Nicolas Habib MD, Stephen Naymick Do, Gregory Mistifer, Allison Trowell, Tina Carroll, John Goldman MD, Edward Henderson, and Bernard Creppage.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for total number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like SUSAN THOMPSON, ROBERT GRIFFITH, MICHAEL WARD, EDWARD HENDERSON, SCOTT COX, RANDY SILVERMAN, JAY BRUCE, JERRY TRONTEL, HAROLD HOOSE III, and GLENN POIRIER.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row at the bottom.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(268) NOREEN FREDRICK (MYC) BOARD PRESIDENT	1.00 NONE	X	X				NONE	NONE	NONE	
(269) DAVID GIBBONS (PHM) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(270) CHRISTINA PERSSON (PHM) BOARD SECRETARY	1.00 NONE	X	X				NONE	NONE	NONE	
(271) ALLISON TROWELL (PHM) BOARD CHAIR & PRESIDENT	1.00 NONE	X	X				NONE	NONE	NONE	
(272) GREGORY MISTIFER (PHM) BOARD TREASURER & CFO	1.00 NONE	X	X				NONE	NONE	NONE	
(273) DAVID GIBBONS (PHR) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(274) CHRISTINA PERSSON (PHR) BOARD SECRETARY	1.00 NONE	X	X				NONE	NONE	NONE	
(275) ALLISON TROWELL (PHR) BOARD CHAIR & PRESIDENT	1.00 NONE	X	X				NONE	NONE	NONE	
(276) GREGORY MISTIFER (PHR) BOARD TREASURER	1.00 NONE	X	X				NONE	NONE	NONE	
(277) ELIZABETH RITTER (PHR) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(278) BETH BURNSIDE (RHS) BOARD CHAIR	1.00 NONE	X	X				NONE	NONE	NONE	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like CARRIE ENNIS, AMY JONES, KRISTA MATHIAS, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for total number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(290) SISTER TERESA ANN JACOBS (SHS) BOARD VICE CHAIR	1.00 NONE	X	X					NONE	NONE	NONE
(291) PATRICIA JACKSON-GEHRIS (SHS) BOARD PRESIDENT, ASST SECRETAR	1.00 NONE	X	X					NONE	NONE	NONE
(292) PHILIP JOHNSON (SHS) BOARD TREASURER	1.00 NONE	X	X					NONE	NONE	NONE
(293) ANN PEPPERMAN ESQ (SHS) BOARD SECRETARY	1.00 NONE	X	X					NONE	NONE	NONE
(294) DAVIE JANE GILMOUR (SHS) BOARD CHAIR	1.00 NONE	X	X					NONE	NONE	NONE
(295) DAVIE JANE GILMOUR PHD (SPS) BOARD CHAIR	1.00 NONE	X	X					NONE	NONE	NONE
(296) SISTER TERESA ANN JACOBS (SPS) BOARD VICE CHAIR & SECRETARY	1.00 NONE	X	X					NONE	NONE	NONE
(297) DEBORAH S BRODINE (THS) BOARD MEMBER AND VICE CHAIR	1.00 NONE	X	X					NONE	NONE	NONE
(298) THOMAS RECTOR (TLC) BOARD TREASURER	1.00 NONE	X	X					NONE	NONE	NONE
(299) TRACEY BEIRIGER ESQ (UPC) BOARD SECRETARY	1.00 NONE	X	X					NONE	NONE	NONE
(300) MARSHALL WEBSTER MD (UHC) BOARD CHAIR AND PRESIDENT	1.00 NONE	X	X					NONE	NONE	NONE
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like DONALD YEALY MD, DOUGLAS NEIDICH, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for total number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like RICHARD S HAMILTON, DIANNE HUPP, DEREK ANGUS MD, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for total number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like DOUGLAS P DICK, DOUGLAS A NEIDICH, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for total number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like MICHAEL G WELLS, SALEEM GHUBRIL, MARGARET JOY ESQ, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for total number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like DAVID BOBRZYNSKI, BERNARD CREPPAGE, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for total number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like NEIL PORT, JOHN R BLACKBURN III, ROBERT MONTLER, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for total number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like ELIZABETH RITTER, WILLIAM GEARY MD, DAVID GIBBONS, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Rows for independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like SEAN LOGAN, REBECCA SHAW, BRENDAN HARRIS, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a header row and several empty rows.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like BARBARA RUPP, JOHN PAUL LUNN, VANESSA BERGER, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a header row and several empty rows.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like ROBERT GRIFFITH, DIANE HOLDER, JANIE CHRISTNER, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes empty rows for data entry.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(411) FRANK MINDICINO CFP (HRF) BOARD VICE PRESIDENT	1.00 NONE	X	X					NONE	NONE	NONE
(412) JAY BRUCE (HRF) BOARD PRESIDENT	1.00 NONE	X	X					NONE	NONE	NONE
(413) RANDY SILVERMAN (HRF) BOARD SECRETARY	1.00 NONE	X	X					NONE	NONE	NONE
(414) TRACEY BEIRIGER ESQ (IHI) BOARD MEMBER & SECRETARY	1.00 NONE	X	X					NONE	NONE	NONE
(415) JOEL NELSON (IHI) BOARD MEMBER AND PRESIDENT	1.00 NONE	X	X					NONE	NONE	NONE
(416) JAY BRUCE (JAM) BOARD VICE CHAIR	1.00 NONE	X	X					NONE	NONE	NONE
(417) RONALD MCCALL (JAM) BOARD SECRETARY	1.00 NONE	X	X					NONE	NONE	NONE
(418) FRANK C MINDICINO (JAM) BOARD CHAIR	1.00 NONE	X	X					NONE	NONE	NONE
(419) KENNETH ROMIG (JAM) BOARD TREASURER	1.00 NONE	X	X					NONE	NONE	NONE
(420) BRADLEY DINGER (KAN) BOARD TREASURER	1.00 NONE	X	X					NONE	NONE	NONE
(421) ERIK ROSS (KAN) BOARD SECRETARY	1.00 NONE	X	X					NONE	NONE	NONE
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like DONALD PAYNE, CARLOS GRAUPERA, STEVEN GROSH, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Rows for independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include Kevin Ressler, Ann Pepperman, Rajesh Patel, Roger Yost, Richard Wadas, Brian Fritz, Terrence Lewis, William Pietragallo II, Rose Almon-Martin, Peter W Eisenbrandt, and Hon. Donetta Ambrose.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row for independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like REBECCA SHAW MCHOLME JD (MCK), SEAN LOGAN (MCK), LAURENE TIMMONS (MCK), etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Rows for independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like RICHARD BEIGI MD, EILEEN SIMMONS, PATRICIA JACKSON-GEHRIS, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row at the bottom.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(466) MARSHALL WEBSTER MD (BHO) BOARD SECRETARY	1.00 NONE	X	X				NONE	NONE	NONE	
(467) EDWARD T KARLOVICH (BHO) BOARD TREASURER	1.00 NONE	X	X				NONE	NONE	NONE	
(468) JOEL NELSON (OVI) BOARD CHAIR & PRESIDENT	1.00 NONE	X	X				NONE	NONE	NONE	
(469) RICHARD S HAMILTON (PSV) BOARD CHAIR	1.00 NONE	X	X				NONE	NONE	NONE	
(470) HON. LISA PUPO LENIHAN (PSV) BOARD VICE CHAIR AND TREASURER	1.00 NONE	X	X				NONE	NONE	NONE	
(471) JAMES FERGUSON (PSV) BOARD VICE CHAIR AND TREASURER	1.00 NONE	X	X				NONE	NONE	NONE	
(472) RICHARD HAMILTON (PIN) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(473) ZACHARY KHURI (PIN) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(474) ROBERT MONTLER (PIN) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(475) DOUGLAS NEIDICH (PIN) BOARD CHAIR	1.00 NONE	X	X				NONE	NONE	NONE	
(476) KATHLEEN PAVELKO (PIN) BOARD VICE CHAIR	1.00 NONE	X	X				NONE	NONE	NONE	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

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(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include BARRY SCHOCH, PAUL SPEARS MD, REBECCA STEVENSON, KENNETH TUCKEY, JONATHAN VIPOND III ESQ, DAVID GIBBONS, AMY MEISTER DO, EILEEN SIMMONS, JOEL YUHAS, KURT TWIFORD, and LISA BARSHINGER.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row at the bottom.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like SCOTT FREED, DAVID GIBBONS, ANN GORMLEY, LINDSAY HIGH, MARCUS HITE, ANDREA JONES, ALECIA JUSTICE, DANIEL KAMBIC DO, SAMANTHA KEEFER, JAN LANG, and DEVIN LANGAN.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a header row and several empty rows for data entry.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(499) THEODORE LEAMY (PFD) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(500) BRITTNEY JACKSON (PFD) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(501) DOUGLAS NEIDICH (PFD) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(502) ARELIA PEREZ (PFD) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(503) JULIE RICH (PFD) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(504) MORGAN RODDY (PFD) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(505) RACEN ROSS (PFD) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(506) DAVID SCHLOSBERG (PFD) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(507) URSULA SIVERLING (PFD) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(508) LEIGH ANN WILSON (PFD) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(509) CHRISTOPHER YOUNG (PFD) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		

Section B. Independent Contractors

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(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include DIMITRI ZOROS, ZACHARY KHURI, DOUGLAS NEIDICH, KATHLEEN PAVELKO, BARRY SCHOCH, REBECCA STEVENSON, KENNETH TUCKEY, KURT TWIFORD, JONATHAN VIPOND III ESQ, WILLIAM BACHINSKY MD, and DAVID GIBBONS.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

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Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row at the bottom.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(521) ANTHONY GUARRACINO DO (PHO) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(522) AMY MEISTER DO (PHO) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(523) THOMAS NICHOLSON MD (PHO) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(524) KENNETH OKEN MD (PHO) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(525) MARK GLESSNER (PHO) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(526) YVONNE HOLLINS (PHO) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(527) ROBIN ZELLERS (PHO) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(528) JOEL YUHAS (PHO) BOARD MEMBER	1.00 NONE	X					NONE	NONE	NONE	
(529) JAMES M FERGUSON III (SMH) BOARD VICE CHAIR & TREASURER	1.00 NONE	X		X			NONE	NONE	NONE	
(530) RICHARD S HAMILTON (SMH) BOARD VICE CHAIR & TREASURER	1.00 NONE	X		X			NONE	NONE	NONE	
(531) HON. LISA PUPO LENIHAN (SMH) BOARD CHAIR	1.00 NONE	X		X			NONE	NONE	NONE	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include Daniel Sullivan, Krisa Mathias, Mark Bower, Tom Skelton, Davie Jane Gilmour, Sister Teresa Ann Jacobs, Philip Johnson, Ann Pepperman, Daniel Miller, Arthur Gabriel II, and Joseph Bubacz Jr.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Questions 3, 4, and 5 regarding compensation reporting and unrelated organizations.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Rows for independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(543) MATTHEW DECAMP (WEL) BOARD SECRETARY	1.00 NONE	X	X				NONE	NONE	NONE	
(544) HAROLD HOOSE III (WEL) BOARD VICE CHAIR	1.00 NONE	X	X				NONE	NONE	NONE	
(545) PATRICIA JACKSON-GEHRIS (WEL) BOARD MEMBER AND PRESIDENT	1.00 NONE	X	X				NONE	NONE	NONE	
(546) GLENN POIRIER (WEL) BOARD CHAIR	1.00 NONE	X	X				NONE	NONE	NONE	
(547) ANN PEPPERMAN ESQ (WEL) BOARD CHAIR	1.00 NONE	X	X				NONE	NONE	NONE	
(548) DANIEL GLUNK (WEL) BOARD PRESIDENT & ASST SECRETARY	1.00 NONE	X	X				NONE	NONE	NONE	
(549) DAVIE JANE GILMOUR PHD (WIL) BOARD CHAIR	1.00 NONE	X	X				NONE	NONE	NONE	
(550) SISTER TERESA ANN JACOBS (WIL) BOARD SECRETARY	1.00 NONE	X	X				NONE	NONE	NONE	
(551) PHILIP JOHNSON (WIL) BOARD TREASURER	1.00 NONE	X	X				NONE	NONE	NONE	
(552) ANN PEPPERMAN ESQ (WIL) BOARD MEMBER & VICE CHAIR	1.00 NONE	X	X				NONE	NONE	NONE	
(553) MICHAEL CORSO (CPF) PRESIDENT	1.00 NONE			X			NONE	NONE	NONE	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like MONICA KLATT, ROGER YOST, DANIEL GLUNK, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for total number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like ROBERT GRIFFITH, FRANK MINDICINO, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a row for total number of independent contractors.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include Andrew Rush (President), Monica Klatt (CFO), Roger Yost (CFO), Philip Johnson (Treasurer), Bryant Wesley Esq (Secretary), Brian Fritz (Treasurer and CFO), Monica Klatt (Treasurer and CFO), Monica Klatt (Chief Financial Officer), Michael Corso (President), Robert Edwards (Vice President), and Monica Klatt (CFO & Treasurer).

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting and unrelated organizations.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. This table is currently empty.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include Michael Corso, Noreen Fredrick, Carol Vanzile, Thomas Rector, Mark Zacharia Esq, Brandon Stewart, Brian Durniok, Mario Wilfong, Andrew Rush, Amy Meister, and Robert Edwards MD.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a header row and several empty rows for data entry.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include Ronald Deems, Melissa Kovtun, Brook Ward, Eric Carlson, John Six, Bradley Dinger, Jennifer Vennare, Michael Tacy, and Michael Tracy.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. This table is currently empty.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like Andrew Rush, Gregory Mitstifer, Christina Persson, Eileen Simmons, Brandon Stewart, John C Stille, and Michele P Jegasothy.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting and unrelated organizations.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. This table is currently empty.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Rows include individuals like NAFIS HILL, MONICA KLATT, ROGER YOST, etc.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Includes a total row at the bottom.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes entries for RONALD DEEMS, MELISSA KOVTUN, PATRICIA JACKSON-GEHRIS, and ROGER YOST.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Table with 3 columns: Question number, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. First row contains 'SEE SCHEDULE O'.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants, and Other Similar Amounts	1a Federated campaigns	1a	619,362.					
	b Membership dues	1b						
	c Fundraising events	1c	467,741.					
	d Related organizations	1d	42,449,637.					
	e Government grants (contributions) . .	1e	271,694,349.					
	f All other contributions, gifts, grants, and similar amounts not included above .	1f	59,066,553.					
	g Noncash contributions included in lines 1a-1f	1g	\$ 544,652.					
	h Total. Add lines 1a-1f			374,297,642.				
	Program Service Revenue				Business Code			
2a NET PATIENT REV			900099	14,897,814,711.	14,897,234,569.	580,142.		
b OTHER PATIENT SERV			900099	708,260,814.	708,260,814.			
c OTHER PROG SRV REV			900099	14,015,738,034.	14,009,379,286.	6,358,748.		
d JOINT VENTURE REVENUE			900099	85,863,561.	87,010,853.	-1,147,292.		
e _____								
f All other program service revenue								
g Total. Add lines 2a-2f				29,707,677,120.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			150,563,328.			150,563,328.	
	4 Income from investment of tax-exempt bond proceeds . . .			NONE				
	5 Royalties			NONE				
	6a Gross rents	6a	(i) Real	(ii) Personal				
	b Less: rental expenses	6b						
	c Rental income or (loss)	6c	NONE	NONE				
	d Net rental income or (loss)				NONE			
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses . .	7b	1,089,750,148.	-18,513,557.				
	c Gain or (loss)	7c	3,871,910.	112,046,731.				
	d Net gain or (loss)				115,918,642.		115,918,642.	
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a							
b Less: direct expenses	8b							
c Net income or (loss) from fundraising events				54,695.		54,695.		
9a Gross income from gaming activities. See Part IV, line 19	9a							
b Less: direct expenses	9b							
c Net income or (loss) from gaming activities				-11,669.		11,669.		
10a Gross sales of inventory, less returns and allowances	10a							
b Less: cost of goods sold	10b							
c Net income or (loss) from sales of inventory				NONE				
Miscellaneous Revenue				Business Code				
	11a _____							
	b _____							
	c _____							
	d All other revenue							
e Total. Add lines 11a-11d				NONE				
12 Total revenue. See instructions				30,348,523,096.	29,701,885,522.	5,791,598.	266,548,334.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	189,817,264.	189,817,264.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	80,149.	80,149.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	NONE			
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors, trustees, and key employees	108,095,105.	39,863,055.	68,232,050.	
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	NONE			
7 Other salaries and wages	9,057,542,424.	7,470,992,260.	1,586,550,164.	NONE
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	342,719,736.	244,921,706.	97,798,030.	
9 Other employee benefits	864,472,603.	763,026,022.	101,446,581.	
10 Payroll taxes	476,549,434.	392,210,588.	84,338,846.	
11 Fees for services (nonemployees):				
a Management	23,893,195.	20,846,621.	3,046,574.	
b Legal	23,923,658.	2,747,483.	21,176,175.	
c Accounting	7,593,493.	NONE	7,593,493.	
d Lobbying	4,099,168.	NONE	4,099,168.	
e Professional fundraising services. See Part IV, line 17	NONE			
f Investment management fees	3,482,447.	NONE	3,482,447.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	218,413,258.	215,006,832.	3,406,426.	
12 Advertising and promotion	44,529,464.	44,529,464.	NONE	
13 Office expenses	122,687,828.	92,104,198.	30,583,630.	
14 Information technology	476,649,268.	100,123,202.	376,526,066.	
15 Royalties	NONE	NONE	NONE	
16 Occupancy	488,787,550.	413,251,201.	75,536,349.	
17 Travel	30,888,200.	24,064,019.	6,824,181.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE	NONE	NONE	
19 Conferences, conventions, and meetings	2,665,977.	2,221,833.	444,144.	
20 Interest	6,458,678.	1,797,425.	4,661,253.	
21 Payments to affiliates	NONE	NONE	NONE	
22 Depreciation, depletion, and amortization	613,217,785.	613,217,785.		
23 Insurance	163,162,775.	143,910,760.	19,252,015.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MEDICAL EXPENSES	11359943400.	11359943400.	NONE	
b DRUGS	1,702,075,632.	1,702,075,632.	NONE	
c OTHER EXPENSES	1,097,989,069.	1,018,820,594.	79,168,475.	
d MEDICAL/PATIENT SUPPLIES	825,630,044.	825,630,044.		
e All other expenses	1,712,517,854.	1,729,786,126.	-17,268,272.	
25 Total functional expenses. Add lines 1 through 24e	29967885458.	27410987663.	2,556,897,795.	NONE
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X [X]

Table with columns (A) Beginning of year, (B) End of year, and rows for Assets (1-16), Liabilities (17-26), and Net Assets or Fund Balances (27-33). Includes sub-rows 10a and 10b for land and equipment.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	130,348,523,096.
2	Total expenses (must equal Part IX, column (A), line 25)	229,967,885,458.
3	Revenue less expenses. Subtract line 2 from line 1	3 380,637,638.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4 8,300,594,617.
5	Net unrealized gains (losses) on investments	5 29,774,652.
6	Donated services and use of facilities	6
7	Investment expenses	7
8	Prior period adjustments	8 -42,395,847.
9	Other changes in net assets or fund balances (explain on Schedule O)	9 4,061,991,095.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10 2,730,602,155.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII.

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits . . .

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization

UPMC GROUP

Employer identification number

20-8295721

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations 34
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990) 2024

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support; 12 Gross receipts from related activities; 13 First 5 years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Rows include: 14 Public support percentage for 2024 (79.14%); 15 Public support percentage from 2023 Schedule A, Part II, line 14 (83.96%); 16a 33 1/3% support test - 2024 (checked); 16b 33 1/3% support test - 2023; 17a 10%-facts-and-circumstances test - 2024; 17b 10%-facts-and-circumstances test - 2023; 18 Private foundation.

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.
 If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	63,206,560.	15,9E2,002.	13,961,786.	9,814,639.	10,468,791.	113,433,778.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	7,180,105,274.	9,379,898,507.	10,896,529,852.	11,556,492,425.	12,852,218,192.	51,865,244,250.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						NONE
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
5 The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
6 Total. Add lines 1 through 5	7,243,311,834.	9,395,880,509.	10,910,491,638.	11,566,307,064.	12,862,686,983.	51,978,678,028.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						NONE
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						NONE
c Add lines 7a and 7b						NONE
8 Public support. (Subtract line 7c from line 6.)						51,978,678,028.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6	7,243,311,834.	9,395,880,509.	10,910,491,638.	11,566,307,064.	12,862,686,983.	51,978,678,028.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	14,432,582.	22,195,371.	50,332,123.	76,471,657.	60,619,429.	224,051,162.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						NONE
c Add lines 10a and 10b	14,432,582.	22,195,371.	50,332,123.	76,471,657.	60,619,429.	224,051,162.
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						NONE
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	4,118,051.	14,7E4,030.	-25,033,537.	29,223,859.	475,506.	23,567,909.
13 Total support. (Add lines 9, 10c, 11, and 12.)	7,261,862,467.	9,432,859,910.	10,935,790,224.	11,672,002,580.	12,923,781,918.	52,226,297,099.
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	99.53%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	99.55%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)).	17	0.43%
18 Investment income percentage from 2023 Schedule A, Part III, line 17	18	0.40%

19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization . . .

b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization . . .

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . .

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		X
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		X
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		X
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		X
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>	X	
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		X
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		X
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		X
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		X
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		X
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		X
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		X
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		X
b A family member of a person described on line 11a above?		X
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		X

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>	X	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		X

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		X

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	X	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>	X	
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		X

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input checked="" type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	X	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>	X	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2024			
a	From 2019			
b	From 2020			
c	From 2021			
d	From 2022			
e	From 2023			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2024 distributable amount			
i	Carryover from 2019 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2024 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2024 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2025. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2020			
b	Excess from 2021			
c	Excess from 2022			
d	Excess from 2023			
e	Excess from 2024			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

MEMBERS OF UPMC GROUP (87)

PUBLIC CHARITY STATUS REASON FOR NON-PRIVATE PUBLIC CHARITY STATUS

AUUE, INC.: PUBLIC CHARITY STATUS 3

BUTLER HEALTH SYSTEM/UPMC MUSCULOSKELETAL JOINT VENTURE INC: PUBLIC
CHARITY STATUS 3

CENTER FOR EMERGENCY MEDICINE OF WESTERN PA: PUBLIC CHARITY STATUS 10

CENTRAL PENNSYLVANIA MEDICAL FOUNDATION, INC.: PUBLIC CHARITY STATUS 12;
TYPE 1

CHARLES COLE MEMORIAL HOSPITAL: PUBLIC CHARITY STATUS 3

CHILDREN'S ADVOCACY CENTER OF LAWRENCE COUNTY: PUBLIC CHARITY STATUS 7

COLE FOUNDATION, INC.: PUBLIC CHARITY STATUS 12; TYPE 1

COMMUNITY CARE BEHAVIORAL HEALTH ORGANIZATION: PUBLIC CHARITY STATUS 10

COMMUNITY LIFE TEAM, INC.: PUBLIC CHARITY STATUS 10

CRANBERRY PLACE: PUBLIC CHARITY STATUS 10

DIVINE PROVIDENCE HOSPITAL OF THE SISTERS OF CHRISTIAN CHARITY: PUBLIC
CHARITY STATUS 12, TYPE 2

ERIE PHYSICIANS NETWORK- UPMC INC.: PUBLIC CHARITY STATUS 3

HAMOT COLE VENTURES: PUBLIC CHARITY STATUS 12, TYPE 1

HANOVER HEALTHCARE PLUS, INC.: PUBLIC CHARITY STATUS 12, TYPE 1

HOME NURSING AGENCY AFFILIATES: PUBLIC CHARITY STATUS 10

HOME NURSING AGENCY FOUNDATION: PUBLIC CHARITY STATUS 7

JAMESON HEALTHCARE FOUNDATION: PUBLIC CHARITY STATUS 12; TYPE 2

JAMESON MEDICAL CARE, INC.: PUBLIC CHARITY STATUS 10

LAUREL HEALTH SYSTEM: PUBLIC CHARITY STATUS 12; TYPE 2

MON YOUGH COMMUNITY SERVICES, INC.: PUBLIC CHARITY STATUS 10

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PINNACLE HEALTH MEDICAL SERVICES: PUBLIC CHARITY STATUS 3

PINNACLE HEALTH REGIONAL PHYSICIANS: PUBLIC CHARITY STATUS 3

REGIONAL HEALTH SERVICES, INC.: PUBLIC CHARITY STATUS 10

SAFE HARBOR BEHAVIORAL HEALTH OF UPMC HAMOT: PUBLIC CHARITY STATUS 10

SOMERSET COMMUNITY HOSPITAL FOUNDATION: PUBLIC CHARITY STATUS 12; TYPE 3

SOMERSET HEALTH SERVICES, INC.: PUBLIC CHARITY STATUS 3

SUGARCREEK STATION: PUBLIC CHARITY STATUS 3

SUSQUEHANNA HEALTH FOUNDATION: PUBLIC CHARITY STATUS 7

SUSQUEHANNA HEALTH SYSTEM INNOVATION CENTER, INC.: PUBLIC CHARITY STATUS 12; TYPE 1

SUSQUEHANNA PHYSICIAN SERVICES: PUBLIC CHARITY STATUS 3

THE HERITAGE SHADYSIDE: PUBLIC CHARITY STATUS 10

TWIN LAKES CENTER, INC.: PUBLIC CHARITY STATUS TYPE 3

UNIVERSITY OF PITTSBURGH CANCER INSTITUTE CANCER SERVICES: PUBLIC CHARITY STATUS 3

UNIVERSITY OF PITTSBURGH PHYSICIANS: PUBLIC CHARITY STATUS 3

UPMC ADVANCED PRACTICE PROVIDERS: PUBLIC CHARITY STATUS 10

UPMC ALTOONA FOUNDATION: PUBLIC CHARITY STATUS 7

UPMC ALTOONA PARTNERSHIP FOR A HEALTHY COMMUNITY: PUBLIC CHARITY STATUS 10

UPMC ALTOONA: PUBLIC CHARITY STATUS 3

UPMC AMBULATORY SURGERY CENTER: PUBLIC CHARITY STATUS 3

UPMC BEDFORD: PUBLIC CHARITY STATUS 3

UPMC BEHAVIORAL HEALTH OF THE ALLEGHENIES: PUBLIC CHARITY STATUS 10

UPMC CARLISLE: PUBLIC CHARITY STATUS 3

UPMC CHAUTAUQUA SERVICES, INC.: PUBLIC CHARITY STATUS 12; TYPE 1

UPMC CHILDREN'S HOSPITAL OF PITTSBURGH: PUBLIC CHARITY STATUS 3

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

UPMC COMMUNITY MEDICINE, INC.: PUBLIC CHARITY STATUS 3

UPMC COMMUNITY PROVIDER SERVICES, INC.: PUBLIC CHARITY STATUS 10

UPMC EAST: PUBLIC CHARITY STATUS 3

UPMC EAST SIDE SURGERY CENTER: PUBLIC CHARITY STATUS 3

UPMC EMERGENCY MEDICINE, INC.: PUBLIC CHARITY STATUS 10

UPMC FOR YOU: PUBLIC CHARITY STATUS 10

UPMC GREENE: PUBLIC CHARITY STATUS 3

UPMC HAMOT: PUBLIC CHARITY STATUS 3

UPMC HANOVER: PUBLIC CHARITY STATUS 3

UPMC HOME CARE MANAGEMENT SERVICES: PUBLIC CHARITY STATUS 10

UPMC HOME HEALTHCARE OF CENTRAL PENNSYLVANIA: PUBLIC CHARITY STATUS 10

UPMC HOME HEALTHCARE OF WESTERN PENNSYLVANIA: PUBLIC CHARITY STATUS 10

UPMC HORIZON COMMUNITY HEALTH FOUNDATION: PUBLIC CHARITY STATUS 7

UPMC HORIZON: PUBLIC CHARITY STATUS 3

UPMC INTERNATIONAL HOLDINGS, INC.: PUBLIC CHARITY STATUS 12; TYPE 2

UPMC JAMESON: PUBLIC CHARITY STATUS 3

UPMC KANE: PUBLIC CHARITY STATUS 3

UPMC LITITZ: PUBLIC CHARITY STATUS 3

UPMC LOCK HAVEN: PUBLIC CHARITY STATUS TYPE 3

UPMC LOCUM CLINICIANS: PUBLIC CHARITY STATUS 3

UPMC MAGEE-WOMENS HOSPITAL: PUBLIC CHARITY STATUS 3

UPMC MCKEESPORT: PUBLIC CHARITY STATUS 3

UPMC MEDICAL EDUCATION: PUBLIC CHARITY STATUS 12; TYPE 2

UPMC MERCY: PUBLIC CHARITY STATUS 3

UPMC MEMORIAL: PUBLIC CHARITY STATUS 3

UPMC MUNCY: PUBLIC CHARITY STATUS TYPE 3

UPMC NORTHWEST: PUBLIC CHARITY STATUS 3

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

UPMC OB/GYN JOINT VENTURE, INC.: PUBLIC CHARITY STATUS TYPE 3

UPMC OVERSEAS, INC.: PUBLIC CHARITY STATUS 12; TYPE 2

UPMC PASSAVANT: PUBLIC CHARITY STATUS 3

UPMC PINNACLE: PUBLIC CHARITY STATUS 12, TYPE 2

UPMC PINNACLE FOUNDATION: PUBLIC CHARITY STATUS 12, TYPE 1

UPMC PINNACLE HOSPITALS: PUBLIC CHARITY STATUS 3

UPMC PINNACLE LANCASTER: PUBLIC CHARITY STATUS 3

UPMC PRESBYTERIAN SHADYSIDE: PUBLIC CHARITY STATUS 3

UPMC SOMERSET: PUBLIC CHARITY STATUS 3

UPMC ST MARGARET: PUBLIC CHARITY STATUS 3

UPMC SUSQUEHANNA: PUBLIC CHARITY STATUS 12; TYPE 2

UPMC TRAVEL STAFFING: PUBLIC CHARITY STATUS 3

UPMC WASHINGTON: PUBLIC CHARITY STATUS 3

UPMC WELLSBORO: PUBLIC CHARITY STATUS TYPE 3

UPMC WEST MIFFLIN GI: PUBLIC CHARITY STATUS 3

UPMC WILLIAMSPORT: PUBLIC CHARITY STATUS TYPE 3

PART I REASON FOR PUBLIC CHARITY STATUS

LINE 12G

ENTITY: UPMC INTERNATIONAL HOLDINGS, INC.,

(I) NAME OF SUPPORTED ORGANIZATION PER ITS GOVERNING DOCUMENTS, SUPPORTS
RELATED AND AFFILIATED 501(C)(3) HOSPITALS.

ORGANIZATION: UPMC PRESBYTERIAN SHADYSIDE

(II) EIN: 25-0965480

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

(III) TYPE OF ORGANIZATION: 3

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: YES

(V) AMOUNT OF MONETARY SUPPORT: 0

(VI) AMOUNT OF OTHER SUPPORT: 0

ENTITY: UPMC OVERSEAS

(I) NAME OF SUPPORTED ORGANIZATION: UPMC PRESBYTERIAN SHADYSIDE

(II) EIN: 25-0965480

(III) TYPE OF ORGANIZATION: 3

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: YES

(V) AMOUNT OF MONETARY SUPPORT: 0

(VI) AMOUNT OF OTHER SUPPORT: 0

ENTITY: UPMC MEDICAL EDUCATION

(I) NAME OF SUPPORTED ORGANIZATIONS: UPMC MEDICAL EDUCATION SUPPORTS ALL
509(A) (1) AND 509(A) (2) HOSPITAL AFFILIATES OF UPMC.

(II) EIN: 25-6073025

(III) TYPE OF ORGANIZATION: 3

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: NO

(V) AMOUNT OF MONETARY SUPPORT: 0

(VI) AMOUNT OF OTHER SUPPORT: 0

ENTITY: CENTRAL PENNSYLVANIA MEDICAL FOUNDATION

(I) NAME OF SUPPORTED ORGANIZATION: UPMC ALTOONA

(II) EIN: 23-1352155

(III) TYPE OF ORGANIZATION: 3

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: YES

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

(V) MONETARY SUPPORT: 0

(VI) AMOUNT OF SUPPORT: 0

ENTITY: UPMC CHAUTAUQUA SERVICES, INC.

(I) NAME OF SUPPORTED ORGANIZATION: UPMC CHAUTAUQUA AT WCA

(II) EIN: 16-0743226

(III) TYPE OF ORGANIZATION: 3

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: YES

(V) MONETARY SUPPORT: 0

(VI) AMOUNT OF SUPPORT: 0

ENTITY: JAMESON HEALTH CARE FOUNDATION

(I) NAME OF SUPPORTED ORGANIZATION: UPMC JAMESON

(II) EIN: 25-01536037

(III) TYPE OF ORGANIZATION: 3

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: YES

(V) MONETARY SUPPORT: 0

(VI) AMOUNT OF SUPPORT: 0

ENTITY: SUSQUEHANNA HEALTH SYSTEM INNOVATION CENTER, INC.

(I) NAME OF SUPPORTED ORGANIZATION (II) EIN (III) TYPE OF ORGANIZATION

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: (V) MONETARY SUPPORT:

(VI) AMOUNT OF SUPPORT:

(I) UPMC WILLIAMSPORT (II) 24-0795508 (III) 3 (IV) YES (V) 0 (VI) 0

(I) SUSQUEHANNA PHYSICIAN SERVICES (II) 23-2449454 (III) 3 (IV) YES (V) 0

(VI) 0

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

(I) UPMC MUNCY (II) 24-0806023 (III) 3 (IV) YES (V) 0 (VI) 0

ENTITY: LAUREL HEALTH SYSTEM

(I) NAME OF SUPPORTED ORGANIZATION (II) EIN (III) TYPE OF ORGANIZATION

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: (V) MONETARY SUPPORT:

(VI) AMOUNT OF SUPPORT:

(I) THE GREEN HOME (II) 24-0804365 (III) 10 (IV) YES (V) 0 (VI) 0

(I) UPMC WELLSBORO (II) 23-2176963 (III) 3 (IV) YES (V) 0 (VI) 0

(I) NORTH PENN COMPREHENSIVE HEALTH (II) 23-2176963 (III) 3 (IV) YES (V)

0 (VI) 0

ENTITY: UPMC SUSQUEHANNA

(I) NAME OF SUPPORTED ORGANIZATION (II) EIN (III) TYPE OF ORGANIZATION

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: (V) MONETARY SUPPORT:

(VI) AMOUNT OF SUPPORT:

(I) UPMC WILLIAMSPORT (II) 24-0795508 (III) 3 (IV) YES (V) 0 (VI) 0

(I) UPMC MUNCY (II) 24-0806023 (III) 3 (IV) YES (V) 0 (VI) 0

(I) SUSQUEHANNA PHYSICIAN SERVICES (II) 23-2449454 (III) 3 (IV) YES (V) 0

(VI) 0

(I) UPMC WELLSBORO (II) 23-2176963 (III) 3 (IV) YES (V) 0 (VI) 0

(I) THE GREEN HOME (II) 24-0804365 (III) 10 (IV) YES (V) 0 (VI) 0

(I) TIOGA HEALTHCARE PROVIDERS (II) 25-1765538 (III) 3 (IV) YES (V) 0

(VI) 0

(I) UPMC LOCK HAVEN (II) 82-1600494 (III) 3 (IV) YES (V) 0 (VI) 0

(I) UPMC SUNBURY (II) 82-1592230 (III) 3 (IV) YES (V) 0 (VI) 0

ENTITY: DIVINE PROVIDENCE HOSPITAL OF THE SISTERS OF CHRISTIAN CHARITY

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

(I) NAME OF SUPPORTED ORGANIZATION (II) EIN (III) TYPE OF ORGANIZATION

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: (V) MONETARY SUPPORT:

(VI) AMOUNT OF SUPPORT:

(I) UPMC WILLIAMSPORT (II) 24-0795508 (III) 3 (IV) NO (V) 0 (VI) 0

ENTITY: SOMERSET COMMUNITY HOSPITAL FOUNDATION

I) NAME OF SUPPORTED ORGANIZATION (II) EIN (III) TYPE OF ORGANIZATION

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: (V) MONETARY SUPPORT:

(VI) AMOUNT OF SUPPORT:

(I) UPMC SOMERSET (II) 25-0965570 (III) 3 (IV) YES (V) 0 (VI) 0

ENTITY: COLE FOUNDATION, INC.

I) NAME OF SUPPORTED ORGANIZATION (II) EIN (III) TYPE OF ORGANIZATION

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: (V) MONETARY SUPPORT:

(VI) AMOUNT OF SUPPORT:

(I) CHARLES COLE MEMORIAL HOSPITAL (II) 24-0802108 (III) 3 (IV) YES (V) 0

(VI) 0

ENTITY: HAMOT COLE VENTURES, INC.

I) NAME OF SUPPORTED ORGANIZATION (II) EIN (III) TYPE OF ORGANIZATION

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: (V) MONETARY SUPPORT:

(VI) AMOUNT OF SUPPORT:

(I) CHARLES COLE MEMORIAL HOSPITAL (II) 24-0802108 (III) 3 (IV) YES (V) 0

(VI) 0

ENTITY: UPMC PINNACLE

I) NAME OF SUPPORTED ORGANIZATION (II) EIN (III) TYPE OF ORGANIZATION

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: (V) MONETARY SUPPORT:

(VI) AMOUNT OF SUPPORT:

(I) UPMC CARLISLE (II) 82-0880337 (III) 3 (IV) NO (V) 0 (VI) 0

(I) UPMC PINNACLE LANCASTER (II) 82-0896436 (III) 3 (IV) NO (V) 0 (VI) 0

(I) PINNACLE HEALTH REGIONAL PHYSICIANS (II) 82-0947698 (III) 3 (IV) NO

(V) 0 (VI) 0

(I) UPMC HANOVER (II) 23-1360851 (III) 3 (IV) NO (V) 0 (VI) 0

ENTITY: UPMC PINNACLE FOUNDATION

I) NAME OF SUPPORTED ORGANIZATION (II) EIN (III) TYPE OF ORGANIZATION

(IV) ORGANIZATION LISTED IN GOVERNING DOCUMENTS: (V) MONETARY SUPPORT:

(VI) AMOUNT OF SUPPORT:

(I) UPMC PINNACLE LANCASTER (II) 82-0896436 (III) 3 (IV) NO (V) 0 (VI) 0

(I) PINNACLE HEALTH REGIONAL PHYSICIANS (II) 82-0947698 (III) 3 (IV) NO

(V) 0 (VI) 0

(I) UPMC HANOVER (II) 23-1360851 (III) 3 (IV) NO (V) 0 (VI) 0

(I) UPMC MEMORIAL (II) 82-0912090 (III) 3 (IV) NO (V) 0 (VI) 0

PART IV SUPPORTING ORGANIZATIONS, SECTION A, QUESTION 1

UPMC MEDICAL EDUCATION, PER ITS GOVERNING DOCUMENTS,
SUPPORTS RELATED AND AFFILIATED 501(C)(3) HOSPITALS.

UPMC PINNACLE IS THE PARENT OF ORGANIZATIONS WHICH ARE RELATED BY BOTH A

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

COMMON MANAGEMENT TEAM AND COMMON BOARD MEMBERS. HISTORICALLY AND OPERATIONALLY, THE FILING ORGANIZATION SUPPORTS ITS SUPPORTED ORGANIZATIONS THROUGH MANAGEMENT AND CONSULTING SERVICES.

UPMC PINNACLE FOUNDATION - THE GOVERNING DOCUMENTS OF PINNACLE HEALTH FOUNDATION DO NOT SPECIFICALLY NAME THE ORGANIZATIONS TO WHICH SUPPORT IS PROVIDED; HOWEVER, THEY DO MEET THE REQUIREMENTS OF SECTION 509(A)-4(D)(2)(I) BY DESIGNATION ITS PUBLICLY SUPPORTED ORGANIZATIONS TO BE ANY OTHER ORGANIZATION AFFILIATED WITH THE CORPORATION WHICH QUALIFIES AS AN EXEMPT ORGANIZATION UNDER SECTIONS 501(C)(3), 509(A)(1), OR 509(A)(2). UPMC PINNACLE, THE PARENT COMPANY FOR ALL LISTED SUPPORTED ORGANIZATIONS, IS MENTIONED NUMEROUS TIMES IN THE BY-LAWS AND REFLECTS THE INTER-CONNECTEDNESS OF THE FILING ORGANIZATION, ITS PARENT, AND SUPPORTED ORGANIZATIONS.

DIVINE PROVIDENCE HOSPITAL OF THE SISTERS OF CHRISTIAN CHARITY SUPPORTS UPMC WILLIAMSPORT, THE OPERATING ENTITY OF DIVINE PROVIDENCE HOSPITAL, BY PROVIDING THE HOSPITAL FACILITY AND OTHER SUPPORT IN FURTHERANCE OF ITS PURPOSE TO PROVIDE, MAINTAIN, AND OPERATE A MODERN COMMUNITY MEDICAL CENTER, AS SET FORTH IN ITS ARTICLES OF INCORPORATION.

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PART IV SUPPORTING ORGANIZATIONS, SECTION A, QUESTION 5A

DIVINE PROVIDENCE HOSPITAL OF THE SISTERS OF CHRISTIAN CHARITY IS NO LONGER CONSIDERED A SUPPORTED ORGANIZATION OF SUSQUEHANNA HEALTH SYSTEM INNOVATION CENTER, INC. OR UPMC SUSQUEHANNA UNDER THESE ORGANIZATIONS' ARTICLES OF INCORPORATION BECAUSE DIVINE PROVIDENCE HOSPITAL OF THE SISTERS OF CHRISTIAN CHARITY IS NO LONGER AN ORGANIZATION DESCRIBED IN SECTION 509(A) (1) OR 509(A) (2) .

PART IV SUPPORTING ORGANIZATIONS, SECTION C, QUESTION 1

PER THE BYLAWS OF THE SOMERSET COMMUNITY HEALTH FOUNDATION, UPMC, THE PARENT AND CONTROLLING MEMBER OF THE SUPPORTED ORGANIZATION OF UPMC SOMERSET, HAS THE ABILITY TO APPOINT THE MAJORITY OF THE BOARD MEMBERS OF THE ORGANIZATION AND EXERCISES CONTROL OVER ALL DECISIONS OF THE SUPPORTING ORGANIZATION.

FOR UPMC INTERNATIONAL HOLDINGS, INC. AND UPMC OVERSEAS, CONTROL AND MANAGEMENT OF EACH OF THESE ORGANIZATIONS AND THEIR SUPPORTED ORGANIZATION, UPMC PRESBYTERIAN SHADYSIDE, IS VESTED IN THE UPMC BOARD OF DIRECTORS BY VIRTUE OF THE UPMC BOARDS' POWER TO APPOINT THE BOARDS OF AND APPROVE ALL CORPORATE DECISIONS OF ALL THREE ORGANIZATIONS. DUE TO COMMON UPMC CONTROL AND MANAGEMENT, BOTH UPMC INTERNATIONAL HOLDINGS, INC. AND UPMC OVERSEAS ARE RESPONSIVE TO THE NEEDS OF UPMC PRESBYTERIAN

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SHADYSIDE.

FOR UPMC PINNACLE THERE ARE COMMON BOARD DIRECTORS FOR EACH SUPPORTED ORGANIZATION. HOWEVER, THE NUMBER OF SUPPORTING ORGANIZATION BOARD DIRECTORS ARE NOT NECESSARILY A MAJORITY OF THE SUPPORTED ORGANIZATIONS' BOARDS. A COMMON MANAGEMENT TEAM HAS OPERATIONAL CONTROL OVER ALL RELATED ORGANIZATIONS WHICH ALLOWS THE SUPPORTING ORGANIZATION TO SUPPORT ITS SUPPORTED ORGANIZATIONS.

PART IV SUPPORTING ORGANIZATIONS, SECTION E, QUESTION 3A AND 3B

PER THE BYLAWS OF THE SOMERSET COMMUNITY HEALTH FOUNDATION, UPMC, THE PARENT AND CONTROLLING MEMBER OF THE SUPPORTED ORGANIZATION OF UPMC SOMERSET, HAS THE ABILITY TO APPOINT THE MAJORITY OF THE BOARD MEMBERS OF THE ORGANIZATION AND EXERCISES CONTROL OVER ALL DECISIONS OF THE SUPPORTING ORGANIZATION.

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART I - INFORMATION ABOUT SUPPORTED ORGANIZATIONS

(I) NAME OF SUPPORTED ORGANIZATION	(II) EIN	(III) TYPE OF	(IV)	(V) AMOUNT OF	(VI) AMOUNT OF
		ORGANIZATION	YES NO	SUPPORT	OTHER SUPPORT
SEE PART VI	00-0000000	3			
TOTAL AMOUNT OF SUPPORT					

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2024

Open to Public Inspection

For Organizations Exempt From Income Tax Under Section 501(c) and Section 527

Department of the Treasury
Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then:

- Section 501(c)(3) organizations: Complete Parts I-A and I-B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and I-C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then:

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions), or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization UPMC GROUP	Employer identification number (EIN) 20-8295721
------------------------------------	----------------------------------------------------

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."
- 2 Political campaign activity expenditures. See instructions \$ _____
- 3 Volunteer hours for political campaign activities. See instructions _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses, and EINs of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2024

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		
IF the amount on line 1e, column (a) or (b), is: THEN the lobbying nontaxable amount is:		
not over \$500,000, 20% of the amount on line 1e.		
over \$500,000 but not over \$1,000,000, \$100,000 plus 15% of the excess over \$500,000.		
over \$1,000,000 but not over \$1,500,000, \$175,000 plus 10% of the excess over \$1,000,000.		
over \$1,500,000 but not over \$17,000,000, \$225,000 plus 5% of the excess over \$1,500,000.		
over \$17,000,000 \$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? <input type="checkbox"/> Yes <input type="checkbox"/> No		

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part IV Supplemental Information (continued)

ADDITIONAL INFORMATION

PART I-A

UPMC GROUP ENTITIES DO NOT ENGAGE IN ANY DIRECT OR INDIRECT POLITICAL ACTIVITY.

PART II-A

UPMC PINNACLE IS INCLUDED IN THE UPMC GROUP FORM 990 FOR THE FIRST TIME IN FY25. AS PART OF UPMC'S PINNACLE INCLUSION IN THE UPMC GROUP, A FORM 5768, ELECTION/REVOCAION OF ELECTION BY AN ELIGIBLE SECTION 501(C)(3) ORGANIZATION TO MAKE EXPENDITURES TO INFLUENCE LEGISLATION, WAS FILED IN FY25 TO REVOKE A SECTION 501(H) ELECTION PREVIOUSLY MADE BY UPMC PINNACLE. BECAUSE SECTION 501(H)(6)(B) PROVIDES THAT SUCH REVOCATION IS NOT EFFECTIVE UNTIL THE UPMC PINNACLE'S FY26 TAX YEAR, PART II-A SHOULD BE COMPLETED FOR UPMC PINNACLE FOR FY25 IN-LINE WITH SCHEDULES C FILED BY UPMC PINNACLE IN PRIOR YEARS AS A STAND-ALONE FORM 990 FILER. BECAUSE THE UPMC GROUP'S TAX RETURN SOFTWARE WOULD NOT ALLOW BOTH PARTS II-A AND II-B TO BE COMPLETED, PART II-B, WHICH APPLIES TO ALL OTHER UPMC GROUP ENTITIES, WAS COMPLETED AND PART II-A INFORMATION SPECIFIC TO UPMC PINNACLE IS INCLUDED HERE IN PART IV. CONSISTENT WITH FY24, NEITHER UPMC PINNACLE NOR ITS SECTION 4911 AFFILIATES LISTED BELOW (ALL OF WHICH ARE ALSO INCLUDED IN THE UPMC GROUP FORM 990 FOR FY25) HAD ANY DIRECT OR GRASS ROOTS LOBBYING EXPENDITURES IN FY25.

Part IV Supplemental Information (continued)

UPMC PINNACLE HOSPITALS (EIN: 25-1778644)
PINNACLE HEALTH MEDICAL SERVICES (EIN: 25-1709054)
UPMC PINNACLE FOUNDATION (EIN: 22-2691718)
COMMUNITY LIFE TEAM (EIN: 23-1890444)
UPMC PINNACLE LANCASTER (82-0896436)
UPMC LITITZ (EIN: 82-0844453)
UPMC CARLISLE (EIN: 82-0880337)
UPMC MEMORIAL (EIN: 82-0912090)
PINNACLE HEALTH REGIONAL PHYSICIANS (EIN: 82-0947698)
HANOVER HEALTHCARE PLUS (EIN: 22-2658574)
UPMC HANOVER (EIN: 23-1360851)

PART II-B

UPMC GROUP MAINTAINS A DEPARTMENT OF GOVERNMENT RELATIONS WHOSE PRIMARY FUNCTION IS TO MAINTAIN CONTACT WITH ELECTED AND APPOINTED OFFICIALS AT THE FEDERAL, STATE, AND LOCAL LEVELS. THE DEPARTMENT PROMOTES LEGISLATIVE ACTIONS WITH RESPECT TO HEALTHCARE RELATED ISSUES THAT COULD IMPACT THE ORGANIZATION.

PART II-B, LINE 1D

THE AMOUNT FOR MAILINGS IS NOT READILY QUANTIFIABLE, HOWEVER, UPMC RECOGNIZES THAT IN THE COURSE OF BUSINESS, THESE EXPENSES MAY OCCUR.

PART II-B, LINE 1G

Part IV Supplemental Information (continued)

AMOUNTS REPRESENT EMPLOYED AND OUTSOURCED RESOURCES FOR LOBBYING AND EDUCATION EFFORTS FOR GOVERNMENT OFFICIALS IN AREAS DIRECTLY RELATED TO THE BUSINESS OF UPMC ENTITIES. THIS CAN INCLUDE DIRECT CONTACT WITH THE OFFICIALS OR SENDING OF CORRESPONDENCE.

PART II-B, LINE I

AMOUNTS INCLUDED IN MEMBERSHIP DUES IN HEALTHCARE RELATED ORGANIZATIONS THAT IS INDICATED BY THE ORGANIZATION TO BE THE PORTION OF THE MEMBERSHIP DUES THAT IS UTILIZED BY THE MEMBERSHIP ORGANIZATION FOR LOBBY EFFORTS.

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization

Employer identification number

UPMC GROUP

20-8295721

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue, Assets. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items., 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange program
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. Yes No

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	112,095,008.	101,871,462.	109,631,812.	120,925,252.	94,002,934.
b Contributions	773,894.	2,213,361.	-808,226.	-1,824,482.	-172,806.
c Net investment earnings, gains, and losses	16,267,674.	10,760,727.	-3,272,644.	-7,771,614.	29,532,654.
d Grants or scholarships					
e Other expenditures for facilities and programs	2,933,219.	2,750,542.	3,679,480.	1,697,344.	2,437,530.
f Administrative expenses					
g End of year balance	126,203,357.	112,095,008.	101,871,462.	109,631,812.	120,925,252.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment 100.0000 %
- c Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) Unrelated organizations? _____
- (ii) Related organizations? _____

	Yes	No
3a(i)		X
3a(ii)	X	
3b	X	

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? _____

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		287,044,698.		287,044,698.
b Buildings		8253194888.	4486485484.	3,766,709,404.
c Leasehold improvements		158,054,165.	128,907,131.	29,147,034.
d Equipment		3288820903.	2277842201.	1,010,978,702.
e Other		1392099461.	149,578,168.	1,242,521,293.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				6,336,401,131.

Part VII Investments - Other Securities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) LIMITED PARTNERSHIPS	253,417,754.	FMV
(B) CASH EQUIVALENTS	977,387,767.	FMV
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, col. (B)) . . .	1,230,805,521.	

Part VIII Investments - Program Related

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, col. (B)) . . .		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) DUE FROM AFFILIATE	-144,644,739.
(2) BENEFICIAL INT IN FOUNDATIONS	723,791,610.
(3) OTHER ASSETS	1,170,097,475.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B)).	1,749,244,346.

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO EXEMPT PARENT	NONE
(3) OTHER CURRENT & LT LIABILITIES	610,977,042.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B)).	610,977,042.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include descriptions, sub-headers (2a-2d, 4a-4b), and totals (2e, 3, 4c, 5).

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include descriptions, sub-headers (2a-2d, 4a-4b), and totals (2e, 3, 4c, 5).

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE SUPPLEMENTAL PAGE

Part XIII Supplemental Information (continued)

PART V

LINE 4

ENDOWMENT FUNDS WILL BE UTILIZED TO CARRY ON THE EXEMPT MISSIONS OF THE HOSPITAL ENTITIES.

PART X

LINE 2 AN EXTERNAL AUDIT IS COMPLETED AT A CONSOLIDATED UPMC SYSTEM LEVEL ONLY, INCLUDING UPMC AND ALL TAXABLE AND TAX-EXEMPT SUBSIDIARIES. TAX BENEFITS ARE RECOGNIZED WHEN IT IS MORE LIKELY THAN NOT THAT A TAX POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE TAX AUTHORITIES BASED ON THE TECHNICAL MERITS OF THE POSITION. SUCH TAX POSITIONS ARE MEASURED AS THE LARGEST AMOUNT OF TAX BENEFIT THAT IS GREATER THAN 50% LIKELY TO BE REALIZED UPON ULTIMATE SETTLEMENT WITH THE TAX AUTHORITIES ASSUMING FULL KNOWLEDGE OF THE POSITION AND ALL RELEVANT FACTS. AS OF JUNE 30, 2025, UPMC DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS RECORDED.

**SCHEDULE F
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Employer identification number

20-8295721

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 **Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA/CARIBBEAN	NONE	NONE	PROGRAM SERVICES	HEALTH CARE EDUCATION	44,336.
(2) EAST ASIA AND THE PACIFIC	NONE	NONE	PROGRAM SERVICES	HEALTH CARE EDUCATION	91,677.
(3) EUROPE	NONE	NONE	PROGRAM SERVICES	HEALTH CARE EDUCATION	565,120.
(4) MIDDLE EAST AND NORTH AFRICA	NONE	NONE	PROGRAM SERVICES	HEALTH CARE EDUCATION	9,975.
(5) NORTH AMERICA	NONE	NONE	PROGRAM SERVICES	HEALTH CARE EDUCATION	147,153.
(6) SOUTH AMERICA	NONE	NONE	PROGRAM SERVICES	HEALTH CARE EDUCATION	13,086.
(7) SOUTH ASIA	NONE	NONE	PROGRAM SERVICES	HEALTH CARE EDUCATION	87,192.
(8) SUB-SAHARAN AFRICA	NONE	NONE	PROGRAM SERVICES	HEALTH CARE EDUCATION	56,056.
(9) CENTRAL AMERICA/CARIBBEAN	NONE	NONE	INVESTMENTS		74,769,068.
(10) EAST ASIA AND THE PACIFIC	NONE	NONE	INVESTMENTS		1,985,410.
(11) EUROPE	NONE	NONE	INVESTMENTS		27,633,455.
(12) MIDDLE EAST AND NORTH AFRICA	NONE	NONE	INVESTMENTS		401,853.
(13) NORTH AMERICA	NONE	NONE	INVESTMENTS		10,781,597.
(14) SOUTH AMERICA	NONE	NONE	INVESTMENTS		1,404,947.
(15) SOUTH ASIA	NONE	NONE	INVESTMENTS		161,733.
(16)					
(17)					
3a Subtotal	NONE	NONE			118,152,658.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	NONE	NONE			118,152,658.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) (Rev. 12-2024)

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE F STATEMENT OF ACTIVITIES OUTSIDE THE UNITED STATES

UPMC GROUP ENTITIES INVESTMENT PORTFOLIOS INCLUDES FOREIGN SECURITIES AND SIMILAR ASSETS THAT THE IRS REQUIRES TO BE REPORTED ON SCHEDULE F.

**SCHEDULE G
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19; or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

**Open to Public
Inspection**

Name of the organization

UPMC GROUP

Employer identification number

20-8295721

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|--------------------------------------------------------------------|------------------------------------------------------------------------|
| <input type="checkbox"/> a Mail solicitations | <input type="checkbox"/> e Solicitation of nongovernment grants |
| <input type="checkbox"/> b Internet and email solicitations | <input type="checkbox"/> f Solicitation of government grants |
| <input type="checkbox"/> c Phone solicitations | <input type="checkbox"/> g Special fundraising events |
| <input type="checkbox"/> d In-person solicitations | |
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

Total

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		GOLF OUTING (event type)	GOLF OUTING (event type)	14 (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	172,015.	163,389.	1,102,119.	1,437,523.
	2 Less: Contributions	NONE	129,381.	740,145.	869,526.
	3 Gross income (line 1 minus line 2)	172,015.	34,008.	361,974.	567,997.
Direct Expenses	4 Cash prizes	1,250.	8,548.	3,780.	13,578.
	5 Noncash prizes	14,709.	3,200.	68,820.	86,729.
	6 Rent/facility costs	NONE	13,014.	96,177.	109,191.
	7 Food and beverages	22,056.	12,467.	114,080.	148,603.
	8 Entertainment	NONE	NONE	32,090.	32,090.
	9 Other direct expenses	10,503.	5,256.	107,352.	123,111.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				513,302.
11 Net income summary. Subtract line 10 from line 3, column (d)				54,695.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d).				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

**SCHEDULE H
(Form 990)**

Hospitals

OMB No. 1545-0047

2024

Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, question 20a.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

Employer identification number

20-8295721

Part I Financial Assistance and Certain Other Community Benefits at Cost

	Yes	No
1a Did the organization have a financial assistance policy (FAP) during the tax year? If "No," skip to question 6a	X	
1b If "Yes," was it a written policy?	X	
2 If the organization had multiple hospital facilities, indicate which of the following best describes application of the FAP to its various hospital facilities during the tax year: <input type="checkbox"/> Applied uniformly to all hospital facilities <input checked="" type="checkbox"/> Applied uniformly to most hospital facilities <input type="checkbox"/> Generally tailored to individual hospital facilities		
3 Answer the following based on the financial assistance eligibility criteria that applied to the largest number of the organization's patients during the tax year.		
a Did the organization use federal poverty guidelines (FPG) as a factor in determining eligibility for providing <i>free</i> care? If "Yes," indicate which of the following was the FPG family income limit for eligibility for free care: <input type="checkbox"/> 100% <input type="checkbox"/> 150% <input type="checkbox"/> 200% <input checked="" type="checkbox"/> Other <u>300.0000</u> %	X	
b Did the organization use FPG as a factor in determining eligibility for providing <i>discounted</i> care? If "Yes," indicate which of the following was the family income limit for eligibility for discounted care: <input type="checkbox"/> 200% <input type="checkbox"/> 250% <input type="checkbox"/> 300% <input type="checkbox"/> 350% <input checked="" type="checkbox"/> 400% <input type="checkbox"/> Other _____ %	X	
c If the organization used factors other than FPG in determining eligibility, describe in Part VI the criteria used for determining eligibility for free or discounted care. Include in the description whether the organization used an asset test or other threshold, regardless of income, as a factor in determining eligibility for free or discounted care.		
4 Did the organization's FAP that applied to the largest number of its patients during the tax year provide for free or discounted care to the "medically indigent"?	X	
5a Did the organization budget amounts for free or discounted care provided under its FAP during the tax year?	X	
b If "Yes," did the organization's financial assistance expenses exceed the budgeted amount?	X	
c If "Yes" to line 5b, as a result of budget considerations, was the organization unable to provide free or discounted care to a patient who was eligible for free or discounted care?		X
6a Did the organization prepare a community benefit report during the tax year?	X	
b If "Yes," did the organization make it available to the public?	X	

7 Financial Assistance and Certain Other Community Benefits at Cost

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community benefit expense	(f) Percent of total expense
Financial Assistance and Means-Tested Government Programs						
a Financial assistance at cost (from Worksheet 1)			152,702,280.	NONE	152,702,280.	0.51
b Medicaid (from Worksheet 3, column a).			2,092,920,898.	1,604,371,191.	488,549,707.	1.63
c Costs of other means-tested government programs (from Worksheet 3, column b)			17,197,712.	7,435,171.	9,762,541.	0.03
d Total. Financial assistance and means-tested government programs . .			2,262,820,890.	1,611,806,362.	651,014,528.	2.17
Other Benefits						
e Community health improvement services and community benefit operations (from Worksheet 4)			138,365,898.	15,804,638.	122,561,260.	0.41
f Health professions education (from Worksheet 5)			432,765,421.	157,315,221.	275,450,199.	0.92
g Subsidized health services (from Worksheet 6)			196,269,156.	NONE	196,269,156.	0.65
h Research (from Worksheet 7)			304,552,813.	NONE	304,552,813.	1.02
i Cash and in-kind contributions for community benefit (from Worksheet 8)			194,821,892.	NONE	194,821,892.	0.65
j Total. Other benefits			1,266,775,180.	173,119,859.	1,093,655,320.	3.65
k Total. Add lines 7d and 7j)			3,529,596,070.	1,784,926,221.	1,744,669,848.	5.82

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule H (Form 990) 2024

Part II Community Building Activities. Complete this table if the organization conducted any community building activities during the tax year, and describe in Part VI how its community building activities promoted the health of the communities it serves.

	(a) Number of activities or programs (optional)	(b) Persons served (optional)	(c) Total community benefit expense	(d) Direct offsetting revenue	(e) Net community benefit expense	(f) Percent of total expense
1 Physical improvements and housing						
2 Economic development						
3 Community support						
4 Environmental improvements						
5 Leadership development and training for community members						
6 Coalition building						
7 Community health improvement advocacy						
8 Workforce development						
9 Other						
10 Total						

Part III Bad Debt, Medicare, & Collection Practices

Section A. Bad Debt Expense

	Yes	No
1 Did the organization report bad debt expense in accordance with Healthcare Financial Management Association Statement No. 15?	X	
2 Enter the amount of the organization's bad debt expense. Explain in Part VI the methodology used by the organization to estimate this amount.		
3 Enter the estimated amount of the organization's bad debt expense attributable to patients eligible under the organization's FAP. Explain in Part VI the methodology used by the organization to estimate this amount and the rationale, if any, for including this portion of bad debt as community benefit		
4 Provide in Part VI the text of the footnote to the organization's financial statements that describes bad debt expense or the page number on which this footnote is contained in the attached financial statements.		

Section B. Medicare

5 Enter total revenue received from Medicare (including DSH and IME)	5	4,359,050,692.
6 Enter Medicare allowable costs of care relating to payments on line 5	6	5,501,474,051.
7 Subtract line 6 from line 5. This is the surplus (or shortfall)	7	-1,142,423,359.
8 Describe in Part VI the extent to which any shortfall reported on line 7 should be treated as community benefit. Also describe in Part VI the costing methodology or source used to determine the amount reported on line 6. Check the box that describes the method used: <input type="checkbox"/> Cost accounting system <input checked="" type="checkbox"/> Cost to charge ratio <input type="checkbox"/> Other		

Section C. Collection Practices

9a Did the organization have a written debt collection policy during the tax year?	9a	X
b If "Yes," did the organization's collection policy that applied to the largest number of its patients during the tax year contain provisions on the collection practices to be followed for patients who are known to qualify for financial assistance? Describe in Part VI	9b	X

Part IV Management Companies and Joint Ventures (owned 10% or more by officers, directors, trustees, key employees, and physicians - see instructions)

(a) Name of entity	(b) Description of primary activity of entity	(c) Organization's profit % or stock ownership %	(d) Officers', directors', trustees', or key employees' profit % or stock ownership %	(e) Physicians' profit % or stock ownership %
1 ONCOLOGY CO-MGMT	ONCOLOGY SERVICE	0.50000		0.50000
2 HAMOT SURGERY CENTER	OUTPATIENT SURGERY CTR	0.50940		0.50940
3 WEST SHORE SURGERY	OUTPATIENT SURGERY CTR	0.45000		0.45000
4 TRI-STATE SURGERY	OUTPATIENT SURGERY CTR	0.52540		0.52540
5				
6				
7				
8				
9				
10				
11				
12				
13				

Part V Facility Information

Section A. Hospital Facilities

(list in order of size, from largest to smallest - see instructions)

How many hospital facilities did the organization operate during the tax year? 46

Name, address, primary website address, and state license number (and if a group return, the name and EIN of the subordinate hospital organization that operates the hospital facility):

	Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	Other (describe)	Facility reporting group
1 UPMC PRESBYTERIAN SHADYSIDE 200 LOTHROP STREET PITTSBURGH PA 15213 WWW.UPMC.COM EIN: 25-0965480	X	X		X		X	X			A
2 UPMC PRESBYTERIAN SHADYSIDE 5230 CENTRE AVENUE PITTSBURGH PA 15232 WWW.UPMC.COM EIN: 25-0965480	X	X		X		X	X			A
3 UPMC PRESBYTERIAN SHADYSIDE 1300 OXFORD DRIVE PITTSBURGH PA 15102 WWW.UPMC.COM EIN: 25-0965480	X								OUTPATIENT AMBULATORY & SURGICAL CENTER	A
4 UPMC HAMOT 201 STATE STREET ERIE PA 16550 WWW.UPMC.COM EIN: 25-0965387	X	X		X		X	X			A
5 UPMC HAMOT 118 EAST 2ND STREET ERIE PA 16507 WWW.UPMC.COM EIN: 25-0965387	X	X								A
6 UPMC MERCY 1400 LOCUST STREET PITTSBURGH PA 15219 WWW.UPMC.COM EIN: 25-0965429	X	X		X			X		OUTPATIENT AMBULATORY & SURGICAL CENTER	A
7 UPMC PASSAVANT 9100 BABCOCK BLVD PITTSBURGH PA 15237 WWW.UPMC.COM EIN: 25-0965451	X	X				X	X			A
8 UPMC PASSAVANT 1 ST FRANCIS WAY CRANBERRY TWP PA 16066 WWW.UPMC.COM EIN: 25-0965451	X	X				X	X			A
9 UPMC MAGEE-WOMENS HOSPITAL 300 HALKET STREET PITTSBURGH PA 15213 WWW.UPMC.COM EIN: 25-0965420	X	X		X		X	X			A
10 UPMC ALTOONA 620 HOWARD STREET ALTOONA PA 16601 WWW.UPMC.COM EIN: 23-1352155	X	X		X			X			A

Part V Facility Information

Section A. Hospital Facilities

(list in order of size, from largest to smallest - see instructions)
 How many hospital facilities did the organization operate during the tax year? _____

Name, address, primary website address, and state license number (and if a group return, the name and EIN of the subordinate hospital organization that operates the hospital facility):

	Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	Other (describe)	Facility reporting group
1 UPMC CHILDREN'S HOSPITAL OF PGH 4401 PENN AVE PITTSBURGH PA 15224 WWW.UPMC.COM EIN: 25-0402510	291201	X	X	X	X	X	X			A
2 UPMC CHILDREN'S HOSPITAL OF PGH 2599 WEXFORD-BAYNE ROAD SEWICKLEY PA 15143 WWW.UPMC.COM EIN: 25-0402510	291201	X								A
3 UPMC WESTERN PSYCHIATRIC HOSPITAL 3811 O'HARA STREET PITTSBURGH PA 15213 WWW.UPMC.COM EIN: 25-0965480	390164	X								A
4 UPMC WILLIAMSPORT 700 HIGH STREET WILLIAMSPORT PA 17701 WWW.UPMC.COM EIN: 24-0795508	234601	X	X				X			A
5 UPMC WILLIAMSPORT DIVINE PROVIDENCE 1100 GRAMPION BLVD WILLIAMSPORT PA 17701 WWW.UPMC.COM EIN: 24-0795508	234601	X	X							A
6 UPMC ST. MARGARET 815 FREEPORT ROAD PITTSBURGH PA 15215 WWW.UPMC.COM EIN: 23-2875070	195901	X	X	X			X			A
7 UPMC ST. MARGARET 3 MARINER COURT PITTSBURGH PA 15238 WWW.UPMC.COM EIN: 23-2875070	195901	X							OUTPATIENT AMBULATORY & SURGICAL CENTER	A
8 UPMC MCKEESPORT 1500 FIFTH AVENUE MCKEESPORT PA 15132 WWW.UPMC.COM EIN: 25-0965423	650401	X	X	X			X			A
9 UPMC NORTHWEST 100 FAIRFIELD DRIVE SENECA PA 16346 WWW.UPMC.COM EIN: 25-0489010	151001	X	X				X			A
10 UPMC EAST 2775 MOSSIDE BOULEVARD MONROEVILLE PA 15146 WWW.UPMC.COM EIN: 27-4814831	22760101	X	X		X		X			A

Part V Facility Information

Section A. Hospital Facilities

(list in order of size, from largest to smallest - see instructions)
 How many hospital facilities did the organization operate during the tax year? _____

Name, address, primary website address, and state license number (and if a group return, the name and EIN of the subordinate hospital organization that operates the hospital facility):

	Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	Other (describe)	Facility reporting group
1 UPMC LITITZ 1500 HIGHLANDS DR LITITZ PA 17543 WWW.UPMC.COM EIN: 82-0844453	38	01	01							A
2 UPMC JAMESON 1211 WILMINGTON AVENUE NEW CASTLE PA 16105 WWW.UPMCJAMESON.COM EIN: 25-0965406	X	X		X			X			A
3 UPMC HORIZON 110 MAIN STREET GREENVILLE PA 16125 WWW.UPMC.COM EIN: 25-0523970	71	90	1							A
4 UPMC HORIZON 2200 MEMORIAL DRIVE FARRELL PA 16121 WWW.UPMC.COM EIN: 25-0523970	X	X		X			X			A
5 UPMC SOMERSET 225 SOUTH CENTRAL AVENUE SOMERSET PA 15501 WWW.UPMC.COM EIN: 25-0965570	19	69	01							A
6 UPMC LOCK HAVEN 24 CREE DRIVE LOCK HAVEN PA 17745 WWW.UPMC.COM EIN: 82-1600494	X	X		X			X			A
7 CHARLES COLE MEMORIAL HOSPITAL 1001 EAST 2ND ST COUDERSPORT PA 16915 WWW.UPMC.COM EIN: 24-0802108	03	18	01							A
8 UPMC CARLISLE 361 ALEXANDER SPRING ROAD CARLISLE PA 17015 WWW.UPMC.COM EIN: 82-0880337	X	X			X		X			A
9 UPMC BEDFORD 10455 LINCOLN HIGHWAY EVERETT PA 15337 WWW.UPMC.COM EIN: 23-1396795	65	05	01							A
10 UPMC WELLSBORO 32-36 CENTRAL AVE WELLSBORO PA 16901 WWW.UPMC.COM EIN: 23-2176963	X	X		X			X			A
	X				X		X			A

Part V Facility Information

Section A. Hospital Facilities

(list in order of size, from largest to smallest - see instructions)
 How many hospital facilities did the organization operate during the tax year? _____

Name, address, primary website address, and state license number (and if a group return, the name and EIN of the subordinate hospital organization that operates the hospital facility):

	Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	Other (describe)	Facility reporting group
1 UPMC MUNCY 215 EAST WATER STREET MUNCY PA 17756 WWW.UPMC.COM EIN: 24-0806023	X						X			A
2 UPMC KANE 4372 ROUTE 6 KANE PA 16735 WWW.UPMC.COM EIN: 25-0998168	X	X			X		X			A
3 UNIVERSITY OF PITTSBURGH MEDICAL CENT 275 CLAIRTON BLVD WEST MIFFLIN PA 15236 WWW.UPMC.COM EIN: 25-0965420			X						OUTPATIENT AMBULATORY & SURGICAL CENTER	A
4 UPMC ALTOONA SURGERY CENTER 800 HOWARD AVENUE, SUITE 2 ALTOONA PA 16602 WWW.UPMC.COM EIN: 23-1352155									OUTPATIENT AMBULATORY & SURGICAL CENTER	A
5 UPMC CENTER FOR REPRODUCTIVE ENDOCRIN 419 RODI ROAD PITTSBURGH PA 15235 WWW.UPMC.COM EIN: 25-0965420			X						OUTPATIENT AMBULATORY & SURGICAL CENTER	A
6 UPMC ST. MARGARET SURGICAL CENTER HAR 3 MARINER COURT PITTSBURGH PA 15238 WWW.UPMC.COM EIN: 23-2875070									OUTPATIENT AMBULATORY & SURGICAL CENTER	A
7 UPMC SOUTH SURGERY CENTER 1300 OXFORD DRIVE, SUITE G100 BETHEL PARK PA 15102 WWW.UPMC.COM EIN: 25-0965480									OUTPATIENT AMBULATORY & SURGICAL CENTER	A
8 UNIVERSITY OF PITTSBURGH MEDICAL CENT 1000 INTEGRITY DRIVE SUITE 110 PITTSBURGH PA 15235 WWW.UPMC.COM EIN: 25-0965480									OUTPATIENT AMBULATORY & SURGICAL CENTER	A
9 UNIVERSITY OF PITTSBURGH MEDICAL CENT 2600 WEXFORD BAYNE ROAD SEWICKLEY PA 15143 WWW.UPMC.COM EIN: 25-0402510									OUTPATIENT AMBULATORY & SURGICAL CENTER	A
10 UPMC HANOVER 300 HIGHLAND AVENUE HANOVER PA 17331 WWW.UPMC.COM EIN: 23-1360851	X	X					X			A

Part V Facility Information

Section A. Hospital Facilities

(list in order of size, from largest to smallest - see instructions)
 How many hospital facilities did the organization operate during the tax year? _____

Name, address, primary website address, and state license number (and if a group return, the name and EIN of the subordinate hospital organization that operates the hospital facility):

	Licensed hospital	General medical & surgical	Children's hospital	Teaching hospital	Critical access hospital	Research facility	ER-24 hours	ER-other	Other (describe)	Facility reporting group
1 UPMC MEMORIAL 1701 INNOVATION DR YORK PA 17408 WWW.UPMC.COM EIN: 82-0912090	X	X					X			A
2 UPMC PINNACLE HARRISBURG 111 SOUTH FRONT ST HARRISBURG PA 17101 WWW.UPMC.COM EIN: 25-1778644	X	X		X		X	X			A
3 UPMC PINNACLE COMMUNITY GENERAL OSTEP 4300 LONDONBERRY RD HARRISBURG PA 17109 WWW.UPMC.COM EIN: 25-1778644	X	X		X		X	X			A
4 UPMC PINNACLE WEST SHORE 1995 TECHNOLOGY PARKWAY MECHANICSBURG PA 17050 WWW.UPMC.COM EIN: 25-1778644	X	X		X		X	X			A
5 UPMC GREENE 350 BONAR AVENUE WAYNESBURG PA 15370 HTTPS://WHS.ORG/LOCATIONSEIN: 47-3884840	X	X					X			B
6 UPMC WASHINGTON 155 WILSON AVENUE WASHINGTON PA 15301 WWW.WHS.ORG EIN: 25-0965600	X	X					X			B
7										
8										
9										
10										

Part V Facility Information (continued)

Section B. Facility Policies and Practices

(complete a separate Section B for each of the hospital facilities or facility reporting groups listed in Part V, Section A)

Name of hospital facility or letter of facility reporting group: A

Line number of hospital facility, or line numbers of hospital facilities in a facility reporting group (from Part V, Section A): 44

		Yes	No
Community Health Needs Assessment (CHNA)			
1	Was the hospital facility first licensed, registered, or similarly recognized by a state as a hospital facility in the current tax year or the immediately preceding tax year?		X
2	Was the hospital facility acquired or placed into service as a tax-exempt hospital in the current tax year or the immediately preceding tax year? If "Yes," provide details of the acquisition in Section C		X
3	During the tax year or either of the 2 immediately preceding tax years, did the hospital facility conduct a CHNA? If "No," skip to line 12. If "Yes," indicate what the CHNA report describes (check all that apply):	X	
a	<input checked="" type="checkbox"/> A definition of the community served by the hospital facility		
b	<input checked="" type="checkbox"/> Demographics of the community		
c	<input checked="" type="checkbox"/> Existing health care facilities and resources within the community that are available to respond to the health needs of the community		
d	<input checked="" type="checkbox"/> How data was obtained		
e	<input checked="" type="checkbox"/> The significant health needs of the community		
f	<input checked="" type="checkbox"/> Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups		
g	<input checked="" type="checkbox"/> The process for identifying and prioritizing community health needs and services to meet the community health needs		
h	<input checked="" type="checkbox"/> The process for consulting with persons representing the community's interests		
i	<input checked="" type="checkbox"/> The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA		
j	<input type="checkbox"/> Other (describe in Section C)		
4	Indicate the tax year the hospital facility last conducted a CHNA: <u>2025</u>		
5	In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Section C how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility consulted	X	
6a	Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Section C	X	
6b	Was the hospital facility's CHNA conducted with one or more organizations other than hospital facilities? If "Yes," list the other organizations in Section C		X
7	Did the hospital facility make its CHNA report widely available to the public? If "Yes," indicate how the CHNA report was made widely available (check all that apply):	X	
a	<input checked="" type="checkbox"/> Hospital facility's website (list url): <u>SEE PART V SUPPLEMENTAL INFORMATION</u>		
b	<input type="checkbox"/> Other website (list url): _____		
c	<input checked="" type="checkbox"/> Made a paper copy available for public inspection without charge at the hospital facility		
d	<input type="checkbox"/> Other (describe in Section C)		
8	Did the hospital facility adopt an implementation strategy to meet the significant community health needs identified through its most recently conducted CHNA? If "No," skip to line 11	X	
9	Indicate the tax year the hospital facility last adopted an implementation strategy: <u>2025</u>		
10	Is the hospital facility's most recently adopted implementation strategy posted on a website?	X	
a	If "Yes," list url: <u>SAME AS 7A ABOVE</u>		
b	If "No," is the hospital facility's most recently adopted implementation strategy attached to this return?		
11	Describe in Section C how the hospital facility is addressing the significant needs identified in its most recently conducted CHNA and any such needs that are not being addressed together with the reasons why such needs are not being addressed.		
12a	Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a CHNA as required by section 501(r)(3)?		X
b	If "Yes" to line 12a, did the organization file Form 4720 to report the section 4959 excise tax?		
c	If "Yes" to line 12b, what is the total amount of section 4959 excise tax the organization reported on Form 4720 for all of its hospital facilities? \$		

Part V Facility Information (continued)

Section B. Facility Policies and Practices

(complete a separate Section B for each of the hospital facilities or facility reporting groups listed in Part V, Section A)

Name of hospital facility or letter of facility reporting group: B

Line number of hospital facility, or line numbers of hospital facilities in a facility reporting group (from Part V, Section A): 2

		Yes	No
Community Health Needs Assessment (CHNA)			
1	Was the hospital facility first licensed, registered, or similarly recognized by a state as a hospital facility in the current tax year or the immediately preceding tax year?		X
2	Was the hospital facility acquired or placed into service as a tax-exempt hospital in the current tax year or the immediately preceding tax year? If "Yes," provide details of the acquisition in Section C		X
3	During the tax year or either of the 2 immediately preceding tax years, did the hospital facility conduct a CHNA? If "No," skip to line 12. If "Yes," indicate what the CHNA report describes (check all that apply):	X	
a	<input checked="" type="checkbox"/> A definition of the community served by the hospital facility		
b	<input checked="" type="checkbox"/> Demographics of the community		
c	<input checked="" type="checkbox"/> Existing health care facilities and resources within the community that are available to respond to the health needs of the community		
d	<input checked="" type="checkbox"/> How data was obtained		
e	<input type="checkbox"/> The significant health needs of the community		
f	<input checked="" type="checkbox"/> Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups		
g	<input checked="" type="checkbox"/> The process for identifying and prioritizing community health needs and services to meet the community health needs		
h	<input checked="" type="checkbox"/> The process for consulting with persons representing the community's interests		
i	<input checked="" type="checkbox"/> The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA		
j	<input type="checkbox"/> Other (describe in Section C)		
4	Indicate the tax year the hospital facility last conducted a CHNA: <u>2025</u>		
5	In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Section C how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility consulted	X	
6a	Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Section C	X	
6b	Was the hospital facility's CHNA conducted with one or more organizations other than hospital facilities? If "Yes," list the other organizations in Section C		X
7	Did the hospital facility make its CHNA report widely available to the public? If "Yes," indicate how the CHNA report was made widely available (check all that apply):	X	
a	<input checked="" type="checkbox"/> Hospital facility's website (list url): <u>HTTPS://WHS.ORG/PATIENT-GUESTS/QUALITY-A</u>		
b	<input type="checkbox"/> Other website (list url): _____		
c	<input checked="" type="checkbox"/> Made a paper copy available for public inspection without charge at the hospital facility		
d	<input type="checkbox"/> Other (describe in Section C)		
8	Did the hospital facility adopt an implementation strategy to meet the significant community health needs identified through its most recently conducted CHNA? If "No," skip to line 11	X	
9	Indicate the tax year the hospital facility last adopted an implementation strategy: <u>2025</u>		
10	Is the hospital facility's most recently adopted implementation strategy posted on a website?	X	
a	If "Yes," list url: <u>HTTPS://WHS.ORG/PATIENT-GUESTS/QUALITY-A</u>		
b	If "No," is the hospital facility's most recently adopted implementation strategy attached to this return?		
11	Describe in Section C how the hospital facility is addressing the significant needs identified in its most recently conducted CHNA and any such needs that are not being addressed together with the reasons why such needs are not being addressed.		
12a	Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a CHNA as required by section 501(r)(3)?		X
b	If "Yes" to line 12a, did the organization file Form 4720 to report the section 4959 excise tax?		
c	If "Yes" to line 12b, what is the total amount of section 4959 excise tax the organization reported on Form 4720 for all of its hospital facilities? \$		

Part V Facility Information (continued)
Financial Assistance Policy (FAP)

Name of hospital facility or letter of facility reporting group: A

		Yes	No
Did the hospital facility have in place during the tax year a written FAP that:			
13	Explained eligibility criteria for financial assistance, and whether such assistance included free or discounted care? If "Yes," indicate the eligibility criteria explained in the FAP:	X	
a	<input checked="" type="checkbox"/> FPG, with FPG family income limit for eligibility for free care of and FPG family income limit <u>300.0000</u> % for eligibility for discounted care of <u>400.0000</u> %		
b	<input type="checkbox"/> Income level other than FPG (describe in Section C)		
c	<input type="checkbox"/> Asset level		
d	<input checked="" type="checkbox"/> Medical indigency		
e	<input checked="" type="checkbox"/> Insurance status		
f	<input checked="" type="checkbox"/> Underinsurance status		
g	<input type="checkbox"/> Residency		
h	<input type="checkbox"/> Other (describe in Section C)		
14	Explained the basis for calculating amounts charged to patients?	X	
15	Explained the method for applying for financial assistance?	X	
If "Yes," indicate how the hospital facility's FAP or FAP application form (including accompanying instructions) explained the method for applying for financial assistance (check all that apply):			
a	<input checked="" type="checkbox"/> Described the information the hospital facility may require an individual to provide as part of their application		
b	<input checked="" type="checkbox"/> Described the supporting documentation the hospital facility may require an individual to submit as part of their application		
c	<input checked="" type="checkbox"/> Provided the contact information of hospital facility staff who can provide an individual with information about the FAP and FAP application process		
d	<input type="checkbox"/> Provided the contact information of nonprofit organizations or government agencies that may be sources of assistance with FAP applications		
e	<input type="checkbox"/> Other (describe in Section C)		
16	Was widely publicized within the community served by the hospital facility?	X	
If "Yes," indicate how the hospital facility publicized the policy (check all that apply):			
a	<input checked="" type="checkbox"/> The FAP was widely available on a website (list url): <u>WWW.UPMC.COM (SEE PART VI)</u>		
b	<input checked="" type="checkbox"/> The FAP application form was widely available on a website (list url): <u>WWW.UPMC.COM (SEE PART VI)</u>		
c	<input checked="" type="checkbox"/> A plain language summary of the FAP was widely available on a website (list url): <u>WWW.UPMC.COM (SEE PART VI)</u>		
d	<input checked="" type="checkbox"/> The FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
e	<input checked="" type="checkbox"/> The FAP application form was available upon request and without charge (in public locations in the hospital facility and by mail)		
f	<input checked="" type="checkbox"/> A plain language summary of the FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
g	<input checked="" type="checkbox"/> Individuals were notified about the FAP by being offered a paper copy of the plain language summary of the FAP, by receiving a conspicuous written notice about the FAP on their billing statements, and via conspicuous public displays or other measures reasonably calculated to attract patients' attention		
h	<input checked="" type="checkbox"/> Notified members of the community who are most likely to require financial assistance about availability of the FAP		
i	<input checked="" type="checkbox"/> The FAP, FAP application form, and plain language summary of the FAP were translated into the primary language(s) spoken by limited-English proficiency (LEP) populations		
j	<input type="checkbox"/> Other (describe in Section C)		

Part V Facility Information (continued)

Financial Assistance Policy (FAP)

Name of hospital facility or letter of facility reporting group: B

		Yes	No
Did the hospital facility have in place during the tax year a written FAP that:			
13	Explained eligibility criteria for financial assistance, and whether such assistance included free or discounted care? If "Yes," indicate the eligibility criteria explained in the FAP:	X	
a	<input checked="" type="checkbox"/> FPG, with FPG family income limit for eligibility for free care of and FPG family income limit <u>200.0000</u> % for eligibility for discounted care of <u>400.0000</u> %		
b	<input type="checkbox"/> Income level other than FPG (describe in Section C)		
c	<input type="checkbox"/> Asset level		
d	<input checked="" type="checkbox"/> Medical indigency		
e	<input checked="" type="checkbox"/> Insurance status		
f	<input checked="" type="checkbox"/> Underinsurance status		
g	<input type="checkbox"/> Residency		
h	<input type="checkbox"/> Other (describe in Section C)		
14	Explained the basis for calculating amounts charged to patients?	X	
15	Explained the method for applying for financial assistance?	X	
If "Yes," indicate how the hospital facility's FAP or FAP application form (including accompanying instructions) explained the method for applying for financial assistance (check all that apply):			
a	<input checked="" type="checkbox"/> Described the information the hospital facility may require an individual to provide as part of their application		
b	<input checked="" type="checkbox"/> Described the supporting documentation the hospital facility may require an individual to submit as part of their application		
c	<input checked="" type="checkbox"/> Provided the contact information of hospital facility staff who can provide an individual with information about the FAP and FAP application process		
d	<input type="checkbox"/> Provided the contact information of nonprofit organizations or government agencies that may be sources of assistance with FAP applications		
e	<input type="checkbox"/> Other (describe in Section C)		
16	Was widely publicized within the community served by the hospital facility?	X	
If "Yes," indicate how the hospital facility publicized the policy (check all that apply):			
a	<input checked="" type="checkbox"/> The FAP was widely available on a website (list url): <u>WWW.UPMC.COM (SEE PART VI)</u>		
b	<input checked="" type="checkbox"/> The FAP application form was widely available on a website (list url): <u>WWW.UPMC.COM (SEE PART VI)</u>		
c	<input checked="" type="checkbox"/> A plain language summary of the FAP was widely available on a website (list url): <u>WWW.UPMC.COM (SEE PART VI)</u>		
d	<input checked="" type="checkbox"/> The FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
e	<input checked="" type="checkbox"/> The FAP application form was available upon request and without charge (in public locations in the hospital facility and by mail)		
f	<input checked="" type="checkbox"/> A plain language summary of the FAP was available upon request and without charge (in public locations in the hospital facility and by mail)		
g	<input checked="" type="checkbox"/> Individuals were notified about the FAP by being offered a paper copy of the plain language summary of the FAP, by receiving a conspicuous written notice about the FAP on their billing statements, and via conspicuous public displays or other measures reasonably calculated to attract patients' attention		
h	<input checked="" type="checkbox"/> Notified members of the community who are most likely to require financial assistance about availability of the FAP		
i	<input checked="" type="checkbox"/> The FAP, FAP application form, and plain language summary of the FAP were translated into the primary language(s) spoken by limited-English proficiency (LEP) populations		
j	<input type="checkbox"/> Other (describe in Section C)		

Part V Facility Information (continued)

Billing and Collections

Name of hospital facility or letter of facility reporting group: A

		Yes	No
17	Did the hospital facility have in place during the tax year a separate billing and collections policy, or a written FAP that explained all of the actions the hospital facility or other authorized party may take upon nonpayment?	X	
18	Check all of the following actions against an individual that were permitted under the hospital facility's policies during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP:		
a	<input type="checkbox"/> Reporting to credit agency(ies)		
b	<input type="checkbox"/> Selling an individual's debt to another party		
c	<input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP		
d	<input type="checkbox"/> Actions that require a legal or judicial process		
e	<input type="checkbox"/> Other similar actions (describe in Section C)		
f	<input checked="" type="checkbox"/> None of these actions or other similar actions were permitted		
19	Did the hospital facility or other authorized party perform any of the following actions during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP? If "Yes," check all actions in which the hospital facility or a third party engaged:		X
a	<input type="checkbox"/> Reporting to credit agency(ies)		
b	<input type="checkbox"/> Selling an individual's debt to another party		
c	<input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP		
d	<input type="checkbox"/> Actions that require a legal or judicial process		
e	<input type="checkbox"/> Other similar actions (describe in Section C)		
20	Indicate which efforts the hospital facility or other authorized party made before initiating any of the actions listed (whether or not checked) in line 19 (check all that apply):		
a	<input type="checkbox"/> Provided a written notice about upcoming extraordinary collection actions (ECAs) and a plain language summary of the FAP at least 30 days before initiating those ECAs (if not, describe in Section C)		
b	<input type="checkbox"/> Made a reasonable effort to orally notify individuals about the FAP and FAP application process (if not, describe in Section C)		
c	<input type="checkbox"/> Processed incomplete and complete FAP applications (if not, describe in Section C)		
d	<input type="checkbox"/> Made presumptive eligibility determinations (if not, describe in Section C)		
e	<input type="checkbox"/> Other (describe in Section C)		
f	<input type="checkbox"/> None of these efforts were made		

Policy Relating to Emergency Medical Care

21	Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that required the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility under the hospital facility's FAP? If "No," indicate why:	X	
a	<input type="checkbox"/> The hospital facility did not provide care for any emergency medical conditions		
b	<input type="checkbox"/> The hospital facility's policy was not in writing		
c	<input type="checkbox"/> The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Section C)		
d	<input type="checkbox"/> Other (describe in Section C)		

Part V Facility Information (continued)

Billing and Collections

Name of hospital facility or letter of facility reporting group: B

		Yes	No
17	Did the hospital facility have in place during the tax year a separate billing and collections policy, or a written FAP that explained all of the actions the hospital facility or other authorized party may take upon nonpayment?	X	
18	Check all of the following actions against an individual that were permitted under the hospital facility's policies during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP:		
a	<input type="checkbox"/> Reporting to credit agency(ies)		
b	<input type="checkbox"/> Selling an individual's debt to another party		
c	<input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP		
d	<input type="checkbox"/> Actions that require a legal or judicial process		
e	<input type="checkbox"/> Other similar actions (describe in Section C)		
f	<input checked="" type="checkbox"/> None of these actions or other similar actions were permitted		
19	Did the hospital facility or other authorized party perform any of the following actions during the tax year before making reasonable efforts to determine the individual's eligibility under the facility's FAP? If "Yes," check all actions in which the hospital facility or a third party engaged:		X
a	<input type="checkbox"/> Reporting to credit agency(ies)		
b	<input type="checkbox"/> Selling an individual's debt to another party		
c	<input type="checkbox"/> Deferring, denying, or requiring a payment before providing medically necessary care due to nonpayment of a previous bill for care covered under the hospital facility's FAP		
d	<input type="checkbox"/> Actions that require a legal or judicial process		
e	<input type="checkbox"/> Other similar actions (describe in Section C)		
20	Indicate which efforts the hospital facility or other authorized party made before initiating any of the actions listed (whether or not checked) in line 19 (check all that apply):		
a	<input type="checkbox"/> Provided a written notice about upcoming extraordinary collection actions (ECAs) and a plain language summary of the FAP at least 30 days before initiating those ECAs (if not, describe in Section C)		
b	<input type="checkbox"/> Made a reasonable effort to orally notify individuals about the FAP and FAP application process (if not, describe in Section C)		
c	<input type="checkbox"/> Processed incomplete and complete FAP applications (if not, describe in Section C)		
d	<input type="checkbox"/> Made presumptive eligibility determinations (if not, describe in Section C)		
e	<input type="checkbox"/> Other (describe in Section C)		
f	<input type="checkbox"/> None of these efforts were made		

Policy Relating to Emergency Medical Care

21	Did the hospital facility have in place during the tax year a written policy relating to emergency medical care that required the hospital facility to provide, without discrimination, care for emergency medical conditions to individuals regardless of their eligibility under the hospital facility's FAP? If "No," indicate why:	X	
a	<input type="checkbox"/> The hospital facility did not provide care for any emergency medical conditions		
b	<input type="checkbox"/> The hospital facility's policy was not in writing		
c	<input type="checkbox"/> The hospital facility limited who was eligible to receive care for emergency medical conditions (describe in Section C)		
d	<input type="checkbox"/> Other (describe in Section C)		

Part V Facility Information (continued)

Charges to Individuals Eligible for Assistance Under the FAP (FAP-Eligible Individuals)

Name of hospital facility or letter of facility reporting group: A

		Yes	No
22	Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care:		
a	<input type="checkbox"/> The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service during a prior 12-month period		
b	<input checked="" type="checkbox"/> The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period		
c	<input type="checkbox"/> The hospital facility used a look-back method based on claims allowed by Medicaid, either alone or in combination with Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period		
d	<input type="checkbox"/> The hospital facility used a prospective Medicare or Medicaid method		
23	During the tax year, did the hospital facility charge any FAP-eligible individual to whom the hospital facility provided emergency or other medically necessary services more than the amounts generally billed to individuals who had insurance covering such care? If "Yes," explain in Section C.		X
24	During the tax year, did the hospital facility charge any FAP-eligible individual an amount equal to the gross charge for any service provided to that individual? If "Yes," explain in Section C.		X

Part V Facility Information (continued)

Charges to Individuals Eligible for Assistance Under the FAP (FAP-Eligible Individuals)

Name of hospital facility or letter of facility reporting group: B

		Yes	No
22	Indicate how the hospital facility determined, during the tax year, the maximum amounts that can be charged to FAP-eligible individuals for emergency or other medically necessary care:		
a	<input type="checkbox"/> The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service during a prior 12-month period		
b	<input type="checkbox"/> The hospital facility used a look-back method based on claims allowed by Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period		
c	<input checked="" type="checkbox"/> The hospital facility used a look-back method based on claims allowed by Medicaid, either alone or in combination with Medicare fee-for-service and all private health insurers that pay claims to the hospital facility during a prior 12-month period		
d	<input type="checkbox"/> The hospital facility used a prospective Medicare or Medicaid method		
23	During the tax year, did the hospital facility charge any FAP-eligible individual to whom the hospital facility provided emergency or other medically necessary services more than the amounts generally billed to individuals who had insurance covering such care? If "Yes," explain in Section C.		X
24	During the tax year, did the hospital facility charge any FAP-eligible individual an amount equal to the gross charge for any service provided to that individual? If "Yes," explain in Section C.		X

Part V Facility Information (continued)

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

PART V SECTION B LINE 5

FAP AVAILABLE WEBSITE:

THE FOLLOWING EXPLANATION APPLIES TO ALL FACILITIES INCLUDED IN REPORTING GROUP A AND REPORTING GROUP B.

UPMC'S COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) PROCESS INCLUDED A PARTNERSHIP WITH EXPERTS AT THE UNIVERSITY OF PITTSBURGH SCHOOL OF PUBLIC HEALTH TO CONDUCT THE CHNA USING A BEST-PRACTICE METHODOLOGY. THE ASSESSMENT BLENDED ANALYSIS OF DOCUMENTED HEALTH AND SOCIOECONOMIC FACTORS WITH A STRUCTURED, COMMUNITY INPUT SURVEY PROCESS. EFFECTIVELY ENGAGING THE COMMUNITY IN A BROAD, SYSTEMATIC WAY, THE SURVEY SOLICITED FEEDBACK FROM COMMUNITY ADVISORY PANELS COMPOSED OF LEADERS OF ORGANIZATIONS THAT REPRESENT PATIENT CONSTITUENCIES, INCLUDING MEDICALLY UNDERSERVED, LOW-INCOME, AND MINORITY POPULATIONS WITHIN THE HOSPITAL'S COMMUNITY. UPMC INVITED MORE THAN 3,600 STAKEHOLDERS TO HELP IDENTIFY THEIR COMMUNITY'S MOST PRESSING HEALTH NEEDS. APPENDIX C OF EACH HOSPITAL CHNA REPORT INCLUDES A LIST OF COMMUNITY PARTICIPANTS.

[HTTPS://WWW.UPMC.COM/ABOUT/COMMUNITY-COMMITMENT/COMMUNITY-HEALTH-NEEDS-ASS](https://www.upmc.com/about/community-commitment/community-health-needs-assessment)

ESSMENT

[HTTPS://WHS.ORG/PATIENT-GUESTS/#_TAB-985F3F5E473EFDED214](https://whs.org/patient-guests/#_TAB-985F3F5E473EFDED214)

PART V SECTION B LINE 6A

THE FOLLOWING EXPLANATION APPLIES TO ALL FACILITIES INCLUDED IN REPORTING GROUP A AND REPORTING GROUP B.

IN JUNE 2025, UPMC HOSPITALS COMPLETED JOINT CHNAS AS FOLLOWS:

ALLEGHENY, GREENE, LAWRENCE, MERCER, AND WASHINGTON COUNTY HOSPITALS IN PENNSYLVANIA: UPMC CHILDREN'S HOSPITAL OF PITTSBURGH, UPMC EAST, UPMC MAGEE-WOMENS HOSPITAL, UPMC MCKEESPORT, UPMC MERCY, UPMC PASSAVANT, UPMC PRESBYTERIAN SHADYSIDE, UPMC ST. MARGARET, UPMC GREENE, UPMC JAMESON, UPMC HORIZON, AND UPMC WASHINGTON.

BEDFORD, BLAIR, AND SOMERSET COUNTY HOSPITALS IN PENNSYLVANIA, AND ALLEGANY COUNTY HOSPITAL IN MARYLAND: UPMC ALTOONA, UPMC BEDFORD, UPMC SOMERSET, AND UPMC WESTERN MARYLAND.

ERIE, MCKEAN, AND VENANGO COUNTIES IN PENNSYLVANIA AND CHAUTAUQUA COUNTY HOSPITAL IN NEW YORK: UPMC HAMOT, UPMC KANE, UPMC NORTHWEST, AND UPMC CHAUTAUQUA.

CLINTON, LYCOMING, POTTER, AND TIOGA COUNTY HOSPITALS IN PENNSYLVANIA: UPMC MUNCY, UPMC WILLIAMSPORT, UPMC COLE, AND UPMC WELLSBORO.

CUMBERLAND, DAUPHIN, LANCASTER, AND YORK COUNTY HOSPITALS IN PENNSYLVANIA: UPMC CARLISLE, UPMC HANOVER, UPMC MEMORIAL, UPMC LITITZ, AND UPMC PINNACLE HOSPITALS: INCLUDING UPMC COMMUNITY OSTEOPATHIC, UPMC HARRISBURG, AND UPMC WEST SHORE.

Part V Facility Information (continued)

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

PART V SECTION B LINE 7A AND 10A

THE FOLLOWING EXPLANATION APPLIES TO ALL FACILITIES INCLUDED IN REPORTING GROUP A AND REPORTING GROUP B.

WEBSITE FOR CHNA:

[HTTPS://WWW.UPMC.COM/ABOUT/COMMUNITY-COMMITMENT/COMMUNITY-HEALTH-NEEDS-ASSESSMENT](https://www.upmc.com/about/community-commitment/community-health-needs-assessment)

[HTTPS://WHS.ORG/PATIENT-GUESTS/QUALITY-AND-SAFETY/](https://whs.org/patient-guests/quality-and-safety/)

PART V SECTION B LINE 11

THE FOLLOWING EXPLANATION APPLIES TO ALL FACILITIES INCLUDED IN REPORTING GROUP A AND REPORTING GROUP B.

THROUGH A RIGOROUS CHNA METHODOLOGY, UPMC HOSPITALS IDENTIFIED FOUR MAJOR THEMES REPRESENTING THE SIGNIFICANT HEALTH NEEDS IN THEIR COMMUNITIES: CHRONIC DISEASE MANAGEMENT; BEHAVIORAL HEALTH; ACCESS TO CARE AND NAVIGATING RESOURCES; AND PREVENTION AND COMMUNITY-WIDE HEALTHY LIVING. THE HOSPITALS DEVELOPED STRATEGIC IMPLEMENTATION PLANS TO ADDRESS THESE ISSUES, AS OUTLINED IN THEIR CHNA DOCUMENTS AND COMMUNITY HEALTH STRATEGIC PLANS - SEE SECTION IV OF EACH CHNA REPORT.

[HTTPS://WWW.UPMC.COM/ABOUT/COMMUNITY-COMMITMENT/COMMUNITY-HEALTH-NEEDS-ASSESSMENT](https://www.upmc.com/about/community-commitment/community-health-needs-assessment)

PART V SECTION B

LINE NUMBER OF HOSPITAL FACILITY, OR LINE NUMBERS OF HOSPITAL FACILITIES IN A FACILITY REPORTING GROUP (FROM PART V, SECTION A).

PART V SECTION B

PART V SECTION B LINES 19 & 20:

THE FOLLOWING EXPLANATION APPLIES TO ALL FACILITIES INCLUDED IN REPORTING GROUP A AND REPORTING GROUP B.

UPMC'S POLICIES DO NOT PERMIT HOSPITAL FACILITIES OR ANY OTHER AUTHORIZED PARTIES TO ENGAGE IN EXTRAORDINARY COLLECTIONS ACTIONS IN ANY CIRCUMSTANCES. THEREFORE, LINE 20 HAS BEEN LEFT BLANK SINCE IN IS NOT

Part V Facility Information (continued)

Section C. Supplemental Information for Part V, Section B. Provide descriptions required for Part V, Section B, lines 2, 3j, 5, 6a, 6b, 7d, 11, 13b, 13h, 15e, 16j, 18e, 19e, 20a, 20b, 20c, 20d, 20e, 21c, 21d, 23, and 24. If applicable, provide separate descriptions for each hospital facility in a facility reporting group, designated by facility reporting group letter and hospital facility line number from Part V, Section A ("A, 1," "A, 4," "B, 2," "B, 3," etc.) and name of hospital facility.

APPLICABLE AND UPMC BELIEVES IT WOULD BE MISLEADING TO CHECK ANY OF THE BOXES.

PART V SECTION B LINE 16

FAP AVAILABLE WEBSITE:
[HTTPS://WHS.ORG/PATIENT-GUESTS/](https://whs.org/patient-guests/)

Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)How many non-hospital health care facilities did the organization operate during the tax year? 251

Name and address	Type of facility (describe)
1 UNIVERSITY OF PITTSBURGH PHYSICIANS (UPP) 200 LOTHROP STREET PITTSBURGH PA 15213	PHYSICIAN SERVICES
2 UPMC MAGEE-WOMENS HOSPITAL (UPP) 720 PENN AVENUE PITTSBURGH PA 15221	OUTPATIENT SERVICES
3 UPMC MAGEE-WOMENS HOSPITAL (UPP) 559 MILLER AVENUE CLAIRTON PA 15025	OUTPATIENT SERVICES
4 UPMC MAGEE-WOMENS HOSPITAL (UPP) 1630 ARLINGTON AVENUE PITTSBURGH PA 15210	OUTPATIENT SERVICES
5 UPMC COMMUNITY MEDICINE, INC (CMI) 200 LOTHROP STREET PITTSBURGH PA 15213	PHYSICIAN SERVICES
6 BENEDUM GERIATRIC BH CLINIC- UPMC WESTER 3459 FIFTH AVENUE PITTSBURGH PA 15213	OUTPATIENT BEHAVIORAL HEALTH
7 SLEEP MEDICINE CENTER AT MONROEVILLE 400 OXFORD DRIVE, STE 65 MONROEVILLE PA 15146	OUTPATIENT SERVICES
8 ERIE PHYSICIAN NETWORK-UPMC, INC. (EPN) 3535 PINE AVENUE ERIE PA 16504	PHYSICIAN SERVICES
9 UPMC DIGESTIVE HEALTH AND ENDOSCOPY (PUH) 1000 INTEGRITY DRIVE, STE 110 PITTSBURGH PA 15235	OUTPATIENT SERVICES
10 UPMC HILLMAN CANCER CENTER TISSUE & RESE 5230 CENTRE AVENUE PITTSBURGH PA 15232	OUTPATIENT SERVICES

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC ST. MARGARET-NATRONA HEIGHTS (SMH) 1604 BURTNER ROAD STE 109 (SMH) NATRONA HEIGHTS PA 15065	OUTPATIENT SERVICES
2 UPMC LEMIEUX SPORTS COMPLEX 8000 CRANBERRY SPRINGS DR CRANBERRY TWP PA 16066	OUTPATIENT SERVICES
3 UPMC MONROEVILLE IMAGING CENTER 600 OXFORD DR MONROEVILLE PA 15146	IMAGING SERVICES
4 UPMC PAIN MEDICINE 600 OXFORD DR MONROEVILLE PA 15146	OUTPATIENT SERVICES
5 UPMC PAIN MEDICINE AT CENTRE COMMON 5750 CENTRE AVE PITTSBURGH PA 15206	OUTPATIENT SERVICES
6 UPMC PRESBYTERIAN SHADYSIDE 200 LOTHROP STREET PITTSBURGH PA 15213	REHABILITATION SERVICES
7 UPMC PRESBYTERIAN SHADYSIDE 200 LOTHROP STREET, STE E-173 PITTSBURGH PA 15213	PHARMACY SERVICES
8 UPMC SHADYSIDE MEDICAL BUILDING 5200 CENTRE AVENUE PITTSBURGH PA 15232	OUTPATIENT SERVICES
9 UPMC SOUTH SURGERY CENTER 1300 OXFORD DR BETHEL PARK PA 15102	OUTPATIENT SERVICES
10 UPMC WESTERN PSYCHIATRIC HOSPITAL 3811 O'HARA STREET PITTSBURGH PA 15213	OUTPATIENT BEHAVIORAL HEALTH

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC WESTERN PSYCHIATRIC HOSPITAL 1398 PAGE STREET PITTSBURGH PA 15233	OUTPATIENT BEHAVIORAL HEALTH
2 HARRISON CITY WOMEN'S IMAGING 3520 ROUTE 3520 130, BUILDING 1 IRWIN PA 15642	IMAGING SERVICES
3 MAGEE WOMENS IMAGING MCCANDLESS 9100 BABCOCK BLVD PITTSBURGH PA 15237	IMAGING SERVICES
4 MAGEE-WOMENS IMAGING AT HILLMAN CANCER (5115 CENTER AVENUE, STE 140, 1ST FLOOR PITTSBURGH PA 15232	IMAGING SERVICES
5 MAGEE-WOMENS IMAGING GREENTREE (MAG) 969 GREENTREE ROAD PITTSBURGH PA 15220	IMAGING SERVICES
6 MAGEE-WOMENS IMAGING LEMIEUX (MAG) 8000 CRANBERRY SPRINGS DR, STE SM601A CRANBERRY TWP PA 16066	IMAGING SERVICES
7 MAGEE-WOMENS IMAGING MCKEESPORT (MAG) 1500 FIFTH AVENUE, STE MA12 MCKEESPORT PA 15132	OUTPATIENT SERVICES
8 MAGEE-WOMENS IMAGING MONROEVILLE (MAG) 4075 MONROEVILLE BLVD 2 STE 225 MONROEVILLE PA 15146	OUTPATIENT SERVICES
9 MAGEE-WOMENS IMAGING NATRONA HEIGHTS (MA 1800 UNION AVENUE, STE B NATRONA HEIGHTS PA 15065	IMAGING SERVICES
10 MAGEE-WOMENS IMAGING NORTH (MAG) 2599 WEXFORD-BAYNE ROAD SEWICKLEY PA 15143	OUTPATIENT SERVICES &

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 MAGEE-WOMENS IMAGING ST. MARGARET (MAG) 815 FREEPORT ROAD, STE 2160 PITTSBURGH PA 15215	IMAGING SERVICES
2 MAGEE-WOMENS SOUTH HILLS (MAG) 1300 OXFORD DRIVE, SUITE 2A BETHEL PARK PA 15102	OUTPATIENT SERVICES &
3 UPMC CENTER FOR FERTILITY AND REPRODUCTI 419 RODI ROAD PITTSBURGH PA 15235	ENDOCRINOLOGY SERVICES
4 UPMC HILLMAN CANCER CENTER (MAG) 5115 CENTRE AVENUE PITTSBURGH PA 15232	ONCOLOGY SERVICES
5 UPMC HILLMAN CANCER CENTER AT NATRONA HE 1604 BURTNER ROAD NATRONA HEIGHTS PA 15065	ONCOLOGY SERVICES
6 UPMC HILLMAN CANCER CENTER AT UPMC PASSA 9100 BABCOCK BLVD PITTSBURGH PA 15237	ONCOLOGY SERVICES
7 UPMC HILLMAN CANCER CENTER AT UPMC ST MA 200 DELAFIELD ROAD PITTSBURGH PA 15215	ONCOLOGY SERVICES
8 UPMC HILLMAN CANCER CENTER BEAVER (MAG) 1030 BEANER HOLLOW RD BEAVER PA 15009	ONCOLOGY SERVICES
9 UPMC HILLMAN CANCER CENTER MONROEVILLE 400 OXFORD DRIVE MONROEVILLE PA 15146	ONCOLOGY SERVICES
10 UPMC HILLMAN CANCER CENTER SEWICKLEY (MA) 1600 CORAOPOLIS HEIGHTS ROAD CORAOPOLIS PA 15108	ONCOLOGY SERVICES

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC HILLMAN CANCER CENTER WASHINGTON (M) 470 JOHNSON ROAD, STE 10 WASHINGTON PA 15301	ONCOLOGY SERVICES
2 UPMC HILLMAN CANCER CENTER WEST MIFFLIN 1907 LEBANON CHURCH RD WEST MIFFLIN PA 15122	ONCOLOGY SERVICES
3 UPMC MAGEE-WOMENS HOSPITAL (MAG) 4075 MONROEVILLE BLVD 2 STE 330 MONROEVILLE PA 15146	OUTPATIENT SERVICES
4 UPMC OUTPATIENT CENTER WEST MIFFLIN (MAG) 275 CLAIRTON BLVD WEST MIFFLIN PA 15236	IMAGING SERVICES
5 UPMC OUTPATIENT SURGERY CENTER WEST MIFF 275 CLAIRTON BLVD WEST MIFFLIN PA 15237	AMBULATORY SURGERY CENTER
6 ST. CLAIR HOSPITAL CANCER CENTER, AFFILI 1000 BOWER HILL RD, SUITE 7700 ST. CLAIR PA 15243	ONCOLOGY SERVICES
7 UPMC HILLMAN CANCERCNTR AT INDEPENDENCE 129 ONEIDA VALLEY ROAD SUITE 311 BUTLER PA 16001	ONCOLOGY SERVICES
8 UPMC HILLMAN CANCERCNTR AT INDEPENDENCE 200 VILLAGE DR, SUITE E GREENSBURG PA 15601	ONCOLOGY SERVICES
9 UPMC HILLMAN CANCERCNTR AT INDEPENDENCE 508 SOUTH CHURCH ST, SUITE 202 MT. PLEASANT PA 15666	ONCOLOGY SERVICES
10 UPMC HILLMAN CANCERCNTR AT INDEPENDENCE 8775 NORWIN AVE, SUITE J NORTH HUNTINGDON PA 15642	ONCOLOGY SERVICES

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC HILLMAN CANCER CENTER AT UPMC PASSA 3 ST FRANCIS WAY, BLDG 3, SUITE 103 CRANBERRY TWP PA 16066-5120	CANCER CENTER
2 UPMC MAGEE-WOMENS HOSPITAL 300 HALKET STREET PITTSBURGH PA 15213	UPMC MAGEE WOMENS HOSPITAL TRA
3 UPMC MAGEE-WOMENS HOSPITAL (MAG) 9100 BABCOCK BLVD, FIRST FLOOR PITTSBURGH PA 15237	MAGEE-WOMENS HEALTH, UROGYNECO
4 UPMC BETHEL PARK 2000 OXFORD DRIVE, STE 500 BETHEL PARK PA 15102	OUTPATIENT SERVICES
5 UPP GI SHY CLINIC 5200 CENTRE AVE, STE 409 PITTSBURGH PA 15232	OUTPATIENT SERVICES
6 UPMC MURRYSVILLE 4448 OLD WILLIAM PENN HWY, STE 200 MURRYSVILLE PA 15668	OUTPATIENT SERVICES
7 RHEUM CRANBERRY OP 20130 RTE 19 #2300 CRANBERRY TWP PA 16066	OUTPATIENT SERVICES
8 LUPUS CENTER OAKLAND 580 S AIKEN AVE, STE 430 PITTSBURGH PA 15232	OUTPATIENT SERVICES
9 CHILDREN'S EAST (CHP) 4055 MONROEVILLE BOULEVARD, BUILDING 1 MONROEVILLE PA 15146	OUTPATIENT SERVICES
10 CHILDRENS HOSPITAL OF PITTSBURGH (CHP) 205 MILLERS RUN ROAD BRIDGEVILLE PA 15017	OUTPATIENT SERVICES

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 CHILDRENS HOSPITAL OF PITTSBURGH (CHP) 2619 WEXFORD BAYNE ROAD SEWICKLEY PA 15143	OUTPATIENT SERVICES
2 CHILDREN'S HOSPITAL PITTSBURGH (CHP) 3420 FIFTH AVENUE PITTSBURGH PA 15213	OUTPATIENT SERVICES
3 CHILDREN'S HOSPITAL WEXFORD (CHP) 11279 PERRY HWY WEXFORD PA 15090	OUTPATIENT SERVICES
4 UPMC HEART AND VASCULAR INSTITUTE (HMT) 120 EAST 2ND STREET ERIE PA 16507	OUTPATIENT SERVICES
5 IMAGING CENTER AT STERLING SQUARE (HMT) 3406 PEACH STREET ERIE PA 16508	IMAGING SERVICES
6 UPMC CARDIOPULMONARY REHAB (HMT) 3300 PEACH STREET ERIE PA 16508	REHABILITATION SERVICES
7 UPMC HAMOT (HMT) 201 STATE STREET ERIE PA 16550	PHYSICIAN SERVICES
8 UPMC HAMOT INFUSION CENTER (HMT) 215 HOLLAND ST ERIE PA 16507	OUTPATIENT SERVICES
9 UPMC HAMOT MAGEE-WOMENS (HMT) 118 EAST 2ND STREET ERIE PA 16507	OUTPATIENT SERVICES
10 UPMC HAMOT SLEEP DISORDERS CENTER (HMT) 4022 ZUCK RD ERIE PA 16506	OUTPATIENT SERVICES

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC HAMOT WOMEN'S IMAGING (HMT) 300 STATE STREET, STE 108 ERIE PA 16507	OUTPATIENT SERVICES
2 UPMC HILLMAN CANCER CENTER (HMT) 2500 WEST 12TH ST, STE B ERIE PA 16505	ONCOLOGY SERVICES
3 UPMC WOUND HEALING SERVICES AT UPMC 215 HOLLAND ST ERIE PA 16507	OUTPATIENT SERVICES
4 UPMC CENTER FOR DIABETES AND ENDOCRINOLO 1700 PEACH ST, STE 220 ERIE PA 16501	OUTPATIENT SERVICES
5 ALTOONA EMERGENCY PHYSICIANS 10455 LINCOLN HIGHWAY EVERETT PA 15537	PHYSICIAN SERVICES
6 ALTOONA FAMILY PHYSICIANS (ALT) 501 HOWARD AVENUE ALTOONA PA 16601	PHYSICIAN SERVICES
7 JOHN P. MURTHA REGIONAL CANCER CENTER 337 SOMERSET ST JOHNSTOWN PA 15901	ONCOLOGY SERVICES
8 PULMONARY CT SCANNER 800 CHESTNUT AVE ALTOONA PA 16601	OUTPATIENT SERVICES
9 UPMC ALTOONA LOGAN MEDICAL BUILDING 800 S LOGAN BLVD, STE 3100 HOLLIDAYSBURG PA 16648	OUTPATIENT SERVICES
10 UPMC ALTOONA MEDICAL ONCOLOGY CANCER CEN 800 HOWARD AVENUE ALTOONA PA 16601	ONCOLOGY SERVICES

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC ALTOONA PREGNANCY CARE CENTER (ALT) 501 HOWARD AVENUE ALTOONA PA 16601	OUTPATIENT SERVICES
2 UPMC ALTOONA STATION MEDICAL CENTER (ALT) 1516 9TH AVENUE ALTOONA PA 16602	OUTPATIENT SERVICES
3 UPMC ALTOONA WOMEN'S HEALTH & WELLNESS C 501 HOWARD AVENUE ALTOONA PA 16601	OUTPATIENT SERVICES
4 UPMC OUTPATIENT CENTER- EBENSBURG 152 ZEMAN DR EBENSBURG PA 15931	OUTPATIENT SERVICES
5 WILLIAMSBURG FAMILY PHYSICIANS (ALT) 306 PLUM STREET WILLIAMSBURG PA 16693	PHYSICIAN SERVICES
6 EASTERN LYCOMING YMCA (WIL) 50 FITNESS DR MUNCY PA 17756	OUTPATIENT SERVICES
7 FAMILY MEDICINE (WIL) 1205 RIVER AVE WILLIAMSPORT PA 17701	OUTPATIENT SERVICES
8 SUSQUEHANNA HEALTH HEART & VASCULAR INST 740 HIGH ST WILLIAMSPORT PA 17701	OUTPATIENT SERVICES
9 UPMC IMAGING SERVICES - RIVER AVE (WIL) 1205 RIVER AVE WILLIAMSPORT PA 17701	OUTPATIENT SERVICES
10 UPMC IMAGING SERVICES (WIL) 1201 GRAMPAN BLVD WILLIAMSPORT PA 17701	OUTPATIENT SERVICES

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC IMAGING SERVICES AT UPMC WILLIAMSP 1112 GRAMPIAN BLVD WILLIAMSPORT PA 17701	OUTPATIENT SERVICES
2 UPMC LEWISBURG SURGERY CENTER (WIL) 2330 ST MARY ST LEWISBURG PA 17837	OUTPATIENT SERVICES
3 UPMC OUTPATIENT CENTER (WIL) 900 PLAZA DR MONTTOURSVILLE PA 17754	OUTPATIENT SERVICES
4 UPMC PEDIATRIC REHABILITATION (WIL) 625 W EDWIN WILLIAMSPORT PA 17701	OUTPATIENT SERVICES
5 UPMC SUSQUEHANNA HEALTH (WIL) 1705 WARREN AVE WILLIAMSPORT PA 17701	OUTPATIENT SERVICES
6 UPMC SUSQUEHANNA PHYSICAL THERAPY (WIL) 449 RIVER AVE WILLIAMSPORT PA 17701	OUTPATIENT SERVICES
7 UPMC WILLIAMSPORT DIVINE PROVIDENCE CAMP 1100 GRAMPIAN BLVD WILLIAMSPORT PA 17701	OUTPATIENT SERVICES
8 HAVEN SKILLED REHABILITATION & NURSING (24 CREE DRIVE LOCK HAVEN PA 17745	REHABILITATION SERVICES
9 UPMC CENTER FOR SPORTS MEDICINE (MHP) 3200 S WATER STREET PITTSBURGH PA 15203	OUTPATIENT SERVICES
10 UPMC VISION INSTITUTE (MHP) 1622 LOCUST STREET PITTSBURGH PA 15219	OUTPATIENT SERVICES

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC PASSAVANT- OUTPATIENT CENTER HAMPTO 4490 MT. ROYAL BLVD ALLISON PARK PA 15101	IMAGING SERVICES
2 UPMC PASSAVANT (PAS) ONE ST. FRANCIS WAY CRANBERRY TOWNSHIP PA 16066	OUTPATIENT SERVICES
3 UPMC PASSAVANT-CRANBERRY CAMPUS (PAS) 3 ST FRANCIS WAY CRANBERRY TWP PA 16066	OUTPATIENT SERVICES
4 UPMC PASSAVANT-SPINE CENTER (PAS) 12680 PERRY HIGHWAY WEXFORD PA 15090	IMAGING SERVICES
5 UPMC WOUND HEALING SERVICES (PAS) 2030 MACKENZIE WAY, STE 400 CRANBERRY TWP PA 16066	OUTPATIENT SERVICES
6 UPMC ST. MARGARET GERIATRIC CARE CENTER 1215 HULTON ROAD OAKMONT PA 15139	OUTPATIENT SERVICES
7 UPMC NATRONA HEIGHTS MULTISPECIALTY (SMH) 1800 UNION AVENUE NATRONA HEIGHTS PA 15065	OUTPATIENT SERVICES
8 UPMC ST. MARGARET DERMATOLOGY (SMH) 2585 FREEPORT ROAD, STE 204 PITTSBURGH PA 15238	OUTPATIENT SERVICES
9 UPMC ST. MARGARET MEDICAL ARTS BUILDING 100 DELAFIELD ROAD PITTSBURGH PA 15215	OUTPATIENT SERVICES
10 UPMC ST. MARGARET MEDICAL ARTS BUILDING 200 DELAFIELD ROAD PITTSBURGH PA 15215	OUTPATIENT SERVICES

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(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC WESTERN PSYCHIATRIC HOSPITAL 250 N BELLEFIELD AVENUE PITTSBURGH PA 15213	OUTPATIENT BEHAVIORAL HEALTH
2 UPMC WESTERN PSYCHIATRIC HOSPITAL 225 PENN AVENUE PITTSBURGH PA 15221	OUTPATIENT BEHAVIORAL HEALTH
3 UPMC WESTERN PSYCHIATRIC HOSPITAL 11279 PERRY HIGHWAY WEXFORD PA 15090	OUTPATIENT BEHAVIORAL HEALTH
4 UPMC WESTERN PSYCHIATRIC HOSPITAL 807 WALLACE AVENUE PITTSBURGH PA 15221	OUTPATIENT BEHAVIORAL HEALTH
5 UPMC WESTERN PSYCHIATRIC HOSPITAL 3811 O'HARA STREET PITTSBURGH PA 15213	OUTPATIENT BEHAVIORAL HEALTH
6 UPMC WESTERN PSYCHIATRIC HOSPITAL 250 N BELLEFIELD AVENUE PITTSBURGH PA 15213	OUTPATIENT BEHAVIORAL HEALTH
7 UPMC WESTERN PSYCHIATRIC HOSPITAL 1398 PAGE STREET PITTSBURGH PA 15233	OUTPATIENT BEHAVIORAL HEALTH
8 UPMC WESTERN PSYCHIATRIC HOSPITAL 2400 EAST CARSON STREET PITTSBURGH PA 15203	OUTPATIENT BEHAVIORAL HEALTH
9 WESTERN PSYCH INSTITUTE AND CLINIC (PUH) 100 N BELLEFIELD AVE PITTSBURGH PA 15213	OUTPATIENT BEHAVIORAL HEALTH
10 WESTERN PSYCH INSTITUTE AND CLINIC (PUH) 1011 BINGHAM STREET PITTSBURGH PA 15203	OUTPATIENT BEHAVIORAL HEALTH

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(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 WESTERN PSYCH INSTITUTE AND CLINIC (PUH) 300 HALKET STREET PITTSBURGH PA 15213	OUTPATIENT BEHAVIORAL HEALTH
2 WESTERN PSYCH INSTITUTE AND CLINIC (PUH) 3501 FORBES AVENUE PITTSBURGH PA 15213	OUTPATIENT BEHAVIORAL HEALTH
3 UPMC WESTERN PSYCHIATRIC HOSPITAL 2 HOT METAL STREET PITTSBURGH PA 15203	OUTPATIENT BEHAVIORAL HEALTH
4 UPMC WESTERN PSYCHIATRIC HOSPITAL 333 N BRADDOCK AVENUE PITTSBURGH PA 15208	CRISIS SERVICES
5 UPMC WESTERN PSYCHIATRIC HOSPITAL 1020 8TH AVENUE BEAVER FALLS PA 15010	CRISIS SERVICES
6 UPMC WESTERN PSYCHIATRIC HOSPITAL 501 HOWARD AVENUE ALTOONA PA 16601	CRISIS SERVICES
7 UPMC WESTERN PSYCHIATRIC HOSPITAL 500 WALNUT STREET MCKEESPORT PA 15132	CTT
8 UPMC WESTERN PSYCHIATRIC HOSPITAL 500 WALNUT STREET MCKEESPORT PA 15132	PEER
9 UPMC WESTERN PSYCHIATRIC HOSPITAL 500 WALNUT STREET MCKEESPORT PA 15132	BLENDED CASE MANAGEMENT
10 UPMC WESTERN PSYCHIATRIC HOSPITAL 331 SHAW AVENUE MCKEESPORT PA 15132	BLENDED CASE MANAGEMENT

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC WESTERN PSYCHIATRIC HOSPITAL 7165 CHURCHLAND STREET PITTSBURGH PA 15206	LTSR
2 UPMC WESTERN PSYCHIATRIC HOSPITAL 2 HOT METAL STREET PITTSBURGH PA 15203	VOCATIONAL
3 UPMC WESTERN PSYCHIATRIC HOSPITAL 2 HOT METAL STREET PITTSBURGH PA 15203	FAMILY BASED
4 UPMC WESTERN PSYCHIATRIC HOSPITAL 775 DUNSTER PITTSBURGH PA 15226	IBHS/SUMMER PROGRAMMING
5 UPMC WESTERN PSYCHIATRIC HOSPITAL 3501 FORBES PITTSBURGH PA 15213	PSYCH REHAB
6 DIAGNOSTIC CENTER - MERCER (HRZ) 737 GREENVILLE ROAD MERCER PA 16137	OUTPATIENT SERVICES
7 DIAGNOSTIC CENTER - NEW WILMINGTON (HRZ) 3438 ROUTE 208 NEW WILMINGTON PA 16142	OUTPATIENT SERVICES
8 HILLMAN CANCER CTR ONCOLOGY - NEW CASTLE 3410 WILMINGTON ROAD NEW CASTLE PA 16105	ONCOLOGY SERVICES
9 OUTPATIENT IMAGING - GREENVILLE MED CENT 90 SHENANGO STREET GREENVILLE PA 16125	IMAGING SERVICES
10 PAIN MANAGEMENT & WOUND CLINIC (HRZ) 2120 LIKENS LANE FARRELL PA 16121	OUTPATIENT SERVICES

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 REGIONAL SLEEP CENTER (HRZ) 875 N HERMITAGE ROAD HERMITAGE PA 16148	AMBULATORY SERVICES
2 SPECIALTY CARE CENTER - HERMITAGE (HRZ) 875 N HERMITAGE ROAD HERMITAGE PA 16148	OUTPATIENT SERVICES
3 REGIONAL HEALTH SERVICES 201 STATE STREET ERIE PA 16550	PHYSICIAN SERVICES
4 CLARION FAMILY PRACTICE (NWH) 22681 ROUTE 68 CLARION PA 16214	OUTPATIENT SERVICES
5 UPMC NORTHWEST 1008 SOUTH FIFTH AVENUE, STE 203 CLARION PA 16214	PHYSICIAN SERVICES
6 UPMC NORTHWEST 1310 LIBERTY STREET FRANKLIN PA 16323	OUTPATIENT SERVICES
7 UPMC NORTHWEST CTR FOR WOUND TREATMENT 6885 US HIGHWAY 322, STE 4 FRANKLIN PA 16323	OUTPATIENT SERVICES
8 UPMC NORTHWEST MRI CENTER (NWH) 1671 ALLEGHENY BLVD RENO PA 16343	IMAGING SERVICES
9 UPMC CANCER CARE 103 TRANSIT DR UNIONTOWN PA 15401	ONCOLOGY SERVICES
10 UPMC MCKEESPORT CARDIAC REHABILITATION 2001 LINCOLN WAY WHITE OAK PA 15131	OUTPATIENT SERVICES

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 CARDIAC REHAB - MAYZON (JAM) 3124 WILMINGTON AVE, STE 301 NEW CASTLE PA 16105	OUTPATIENT SERVICES
2 CHILDRENS ADVOCACY CENTER OF LAWRENCE CO 2010 WEST STATE STREET NEW CASTLE PA 16101	OUTPATIENT SERVICES
3 OUTPATIENT IMAGING - COLLEGE FIELDS (JAM) 130 ENCLAVE DRIVE NEW CASTLE PA 16101	IMAGING SERVICES
4 OUTPATIENT IMAGING - WESTGATE (JAM) 2004 WEST STATE STREET NEW CASTLE PA 16101	IMAGING SERVICES
5 PARTIAL HOSPITALIZATION BEHAVIORAL HEALT 253 E WASHINGTON ST, STE 200 NEW CASTLE PA 16101	OUTPATIENT SERVICES
6 WOMENS IMAGING CENTER - NESBITT (JAM) 26 NESBITT ROAD, 2ND FLR NEW CASTLE PA 16105	IMAGING SERVICES
7 BERLIN MEDICAL CENTER (SOM) 426 MAIN STREET BERLIN PA 15530	OUTPATIENT SERVICES
8 THE WHEELER CENTER (SOM) 126 EAST CHURCH STREET SOMERSET PA 15501	OUTPATIENT SERVICES
9 BERKLEY HILLS PROFESSIONAL CAMPUS (SOM) 322 WARREN ST, STE 160 JOHNSTOWN PA 15905	LABORATORY
10 DAVIDSVILLE FAMILY PRACTICE (SOM) 143 WOODSTOWN HIGHWAY HOLLSOPPLE PA 15935	LABORATORY

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC HILLMAN CANCER SOMERSET (SOM) 314 S KIMBERLY AVE SOMERSET PA 15501	ONCOLOGY SERVICES
2 BEHAVIORAL HEALTH-TELEMD (CCH) 11 8TH STREET COUDERSPORT PA 16915	OUTPATIENT SERVICES
3 BOWMAN HEALTH CENTER (CCH) 83 MARVIN STREET SMETHPORT PA 16749	OUTPATIENT SERVICES
4 BRADFORD SPECIALISTS (CCH) 1001 EAST MAIN STREET BRADFORD PA 16701	OUTPATIENT SERVICES
5 CENTRAL POTTER HEALTH CENTER (CCH) 46 ELK STREET COUDERSPORT PA 16915	OUTPATIENT SERVICES
6 ELDRED HEALTH CENTER (CCH) 139 MAIN STREET ELDRED PA 16371	OUTPATIENT SERVICES
7 EMPORIUM HEALTH CENTER (CCH) 288 SIZERVILLE ROAD EMPORIUM PA 15834	OUTPATIENT SERVICES
8 GALETON HEALTH CENTER (CCH) 30 RIVER STREET GALETON PA 16922	OUTPATIENT SERVICES
9 HOME HEALTH AND HOSPICE (CCH) 102-108 SOUTH MAIN ST COUDERSPORT PA 16915	OUTPATIENT SERVICES
10 NORTHERN POTTER HEALTH CENTER (CCH) 511 ACADEMY STREET ULYSSES PA 16948	OUTPATIENT SERVICES

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(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 PORT ALLEGANY HEALTH CENTER (CCH) 45 PINE STREET PORT ALLEGANY PA 16743	OUTPATIENT SERVICES
2 SHINGLEHOUSE HEALTH CENTER (CCH) 129 NORTH PURITAN STREET SHINGLEHOUSE PA 16748	OUTPATIENT SERVICES
3 WESTFIELD RURAL HEALTH CLINIC (CCH) 222 CHURCH STREET WESTFIELD PA 16950	OUTPATIENT SERVICES
4 BRADFORD SPECIALISTS 700 SOUTH AVE BRADFORD PA 16701	OUTPATIENT SERVICES
5 CENTRAL POTTER HEALTH CENTER 71 ELK STREET COUDERSPORT PA 16915	OUTPATIENT SERVICES
6 UPMC HILLMAN CANCER CENTER AT WELLSBORO 15 MEADE ST, STE L 3 WELLSBORO PA 16901	OUTPATIENT SERVICES
7 UPMC WELLSBORO MEDICAL BUILDING (WEL) 7 WATER ST WELLSBORO PA 16901	OUTPATIENT SERVICES
8 UPMC WELLSBORO OBGYN (WEL) 15 MEADE ST, STE U3 WELLSBORO PA 16901	OUTPATIENT SERVICES
9 UPMC WELLSBORO OCC HEALTH BUILDING (WEL) 25 WALNUT ST WELLSBORO PA 16901	OUTPATIENT SERVICES
10 UPMC WELLSBORO OFFICE OF FOOT AND ANKLE 103 WEST AVE, STE 202 WELLSBORO PA 16901	OUTPATIENT SERVICES

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC WELLSBORO OFFICE OF GENERAL SURGERY 1 MAIN ST WELLSBORO PA 16901	OUTPATIENT SERVICES
2 UPMC WELLSBORO OFFICE OF INTERNAL MEDICI 103 WEST AVE, STE 203 WELLSBORO PA 16901	OUTPATIENT SERVICES
3 UPMC WELLSBORO OFFICE OF ORTHOPEDICS (WE 9 WATER ST WELLSBORO PA 16901	OUTPATIENT SERVICES
4 UPMC WELLSBORO PEDIATRICS (WEL) 15 MEADE ST, STE U2 WELLSBORO PA 16901	OUTPATIENT SERVICES
5 UPMC WELLSBORO PHYSICAL THERAPY (WEL) 11893 ROUTE 6 WELLSBORO PA 16901	OUTPATIENT SERVICES
6 UPMC WELLSBORO WELLNESS CENTER (WEL) 301 E MAIN ST KNOXVILLE PA 16928	OUTPATIENT SERVICES
7 UPMC BEDFORD CHESTNUT RIDGE OFFICE 2004 QUAKER VALLEY ROAD FISHERTOWN PA 15539	PHYSICIAN SERVICES
8 UPMC BEDFORD NEW PARIS OFFICE 4186 CORTLAND DRIVE NEW PARIS PA 15554	PHYSICIAN SERVICES
9 UPMC BEDFORD ORTHOPEDICS (BDF) 249 HOSPITAL DRIVE, STE 1 EVERETT PA 15537	OUTPATIENT SERVICES
10 UPMC HAMOT MEDICAL PARK 18 W MAIN MT. JEWETT PA 16740	HOSPITAL BASED COMMUNITY CLINI

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Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC HAMOT MEDICAL PARK - JOHNSONBURG 81 CLARION ROAD JOHNSONBURG PA 15845	HOSPITAL BASED COMMUNITY CLINI
2 UPMC KANE 4355 ROUTE 6 KANE PA 16735	REHABILITATION SERVICES
3 UPMC KANE FAMILY PRACTICE 4372 ROUTE 6 KANE PA 16735	HOSPITAL BASED COMMUNITY CLINI
4 UPMC KANE SHEFFIELD MEDICAL CENTER 511 S. MAIN ST SHEFFIELD PA 16347	HOSPITAL BASED COMMUNITY CLINI
5 ADVANCED WOUND HEALING CENTER 366 ALEXANDER SPRING ROAD CARLISLE PA 17015	OUTPATIENT SERVICES
6 CARLISLE OUTPATIENT SURGERY CENTER 31 SPRINT DR CARLISLE PA 17015	SURGICAL SERVICES
7 CARLISLE REG SLEEP CTR CARLISLE 1533 COMMERCE AVE, STE 3 CARLISLE PA 17015	OUTPATIENT SERVICES
8 UPMC IMAGING SERVICES SHIPPENSBURG 127 WALNUT BOTTOM RD SHIPPENSBURG PA 17257	IMAGING SERVICES
9 HILLSIDE DIAGNOSTIC CENTER 250 FAME AVE, STE 104 HANOVER PA 17331	LAB, MRI, X-RAY, CT SCAN, US
10 THISTLE HILL PROFESSIONAL CENTER 2030 THISTLE HILL DR SPRING GROVE PA 17362	LAB & X-RAY

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(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 NEW OXFORD MEDICAL CENTER 5615 YORK RD NEW OXFORD PA 17350	LAB & X-RAY
2 YORK STREET PEDIATRIC REHAB 400 YORK ST HANOVER PA 17331	PEDIATRIC REHAB
3 TOTAL WOUND CARE CENTER 3130 GRANDVIEW RD HANOVER PA 17331	WOUND CARE, HYPERBARIS OXYGEN
4 UPMC HEART AND VASCULAR INSTITUTE 20 EXPEDITION TRAIL GETTYSBURG PA 17325	PULMONARY
5 UPMC HANOVER INFUSION CENTER 310 STOCK ST, STE 5 HANOVER PA 17331	ONCOLOGY
6 UPMC LITITZ CARDIOPULMONARY REHAB & SL 1575 HIGHLANDS DR, STE 201 LITITZ PA 17543	CARDIAC REHAB AND SLEEP
7 LANCASTER BREAST IMAGING 2170 NOLL DR, STE 200 LANCASTER PA 17603	IMAGING SERVICES
8 WOUND HEALING CENTER 90 GOOD DR, STE 101 LANCASTER PA 17603	WOUND CARE, HYPERBARIS OXYGEN
9 UPMC MEMORIAL IMAGING ACB 1703 INNOVATION DR, STE 200-300 YORK PA 17408	IMAGING SERVICES
10 UPMC MEMORIAL IMAGING GREENBRIAR 520 GREENBRIAR RD YORK PA 17404	IMAGING SERVICES

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(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC LEADER SURGERY CENTER 1703 INNOVATION DR, STE 1100 YORK PA 17408	SURGICAL SERVICES
2 UPMC MEMORIAL DIABETES EDUC ACB 1703 INNOVATION DR YORK PA 17408	OUTPATIENT SERVICES
3 PINNACLE HEALTH IMAGING/LAB AT DILLSB 1 TRINITY DR, E DILLSBURG PA 17019	IMAGING SERVICES & LAB
4 PINNACLE HEALTH IMAGING/LAB AT MILLER 1000 EVELYN DR MILLERSBURG PA 17061	IMAGING SERVICES & LAB
5 PINNACLE HEALTH IMAGING/LAB SERVICES 1025 WEST HARRISBURG PIKE MIDDLETOWN PA 17057	IMAGING SERVICES & LAB
6 UPMC IMAGING AT LEMOYNE 110 LOWTHER ST LEMOYNE PA 17043	IMAGING SERVICES
7 LEBANON VALLEY ADVANCED CARE CENTER 1251 EAST MAIN ST ANNVILLE PA 17003	OUTPATIENT SERVICES
8 UPMC PINNACLE INFUSION CENTER AT UPMC 1575 HIGHLANDS DR, STE 205 LITITZ PA 17543	OUTPATIENT SERVICES
9 UPMC HILLMAN CANCER CENTER YORK 1703 INNOVATION DR YORK PA 17408	ONCOLOGY SERVICES
10 HILLMAN CANCER CTR OF UPMC PINNACLE 2 JENNIFER CR CARLISLE PA 17015	OUTPATIENT SERVICES

Schedule H (Form 990) 2024

Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC PINNACLE PROCEDURE CENTER 2005 TECHNOLOGY PKWY MECHANICSBURG PA 17050	OUTPATIENT SERVICES
2 FREDRICKSON OUTPATIENT HEALTH CENTER 2015 TECHNOLOGY PKWY MECHANICSBURG PA 17050	OUTPATIENT SERVICES
3 UPMC HILLMAN CANCER CENTER AND PINNACLE 2020 TECHNOLOGY PKWY, STE 200 MECHANICSBURG PA 17050	OUTPATIENT SERVICES/ONCOLOGY S
4 PINNACLE HEALTH ORTENZIO CANCER CENTER 2035 TECHNOLOGY PKWY MECHANICSBURG PA 17050	ONCOLOGY SERVICES
5 BRADY MEDICAL ARTS BUILDING 205 S FRONT ST HARRISBURG PA 17104	OUTPATIENT SERVICES
6 PINNACLE HEALTH IMAGING/LAB AT SILVER 21 WATERFORD DR MECHANICSBURG PA 17050	IMAGING SERVICES & LAB
7 UPMC IMAGING SERVICES 240 GRANDVIEW AVE CAMP HILL PA 17011	IMAGING SERVICES
8 POLYCLINIC CAMPUS 2501 N 3RD ST HARRISBURG PA 17110	IMAGING SERVICES & LAB
9 PINNACLE HEALTH OLD POST ROAD 2808 OLD POST RD HARRISBURG PA 17110	IMAGING AND OUTPATIENT SERVICE
10 PINNACLE HEALTH AT BRETZ COURT 300 BRETZ COURT, STE 100 NEWPORT PA 17074	OUTPATIENT SERVICES

Schedule H (Form 990) 2024

Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 UPMC IMAGING AT HERSHEY 32 NORTHEAST DR, STE 101 HERSHEY PA 17033	IMAGING SERVICES
2 UPMC HEART AND VASCULAR INSTITUTE 360 ALEXANDER SPRING DR CARLISLE PA 17015	OUTPATIENT SERVICES
3 BLOOM DIAGNOSTIC BUILDING 4310 LONDONBERRY ROAD, STE 1A HARRISBURG PA 17109	WOUND CARE, HYPERBARIC OXYGEN
4 UPMC IMAGING AT UNION DEPOSIT 4518 UNION DEPOSIT RD HARRISBURG PA 17111	IMAGING SERVICES
5 UPMC COMMUNITY SURGERY CENTER 815 SIR THOMAS CT, STE 100 HARRISBURG PA 17109	SURGICAL SERVICES
6 PINNACLE HEALTH IMAGING/LAB SERVICES 850 WALNUT BOTTOM RD CARLISLE PA 17013	IMAGING SERVICES
7 UPMC HEART AND VASCULAR INSTITUTE 900 CENTURY DR, STE 100 MECHANICSBURG PA 17055	OUTPATIENT SERVICES
8 TRI-STATE SURGERY CENTER 95 LEONARD AVE WASHINGTON PA 15301	SURGERY CENTER
9 WILFRED R CAMERON WELLNESS CENTER 240 WELLNESS WAY WASHINGTON PA 15301	WELLNESS CENTER
10 UPMC WASHINGTON FAMILY MEDICINE CTR 95 LEONARD AVE WASHINGTON PA 15301	FAMILY MEDICINE

Schedule H (Form 990) 2024

Part V Facility Information (continued)**Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility**
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 TWH LAB & RADIOLOGY CENTER 67 EAST PIKE STREET CANONSBURG PA 15317	LAB STATIONS & OUTPATIENT RADI
2 WOUND & SKIN HEALING CENTER 208 WELLNESS WAY WASHINGTON PA 15301	OUTPATIENT OFFICE
3 UPMC WASHINGTON FAMILY MEDICINE CTR 67 EAST PIKE STREET CANONSBURG PA 15317	FAMILY MEDICINE
4 TWH LAB & RADIOLOGY CENTER 3415 MILLERS RUN ROAD CECIL PA 15321	LAB STATIONS & OUTPATIENT RADI
5 CHILDREN'S THERAPY CENTER 1000 WATERDAM PLAZA DRIVE MCMURRAY PA 15317	CHILDREN'S THERAPY
6 DIABETES EDUCATION & MANAGEMENT PROGRAM 95 LEONARD AVE WASHINGTON PA 15301	OUTPATIENT OFFICE
7 CHILDREN'S THERAPY CENTER 289 NORTH AVENUE WASHINGTON PA 15301	CHILDREN'S THERAPY
8 TWH LAB & RADIOLOGY CENTER 343 E ROY HIGHWAY WAYNESBURG PA 15370	LAB STATIONS & OUTPATIENT RADI
9 TWH LAB & RADIOLOGY CENTER 4198 WASHINGTON ROAD MCMURRAY PA 15317	LAB STATIONS & OUTPATIENT RADI
10 UPMC WASHINGTON FAMILY MEDICINE CTR 3415 MILLERS RUN ROAD CECIL PA 15321	FAMILY MEDICINE

Schedule H (Form 990) 2024

Part V Facility Information (continued)

Section D. Other Health Care Facilities That Are Not Licensed, Registered, or Similarly Recognized as a Hospital Facility
(list in order of size, from largest to smallest)

How many non-hospital health care facilities did the organization operate during the tax year? _____

Name and address	Type of facility (describe)
1 TWH LAB & RADIOLOGY CENTER 95 LEONARD AVE WASHINGTON PA 15301	LAB STATIONS & OUTPATIENT RADI
2	
3	
4	
5	
6	
7	
8	
9	
10	

Part VI Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

PART I, LINE 3C

FINANCIAL ASSISTANCE OR CHARITY CARE IS AVAILABLE FOR ELIGIBLE INDIVIDUALS WHO HAVE HEALTH CARE NEEDS AND ARE UNINSURED, UNDERINSURED, INELIGIBLE FOR GOVERNMENT PROGRAMS OR OTHERWISE UNABLE TO PAY FOR THEIR OWN CARE.

A PATIENT MAY BE DETERMINED TO HAVE FINANCIAL NEED BASED ON THE FOLLOWING:

1. INDIGENCY: IF INCOME FALLS AT OR BELOW 300% OF THE FEDERAL POVERTY GUIDELINES, THE PATIENT WILL HAVE NO FINANCIAL RESPONSIBILITY. THE PATIENT IS APPROVED FOR 100% FREE CARE.

2. LOW INCOME SLIDING SCALE: ASSISTANCE MAY BE A DISCOUNTED OR REDUCED PATIENT LIABILITY DEPENDING ON THE PATIENT'S INCOME:

A. IF THE COMBINED FAMILY INCOME IS GREATER THAN 300% AND LESS THAN OR EQUAL TO 400% OF THE FEDERAL POVERTY GUIDELINES AND UNINSURED, THE PATIENT IS ELIGIBLE FOR REDUCED CHARITY CARE. THERE WILL BE AN 90% REDUCTION IN THE PATIENT BILL. THE DISCOUNTED CHARITY CARE SCALE IS LISTED BELOW:

Part VI Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

F/S= FAMILY SIZE 2025

2025

FAMILY SIZE	CATEGORY 1 (300% FPL)	CATEGORY 2 (400% FPL)
1	\$46,950	\$62,600
2	\$63,450	\$84,600
3	\$79,950	\$106,600
4	\$96,450	\$128,600
5	\$112,950	\$150,600
6	\$129,450	\$172,600
7	\$145,950	\$194,600
8	\$162,450	\$216,600
EACH ADDITIONAL	\$16,500	\$22,000

3. FINANCIAL HARDSHIP: IF A PATIENT IS APPROVED FOR DISCOUNTED OR REDUCED CHARITY CARE AND CANNOT AFFORD TO PAY THE REMAINING BALANCE, THE PATIENT MAY BE CONSIDERED FOR FINANCIAL HARDSHIP. ASSISTANCE WILL BE PROVIDED IN THE FORM OF AN ADJUSTMENT OF CHARGES TO PREVENT THE PATIENT

Part VI Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

LIABILITY FROM EXCEEDING THE LESSER OF 15% OF FAMILY INCOME OR THE AGB.

4. MEDICAL HARDSHIP/CATASTROPHIC CARE: IF A PATIENT IS DENIED FOR FINANCIAL ASSISTANCE AND CANNOT AFFORD TO PAY THE ACCOUNT BALANCE, THE PATIENT MAY BE CONSIDERED MEDICALLY INDIGENT AND MAY BE CONSIDERED FOR MEDICAL HARDSHIP/CATASTROPHIC CARE. THE PATIENT WILL BE LIABLE TO PAY THE LESSER OF 15% OF THEIR CALCULATED HOUSEHOLD INCOME OR THE AGB TOWARDS THEIR MEDICAL BILL. THIS IS A ONE-TIME FINANCIAL ASSISTANCE ADJUSTMENT FOR EXISTING ACCOUNT BALANCES. THE REMAINING BALANCE WILL BE ADJUSTED TO FREE CARE.

PART I LINE 4

"MEDICALLY INDIGENT" MEANS PERSONS WHO THE ORGANIZATION HAS DETERMINED UNABLE TO PAY SOME OR ALL OF THEIR MEDICAL BILLS BECAUSE THEIR MEDICAL BILLS EXCEED A CERTAIN PERCENTAGE OF THEIR FAMILY HOUSEHOLD'S INCOME.

Part VI Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

PART I LINE 6A-B

UPMC PREPARES AN ANNUAL COMMUNITY BENEFITS REPORT. THE REPORT ENCOMPASSES INFORMATION FOR THE ENTIRE INTEGRATED DELIVERY AND FINANCING SYSTEM (IDFS) THAT MAKES UP THE UPMC HEALTH SYSTEM. IT IS POSTED AND AVAILABLE TO THE PUBLIC VIA THE UPMC WEBSITE, WWW.UPMC.COM.

PART I LINE 7

THE COSTING METHODOLOGY USED TO CALCULATE THE AMOUNTS REPORTED IN PART I LINE 7 IS EITHER ACTUAL COSTS DETERMINED BY GENERAL LEDGER ACCOUNTING OR A RATIO OF COSTS TO CHARGES METHOD WHERE APPLICABLE. THE METHOD EMPLOYED FOR DETERMINING THE RATIO OF COST TO CHARGES WHEN USED IS IN LINE WITH THOSE DESCRIBED IN SCHEDULE H, WORKSHEET 2, ' RATIO OF PATIENT COSTS TO CHARGES" .

Part VI Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

PART I LINE 7, COLUMN F

THE TOTAL EXPENSES REPORTED ON FORM 990 PART IX LINE 25 COLUMN A ARE INCLUSIVE OF ALL ENTITIES REPORTED WITHIN THE UPMC GROUP 990 AND INCLUDES BAD DEBT EXPENSE FOR ALL ENTITIES. THE EXPENSE USED TO CALCULATE THE PERCENT OF TOTAL EXPENSE FOR FORM 990 SCHEDULE H PART I LINE 7 COLUMN F ARE THE TOTAL EXPENSES FROM FORM 990 PART IX (VERSUS ONLY THE EXPENSES RELATED TO ENTITIES WITHIN THE UPMC GROUP WHO PROVIDE PATIENT CARE). FROM THIS TOTAL EXPENSE PER PART IX LINE 25 THE AMOUNT RELATED TO BAD DEBT EXPENSE HAS BEEN REMOVED FROM THE DENOMINATOR WHEN CALCULATING THE PERCENT OF TOTAL EXPENSE. THE TOTAL EXPENSES USED FOR THIS CALCULATION, NET OF BAD DEBT EXPENSE, IS \$29,491,224,880.

Part VI Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

PART III LINE 2

COSTING METHODOLOGY USED TO DETERMINE THE AMTS REPORTED IN PT III LINE 2

THE COSTING METHOD USED TO CALCULATE THE AMOUNTS IN SCHEDULE H PART III LINE 2 IS A RATIO OF COST TO CHARGES METHOD. DISCOUNTS AND PAYMENTS IN PATIENTS' ACCOUNTS ARE DEDUCTED BEFORE THE COST OF BAD DEBT EXPENSE IS DETERMINED. THE METHOD EMPLOYED IS IN LINE WITH THOSE DESCRIBED IN SCHEDULE H, WORKSHEET 2, "RATIO OF PATIENT COSTS TO CHARGES".

PART III LINE 3

RATIONALE FOR INCLUDING BAD DEBT AMOUNTS IN COMMUNITY BENEFIT
THE ORGANIZATION'S BAD DEBT EXPENSE CONSISTS SOLELY OF SELF-PAY PATIENTS ACCOUNTS DEEMED UNCOLLECTABLE. IT IS UPMC GROUP'S CONTENTION THAT THE COST OF BAD DEBT SHOULD BE STATED IN PART I LINE 7 OF SCHEDULE H AS THEY REPRESENT THE COSTS FOR PROVISION OF SERVICES TO PATIENTS FOR WHICH THE ENTITY HAS EXHAUSTED ALL RECOURSE FOR REIMBURSEMENT AS PERMITTED UNDER

Part VI Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

UPMC'S FINANCIAL ASSISTANCE AND BILLING AND COLLECTIONS POLICIES WHICH DO NOT PERMIT ANY EXTRAORDINARY COLLECTIONS ACTIONS AS NOTED IN PART V SECTION B. THE SERVICES PROVIDED TO PATIENTS WHO PRESENT THEMSELVES ARE PROVIDED REGARDLESS OF A PATIENT'S ABILITY TO PAY AND IS IN LINE WITH THE ORGANIZATION'S CHARITABLE MISSION AND SERVICE TO OUR COMMUNITY. THESE EXPENSES ARE INCURRED REGARDLESS OF THE EFFICIENCY OF THE PROVISION OF THE RELATED MEDICAL CARE AND ARE DEEMED TO HAVE BEEN MEDICALLY NECESSARY FOR THE PATIENT.

PART III LINE 3

PROCESS FOR REALLOCATION FROM BAD DEBT TO CHARITY CARE UPMC RECLASSIFIES BAD DEBT ACCOUNTS AS CHARITY CARE BY UTILIZING A PREDICTIVE MODEL CALLED PARO (PAYMENT ASSISTANCE RANK ORDER). PARO WAS BUILT AS A SOCIO-ECONOMIC SCORE THAT IDENTIFIES THOSE PATIENTS THAT ARE MOST LIKELY TO BE THE HIGHEST NEED OF FINANCIAL ASSISTANCE. THIS IS ACCOMPLISHED BY ANALYZING CONSUMER DATA AND ACTIVITY, COURT RECORDS, GOVERNMENT RECORDS, PROPERTY FILES, CENSUS DATA AND IRS DATA. PARO PROVIDES A SYSTEMATIC APPROACH TO

Part VI Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

FINANCIAL ASSISTANCE: " PREDICTIVE MODEL THAT ENCOMPASSES HEALTHCARE ECONOMICS AND CREDIT POLICIES;" UNIFORM ASSESSMENT MEASURE FOR EVERY PATIENT REGARDLESS OF FINANCIAL STANDING; " ACCOUNTS FOR PATIENTS THAT ARE UNRESPONSIVE, ILLITERATE, OR OTHERWISE CHALLENGED TO APPLY; " ELIMINATES BARRIER TO APPLICATION AND MEETS INCREASED PRESSURE TO PROVIDE ADDITIONAL FINANCIAL RESOURCES TO CONSUMERS; " IDENTIFY AND SUPPORT THOSE COMMUNITY NEEDS EFFORTS TO PROVIDE ASSISTANCE TO THOSE CONSUMERS IN NEED." THERE ARE TWO DATA POINTS RETURNED TO UPMC IN ORDER TO MAKE THE DECISION WHETHER THE PATIENT WOULD QUALIFY FOR CHARITY CARE. THE FIRST IS THE ESTIMATED INCOME LEVEL BASED ON THE FEDERAL POVERTY LEVEL GUIDELINES. THE SECOND IS THE PARO SCORE WHICH UTILIZES AN ALGORITHM BASED APPROACH AND RETURNS A SCORE BASED ON PERSONAL ATTRIBUTES OF THE PATIENT. DATA ELEMENTS WERE COMBINED TO CREATE TWO PRIMARY INDICATORS OF NEED, THE PARO SCORE AND THE FEDERAL POVERTY LEVEL. PARO ANALYZED OUR HISTORICAL CHARITY CARE APPROVALS TO DETERMINE OUR PARO THRESHOLD AND THE FPL THRESHOLD FOR THE HISTORICAL APPROVALS. THE APPROVED CHARITY CARE ACCOUNTS WERE COMPARED AGAINST ACCOUNTS THAT WERE IN ACTIVE ACCOUNTS RECEIVABLE. THIS WAS DONE TO DETERMINE IF THE DISTRIBUTIONS WERE SIMILAR OR IF ANY PATTERN

Part VI Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
- 5 Promotion of community health.** Provide any other information important to describing how the organization's hospital facilities or other health care facilities further its exempt purpose by promoting the health of the community (e.g., open medical staff, community board, use of surplus funds, etc.).
- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

EXISTED BASED ON THE APPROVED ACCOUNTS AND THE UNKNOWN ACCOUNTS. IF THE PATIENT'S ESTIMATED INCOME AND PARO SCORE ARE WITHIN THE SCORES IDENTIFIED BY THE CALIBRATION OF UPMC EXISTING CHARITY CARE PATIENTS, THE ACCOUNT IS RECLASSIFIED FROM BAD DEBT TO CHARITY CARE. EVERY PATIENT IS ABLE TO APPLY FOR CHARITY CARE; HOWEVER, THE AUTOMATED STRATEGY FOCUSES ON PATIENTS THAT DO NOT COMPLETE THE APPLICATIONS PROCESS. THE US DEPARTMENT OF EDUCATION ESTIMATES THAT 1 IN 5 CONSUMERS ARE FUNCTIONALLY ILLITERATE. THIS, COUPLED WITH THE LOW LEVELS OF PARTICIPATION IN TRADITIONAL BANKING METHODS, MAKES THE APPLICATION PROCESS VIRTUALLY IMPOSSIBLE FOR SOME CONSUMERS.

PART III LINE 4

THERE IS NO FOOTNOTE IN THE AUDITED FIANCIAL STATEMENTS SPECIFIC TO BAD DEBT.

Part VI Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
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- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

PART III LINE 8: COSTING METHODOLOGY USED TO DETERMINE THE MEDICARE

ALLOWABLE COSTS OF CARE

THE COSTING METHODOLOGY USED TO DETERMINE THE MEDICARE ALLOWABLE COSTS OF CARE IS A RATIO OF COSTS TO CHARGES METHOD. THE METHOD IS IN LINE WITH THOSE DESCRIBED IN SCHEDULE H, WORKSHEET 2, "RATIO OF PATIENT COSTS TO CHARGES". IT IS UPMC GROUP'S CONTENTION THAT ALL AMOUNTS CALCULATED TO BE SHORTFALLS IN REIMBURSEMENT FOR SERVICES PROVIDED TO MEDICARE PATIENTS ARE TRULY FINANCIAL ASSISTANCE THAT SHOULD BE STATED IN PART I LINE 7 OF SCHEDULE H OF FORM 990 AS COMMUNITY BENEFIT REPRESENT COSTS FOR PROVISION OF SERVICES TO PATIENTS FOR WHICH THE ENTITY IS UNABLE TO COLLECT, REGARDLESS OF THE EFFICIENCY OF PROVISION OF THE RELATED CARE COSTS.

Part VI Supplemental Information

Provide the following information.

- 1 Required descriptions.** Provide the descriptions required for Part I, lines 3c, 6a, and 7; Part II and Part III, lines 2, 3, 4, 8 and 9b.
- 2 Needs assessment.** Describe how the organization assesses the health care needs of the communities it serves, in addition to any CHNAs reported in Part V, Section B.
- 3 Patient education of eligibility for assistance.** Describe how the organization informs and educates patients and persons who may be billed for patient care about their eligibility for assistance under federal, state, or local government programs or under the organization's financial assistance policy.
- 4 Community information.** Describe the community the organization serves, taking into account the geographic area and demographic constituents it serves.
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- 6 Affiliated health care system.** If the organization is part of an affiliated health care system, describe the respective roles of the organization and its affiliates in promoting the health of the communities served.
- 7 State filing of community benefit report.** If applicable, identify all states with which the organization, or a related organization, files a community benefit report.

PART III LINE 9A AND B

UPMC HAS A DEBT COLLECTION POLICY OUTLINING CCLLECTION PRACTICES FOR PATIENTS. IF AT ANY TIME THE PATIENT EXPRESSES AN INABILITY TO PAY, THEY ARE SENT A FINANCIAL ASSISTANCE APPLICATION. INFORMATION REGARDING FINANCIAL ASSISTANCE IS PRINTED ON ALL COLLECTION LETTERS. COLLECTIONS PER POLICY DO NOT APPLY TO ACCOUNT BALANCES KNOWN TO BE ELIGIBLE FOR FINANCIAL ASSISTANCE.

PART V SECTION B LINE 16:

WWW.UPMC.COM/PATIENTS-VISITORS/PAYING-BILL/SERVICES

Part VI Supplemental Information

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PART V SECTION D LINE 1

THE UNIVERSITY OF PITTSBURGH PHYSICIANS HAD 720 CLINICAL LOCATIONS AS OF
JUNE 30, 2025.

PART V SECTION D LINE 5

UPMC COMMUNITY MEDICINE, INC. HAD 204 CLINICAL LOCATIONS AS OF JUNE 30,
2025.

PART V SECTION D LINE 8

ERIE PHYSICIAN NETWORK-UPMC INC. HAD 5 LOCATIONS AS OF JUNE 30, 2025.

Part VI Supplemental Information

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PART V SECTION D LINE 143

REGIONAL HEALTH SERVICES HAD 69 LOCATIONS AS OF JUNE 30, 2025.

PART V SECTION D LINE 1 & 8

UNIVERSITY OF PITTSBURGH PHYSICIANS, ERIE PHYSICIANS NETWORK AND UPMC
EMERGENCY MEDICINE, INC. COLLECTIVELY OPERATED 81 URGENT CARE CENTERS AS
OF JUNE 30, 2025.

PART VI LINE 3 COMMUNICATION OF FINANCIAL ASSISTANCE

UPMC COMMUNICATES THE AVAILABILITY OF FINANCIAL ASSISTANCE TO ITS
PATIENTS BY PLACING SIGNAGE AND DISTRIBUTING BROCHURES ABOUT THE
FINANCIAL ASSISTANCE PROGRAM IN ITS PROVIDER REGISTRATION AREAS,
ADMISSIONS, EMERGENCY DEPARTMENT AND BUSINESS OFFICE LOCATIONS. IN
ADDITION, UPMC INCLUDES INFORMATION REGARDING HOW A PATIENT CAN REQUEST

Part VI Supplemental Information

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COLLECTION LETTERS.

PATIENTS ALSO MAY FIND INFORMATION ABOUT FINANCIAL ASSISTANCE THROUGH ACCESS TO THE UPMC WEB SITE (WWW.UPMC.COM).

PATIENTS ARE ENCOURAGED TO CONTACT UPMC'S TRAINED FINANCIAL COUNSELORS SHOULD THEY REQUIRE ASSISTANCE WITH COMPLETING APPLICATIONS. CONTACT TELEPHONE NUMBERS ARE POSTED STRATEGICALLY THROUGHOUT THE HOSPITAL FACILITIES SO THAT PATIENTS HAVE A RESOURCE FOR OBTAINING SUPPORT WITH ANY FINANCIAL ASSISTANCE QUESTIONS THEY MAY HAVE.

UPMC HAS CREATED A PLAIN LANGUAGE SUMMARY (PLS) TO EXPLAIN, IN SIMPLIFIED TERMS, OUR FINANCIAL ASSISTANCE POLICY (FAP). THIS SUMMARY IS PRINTED AT ALL SAME DAY SURGERY, ER AND INPATIENT LOCATIONS AND GIVEN TO THE PATIENT UPON DISCHARGE. UPMC HAS ALSO TRANSLATED THE PLS, FAP, COLLECTION AND BILLING POLICY, AND FAP APPLICATION INTO THE FOLLOWING LANGUAGES: ARABIC, CHINESE, FRENCH, ITALIAN, NEPALI, RUSSIAN, SPANISH AND BRAILLE. THE DETERMINATION OF LANGUAGES FOR TRANSLATION OF DOCUMENTS WAS DETERMINED BY A STUDY OF ENGLISH PROFICIENCY IN THE COMMUNITIES SERVED AND REVIEW OF PREDOMINANT NATIVE LANGUAGES IN THOSE COMMUNITIES AS PRESCRIBED IN IRC SECTION 501(R). THE PLS IS AVAILABLE ON THE UPMC WEBSITE.

Part VI Supplemental Information

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UPMC WILL NOTIFY ALL PATIENTS APPROVED VIA PRESUMPTIVE ELIGIBILITY IF NOT RECEIVING THE HIGHEST LEVEL OF ASSISTANCE. A LETTER INFORMING THE PATIENT THAT THEY MAY QUALIFY FOR A HIGHER LEVEL AND A FINANCIAL ASSISTANCE APPLICATION WILL BE SENT TO THE PATIENT UPON DETERMINATION.

UPMC HAS WIDELY PUBLICIZED OUR FINANCIAL ASSISTANCE POLICY. UPMC HAS WORKED WITH HOSPITAL LEADERS AND COMMUNITY LIAISONS TO DETERMINE THE MOST APPROPRIATE NON-HEALTHCARE LOCATIONS TO REACH THE POPULATIONS THAT WILL BENEFIT FROM OUR FINANCIAL ASSISTANCE. UPMC HAS PROACTIVELY REACHED OUT IN THESE COMMUNITIES TO WIDELY PUBLICIZE OUR FINANCIAL ASSISTANCE POLICY.

FINALLY, UPMC WILL NOW ONLY INCLUDE PATIENT BALANCES FROM ONE YEAR PRIOR TO THE PATIENT'S FINANCIAL ASSISTANCE APPROVAL DATE. AS A RESULT, UPMC WILL ALSO REFUND ANY PATIENT PAYMENTS MADE WITHIN THAT YEAR OF THE PATIENT'S FINANCIAL ASSISTANCE APPROVAL DATE, APPROVED VIA AN APPLICATION.

Part VI Supplemental Information

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PART VI LINES 2, 4, 5, AND 6

UPMC SUPPORTS NUMEROUS COMMUNITY-BUILDING ACTIVITIES THROUGH ALL OF ITS SYSTEM ENTITIES, NOT JUST THOSE ENTITIES REPORTED WITHIN THE UPMC GROUP 990. AS THE LARGEST NONGOVERNMENTAL EMPLOYER IN PENNSYLVANIA, UPMC'S SYSTEMWIDE OPERATIONS GENERATED A TOTAL ANNUAL ECONOMIC IMPACT OF \$55 BILLION. UPMC ALSO SUPPORTS MUNICIPALITIES, CCUNTIES, AND THE COMMONWEALTH THROUGH APPROXIMATELY \$592 MILLICN IN TAXES.

OVER THE PAST DECADE, UPMC HAS PROVIDED A WIDE VARIETY OF BENEFITS TO THE COMMUNITIES IT SERVES. WORKING IN WAYS BOTH LARGE AND SMALL, UPMC HAS IMPLEMENTED INITIATIVES THAT CONTINUE TO ENHANCE THE HEALTH OF COMMUNITIES THROUGHOUT PENNSYLVANIA AND BEYOND.

AS AN INTEGRATED DELIVERY AND FINANCING SYSTEM (IDFS), UPMC CONTINUES TO APPLY THE EXPERTISE THAT EXISTS WITHIN ITS ORGANIZATION TO IMPROVE THE DELIVERY OF HEALTH CARE. UPMC LEVERAGES ITS IDFS STRUCTURE - WHICH EMBRACES ITS HOSPITALS, ITS INSURANCE INFRASTRUCTURE, AND ITS COMMUNITY PROVIDERS - TO ALIGN INCENTIVES AND IMPROVE MEDICAL PRACTICE THROUGHOUT THE REGION. THE RESULT IS AN EXCEPTIONAL SYNERGY BETWEEN INSURANCE,

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HEALTH CARE PROVIDERS, PATIENTS, AND LOCAL COMMUNITIES.

MANY OF UPMC'S COMMUNITY BENEFIT ACTIVITIES ARE DIFFICULT TO QUANTIFY OR REPORT WITHIN THE VARIOUS COMMUNITY BENEFIT CATEGORIES OF SCHEDULE H, AS THEY OCCUR SYSTEMWIDE THROUGH UPMC AND ARE NOT CAPTURED AT THE INDIVIDUAL HOSPITAL ENTITY LEVEL. NONETHELESS, THEY ARE IMPORTANT COMPONENTS IN UPMC'S COMMITMENT TO THE COMMUNITY. SOME OF THESE INITIATIVES INCLUDE:

ECONOMIC DEVELOPMENT: UPMC STIMULATES THE ECONOMY THROUGH DIRECT HIRING, AND BY BRINGING OUTSIDE DOLLARS INTO THE REGION; THE ORGANIZATION'S CAPITAL SPENDING CREATES CONSTRUCTION JOBS DOWNSTREAM. IN ADDITION, UPMC HAS A NUMBER OF PROGRAMS AND INITIATIVES DESIGNED TO FOSTER A PRODUCTIVE AND EQUITABLE ECONOMY. A KEY COMPONENT IN THE ORGANIZATION'S ECONOMIC DEVELOPMENT STRATEGY IS SUPPLY CHAIN'S OPPORTUNITY AND INCLUSION PROGRAM, WHICH IS AN INTEGRAL PART OF UPMC'S OVERALL SUPPLY CHAIN MANAGEMENT STRATEGY DESIGNED TO ENSURE THAT ALL ARE PROVIDED WITH MAXIMUM OPPORTUNITIES TO PARTICIPATE AS PARTNERS AND SUPPLIERS OF GOODS AND SERVICES. UPMC'S SUPPLIER OPPORTUNITY AND INCLUSION PROGRAM FOSTERS DEVELOPMENT OF THESE FIRMS TO ENHANCE THEIR COMPETITIVENESS AND SUSTAINABILITY. UPMC'S SPEND ON SUPPORTING BUSINESSES INCLUDED IN THE

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SUPPLIER OPPORTUNITY AND INCLUSION PROGRAM WAS \$333 MILLION IN 2025.

UPMC WORKS CLOSELY WITH REGIONAL PARTNERS (INCLUDING THE UNIVERSITY OF PITTSBURGH AND CARNEGIE MELLON UNIVERSITY), AS WELL AS WITH INDUSTRY LEADERS AND INVESTORS WORLDWIDE, TO BUILD A PITTSBURGH-BASED ECOSYSTEM FOR BOTH DIGITAL HEALTH AND LIFE SCIENCES COMPANIES TO DRIVE COMMERCIALIZATION OF TECHNOLOGIES DISCOVERED LOCALLY BUT WITH THE POTENTIAL TO DRIVE BETTER HEALTH CARE OUTCOMES GLOBALLY. THE IMPACT OF UPMC'S INVESTMENT AND EFFORT IS MEANINGFUL, BOTH IN TERMS OF THE QUALITY AND DEPTH OF THE REGION'S DIGITAL HEALTH AND LIFE SCIENCES ECOSYSTEM AND IN TERMS OF THE REGION'S BROADER COMPETITIVE POTENTIAL. EXAMPLES OF THIS IMPACT INCLUDE: EIGHT NEW RESEARCH DISCOVERY AND DEVELOPMENT PROJECTS UNDERWAY WITH THE UNIVERSITY OF PITTSBURGH IN THE LAST YEAR; FIVE PITTSBURGH-BASED LIFE SCIENCES STARTUP COMPANIES, WITH TWO EITHER IN OR APPROACHING CLINICAL TRIALS; MORE THAN 40 COMMERCIALY-FOCUSED DIGITAL HEALTH AND LIFE SCIENCES RESEARCH AND DISCOVERY PROJECTS; ENGAGEMENT FROM LIFE SCIENCES INDUSTRY LEADERS FROM ACROSS THE GLOBE AS THOUGHT LEADERS TOWARD DEVELOPING A PITTSBURGH-BASED LIFE SCIENCES ECOSYSTEM; ANNUAL "TOP OF MIND" SUMMITS DRAWING DIGITAL HEALTH AND LIFE SCIENCES EXECUTIVES FROM

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ACROSS THE COUNTRY TO PITTSBURGH TO DISCUSS EMERGING TOPICS IN HEALTH CARE; AND HUNDREDS OF LIFE SCIENCES AND TECHNOLOGY INNOVATION JOBS IN PITTSBURGH.

ENVIRONMENTAL IMPROVEMENTS: UPMC PURSUES A POLICY OF ENVIRONMENTAL RESPONSIBILITY THAT REDUCES ITS ENVIRONMENTAL FOOTPRINT, WHILE SUPPORTING THE GROWTH AND DEVELOPMENT OF THE ORGANIZATION AND ITS SURROUNDING COMMUNITIES. IN 2023, UPMC CREATED THE CENTER FOR SUSTAINABILITY, A DEDICATED TEAM THAT IS LEADING SYSTEMWIDE EFFORTS AND EXPANDING ENVIRONMENTAL EDUCATION AND AWARENESS TO STAFF, PATIENTS, AND VISITORS. UPMC'S NEW CONSTRUCTION AND REMODELING POLICY ENSURES THAT ALL BUILDING PROJECTS MEET QUALIFICATIONS FOR LEED CERTIFICATION. THE MERCY PAVILION SHOWCASES A HOSPITAL BUILT FOR RESILIENCY, INCLUDING A ROOFTOP GARDEN TERRACE THAT EMPHASIZES THE IMPORTANCE OF GREEN SPACES, HIGH ENERGY EFFICIENCY HEATING/COOLING MECHANICAL SYSTEMS, LIGHTING SENSORS, REFLECTIVE WINDOWS, AND OTHER SUSTAINABLE BUILDING MATERIAL SELECTIONS. THE UPMC MERCY PAVILION OPENED ON MAY 1, 2023, AND IS SLATED TO RECEIVE SILVER LEED STATUS. UPMC EAST ACHIEVED SILVER LEED STATUS.

IN 2024, UPMC NORTHWEST WAS ONE OF TWENTY-ONE HOSPITALS ACROSS THE

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COUNTRY TO RECEIVE THE ENERGY TO CARE SUSTAINABILITY CHAMPION AWARD.

HIGHLIGHTS OF THE AWARD INCLUDE WORK THAT WAS INITIATED IN 2020 AND 2021

ON RECOMMISSIONING AIR HANDLING UNITS, CHILLER PLANT OPTIMIZATION,

IMPLEMENTATION OF PUMP VARIABLE FREQUENCY DRIVES, RECOMMISSIONING A ROOF

TOP GEOTHERMAL UNIT, EXTERIOR LED UPGRADES, AND KITCHEN HOOD DEMAND

VENTILATION INSTALLATION. ALL THE PROJECTS TARGETED REDUCED ANNUAL

EMISSIONS AND ENERGY USAGE INTENSITY.

MANY OF UPMC'S FACILITIES INCLUDE HEALING GARDENS FOR PATIENTS, FAMILIES,

AND EMPLOYEES; THESE SPACES HELP TO ENHANCE THE PATIENT EXPERIENCE. AT

SEVERAL UPMC HOSPITALS, HEALING GARDENS ARE TRANSFORMING TO INCORPORATE

PRACTICAL PRODUCTIVITY BY GROWING VEGETABLES AND HERBS ONSITE AND USING

THEM IN FOOD PREPARATION. BEEHIVES WERE ADDED AT THREE UPMC HOSPITALS TO

SUPPORT THE LOCAL ECOSYSTEM, AS WELL AS TO PRODUCE HONEY THAT IS USED IN

SEASONAL RECIPES ONSITE. UPMC ALSO PROVIDES EDUCATION ON HEALTHY FOODS

AND NUTRITION TO FAMILIES, WITH A FOCUS ON LOW-INCOME AND MINORITY

COMMUNITIES USING VEGETABLES AND HERBS GROWN IN ON-CAMPUS GARDENS. TO

EARN HIGHER LEVELS OF SUSTAINABLE RESTAURANT PERFORMANCE CERTIFICATION,

UPMC CAFETERIAS CONTINUED PROCESS IMPROVEMENT INITIATIVES THAT FOCUS ON

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FOOD WASTE REDUCTION, LOCALIZED PURCHASING, COMPOSTING, RECYCLING, AND ENERGY AND WATER CONSERVATION. TWELVE UPMC HOSPITALS SIGNED ONTO THE WORLD RESOURCE INSTITUTE'S COOL FOOD PLEDGE TO TARGET THE REDUCTION OF GREENHOUSE GAS (GHG) EMISSIONS ASSOCIATED WITH THE SELECTION OF FOOD CHOICES OFFERED, REDUCING SUPPLY CHAIN GHG AND PROMOTING HEALTHY FOOD SELECTIONS THROUGH SIGNAGE AND EDUCATION WITHIN CAFETERIAS, FOOD VENDOR STATIONS, AND CATERING SERVICES.

UPMC'S GREENING INITIATIVES INCLUDE SUPPORT FOR COMMUNITY DEVELOPMENT AND COMMUNITY COLLABORATION. IN ERIE, PENNSYLVANIA, UPMC HAMOT HEALTH FOUNDATION CONTINUES TO HELP FUND THE REHABILITATION OF AN OLD SCHOOL BUILDING IN AN UNDERSERVED NEIGHBORHOOD, TRANSFORMING IT INTO A COMMUNITY HUB AND HOME FOR THE UPMC JAMESON SCHOOL OF NURSING AT UPMC HAMOT, THE UNITED WAY OF ERIE COUNTY, WAYNE PRIMARY CARE, AND THE ERIE CENTER FOR ARTS AND TECHNOLOGY. IN ADDITION, UPMC PARTICIPATES IN THE NEIGHBORHOOD ASSISTANCE PROGRAM AND IS ENGAGED IN PROJECTS TO ENHANCE COMMUNITY SPACES WITH PEDESTRIAN LIGHTING, COMFORTABLE SEATING, AND VENUES FOR OUTDOOR FAIRS, CULTURAL EVENTS, AND OTHER ACTIVITIES.

UPMC PRESBYTERIAN SHADYSIDE AND UPMC CHILDREN'S HOSPITAL CONTINUED TO

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COLLABORATE WITH TREE PITTSBURGH TO ENABLE EMPLOYEES TO PLANT JUVENILE TREES AT THEIR HOMES WITH THE INTENT OF INCREASING THE TREE CANOPY IN ALLEGHENY COUNTY, PENNSYLVANIA. BETWEEN 2020 AND 2025, A TOTAL OF 1,809 TREES HAVE BEEN PLANTED. UPMC CONTINUES TO SUPPORT ORGANIZATIONS THAT FOCUS ON COMMUNITY AESTHETICS, AND MAINTAINS MAJOR SPONSORSHIP ROLES WITH SERVICE PROVIDERS, INCLUDING WESTMORELAND COUNTY PARKS AND RECREATION, WESTERN PENNSYLVANIA CONSERVANCY, PITTSBURGH PARKS CONSERVANCY, AND OAKLAND BUSINESS IMPROVEMENT DISTRICT. UPMC ALSO CONTINUED TO SPONSOR BIKE PITTSBURGH'S OPEN STREETS INITIATIVE, WHICH CLOSES MAIN THOROUGHFARES TO CAR TRAFFIC IN A FEW OF PITTSBURGH'S NEIGHBORHOODS DURING THE SUMMER MONTHS. THESE EVENTS PROMOTE BIKING, WALKING, AND SUPPORTING LOCAL BUSINESSES THROUGH A DIFFERENT LENS AND HAVE BECOME INCREASINGLY POPULAR WITH CITY RESIDENTS AND BUSINESS OWNERS.

UPMC IS COMMITTED TO BUILDING AND MAINTAINING ENERGY EFFICIENT FACILITIES THAT SUPPORT WORKPLACE WELLNESS. UPMC ACTIVELY PARTICIPATES IN THE U.S. DEPARTMENT OF ENERGY'S BETTER BUILDING CHALLENGE, AND SHARES CREATIVE ENERGY SAVING STRATEGIES WITH OTHER ORGANIZATIONS. UPMC PARTICIPATES IN THE GREEN BUILDING ALLIANCE'S PITTSBURGH 2030 DISTRICT INITIATIVES, AND

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THE ERIE 2030 DISTRICT INITIATIVE, AS WELL AS THE NEWLY FORMING NEW KENSINGTON 2030 DISTRICT. UPMC ALSO CONTINUES TO SHARE LESSONS LEARNED AND INDUSTRY-BASED BEST PRACTICES WITH OTHER REGIONAL ORGANIZATIONS THAT ARE INCORPORATING SUSTAINABILITY INTO THEIR OPERATIONS. STAFF CONTINUE TO SERVE ON REGIONAL AND STATE PLANNING COMMITTEES, ADVOCATING FOR EXPANDED IMPLEMENTATION OF LOCAL POLICIES THAT POSITIVELY AFFECT HEALTH. UPMC IS A PARTICIPATING MEMBER OF THE OAKLAND ENERGY MASTER PLAN, A COORDINATED EFFORT TO REVIEW ENERGY NEEDS WITH KEY STAKEHOLDERS - INCLUDING ACADEMIA, INDUSTRY, RESIDENTIAL, CULTURAL AND NON-PROFITS. THE PLAN AIMS TO DEVELOP AND ADOPT CLEANER ENERGY FORMS USING INNOVATION AND TECHNOLOGY. ADDITIONALLY, UPMC JOINED A WHITE HOUSE INITIATIVE THAT INCLUDES A PLEDGE TO CUT GREENHOUSE GAS EMISSIONS BY 50 PERCENT BY 2030 AND BE CARBON NEUTRAL BY 2050. SEVERAL HOSPITALS ARE PRACTICE GREENHEALTH MEMBERS, JOINING THE NATION-WIDE COHORT OF HEALTH SYSTEMS WORKING TO DECARBONIZE AND TO STRENGTHEN COMMUNITY RESILIENCY, THROUGH THE SHARING OF BEST PRACTICES AND GATHERING OPERATIONAL DATA TO TRACK PROGRESS AND OPPORTUNITY. UPMC EMPLOYS ENVIRONMENTALLY CONSCIOUS MATERIALS MANAGEMENT PRACTICES

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ACROSS THE ORGANIZATION. BY PURCHASING LOCALLY AS FREQUENTLY AS POSSIBLE, UPMC REDUCES ASSOCIATED LOGISTICS IMPACTS ON THE ENVIRONMENT. AS A MEMBER OF THE HEALTHCARE ANCHOR NETWORK, UPMC IS COMMITTED TO FURTHER BOLSTER PURCHASES FROM LOCAL AND DIVERSE PRODUCERS.

UPMC'S MATERIALS MANAGEMENT DEPARTMENT USES CLEAN DIESEL TRANSPORT TRUCKS TO REDUCE AIR QUALITY IMPACT. UPMC ALSO OPERATES 58 COMPRESSED NATURAL GAS (CNG) SHUTTLE BUSES THAT TRAVEL NEARLY 600 THOUSAND MILES ANNUALLY AND TRANSPORT MORE THAN ONE MILLION PASSENGERS. SINCE DEPLOYING THESE VEHICLES IN 2012, UPMC DECREASED DIESEL FUEL USAGE BY 1.1 MILLION GALLONS AND ELIMINATED 9,700 METRIC TONS OF CARBON DIOXIDE FROM ENTERING THE ATMOSPHERE. IN SEPTEMBER 2024, UPMC BEGAN POWERING SHUTTLES WITH LANDFILL NATURAL GAS. UPMC PARTNERED WITH VOGEL TO CREATE A NATURAL GAS REFILL STATION AT THE SOUTHSIDE DISTRIBUTION CENTER FOR UPMC'S OAKLAND SHUTTLE BUSES THAT USE NATURAL GAS. THIS FILL STATION WENT LIVE IN MID-SEPTEMBER 2024, ADDING ANOTHER LEVEL OF SUSTAINABILITY, AS THE FUEL IS NOW SOURCED FROM THE LANDFILL. AS PART OF UPMC'S ELECTRIC VEHICLE STRATEGIC PLAN, BY 2027 ALL OF UPMC'S HOSPITALS WILL HAVE ACCESS TO CHARGING STATIONS. AT THE END OF 2024, 123 ELECTRIC VEHICLE CHARGING STATIONS WERE AVAILABLE TO

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STAFF, PATIENTS, VISITORS, AND COMMUNITY MEMBERS. UPMC RECYCLES PACKAGING AT ITS WAREHOUSES, AND REUSES FURNITURE ACROSS THE SYSTEM. A GROWING PARTNERSHIP WITH STRYKER, CARDINAL HEALTH, AND MEDLINE'S MEDICAL DEVICE REPROCESSING SERVICE HAS DIVERTED MORE THAN 161,000 POUNDS OF WASTE FROM LANDFILLS AND REDUCED EMISSIONS BY 1,366 METRIC TONS. UPMC SHARES INSIGHTS WITH ITS SUPPLIERS ABOUT ITS COMMITMENT TO SUSTAINABILITY, AND TRACKS WHICH SUPPLIERS ARE ALIGNING WITH THESE PRINCIPLES AND PRACTICES. UPMC ALSO CONTINUES TO WORK WITH SURPLUS MATERIAL SUPPLY REDISTRIBUTION NONPROFITS, SUCH AS GLOBAL LINKS, BROTHER'S BROTHER FOUNDATION, AND WITH SEVERAL INTERNATIONAL LIONS CLUBS THROUGH THE UPMC HORIZON MEDICAL EQUIPMENT RECYCLING PROGRAM (MERP), TO RECYCLE MEDICAL SUPPLIES AND OTHER EQUIPMENT, BOTH LOCALLY AND ABROAD. UPMC FILES AN ANNUAL RECYCLING REPORT TO THE COMMONWEALTH OF PENNSYLVANIA. IN 2024, 4.2 MILLION POUNDS OF RECYCLABLE MATERIALS WERE DIVERTED FROM LANDFILLS. MORE THAN 20 DIFFERENT MATERIALS ARE RECYCLED INCLUDING PLASTICS, CARDBOARD, PAPER, COOKING OIL, BATTERIES, AND LIGHT BULBS. UPMC KITCHENS REGULARLY DONATE EXCESS FOOD TO LOCAL RESCUE OPERATIONS, SUCH AS THE GREATER PITTSBURGH COMMUNITY FOOD BANK, 412 FOOD RESCUE, AND PITT HEROS. PITT HEROS PROVIDES

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FOOD TO COLLEGE STUDENTS THAT ARE FOOD INSECURE. A TOTAL OF 95,822 POUNDS OF FOOD WERE DONATED IN 2024. AT UPMC MERCY, UPMC SHADYSIDE, AND UPMC PRESBYTERIAN, HIGH-RISK PATIENTS ARE PROVIDED NUTRITIOUS FROZEN MEALS THAT THEY ARE ABLE TO TAKE HOME AT DISCHARGE. THIS PROGRAM FOCUSES ON A WHOLISTIC APPROACH THAT FOOD IS MEDICINE. BY FREEZING FOOD AND REDISTRIBUTING THE FOOD, NO FOOD IS WASTED. A NUMBER OF KITCHENS ARE ALSO PILOTING A FOOD WASTE COMPOSTING PROGRAM, WITH FOUR LOCATIONS TO DATE DIVERTING MORE THAN 17 TONS OF FOOD WASTE FROM LANDFILLS.

UPMC SUPPORTS ACTIVE TRANSPORTATION INITIATIVES TO PROMOTE HEALTHY LIFESTYLES. IN PITTSBURGH, PENNSYLVANIA, UPMC SUPPORTED THE LAWRENCEVILLE CORPORATION'S INITIATIVE TO ADVANCE A SAFE AND SUSTAINABLE TRANSPORTATION INFRASTRUCTURE THAT HELPS ENSURE AN EFFICIENCY OF MOVEMENT, PROVIDES A DIVERSITY OF TRAVEL OPTIONS, AND INVITES PEDESTRIAN ACTIVITY. STREET CALMING TECHNIQUES WILL PROVIDE PHYSICAL CUES TO SLOW TRAFFIC AND ENCOURAGE PEDESTRIAN ACTIVITY.

DEMONSTRATING REGIONAL STEWARDSHIP, UPMC ACTIVELY COLLABORATES IN COMMUNITY-BASED INITIATIVES. UPMC COSPONSORED COMMUNITY-BASED HOUSEHOLD HAZARDOUS WASTE AND HAS PLACED DRUG TAKE BACK BOXES AT SEVERAL UPMC

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HOSPITALS TO GIVE FULL ACCESS FOR SAFE DISPOSAL OF UNUSED MEDICATIONS YEAR-ROUND. PATIENTS, AS WELL AS ALL COMMUNITY MEMBERS, HAVE ACCESS TO THE BOXES AS THEY ARE CONVENIENTLY PLACED IN ENTRANCE AREAS FOR GOOD VISIBILITY AND FULL ACCESS..

LEADERSHIP AND WORKFORCE DEVELOPMENT: IN FISCAL YEAR 2025, UPMC SUPPORTED NUMEROUS PROJECTS TO DEVELOP THE REGIONAL WORKFORCE AND ASSIST INDIVIDUALS IN OBTAINING AND RETAINING QUALITY EMPLOYMENT. UPMC HAS UNDERTAKEN SEVERAL PROGRAMS TO HELP TRAIN INDIVIDUALS FROM POPULATIONS WITH SIGNIFICANT BARRIERS TO EMPLOYMENT TO GAIN AND KEEP JOBS IN THE HEALTH CARE SECTOR.

UPMC PROJECT SEARCH IS DESIGNED TO COMBINE EDUCATION AND WORK EXPERIENCE IN AN EFFORT TO PREPARE STUDENTS WITH DISABILITES FOR COMPETITIVE, INTEGRATED EMPLOYMENT. TRAINING FOCUSES ON WORKPLACE SAFETY, TECHNOLOGY, SELF ADVOCACY, HEALTH AND WELLNESS, COMMUNICATION AND INTERVIEWING SKILLS, FINANCIAL LITERACY, AND EMPLOYMENT READINESS. THE GOAL OF PROJECT SEARCH IS TO ACHIEVE COMPETITIVE, INTEGRATED EMPLOYMENT. FOUR UPMC HOSPITALS ARE PROJECT SEARCH SITES - UPMC HAMCT, UPMC JAMESON, UPMC MERCY, AND UPMC CHAUTAUQUA. COLLABORATIONS WITH LOCAL ORGANIZATIONS

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INCLUDE GOODWILL OF SOUTHWESTERN PA, THE PENNSYLVANIA OFFICE OF VOCATIONAL REHABILITATION (OVR), THE ALLEGHENY COUNTY OFFICE OF DEVELOPMENTAL SUPPORTS, LAWRENCE COUNTY MENTAL HEALTH AND DEVELOPMENT SERVICES, ERIE COUNTY DEPARTMENT OF HUMAN SERVICES, CRAY YOUTH AND FAMILY SERVICES, ST. MICHAEL'S HARBOUR, VOCATIONAL AND PSYCHOLOGICAL SERVICES, AND MULTIPLE SCHOOL DISTRICTS. UPMC CHAUTAUQUA IS IN ITS SECOND YEAR OF OFFERING PROJECT SEARCH. TO DATE, 64 PROJECT SEARCH INTERNS HAVE BEEN HIRED AT UPMC HAMOT. UPMC JAMESON HAS HIRED NINE PROJECT SEARCH INTERNS OVER THE YEARS, AND ONE INTERN WAS HIRED AT UPMC HORIZON. FOR THE 2024-2025 YEAR, SIX INTERNS SUCCESSFULLY COMPLETED THE PROJECT SEARCH PROGRAM AT UPMC MERCY AND HAVE OBTAINED COMPETITIVE EMPLOYMENT. IN ADDITION, UPMC HAMOT IS PARTNERING WITH THE EAGLE'S NEST LEADERSHIP CORPORATION IN ERIE, PENNSYLVANIA, TO PLACE PROSPECTIVE EMPLOYEES FROM UNDERREPRESENTED POPULATIONS. THE TRAINING FOCUSES ON BUILDING COMMUNICATION SKILLS, FINANCIAL LITERACY, EMPLOYMENT READINESS, AND INTERVIEWING SKILLS. SUCCESSFUL CANDIDATES ARE PLACED IN PERMANENT JOBS; TO DATE, 157 EAGLE'S NEST CANDIDATES HAVE BEEN HIRED AT UPMC HAMOT. UPMC CELEBRATES NATIONAL DISABILITY EMPLOYMENT AWARENESS MONTH BY RECOGNIZING

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THE TALENTS AND CONTRIBUTIONS OF EMPLOYEES WITH DISABILITIES. UPMC ALSO PARTICIPATES IN NATIONAL DISABILITY MENTORING DAY THROUGHOUT WESTERN PENNSYLVANIA TO PROMOTE ACADEMIC SUCCESS, PERSONAL GROWTH, AND GOOD DECISION-MAKING FOR HIGH SCHOOL STUDENTS.

IN JUNE 2022, UPMC BROKE GROUND FOR THE UPMC PRESBYTERIAN EXPANSION PROJECT, WHICH IS SCHEDULED TO BE COMPLETED IN LATE 2026. IN CONJUNCTION WITH THE PROJECT, A SUB-COMMITTEE WAS CREATED TO ENSURE ALL SMALL AND DISADVANTAGED BUSINESSES HAD THE OPPORTUNITY TO PARTICIPATE AND TO INTRODUCE THE COMMUNITY TO THE SERVICES AVAILABLE VIA UPMC AND ITS COMMUNITY PARTNERS. UPMC STRATEGICALLY PARTNERED WITH THE MASTER BUILDERS' ASSOCIATION, RIVERSIDE CENTER FOR INNOVATION, PARTNER4WORK, THE TRADE INSTITUTE OF PITTSBURGH, LOCAL TRADE UNIONS, HIGH SCHOOLS, LOCAL UNIVERSITIES, AND A VARIETY OF COMMUNITY ORGANIZATIONS TO HELP ENSURE THE SUCCESS AND IMPACT OF THIS EFFORT. THESE PROGRAMS ARE PROMOTED THROUGH THE CONSTRUCTION AND COMMUNITY RESOURCE CENTER (CCRC), WHICH IS LOCATED IN OAKLAND AND SERVES AS THE "FRONT DOOR" FOR THE PROJECT AND ITS OPPORTUNITIES. INTERNAL AND EXTERNAL STAKEHOLDERS AND UPMC'S COMMUNITY PARTNERS UTILIZE THE CCRC TO PROMOTE CAREER OPPORTUNITIES FOR BOTH YOUTH

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AND ADULTS SEEKING NEW EMPLOYMENT OR CAREER CHANGES, WORKSHOPS FOR SCIENCE, TECHNOLOGY, ENGINEERING, ARTS, AND MATHEMATICS (STEAM) EDUCATORS, WORKFORCE DEVELOPMENT EVENTS, AND SUPPORTIVE SERVICES FOR SMALL AND DIVERSE BUSINESSES. UPMC'S WORKPLACE CULTURE AND COMMUNITY ENGAGEMENT SUB-COMMITTEE ANNUALLY AWARDS SCHOLARSHIPS TO VARIOUS ORGANIZATIONS THAT WILL DIRECTLY HELP TO REDUCE HURDLES RELATED TO WORKFORCE DEVELOPMENT, EDUCATION, AND TRAINING OPPORTUNITIES.

UPMC PARTNERS WITH PITTSBURGH'S ENERGY INNOVATION CENTER (EIC) TO RECRUIT CANDIDATES FROM THE COMMUNITY, OFTEN WITH BARRIERS TO EMPLOYMENT, TO PROVIDE A HANDS-ON APPLICATION, INTERVIEW, AND ONBOARDING PROCESS FOR A FOUR-WEEK TRAINING PROGRAM IN ENVIRONMENTAL SERVICES. THE EIC ALSO OFFERS A THREE-DAY TRAINING PROGRAM FOR NEWLY HIRED NURSING ASSISTANTS AND PATIENT CARE TECHNICIANS.

UPMC PARTNERED WITH SCHOOLS, COLLEGES, AND COMMUNITY ORGANIZATIONS ACROSS CENTRAL, NORTH CENTRAL, NORTHWEST/WESTERN NEW YORK, SOUTHWEST, AND WEST CENTRAL PENNSYLVANIA TO EDUCATE, ENGAGE, AND ENCOURAGE STUDENTS TO PURSUE CAREERS IN HEALTH CARE. THROUGH CAREER FAIRS, MOCK INTERVIEWS, JOB SHADOWING, TOURS, AND SPECIALIZED LEARNING EXPERIENCES, STUDENTS GAINED

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EARLY EXPOSURE TO HEALTH CARE ROLES AND CONNECTIONS TO EMPLOYMENT

OPPORTUNITIES AT UPMC.

UPMC CONTINUES TO INVEST IN BUILDING A STRONG WORKFORCE PIPELINE THROUGH

REGIONAL INITIATIVES SPANNING MIDDLE SCHOOL TO POST-SECONDARY LEVELS.

THESE INCLUDE THE FUTURE HEALTH CARE PROFESSIONALS SIX-WEEK SUMMER

PROGRAM AT UPMC MAGEE, THE 18-WEEK HIGH SCHOOL CO-OP PROGRAM IN NORTH

CENTRAL PENNSYLVANIA, THE UNLOCKING POTENTIAL WORKFORCE IMMERSION PROGRAM

IN CENTRAL PENNSYLVANIA, THE JUNIOR SCHOLARS AND HEALTH CARE EXPLORERS

PROGRAMS IN NORTHWEST PENNSYLVANIA AND WESTERN NEW YORK, AND THE JUNIOR

HEALTH CARE EXPLORERS (JHCE) PROGRAM-A STEM-FOCUSED VIRTUAL EXPERIENCE

THAT ENGAGES STUDENTS ACROSS UPMC'S FOOTPRINT.

UPMC PARTNERED WITH MORE THAN 250 SCHOOL DISTRICTS, TECHNICAL CENTERS,

COLLEGES, UNIVERSITIES, AND COMMUNITY ORGANIZATIONS TO OFFER CLINICAL

ROTATIONS, INTERNSHIPS, APPRENTICESHIPS, AND SCHOLARSHIP PROGRAMS IN

NURSING, ALLIED HEALTH, RESPIRATORY THERAPY, IMAGING, LABORATORY SCIENCE,

SURGICAL TECHNOLOGY, PHARMACY, AND ADVANCED PRACTICE ROLES. KEY

INITIATIVES INCLUDE THE STUDENT NURSE INTERNSHIP PROGRAM WITH MORE THAN

500 PARTICIPANTS, A \$400,000 GRANT TO EXPAND APPRENTICESHIP PROGRAMS, A

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SYSTEMWIDE PHARMACY TECHNICIAN MENTORSHIP PROGRAM, AND MULTIPLE APPRENTICESHIP PATHWAYS IN IMAGING, SURGICAL SERVICES, AND ALLIED HEALTH DISCIPLINES.

UPMC ALSO SUPPORTS ADVANCED PRACTICE PROVIDERS THROUGH REGIONAL PRESENTATIONS, MENTORSHIP EVENTS, AND COLLABORATIONS WITH UNIVERSITIES AND SCHOOLS OF ANESTHESIA TO PREPARE SENIOR STUDENTS FOR CAREER TRANSITION.

TO STRENGTHEN FUTURE PIPELINE EFFORTS, UPMC LAUNCHED SYSTEMWIDE MARKETING AND OUTREACH CAMPAIGNS, EXPANDED CAREER SPOTLIGHT AND CAREER CAFÉ SERIES FOR STUDENTS AND THE PUBLIC, AND CENTRALIZED STUDENT ENGAGEMENT THROUGH STANDARDIZED SHADOWING SYSTEMS AND A DEDICATED TALENT COMMUNITY HUB.

THROUGH THESE COMPREHENSIVE EFFORTS, UPMC CONTINUES TO BUILD A SUSTAINABLE HEALTH CARE WORKFORCE—CONNECTING THOUSANDS OF STUDENTS EACH YEAR TO EDUCATION, TRAINING, AND EMPLOYMENT OPPORTUNITIES THAT STRENGTHEN THE FUTURE OF HEALTH CARE.

UPMC'S MILITARY AND VETERAN RECRUITMENT, RETENTION, ENGAGEMENT, AND COMMUNITY PARTNERSHIP STRATEGY ENABLES RECRUITERS TO CONNECT WITH VETERANS WHO ARE SEEKING NEW OPPORTUNITIES AND SUPPORT THEM IN THE HIRING

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PROCESS. UPMC IS COMMITTED TO ENSURING THE VETERAN POPULATION FINDS MEANINGFUL EMPLOYMENT. UPMC PARTICIPATED IN EMPLOYER SUMMITS, HOSTED VETERAN-SPECIFIC CAREER FAIRS, PARTNERED WITH THE U.S. ARMY FOR PLACEMENT INITIATIVES, AND, AS A DEPARTMENT OF DEFENSE SKILLBRIDGE PROVIDER, LED THE STATE IN SKILLBRIDGE FELLOWSHIP PLACEMENTS. IN ADDITION, PARTNERSHIPS WITH VETJOBS, PITTSBURGH HIRES VETERANS, AND VETERANS LEADERSHIP PROGRAM HAVE RESULTED IN INCREASED NUMBERS OF VETERANS IN UPMC'S WORKFORCE DEVELOPMENT PROGRAMS AND RECENT HIRES. ADDITIONALLY, UPMC IMPLEMENTED A PROCESS WHEREBY EVERY VETERAN APPLICANT TO UPMC RECEIVES A PERSONALIZED REVIEW AND SUPPORT OFFER FROM THE PATHWAYS FOR VETERANS MILITARY RECRUITMENT TEAM. OVER THE PAST YEAR, UPMC RECEIVED MULTIPLE AWARDS AND RECOGNITION FOR ITS EFFORTS SUPPORTING THE MILITARY AND VETERAN COMMUNITY.

THROUGH UPMC PATHWAYS TO WORK AND FREEDOM HOUSE 2.0 WORKFORCE TRAINING AND JOB PLACEMENT PROGRAMS, UPMC COLLABORATES WITH THE NEIGHBORHOOD RESILIENCE PROJECT TO TRAIN THE NEXT GENERATION OF EMTS AND COMMUNITY HEALTH WORKERS-FOCUSING ON INDIVIDUALS WHO RESIDE IN DISADVANTAGED COMMUNITIES IN PITTSBURGH. PATHWAYS TO WORK OFFERS INDIVIDUAL COACHING

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SESSIONS, WEEKLY SEMINARS ON RÉSUMÉ WRITING, INTERVIEW SKILLS, AND APPLICATION ASSISTANCE, AS WELL AS MONTHLY EVENTS TO EDUCATE JOB SEEKERS ABOUT VARIOUS CAREER OPPORTUNITIES. THE PROGRAM PARTNERS WITH MORE THAN 300 COMMUNITY ORGANIZATIONS STATEWIDE - INCLUDING PA CAREERLINK, GOODWILL, SALVATION ARMY, AND MANY MORE - TO CONNECT WITH JOB SEEKERS AND PROVIDE SUPPORT, WORKING WITH MORE THAN 2,000 JOB SEEKERS ANNUALLY. THESE PROGRAMS ALSO WORK CLOSELY WITH PA CAREERLINK AND ENGAGE WITH MULTIPLE COMMUNITY-BASED ORGANIZATIONS, SUCH AS REIMAGINE REENTRY, JEWISH FAMILY AND COMMUNITY SERVICES, PA WOMEN WORK, CLIMATE CHANGERS, AND OTHERS TO REACH UNEMPLOYED OR UNDEREMPLOYED INDIVIDUALS WHO CAN BENEFIT FROM TRAINING AND DEVELOPMENT OPPORTUNITIES. AS A SERVICE TO THE COMMUNITY, PATHWAYS TO WORK PARTNERS WITH LITERACY PITTSBURGH TO OFFER ENGLISH AS A SECOND LANGUAGE CLASSES, AND PARTICIPANTS ARE INVITED TO NETWORKING EVENTS FOLLOWING THE CLASS TO MEET UPMC HIRING MANAGERS AND RECRUITERS. RELATIONSHIPS WITH AREA HIGH SCHOOLS AND HIGH SCHOOL CONSORTIUMS ALLOW PATHWAYS TO ENGAGE WITH STUDENTS AND PARENTS TO SHARE CAREER OPPORTUNITIES. IN COLLABORATION WITH PARTNER4WORK, UPMC PARTICIPATES IN THE LEARN AND EARN PROGRAM TO OFFER EXPLORATORY CAREER EXPERIENCES TO

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LOCAL YOUTH FROM AT-RISK AREAS. IN ADDITION, UPMC'S CENTER FOR WORKPLACE CULTURE AND COMMUNITY ENGAGEMENT LEARNING FORUMS PROVIDE OPPORTUNITIES TO EXPLORE THE IMPACT OF CULTURE AND BELONGING AS THEY RELATE TO BEST PRACTICES IN PATIENT CARE DELIVERY, MEMBER SERVICE, WORKPLACE CULTURE, AND TEAM MANAGEMENT. THE LEARNING FORUMS AND WEB-BASED MODULES ALSO EMPHASIZE CULTURAL AWARENESS, INCLUSION, AND CROSS-CULTURAL COLLABORATION. THIS LEARNING IS DESIGNED TO STRENGTHEN THE KNOWLEDGE, SKILLS, AND CULTURAL COMPETENCE OF THE WORKFORCE IN SERVING INDIVIDUALS AND COMMUNITIES WITH VARIED BACKGROUNDS AND EXPERIENCES.

UPMC'S HEALTH CARE EDUCATION PROGRAMS, MANY OF WHICH ARE UNDERTAKEN WITH THE UNIVERSITY OF PITTSBURGH AND OTHER AFFILIATED COLLEGES AND UNIVERSITIES, OFFER LOCAL RESIDENTS A PATHWAY TO BETTER-PAYING JOBS. IN ADDITION, THE ORGANIZATION'S IMPORTANT STRATEGIC RESEARCH AND EDUCATION RELATIONSHIP WITH THE UNIVERSITY FUELS A CULTURE OF DISCOVERY THAT CONTINUES TO ENHANCE LOCAL EDUCATIONAL PROSPECTS WHILE DRAWING THE WORLD'S FINEST MINDS TO PITTSBURGH.

COALITION BUILDING: WHILE UPMC HAS AN EXPANSIVE PROGRAM OF COMMUNITY SUPPORT, LEADERS OF THE ORGANIZATION REALIZE THAT EVEN MORE CAN BE

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ACCOMPLISHED THROUGH ALLIANCES WITH OTHER NONPROFIT ORGANIZATIONS. OFTEN, THE STREET-LEVEL EXPERTISE OF LOCAL COMMUNITY GROUPS, PAIRED WITH UPMC'S FUNDING, INFLUENCE, PURCHASING POWER, AND OTHER RESOURCES, CAN REACH GOALS THAT NEITHER ORGANIZATION COULD ACHIEVE INDEPENDENTLY. TO LEVERAGE COMMUNITY IMPROVEMENT THROUGH JOINT EFFORTS, UPMC WORKED WITH SEVERAL NONPROFIT ALLIES IN FISCAL 2025.

KEY ALLIANCES INCLUDED RELATIONSHIPS WITH THE PITTSBURGH PUBLIC SCHOOLS AND OTHER LOCAL SCHOOL DISTRICTS TO DEVELOP POLICIES AND PRACTICES THAT SUPPORT HEALTHY HABITS AMONG SCHOOL-AGED YOUTH AND SCHOOL STAFF, AND WITH SCHOOL NURSES TO IMPROVE THE COORDINATION OF HEALTH CARE NEEDS FOR STUDENTS.

UPMC'S LEND A HAND (LAH) PROGRAMS CONTINUE TO SERVE AS A POSITIVE FORCE IN THE COMMUNITY. MONTHLY LAH PROGRAMS ARE OFFERED TO INSPIRE STAFF ACROSS THE SYSTEM TO DONATE ITEMS, VOLUNTEER TIME, OR ATTEND EVENTS. THROUGH IN-PERSON AND REMOTE GIVING OPPORTUNITIES, LAH WAS ABLE TO SUPPORT OVER 30 ORGANIZATIONS. MORE THAN 150 UPMC EMPLOYEES PARTICIPATED IN EVENTS IN NOVEMBER, APRIL, AND MAY TO SUPPORT SEVERAL COMMUNITY ORGANIZATIONS, SUCH AS WORLD VISION PITTSBURGH, SOUTHSIDE COMMUNITY

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COUNCIL, GREATER PITTSBURGH COMMUNITY FOOD BANK, WESTERN PA DIAPER BANK, AND HILLTOP URBAN FARM, PROVIDING MORE THAN 1,200 COMMUNITY SERVICE HOURS. UPMC CORPORATE LEGAL CONTINUES TO PARTICIPATE IN COMMUNITY VOLUNTEERING INITIATIVES, INCLUDING PROVIDING PRO BONO SERVICES. UPMC AND READING IS FUNDAMENTAL (RIF) CONTINUED PROGRAMMING WITH STUDENTS FROM THE MANCHESTER ACADEMIC CHARTER SCHOOL (MACS). ONCE A WEEK, THROUGHOUT THE 2023-2024 SCHOOL YEAR, 22 STUDENTS MET VIRTUALLY WITH THEIR UPMC MENTORS FOR SESSIONS FOCUSED ON BUILDING MEANINGFUL RELATIONSHIPS THROUGH CONVERSATIONS, GOOD BOOKS, AND LITERACY-BASED ACTIVITIES. JUNIOR HEALTH CARE EXPLORERS (JHCE) IS A YOUTH STEM PROGRAM FOR MIDDLE SCHOOL STUDENTS WHO WISH TO BEGIN THEIR CAREER EXPLORATION IN THE HEALTH CARE INDUSTRY. INTERACTIVE SESSIONS AND PANEL DISCUSSIONS EXPOSED THE EXPLORERS TO SEVERAL FIELDS OF HEALTH CARE: DENTISTRY, GENERAL MEDICINE, HEALTH AND REHABILITATION SCIENCES, IMAGING, LABORATORY, NURSING, NURSING EDUCATION, PHARMACY, PUBLIC HEALTH, RADIATION THERAPY, RESPIRATORY THERAPY, SURGICAL SERVICES, INFORMATION TECHNOLOGY, AND CORPORATE CONSTRUCTION. THE VIRTUAL PROGRAM ENGAGED 115 MIDDLE SCHOOL STUDENTS FROM 23 COUNTIES ACROSS UPMC'S FOOTPRINT.

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UPMC CORPORATE SUPPLY CHAIN'S SUPPLIER OPPORTUNITY AND INCLUSION PROGRAM, IN PARTNERSHIP WITH THE UNIVERSITY OF PITTSBURGH, PROVIDED SEVERAL FREE TRAINING SESSIONS DURING ITS SIXTH ANNUAL "ESSENTIALS FOR SUCCESS" PROGRAM ON HOW TO DO BUSINESS WITH UPMC. LOCATIONS INCLUDED PITTSBURGH AND HARRISBURG, PENNSYLVANIA, AS WELL AS VIRTUAL SESSIONS IN HAGERSTOWN, MARYLAND, AND CHAUTAUQUA, NEW YORK, WITH APPROXIMATELY 500 ATTENDEES. THE PROGRAM HELD ITS ANNUAL SUPPLIER SUMMIT IN PITTSBURGH, INVITING ALUMNI FROM ITS ESSENTIALS FOR SUCCESS PROGRAM TO HEAR FROM SEVERAL UPMC SOURCING LEADERS ON FORECASTED VENDING OPPORTUNITIES AND BEST PRACTICES IN ENGAGEMENT. THE PROGRAM ALSO HELD ITS FIFTH ANNUAL POLICY TO PROSPERITY DAY, MEETING WITH COMMONWEALTH OF PENNSYLVANIA HOUSE AND SENATE MEMBERS, DISCUSSING UPMC'S IMPACTS THROUGH ITS SUPPLIER OPPORTUNITY AND INCLUSION PROGRAM WITHIN THEIR DISTRICTS, AND PROVIDING SUBJECT MATTER EXPERTISE IN ADVISING REPRESENTATIVES ON LEGISLATION BEING CONSIDERED AT THE HOUSE AND SENATE LEVEL IMPACTING PENNSYLVANIA VENDORS.

IN 2025, UPMC HEALTH PLAN WORKED WITH FOOD BANKS AND OTHER COMMUNITY-BASED ORGANIZATIONS IN PENNSYLVANIA TO HELP MITIGATE THE ISSUE OF FOOD INSECURITY. THROUGH CHARITABLE GIVING, UPMC SUPPORTED FOOD

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DISTRIBUTION AND NUTRITION EDUCATION EFFORTS OF ORGANIZATIONS, SUCH AS THE GREATER PITTSBURGH COMMUNITY FOOD BANK, 412 FOOD RESCUE, EAST END COOPERATIVE MINISTRY, AND CASA SAN JOSE. UPMC HEALTH PLAN CONTINUED TO PROVIDE HOME DELIVERED MEALS, PAIRED WITH NUTRITION COUNSELING AND SUPPORTS FOR MEMBERS WITH FOOD INSECURITY. THIS YEAR, UPMC EMBARKED ON A NEW INITIATIVE CALLED "NOURISHING OUR COMMUNITIES." FORMERLY KNOWN AS THE "SCOUTING FOR FOOD AND CHOW WAGON CAMPAIGN," THIS INITIATIVE RAISES FUNDS FOR THE GREATER PITTSBURGH FOOD BANK AND ANIMAL FRIENDS TO BENEFIT LOCAL FOOD PANTRIES, ANIMAL SHELTERS, AND UNHOUSED SHELTERS. THROUGH THESE EFFORTS, 1.33 MILLION UNITS WERE COLLECTED, BENEFITING 20 NONPROFIT ORGANIZATIONS ACROSS THE UPMC FOOTPRINT. UNITS INCLUDE EMPLOYEE MONETARY DONATIONS, NON-PERISHABLE FOOD, PET PLAY TOYS AND CARE ITEMS, AND EMPLOYEE VOLUNTEER HOURS.

UPMC'S CENTER FOR SOCIAL IMPACT ALSO LAUNCHED A NOVEL FOOD AS MEDICINE PROGRAM CALLED "FRESH FUNDS," WHICH IS SEEKING TO DEMONSTRATE AN IMPACT ON DIABETES WITH HEALTH EDUCATORS, GROCERY SUPPORT, AND ONLINE SHOPPING. THE CENTER ALSO CONTINUED TO EXPAND ITS HOMEWARD HOUSING INITIATIVE, A COALITION AIMED AT INCREASING THE SUPPLY OF QUALITY, AFFORDABLE HOUSING

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IN COMMUNITIES SERVED BY UPMC, WHILE ALSO DELIVERING SUPPORTIVE HOUSING PARTNERSHIPS AIMED AT PROVIDING HOUSING AND HEALTH CARE SERVICES TO THE REGION'S HOMELESS POPULATION. THE CENTER'S SUPPORTIVE HOUSING PROGRAM FOR UNHOUSED INDIVIDUALS IN ALLEGHENY, BLAIR, LAWRENCE, AND, NEWLY ADDED, ERIE COUNTIES HOUSED ITS 277TH MEMBER. ALSO, THE CENTER CONTINUED COLLABORATIONS WITH COMMUNITY ORGANIZATIONS AND INTELLECTUAL DISABILITY PROVIDERS THAT LEVERAGE COMMUNITY HEALTH WORKER CONNECTIONS TO MEET HEALTH GOALS.

THE UPMC HEALTH PLAN NEIGHBORHOOD CENTER EXEMPLIFIES A SUCCESSFUL MODEL OF ON-GROUND, PERSONALIZED SUPPORT MECHANISMS THAT UTILIZE COMMUNITY RESOURCES TO IMPROVE HEALTH OUTCOMES FOR HIGH-RISK INDIVIDUALS. UPMC HEALTH PLAN'S NEIGHBORHOOD CENTER IN PITTSBURGH CONTINUED TO SUPPORT RESIDENTS IN EAST END COMMUNITIES, SERVING NEARLY 5,000 INDIVIDUALS FROM JANUARY THROUGH OCTOBER 2025. THROUGH TARGETED PROGRAMS AND COMMUNITY PARTNERSHIPS, THE NEIGHBORHOOD CENTER HELPED DISADVANTAGED INDIVIDUALS AND FAMILIES ACCESS AFFORDABLE HOUSING OPPORTUNITIES, LOCAL FOOD PANTRIES, CITIZENSHIP AND LITERACY COURSES THROUGH LITERACY PITTSBURGH, HEALTH SCREENINGS AND VACCINES THROUGH RXPARTNERS AND UPMC HEALTH PLAN'S

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MOBILE HEALTH TEAM, VIRTUAL HEALTH CARE, ONSITE CHILDCARE WHILE PARENTS RECEIVE SERVICES AT THE FACILITY, JOB TRAINING AND WORKFORCE DEVELOPMENT OPPORTUNITIES THROUGH UPMC PATHWAYS TO WORK AND SEVERAL OTHER COMMUNITY PARTNERS, AND COMMUNITY HEALTH WORKER SUPPORT AND REFERRALS TO OTHER SOCIAL SERVICES RESOURCES. THE PITTSBURGH NEIGHBORHOOD CENTER ALSO HOSTS A FREE, MONTHLY FOOD DISTRIBUTION, AND DISTRIBUTES GREATER PITTSBURGH COMMUNITY FOOD BANK'S FOOD BUCKS. THESE INITIATIVES COLLECTIVELY REACHED MORE THAN 500 FOOD-INSECURE INDIVIDUALS IN 2025.

UPMC PATHWAYS TO WORK IS AN ONGOING RECRUITMENT INITIATIVE THAT OFFERS PERSONALIZED CAREER AND JOB NAVIGATION SUPPORT FOR UNEMPLOYED AND UNDER-EMPLOYED INDIVIDUALS IN THE COMMUNITY. PATHWAYS TO WORK RECRUITERS CONNECT THESE INDIVIDUALS TO OPEN JOB OPPORTUNITIES WITHIN THE UPMC SYSTEM AND WALK THEM THROUGH THE APPLICATION AND INTERVIEW PROCESS. WITH SPECIALIZED TRACKS FOR VETERANS, HIGH-SCHOOL/COLLEGE STUDENTS, AND THE GENERAL ADULT POPULATION, THE PROGRAM IS EQUIPPED TO ASSIST CANDIDATES FROM ALL WALKS OF LIFE AND MATCH THEM WITH AVAILABLE POSITIONS THAT MEET THEIR INTEREST AND QUALIFICATIONS. WHILE INITIALLY FOCUSED ON THE SOUTHWEST PA REGION, UPMC PATHWAYS TO WORK EXPANDED INTO ERIE AND

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HARRISBURG IN 2025, AND IS NOW ACTIVELY SERVING INDIVIDUALS IN THOSE REGIONS. FROM JANUARY THROUGH OCTOBER 2025, UPMC PATHWAYS TO WORK RECRUITERS CONNECTED WITH MORE THAN 2,000 INDIVIDUALS VIA UPMC CAREER FAIRS, COMMUNITY EVENTS, AND ITS DIRECT-REFERRAL AND INTAKE PROCESS; IT WORKED WITH 300 COMMUNITY PARTNERS ACROSS THE COMMONWEALTH (128 IN CENTRAL PA ALONE) TO MEET THE NEEDS OF CANDIDATES. THE RECRUITERS ALSO HAVE REGULAR OFFICE HOURS AT UPMC HEALTH PLAN'S PITTSBURGH AND ERIE NEIGHBORHOOD CENTER LOCATIONS. A PARTNERSHIP WITH LITERACY PITTSBURGH'S ESL CLASSES ENGAGES GRADUATES TO FIND JOBS AT UPMC. BY PARTICIPATING IN THE PENNSYLVANIA DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT'S (PA DCED) NEIGHBORHOOD ASSISTANCE PROGRAM (NAP), UPMC CONTRIBUTED TO NONPROFIT ORGANIZATIONS THAT PROVIDE NECESSARY SERVICES TO ADDRESS SOCIAL DETERMINANTS OF HEALTH. SUCH PROJECTS ARE FOCUSED ON THE CREATION OF AFFORDABLE HOUSING; CRIME PREVENTION; BLIGHT REMEDIATIONS; WORKFORCE DEVELOPMENT, EDUCATION, AND JOB TRAINING IN DISTRESSED COMMUNITIES; AND REDUCING THE PREVALENCE OF FCOD INSECURITY. ADDITIONALLY, UPMC'S INVOLVEMENT IN THE PA DCED'S EDUCATIONAL IMPROVEMENT TAX CREDIT (EITC) PROGRAMS PROVIDES TUITION AND PROGRAM

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ASSISTANCE TO STUDENTS FROM PRE-K THROUGH HIGH SCHOOL WHO OTHERWISE WOULD NOT HAVE THE FINANCIAL RESOURCES TO ATTEND.

OTHER COMMUNITY-BASED ALLIANCES IN 2025 INCLUDED: FREE HEALTH CARE CLINICS, SUCH AS THE BIRMINGHAM FREE CLINIC, WHICH OFFERS CARE TO PITTSBURGH'S HOMELESS POPULATION; LOCAL COMMUNITY ORGANIZATIONS, SUCH AS THE BRASHEAR ASSOCIATION, WHICH PROVIDES AN EMPLOYMENT RESOURCE CENTER IN A LOW-INCOME NEIGHBORHOOD OF PITTSBURGH; FREE VACCINE EVENTS, SUCH AS PHARMACIST CARE DAY AT THE NEIGHBORHOOD CENTER IN PITTSBURGH; AND HOUSING COLLABORATIONS, SUCH AS WITH THE HISPANIC ASSOCIATION OF CONTRACTORS & ENTERPRISES (HACE), WHICH SERVES THE FAIRHILL AND ST. HUGH NEIGHBORHOODS IN PHILADELPHI. OTHER NONPROFIT ORGANIZATIONS UPMC WORKED WITH INCLUDE THE NEIGHBORHOOD LEARNING ALLIANCE, READING IS FUNDAMENTAL, URBAN LEAGUE OF GREATER PITTSBURGH, ALZHEIMER'S ASSOCIATION, VETERANS OUTREACH OF PENNSYLVANIA, PITTSBURGH HISPANIC DEVELOPMENT CORPORATION, SARAH REED CHILDREN'S CENTER, COMMUNITY EMPOWERMENT ASSOCIATION, BIBLE CENTER CHURCH OF PITTSBURGH, BROWN MAMAS, THE UNITED WAY, HOMELESS CHILDREN'S EDUCATION FUND, AND THE INDEPENDENT FOUNDATIONS OF UPMC'S COMMUNITY HOSPITALS.

COMMUNITY HEALTH NEEDS ASSESSMENT: IN FISCAL YEAR 2025, UPMC CONDUCTED

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ITS FIFTH COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) BUILDING ON THE PREVIOUS CHNAS CONDUCTED IN FISCAL YEARS 2013, 2016, 2019, AND 2022. THE FISCAL YEAR 2025 CHNA PROVIDED AN OPPORTUNITY FOR UPMC TO RE-ENGAGE WITH COMMUNITY STAKEHOLDERS IN A RIGOROUS, STRUCTURED PROCESS GUIDED BY PUBLIC HEALTH EXPERTS. AN ONGOING OBJECTIVE OF THE CHNA EFFORT IS TO HELP ALIGN COMMUNITY BENEFIT PROGRAMS AND RESOURCES WITH COMMUNITY HEALTH NEEDS. UPMC ACTIVELY ENGAGED ITS HOSPITAL BOARDS, COMMUNITY STAKEHOLDERS, AND PUBLIC HEALTH EXPERTS TO IDENTIFY COMMUNITY HEALTH NEEDS AND DETERMINE HOW TO COLLABORATE MOST EFFECTIVELY TO ADDRESS THOSE NEEDS. THE ORGANIZATION SOLICITED AND TOOK INTO ACCOUNT INPUT FROM PERSONS WHO REPRESENT THE BROAD INTERESTS OF THE COMMUNITY. IN MAY AND AUGUST 2024, PITT PUBLIC HEALTH SURVEYED COMMUNITY LEADERS AND STAKEHOLDERS SPECIFIC TO EACH HOSPITAL'S LOCAL COMMUNITY, AS WELL AS A SYSTEMWIDE PANEL OF REGIONAL STAKEHOLDERS. IN PARTNERSHIP WITH PITT PUBLIC HEALTH, UPMC REFINED THE COMMUNITY SURVEY TO INCORPORATE EMERGING AREAS OF EXPLORATION WITHIN THE PUBLIC HEALTH FIELD (E.G., HEALTH DISPARITIES, RURAL HEALTH, ACCESS, AND TELEMEDICINE). COMMUNITY STAKEHOLDERS PROVIDED INPUT ON: THE CONTINUED IMPORTANCE OF THE 2022 HEALTH ISSUES; RELATIVE IMPORTANCE AND

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PRIORITIZATION OF AN EXPANDED LIST OF HEALTH ISSUES; DETERMINATION OF FACTORS CONTRIBUTING TO HEALTH DISPARITIES; EVALUATION OF BARRIERS THAT MAKE IT DIFFICULT TO GET ACCESS TO IMPORTANT RESOURCES FOR HEALTH CARE AND HEALTH-RELATED SOCIAL NEEDS; AND UTILIZING TELEMEDICINE TO ACCESS CARE IN RURAL OR UNDERSERVED AREAS. A SURVEY WAS EXTENDED TO A TOTAL OF 3,657 COMMUNITY PARTICIPANTS FROM 29 UPMC HOSPITAL COMMUNITIES. NEARLY 850 INDIVIDUALS PARTICIPATED IN THE SURVEY. PARTICIPANTS INCLUDED: LEADERS OR MEMBERS OF MEDICALLY UNDERSERVED, LOW-INCOME, MINORITY POPULATIONS, AND POPULATIONS WITH CHRONIC DISEASE; REPRESENTATIVES FROM PUBLIC HEALTH DEPARTMENTS OR GOVERNMENTAL AGENCIES SERVING COMMUNITY HEALTH; MEDICAL STAFF LEADERS WHO HAVE A UNIQUE PERSPECTIVE AND VIEW OF THE COMMUNITY; AND OTHER STAKEHOLDERS IN COMMUNITY HEALTH, SUCH AS CONSUMER ADVOCATES, NONPROFIT AND COMMUNITY-BASED ORGANIZATIONS, LOCAL SCHOOL DISTRICTS, GOVERNMENT ORGANIZATIONS, AND HEALTH CARE PROVIDERS. EIGHTY-THREE PERCENT OF INDIVIDUALS WHO COMPLETED THE SURVEY SELF-IDENTIFIED AS BEING A REPRESENTATIVE OR MEMBER OF A MEDICALLY UNDERSERVED, MINORITY, OR LOW-INCOME POPULATION. UPMC USED THE COMMUNITY INPUT TO DEVELOP STRATEGIC PLANS FOR EACH OF ITS

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LICENSED HOSPITALS TO ADDRESS SIGNIFICANT COMMUNITY HEALTH NEEDS.

IMPORTANTLY, THESE PLANS ADDRESS LOCAL COMMUNITY NEEDS NOT ONLY AT THE HOSPITAL LEVEL, BUT ALSO INCLUDE EFFORTS UNDERTAKEN IN PARTNERSHIP WITH OTHER UPMC HOSPITALS, EXTERNAL ORGANIZATIONS, AND THE LARGER UPMC SYSTEM.

KEY THEMES THAT EMERGED AT UPMC HOSPITALS CAN BE GROUPED INTO FOUR BROAD CATEGORIES: CHRONIC DISEASE MANAGEMENT, BEHAVIORAL HEALTH, ACCESS TO CARE AND NAVIGATING RESOURCES, AND PREVENTION AND COMMUNITY-WIDE HEALTHY LIVING. THE 2025-2028 IMPLEMENTATION PLANS BUILD UPON GOALS ESTABLISHED IN FISCAL YEAR 2022. WHILE TAILORED TO EACH HOSPITAL, THE IMPLEMENTATION PLANS INCLUDE A FOCUS ON A FEW HIGH-URGENCY ISSUES, EMPHASIZE POPULATIONS MOST IN NEED, SUPPORT A WIDE RANGE OF CHRONIC DISEASE PREVENTION AND CARE INITIATIVES, ENHANCE EFFORTS TO ADDRESS BEHAVIORAL HEALTH, PROMOTE ACCESS TO RESOURCES, AND LEVERAGE COMMUNITY PARTNERSHIPS. THE 2025 CHNA REPORTS AND 2025-2028 STRATEGIC PLANS FOR EACH UPMC HOSPITAL CAN BE FOUND ON UPMC'S WEBSITE:

[HTTPS://WWW.UPMC.COM/ABOUT/COMMUNITY-COMMITMENT/COMMUNITY-HEALTH-NEEDS-ASSESSMENT](https://www.upmc.com/about/community-commitment/community-health-needs-assessment).

UPMC MADE MEASURABLE PROGRESS ON IMPROVING COMMUNITY HEALTH IN THE PERIOD

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FROM FISCAL YEARS 2014 THROUGH 2025. PROGRAMS AND INITIATIVES FOCUSED ON THE SIGNIFICANT HEALTH NEEDS IDENTIFIED IN THE CHNAS RELEASED ON JUNE 30 IN 2013, 2016, 2019, AND 2022, WHICH INCLUDED: CANCER, DIABETES, HEART DISEASE AND STROKE, RESPIRATORY DISEASE, OBESITY, ACCESS TO BEHAVIORAL HEALTH SERVICES, OPIOID ADDICTION AND SUBSTANCE ABUSE, CARE COORDINATION, PALLIATIVE AND END-OF-LIFE CARE, PRIMARY CARE, SPECIALTY CARE, COMMUNITY PREVENTION AND WELLNESS INITIATIVES, INTERPERSONAL SAFETY, AND HEALTH-RELATED SOCIAL NEEDS. IMPLEMENTATION PLANS DEVELOPED BY UPMC HOSPITALS DRAW SUPPORT FROM AN ARRAY OF ACTIVE AND ENGAGED COMMUNITY PARTNERS, AS WELL AS FROM THE LARGER UPMC SYSTEM, AND INCLUDE HUNDREDS OF INITIATIVES, UTILIZING BOTH EVIDENCE-BASED, NATIONALLY-RECOGNIZED PROGRAMS AND INTERNALLY DESIGNED PILOT PROGRAMS.

THE BOARD OF DIRECTORS AT EACH UPMC HOSPITAL REGULARLY MONITORS THE PROGRESS OF THE COMMUNITY HEALTH IMPROVEMENT PLANS. DURING FISCAL YEARS 2014 THROUGH 2025, UPMC HOSPITALS MADE MEASURABLE PROGRESS IN ALL AREAS IDENTIFIED THROUGH THE CHNA PROCESS. IN SOME CASES, UPMC HOSPITALS IMPROVED AND EXPANDED EXISTING PROGRAMS - REACHING OUT NOT ONLY TO MORE PEOPLE, BUT ALSO TARGETING PEOPLE WHO COULD BENEFIT MOST. UPMC ALSO

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DEVELOPED NEW PROGRAMS AND INITIATIVES, WHICH REQUIRED CREATING OPERATING
INFRASTRUCTURES, AND ESTABLISHING GOALS AND ASSESSMENT TOOLS.

PART VI LINES 2, 4, 5, AND 6

PARTNERSHIPS WITH OTHER COMMUNITY ORGANIZATIONS WERE DEVELOPED AND
ENHANCED TO BETTER COORDINATE RESOURCES. EXAMPLES OF UPMC HOSPITALS'
PROGRESS DURING FISCAL YEARS 2014 THROUGH 2025 INCLUDE:
SUPPORTING HEALTHY SCHOOL ENVIRONMENTS: UPMC CHILDREN'S CONTINUES ITS
PARTNERSHIP WITH THE ALLIANCE FOR A HEALTHIER GENERATION AND REMAINS
COMMITTED TO SUPPORTING LOCAL SCHOOLS AND COMMUNITY ORGANIZATIONS IN
IMPLEMENTING EVIDENCE-BASED PROGRAMS THAT HELP CREATE A CULTURE WHERE
HEALTHY EATING, PHYSICAL ACTIVITY, AND SOCIAL-EMOTIONAL WELL-BEING ARE
THE NORM THROUGH POLICY, SYSTEM, AND ENVIRONMENTAL CHANGE. UPMC
CHILDREN'S HOSPITAL CONTINUES TO EXPAND ITS SCHOOL-HEALTH PARTNERSHIPS,
ENGAGING MORE THAN 75 SCHOOL PARTNERS IN ALLEGHENY COUNTY WITH THE
HEALTHY SCHOOLS PROGRAM AND REACHING AN ADDITIONAL 30 SCHOOL PARTNERS
OUTSIDE OF ALLEGHENY COUNTY VIA A PARTNERSHIP WITH ADAGIO HEALTH. THROUGH

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THE HEALTHY SCHOOLS PROGRAM, SCHOOLS WORKED WITH UPMC CHILDREN'S TO
 CREATE HEALTHIER SPACES FOR STUDENTS AND STAFF. AS PART OF THESE EFFORTS,
 UPMC CHILDREN'S ALSO HELPED INCORPORATE TRAINING AND EDUCATION FOR
 PROFESSIONALS AND EDUCATORS IN SCHOOL ENVIRONMENTS AND EDUCATION SESSIONS
 FOR YOUTH AND ADULT CAREGIVERS, AS WELL AS PROVIDING RESOURCES FOR
 OUT-OF-SCHOOL AND EARLY CHILDHOOD PARTNERS. MORE THAN 1,200 EDUCATION
 PROFESSIONALS PARTICIPATED IN UPMC CHILDREN'S HEALTH AND PREVENTION
 PROGRAMS. THE HOSPITAL'S SUPPORT CONTRIBUTED TO HELPING SCHOOLS ACHIEVE
 NATIONAL RECOGNITION FOR HEALTH PROMOTION EFFORTS. IN OCTOBER 2023, 15
 SCHOOL PARTNERS THAT PARTICIPATE IN THE HEALTHY SCHOOLS PROGRAM WERE
 NATIONALLY RECOGNIZED AMONG AMERICA'S HEALTHIEST SCHOOLS. STAFF FROM UPMC
 CHILDREN'S, ALONG WITH SEVERAL SCHOOL PARTNERS, WERE INVITED TO
 WASHINGTON D.C. TO RECEIVE RECOGNITION AND CELEBRATE THEIR
 ACCOMPLISHMENTS.
 PROMOTING INJURY PREVENTION AND SAFETY INITIATIVES FOR CHILDREN AND
 FAMILIES: UPMC CHILDREN'S CONTINUED TO ENGAGE CHILDREN AND FAMILIES VIA
 HOSPITAL, SCHOOL, OUT-OF-SCHOOL TIME, AND COMMUNITY-BASED PROGRAMS TO
 RAISE AWARENESS ABOUT GUN, BIKE, AND CAR SEAT SAFETY AND STRATEGIES TO

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PREVENT VIOLENCE AND INJURIES. UPMC CHILDREN'S HOSPITAL OF PITTSBURGH'S INJURY PREVENTION AND SAFETY DEPARTMENT OFFERS COMPREHENSIVE PROGRAMMING TO PROMOTE SAFETY AND HELP PREVENT INJURIES. SINCE 2014, PROGRAMS HAVE REACHED MORE THAN 30,000 YOUTH AND INCLUDE CAR SEAT SAFETY, HOME SAFETY, ON-WHEELS SAFETY, AND FIREARM SAFETY. TO ENCOURAGE CHILD PASSENGER SAFETY, THE HOSPITAL CONTINUES TO OFFER ITS CAR SEAT LOANER PROGRAM FOR PATIENTS LEAVING THE HOSPITAL IN NEED; UPMC CHILDREN'S LOANS OR DONATES APPROXIMATELY 1,000 CAR SEATS PER YEAR TO FAMILIES IN NEED. TO HELP ADDRESS HOME SAFETY, THE HOSPITAL'S HOME SAFETY VAN TRAVELS TO COMMUNITIES IN AND AROUND PITTSBURGH OFFERING FAMILIES HANDS-ON EDUCATION ABOUT HOME HAZARDS. THE HOME SAFETY VAN HAS TRAVELED TO MORE THAN 40 COMMUNITY SITES PER YEAR OVER THE LAST THREE YEARS. TO HELP ADDRESS ON-WHEELS SAFETY, UPMC CHILDREN'S AND THE HARD HEADS HELMET PROGRAM PROVIDE MORE THAN 4,000 BIKE HELMETS TO YOUTH IN THE REGION EVERY YEAR, THROUGH SUMMER PROGRAMS WITH PITTSBURGH PUBLIC SCHOOLS, LOCAL LAW ENFORCEMENT EVENTS, AND OTHER COMMUNITY EVENTS AND PROGRAMS. TO ADDRESS FIREARM SAFETY, UPMC CHILDREN'S INJURY PREVENTION TEAM AND COMMUNITY PARTNERS ARE COLLABORATING TO EDUCATE THE COMMUNITY ABOUT FIREARM STORAGE

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TO HELP KEEP CHILDREN, TEENS, AND FAMILIES SAFER FROM FIREARM INJURY. DURING THE 2022-2025 CHNA CYCLE, UPMC CHILDREN'S INJURY PREVENTION GREATLY EXPANDED THE SAFER FIREARM STORAGE PROGRAM, WITH SUPPORT FROM EQUITRANS MIDSTREAM FOUNDATION AND THE AMERICAN TRAUMA SOCIETY, PENNSYLVANIA DIVISION. SINCE JULY 2022, THE HOSPITAL HOSTED SIX EDUCATIONAL EVENTS ACROSS ALLEGHENY, GREENE, AND WASHINGTON COUNTIES, PROVIDING MORE THAN 500 FAMILIES WITH BIOMETRIC FIREARM SAFES AND EDUCATION FOCUSED ON SUICIDE AND UNINTENTIONAL INJURY PREVENTION. THESE EVENTS HAVE RESULTED IN SIGNIFICANT IMPROVEMENT IN SAFER FIREARM STORAGE. FOR EXAMPLE, AN EVENT IN PARTNERSHIP WITH DESTINY OF FAITH CHURCH IN PITTSBURGH'S NORTH SIDE SHOWED A 59 PERCENT INCREASE IN PARTICIPANTS LOCKING THEIR FIREARMS IN THE SAFE PROVIDED BY UPMC AND A 42 PERCENT INCREASE IN PARTICIPANTS LOCKING AMMUNITION SEPARATELY FROM THEIR FIREARMS. IN ADDITION, UPMC CHILDREN'S SAFETY CENTER AND HOME SAFETY VAN DISTRIBUTED 300 GUNLOCKS. AS PART OF A NATIONAL EFFORT TO PROMOTE INJURY PREVENTION, IN NOVEMBER 2023, UPMC JOINED ACRISURE STADIUM, PITTSBURGH PARKING AUTHORITY, THE CITY-COUNTY BUILDING, THE COURTHOUSE, GULF TOWER, AND KOPPERS IN LIGHTING UP GREEN FOR NATIONAL INJURY PREVENTION DAY AND

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PARTICIPATED IN A NATIONAL X/TWITTER CHAT FOR ONE HOUR TO PROVIDE SAFETY EDUCATION TO MORE THAN A MILLION NATIONALLY AND INTERNATIONALLY. ENHANCING ACCESS TO TOP-QUALITY SPECIALTY CARE: UPMC IS MAKING HEALTH CARE MORE ACCESSIBLE. IN PITTSBURGH, UPMC IS CREATING WORLD-CLASS FACILITIES TO DELIVER SPECIALTY CARE. IN MAY 2023, UPMC OPENED THE STATE-OF-THE ART UPMC MERCY PAVILION. THROUGH PATIENT-FOCUSED DESIGN AND INNOVATIVE TECHNOLOGIES, THE PAVILION IS ONE OF THE FIRST-OF-ITS-KIND IN THE NATION - A PLACE OF LIFE-CHANGING CARE FOR PEOPLE WITH ROUTINE AND ADVANCED VISION AND PHYSICAL REHABILITATION NEEDS. THE UPMC VISION INSTITUTE ALSO HOUSES THE UPMC URGENT EYE CARE CLINIC, AN OPTICAL SHOP, AND STREET LAB - A STATE-OF-THE-ART SPACE FOR CLINICIANS, RESEARCHERS, AND PATIENTS TO INTERACT AND MODEL REAL-LIFE SITUATIONS WHERE VISION LOSS IS A FACTOR IN A FULLY MONITORED AND CONTROLLED ENVIRONMENT. ITS FEATURES FOCUS ON ACCESSIBILITY, REFLECTING THE NEEDS OF PATIENTS RECEIVING CARE AT THE PAVILION. ADDITIONALLY, IN JUNE 2022, UPMC BROKE GROUND ON THE UPMC PRESBYTERIAN TOWER, WHICH IS SLATED TO BE COMPLETED IN 2026 AND OPEN IN 2027, AND, IN NOVEMBER 2023, UPMC ANNOUNCED PLANS TO CONSTRUCT A NEW HEART INSTITUTE AT UPMC CHILDREN'S HOSPITAL OF PITTSBURGH TO ELEVATE CARE

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AND TECHNOLOGY IN PEDIATRIC CARDIOLOGY. THE HEART INSTITUTE WILL BE HOME TO STATE-OF-THE-ART CLINICAL SPACE WITH CARDIAC CATHETERIZATION LABS, AN INTEROPERATIVE MRI, AND INPATIENT AND OUTPATIENT PROCEDURAL, DIAGNOSTIC, AND CONSULTATION SPACES. IN WEST CENTRAL PENNSYLVANIA, UPMC HOSPITALS CONTINUED EFFORTS TO ENHANCE PATIENT ACCESS TO SPECIALISTS. FOR EXAMPLE, UPMC ALTOONA CONTINUES TO COLLABORATE WITH UPMC BEDFORD, UPMC SOMERSET, AND UPMC WESTERN MARYLAND TO RECRUIT AND SHARE PHYSICIAN SPECIALISTS IN THE REGION. SINCE JUNE 2022, UPMC ALTOONA RECRUITED 33 MEDICAL AND SURGICAL SPECIALIST PHYSICIANS. SPECIALISTS WERE RECRUITED IN AREAS INCLUDING NEUROLOGY, RADIATION ONCOLOGY, DERMATOLOGY, MEDICAL ONCOLOGY, TRAUMA, EMERGENCY MEDICINE, ENDOCRINOLOGY, ANESTHESIOLOGY, UROLOGY, PODIATRY, AND ENT. WHEN A SPECIALIST IS NOT AVAILABLE IN BEDFORD COUNTY, UPMC BEDFORD BRINGS SPECIALTY PHYSICIANS CLOSE TO HOME BY USING TELEMEDICINE, WHICH INCREASES ACCESS TO CARE AND HELPS SAVE PATIENTS TRAVEL TIME TO AND FROM PITTSBURGH. OVER THE PAST THREE YEARS, UPMC BEDFORD FOCUSED EFFORTS TO EXPAND TELEMEDICINE CAPABILITIES FOR RHEUMATOLOGY, PULMONOLOGY, AND GENETICS. UPMC SOMERSET IS ALSO WORKING TO ENHANCE ACCESS TO SPECIALTY CARE. EFFORTS INCLUDE: UPMC MAGEE-WOMENS

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SPECIALTY SERVICES AT UPMC SOMERSET RELOCATED TO A NEW SPACE IN SOMERSET, WHICH ALLOWS MORE PROVIDERS TO BE ONSITE AT ANY GIVEN TIME, ENABLING EXPANDED ACCESS TO LOCAL WOMEN NEEDING GYNECOLOGICAL SERVICES. ADDITIONALLY, UPMC SOMERSET EXPANDED ORTHOPEDIC SPINE SERVICES TO JOHNSTOWN. TO ADDRESS SPECIALTY CARE NEEDS IN RURAL COMMUNITIES, UPMC CONTINUES TO USE INNOVATIVE HOSPITAL MODELS. IN MCKEAN COUNTY, UPMC KANE IS THE FIRST UPMC HOSPITAL TO PARTICIPATE IN THE PENNSYLVANIA RURAL HEALTH MODEL (PARHM), WHICH WAS DEVELOPED BY THE PENNSYLVANIA DEPARTMENT OF HEALTH AND THE CENTER FOR MEDICARE AND MEDICAID INNOVATION. UPMC KANE INTRODUCED MEASURES TO AVOID OVER-UTILIZATION IN CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD) PATIENTS AND IMPLEMENTED AN INPATIENT TELEHOSPITALIST PROGRAM. IN ADDITION, THROUGH THE PENNSYLVANIA RURAL HEALTH MODEL, UPMC KANE IS LEVERAGING TELEPULMONOLOGY TO IMPROVE ACCESS TO CARE FOR PATIENTS WITH CHRONIC RESPIRATORY CONDITIONS THROUGH TELEHEALTH OPTIONS. BETWEEN JULY 2022 AND DECEMBER 2023, THE HOSPITAL SERVED MORE THAN 120 PATIENTS THROUGH TELEPULMONOLOGY VISITS. 2024 MARKED THE FIFTH YEAR UPMC KANE PARTICIPATED IN PARHM. HOSPITAL LEADERSHIP ATTENDED CONFERENCES WITH THE RURAL HEALTH REDESIGN CENTER AND ENGAGED IN

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REGULAR COMMUNICATION WITH PARHM LEADERSHIP AND PARTICIPATING PAYORS TO COORDINATE TRANSFORMATION PLAN EFFORTS. IN CLINTON COUNTY, UPMC IN NORTH CENTRAL PA. WORKED WITH THE PENNSYLVANIA DEPARTMENT OF HEALTH (PA DOH) TO CONVERT SERVICES AT UPMC LOCK HAVEN TO AN OUTFPATIENT EMERGENCY DEPARTMENT, THE FIRST OF ITS KIND IN THE COMMONWEALTH UNDER THE NEW GUIDANCE PROVIDED FOR INNOVATIVE HOSPITAL MODELS. UPMC WILLIAMSPORT CONTINUES TO RECRUIT PHYSICIANS TO INCREASE ACCESS TO SPECIALTY CARE IN LYCOMING COUNTY, INCLUDING VASCULAR SURGERY, GYNECOLOGIC ONCOLOGY, INTERVENTIONAL RADIOLOGY, AND ORTHOPEDIC TRAUMA SURGERY. ADDITIONALLY, UPMC HOSPITALS IN NORTH CENTRAL PENNSYLVANIA OFFER A NURSE TRIAGE LINE THAT HELPS SCHEDULE APPOINTMENTS, DIRECTS PATIENTS TO THE APPROPRIATE LEVEL OF CARE, AND ASSISTS WITH PRESCRIPTION REFILLS. RAISED AWARENESS OF CHRONIC DISEASE THROUGH OUTREACH, EDUCATION, AND HEALTH SCREENINGS: FROM 2014-2025, THOUSANDS OF PEOPLE PARTICIPATED IN COMMUNITY EVENTS THAT OFFERED SCREENINGS TO DETECT CHRONIC DISEASES, SUCH AS CANCER, DIABETES, AND HEART DISEASE. MANY OF THESE EVENTS WERE HELD AT NEIGHBORHOOD LOCATIONS, INCLUDING CHURCHES, SENIOR CENTERS, AND SCHOOLS. TO RAISE AWARENESS OF CANCER, UPMC PASSAVANT OFFERS EDUCATIONAL PROGRAMS,

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BOTH IN-PERSON AND VIRTUAL, ABOUT CANCER PREVENTION, DETECTION, AND TREATMENT. THESE PROGRAMS INCLUDE FREEDOM FROM SMOKING CLINICS, PRESENTATIONS TO SCHOOL-AGED CHILDREN ABOUT CANCER RISKS, AN ANNUAL CELEBRATION OF SURVIVORSHIP, AND COLON CANCER SCREENINGS WITH FIT KITS. IN ADDITION, UPMC GREENE AND UPMC WASHINGTON CONTINUED EFFORTS TO ENCOURAGE SCREENINGS FOR DETECTION OF BOTH COLORECTAL CANCER AND LUNG CANCER. RECOGNIZING THE VALUE IN REGULAR SCREENING AND DETECTION OF EARLY POLYPS IN THE COLON, UPMC GREENE AND UPMC WASHINGTON WORKED TO INCREASE THE NUMBER OF PEOPLE AGED 45-75 YEARS WHO ARE SCREENED FOR COLORECTAL CANCER. BETWEEN JANUARY 2023 AND MAY 2024, MORE THAN 13,500 COLONOSCOPIES WERE COMPLETED. SINCE 2022, UPMC GREENE AND UPMC WASHINGTON CONTINUED EFFORTS TO INCREASE THE NUMBER OF PEOPLE AGED 50-77 YEARS WHO HAVE A HISTORY OF TOBACCO USE, ARE ASYMPTOMATIC FOR LUNG CANCER, AND ARE SCREENED WITH LOW DOSE COMPUTER TOMOGRAPHY (LDCT). BETWEEN JULY 2022 AND JUNE 2024, UPMC GREENE AND UPMC WASHINGTON CONDUCTED MORE THAN 3,100 LUNG CANCER SCREENINGS. AND, TO INCREASE ACCESS TO BREAST CANCER SCREENINGS, UPMC MAGEE- WOMENS HOSPITAL HOSTED 37 WALK-IN OR EASY ACCESS SCREENING MAMMOGRAM EVENTS IN OAKLAND, HOMEWOOD, WILKINSBURG, MCKEESPORT, AND

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WEXFORD. MORE THAN 200 WOMEN RECEIVED MAMMOGRAMS FROM BREAST IMAGING WALK-IN CLINICS BETWEEN JULY 2022 AND DECEMBER 2023. TO RAISE AWARENESS OF DIABETES, UPMC SOMERSET'S DIABETES EDUCATION CENTER PARTICIPATES IN LOCAL COMMUNITY OUTREACH AND PROVIDES DIABETES SELF-MANAGEMENT AND SUPPORT, FOCUSING ON INCREASING THE NUMBER OF INDIVIDUALS WHO RETURN FOR FOLLOW-UP APPOINTMENTS. TO HELP ADDRESS OBESITY, DIABETES, AND HEART DISEASE AND STROKE, UPMC ALTOONA CONTINUES TO PARTNER WITH THE HEALTHY BLAIR COUNTY COALITION FOR THE LET'S MOVE BLAIR COUNTY PROGRAM, WHICH ENCOURAGES WEIGHT LOSS AND HEALTHY LIFESTYLES THROUGH EDUCATION, EXERCISE, AND SUPPORT GROUPS. AND TO HELP IMPROVE THE HEALTH AND WELLNESS OF ERIE RESIDENTS, UPMC HAMOT CONTINUES TO ENCOURAGE PREVENTIVE SCREENINGS AT HEALTH AND WELLNESS FAIRS THROUGHOUT THE REGION, INCLUDING THE SARAH REED HEALTH FAIR AND ERIE CENTER FOR ARTS AND TECHNOLOGY (ECAT) HEALTH FAIR. IN ADDITION, THE HOSPITAL CONTINUES TO PROMOTE EARLY DETECTION OF BREAST CANCER THROUGH ITS MAMMO MARATHON EVENT, WHICH COMPLETED NEARLY 150 MAMMOGRAMS IN OCTOBER 2023, AND THROUGH OUTREACH REMINDERS FOR PATIENTS WHO ARE DUE FOR MAMMOGRAPHY AND CERVICAL CANCER SCREENINGS. FURTHERMORE, UPMC HAMOT IS WORKING TO IMPROVE THE HEALTH AND

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WELLNESS OF ERIE RESIDENTS BY OFFERING MEANINGFUL ACCESS TO CARE. IN SEPTEMBER 2024, HAMOT HEALTH FOUNDATION SPONSORED ERIE'S FIRST REMOTE AREA MEDICAL (RAM) CLINIC, WHICH OFFERED MEDICAL, DENTAL, AND VISION SERVICES AT NO COST TO COMMUNITY MEMBERS. OVER THE COURSE OF 20 CLINIC HOURS, 317 UNIQUE PATIENTS WERE SERVED. THROUGH A PARTNERSHIP WITH FAITH UNITED METHODIST CHURCH, UPMC ST. MARGARET PARTICIPATES IN MONTHLY NEIGHBORHOOD DINNERS - PART OF AN ANTI-POVERTY PROGRAM FOR THE SHARPSBURG COMMUNITY. IN VERONA, UPMC ST. MARGARET PARTNERS WITH THE VERONA UNITED METHODIST CHURCH, WHERE THE HOSPITAL ATTENDS QUARTERLY COMMUNITY DINNERS, AND PROVIDES HEALTH EDUCATION AND SCREENINGS, IDENTIFYING INDIVIDUALS WITH MEDICAL ISSUES AND REFERRING THEM TO CARE PROVIDERS. AND, IN CENTRAL PENNSYLVANIA, UPMC HOSPITALS ARE WORKING TO RAISE AWARENESS OF CHRONIC DISEASE. UPMC MEMORIAL PARTNERS WITH UPMC HANCOVER TO SPONSOR THE BETTER LIVING RADIO PROGRAM, WHICH AIRS EVERY WEEKDAY FROM 10 TO 11 A.M., ON 1280 AM AND 95.3 FM. THE HOSPITALS LEVERAGE THIS OPPORTUNITY TO EDUCATE LISTENERS IN THE COMMUNITY ABOUT A RANGE OF HEALTH TOPICS, INCLUDING HIV, TOBACCO CESSATION, PHYSICAL FITNESS, MENTAL HEALTH, CANCER, PRIMARY CARE, AND PEDIATRIC CARE. ADDITIONALLY, UPMC PINNACLE HOSPITALS CONTINUES TO

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OFFER SCREENINGS FOR BLOOD PRESSURE, CHOLESTEROL, AND A1C, FOLLOWED BY EDUCATION REGARDING SCREENING RESULTS AND HEART-HEALTHY LIFESTYLES. THESE SCREENINGS AIM TO IDENTIFY PEOPLE AT RISK OF CHRONIC DISEASES, SUCH AS HEART DISEASE, HYPERTENSION, AND DIABETES. BETWEEN JULY 2022 AND DECEMBER 2023, UPMC PINNACLE HOSPITALS PROVIDED 1,094 FREE SCREENINGS. TARGETING ADDICTION BY CONCEPTUALIZING AND EXPANDING BEHAVIORAL HEALTH PROGRAMS: UPMC OFFERS ITS EXPERTISE AND COMPASSIONATE SERVICES TO INDIVIDUALS FROM ALL WALKS OF LIFE TO HELP THEM OVERCOME SUBSTANCE USE DISORDERS. UPMC WESTERN BEHAVIORAL HEALTH IS COMMITTED TO PROVIDING ADDICTION PROGRAMS THAT ARE PATIENT-ORIENTED, RESEARCH-BASED, AND RECOVERY-FOCUSED. UPMC WESTERN BEHAVIORAL HEALTH SEEKS TO ENGAGE INDIVIDUALS THROUGH MOTIVATIONAL, CULTURALLY COMPETENT, GOAL-FOCUSED TREATMENT, IN COMPASSIONATE, CARING ENVIRONMENTS, AT ACCESSIBLE COMMUNITY LOCATIONS. OVER THE LAST THREE YEARS, UPMC WESTERN PSYCHIATRIC HOSPITAL'S CENTER OF EXCELLENCE AND WARM-HAND-OFF PROGRAM CONTINUED TO ENGAGE PATIENTS SUFFERING FROM ADDICTION IN EMERGENCY ROOMS AND CRISIS CENTERS AND HELPED TO ENSURE THEY ARE ESCORTED TO AN APPROPRIATE TREATMENT CENTER. UPMC WESTERN BEHAVIORAL HEALTH ALSO COLLABORATED WITH UPMC'S

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DEPARTMENT OF INTERNAL MEDICINE TO CONTINUE TO INTEGRATE BEHAVIORAL HEALTH EXPERTISE INTO MEDICATION ASSISTANCE PROGRAMS FOR PATIENTS WITH COMPLEX MEDICAL CONDITIONS. TO MAKE TREATMENT AND SUPPORT MORE ACCESSIBLE FOR PATIENTS WITH OPIOID USE DISORDERS, UPMC ST. MARGARET PROVIDES MEDICATION-ASSISTED TREATMENT (MAT) AT ITS THREE FAMILY HEALTH CENTERS (FHC). THE FHCS HOST WEEKLY MAT CLINICS FOR PHYSICIAN VISITS, COUNSELING, AND MEDICATION MONITORING. BETWEEN JUNE 2022 AND DECEMBER 2023, THERE WERE 375 PATIENT VISITS FOR MAT THROUGH THE HOSPITAL'S FHCS. TO HELP CARE FOR WOMEN WITH SUBSTANCE USE DISORDER AND THEIR BABIES, UPMC MAGEE-WOMENS HOSPITAL'S PREGNANCY AND WOMEN'S RECOVERY CENTER (PWRC) PROVIDES OUTPATIENT PROGRAMS THAT OFFER MEDICINE FOR OPIOID USE DISORDER (MOUD), INCLUDING BUPRENORPHINE PRODUCTS AND NALTREXONE, RESOURCES FOR BEHAVIORAL HEALTH COUNSELING, SOCIAL SUPPORT SERVICES, AND ROUTINE MEDICAL CARE. DURING THE THREE-YEAR CHNA CYCLE, THE PWRC CONTINUED TO GROW, SERVING MORE THAN 750 WOMEN BETWEEN JULY 2022 AND DECEMBER 2023 AND EXTENDING SERVICES TO LAWRENCE AND CLARION COUNTIES IN 2024. UPMC CONTINUES TO EXPLORE AND PROVIDE NEW RECOVERY OPTIONS THROUGH DRUG AND ALCOHOL REHABILITATION PROGRAMS. IN 2023, UPMC WESTERN BEHAVIORAL HEALTH AT TWIN

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LAKES OPENED A NEW, STATE-OF-THE-ART INPATIENT TREATMENT FACILITY IN SOMERSET COUNTY, WHICH INCREASED THE NUMBER OF BEDS BY 60 PERCENT, IMPROVING LOCAL ACCESS TO TREATMENT AND SUPPORT. IN ADDITION, UPMC NORTHWEST ESTABLISHED A RELATIONSHIP WITH THE VENANGO COUNTY JAIL TO ASSIST WITH A SUPPORT GROUP. IN NORTHWEST PENNSYLVANIA, UPMC WESTERN BEHAVIORAL HEALTH AT SAFE HARBOR IS IMPROVING ACCESS TO HARM REDUCTION SUPPLIES AND RESOURCES FOR PEOPLE IN ERIE COUNTY. IN 2024, SAFE HARBOR INSTALLED TWO NALOXONE VENDING MACHINES IN ITS FACILITY LOBBIES AND BECAME A RECOGNIZED ENTITY FOR HARM REDUCTION SUPPLIES THROUGH THE PENNSYLVANIA OVERDOSE PREVENTION PROGRAM. FINALLY, IN CENTRAL PENNSYLVANIA, UPMC IS PROVIDING ACCESS TO MEDICATION-ASSISTED TREATMENT (MAT) FOR PATIENTS WITH SUBSTANCE USE DISORDERS THROUGH A MOBILE UNIT. UPMC PINNACLE HOSPITALS CONTINUES TO PARTNER WITH THE CENTER FOR ADDICTION RECOVERY AT UPMC IN CENTRAL PA. TO HOST THE MEDICATION-ASSISTED TREATMENT (MAT) MOBILE UNIT. MAT PROVIDES MEDICATIONS, IN COMBINATION WITH COUNSELING AND BEHAVIORAL THERAPIES, TO TREAT ADDICTION TO OPIOIDS. THIS MAT MOBILE UNIT REDUCES TRANSPORTATION BARRIERS TO TREATMENT FOR PATIENTS WITH SUBSTANCE USE DISORDERS, ALLOWING THEM TO RECEIVE WEEKLY

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MAT SERVICES IN HARRISBURG. BETWEEN JULY 2022 AND DECEMBER 2023, THE MAT MOBILE UNIT HAD 617 PATIENT ENCOUNTERS IN DAUPHIN COUNTY.

EXTENDING ACCESS TO BEHAVIORAL HEALTH SERVICES ACROSS COMMUNITIES: USING TELEPSYCHIATRY, UPMC WESTERN PSYCHIATRIC HOSPITAL OFFERS ACCESS TO BEHAVIORAL HEALTH CARE TO PATIENTS IN UNDERSERVED, RURAL, AND SUBURBAN AREAS IN A VARIETY OF OUTPATIENT, INPATIENT, NURSING, AND REHABILITATION SETTINGS ACROSS 19 COUNTIES. UPMC WESTERN PSYCHIATRIC ALSO INTEGRATED BEHAVIORAL HEALTH SERVICES INTO PRIMARY CARE SETTINGS ACROSS THE UPMC NETWORK. THIS CO-LOCATION INITIATIVE EMBEDS BEHAVIORAL HEALTH THERAPISTS INTO PEDIATRIC, ADULT, AND GERIATRIC SETTINGS, RESULTING IN IMPROVED ACCESS TO CARE. TO HELP IMPROVE ACCESS TO BEHAVIORAL HEALTH PROVIDERS IN PITTSBURGH'S EASTERN SUBURBS, UPMC EAST INTEGRATED THREE PROVIDERS INTO PRIMARY CARE OFFICES IN 2023. UPMC EAST ALSO LAUNCHED A BEHAVIORAL HEALTH NAVIGATOR PROGRAM IN ITS EMERGENCY DEPARTMENT. TO BETTER SERVE PATIENTS AND BETTER EQUIP HOSPITAL STAFF WITH RESOURCES, UPMC EAST HIRED THREE BEHAVIORAL HEALTH SPECIALISTS TO WORK IN THE HOSPITAL'S EMERGENCY DEPARTMENT. THESE BEHAVIORAL HEALTH SPECIALISTS ARE PART OF THE BEHAVIORAL HEALTH NAVIGATOR PROGRAM, WHICH AIMS TO INCREASE CONNECTIONS

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WITH UPMC MCKEESPORT'S EMERGENCY DEPARTMENT EVALUATORS TO HELP PROVIDE TREATMENT FOR BEHAVIORAL HEALTH AND SUBSTANCE USE DISORDERS. IN BLAIR COUNTY, UPMC ALTOONA'S BEHAVIORAL HEALTH DEPARTMENT'S CRISIS CENTER CONTINUES TO PROVIDE ON-SITE, FACE-TO-FACE MENTAL HEALTH SERVICES FOR INDIVIDUALS AND FAMILIES EXPERIENCING A BEHAVIORAL HEALTH CRISIS AND TO PROVIDE INTERVENTION IN SITUATIONS TO PREVENT THEM FROM ESCALATING INTO CRISES. UPMC ALTOONA'S MOBILE CRISIS TEAM, PART OF UPMC ALTOONA'S BEHAVIORAL HEALTH DEPARTMENT'S CRISIS CENTER, RECEIVED A MOBILE CRISIS EXPANSION GRANT FROM THE OFFICE OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES (OMHSAS). FROM JULY 2021 TO JUNE 2023, THE GRANT WAS USED TO EXPAND MOBILE CRISIS SERVICES IN THE COMMUNITY, INCLUDING: HIRING THREE ADDITIONAL FULL-TIME CRISIS CLINICIANS AND A PART-TIME PEER SUPPORT STAFF; DEVELOPING A SYSTEM FOR WARM HAND-OFFS TO HELP ENSURE PATIENT FOLLOW-UP; AND IMPLEMENTING PROCESSES TO LINK PATIENTS TO ADDITIONAL TREATMENT AND SERVICES, SUCH AS ASSESSMENTS FOR INPATIENT PSYCHIATRIC HOSPITALIZATION AND CONNECTIONS WITH CARE IN THE COMMUNITY AFTER DISCHARGE. RECOGNIZING A HIGH NEED FOR LOCAL BEHAVIORAL HEALTH SERVICES, UPMC ALTOONA PARTNERED WITH THE BLAIR DRUG AND ALCOHOL PROGRAM, CITY OF

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ALTOONA, BLAIR COUNTY, PENNSYLVANIA DEPARTMENT OF DRUG AND ALCOHOL PROGRAM, AND THE U.S. DEPARTMENT OF HEALTH RESOURCES AND SERVICES TO SECURE FUNDING FOR AN EMERGENCY PSYCHIATRIC ASSESSMENT TREATMENT AND HEALTH UNIT (EMPATH UNIT) AT UPMC ALTOONA. UPMC ALTOONA IS IN THE PLANNING PHASE OF THE DEVELOPMENT OF THE EMPATH UNIT, WHICH IS DESIGNED FOR ACUTE PSYCHIATRIC PATIENTS TO RECEIVE ASSESSMENT AND TREATMENT. TO HELP MEET THE GROWING NEED FOR SPECIALIZED CHILD AND ADOLESCENT BEHAVIORAL HEALTH SERVICES, UPMC WESTERN BEHAVIORAL HEALTH OPENED A NEW FACILITY IN PITTSBURGH'S SOUTH SIDE NEIGHBORHOOD IN JANUARY 2023. THIS FACILITY INCLUDES SERVICES FOR YOUNG CHILDREN WITH EMOTIONAL AND BEHAVIORAL NEEDS, CHILDREN AND ADOLESCENTS WITH AUTISM AND DEVELOPMENTAL NEEDS, CHILDREN AND ADOLESCENTS THROUGH AGE 17 WHO HAVE EXPERIENCED TRAUMA, AND MOTHERS EXPERIENCING MOOD CHALLENGES DURING AND AFTER PREGNANCY OR THE BIRTH OF A CHILD. IN AUGUST 2023, UPMC CHILDREN'S HOSPITAL OF PITTSBURGH, IN COLLABORATION WITH UPMC WESTERN PSYCHIATRIC HOSPITAL, OPENED A PEDIATRIC BEHAVIORAL HEALTH WALK-IN CLINIC WHERE PATIENTS UP TO AGE 18 CAN BE SEEN FOR A VARIETY OF BEHAVIORAL HEALTH CONCERNS. AND, TO HELP REACH CHILDREN IN COMMUNITY SETTINGS, UPMC WESTERN

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PSYCHIATRIC IS COLLABORATING WITH UPMC CHILDREN'S HOSPITAL AND LOCAL SCHOOL PARTNERS TO INSERT THERAPISTS AND OTHER BEHAVIORAL HEALTH SUPPORT INTO SCHOOLS. ADDITIONALLY, UPMC MAGEE WOMENS HOSPITAL'S NEW AND EXPECTANT MOTHERS SPECIALIZED TREATMENT (NEST) OUTPATIENT PROGRAM SERVES PREGNANT AND POSTPARTUM WOMEN REQUIRING A HIGHER LEVEL OF CARE FOR DEPRESSION OR ANXIETY. LASTLY, IN NORTH CENTRAL PENNSYLVANIA, UPMC WILLIAMSPORT IS RECRUITING BEHAVIORAL HEALTH SPECIALISTS TO MEET LOCAL NEEDS. IN 2023, UPMC WILLIAMSPORT ADDED THREE NEW CLINICIANS TO ITS OUTPATIENT THERAPY SERVICES, AND IN 2024, THE HOSPITAL ADDED TWO MORE THERAPY CLINICIANS, TWO PSYCHIATRISTS, AND AN ADDITIONAL DAY OF CHILD/ADOLESCENT PSYCHIATRY SERVICES. IN JANUARY 2025, UPMC WILLIAMSPORT IMPLEMENTED TELEPSYCHIATRY SERVICES IN THE EMERGENCY DEPARTMENT (ED). IN PARTNERSHIP WITH UPMC WESTERN PSYCHIATRIC HOSPITAL IN PITTSBURGH, UPMC WILLIAMSPORT NOW OFFERS INTERACTIVE PSYCHIATRIC CARE THROUGH SECURE, REAL-TIME AUDIO AND VIDEO-CONFERENCING. TELEPSYCHIATRY SERVICES INCREASE ACCESS TO BEHAVIORAL HEALTH CARE IN RURAL COMMUNITIES. ADDRESSING SOCIAL DETERMINANTS OF HEALTH THROUGH SUPPORT PROGRAMS TARGETING TRADITIONALLY UNDERSERVED POPULATIONS: UPMC CONTINUES TO

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ADDRESS SOCIAL DETERMINANTS OF HEALTH (SDOH), WHICH ARE CONDITIONS IN THE PLACES WHERE PEOPLE LIVE, LEARN, WORK, AND PLAY THAT AFFECT A WIDE RANGE OF HEALTH RISKS AND OUTCOMES. FOOD INSECURITY IS A MAJOR CONCERN FOR MANY OF UPMC'S PATIENTS AND NEIGHBORS. TO HELP ADDRESS THIS ISSUE, UPMC CHILDREN'S ESTABLISHED A FOOD SECURITY NAVIGATION MODEL, FOCUSED ON CLINICIAN TRAINING, SCREENING, AND BENEFITS ENROLLMENT. WORKING WITH THE GREATER PITTSBURGH COMMUNITY FOOD BANK AND 412 FOOD RESCUE, UPMC MCKEESPORT LAUNCHED A FOOD PHARMACY PROGRAM TO HELP ENSURE THAT PATIENTS HAVE ACCESS TO HEALTHY MEALS. UPMC MCKEESPORT PATIENTS WHO PARTICIPATE ARE ALSO SCREENED FOR ASSISTANCE WITH MEDICATION, MEDICAL SUPPLIES, AND TRANSPORTATION. UPMC HOSPITALS IN NORTH CENTRAL PENNSYLVANIA CONTINUE TO DEVELOP STRONG PARTNERSHIPS, WHICH ARE INSTRUMENTAL IN HELPING TO ADDRESS FOOD INSECURITY. FOR EXAMPLE, UPMC COLE PARTNERED WITH THE LOCAL FARMERS MARKET, GOD'S FOOD PANTRY, AND BLUE MARBLE FARM TO HELP PATIENTS ACCESS LOCAL SOURCES FOR HEALTHY FOODS. UPMC COLE ALSO COLLABORATED WITH THE POTTER COUNTY COMMISSIONERS TO ESTABLISH A VIBRANT COMMUNITY GARDEN FOR THE RESIDENTS OF POTTER COUNTY. WITH 29 RAISED GARDEN BEDS, THIS COMMUNITY GARDEN HELPS EMPOWER COMMUNITY MEMBERS TO PLANT, GROW, AND

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HARVEST THEIR OWN PRODUCE; PROVIDES GARDENING EDUCATION; PROMOTES COMMUNITY INTERACTION; AND OFFERS SOLUTIONS TO FOOD INSECURITY. AND, IN OCTOBER 2023, UPMC COLE, UPMC MUNCY, AND UPMC WILLIAMSPORT INTRODUCED EMERGENCY FOOD BOXES IN THE EMERGENCY DEPARTMENT, INPATIENT, AND OUTPATIENT SETTINGS. PATIENTS IN NEED CAN NOW RECEIVE BOXES OF NONPERISHABLE FOOD ITEMS, LIKE CEREAL, RICE, PASTA, AND SOUPS, THROUGH A PARTNERSHIP WITH THE CENTRAL PENNSYLVANIA FOOD BANK. THIS HELPS ENSURE THAT PATIENTS DO NOT GO HOME HUNGRY AND HELPS THEM CONNECT WITH AVAILABLE RESOURCES. TO HELP ADDRESS THE RISING MATERNAL MORTALITY RATES FOR WOMEN OF COLOR, UPMC MAGEE-WOMENS IS ENGAGING POSTPARTUM WOMEN IN CARDIOVASCULAR MONITORING. A POSTPARTUM REMOTE BLOOD PRESSURE MONITORING PROGRAM FOR WOMEN WITH HYPERTENSIVE DISORDERS OF PREGNANCY OFFERS HOME MONITORING AND MANAGEMENT OF HYPERTENSION FROM THE TIME OF HOSPITAL DISCHARGE THROUGH THE FIRST SIX WEEKS AFTER DELIVERY. BETWEEN JULY 2022 AND DECEMBER 2023, 2,241 WOMEN ENGAGED IN THE HOSPITAL'S REMOTE BLOOD PRESSURE MONITORING PROGRAM. ADDITIONALLY, UPMC MAGEE HOSTS COMMUNITY BABY SHOWERS, WHICH INCLUDE EDUCATION ABOUT PREECLAMPSIA AND GESTATIONAL DIABETES. THE HOSPITAL PROVIDES BLOOD PRESSURE CUFFS, GLUCOMETERS, AND

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SCALES TO PREGNANT WOMEN ATTENDEES. TO HELP ADDRESS KNOWN DISPARITIES IN MATERNAL HEALTH, UPMC MAGEE-WOMENS HOSPITAL CCNECTS PATIENTS TO DOULAS, WHO SERVE AS ADVOCATES FOR WOMEN IN ALL PHASES OF THE BIRTH CONTINUUM. BETWEEN JULY 2022 AND DECEMBER 2023, 1,358 PATIENTS WORKED WITH DOULAS AT MAGEE, AND 1,351 PATIENTS HAD A DOULA AT THEIR DELIVERY WITH SUPPORT FROM THE BIRTH CIRCLE DOULAS PROGRAM. IN NORTH CENTRAL PENNSYLVANIA, UPMC LAUNCHED A RURAL FAMILY MEDICINE RESIDENCY PROGRAM IN 2023 TO HELP MEET THE HEALTH NEEDS OF RURAL COMMUNITIES. LEVERAGING THE EXISTING INFRASTRUCTURE AT UPMC WILLIAMSPORT, MEDICAL RESIDENTS ARE TRAINED TO TREAT MANY HEALTH ISSUES - FROM HEART PROBLEMS TO CHRONIC PAIN, ADDICTION TREATMENT, AND EVEN MENTAL HEALTH CARE. THE RESIDENTS WILL SPEND THEIR SECOND AND THIRD YEARS AT UPMC'S CRITICAL ACCESS HOSPITALS - UPMC WELLSBORO AND UPMC COLE. FINALLY, IN CENTRAL PENNSYLVANIA, UPMC'S STREET MEDICINE PROGRAM CONTINUES TO OFFER PRIMARY CARE TO THOSE THAT ARE UNSHELTERED AND EXPERIENCING ALL KINDS OF HOMELESSNESS. THE STREET MEDICINE TEAM PERFORMS WEEKLY OUTREACH IN THE ENCAMPMENTS, SHELTERS, AND ANYWHERE PATIENTS FEEL COMFORTABLE, HELPING TO OVERCOME BARRIERS TO CARE FOR PEOPLE EXPERIENCING HOMELESSNESS. IN ADDITION, HOMELESS INDIVIDUALS

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CAN ACCESS CARE THROUGH VIRTUAL VISITS AT RESIDENTIAL SHELTERS IN HARRISBURG. FROM JULY 2022 TO DECEMBER 2023, 896 HOMELESS INDIVIDUALS RECEIVED CARE OR SERVICES FROM THE STREET MEDICINE PROGRAM. AND, IN MAY 2024, UPMC'S STREET MEDICINE TEAM AND COMMUNITY HEALTH WORKER ROLES BEGAN SERVING UPMC MEMORIAL'S COMMUNITY - REACHING OUT TO HOMELESS INDIVIDUALS IN NEED OF MEDICAL CARE AND SUPPORT SERVICES.

SUPPORTING SENIORS: TO HELP ADDRESS SENIOR HEALTH ISSUES, UPMC HOSPITALS CONTINUE TO HOST EDUCATIONAL SEMINARS ABOUT A RANGE OF HEALTH TOPICS, PARTICIPATE IN HEALTH FAIRS, OFFER MONTHLY VISITS TO SENIOR COMMUNITIES AND SENIOR CENTERS, AND PROVIDE CAREGIVER SUPPORT AND RESOURCES. FOR EXAMPLE, UPMC EAST OFFERS EDUCATION AND HEALTH SCREENINGS FOR SENIORS. OVER THE LAST THREE YEARS, UPMC EAST PARTNERED WITH THE MONROEVILLE SENIOR CENTER AND THE MONROEVILLE CHAMBER OF COMMERCE TO OFFER HEALTH SCREENINGS TO SENIORS, INCLUDING CHOLESTEROL AND GLUCOSE, HAND GRIP, STROKE RISK ANALYSIS, AND SPINE-RELATED RANGE OF MOTION SCREENINGS. IN ADDITION, UPMC ST. MARGARET'S GERIATRIC CARE CENTER, WITH LOCATIONS IN BOTH ASPINWALL, PA, AND OAKMONT, PA, CONTINUES TO OFFER COMPREHENSIVE CARE AND SUPPORT FOR OLDER ADULTS AND THEIR FAMILIES. IT IS AN EVALUATION

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AND TREATMENT CENTER DESIGNED TO MEET THE HEALTH CARE NEEDS OF PEOPLE OVER THE AGE OF 60. ALONG WITH SPECIALIZED MEDICAL AND PSYCHIATRIC CARE, GERIATRIC PROFESSIONALS ASSIST OLDER ADULTS AND THEIR FAMILIES IN MAKING HEALTH CARE DECISIONS TO FULFILL THE PATIENT'S DAILY NEEDS. UPMC ST. MARGARET ALSO OFFERS FREE FLU SHOT CLINICS FOR SENIORS TO HELP PROTECT THEM DURING FLU SEASON. THE HOSPITAL HOSTS AN ANNUAL DRIVE-THRU FREE FLU SHOTS FOR SENIORS EVENT - REACHING AN AVERAGE OF 90 SENIORS EACH OCTOBER. AND, TO HELP REDUCE TRANSPORTATION BARRIERS TO CARE FOR SENIORS, UPMC ST. MARGARET PARTNERS WITH ST. MARGARET FOUNDATION, NORTH HILLS COMMUNITY OUTREACH, AND WESLEY FAMILY SERVICES TO OPERATE FREE SHUTTLE SERVICES FOR SENIOR RESIDENTS TO THE HOSPITAL, MEDICAL OFFICES, DIAGNOSTIC CENTERS, AND DISCOUNT STORES. THIS FREE RIDES FOR SENIORS PROGRAM SUPPORTS HEALTHY MINDS AND BODIES AMONG THE OLDER ADULT POPULATION - AND PROVIDES AN OPPORTUNITY TO CREATE A "COMMUNITY CENTER ON WHEELS" FOR THE AREA'S SENIORS IN NEED. ADDITIONALLY, IN NORTH CENTRAL PENNSYLVANIA, UPMC OFFERS AGE WELL, A PROGRAM DESIGNED FOR SENIORS WHOSE MEMBERS RECEIVE BENEFITS, SUCH AS A QUARTERLY NEWSLETTER WITH HEALTH TIPS AND RECIPES, AND OPPORTUNITIES TO MAKE FRIENDS AND BUILD RELATIONSHIPS WITH LOCAL HEALTH

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CARE PROVIDERS. OVER THE PAST THREE YEARS, UPMC STAFF VISITED SENIOR CENTERS, ENGAGED WITH SENIOR GROUPS, AND PARTICIPATED AS KEYNOTE SPEAKERS AT COMMUNITY EVENTS. IN 2025, AGE WELL'S MEMBERSHIP WAS APPROXIMATELY 1,750. TO FURTHER SUPPORT SENIOR HEALTH IN NORTH CENTRAL PENNSYLVANIA, UPMC COLE OFFERS SILVER SNEAKERS CLASSES AT ITS COUDERSPORT AND EMPORIUM WELLNESS CENTERS AT A DISCOUNTED RATE FOR ALL SENIORS.

FOR MORE DETAILED INFORMATION ON UPMC'S CHNA EFFORTS, SEE THE HOSPITAL-SPECIFIC PROGRESS REPORTS INCLUDED IN THE CHNA REPORTS:

[HTTPS://WWW.UPMC.COM/ABOUT/COMMUNITY-COMMITMENT/COMMUNITY-HEALTH-NEEDS-ASSESSMENT](https://www.upmc.com/about/community-commitment/community-health-needs-assessment)

FOR MORE INFORMATION ON UPMC'S COMMUNITY BENEFITS EFFORTS, SEE THE ORGANIZATION'S COMMUNITY BENEFITS REPORT, AVAILABLE AT:

[HTTPS://WWW.UPMC.COM/ABOUT/COMMUNITY-COMMITMENT/BENEFITS-REPORT](https://www.upmc.com/about/community-commitment/benefits-report)

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PART VI

LINE 6 SEE SCHEDULE O

LINE 7 STATES RECEIVING COMMUNITY BENEFIT REPORT:

PENNSYLVANIA

**SCHEDULE I
(Form 990)**

Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Employer identification number

20-8295721

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) A GLIMMER OF HOPE PO BOX 908 WEXFORD, PA 15090-0908	25-1627978	501 (C) (3)	37,600.				GENERAL SUPPORT
(2) AARONS ACRES 1861 CHARTER LANE LANCASTER, PA 17601	11-3820295	501 (C) (3)	9,149.				GENERAL SUPPORT
(3) ACTION HOUSING INC 611 WILLIAM PENN WAY PITTSBURGH, PA 15219	25-0965469	501 (C) (3)	6,425.				COMMUNITY DEVEL
(4) AFRICAN AMERICAN CULTURAL CENTER 980 LIBERTY AVENUE PITTSBURGH, PA 15222	47-2697273	501 (C) (3)	60,000.				GENERAL SUPPORT
(5) AFRO AMERICAN MUSIC INSTITUTE INC 7131 HAMILTON AVE PITTSBURGH, PA 15208	25-1669025	501 (C) (3)	8,000.				GENERAL SUPPORT
(6) AHMADIYYA MOVMENT IN ISLAM INC 15000 GOOD HOPE RD SILVER SPRG, MD 20905	52-6054158	N/A	35,000.				GENERAL SUPPORT
(7) BLAIN PFO 132 BLAIN ROAD BLAIN, PA 17006	23-2946513	501 (C) (3)	10,000.				GENERAL SUPPORT
(8) ALDI INC 6000 NORTH NOAH DRIVE SAXONBURG, PA 16056	36-3735912	N/A	86,975.				GENERAL SUPPORT
(9) ALLEGHENY CONF ON COMMUNITY DEVELOPMENT 11 STANWIX ST PITTSBURGH, PA 15222-1312	25-0965213	501 (C) (3)	200,000.				GENERAL SUPPORT
(10) ALLIES FOR HEALTH WELLBEING 410 FORELAND ST PITTSBURGH, PA 15212	25-1557128	501 (C) (3)	11,650.				GENERAL SUPPORT
(11) ALPHA OMICRON LAMBDA CHARITIES PO BOX 4991 PITTSBURGH, PA 15206	68-0516246	N/A	6,500.				GENERAL SUPPORT
(12) ALS THERAPY DEVELOPMENT FOUNDATION INC 480 ARSENAL STREET WATERTOWN, MA 02472	04-3462719	501 (C) (3)	15,000.				ALS RESEARCH

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 302
- 3** Enter total number of other organizations listed in the line 1 table 93

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (Rev. 12-2024)

**SCHEDULE I
(Form 990)**

Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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(1) ALTOONA COMMUNITY THEATRE 1213 12TH ST ALTOONA, PA 16603	25-6078781	501 (C) (3)	6,720.				COMMUNITY DEVELOP
(2) ALTOONA SYMPHONY ORCHESTRA 1331 - 12TH AVENUE ALTOONA, PA 16601	23-1513718	501 (C) (3)	7,200.				GENERAL SUPPORT
(3) ALUMNI THEATER COMPANY PO BOX 8185 PITTSBURGH, PA 15217	45-2952278	501 (C) (3)	10,000.				GENERAL SUPPORT
(4) ALZHEIMERS DISEASE AND RELATED DIS ASSOC 3544 N PROGRESS AVE HARRISBURG, PA 17110	25-1510692	501 (C) (3)	12,500.				ALZHEIMERS RES
(5) AM MANAGEMENT COMPANY 2635 PROSPECT AVE #1 ALLENTOWN, PA 18103	20-8855159	N/A	15,248.				GENERAL SUPPORT
(6) AMEN CORNER PITTSBURGH 707 GRANT STREET PITTSBURGH, PA 15219	84-2031453	501 (C) (4)	5,910.				COMMUNITY DEVELOP
(7) AMER ASSOC OF PEOPLE WITH DISABILITIES 1629 K ST NW STE 950 WASHINGTON, DC 20006	52-1930174	501 (C) (3)	30,000.				GENERAL SUPPORT
(8) AMER FOUNDATION FOR SUICIDE PREVENTION 3811 OHARA ST PITTSBURGH, PA 15213	13-3393329	501 (C) (3)	31,100.				SUICIDE AWARENESS
(9) AMERICAN CANCER SOCIETY INC 2 CRESENT PK WARREN, PA 16365	13-1788491	501 (C) (3)	267,003.				CANCER RESEARCH
(10) AMERICAN DIABETES ASSOCIATION PO BOX 631737 BALTIMORE, MD 21263-1737	13-1623888	501 (C) (3)	60,000.				DIABETES RESEARCH
(11) AMERICAN FUNDS CAPITAL GROUP 5300 ROBIN HOOD RD NORFOLK, VA 23513	99-9999999	N/A	25,000.				GENERAL SUPPORT
(12) AMERICAN HEART ASSOCIATION 4250 CRUMS MILL RD HARRISBURG, PA 17112	13-5613797	501 (C) (3)	602,800.				HEART RESEARCH

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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Schedule I (Form 990) (Rev. 12-2024)

**SCHEDULE I
(Form 990)**

Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

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- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) AMERICAN LUNG ASSOCIATION 241 4TH AVE PITTSBURGH, PA 15222	25-1825116	501 (C) (3)	25,000.				LUNG RESEARCH
(2) AMERICAN RED CROSS 431 18TH ST NW WASHINGTON, DC 20006	53-0196605	501 (C) (3)	22,500.				GENERAL SUPPORT
(3) ARTHRITIS FOUNDATION 1355 PEACHTREE ST ATLANTA, GA 30309	58-1341679	501 (C) (3)	80,000.				ARTHRITIS RESEARCH
(4) ATTACK THEATRE INCORPORATED 5720 FRIENDSHIP AVE PITTSBURGH, PA 15206	20-1909284	501 (C) (3)	7,500.				GENERAL SUPPORT
(5) AUTISM SPEAKS 50 F. ST NW WASHINGTON, DC 20001	20-2329938	501 (C) (3)	13,550.				AUTISM RESEARCH
(6) AVALON GOLF AND COUNTRY CLUB ONE AMERICAN WAY WARREN, OH 44484-5555	20-0293024	N/A	32,494.				GENERAL SUPPORT
(7) BACKYARD BROADCASTING OF PENNSYLVANIA 1685 FOUR MILE DR WILLIAMSPORT, PA 17701	84-2035451	N/A	35,000.				GENERAL SUPPORT
(8) BEVERLYS BIRTHDAYS 11065 PARKER DR NORTH HUNTINGTON, PA 15642	45-4248006	501 (C) (3)	22,608.				GENERAL SUPPORT
(9) BIG A BOOSTER CLUB 813 4TH AVE ALTOONA, PA 16602	25-1464457	501 (C) (3)	8,400.				GENERAL SUPPORT
(10) BIG BROTHERS BIG SISTERS OF GREATER PGH 5989 PENN CIRCLE SOUTH PITTSBURGH, PA 15206	25-6074707	501 (C) (3)	25,000.				COMMUNITY DEVEL
(11) BLACK POLITICAL EMPOWERMENT PROJECT 2201 WYLIE AVENUE PITTSBURGH, PA 15219	47-2507780	501 (C) (3)	30,000.				GENERAL SUPPORT
(12) BLAIR COUNTY ARTS FOUNDATION 1212 TWELFTH AVE. ALTOONA, PA 16601	25-1180869	501 (C) (3)	7,700.				GENERAL SUPPORT

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
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Schedule I (Form 990) (Rev. 12-2024)

**SCHEDULE I
(Form 990)**

Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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OMB No. 1545-0047

**Open to Public
Inspection**

Employer identification number

20-8295721

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
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(1) ALTOONA-BLAIR COUNTY DEVELOPMENT CORP 3900 INDUSTRIAL PRK DR ALTOONA, PA 16602	25-1143641	501 (C) (3)	18,880.				GENERAL SUPPORT
(2) BLIND AND VISION REHAB SERVICES OF PGH 1816 LOCUST ST PITTSBURGH, PA 15219	25-1803195	501 (C) (3)	8,000.				GENERAL SUPPORT
(3) BLOOMFIELD LITTLE ITALY DAYS INC 2349 FENN AVE PITTSBURGH, PA 15222	46-0651769	N/A	12,500.				GENERAL SUPPORT
(4) THE BLOOMSBURG UNIVERSITY FOUNDATION INC 50 EAST MAIN ST BLOOMSBURG, PA 17815	23-7068491	501 (C) (3)	40,000.				GENERAL SUPPORT
(5) BOROUGH OF GREENVILLE 125 MAIN STREET GREENVILLE, PA 16125	25-6000376	N/A	35,000.				GENERAL SUPPORT
(6) BRASHEAR ASSOCIATION 2005 SARAH ST PITTSBURGH, PA 15203	25-0369810	N/A	10,000.				GENERAL SUPPORT
(7) BREAKTHROUGH TLD - WESTERN AND CENTRAL P 960 FENN AVE PITTSBURGH, PA 15222	23-1907729	501 (C) (3)	60,250.				GENERAL SUPPORT
(8) BRIDGETOWER OFCC LLC PO BOX 745931 ATLANTA, GA 30374	85-3333083	N/A	15,200.				GENERAL SUPPORT
(9) BUHL PARK CORPORATION 715 HAZEN RD HERMITAGE, PA 16148	20-3453034	501 (C) (3)	8,100.				GENERAL SUPPORT
(10) CAMP RAISING SPIRITS GROUP 564 FORBES AVE PITTSBURGH, PA 15219	47-5574829	501 (C) (3)	6,000.				COMMUNITY LEVEL
(11) CANCER BRIDGES 2816 SMALLMAN ST PITTSBURGH, PA 15222	25-1845284	501 (C) (3)	80,165.				CANCER RESEARCH
(12) GIRLS ON THE RUN MID STATE PA 123 N ENOLA DR ENOLA, PA 17025	27-5095044	501 (C) (3)	25,000.				GENERAL SUPPORT

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(1) CARLISLE AREA ECONOMIC DEVELOPMENT CORPO 801 S HANOVER STREET CARLISLE, PA 17013	23-1702304	501 (C) (3)	16,598.				GENERAL SUPPORT
(2) CARLOW UNIVERSITY 3333 FIFTH AVENUE PITTSBURGH, PA 15213	25-0965438	501 (C) (3)	10,000.				GENERAL SUPPORT
(3) CARNEGIE INSTITUTE 4400 FORBES AVE PITTSBURGH, PA 15213	25-0965280	501 (C) (3)	30,000.				GENERAL SUPPORT
(4) CARNEGIE MELLON UNIVERSITY 5000 FORBES AVENUE PITTSBURGH, PA 15213	25-0969449	501 (C) (3)	6,000.				GENERAL SUPPORT
(5) CASA SAN JOSE 933 BROOKLINE BLVD PITTSBURGH, PA 15226	46-4729004	501 (C) (3)	9,500.				GENERAL SUPPORT
(6) CATHOLIC CHARITIES OF THE DIOCESE OF PG 212 NINTH ST PITTSBURGH, PA 15222	25-1326213	501 (C) (3)	30,000.				GENERAL SUPPORT
(7) CATHOLIC YOUTH ASSOC OF PITTSBURGH INC 286 MAIN ST PITTSBURGH, PA 15201	25-0964596	501 (C) (3)	10,000.				GENERAL SUPPORT
(8) CCAC EDUCATIONAL FOUNDATION 800 ALLEGHENY AVE PITTSBURGH, PA 15233	25-1364469	501 (C) (3)	100,000.				CCAC ACANTIONALACCVE
(9) CELEBRATE POSITIVE LLC 9055 FOREST PATH DR GAINESVILLE, GA 30506	27-2198733	N/A	8,500.				GENERAL SUPPORT
(10) CENTER FOR THE THEATRE ARTS 250 MT LEBANON BLVD PITTSBURGH, PA 15234	25-1407710	501 (C) (3)	10,000.				GENERAL SUPPORT
(11) THE CENTER THAT CARES 2701 CENTRE AVENUE PITTSBURGH, PA 15219	25-1823715	N/A	10,000.				GENERAL SUPPORT
(12) CENTRAL BLAIR COUNTY PARK AND REC COMM 2101 FIFTH AVE ALTOONA, PA 16602	23-6003188	N/A	11,500.				GENERAL SUPPORT

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**SCHEDULE I
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Department of the Treasury
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Name of the organization

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**Grants and Other Assistance to Organizations,
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(1) CENTRAL CATHOLIC HIGH SCHOOL 504 ST CLAIR DR VERONA, PA 15147	20-0478989	501 (C) (3)	14,362.				GENERAL SUPPORT
(2) CENTRAL PA COMMUNITY FOUNDATION 1330 ELEVENTH AVE ALTOONA, PA 16602	25-1761379	501 (C) (3)	9,770.				GENERAL SUPPORT
(3) CENTRAL PENN BUSINESS GROUP ON HEALTH 115 EAST KING STREET LANCASTER, PA 17602	22-2547599	501 (C) (6)	17,750.				GENERAL SUPPORT
(4) CENTRAL PENN COLLEGE PO BOX 309 SUMMERDALE, PA 17093	23-1857027	N/A	60,000.				GENERAL SUPPORT
(5) CENTRAL PENNSYLVANIA COLLEGE EDUCATION FDN 600 VALLEY RD SUMMERDALE, PA 17093	23-2242116	501 (C) (3)	57,000.				GENERAL SUPPORT
(6) CE-PROBIKES LLC DBA PRO BIKES CARNEGIE, PA 15106	26-2571163	N/A	10,000.				GENERAL SUPPORT
(7) CHABAD JEWISH CENTER OF MONROEVILLE INC 137 MONTICELLO DR MONROEVILLE, PA 15146	27-0540008	501 (C) (3)	6,500.				GENERAL SUPPORT
(8) CHABAD OF SQUIRREL HILL INC 1700 BEECHWOOD BLVD PITTSBURGH, PA 15217	83-3424533	501 (C) (3)	10,000.				GENERAL SUPPORT
(9) CHILDRENS AID SOCIETY FOUNDATION 222 W MAIN ST SOMERSET, PA 15501	25-0967470	501 (C) (3)	10,000.				GENERAL SUPPORT
(10) CHILDRENS HEART FOUNDATION 5 REVERE DRIVE NORTHBROOK, IL 60062	36-4077528	501 (C) (3)	7,500.				HEART DEFECT RES
(11) CHILDRENS HOME OF PITTSBURGH 5324 PENN AVE PITTSBURGH, PA 15224	25-0965292	501 (C) (3)	10,000.				COMMUNITY DEVEL
(12) CHILDRENS HOSPITAL OF PGH FOUNDATION 4401 PENN AVE PITTSBURGH, PA 15224	25-1865744	501 (C) (3)	67,000.				HEALTHCARE SUPPORT

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(1) CHILDRENS MUSEUM OF PITTSBURGH 10 CHILDRENS WAY PITTSBURGH, PA 15212	25-1379704	501 (C) (3)	9,046.				COMMUNITY DEVELOP
(2) CHRISTIAN CHURCHES UNITED OF THE TRI COU 413 S 19TH ST HARRISBURG, PA 17104	23-2085603	501 (C) (3)	27,500.				GENERAL SUPPORT
(3) CHUCK COOPER FOUNDATION 49 THORNCREST DR PITTSBURGH, PA 15235-5215	27-4722527	501 (C) (3)	7,500.				GENERAL SUPPORT
(4) CITY OF FARRELL 500 ROEMER BLVD FARRELL, PA 16121	25-6000858	GOVERNMENT	36,500.				GENERAL SUPPORT
(5) CITY OF FRANKLIN PO BOX 511 FRANKLIN, PA 16323	25-6000859	GOVERNMENT	5,985.				GENERAL SUPPORT
(6) CITY THEATRE 1300 BINGHAM ST PITTSBURGH, PA 15203	25-1554580	501 (C) (3)	15,000.				GENERAL SUPPORT
(7) CIVIC LIGHT OPERA ASSOC OF GREATER PGH 719 LIBERTY AVE PITTSBURGH, PA 15222	25-6000890	501 (C) (3)	7,500.				GENERAL SUPPORT
(8) CIVICALLY INC 1001 WOOD ST PITTSBURGH, PA 15221	81-1401674	501 (C) (3)	6,000.				GENERAL SUPPORT
(9) THE CLINIC FOR SPECIAL CHILDREN INC 535 BUNKER HILL RD STRASBURG, PA 17579	23-2555373	501 (C) (3)	10,000.				GENERAL SUPPORT
(10) CLINTON COUNTY FAIR ASSOCIATION PO BOX 174 MACKEYVILLE, PA 17750	23-2133293	501 (C) (3)	10,000.				GENERAL SUPPORT
(11) COLE FOUNDATION INC 1001 E SECOND ST COUDERSPORT, PA 16915	45-5417308	501 (C) (3)	8,003.				GENERAL SUPPORT
(12) COLUMBIA UNIVERSITY 615 WEST 131ST ST NEW YORK, NY 10027-7922	13-5598093	501 (C) (3)	7,500.				GENERAL SUPPORT

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(1) COMMONWEALTH OF PENNSYLVANIA 100 W STIN SQ DR PITTSBURGH, PA 15219	23-1726791	GOVERNMENT	11,967.				GENERAL SUPPORT
(2) COMMUNITY EVENTS LLC 7 WEST STATE ST SHARON, PA 16146	83-2623628	N/A	6,950.				GENERAL SUPPORT
(3) COMMUNITY FOUNDATION OF GREATER JOHNSTOWN 216 FRANKLIN ST JOHNSTOWN, PA 15901	25-1657373	501(C)(3)	6,824.				COMMUNITY LEVEL
(4) COMMUNITY HUMAN SERVICES CORP 374 LAWN ST PITTSBURGH, PA 15213	25-1219610	501(C)(3)	33,624.				COMMUNITY LEVEL
(5) COMMUNITY LIVER ALLIANCE 612 SHADY OAK CT MARS, PA 16046	46-1909171	501(C)(3)	55,000.				LIVER RESEARCH
(6) COMMUNITY THEATRE LEAGUE INC 100 WEST THIRD ST WILLIAMSPORT, PA 17701	23-2358507	501(C)(3)	15,000.				COMMUNITY LEVEL
(7) CONNECTING CHAMPIONS 6024 BROAD STREET PITTSBURGH, PA 15206	45-2831126	501(C)(3)	15,000.				GENERAL SUPPORT
(8) CORO MEDICAL LLC 416 MARY LINDSAY POLK DR FRANKLIN, TN 37067	82-2669986	N/A	10,570.				GENERAL SUPPORT
(9) CRANBERRY TOWNSHIP COMMUNITY CHEST 2525 ROCHESTER RD CRANBERRY TWP, PA 16066	25-1484323	501(C)(3)	25,000.				GENERAL SUPPORT
(10) CRIBS FOR KIDS 5450 SECOND AVE PITTSBURGH, PA 15207	25-1442806	501(C)(3)	6,650.				COMMUNITY LEVEL
(11) CROHNS AND COLITIS FOUNDATION OF AMERICA 5001 BAUM BLVD PITTSBURGH, PA 15213	13-6193105	501(C)(3)	20,000.				CHRON & COLITIS RES
(12) CULTURAL ALLIANCE OF YORK COUNTY 2536 EASTERN BLVD YORR, PA 17402	23-2992925	501(C)(3)	11,000.				GENERAL SUPPORT

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(1) CUMBERLAND COUNTY OF PA ONE COURTHOUSE SQUARE CARLISLE, PA 17013	23-6003119	GOVERNMENT	62,143.				GENERAL SUPPORT
(2) CUMBERLAND VALLEY SCHOOL DISTRICT 6205 CHARING CROSS MECHANICSBURG, PA 17050	23-6005324	N/A	200,000.				GENERAL SUPPORT
(3) CUTTING EDGE BASEBALL 1700 W 4TH STREET WILLIAMSPORT, PA 17701	47-2078456	N/A	158,500.				GENERAL SUPPORT
(4) CYSTIC FIBROSIS FOUNDATION 4550 MONTGOMERY AVE BETHESDA, MD 20814	13-1930701	501(C)(3)	27,500.				CYSTIC FIBROSIS RES
(5) DAUPHIN COUNTY CASA 2080 LINGLESTOWN RD HARRISBURG, PA 17110	83-1780362	501(C)(3)	35,000.				GENERAL SUPPORT
(6) DAUPHIN COUNTY COMMUNITY FUND 100 FORT HUNTER ROAD HARRISBURG, PA 17110	30-0746983	501(C)(3)	19,000.				GENERAL SUPPORT
(7) DECLYNS DREAM INC 2538 BLOSSOM LANE NEW CASTLE, PA 16105	92-3379347	501(C)(3)	6,000.				GENERAL SUPPORT
(8) DENVER POLICE BLUE HAT FOUNDATION 700 W 39TH AVE DENVER, CO 80216	84-1510625	501(C)(3)	20,099.				GENERAL SUPPORT
(9) DISTRICT 4 COACHES ASSOCIATION 435 RUSSELL AVE WILLIAMSPORT, PA 17701	88-2176333	N/A	10,000.				GENERAL SUPPORT
(10) DIVERSITY MBA FOUNDATION NFP 24 EAST 107TH ST CHICAGO, IL 60628	85-2129949	N/A	25,000.				GENERAL SUPPORT
(11) DOLLAR ENERGY FUND INC PO BOX 42329 PITTSBURGH, PA 15203	25-1442933	501(C)(3)	10,000.				GENERAL SUPPORT
(12) DOWN SYNDROME ASSOC OF PITTSBURGH 5513 WILLIAM FLYNN HWY GIBSONIA, PA 15044	25-1621542	501(C)(3)	15,000.				DOWN SYNDROME RES

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(1) DOWNTOWN CARLISLE ASSOCIATION 53 WEST SOUTH STREET CARLISLE, PA 17033	23-2224862	501 (C) (3)	10,000.				GENERAL SUPPORT
(2) DUQUESNE LIGHT CO PO BOX 10 PITTSBURGH, PA 15230-0010	25-0451600	N/A	12,196.				GENERAL SUPPORT
(3) DUQUESNE UNIVERSITY OF THE HOLY SPIRIT 600 FOREES AVE PITTSBURGH, PA 15264	25-1035663	501 (C) (3)	747,313.				GENERAL SUPPORT
(4) EAST END YOUTH BASEBALL PO BOX 289 ALTOONA, PA 16603	26-0739018	501 (C) (3)	8,500.				COMMUNITY DEVEL
(5) EPILEPSY ASSOCIATION WESTERN CENTRAL PA 1501 REEDSDALE ST PITTSBURGH, PA 15233	23-7241930	501 (C) (3)	26,000.				EPILEPSY RESEARCH
(6) ERIE DOWNTOWN DEVELOPMENT CORPORATION 417 STATE STREET ERIE, PA 16501	82-0709054	501 (C) (3)	50,000.				COMMUNITY DEVEL
(7) ERIE DOWNTOWN PARTNERSHIP 140 EAST 5TH ST ERIE, PA 16507	45-0464988	501 (C) (3)	12,500.				GENERAL SUPPORT
(8) LIONS CLUB OF ERIE SAVE-AN-EYE FUND INC 2545 WEST 26TH ST ERIE, PA 16506	25-0930059	501 (C) (3)	7,000.				GENERAL SUPPORT
(9) EXACT COMMUNICATION INC 315 RIDGE ROAD ANNVILLE, PA 17003	43-1976327	N/A	9,291.				GENERAL SUPPORT
(10) FAITH UNITED METHODIST CHURCH OF FOX CHA 261 W CHAPEL RDG RD PITTSBURGH, PA 15238	25-1544985	501 (C) (3)	7,500.				GENERAL SUPPORT
(11) FAMILY HOUSE INC 5001 BAUM BLVD PITTSBURGH, PA 15213	25-1519959	501 (C) (3)	154,462.				COMMUNITY DEVEL
(12) FAMILY LINKS INC 401 N HIGHLAND AVE PITTSBURGH, PA 15206	25-1209266	501 (C) (3)	5,500.				COMMUNITY DEVEL

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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Schedule I (Form 990) (Rev. 12-2024)

**SCHEDULE I
(Form 990)**

Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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OMB No. 1545-0047

**Open to Public
Inspection**

Employer identification number

20-8295721

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) FARRELL AREA SCHOOL DISTRICT 1600 ROEMER BLVD FARRELL, PA 16121	25-6010685	GOVERNMENT	35,150.				GENERAL SUPPORT
(2) FASHIONAFRICANA 5653 BEACON ST PITTSBURGH, PA 15217	85-2034011	N/A	12,500.				GENERAL SUPPORT
(3) FIRST COMMUNITY FOUNDATION PARTNERSHIP O 330 FINE ST WILLIAMSPORT, PA 17707	24-6013117	501(C)(3)	23,750.				COMMUNITY DEVEL
(4) FIRST RESPONSE TRAINING LLC 142 HAMILTON ST EXT JEFFERSON, PA 15344	88-1939568	N/A	124,020.				GENERAL SUPPORT
(5) FONTANAFEST 1309 CREEDMORE AVE PITTSBURGH, PA 15226	26-0301352	501(C)(3)	8,000.				GENERAL SUPPORT
(6) FOUNDATION FOR ENHANCING COMMUNITIES 200 N 3RD ST HARRISBURG, PA 17101	01-0564355	501(C)(3)	124,110.				GENERAL SUPPORT
(7) FOUNDATION FOR THE CENTRAL DAUPHIN SCHOO 600 RUTHERFORD RD HARRISBURG, PA 17109	36-4511725	501(C)(3)	75,000.				GENERAL SUPPORT
(8) FRANK CALANDRA JR FOUNDATION 258 KAPPA DRIVE PITTSBURGH, PA 15238	92-1275363	N/A	10,000.				GENERAL SUPPORT
(9) FRATERNAL ASSOC OF PROF PARAMEDICS PO BOX 8454 PITTSBURGH, PA 15220	25-1368007	501(C)(5)	7,000.				GENERAL SUPPORT
(10) FULTON COUNTY MEDICAL CENTER 214 PEACH ORCH RD MCCONNELLSBURG, PA 17233	23-1401561	501(C)(3)	100,000.				GENERAL SUPPORT
(11) FUSION ASSET MANAGEMENT 4411 N FRONT ST HARRISBURG, PA 17110	27-4403165	N/A	7,777.				GENERAL SUPPORT
(12) FIGHT FORE CANCER 21955 PLANK ROAD VENANGO, PA 16440	19-5568279	N/A	9,490.				GENERAL SUPPORT

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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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(1) GATEWAY MEDICAL SOCIETY PO BOX 99966 PITTSBURGH, PA 15233	02-0704699	501 (C) (3)	75,000.				GENERAL SUPPORT
(2) GHC YORK OPS LLC 1770 BARLEY RD YORK, PA 17408	46-3335107	N/A	22,283.				GENERAL SUPPORT
(3) GIORGIO FOUNDATION 118 McDONALD DR DUNCANVILLE, PA 16635	46-6548416	501 (C) (3)	6,000.				GENERAL SUPPORT
(4) GIRL SCOUTS WESTERN PENNSYLVANIA 503 MARTINDALE ST PITTSBURGH, PA 15212	25-1126094	501 (C) (3)	10,000.				COMMUNITY DEVEL
(5) GIVING IT FORWARD TOGETHER 5513 BEACON ST PITTSBURGH, PA 15217	38-3975053	501 (C) (3)	20,000.				GENERAL SUPPORT
(6) GLOBAL LINKS 700 TRUMBULL DR PITTSBURGH, PA 15205	52-1622960	501 (C) (3)	12,500.				GENERAL SUPPORT
(7) GREATER CARLISLE AREA CHAMBER OF COMMERCE 801 S HANOVER STREET CARLISLE, PA 17013	23-0457240	501 (C) (6)	8,554.				GENERAL SUPPORT
(8) GREATER PGH COMMUNITY FOOD BANK PO BOX 643710 PITTSBURGH, PA 15264-3710	25-1420599	501 (C) (3)	10,500.				COMMUNITY DEVEL
(9) GREATER PITTSBURGH CHAMBER OF COMMERCE 11 STANWIX ST PITTSBURGH, PA 15222	25-0399620	501 (C) (6)	12,000.				GENERAL SUPPORT
(10) GREATER SUSQUEHANNA VALLEY CHAMBER OF CO 2859 N SUSQUEH. TRL SHAMOKIN DAM, PA 17876	24-0737000	501 (C) (6)	6,891.				GENERAL SUPPORT
(11) GREENVILLE AREA SCHOOL DISTRICT 9 DONATON RD GREENVILLE, PA 16125	25-6011926	GOVERNMENT	35,600.				GENERAL SUPPORT
(12) GUARDIAN ANGELS MEDICAL SERVICE DOGS INC 3251 NE 180TH AVE WILISTON, FL 32696	27-2667123	501 (C) (3)	10,000.				GENERAL SUPPORT

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Department of the Treasury
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Name of the organization

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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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(1) GUARDIAN TRANSPORT SOLUTIONS LLC 26 LONGVIEW DRIVE MECHANICSBURG, PA 17050	92-3347337	N/A	57,884.				GENERAL SUPPORT
(2) GWENS GIRLS LEXINGTON PARK PITTSBURGH, PA 15208	75-3114136	501 (C) (3)	10,000.				GENERAL SUPPORT
(3) HAMOT HEALTH FOUNDATION 302 FRENCH ST ERIE, PA 16507	25-1400999	501 (C) (3)	10,000.				HEALTHCARE SUPPORT
(4) HANOVER AREA CHAMBER OF COMMERCE 40 YORK ST HANOVER, PA 17331	23-2290798	501 (C) (6)	14,159.				GENERAL SUPPORT
(5) HARPEY K FOUNDATION 22 RUTGERS RD PITTSBURGH, PA 15205	99-3460014	501 (C) (3)	10,000.				GENERAL SUPPORT
(6) HARRISBURG AREA YMCA 805 N FRONT ST HARRISBURG, PA 17101	23-1665437	501 (C) (3)	8,000.				COMMUNITY DEVEL
(7) HARRISBURG DOWNTOWN IMPROVEMENT DISTRICT 22 NORTH 2ND STREET HARRISBURG, PA 17101	30-0272951	501 (C) (3)	25,000.				COMMUNITY DEVEL
(8) HARRISBURG REGIONAL CHAMBER 3211 NORTH FRONT HARRISBURG, PA 17110	25-1750121	501 (C) (6)	40,824.				GENERAL SUPPORT
(9) HARRISBURG SCHOOL DISTRICT 2101 N FRONT ST HARRISBURG, PA 17110	23-6003787	N/A	40,000.				GENERAL SUPPORT
(10) HARRISBURG SYMPHONY ASSOCIATION INC 800 CORPORATE CIRCLE HARRISBURG, PA 17110	23-1355180	501 (C) (3)	15,000.				GENERAL SUPPORT
(11) HARRISBURG UNIVERSITY 326 MARKET STREET HARRISBURG, PA 17101	25-1900793	501 (C) (3)	10,000.				GENERAL SUPPORT
(12) HERSHEY DTC LP 3528 CONCORD RD YORK, PA 17402	32-0504910	N/A	25,000.				GENERAL SUPPORT

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**SCHEDULE I
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Name of the organization

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**Grants and Other Assistance to Organizations,
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Part I General Information on Grants and Assistance

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- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) HILL DANCE ACADEMY THEATRE 912 FINLAND ST PITTSBURGH, PA 15219	26-1270031	501 (C) (3)	10,000.				COMMUNITY DEVEL
(2) HILLTOP ALLIANCE 209 RAUSMAN STREET PITTSBURGH, PA 15210	26-4521206	501 (C) (3)	7,000.				COMMUNITY DEVEL
(3) HISTORICAL SOCIETY OF WESTERN PENNSYLVANIA 1212 SMALLMAN ST PITTSBURGH, PA 15222	25-0965391	501 (C) (3)	44,315.				GENERAL SUPPORT
(4) HOLY FAMILY FOUNDATION 8235 OHIO RIVER BLVD PITTSBURGH, PA 15202	25-1668439	501 (C) (3)	7,500.				COMMUNITY DEVEL
(5) HOME FOR THE FRIENDLESS 1901 N FIFTH ST HARRISBURG, PA 17110	23-1365148	501 (C) (3)	51,000.				COMMUNITY DEVEL
(6) HOPE GROWS 183 SHAFER ROAD CORAOPOLIS, PA 15108	27-5038464	501 (C) (3)	10,350.				GENERAL SUPPORT
(7) HOSPICE & COMMUNITY CARE PO BOX 4125 LANCASTER, PA 17604	23-2122735	501 (C) (3)	14,500.				GENERAL SUPPORT
(8) HOSPICE OF CENTRAL PA 1320 LINGLESTOWN ROAD HARRISBURG, PA 17110	23-2106895	501 (C) (3)	6,000.				GENERAL SUPPORT
(9) I D GARDEN 26 LLC 465 COUNTRYSIDE LANE HARRISBURG, PA 17112	82-3690188	N/A	7,640.				GENERAL SUPPORT
(10) ID 2300 LLC 465 COUNTRYSIDE LANE HARRISBURG, PA 17112	87-3933678	N/A	9,896.				GENERAL SUPPORT
(11) INCH AND CO HOLDINGS LLC 2950 LEWISBERRY RD YORK, PA 17404	84-2174043	N/A	35,000.				GENERAL SUPPORT
(12) INSTITUTE FOR RESEARCH EDUCATION AND 611 WILLIAM PENN PL PITTSBURGH, PA 15219	25-1857820	501 (C) (3)	57,750.				GENERAL SUPPORT

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Schedule I (Form 990) (Rev. 12-2024)

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(1) IOTA PHI FOUNDATION OF PITTSBURGH 1423 LIVERPOOL ST PITTSBURGH, PA 15233	23-2907335	501 (C) (3)	11,500.				GENERAL SUPPORT
(2) JACK AND JILL OF AMERICA FOUNDATION INC 1930 17TH STREET NW WASHINGTON, DC 20009	51-0224656	501 (C) (3)	30,000.				GENERAL SUPPORT
(3) JEWISH COMMUNITY CENTER OF GREATER PGH 5738 FORBES AVE PITTSBURGH, PA 15217	25-1094514	501 (C) (3)	55,000.				COMMUNITY DEVEL
(4) JEWISH HEALTHCARE FOUNDATION PGH 625 LIBERTY AVE PITTSBURGH, PA 15222	25-1624347	501 (C) (3)	200,000.				HEALTHCARE SUPPORT
(5) JEWISH RESIDENTIAL SERVICES INC 2609 MURRAY AVE PITTSBURGH, PA 15217	25-1612868	501 (C) (3)	7,500.				GENERAL SUPPORT
(6) JMI SPORTS PO BOX 850603 MINNEAPOLIS, MN 55485	81-4387679	N/A	100,000.				GENERAL SUPPORT
(7) JUNIOR ACHIEVEMENT OF WESTERN PA INC 120 MARSHALL DR WARRENDALE, PA 15086	25-0983059	501 (C) (3)	48,200.				COMMUNITY DEVEL
(8) KAPPA SCHOLARSHIP ENDOWMENT FUND OF W PA PO BOX 5013 PITTSBURGH, PA 15206	25-1672589	501 (C) (3)	15,000.				GENERAL SUPPORT
(9) KEYSTONE CAB SERVICE INC 2304 WALNUT STREET HARRISBURG, PA 17103	04-3885976	N/A	66,517.				GENERAL SUPPORT
(10) KIDS VOICE 437 GRANT ST PITTSBURGH, PA 15219	25-0983060	501 (C) (3)	10,000.				COMMUNITY DEVEL
(11) LADIES HOSPITAL AID SOCIETY 3459 FIFTH AVE PITTSBURGH, PA 15213	23-7257527	501 (C) (3)	201,500.				GENERAL SUPPORT
(12) LAKE ERIE COLLEGE OF OSTEOPATHIC MED 5515 PEACH ST ERIE, PA 16509	25-1698677	501 (C) (3)	7,600.				GENERAL SUPPORT

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(1) LANCASTER CHAMBER OF COMMERCE & INDUSTRY 115 EAST KING STREET LANCASTER, PA 17602	23-2095463	501 (C) (6)	10,025.				GENERAL SUPPORT
(2) LAWRENCE COUNTY CHAMBER OF COMMERCE 138 WEST WASHINGTON ST NEW CASTLE, PA 16101	71-0235148	501 (C) (6)	14,750.				GENERAL SUPPORT
(3) LAWRENCEVILLE UNITED INC 4825 BUTLER STREET PITTSBURGH, PA 15201	23-3070601	501 (C) (3)	11,000.				GENERAL SUPPORT
(4) LEADERSHIP CARLISLE 4211 W TRINDLE ROAD CAMP HILL, PA 17011	25-1634471	501 (C) (3)	15,500.				GENERAL SUPPORT
(5) LEADERSHIP HARRISBURG AREA 3211 N FRONT ST HARRISBURG, PA 17110	25-1583596	501 (C) (3)	9,500.				GENERAL SUPPORT
(6) LEBO PRIDE 225 LINENWOOD AVE PITTSBURGH, PA 15228	88-3718863	501 (C) (3)	6,000.				GENERAL SUPPORT
(7) LENDING HEARTS 114 HOORIDGE DR PITTSBURGH, PA 15228	45-1783751	501 (C) (3)	20,000.				GENERAL SUPPORT
(8) LEXINGTON LAND DEVELOPERS CORP 336 WEST KING STREET LANCASTER, PA 17603	77-0619828	N/A	5,180.				GENERAL SUPPORT
(9) LIBERTY ARENA INC 1500 SYCAMORE RD MONFOURSVILLE, PA 17754	41-2136702	N/A	22,250.				GENERAL SUPPORT
(10) LIGHT OF LIFE MINISTRIES INC 665 RIDGE AVE PITTSBURGH, PA 15212	25-1056389	501 (C) (3)	10,000.				COMMUNITY LEVEL
(11) LOGSWORKS PARTNERS 255 W KING STREET YCRK, PA 17401	85-3282711	501 (C) (3)	25,000.				GENERAL SUPPORT
(12) LUMINARI INC 400 BROAD ST SEWICKLEY, PA 15143	26-4196781	501 (C) (3)	15,000.				GENERAL SUPPORT

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(1) LYCOMING COLLEGE ONE COLLEGE PLACE WILLIAMSPORT, PA 17701	24-0795965	501 (C) (3)	50,500.				GENERAL SUPPORT
(2) LYCOMING COUNTY FAIR ASSOCIATION PO BOX 116 HUGHESVILLE, PA 17737	24-0777607	501 (C) (3)	20,000.				GENERAL SUPPORT
(3) LYCOMING COUNTY UNITED WAY 1 W 3RD ST WILLIAMSPORT, PA 17701	24-0828149	501 (C) (3)	26,029.				GENERAL SUPPORT
(4) WAGEE WOMENS RESEARCH INSTITUTE AND FND 3240 CRAFT PL PITTSBURGH, PA 15213	25-1462312	501 (C) (3)	110,400.				GENERAL SUPPORT
(5) MARCH OF DIMES INC 1550 CRYSTAL DR ARLINGTON, VA 22202	13-1846366	501 (C) (3)	56,594.				GENERAL SUPPORT
(6) MARIO LEMIEUX FOUNDATION 816 FIFTH AVE PITTSBURGH, PA 15219	25-1708231	501 (C) (3)	35,350.				GENERAL SUPPORT
(7) MCI USA OPERATING CO PO BOX 780949 PHILADELPHIA, PA 19178	54-1522582	N/A	15,000.				GENERAL SUPPORT
(8) MCLANAHAN CORPORATION 200 WALL ST HOLLIDAYSBURG, PA 16648	23-0861150	N/A	6,000.				GENERAL SUPPORT
(9) MEDCARE SUSQUEHANNA VALLEY LLC 381 INDEP AVE MECHANICSBURG, PA 17055	82-1673688	N/A	5,327.				GENERAL SUPPORT
(10) MENTAL HEALTH AMER OF SOUTHWESTERN PA 409 COULTER AVE GREENSBURG, PA 15601	25-1142972	501 (C) (3)	12,500.				GENERAL SUPPORT
(11) MIGHTY PENGUINS SLED HOCKEY INC 8000 CRANBRY SPRGS DR CRANBRY TWP, PA 16066	27-5095701	501 (C) (3)	15,000.				GENERAL SUPPORT
(12) MON YOUGH CHAMBER OF COMMERCE 201 LYSE BLVD MCKEESPORT, PA 15132	25-0654640	501 (C) (6)	5,350.				GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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Schedule I (Form 990) (Rev. 12-2024)

**SCHEDULE I
(Form 990)**

Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Employer identification number

20-8295721

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) MONROEVILLE AREA CHAMBER OF COMMERCE 2790 MOSSIDE BLVD MONROEVILLE, PA 15146	25-1293687	501 (C) (6)	12,500.				GENERAL SUPPORT
(2) MONROEVILLE FOUNDATION INC PO BOX 942 MONROEVILLE, PA 15146	20-1073113	501 (C) (3)	12,000.				GENERAL SUPPORT
(3) M-POWERHOUSE INC 1435 BELFORD AVE PITTSBURGH, PA 15219	52-2054025	501 (C) (3)	15,000.				GENERAL SUPPORT
(4) WT ARARAT COMMUNITY ACTIVITY CENTER 745 N NEGLEY AVE PITTSBURGH, PA 15206	25-1628168	501 (C) (3)	35,000.				GENERAL SUPPORT
(5) MUNCY SCHOOL DISTRICT 206 SHERMAN STREET MUNCY, PA 17756	24-6001124	N/A	15,000.				GENERAL SUPPORT
(6) MUNICIPALITY OF MONROEVILLE 2700 MONROEVILLE BLVD MONROEVILLE, PA 15146	25-6004094	N/A	10,500.				GENERAL SUPPORT
(7) NAMI KEYSTONE PENNSYLVANIA 105 BRAUNLICH DR PITTSBURGH, PA 15237	25-1477291	501 (C) (3)	51,950.				GENERAL SUPPORT
(8) NATIONAL ASSOC CF CORP DIRECTORS THREE R 700 BURSA DRVJE BRIDGEVILLE, PA 15017	26-4485830	501 (C) (3)	10,583.				GENERAL SUPPORT
(9) NATIONAL ASSOCIATION OF HISPANIC NURSES 201 EAST MAIN ST LEXINGTON, KY 40507	91-1010677	501 (C) (3)	8,500.				GENERAL SUPPORT
(10) NATIONAL KIDNEY FOUNDATION INC 30 E 33RD ST NEW YORK, NY 10016	13-1673104	501 (C) (3)	35,000.				KIDNEY RESEARCH
(11) NATIONAL MULTIPLE SCLEROSIS SOCIETY 215 BEECHAM DR PITTSBURGH, PA 15205	25-1066473	501 (C) (3)	25,000.				MS RESEARCH
(12) NATL ASSOC OF HEALTH SERVICES EXECUTIVES 1050 CONNECTICUT AVE NW WASH, DC 20036	62-1312239	501 (C) (3)	9,950.				GENERAL SUPPORT

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1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) NATL OVARIAN CANCER COALITION PO BOX 101081 PITTSBURGH, PA 15237	65-0628064	501 (C) (3)	30,000.				CANCER RESEARCH
(2) NEALS INC 2103 ELM RD WARREN, OH 44483	34-0422779	N/A	12,195.				GENERAL SUPPORT
(3) NEIGHBORING ACADEMY 621 NORTH 2ND ST HARRISBURG, PA 17101	92-2700349	501 (C) (3)	100,000.				COMMUNITY DEVEL
(4) NEW CASTLE COMMUNITY YMCA 20 W WASHINGTON ST NEW CASTLE, PA 16101	25-0969496	501 (C) (3)	10,000.				COMMUNITY DEVEL
(5) NEW HOPE MINISTRIES INC 99 W CHURCH ST DILLSBURG, PA 17019	23-2223120	501 (C) (3)	18,000.				GENERAL SUPPORT
(6) NEW SUN RISING 112 SHERMAN ST PITTSBURGH, PA 15209	20-3496988	501 (C) (3)	14,500.				GENERAL SUPPORT
(7) NEWPORT ASSEMBLY OF GOD CHURCH 253 N SIXTH STREET NEWPORT, PA 17074	23-1988339	N/A	6,000.				GENERAL SUPPORT
(8) NORTHERN LANCASTER COUNTY CHAMBER OF COM PO BOX 723 EPHRATA, PA 17522	23-2489968	501 (C) (6)	8,900.				GENERAL SUPPORT
(9) OAKLAND BUSINESS IMPROVEMENT DISTRICT 235 ATWOOD ST PITTSBURGH, PA 15213	25-1833743	N/A	95,000.				GENERAL SUPPORT
(10) OAKLAND CATHOLIC HIGH SCHOOL 114 N CRAIG STREET PITTSBURGH, PA 15213	25-1604103	501 (C) (3)	11,500.				GENERAL SUPPORT
(11) OAKLAND TRANSPORTATION MGMT ASSOC 235 ATWOOD ST PITTSBURGH, PA 15213	25-1701562	501 (C) (3)	10,000.				GENERAL SUPPORT
(12) ONE DAY TO REMEMBER INC 138 W LYNHURST DR PITTSBURGH, PA 15217	81-3960499	501 (C) (3)	5,500.				GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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**SCHEDULE I
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Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

**Grants and Other Assistance to Organizations,
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OMB No. 1545-0047

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Inspection**

Employer identification number

20-8295721

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ONYX WOMAN NETWORK 1038 OSAGE DR PITTSBURGH, PA 15235	26-2648491	N/A	6,400.				GENERAL SUPPORT
(2) OPERATION OUR TOWN INC 5508 6TH AVENUE, REAR ALTOONA, PA 16602	20-5879618	501 (C) (3)	12,200.				GENERAL SUPPORT
(3) OXFORD DEVELOPMENT COMPANY 301 GRANT STREET PITTSBURGH, PA 15219	25-1457289	N/A	138,242.				GENERAL SUPPORT
(4) P&J THEATER WORKS 125 SUMMIT DRIVE HOLLIDAYSBURG, PA 16648	27-5380841	501 (C) (3)	13,800.				GENERAL SUPPORT
(5) PA BREAST CANCER COALITION 2397 QUENTIN RD LEBANON, PA 17042	25-1722323	501 (C) (3)	15,000.				CANCER RESEARCH
(6) PA CHAMBER OF BUSINESS & INDUSTRY 417 WALNUT STREET HARRISBURG, PA 17101	23-0961100	501 (C) (6)	13,500.				GENERAL SUPPORT
(7) PA COLLEGE OF TECHNOLOGY ONE COLLEGE AVE WILLIAMSPORT, PA 17701	23-2564508	501 (C) (3)	40,000.				GENERAL SUPPORT
(8) PA STATE ATHLETIC DIRECTORS ASSOCIATION 136 W 6TH AVE EVERETT, PA 15537	23-7262104	N/A	9,000.				GENERAL SUPPORT
(9) PANCREATIC CANCER ACTION NETWORK 1500 ROSECRANS AVE MANHATTAN BCH, CA 90266	33-0841281	501 (C) (3)	8,000.				CANCER RESEARCH
(10) PARTNERS IN SENIOR CARE 330 EAST JAMESTOWN RD GREENVILLE, PA 16125	23-2930379	501 (C) (3)	10,000.				GENERAL SUPPORT
(11) PARTNERSHIP TO ADVANCE RESPONSIBLE TECHN 218 ORKLAND AVE PITTSBURGH, PA 15213	83-0897704	501 (C) (3)	10,000.				GENERAL SUPPORT
(12) PASSAVANT HOSPITAL FOUNDATION 9100 BABCOCK BLVD PITTSBURGH, PA 15237	25-1407815	501 (C) (3)	12,250.				HEALTHCARE SUPPORT

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Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) PATIENTS R WAITING INC 3074 WEAVER ROAD LITITZ, PA 17543	84-4433433	501 (C) (3)	103,500.				GENERAL SUPPORT
(2) PAULINE AUBERLE FOUNDATION 1101 HARTMAN ST MCKEESPORT, PA 15132	25-1344183	501 (C) (3)	7,500.				GENERAL SUPPORT
(3) PAXTON STREET HOME BENEVOLENT SOCIETY IN 2001 PAXTON STREET HARRISBURG, PA 17111	23-2179648	501 (C) (3)	77,000.				GENERAL SUPPORT
(4) PENNSYLVANIA MEDICAL SOCIETY 400 WINDING CRK BLV MECHANICSBURG, PA 17050	23-1570227	501 (C) (6)	8,000.				GENERAL SUPPORT
(5) PENNSYLVANIANS FOR MODERN COURTS 1500 JOHN F KENNEDY BLVD PHILA, PA 19102	23-2434262	501 (C) (3)	17,500.				GENERAL SUPPORT
(6) PEOPLES NATURAL GAS CO LLC PO BOX 640563 PITTSBURGH, PA 15264	26-3349481	N/A	6,536.				GENERAL SUPPORT
(7) PEOPLES OAKLAND 3433 BATES ST PITTSBURGH, PA 15213	23-7407933	501 (C) (3)	33,624.				GENERAL SUPPORT
(8) PERRY COUNTY COMMUNITY FAIR ASSOC INC PO BOX 251 NEWPORT, PA 17074	23-2302857	501 (C) (3)	25,000.				GENERAL SUPPORT
(9) PERSAD CENTER INC 5301 BUTLER ST PITTSBURGH, PA 15201	25-1234680	501 (C) (3)	45,000.				GENERAL SUPPORT
(10) PINNACLE HEALTH FOUNDATION PO BOX 8700 HARRISBURG, PA 17105-8700	22-2691718	501 (C) (3)	237,554.				GENERAL SUPPORT
(11) PITTSBURGH ACTION AGAINST RAPE 81 SOUTH 19TH ST PITTSBURGH, PA 15203-1852	25-1253675	501 (C) (3)	10,000.				GENERAL SUPPORT
(12) PITTSBURGH ARTS AND LECTURES 4400 FORBES AVE PITTSBURGH, PA 15213	25-1657947	501 (C) (3)	15,000.				GENERAL SUPPORT

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(1) PITTSBURGH BALLET THEATRE INC 2900 LIBERTY AVE PITTSBURGH, PA 15201-1500	23-7101094	501 (C) (3)	37,500.				GENERAL SUPPORT
(2) NATIONAL BLACK NURSES ASSOCIATION INC 8630 FENTON ST SILVER SPRING, MD 20910	23-7194995	501 (C) (3)	21,950.				GENERAL SUPPORT
(3) PITTSBURGH BLACK PRIDE 347 S BOQUET ST PITTSBURGH, PA 15213	26-2105142	501 (C) (3)	10,000.				GENERAL SUPPORT
(4) PITTSBURGH CURE SARCOMA 2731 COLE ROAD WEXFORD, PA 15090	84-3322815	501 (C) (3)	6,000.				GENERAL SUPPORT
(5) PITTSBURGH DOWNTOWN PARTNERSHIP 307 4TH AVE PITTSBURGH, PA 15222	25-1728064	501 (C) (3)	35,000.				GENERAL SUPPORT
(6) PITTSBURGH EMS ANNIVERSARY COMMITTEE 107 LOGAN ROAD IMPERIAL, PA 15126	99-0544201	501 (C) (3)	25,000.				GENERAL SUPPORT
(7) PITTSBURGH HARDEBALL ACADEMY INC 6506 BARTLETT STREET PITTSBURGH, PA 15217	84-4020953	501 (C) (3)	10,000.				GENERAL SUPPORT
(8) PITTSBURGH HIRES VETERANS 1333 BANKSVILLE ROAD PITTSBURGH, PA 15216	27-0124770	501 (C) (3)	10,000.				GENERAL SUPPORT
(9) PITTSBURGH ICE PO BOX 25372 PITTSBURGH, PA 15220	25-1873676	501 (C) (3)	10,000.				GENERAL SUPPORT
(10) PITTSBURGH OPERA 2425 LIBERTY AVE PITTSBURGH, PA 15222	25-1073139	501 (C) (3)	7,500.				GENERAL SUPPORT
(11) PITTSBURGH PUBLIC THEATER CORP 621 PENN AVE PITTSBURGH, PA 15222	23-7398683	501 (C) (3)	12,500.				GENERAL SUPPORT
(12) PITTSBURGH SYMPHONY 600 PENN AVE PITTSBURGH, PA 15222	25-0986052	501 (C) (3)	30,500.				GENERAL SUPPORT

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(1) PITTSBURGH THREE RIVERS MARATHON 810 RIVER AVE PITTSBURGH, PA 15212	26-2524046	501 (C) (3)	15,000.				GENERAL SUPPORT
(2) PITTSBURGH URBAN MAGNET PROJECT 100 ROSS ST PITTSBURGH, PA 15219	25-1800835	501 (C) (3)	12,000.				GENERAL SUPPORT
(3) POINT PARK UNIVERSITY 201 WOOD STREET PITTSBURGH, PA 15222	25-1094922	501 (C) (3)	200,000.				GENERAL SUPPORT
(4) POSTPARTUM PITTSBURGH 6930 REYNOLDS STREET PITTSBURGH, PA 15208	84-1824128	501 (C) (3)	12,500.				GENERAL SUPPORT
(5) POTTER COUNTY EDUCATIONAL COUNCIL INC 5 WATER ST COUDERSPORT, PA 16915	25-1762130	501 (C) (3)	8,000.				GENERAL SUPPORT
(6) PPL ELECTRIC UTILITIES CORPORATION PO BOX 25222 LEHIGH VALLEY, PA 18002-5222	23-0959590	N/A	15,848.				GENERAL SUPPORT
(7) PRESQUE ISLE PARTNERSHIP 301 PENNINSULA DR ERIE, PA 16505	25-1737521	501 (C) (3)	10,000.				GENERAL SUPPORT
(8) THE PRIMARY HEALTH NETWORK 63 PITT ST SHARON, PA 16146	25-1361800	501 (C) (3)	25,500.				GENERAL SUPPORT
(9) PROGRAM TO AID CITIZEN ENTERPRISE 603 STANWIX ST PITTSBURGH, PA 15222	25-1205316	501 (C) (3)	10,000.				GENERAL SUPPORT
(10) PROJECT SHARE OF CARLISLE 5 NORTH ORANGE ST CARLISLE, PA 17013	27-0551231	501 (C) (3)	7,500.				GENERAL SUPPORT
(11) PROJECT SWEET PEAS 45 BOYLSTON ST WARWICK, RI 02889	27-3679594	501 (C) (3)	8,380.				COMMUNITY DEVEL
(12) PULSEPOINT FOUNDATION PO BOX 12594 PLEASANTON, CA 94588	45-2725805	501 (C) (3)	19,500.				GENERAL SUPPORT

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(1) QUANTUM IMAGING AND THERAPEUTIC ASSOCIAT PO BOX 62165 BALTIMORE, MD 21264	25-1792806	N/A	52,974.				GENERAL SUPPORT
(2) READING IS FUNDAMENTAL PITTSBURGH 10 CHILDRENS WAY PITTSBURGH, PA 15212	25-1558336	501 (C) (3)	10,000.				COMMUNITY DEVEL
(3) REHABILITATION AND COMMUNITY PROV ASSOC 777 E PARK DR HARRISBURG, PA 17111	22-2839339	501 (C) (3)	10,000.				GENERAL SUPPORT
(4) RESPECT TOGETHER 125 N ENOLA DR ENOLA, PA 17025	23-2067636	501 (C) (3)	10,000.				GENERAL SUPPORT
(5) RETREAT AND REFRESH STROKE CAMP 2000 W PIONEER PKWY PEORIA, IL 61615	64-0954851	501 (C) (3)	25,000.				GENERAL SUPPORT
(6) RIVER VALLEY TRANSIT AUTHORITY 1500 WEST THIRD ST WILLIAMSPORT, PA 17701	88-1383358	N/A	15,000.				GENERAL SUPPORT
(7) ROBERT MORRIS UNIVERSITY 6001 UNIVERSITY BLVD MOON TWP, PA 15108	25-1120678	501 (C) (3)	885,000.				GENERAL SUPPORT
(8) RONALD MCDONALD HOUSE CHARITIES PGH 451 44TH ST PITTSBURGH, PA 15201	25-1320272	501 (C) (3)	14,650.				GENERAL SUPPORT
(9) RUELL RENTALS LLC PO BOX 1131 CAMP HILL, PA 17001	81-4923146	N/A	11,689.				GENERAL SUPPORT
(10) RYAN BLANEY FAMILY FOUNDATION 1266 SPEEDWAY BLVD SALISBURY, NC 28146	83-0955974	501 (C) (3)	10,200.				GENERAL SUPPORT
(11) RYAN SHAZIER FUND FOR SPINAL REHABILITAT PO BOX 5258 PITTSBURGH, PA 15217	85-0837155	501 (C) (3)	10,000.				GENERAL SUPPORT
(12) SADLER HEALTH CENTER CORP 100 N HANOVER STREET CARLSLE, PA 17013	54-2082673	501 (C) (3)	10,000.				GENERAL SUPPORT

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Schedule I (Form 990) (Rev. 12-2024)

**SCHEDULE I
(Form 990)**

Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Employer identification number

20-8295721

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SCHREIBER CENTER FOR PEDIATRIC DEVELOPME 625 COMMUNITY WAY LANCASTER, PA 17603	23-1365369	501 (C) (3)	52,900.				GENERAL SUPPORT
(2) SCHUIBBO HOLDINGS INC PO BOX 810 AVONDALE, PA 19311	81-0641225	N/A	5,360.				GENERAL SUPPORT
(3) SEP PENN PLACE I LLC 301 CHESTNUT STREET HARRISBURG, PA 17101	88-3410242	N/A	5,906.				GENERAL SUPPORT
(4) SHADYSIDE CHAMBER OF COMMERCE 5501 WALNUT ST PITTSBURGH, PA 15232	25-1373067	501 (C) (6)	10,000.				GENERAL SUPPORT
(5) SHERATON HARRISBURG 4650 LINDLE ROAD HARRISBURG, PA 17111	87-2225752	N/A	7,280.				GENERAL SUPPORT
(6) SHIPPENSBURG AREA CHAMBER OF COMMERCE 68 W KING STREET SHIPPENSBURG, PA 17257	23-1697886	501 (C) (6)	7,385.				GENERAL SUPPORT
(7) SHOKES ENTERPRISES LLC 1805 SUSQUEHANNA ST HARRISBURG, PA 17102	27-3318009	N/A	7,174.				GENERAL SUPPORT
(8) SISTERS PGH 2014 MONONGAHELA AVE PITTSBURGH, PA 15218	82-1600131	501 (C) (3)	15,000.				GENERAL SUPPORT
(9) SOLDIERS AND SAILORS MEMORIAL HALL 4141 FIFTH AVE PITTSBURGH, PA 15213	25-1821862	501 (C) (3)	7,000.				GENERAL SUPPORT
(10) SOMERSET COMMUNITY HOSPITAL FOUNDATION 225 S CENTER AVE SOMERSET, PA 15501	25-1441863	501 (C) (3)	10,900.				HEALTHCARE SUPPORT
(11) SOUTH PARK EDUCATION FOUNDATION 2005 EAGLE RIDGE DRIVE SOUTH PARK, PA 15129	83-3955707	N/A	7,500.				GENERAL SUPPORT
(12) SOUTH SIDE CHAMBER OF COMMERCE PO BOX 42345 PITTSBURGH, PA 15203	25-1168530	501 (C) (6)	15,000.				GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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(1) SOUTH SIDE COMMUNITY COUNCIL INC PO BOX 10776 PITTSBURGH, PA 15203	25-1494027	501 (C) (3)	28,500.				GENERAL SUPPORT
(2) SOUTHERN ALLEGHENIES MUSEUM OF ART PO BOX 9 LORETO, PA 15940	25-1271659	501 (C) (3)	9,100.				GENERAL SUPPORT
(3) SPECIAL OLYMPICS PENNSYLVANIA 2570 BLVD OF THE GEN NORRISTOWN, PA 19403	23-2078543	501 (C) (3)	12,500.				GENERAL SUPPORT
(4) SQUIRREL HILL URBAN COALITION 5604 SOLWAY ST PITTSBURGH, PA 15217	25-1243029	501 (C) (3)	6,500.				COMMUNITY DEVEL
(5) STANLEY M MARKS BLOOD CANCER RESEARCH PO BOX 48042 PITTSBURGH, PA 15232	82-3369773	501 (C) (3)	15,000.				GENERAL SUPPORT
(6) STEELWHEELERS INC 7 OAK DR PITTSBURGH, PA 15214	25-1358502	501 (C) (3)	15,000.				GENERAL SUPPORT
(7) STOP THE VIOLENCE PITTSBURGH 1106 SUCCESS STREET PITTSBURGH, PA 15212	82-0594337	N/A	43,333.				GENERAL SUPPORT
(8) SUNBURYS REVITALIZATION INC 353 MARKET STREET SUNBURY, PA 17801	20-4194890	501 (C) (3)	12,500.				GENERAL SUPPORT
(9) SURGICORPS INTERNATIONAL 3392 SAXONBURG BLVD GLENSHAW, PA 15116	25-1796465	501 (C) (3)	7,442.				HEALTHCARE SUPPORT
(10) SUSAN P BYRNES HEALTH EDUCATION CENTER I 515 S. GEORGE STREET YORK, PA 17401	23-2588187	501 (C) (3)	40,000.				GENERAL SUPPORT
(11) SUSQUEHANNA ART MUSEUM 1401 N THIRD STR HARRISBURG, PA 17102	25-1601081	501 (C) (3)	18,500.				GENERAL SUPPORT
(12) SUSQUEHANNA HEALTH FOUNDATION 1001 GRAMPTAN BLVD WILLIAMSPORT, PA 17701	23-2743470	501 (C) (3)	32,031.				HEALTHCARE SUPPORT

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(1) T CONN SPORTS INC 528 SKYLINE DR BELLE VERNON, PA 15012	22-3902543	N/A	17,500.				GENERAL SUPPORT
(2) TANGO2 RESEARCH FOUNDATION INCORPORATION 300 PLAZA MIDDLESEX MIDDLETOWN, CT 06457	82-3667557	501 (C) (3)	10,000.				GENERAL SUPPORT
(3) TEAM PENNSYLVANIA FOUNDATION 240 NORTH THIRD ST HARRISBURG, PA 17101	23-2876177	501 (C) (3)	55,000.				GENERAL SUPPORT
(4) TEAM TASSY 360 EAST 2ND ST LOS ANGELES, CA 90012	90-0803852	501 (C) (3)	10,000.				GENERAL SUPPORT
(5) TERRACES AT SHEPHERDSTOWN LLC 1454 BALTIMORE ST HANOVER, PA 17331	86-1201636	N/A	6,007.				GENERAL SUPPORT
(6) JADA HOUSE INTERNATIONAL 5111 GLENWOOD AVE PITTSBURGH, PA 15207	47-2123377	501 (C) (3)	10,000.				GENERAL SUPPORT
(7) AFRICAN DIETARY AND NUTRITION CENTER 7825 HAMILTON AVE PITTSBURGH, PA 15208	88-2972399	501 (C) (3)	10,000.				GENERAL SUPPORT
(8) THE ALS ASSOCIATION 1300 WILSON BLVD ARLINGTON, VA 22209	13-3271855	501 (C) (3)	10,000.				ALS RESEARCH
(9) THE AMERICAN IRELAND FUND 10 POST OFFICE SQUARE BOSTON, MA 02109	25-1306992	501 (C) (3)	17,000.				GENERAL SUPPORT
(10) THE BRETHERN HOME COMMUNITY 2990 CARLISLE PIKE NEW OXFORD, PA 17350	23-1409664	501 (C) (3)	10,000.				GENERAL SUPPORT
(11) THE CHUCK NOLL FOUNDATION FOR BRAIN INJU 3400 S WATER ST PITTSBURGH, PA 15203	81-3755463	501 (C) (3)	55,000.				GENERAL SUPPORT
(12) THE FOUNDATION OF THE PA MEDICAL SOCIETY 400 WING CRK BLVD MECHANICSBURG, PA 17050	37-1722501	501 (C) (3)	13,800.				GENERAL SUPPORT

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Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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(1) THE FRIENDSHIP CIRCLE OF PITTSBURGH INC 1922 MURRAY AVE PITTSBURGH, PA 15217	20-8950616	501 (C) (3)	9,250.				GENERAL SUPPORT
(2) THE LINKS FOUNDATION INCORPORATED 1200 MASSACHUSETTS AVE NW WASH, DC 20005	52-1170830	501 (C) (3)	25,000.				GENERAL SUPPORT
(3) THE LIONS DIABETES BOARD OF ALLEGHENY A 615 ELIZABETH AVENUE ELIZABETH, PA 15037	85-3626031	501 (C) (3)	6,500.				GENERAL SUPPORT
(4) THE MENTORING PARTNERSHIP OF SW PA 4165 BLAIR ST PITTSBURGH, PA 15207	23-2876447	501 (C) (3)	25,000.				GENERAL SUPPORT
(5) THE MIDWIFE CENTER FOR BIRTH AND WOMENS 2825 PENN AVE PITTSBURGH, PA 15222	25-1864282	501 (C) (3)	10,000.				GENERAL SUPPORT
(6) THE NATIONAL PANCREAS FOUNDATION 3 BETHESDA METRO CTR BETHESDA, MD 20814	23-2935929	501 (C) (3)	10,000.				GENERAL SUPPORT
(7) THE PEYTON WALKER FOUNDATION 2929 GETTYSBURG ROAD CAMP HILL, PA 17011	46-4655102	501 (C) (3)	181,200.				GENERAL SUPPORT
(8) THE RIVER VALLEY REGIONAL YMCA 641 WALNUT STREET WILLIAMSPORT, PA 17701	24-0795698	501 (C) (3)	19,600.				GENERAL SUPPORT
(9) THE SALVATION ARMY 440 W NYACK RD WEST NYACK, NY 10994	13-5562351	501 (C) (3)	122,000.				GENERAL SUPPORT
(10) THE SPRINGBOARD FOUNDATION INC 4740 S OCEAN BLVD HIGHLAND BEACH, FL 33487	45-2448252	501 (C) (3)	20,000.				GENERAL SUPPORT
(11) THE SUSAN G KOMEN BREAST CANCER FOUNDATI 13770 NOEL RD DALLAS, TX 75380	75-1835298	501 (C) (3)	25,000.				CANCER RESEARCH
(12) UNITED WAY OF VENANGO COUNTY INC 1999 ALLEGHENY BLVD RENO, PA 16343	25-1219187	501 (C) (3)	166,667.				COMMUNITY DEVEL

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(1) THELMA LOVETE YMCA 680 ANDERSON DR PITTSBURGH, PA 15220	27-2990653	501 (C) (3)	20,000.				GENERAL SUPPORT
(2) THREE BRIDGES MEDIA LLC 2601 N FRONT ST HARRISBURG, PA 17110	26-3088227	N/A	19,400.				GENERAL SUPPORT
(3) THREE RIVERS BUSINESS ALLIANCE 535 SMITHFIELD STREET PITTSBURGH, PA 15222	82-2148826	501 (C) (6)	12,500.				GENERAL SUPPORT
(4) THREE RIVERS ROWING ASSOC 300 WATERFRONT DR PITTSBURGH, PA 15222	25-1544798	501 (C) (3)	10,000.				GENERAL SUPPORT
(5) THREE RIVERS YOUTH 6117 BROAD ST PITTSBURGH, PA 15206	25-1206924	501 (C) (3)	15,000.				COMMUNITY DEVEL
(6) TIoga COUNTY DEVELOPMENT CORPORATION 33 PEARL ST WELLSBORO, PA 16901	25-1660990	501 (C) (6)	8,500.				GENERAL SUPPORT
(7) TURTLE CREEK VALLEY COG 2700 MONROEVILLE BLVD MONROEVILLE, PA 15145	25-1214597	501 (C) (3)	10,000.				GENERAL SUPPORT
(8) UGI UTILITIES INC PO BOX 15503 WILMINGTON, DE 19886	23-1174060	N/A	6,403.				GENERAL SUPPORT
(9) UNITE FOR HER 127 E CHESTNUT ST WEST CHESTER, PA 19380	26-4444438	501 (C) (3)	9,000.				GENERAL SUPPORT
(10) UNITED WAY OF ERIE COUNTY 650 EAST AVE 200 ERIE, PA 16503	25-1053091	501 (C) (3)	12,500.				COMMUNITY DEVEL
(11) UNITED WAY OF LAWRENCE COUNTY 223 N MERCER STREET NEW CASTLE, PA 16101	25-0987221	501 (C) (3)	9,435.				COMMUNITY DEVEL
(12) UNITED WAY OF MERCER COUNTY 493 S HERMITAGE RD HERMITAGE, PA 16148	25-1039297	501 (C) (3)	5,200.				COMMUNITY DEVEL

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(1) UNITED WAY OF SOUTHWESTERN PA 1250 PENN AVE PITTSBURGH, PA 15230	25-1043578	501 (C) (3)	25,000.				COMMUNITY DEVEL
(2) UNITED WAY OF THE CAPITAL REGION 2235 MILLENNIUM WAY ENOLA, PA 17025	23-1352095	501 (C) (3)	7,500.				COMMUNITY DEVEL
(3) UNITED WAY OF YCRK COUNTY 140 EAST MARKET STREET YORK, PA 17401	23-1352388	501 (C) (3)	5,500.				COMMUNITY DEVEL
(4) UNIVERSITY OF PITTSBURGH 128 NORTH CRAIG ST PITTSBURGH, PA 15260	25-0965591	501 (C) (3)	176,211,504.				GENERAL SUPPORT
(5) UPMC ALTOONA 2500 7TH AVE ALTOONA, PA 16603	23-1352155	501 (C) (3)	612,606.				GENERAL SUPPORT
(6) UPMC HEALTH PLAN PO BOX 2997 PITTSBURGH, PA 15230	23-2813536	N/A	15,400.				GENERAL SUPPORT
(7) UPMC HORIZON COMMUNITY HEALTH FOUNDATION 2200 MEMORIAL DR FARRELL, PA 16121	25-1501823	501 (C) (3)	12,000.				HEALTHCARE SUPPORT
(8) UPMC PINNACLE FOUNDATION PO BOX 8700 HARRISBURG, PA 17105	22-2691718	501 (C) (3)	6,500.				HEALTHCARE SUPPORT
(9) UPTOWN MUSIC COLLECTIVE 144 WEST THIRD ST WILLIAMSPORT, PA 17701	20-3851091	501 (C) (3)	10,000.				GENERAL SUPPORT
(10) UPTOWN PARTNERS OF PITTSBURGH PO BOX 1224 WILLIAMSPORT, PA 17703	45-0560925	501 (C) (3)	43,500.				COMMUNITY DEVEL
(11) URBAN IMPACT FOUNDATION 2801 N CHARLES ST PITTSBURGH, PA 15214	25-1752269	501 (C) (3)	15,000.				COMMUNITY DEVEL
(12) URBAN LEAGUE OF GREATER PGH 332 FIFTH AVE PITTSBURGH, PA 15222	25-0965592	501 (C) (3)	35,000.				COMMUNITY DEVEL

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(1) VETERANS LEADERSHIP PROGRAM 2934 SMALLMAN ST PITTSBURGH, PA 15201	25-1434643	501 (C) (3)	10,000.				GENERAL SUPPORT
(2) VETERANS OUTREACH OF PENNSYLVANIA PO BOX 6127 HARRISBURG, PA 17112	83-2701544	501 (C) (3)	103,720.				GENERAL SUPPORT
(3) VICKIE'S ANGEL WALK INC 511 BRIDGE STREET NEW CUMBERLAND, PA 17070	20-8755452	501 (C) (3)	27,500.				COMMUNITY LEVEL
(4) WASHINGTON COUNTY AGRICULTURAL FAIR INC 2151 NORTH MAIN STREET WASHINGTON, PA 15301	25-1017552	501 (C) (3)	6,000.				GENERAL SUPPORT
(5) WAYNE FUSARO PANCREATIC CANCER FUND 451 WALNUT ST PITTSBURGH, PA 15238	25-1861970	501 (C) (3)	7,500.				CANCER RESEARCH
(6) WESLEY FAMILY SERVICES 221 PENN AVE WILKINSBURG, PA 15221	82-0653875	501 (C) (3)	15,150.				GENERAL SUPPORT
(7) WEST SHORE CHAMBER OF COMMERCE 4211 TRINDLE ROAD CAMP HILL, PA 17011	23-1329320	501 (C) (6)	16,015.				GENERAL SUPPORT
(8) WESTERN PA DIAPER BANK 201 N BRADDOCK AVE PITTSBURGH, PA 15208	35-2461923	501 (C) (3)	5,500.				GENERAL SUPPORT
(9) WESTERN PA JEWISH SPORTS HALL OF FAME IN 5738 FORBES AVENUE PITTSBURGH, PA 15217	27-0380770	501 (C) (3)	10,000.				GENERAL SUPPORT
(10) WESTERN PA NATL HEMOPHILIA FOUNDATION 775 4TH ST BEAVER, PA 15009	25-1359331	501 (C) (3)	7,223.				GENERAL SUPPORT
(11) WESTERN PENNSYLVANIA CONSERVANCY 800 WATERFRONT DR PITTSBURGH, PA 15222	25-1053485	501 (C) (3)	20,000.				GENERAL SUPPORT
(12) WESTERN REGIONAL EMS 1002 CHURCH HILL RD PITTSBURGH, PA 15205	20-1233020	501 (C) (3)	8,900.				GENERAL SUPPORT

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- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) WESTMINSTER COLLEGE 319 S MARKET ST NEW WILMINGTON, PA 16172	25-0961156	501 (C) (3)	156,475.				GENERAL SUPPORT
(2) WHITAKER CENTER FOR SCIENCE AND ARTS 222 MARKET STREET HARRISBURG, PA 17101	25-1724566	501 (C) (3)	215,000.				GENERAL SUPPORT
(3) WHITE ROSE LEADERSHIP INSTITUTE 144 ROOSEVELT AVE YCRK, PA 17401	83-1246505	501 (C) (3)	15,000.				COMMUNITY LEVEL
(4) WILLIAMSPORT LYCOMING CHAMBER OF COMMERCE 102 WEST 4TH STREET WILLIAMSPORT, PA 17701	24-0762260	501 (C) (3)	18,138.				GENERAL SUPPORT
(5) WILLIAMSPORT SYMPHONY ORCHESTRA 220 WEST FOURTH ST WILLIAMSPORT, PA 17701	23-7318530	501 (C) (3)	11,000.				GENERAL SUPPORT
(6) WILLIAMSPORT-LYCOMING ARTS COUNCIL 46 WEST FOURTH ST WILLIAMSPORT, PA 17701	23-2014255	501 (C) (3)	27,000.				GENERAL SUPPORT
(7) WIRELESS NEIGHBORHOODS 5429 PENN AVE PITTSBURGH, PA 15206	20-0557748	501 (C) (3)	10,000.				GENERAL SUPPORT
(8) WITF INC 4801 LINDLE ROAD HARRISBURG, PA 17111	23-1629016	501 (C) (3)	14,500.				GENERAL SUPPORT
(9) WOFFORD ENTERPRISES LTD PO BOX 5418 HARRISBURG, PA 17110	46-1506657	N/A	5,470.				GENERAL SUPPORT
(10) WOODLANDS FOUNDATION 134 SHENOT ROAD WEXFORD, PA 15090	25-1818538	501 (C) (3)	12,500.				GENERAL SUPPORT
(11) XAVIER UNIVERSITY OF LOUISIANA 1 DREXEL DR NEW ORLEANS, LA 70125	72-0635884	501 (C) (3)	10,000.				GENERAL SUPPORT
(12) YMCA OF CARLISLE 311 S. WEST ST. CARLISLE, PA 17013	23-1386198	501 (C) (3)	6,000.				COMMUNITY LEVEL

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3** Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

**SCHEDULE I
(Form 990)**

Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Employer identification number

20-8295721

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) YMCA OF GREATER PITTSBURGH 680 ANDERSEN DR PITTSBURGH, PA 15220	25-0969497	501 (C) (3)	132,000.				COMMUNITY DEVELOPMENT
(2) YORK COLLEGE OF PENNSYLVANIA 441 COUNTRY CLUB RD YORK, PA 17403	23-1352698	501 (C) (3)	45,000.				GENERAL SUPPORT
(3) YORK COUNTY ECONOMIC ALLIANCE 144 ROOSEVELT AVE YCRK, PA 17401	45-3777710	501 (C) (6)	13,570.				GENERAL SUPPORT
(4) YORK COUNTY FOOD BANK 15 MARIANNE DR YORK, PA 17406	23-2452484	501 (C) (3)	5,750.				GENERAL SUPPORT
(5) YOUNG ADULT SURVIVORS UNITED 5110 LAKEWOOD DR GIBSONIA, PA 15044	84-4040055	501 (C) (3)	20,000.				GENERAL SUPPORT
(6) YOUNG BLACK MOTIVATED KINGS AND QUEENS 1835 CENTRE AVE PITTSBURGH, PA 15219	85-1852220	501 (C) (3)	15,000.				GENERAL SUPPORT
(7) YOUTHPLACES 711 WEST COMMONS PITTSBURGH, PA 15212	43-2068912	501 (C) (3)	30,000.				COMMUNITY DEVELOPMENT
(8) YWCA NORTHCENTRAL PA 815 W FOURTH ST WILLIAMSPORT, PA 17701	24-0796439	501 (C) (3)	15,000.				COMMUNITY DEVELOPMENT
(9) YWCA OF GREATER HARRISBURG 1101 MARKET ST HARRISBURG, PA 17103	23-1370514	501 (C) (3)	8,375.				COMMUNITY DEVELOPMENT
(10) YWCA OF HANOVER 23 W CHESTNUT ST HANOVER, PA 17331	23-1352608	501 (C) (3)	30,000.				COMMUNITY DEVELOPMENT
(11) ZOLL SERVICES LLC 121 GAMMA DR PITTSBURGH, PA 15238	20-1121194	N/A	33,075.				GENERAL SUPPORT
(12)							

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3** Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (Rev. 12-2024)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 PAYMENT OF FEES FOR ACUPUNCTURE SERVICES	305	32,536.			
2 PAYMENT OF FEES FOR MASSAGE SERVICES	206	8,430.			
3 HOUSING FINANCIAL ASSISTANCE	2	24,033.			
4 PAYMENT OF FEES FOR FITNESS CLASSES	99	15,150.			
5					
6					
7					

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

PART 1 LINE 2

IT IS THE POLICY OF UPMC TO CONTRIBUTE FINANCIAL SUPPORT TO TAX EXEMPT ORGANIZATIONS AND AGENCIES THAT SUPPORT THE UPMC MISSION AND STRENGTHEN THE HEALTH AND QUALITY OF LIFE OF THOSE WHO LIVE AND WORK IN THE COMMUNITIES WE SERVE. UPMC MAKES CERTAIN SUPPORT PAYMENTS TO THE UNIVERSITY OF PITTSBURGH (EIN 25-0965591) UNDER AN AFFILIATION AGREEMENT BETWEEN THE TWO ORGANIZATIONS FOR THE PURPOSE OF FURTHERING THEIR JOINT EDUCATIONAL AND RESEARCH MISSION. THE TOTAL OF THIS SUPPORT FOR THE FISCAL YEAR ENDING JUNE 30, 2025 INCLUSIVE OF AMOUNTS REPORTED ABOVE AND

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

ALL OTHER SUPPORT PAID BY UPMC ENTITIES IS IN EXCESS OF \$257M.

PART II

ASSISTANCE PROVIDED TO ENTITIES THAT ARE NOT SECTION 501(C)(3) ORGANIZATIONS ARE PROVIDED TO SUPPORT CHARITABLE INITIATIVES THAT THESE ORGANIZATIONS HAVE UNDERTAKEN.

**SCHEDULE J
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Employer identification number

20-8295721

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a	X	
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8	X	
9	X	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) (Rev. 12-2024)

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 FADI SWEISS MD NEUROSURGEON	(i)	1,838,061.	1,814,647.	2,508.	22,000.	3,729,831.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
2 ABHINAV HUMAR MD TRANSPLANT SURGEON	(i)	2,242,550.	975,000.	10,062.	35,933.	3,273,363.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
3 MATTHEW EL-KADI MD NEUROSURGEON	(i)	1,992,458.	672,016.	20,748.	NONE	2,691,577.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
4 JEAN CUNICELLI EVP & PRES, UPMC ENTERPRISES	(i)	936,935.	1,059,000.	281,150.	217,593.	2,536,289.	273,178.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
5 IBRAHIM SULTAN MD CARDIOTHORACIC SURGEON	(i)	1,652,550.	474,676.	45,198.	23,555.	2,205,797.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
6 JASON RUGGLES (AUE) BOARD TREASURER & SECRETARY	(i)	299,069.	110,000.	29,072.	20,700.	497,256.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
7 ROGER ALTMAYER (AUE) BOARD MEMBER & VP	(i)	279,254.	160,000.	6,370.	37,362.	515,395.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
8 KELLY NOEL (AUE) BOARD PRESIDENT	(i)	434,973.	300,000.	1,533.	74,801.	842,374.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
9 ROBYN BECKWITH MBA (BH) BOARD SECRETARY	(i)	202,227.	35,185.	2,259.	24,024.	293,965.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
10 NEIL KARLS (BHM) TREASURER & CFO	(i)	159,430.	25,000.	307.	14,936.	223,182.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
11 JAMES HOUSER (CEM) PRESIDENT	(i)	210,530.	111,000.	654.	21,649.	343,833.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
12 DONALD GOODMAN (CEM) BOARD MEMBER AND V. PRESIDENT	(i)	172,519.	69,000.	2,450.	24,996.	278,731.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
13 DANIEL GLUNK MD (CCH) BOARD MEMBER & INTERIM PRESIDENT	(i)	267,158.	168,385.	3,783.	30,519.	471,537.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
14 JANIE HILFIGER (CCH) FORMER PRESIDENT	(i)	98,446.	62,000.	110,785.	8,283.	291,860.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
15 CAROLINE DANIELS MD (C) FORMER SECRETARY	(i)	294,064.	100,021.	1,002.	27,637.	452,072.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
16 LOREN ROTH MD (CCB) FORMER BOARD MEMBER	(i)	45,000.	NONE	NONE	16,136.	61,195.	NONE.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 JAMES GIAMMARCO (CCB) TREASURER & CFO	(i)	261,731.	137,000.	5,782.	38,719.	8,064.	451,296.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
MATTHEW HURFORD (CCB)	(i)	438,730.	378,349.	3,290.	99,824.	8,684.	928,877.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
2 LAURA MILLER ESQ (CCB) SECRETARY	(i)	254,726.	178,850.	42,694.	61,197.	31,472.	568,939.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
3 KERRY MALONEY (CLT) BOARD SECRETARY	(i)	161,627.	45,000.	1,511.	12,708.	37,707.	258,553.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
4 WILLIAM A NIGRO (CRP) BOARD MEMBER, TREAS AND CFO	(i)	116,292.	108,641.	946.	NONE	8,100.	233,979.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
5 BRYANT WESLEY ESQ (CRP) SECRETARY	(i)	285,649.	196,000.	33,673.	69,708.	708.	585,738.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
6 PHILIP M CACCHIONE MD BOARD CHAIR AND PRESIDENT	(i)	483,736.	242,365.	12,924.	36,915.	27,019.	802,959.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
7 DAVID GIBBONS (HHP) BOARD MEMBER	(i)	627,917.	560,000.	101,087.	138,569.	11,101.	1,438,674.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
8 JENNIFER VENNARE (HNA) PRESIDENT	(i)	215,810.	55,440.	686.	20,932.	19,484.	312,352.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
9 NANJI CASE (HNF) PRESIDENT	(i)	224,645.	92,000.	6,172.	27,914.	27,611.	378,342.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
10 ZACHARY LENHART (JMC) FORMER BOARD MEMBER	(i)	183,549.	55,000.	234.	15,741.	10,158.	264,682.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
11 DAWNDRA JONES (MYC) FORMER BOARD MEMBER	(i)	251,249.	154,000.	2,521.	37,037.	21,847.	466,654.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
12 CAROL VANZILE (MYC) BOARD SECRETARY	(i)	162,740.	NONE	1,549.	15,812.	29,551.	209,652.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
13 DAVID BOBRZYNSKI (MYC) BOARD TREASURER	(i)	191,015.	100,000.	4,155.	31,059.	27,596.	353,825.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
14 MARK ZACHARIA ESQ (MYC) BOARD VICE CHAIR	(i)	194,056.	99,142.	1,938.	21,441.	31,932.	348,509.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
15 ELIZABETH RITTER (PHM) BOARD MEMBER	(i)	396,798.	250,000.	693.	85,695.	50,550.	783,736.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 NATHAN MOORE MD (RHS) FORMER BOARD MEMBER	(i)	324,521.	6,781.	1,424.	33,718.	28,410.	394,854.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
2 AJAIPAL KANG MD (RHS) FORMER BOARD MEMBER	(i)	974,868.	538,995.	4,281.	34,360.	25,536.	1,578,040.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
3 LYNN RUPP (RHS) PRESIDENT	(i)	233,421.	145,200.	14,202.	33,490.	13,291.	439,604.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
4 DAVID KRUSZEWSKI MD (S) BOARD CHAIR & PRESIDENT	(i)	420,712.	200,202.	16,955.	36,906.	34,140.	708,915.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
5 CHARLES HAGERTY (SHB) BOARD VICE CHAIR	(i)	248,533.	111,194.	3,493.	31,117.	17,426.	411,763.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
6 ROGER DAVIS (SCS) FORMER BOARD MEMBER AND VP	(i)	46,312.	146,700.	182.	905.	23,808.	217,907.
	(ii)	117,676.	9,934.	2,926.	15,883.	11,152.	157,571.
7 NANCY PASTORIUS (SCS) FORMER BOARD SECRETARY AND COO	(i)	NONE	NONE	NONE	NONE	NONE	NONE
	(ii)	632,811.	569,550.	1,318.	21,930.	40,962.	1,266,571.
8 VWAIRE ORHURHU MD (SHF) FORMER BOARD MEMBER	(i)	NONE	NONE	NONE	NONE	NONE	NONE
	(ii)	251,285.	70,000.	3,532.	22,757.	8,265.	355,839.
9 ROGER YOST (SHS) BOARD ASST TREASURER & CFO	(i)	NONE	NONE	NONE	NONE	NONE	NONE
	(ii)	345,783.	132,920.	1,092.	22,944.	35,586.	538,325.
10 CHRISTOPHER DOMAREW MD FORMER BOARD MEMBER	(i)	NONE	NONE	NONE	NONE	NONE	NONE
	(ii)	328,698.	274,578.	4,971.	27,600.	32,677.	668,524.
11 DAVID LOPATOFSKY MD (S) BOARD PRESIDENT	(i)	NONE	NONE	NONE	NONE	NONE	NONE
	(ii)	226,186.	11,500.	46,457.	12,437.	27,114.	323,694.
12 REBECCA RICKARD MD (SP) FORMER BOARD MEMBER	(i)	NONE	NONE	NONE	NONE	NONE	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
13 MARK BONDI (THS) PRESIDENT	(i)	130,878.	253,875.	103,917.	NONE	31,485.	520,155.
	(ii)	212,943.	120,000.	9,040.	29,761.	11,431.	383,175.
14 NOREEN FREDRICK (TLC) BOARD PRESIDENT	(i)	NONE	NONE	NONE	NONE	NONE	NONE
	(ii)	152,610.	NONE	449.	13,839.	2,285.	169,183.
15 JAMES WYLER (TLC) FORMER BOARD VICE PRESIDENT	(i)	NONE	NONE	NONE	NONE	NONE	NONE
	(ii)	1,427,189.	NONE	159,746.	305,825.	37,126.	1,929,886.
16 STANLEY MARKS MD (UPC) BOARD CHAIR	(i)	2,042,543.	112,106.	NONE	NONE	NONE	2,154,649.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

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	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
ROBERT FERRIS MD (UPC)	914,412.	289,925.	7,547.	27,600.	9,390.	1,248,874.	NONE
1 BOARD MEMBER AND VICE CHAIR	NONE	NONE	NONE	NONE	NONE	NONE	NONE
ELIZABETH A WILD (UPC)	564,768.	497,568.	2,022.	119,168.	3,881.	1,187,407.	NONE
2 BOARD MEMBER AND PRESIDENT	NONE	NONE	NONE	NONE	NONE	NONE	NONE
CHARLES FLACH (UPC)	217,940.	141,488.	1,074.	24,176.	1,560.	386,238.	NONE
3 TREASURER AND CFO	NONE	NONE	NONE	NONE	NONE	NONE	NONE
KRISTIN LASHER (UHC)	135,946.	15,800.	292.	8,274.	3,451.	163,763.	NONE
4 SECRETARY	NONE	NONE	NONE	NONE	NONE	NONE	NONE
SAMIR SABA MD (UPP)	711,060.	149,682.	51,416.	40,706.	9,360.	962,224.	NONE
5 BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
PABLO SANCHEZ MD (UPP)	325,850.	NONE	6,799.	4,896.	7,358.	344,903.	NONE
6 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
VICTOR MORELL MD (UPP)	2,334,330.	63,000.	15,444.	39,760.	10,468.	2,463,002.	NONE
7 BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JANET WATERS MD (UPP)	259,564.	27,330.	7,864.	22,742.	3,050.	320,550.	NONE
8 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
CHRISTINA PATTERSON MD	283,740.	25,770.	38,813.	26,511.	3,290.	378,124.	NONE
9 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
LIRON PANTANOWITZ MD (	489,534.	50,000.	8,063.	14,398.	9,593.	571,588.	NONE
10 BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
MAREK A RADOMSKI DO (U	484,194.	NONE	34,744.	29,731.	3,679.	552,348.	NONE
11 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
HEATH SKINNER MD (UPP)	408,837.	120,000.	1,747.	25,907.	3,841.	560,332.	NONE
12 BOARD MEMBER AND DEPT CHAIR	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOE SUYAMA MD (UPP)	329,729.	NONE	104,558.	37,185.	3,219.	474,691.	NONE
13 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
RICKQUEL TRIPP MD (UPP)	364,438.	NONE	68,557.	25,504.	3,130.	461,629.	NONE
14 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
BHAGAT KONDAVEETI MD (	360,093.	10,000.	1,045.	27,097.	3,745.	401,980.	NONE
15 BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
RICHARD BEIGI MD (UPP)	496,573.	365,000.	200,525.	115,127.	5,248.	1,182,473.	NONE
16 BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE

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	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
MACALUS HOGAN MD (UPP)	(i) 1,104,367.	150,000.	2,340.	27,052.	8,216.	1,291,975.	NONE
1 BOARD MEMBER	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JULES SUMKIN MD (UPP)	(i) 476,320.	248,830.	30,864.	50,819.	9,223.	816,056.	NONE
2 BOARD MEMBER AND SECRETARY	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
DAVID A LEWIS MD (UPP)	(i) 372,292.	313,731.	19,765.	43,599.	6,955.	756,342.	NONE
3 BOARD MEMBER AND DEPT CHAIR	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
GEORGE K MICHALOPOULO	(i) 318,837.	NONE	12,439.	49,300.	7,337.	387,913.	NONE
4 FORMER BOARD MEMBER AND DEPT C	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
LOUIS D FALO JR MD (UP)	(i) 219,203.	258,227.	14,265.	45,751.	4,146.	541,592.	NONE
5 BOARD MEMBER AND DEPT CHAIR	(ii) 255,594.	80,000.	NONE	31,800.	25,960.	393,354.	NONE
MELINDA HAMILTON MD (U	(i) 196,478.	NONE	127,722.	24,659.	3,151.	352,010.	NONE
6 FORMER BOARD MEMBER	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JAMES D LUKETICH MD (U	(i) 1,460,988.	NONE	30,900.	50,551.	9,443.	1,551,882.	NONE
7 FORMER BOARD MEMBER AND DEPT C	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
SYLVIA OWUSU-ANSAH MD	(i) 254,577.	33,702.	25,585.	22,342.	3,192.	339,398.	NONE
8 FORMER BOARD MEMBER	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
J PETER RUBIN MD (UPP)	(i) 738,440.	186,250.	9,211.	28,504.	9,635.	972,040.	NONE
9 BOARD MEMBER AND DEPT CHAIR	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
GWENDOLYN SOWA MD (UPP)	(i) 219,190.	176,204.	2,040.	32,146.	2,792.	432,372.	NONE
10 BOARD MEMBER AND DEPT CHAIR	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
ROBERT M FRIEDLANDER M	(i) 1,438,069.	350,981.	10,230.	35,138.	9,818.	1,844,236.	NONE
11 BOARD MEMBER AND DEPT CHAIR	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
TERENCE DERMODY MD (UP)	(i) 444,674.	70,937.	15,270.	32,058.	7,897.	570,836.	NONE
12 BOARD MEMBER AND DEPT CHAIR	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
EMILIA DIEGO MD (UPP)	(i) 493,236.	29,644.	40,765.	29,600.	6,650.	599,895.	NONE
13 BOARD MEMBER AND DEPT CHAIR	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
WILLIAM DONALDSON MD (	(i) 624,879.	NONE	139,217.	50,522.	9,515.	824,133.	NONE
14 FORMER BOARD MEMBER AND INTERI	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOSE SAHEL MD (UPP)	(i) 726,764.	245,695.	29,185.	32,058.	8,163.	1,041,865.	NONE
15 BOARD MEMBER AND DEPT CHAIR	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
AMAN MAHAJAN MD (UPP)	(i) 772,179.	200,000.	8,674.	26,876.	9,565.	1,017,294.	NONE
16 BOARD MEMBER AND DEPT CHAIR	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE

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	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
ROBERT P EDWARDS MD (U	783,563.	758,813.	204,360.	176,451.	10,620.	1,933,807.	NONE
1 BOARD MEMBER AND DEPT CHAIR	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JONAS JOHNSON MD (UPP)	95,756.	NONE	11,334.	30,108.	33,993.	171,191.	NONE
2 FORMER BOARD MEMBER AND TREASU	NONE	NONE	NONE	NONE	NONE	NONE	NONE
TIMOTHY BILLIAR MD (UP	498,520.	754,000.	175,960.	219,734.	11,524.	1,659,738.	NONE
3 BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
MONICA BOLLAND MD (UPP	213,656.	85,500.	13,023.	14,688.	3,329.	330,196.	NONE
4 BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
AMANDA CASAGRANDE MD (	111,900.	2,565.	87,035.	8,510.	1,579.	211,589.	NONE
5 BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
KAVITHA CONTI MD (UPP)	285,587.	25,310.	39,443.	26,687.	1,269.	378,296.	NONE
6 BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
TRACEY CONTI MD (UPP)	193,734.	45,000.	1,427.	28,406.	1,227.	269,794.	NONE
7 BOARD MEMBER AND DEPT CHAIR	NONE	NONE	NONE	NONE	NONE	NONE	NONE
BRIAN FRITZ (UPP)	345,406.	280,000.	12,736.	72,823.	20,274.	731,239.	11,425.
8 CHIEF FINANCIAL OFFICER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JANE LIEBSCHUTZ MD (UP	136,961.	12,132.	1,837.	12,929.	2,265.	166,124.	NONE
9 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
ARTHUR S LEVINE MD (U	NONE	NONE	NONE	NONE	NONE	NONE	NONE
10 FORMER BOARD MEMBER	820,414.	NONE	36,587.	41,400.	20,655.	919,056.	NONE
ANANTHA SHEKHAR MD (UP	NONE	NONE	NONE	NONE	NONE	NONE	NONE
11 BOARD MEMBER	1,079,184.	400,000.	31,242.	141,400.	49,059.	1,700,885.	NONE
JOAN GABEL (UPM)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
12 BOARD MEMBER	968,964.	122,652.	14,850.	27,600.	107,134.	1,241,200.	NONE
EDWARD T KARLOVICH (UP	5,318.	1,455,000.	1,130.	288.	11,917.	1,473,653.	NONE
13 FORMER EVP & CFO	NONE	NONE	NONE	NONE	NONE	NONE	NONE
FREDERICK HARGETT (UPM	1,483,647.	1,550,000.	4,904.	324,150.	34,516.	3,397,217.	NONE
14 EVP & CFO	NONE	NONE	NONE	NONE	NONE	NONE	NONE
DEREK ANGUS MD (UPM)	583,440.	315,000.	15,444.	45,378.	9,755.	969,017.	NONE
15 FORMER EVP & CHIEF INNOVATION	NONE	NONE	NONE	NONE	NONE	NONE	NONE
MARK SEVCO (UPM)	NONE	NONE	1,087,144.	NONE	4,097.	1,091,241.	885,221.
16 FORMER EVP & PRESIDENT HSD	NONE	NONE	NONE	NONE	NONE	NONE	NONE

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	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
JOON SUP LEE MD (UPM)	(i) NONE	NONE	465,854.	NONE	NONE	465,854.	465,854.
1 FORMER EVP & PRES PHYSICIAN SR	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
OSCAR MARROQUIN MD (UP	(i) 897,075.	700,000.	308,447.	228,082.	3,783.	2,137,387.	258,566.
2 SVP & PRES PHYSICIAN SERVICES	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
W THOMAS MCGOUGH ESQ (	(i) 5,796.	1,670,000.	1,980.	300.	11,639.	1,689,715.	NONE
3 FORMER EVP & CHIEF LEGAL OFFIC	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
MARK TAMBURRI (UPM)	(i) 773,304.	663,325.	221,200.	187,460.	38,546.	1,883,835.	217,843.
4 EVP & CHIEF LEGAL OFFICER	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
DAVID FARNER (UPM)	(i) 1,184,496.	2,440,000.	815,772.	281,387.	41,459.	4,763,114.	802,910.
5 EVP & CHIEF OF STAFF	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
C TALBOT HEPPENSTALL J	(i) 115,311.	NONE	414,268.	22,089.	29,664.	581,332.	412,290.
6 FORMER EVP, TREAS., & PRES ENT	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOHN C STILLEY (UPM)	(i) 595,352.	545,000.	50,361.	133,444.	35,834.	1,359,991.	46,200.
7 SENIOR VP, TREAS., & CIO	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOEL B NELSON MD (UPM)	(i) 977,878.	850,000.	103,193.	235,577.	11,296.	2,177,944.	85,857.
8 EVP, UPMC CHIEF CLINICAL OFF &	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOEL YUHAS (UPM)	(i) 939,503.	1,062,500.	82,769.	214,748.	35,491.	2,335,011.	76,391.
9 EVP, UPMC & PRES, UPMC HOSPITA	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
CHARLES BOGOSTA (UPM)	(i) 568,475.	1,617,000.	279,128.	144,600.	34,084.	2,643,287.	263,832.
10 FORMER EVP & PRES INT'L	(ii) 7,500.	NONE	450.	900.	152.	9,002.	NONE
DIANE HOLDER (UPM)	(i) NONE	NONE	NONE	NONE	NONE	NONE	NONE
11 EVP, PRES INS SVC & CEO HELAN	(ii) 568,926.	4,065,000.	568,678.	266,164.	36,000.	5,504,768.	522,294.
MICHELE P JEGASOTHY ES	(i) 235,092.	163,460.	29,825.	64,931.	29,829.	523,137.	28,077.
12 SECRETARY	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
MARSHALL WEBSTER MD (U	(i) 209,126.	883,000.	246,766.	99,799.	10,675.	1,449,366.	197,794.
13 FORMER SENIOR VP	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOHN GALLEY (UPM)	(i) 717,643.	672,800.	121,577.	158,524.	21,293.	1,691,837.	110,400.
14 SENIOR VP & CHIEF HR OFFICER	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
LESLIE C DAVIS (UPM)	(i) 2,048,483.	9,500,000.	1,037,593.	699,277.	38,667.	13,324,020.	1,006,472.
15 PRESIDENT & CEO	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
MARGARET EALY (APP)	(i) 194,433.	150,500.	950.	18,998.	7,071.	371,952.	NONE
16 BOARD MEMBER, VP & COO	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE

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MICHAEL SCHLECHTER MD							
1 FORMER BOARD MEMBER	(i) 84,145.	NONE	854.	34,120.	1,761.	120,880.	NONE
ROBERT SULLIVAN MD (AL	(ii) 296,078.	NONE	3,249.	NONE	8,805.	308,132.	NONE
2 FORMER BOARD MEMBER	(i) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JAN E FISHER (ALT)	(ii) 229,088.	10,932.	3,844.	15,209.	3,780.	262,853.	NONE
3 FORMER PRESIDENT	(i) 246,845.	323,000.	132,569.	78,388.	28,927.	809,729.	NONE
MICHAEL CORSO (ALT)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
4 PRESIDENT	(i) 334,252.	136,000.	1,945.	106,521.	27,784.	606,502.	NONE
MARIO WILFONG (ALT)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
5 FORMER TREASURER AND CFO	(i) 210,329.	132,000.	2,146.	28,062.	32,223.	404,760.	NONE
TIMOTHY BALCONI (ALF)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
6 PRESIDENT	(i) 182,401.	11,812.	3,751.	20,681.	30,505.	249,150.	NONE
MONICA KLATT (APH)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
7 BOARD SECY, TREAS & CFO	(i) 195,597.	94,000.	416.	19,767.	18,075.	327,855.	NONE
AMY MEISTER (ASC)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
8 PRESIDENT	(i) 290,090.	50,000.	1,772.	57,791.	6,063.	405,716.	NONE
RONALD DEEMS (ASC)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
9 TREASURER	(i) 235,184.	87,000.	623.	22,042.	4,426.	349,275.	NONE
MELISSA KOVTUN (ASC)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
10 SECRETARY	(i) 241,809.	77,650.	1,899.	20,416.	12,750.	354,524.	NONE
TIMOTHY HORSKY DO (BDF	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
11 FORMER BOARD MEMBER	(i) NONE	NONE	48,125.	NONE	3,916.	52,041.	NONE
ELLIOTT BILOFSKY MD (B	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
12 FORMER BOARD MEMBER	(i) 625,459.	265,792.	8,395.	33,109.	6,541.	939,296.	NONE
JOSEPH TALARICO DO (BD	(ii) 416,582.	18,481.	11,750.	43,007.	30,028.	519,848.	NONE
13 FORMER BOARD MEMBER	(i) NONE	NONE	NONE	NONE	NONE	NONE	NONE
CHRISTOPHER SNEIDER MD	(ii) 423,173.	21,003.	1,368.	26,449.	39,217.	511,210.	NONE
14 BOARD MEMBER	(i) NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOSHUA WEDGE (CAR)	(ii) 206,697.	148,450.	466.	18,978.	23,302.	397,893.	NONE
15 BOARD PRESIDENT & SECRETARY	(i) NONE	NONE	NONE	NONE	NONE	NONE	NONE
CECIL MILLER (CHS)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
16 SECRETARY	(i) 180,381.	69,000.	1,588.	21,806.	6,474.	279,249.	NONE

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	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
EMELIA HARLEY (CHS)							
1 SECRETARY	(i) NONE	NONE	NONE	NONE	NONE	NONE	NONE
DIANE HUPP (CHP)	(ii) 171,818.	69,400.	4,465.	22,713.	26,842.	295,238.	NONE
2 SECRETARY & VP OF OPERATIONS	(i) 472,586.	360,000.	74,487.	118,935.	3,835.	1,029,843.	68,100.
FRANCIS SOLANO MD (CMI)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
3 FORMER BOARD MEMBER AND PRESID	(i) 199,936.	317,900.	76,007.	65,262.	29,642.	688,747.	72,526.
DONNA OTTOVIANI (CMI)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
4 FORMER BOARD MEMBER SECRETARY,	(i) 110,214.	136,500.	123,285.	14,638.	12,544.	397,181.	NONE
DEBORAH S BRODINE (CPS)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
5 BOARD CHAIR AND PRESIDENT	(i) 469,471.	365,000.	73,371.	118,450.	33,842.	1,060,134.	68,100.
MARC CORDERO MD (EAS)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
6 FORMER BOARD MEMBER	(i) 409,677.	73.	24,632.	29,775.	5,574.	469,731.	NONE
LAURENE TIMMONS (EAS)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
7 BOARD SECY, TREAS & CFO	(i) 196,812.	96,000.	5,198.	27,321.	7,465.	332,796.	NONE
MARK O'HERN (EAS)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
8 PRESIDENT	(i) 291,133.	260,000.	8,584.	24,150.	8,122.	591,989.	NONE
RICHARD WADAS MD (EMI)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
9 BOARD MEMBER AND PRESIDENT	(i) 650,075.	368,750.	98,048.	118,705.	10,081.	1,245,659.	70,151.
DONALD M YEALY MD (EMI)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
10 BOARD MEMBER AND V PRESIDENT	(i) 848,104.	615,000.	189,724.	183,274.	1,560.	1,837,662.	128,000.
RUSSELL MEYERS (EMI)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
11 BOARD TREASURER	(i) 163,445.	80,000.	522.	18,191.	7,208.	269,366.	NONE
TERRENCE LEWIS ESQ (EM)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
12 SECRETARY	(i) 189,327.	97,000.	1,103.	20,693.	15,321.	323,444.	NONE
JAMES SCHUSTER MD (FYO)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
13 FORMER BOARD MEMBER	(i) 594,104.	530,132.	26,433.	139,190.	36,849.	1,326,708.	NONE
JOHN LOVELACE (FYO)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
14 FORMER BOARD MEMBER AND PRESID	(i) 79,700.	523,200.	NONE	NONE	6,895.	609,795.	NONE
GORDON GEBBENS (FYO)	(ii) 498,630.	446,000.	89,977.	121,828.	26,185.	1,182,620.	NONE
15 BOARD MEMBER, TREAS & CFO	(i) NONE	NONE	NONE	NONE	NONE	NONE	NONE
SHERYL KASHUBA ESQ (FY)	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
16 BOARD MEMBER, SECTY & CLO	(i) 642,179.	542,000.	11,665.	141,225.	35,107.	1,372,176.	NONE

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Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 CARRIE ENNIS (HMT) BOARD SECRETARY	(i)	166,771.	41,200.	511.	16,426.	242,908.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
2 ALLISON TROWELL (HAN) BOARD MEMBER	(i)	224,326.	36,500.	874.	16,290.	317,620.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
3 TINA CARROLL (HAN) BOARD MEMBER	(i)	171,010.	69,000.	981.	18,625.	278,437.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
4 JOHN GOLDMAN MD (HAN) BOARD MEMBER	(i)	429,408.	190,000.	19,988.	46,402.	724,457.	13,520.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
5 MICHAEL GASKINS (HAN) PRESIDENT	(i)	459,048.	220,000.	5,327.	85,819.	814,115.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
6 MICHAEL BONINGER MD (H) FORMER BOARD MEMBER & PRESIDEN	(i)	215,755.	60,000.	3,168.	32,863.	312,983.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
7 SUSAN DUCHMAN (HNV) FORMER BOARD MEMBER	(i)	258,512.	157,070.	7,036.	30,712.	459,383.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
8 SUSAN THOMPSON (HNV) BOARD CHAIR	(i)	189,476.	NONE	1,678.	17,045.	211,332.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
9 HOLLY LORENZ (HHW) FORMER BOARD MEMBER	(i)	NONE	NONE	149,537.	NONE	149,537.	149,537.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
10 ROBERT GRIFFITH (HHW) BOARD TREASURER AND CFO	(i)	206,658.	32,398.	470.	20,508.	271,328.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
11 MICHAEL TRACY (HRF) CHIEF FINANCIAL OFFICER	(i)	186,719.	57,500.	716.	19,651.	277,460.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
12 JAMES DONNELLY (KAN) BOARD VICE CHAIR	(i)	256,167.	152,000.	7,031.	33,775.	478,017.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
13 MARK PAPALIA (KAN) PRESIDENT	(i)	151,221.	60,000.	9,261.	14,510.	249,233.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
14 CHRISTINE DANG MD (LIT) BOARD MEMBER	(i)	390,889.	69,290.	1,496.	26,449.	498,313.	NONE
	(ii)	309,834.	NONE	7,026.	26,368.	355,631.	NONE
15 THOMAS FROMUTH MD (LIT) BOARD MEMBER	(i)	NONE	NONE	NONE	NONE	NONE	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
16 ABBY GELETZKE MD (LIT) BOARD MEMBER	(i)	370,033.	NONE	780.	22,424.	432,292.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE

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Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
DEBORAH WILLWERTH (LIT)	343,200.	110,000.	9,706.	72,717.	23,845.	559,468.	4,184.
1 PRESIDENT & SECRETARY	NONE	NONE	NONE	NONE	NONE	NONE	NONE
DONNA MULLER (LIT)	211,411.	58,000.	1,012.	16,816.	1,339.	288,578.	NONE
2 CFO	NONE	NONE	NONE	NONE	NONE	NONE	NONE
PATRICIA JACKSON-GEHRI	461,098.	200,000.	38,525.	102,706.	2,598.	804,927.	32,928.
3 BOARD SECRETARY	NONE	NONE	NONE	NONE	NONE	NONE	NONE
RONALD REYNOLDS (ULH)	249,555.	100,000.	2,434.	57,881.	5,685.	415,555.	NONE
4 BOARD PRESIDENT AND ASST. SEC. RE	NONE	NONE	NONE	NONE	NONE	NONE	NONE
LOUIS BAVERSO (LOC)	NONE	NONE	44,260.	NONE	8,552.	52,812.	44,260.
5 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
BYRON WADE (LOC)	103,281.	50,000.	82,314.	7,487.	761.	243,843.	NONE
6 FORMER BOARD PRESIDENT	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOHN COMERCI MD (MAG)	693,050.	NONE	59,521.	36,824.	9,184.	798,579.	NONE
7 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
STEPHEN EMERY (MAG)	393,889.	27,793.	58,641.	38,257.	3,367.	521,947.	NONE
8 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JONATHAN PETRIE (MAG)	194,767.	80,000.	418.	20,188.	31,107.	326,480.	NONE
9 BOARD MEMBER AND CFO	NONE	NONE	NONE	NONE	NONE	NONE	NONE
KENNETH FLOWEY MD (MCK)	292,729.	119,424.	1,165.	20,518.	28,601.	462,437.	NONE
10 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
SUSAN MARTIN (MER)	123,247.	72,000.	2,852.	13,077.	25,226.	236,402.	NONE
11 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOHN WARD (NER)	533,341.	4,487.	8,294.	35,824.	37,623.	619,569.	NONE
12 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
AJ PINEVICH MD (MER)	344,517.	165,700.	12,663.	45,947.	22,695.	591,522.	7,459.
13 BOARD SECRETARY	NONE	NONE	NONE	NONE	NONE	NONE	NONE
MICHAEL WARD MD (NWH)	580,655.	54,363.	2,072.	28,043.	33,703.	698,836.	NONE
14 FORMER BOARD MEMBER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
BRIAN DURNIOK (NWH)	469,211.	330,000.	126,700.	116,284.	12,595.	1,054,790.	79,841.
15 BOARD MEMBER AND PRESIDENT	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JONATHAN BAILEY (NWH)	181,929.	37,062.	1,416.	22,217.	18,065.	260,689.	NONE
16 PRESIDENT	NONE	NONE	NONE	NONE	NONE	NONE	NONE

Schedule J (Form 990) (Rev. 12-2024)

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Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
BRADLEY DINGER (NWH) 1 CFO AND TREASURER	(i)	200,007.	97,000.	2,756.	25,768.	342,731.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
JEFFREY KNORR (BHO) 2 SECRETARY	(i)	206,579.	144,000.	393.	22,499.	377,466.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
TRACEY BEIRIGER ESQ (O) 3 BOARD SECRETARY	(i)	250,253.	177,217.	34,135.	69,746.	562,229.	29,610.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
DANIEL R SULLIVAN MD (4 BOARD SECRETARY	(i)	110,110.	NONE	53,313.	18,816.	183,140.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
NAFIS HILL (PSV) 5 CHIEF FINANCIAL OFFICER	(i)	183,466.	55,000.	1,094.	18,270.	288,408.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
SUSAN HOOLAHAN (PSV) 6 PRESIDENT	(i)	360,548.	360,000.	7,075.	27,600.	777,720.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
ELIZABETH PICCIONE MD 7 PRESIDENT	(i)	499,488.	261,000.	78,881.	92,312.	968,672.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
ANTHONY GUARRACINO DO 8 BOARD MEMBER	(i)	NONE	NONE	NONE	NONE	NONE	NONE
	(ii)	435,325.	64,645.	6,914.	29,899.	547,473.	NONE
THOMAS NICHOLSON MD (P) 9 BOARD MEMBER	(i)	858,250.	NONE	3,588.	30,192.	933,748.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
KENNETH OKEN MD (PIN) 10 BOARD MEMBER	(i)	472,613.	NONE	5,544.	30,474.	534,079.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
CHRISTINA PERSSON (PIN) 11 SECRETARY	(i)	225,157.	91,000.	2,069.	23,896.	355,615.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
GREGORY MITSTIFER (PIN) 12 TREASURER AND CFO	(i)	228,656.	130,000.	456.	17,894.	412,103.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
TIMOTHY DEINLING MD (P) 13 BOARD MEMBER	(i)	393,176.	NONE	30,362.	21,579.	447,769.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
SANDRA RADER (PRY) 14 PRESIDENT	(i)	568,644.	540,000.	99,018.	133,696.	1,377,515.	88,200.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
JAMES D TEW MD (PRY) 15 FORMER BOARD MEMBER	(i)	381,869.	30,000.	49,102.	34,262.	498,772.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE
JAMES F PINGPANK MD (P) 16 FORMER BOARD MEMBER	(i)	586,864.	NONE	50,390.	35,885.	681,656.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE

Schedule J (Form 990) (Rev. 12-2024)

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(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation				(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(iv) Other reportable compensation				
1 EILEEN SIMMONS (PRY) CHIEF FINANCIAL OFFICER	487,183. NONE	495,000. NONE	81,999. NONE	123,100. NONE	20,206. NONE	1,207,488.	75,600.	
JARED WEINER (PRY) CHIEF FINANCIAL OFFICER	294,479. NONE	180,000. NONE	1,957. NONE	31,325. NONE	19,206. NONE	526,967.	1,363.	
JOHN INNOCENTI (PRY) FORMER PRESIDENT	291,109. NONE	715,000. NONE	22,226. NONE	88,636. NONE	31,375. NONE	1,148,346.	NONE	
DAVID PATTON (SMH) PRESIDENT	349,169. NONE	125,000. NONE	38,601. NONE	82,208. NONE	28,116. NONE	623,094.	36,379.	
ANDREW RITCHIE (SMH) PRESIDENT	203,746. NONE	300,000. NONE	100,568. NONE	NONE	4,553. NONE	608,867.	NONE	
ANDREW RUSH (SOM) PRESIDENT	342,113. NONE	170,000. NONE	2,608. NONE	72,713. NONE	29,552. NONE	616,986.	NONE	
STEPHEN NIMMO ESQ (SUS) FORMER BOARD MEMBER	NONE	175,000. NONE	330,882. NONE	NONE	NONE	505,882.	330,882.	
TAMI MINNIER (UTS) PRESIDENT	696,239. NONE	600,000. NONE	117,998. NONE	159,919. NONE	26,194. NONE	1,600,350.	105,000.	
KAREN WASTLER (WEL) CHIEF OPERATING OFFICER	255,400. NONE	126,144. NONE	2,356. NONE	22,273. NONE	1,850. NONE	408,023.	NONE	
STEVEN JOHNSON (WIL) FORMER BOARD MEMBER AND PRESIDENT	22,822. NONE	88,724. NONE	NONE	5,375. NONE	7,348. NONE	124,269.	82,728.	
KEVIN KIST DO (WIL) FORMER BOARD MEMBER	449,315. NONE	5,390. NONE	10,973. NONE	31,904. NONE	33,667. NONE	531,249.	NONE	
12								
13								
14								
15								
16								

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SCHEDULE J

PART I

QUESTION 1: UPMC MAY PROVIDE THE FOLLOWING BENEFITS TO CERTAIN EXECUTIVES

WHEN THEY ARE NECESSARY TO ACHIEVE UPMC'S CHARITABLE MISSION OBJECTIVES:

FIRST-CLASS OR CHARTER TRAVEL; TRAVEL FOR COMPANIONS; TAX
INDEMNIFICATION OR GROSS UP PAYMENTS; AND/OR BUSINESS CLUB DUES OR
INITIATION FEES. PROVISION OF ANY SUCH BENEFITS IS PREDICATED ON
COMPLIANCE WITH THE ORGANIZATION'S POLICIES, IS SUBJECT TO REVIEW AND
APPROVAL PROCESSES, AND IS TREATED AS TAXABLE INCOME TO THE EXECUTIVES
WHERE REQUIRED UNDER THE INTERNAL REVENUE CODE.

QUESTION 4A: CERTAIN PERSONS AS DISCLOSED IN PART II WERE PROVIDED
SEVERANCE OR SEPARATION PAYMENTS AS CONTRACTUALLY PROVIDED FOR PER UPMC'S
COMPENSATION POLICY. THESE PAYMENTS ARE PROPERLY REPORTED IN PART II,
COLUMN (B).

QUESTION 4B: ALL PERSONS PARTICIPATING IN A SUPPLEMENTAL NONQUALIFIED

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

RETIREMENT PLAN ARE DISCLOSED IN SCHEDULE J WITH CORRESPONDING AMOUNTS DISCLOSED WITHIN THE TOTAL AMOUNT IN SCHEDULE J COLUMN C "RETIREMENT AND OTHER DEFERRED COMPENSATION". DUE TO RESTRICTIONS IMPOSED BY THE INTERNAL REVENUE CODE ("CODE"), CERTAIN OFFICERS AND KEY EMPLOYEES ARE LIMITED IN THE AMOUNT OF BENEFITS WHICH MAY BE RECEIVED UNDER A TAX QUALIFIED RETIREMENT PROGRAM. LIKE MANY EMPLOYERS, UPMC SUPPLEMENTS ITS RETIREMENT BENEFITS THROUGH A SUPPLEMENTAL RETIREMENT PROGRAM. THE SUPPLEMENTAL RETIREMENT PROGRAM IS SUBJECT TO MULTI YEAR VESTING WHICH PLACES THE OFFICERS AND KEY EMPLOYEES' RETIREMENT BENEFIT AT RISK OF FORFEITURE IF THE VESTING REQUIREMENTS ARE NOT SATISFIED. ONCE VESTED HOWEVER, PROVISIONS OF THE CODE REQUIRE THAT THE VESTED AMOUNTS BE REPORTED ON THE FORM 990 AND THE VESTED OFFICER OR KEY EMPLOYEE INCLUDE IN CURRENT INCOME THE VALUE OF HER OR HIS SUPPLEMENTAL RETIREMENT BENEFIT. NOTWITHSTANDING THE TAX REQUIREMENT TO RECOGNIZE THE VESTED AMOUNT OF THE SUPPLEMENTAL RETIREMENT BENEFIT AS CURRENT INCOME FOR FICA TAXATION AND REPORTING PURPOSES, THIS BENEFIT, WHICH GENERALLY HAS BEEN EARNED OVER HER OR HIS ENTIRE CAREER, HAS NOT AND WILL NOT BE DISTRIBUTED UNTIL THE OFFICER OR KEY EMPLOYEE RETIRES OR SEPARATES FROM SERVICE FROM

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

UPMC AND SATISFIED THE NON-COMPETE PROVISION OF THEIR EMPLOYMENT AGREEMENT AND/OR SATISFY A POST-RETIREMENT SEPARATION AGREEMENT. THE SUPPLEMENTAL RETIREMENT PROGRAM PROVIDES FOR THE CURRENT DISTRIBUTION OF ONLY THE AMOUNT NECESSARY TO SATISFY ANY INCOME TAX LIABILITY RESULTING FROM THE VESTING DURING ACTIVE EMPLOYMENT. FINALLY, IT SHOULD BE NOTED THAT IN ACCORDANCE WITH IRS INSTRUCTIONS, A SUBSTANTIAL PORTION OF THE AMOUNT REPORTED ON THE FORM 990 ATTRIBUTABLE TO SUPPLEMENTAL RETIREMENT PROGRAM VESTING HAS BEEN REPORTED IN PREVIOUSLY FILED FORMS 990.

QUESTION 7: UPMC PROVIDES INCENTIVE COMPENSATION AS PART OF ITS TOTAL COMPENSATION PROGRAM FOR OFFICERS AND KEY EMPLOYEES. THIS COMPONENT IS BASED UPON THE ACCOMPLISHMENT OF PREDETERMINED PERFORMANCE GOALS AND OBJECTIVES WHICH FOCUS ON THE ACHIEVEMENT OF MULTIPLE ANNUAL AND THREE YEAR INDIVIDUAL AND GROUP PERFORMANCE CRITERIA IN THE CONTEXT OF APPROPRIATE RISK TAKING. THESE CRITERIA DIRECTLY SUPPORT UPMC'S MISSION AND INCLUDE: PATIENT QUALITY AND SATISFACTION, COMMUNITY BENEFITS, OPERATIONAL AND FINANCIAL STRENGTH, LEADERSHIP DEVELOPMENT, AND STRATEGIC BUSINESS INITIATIVES AMONG OTHERS.

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

QUESTION 8 & 9: UPMC FOLLOWS THE REBUTTABLE PRESUMPTION OF REASONABLENESS

PROCEDURES DESCRIBED IN REGULATIONS SECTION 53.4958-6(C), WHERE

APPLICABLE. THIS INCLUDES CONTRACTS THAT MAY QUALIFY FOR THE INITIAL

CONTRACT EXCEPTION UNDER REGULATIONS SECTION 53.4958-4(A)(3).

**SCHEDULE K
(Form 990)**
(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public
Inspection

Employer identification number

20-8295721

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No	Yes	No
A	GENERAL AUTHORITY OF SOUTHCENTRAL PENNSYLVANIA	23-2982233	84129NJV2	12/01/2015	26,665,698.	REFINANCE 2005 SERIES BOND ISSUE		X		X		X
B												
C												
D												

Part II Proceeds

	A	B		C		D	
		Yes	No	Yes	No	Yes	No
1 Amount of bonds retired	4,475,000.						
2 Amount of bonds legally defeased							
3 Total proceeds of issue	26,665,698.						
4 Gross proceeds in reserve funds	495,551.						
5 Capitalized interest from proceeds							
6 Proceeds in refunding escrows							
7 Issuance costs from proceeds	515,888.						
8 Credit enhancement from proceeds							
9 Working capital expenditures from proceeds							
10 Capital expenditures from proceeds							
11 Other spent proceeds	26,142,000.						
12 Other unspent proceeds							
13 Year of substantial completion	2015						
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	X						
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X					
16 Has the final allocation of proceeds been made?	X						
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X						

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) (Rev. 12-2024)

Part III Private Business Use

SET ONE

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X						
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government		%		%		%		%
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government		%		%		%		%
6 Total of lines 4 and 5		%		%		%		%
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of		%		%		%		%
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X						

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X						
b Exception to rebate?	X							
c No rebate due?		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?		X						

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions) (Continued)

REFINANCE 2005 SERIES BOND ISSUE

SCHEDULE K, PART I, BOND ISSUES:

(A) ISSUER NAME: GENERAL AUTHORITY OF SOUTHCENTRAL PENNSYLVANIA

SCHEDULE K, PART III, LINE 9, PART IV, LINE 7, PART V: THE ORGANIZATION UNDERSTANDS ITS OBLIGATIONS TO ENSURE THAT IT STAYS WITHIN SAFE HARBOUR REGULATIONS AND IS VERY PRUDENT IN ITS POST-BOND ISSUANCE RESPONSIBILITIES. THE ORGANIZATION HAS NOT ESTABLISHED WRITTEN PROCEDURES TO DATE AS THE BOND ISSUANCE IS A CURRENT REFUNDING AND SHOULD MEET EXCEPTIONS TO REBATE. THE ORGANIZATION WILL, HOWEVER, WORK TO ESTABLISH WRITTEN PROCEDURES AS ADDITIONAL SAFEGUARDS.

**SCHEDULE L
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open To Public
Inspection**

Name of the organization

UPMC GROUP

Employer identification number

20-8295721

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 \$ _____

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$ _____

Part II Loans to and/or From Interested Persons
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
Total							\$						

Part III Grants or Assistance Benefiting Interested Persons
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

1	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) SEE PART V					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

TRANSACTIONS WITH INTERESTED PERSONS

A NAME OF INTERESTED PERSON: CARLA KRIEGER
 B RELATIONSHIP BETWEEN INTERESTED PERSON AND THE ORGANIZATION:
 FAMILY MEMBER OF UPMC LITITZ
 BOARD MEMBER DONNA MULLER
 C AMOUNT OF TRANSACTION: 25,543.00
 D DESCRIPTION OF TRANSACTION: COMPENSATION
 E SHARING OF ORGANIZATIONS REVENUES: NO

A NAME OF INTERESTED PERSON: MICHAEL MONTLER
 B RELATIONSHIP BETWEEN INTERESTED PERSON AND THE ORGANIZATION:
 FAMILY MEMBER OF UPMC ALTOONA
 BOARD MEMBER ROBERT MONTLER
 C AMOUNT OF TRANSACTION: 99,979.00
 D DESCRIPTION OF TRANSACTION: COMPENSATION
 E SHARING OF ORGANIZATIONS REVENUES: NO

A NAME OF INTERESTED PERSON: EVONNE MORRELL MD
 B RELATIONSHIP BETWEEN INTERESTED PERSON AND THE ORGANIZATION:
 FAMILY MEMBER OF UNIVERSITY OF PITTSBURGH PHYSICIANS
 BOARD MEMBER VICTOR MORRELL
 C AMOUNT OF TRANSACTION: 263,833.00
 D DESCRIPTION OF TRANSACTION: COMPENSATION
 E SHARING OF ORGANIZATIONS REVENUES: NO

A NAME OF INTERESTED PERSON: EDITH TZENG MD
 B RELATIONSHIP BETWEEN INTERESTED PERSON AND THE ORGANIZATION:
 FAMILY MEMBER OF UNIVERSITY OF PITTSBURGH PHYSICIANS
 BOARD MEMBER TIMOTHY BILLIAR M.D.
 C AMOUNT OF TRANSACTION: 798,272.00

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

D DESCRIPTION OF TRANSACTION: COMPENSATION
 E SHARING OF ORGANIZATIONS REVENUES: NO

A NAME OF INTERESTED PERSON: CAMPUS SQUARE PARTNERS
 B RELATIONSHIP BETWEEN INTERESTED PERSON AND THE ORGANIZATION:
 35% CONTROLLED ENTITY OF BOARD MEMBER DOUGLAS NEIDICH
 C AMOUNT OF TRANSACTION: 444,106.00
 D DESCRIPTION OF TRANSACTION: RENT
 E SHARING OF ORGANIZATIONS REVENUES: NO

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

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Department of the Treasury
Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, line 29 or 30.
Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

UPMC GROUP

20-8295721

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		143,585.	FAIR MARKET VALUE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	31	10,534.	FAIR MARKET VALUE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (SEE SUPP PAGE)		218.	390,533.	
26 Other (_____)				
27 Other (_____)				
28 Other (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported on Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2024

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

ADDITIONAL INFORMATION

PART 1, COLUMN (B), LINE 25 - OTHER THE AMOUNTS IN COLUMN (B) REPRESENT
THE NUMBER OF CONTRIBUTIONS NOT THE NUMBER OF ITEMS CONTRIBUTED.

LINE 25 - OTHER - FOR VARIOUS FUNDRAISING EVENTS, STEELER ITEMS,
AMUSEMENT PARK ADMISSION TICKETS AND OTHER SUCH ITEMS ARE DONATED FOR USE
IN THE FUNDRAISING EVENT.

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

DESCRIPTION	(A) CHECK	(B) NUMBER OF CONTRIBUTIONS	(C) REVENUES REPORTED	(D) METHOD OF DETERMINING
GIFT CERT	X	94	204,705.	FAIR MARKET VAL
ADVERTISING	X	6	88,985.	FAIR MARKET VAL
MISCELLANEOUS	X	70	39,538.	FAIR MARKET VAL
ADMISSION TICKE	X	5	16,711.	FAIR MARKET VAL
TOYS	X	23	35,889.	FAIR MARKET VAL
GIFT BASKETS	X	14	1,735.	FAIR MARKET VAL
JEWELRY	X	4	1,020.	FAIR MARKET VAL
ENTERTAINMENT	X	2	1,950.	FAIR MARKET VAL
TOTALS		218.	390,533.	

Part I Liquidation, Termination, or Dissolution (continued)

Note: If the organization distributed all of its assets during the tax year, then Form 990, Part X, column (B), line 16 (Total assets), and line 26 (Total liabilities), should equal -0-

- 3 Did the organization distribute its assets in accordance with its governing instrument(s)? If "No," describe in Part III. **3**
- 4a Is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate? **4a**
- 4b If "Yes," did the organization provide such notice? **4b**
- 5 Did the organization discharge or pay all of its liabilities in accordance with state laws? **5**
- 6a Did the organization have any tax-exempt bonds outstanding during the year? **6a**
- 6b If "Yes" to line 6a, did the organization discharge or defease all of its tax-exempt bond liabilities during the tax year in accordance with the Internal Revenue Code and state laws? **6b**
- c If "Yes" on line 6b, describe in Part III how the organization defeased or otherwise settled these liabilities. If "No" on line 6b, explain in Part III.

Part II Sale, Exchange, Disposition, or Other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization answered "Yes" on Form 990, Part IV, line 32, or Form 990-EZ, line 36. Part II can be duplicated if additional space is needed.

1	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax exempt) or type of entity
	HAVEN PLACE ASSETS	03/01/2025	5,200,000.	THIRD PARTY VALUATION	99-4973562	24 CREE DRIVE LLC 115 DUTCH LN RD FREEHOLD, NJ 07728	LLC

2	Did or will any officer, director, trustee, or key employee of the organization:	Yes	No
a	Become a director or trustee of a successor or transferee organization?		X
b	Become an employee of, or independent contractor for, a successor or transferee organization?		X
c	Become a direct or indirect owner of a successor or transferee organization?		X
d	Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets?		X
e	If the organization answered "Yes" to any of the questions on lines 2a through 2d, provide the name of the person involved and explain in Part III		

Part III **Supplemental Information.** Provide the information required by Part I, lines 2e and 6c, and Part II, line 2e. Also complete this part to provide any additional information.

SCHEDULE N, PART II

UPMC LOCK HAVEN SOLD ALL ASSETS ASSOCIATED WITH HAVEN PLACE, A SKILLED NURSING FACILITY, TO AN UNRELATED THIRD PARTY FOR AN AMOUNT EQUAL TO SUCH ASSETS' FAIR MARKET VALUE.

**SCHEDULE O
(Form 990 or 990-EZ)**

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2024

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Internal Revenue Service

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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Name of the organization

Employer identification number

UPMC GROUP

20-8295721

PART 1 SUMMARY

PART 1, LINE 5 AND PART V LINE 2A

THE TOTAL NUMBER OF INDIVIDUALS EMPLOYED IN CALENDAR YEAR 2024 OF 97,353 IS REPRESENTATIVE OF THE SUM OF ALL INDIVIDUALS EMPLOYED BY EACH OF THE 87 SEPARATE AND DISTINCT LEGAL ENTITIES THAT ARE SUBSIDIARIES OF UPMC AND ARE INCLUDED IN THE GROUP RETURN.

PART I, LINE 8 CONTRIBUTIONS, GRANTS AND SIMILAR AMOUNTS RECEIVED:

PURSUANT TO TREASURY REGULATION SECTION 1.6033-2(D)(5) THE SPONSORING ENTITY OF UPMC GROUP, UPMC, HAS ELECTED TO REPORT INFORMATION ABOUT CONTRIBUTIONS, GRANTS AND SIMILAR AMOUNTS RECEIVED; INFORMATION ABOUT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES; CERTAIN OTHER HIGHLY PAID EMPLOYEES; CERTAIN INDEPENDENT CONTRACTORS ON A CONSOLIDATED BASIS ALONG WITH ALL MEMBERS OF THE UPMC GROUP RETURN.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

UPMC GROUP - EIN 20-8295721

FORM 990 - FISCAL YEAR ENDED 06/30/2025

PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

UPMC, A WORLD-RENOWNED HEALTH CARE PROVIDER AND INSURER, IS INVENTING NEW MODELS OF PATIENT-CENTERED, COST-EFFECTIVE, ACCOUNTABLE CARE. WITH A CENTRAL MISSION OF PROVIDING OUTSTANDING, ACCESSIBLE PATIENT CARE, UPMC IS SHAPING TOMORROW'S HEALTH CARE THROUGH CLINICAL AND TECHNOLOGICAL INNOVATION, RESEARCH, AND EDUCATION.

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

Supplemental Information to Form 990 or 990-EZ

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UPMC'S HEALTH SERVICES DIVISION ENCOMPASSES A COMPREHENSIVE ARRAY OF CLINICAL CAPABILITIES. THIS DIVISION INCLUDES ACADEMIC, COMMUNITY, AND REGIONAL HOSPITALS; PRE- AND POST-ACUTE CARE CAPABILITIES; SPECIALTY SERVICE LINES, SUCH AS TRANSPLANTATION SERVICES, WOMEN'S HEALTH, BEHAVIORAL HEALTH, PEDIATRICS, CANCER CARE, AND REHABILITATION SERVICES; CONTRACT SERVICES, SUCH AS EMERGENCY MEDICINE, PHARMACY, AND LABORATORY; AND MORE THAN 5,000 EMPLOYED PHYSICIANS WITH ASSOCIATED PRACTICES. UPMC'S ORGAN TRANSPLANT CENTER IS ONE OF THE LARGEST AND BUSIEST IN THE WORLD, PERFORMING MORE THAN 20,000 TRANSPLANTS SINCE 1981. THE UPMC HILLMAN CANCER CENTER IS ONE OF THE LARGEST INTEGRATED COMMUNITY CANCER NETWORKS IN THE UNITED STATES WITH MORE THAN 70 CENTERS IN PENNSYLVANIA, OHIO, NEW YORK, AND MARYLAND, AND MORE THAN 2,000 PHYSICIANS, RESEARCHERS, AND STAFF.

UPMC'S EXPERTISE IN ACADEMIC-BASED AND SPECIALIZED MEDICAL CARE, INCLUDING TRANSPLANTATION AND ONCOLOGY, IS KEY TO THE GLOBALIZATION EFFORTS BEING UNDERTAKEN THROUGH ITS INTERNATIONAL DIVISION, WHICH PROMOTES THE EXCHANGE OF SCIENTIFIC KNOWLEDGE WORLDWIDE, WHILE GENERATING REVENUE THAT IS REINVESTED LOCALLY.

WHILE THE COVID-19 PANDEMIC CONTINUES TO POSE UNPRECEDENTED CHALLENGES FOR HOSPITALS AND HEALTH SYSTEMS ACROSS THE COUNTRY, UPMC IS LEVERAGING THE CLINICAL AND SCIENTIFIC EXPERTISE OF THE UNIVERSITY OF PITTSBURGH AND UPMC TO KEEP OUR COMMUNITY AND EMPLOYEES SAFE, TREAT THE DISEASE WITH

**SCHEDULE O
(Form 990 or 990-EZ)**

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UPMC GROUP

20-8295721

CLINICAL AND OPERATIONAL EXCELLENCE, AND LEAD IMPORTANT RESEARCH EFFORTS. WITH A STRONG PRESENCE IN BOTH THE PROVIDER AND INSURANCE BUSINESSES, AS WELL AS INTERNATIONAL AND COMMERCIALIZATION ARENAS, UPMC IS REPOSITIONING AND DEPLOYING ITS ASSETS IN UNIQUE WAYS.

IN 2025 UPMC PROVIDED UNWAVERING SUPPORT FOR ITS FRONTLINE CAREGIVERS WHO MADE TRULY EXCEPTIONAL CONTRIBUTIONS DURING THIS EXTREMELY STRESSFUL AND DEMANDING TIME. UPMC MADE NUMEROUS INVESTMENTS TO RECRUIT, SUPPORT, AND RETAIN ITS WORKFORCE, INCLUDING MORE THAN \$300,000,000 TO ENHANCE SALARIES AND BENEFITS, THE EXPANSION OF NURSING SCHOOLS, THE OPERATION OF ITS OWN STAFFING AGENCY DESIGNED TO ATTRACT AND RETAIN NURSES AND SURGICAL TECHNICIANS ACROSS THE SYSTEM, AND PROVIDING TUITION LOAN FORGIVENESS PROGRAMS FOR NURSING STUDENTS.

UPMC GROUP REFLECTS THE COMBINED INFORMATION AND OPERATIONS OF 87 TAX EXEMPT ENTITIES, INCLUDING 30 HOSPITAL ENTITIES, 16 PHYSICIAN SERVICE ENTITIES, 3 SKILLED NURSING FACILITIES, AND 38 OTHER ANCILLARY SERVICE AND SUPPORT ENTITIES FROM WITHIN THE UPMC INTEGRATED DELIVERY AND FINANCE SYSTEM IDFS. THIS DELIVERY SYSTEM IS COMPRISED OF PREMIER HEALTHCARE PROVIDERS INCLUDING ACUTE INPATIENT HOSPITALS AND TRAUMA CENTERS, CANCER TREATMENT FACILITIES, PHYSICIAN PRACTICES, SKILLED NURSING FACILITIES AND OTHER ORGANIZATIONS PROVIDING HEALTHCARE SUPPORT SERVICES REQUIRED BY OUR DIVERSE PATIENT POPULATION.

DURING FISCAL YEAR 2025, (JULY 2024 - JUNE 2025), THE HOSPITAL ENTITIES

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
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▶ Attach to Form 990 or 990-EZ.

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WITHIN UPMC GROUP ADMITTED 265,468 INPATIENTS, RECORDED 1,326,042 INPATIENT DAYS, 1,033,235 EMERGENCY ROOM VISITS, 7,145,417 OUTPATIENT VISITS, 273,891 SURGERIES, AND 763 TRANSPLANTS. THEY PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT COST, OF OVER \$1,927,000,000. UPMC GROUP MEMBERS PROVIDED SERVICES TO THE COMMUNITY THROUGH CHARITABLE DONATIONS, SUBSIDIZED HEALTH AND COMMUNITY PROGRAMS, OUTREACH PROGRAMS, HEALTH SCREENINGS, EDUCATIONAL CLASSES, AND VOLUNTEER SERVICES AT A COST OF OVER \$528,000,000. UPMC GROUP ALSO PROVIDED FUNDING FOR RESEARCH AND HEALTH PROFESSIONS EDUCATION IN EXCESS OF \$580,000,000.

THE THIRTY HOSPITALS INCLUDED IN UPMC GROUP ARE: UPMC PRESBYTERIAN SHADYSIDE, UPMC CHILDREN'S HOSPITAL OF PITTSBURGH, MAGEE-WOMEN'S HOSPITAL OF UPMC, UPMC MERCY, UPMC ST. MARGARET, UPMC PASSAVANT, UPMC HORIZON, UPMC NORTHWEST, UPMC MCKEESPORT, UPMC BEDFORD, UPMC EAST, UPMC HAMOT, UPMC ALTOONA, UPMC JAMESON, UPMC KANE, UPMC WILLIAMSPORT, UPMC WELLSBORO, UPMC SUNBURY, UPMC LOCK HAVEN, UPMC MUNCY, CHARLES COLE MEMORIAL HOSPITAL, UPMC SOMERSET, UPMC WASHINGTON, UPMC GREENE, UPMC PINNACLE HOSPITALS, UPMC PINNACLE LANCASTER, UPMC LITITZ, UPMC MEMORIAL, UPMC CARLISLE AND UPMC HANOVER.

FOUNDED IN 1893, UPMC PRESBYTERIAN SHADYSIDE IS AN ACUTE CARE MEDICAL-SURGICAL HOSPITAL AND LEVEL 1 TRAUMA CENTER, AND A SITE OF ONGOING RESEARCH AND GRADUATE PROGRAMS. THE HOSPITAL PROVIDES SPECIALIZED MEDICAL CARE TO PATIENTS FROM THE TRI-STATE AREA AND THROUGHOUT THE

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

Supplemental Information to Form 990 or 990-EZ

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Form 990 or 990-EZ or to provide any additional information.

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WORLD. UPMC PRESBYTERIAN SHADYSIDE SERVES AS THE ACADEMIC HUB OF UPMC'S INPATIENT PROVIDER SERVICES AND IS THE GREATER PITTSBURGH REGION'S LARGEST INPATIENT ACUTE CARE HOSPITAL. THE MISSION OF UPMC PRESBYTERIAN SHADYSIDE IS TO PROVIDE PREMIER PROGRAMS IN PATIENT CARE, BIOMEDICAL AND HEALTH SERVICES RESEARCH, AND TEACHING AND EDUCATION THAT WILL CONTRIBUTE TO THE PREVENTION, DIAGNOSIS, AND TREATMENT OF HUMAN DISEASE AND DISABILITY. THE UPMC PRESBYTERIAN SHADYSIDE CAMPUSES INCLUDE UPMC PRESBYTERIAN, UPMC SHADYSIDE, WESTERN PSYCHIATRIC INSTITUTE AND CLINIC (WPIC), UPMC MONTEFIORE, AND THE EYE AND EAR INSTITUTE.

UPMC PRESBYTERIAN, INCLUDING UPMC MONTEFIORE, IS A 735-BED ACADEMIC TEACHING HOSPITAL THAT HAS BEEN PROVIDING CARE TO THE REGION SINCE 1893, WHILE UPMC SHADYSIDE IS A 496-BED TERTIARY HOSPITAL THAT HAS SERVED RESIDENTS OF PITTSBURGH AND THE TRI-STATE AREA SINCE 1866. TOGETHER, UPMC PRESBYTERIAN SHADYSIDE HAS BEEN RECOGNIZED FOR NURSING EXCELLENCE THROUGH MAGNET DESIGNATION-ONE OF THE HIGHEST HONORS IN PROFESSIONAL NURSING-REFLECTING A LONGSTANDING COMMITMENT TO HIGH-QUALITY PATIENT CARE, PROFESSIONAL PRACTICE, AND A SUPPORTIVE WORK ENVIRONMENT. UPMC SHADYSIDE FIRST ACHIEVED MAGNET RECOGNITION IN 2010, FOLLOWED BY UPMC PRESBYTERIAN'S INITIAL DESIGNATION IN 2022, AND BOTH HOSPITALS HAVE CONTINUED TO MAINTAIN AND PURSUE NURSING EXCELLENCE THROUGH A SUSTAINED FOCUS ON QUALITY OUTCOMES, PROFESSIONAL PRACTICE, AND WORKFORCE ENGAGEMENT.

UPMC PRESBYTERIAN SHADYSIDE HAS LEADING PROGRAMS IN ORGAN

**SCHEDULE O
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Name of the organization

UPMC GROUP

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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TRANSPLANTATION, ONCOLOGY, CARDIOLOGY AND CARDIOTHORACIC SURGERY,
CRITICAL CARE MEDICINE AND TRAUMA SERVICES, NEUROSURGERY, ORTHOPEDICS,
OPHTHALMOLOGY, AND BEHAVIORAL HEALTH, ALONG WITH NUMEROUS OTHER MEDICAL
AND SURGICAL SPECIALTIES.

UPMC PRESBYTERIAN SHADYSIDE WAS NAMED THE SECOND-BEST REGIONAL HOSPITAL
IN PENNSYLVANIA IN U.S. NEWS & WORLD REPORT'S ANNUAL RANKINGS. UPMC
PRESBYTERIAN SHADYSIDE WAS NATIONALLY RANKED IN MULTIPLE SPECIALTIES,
INCLUDING CANCER (15TH), CARDIOLOGY (48TH), DIABETES/ENDOCRINOLOGY
(25TH), EAR/NOSE/THROAT (44TH), GASTROENTEROLOGY AND SURGERY (27TH),
GERIATRICS (30TH), NEUROLOGY/NEUROSURGERY (43RD), PULMONARY/LUNG SURGERY
(35TH), AND UROLOGY (33RD). UPMC PRESBYTERIAN SHADYSIDE ALSO RANKED 122ND
AS ONE OF THE WORLD'S BEST SMART HOSPITALS BY NEWSWEEK, A DISTINCTION
RECOGNIZING HOSPITALS THAT LEVERAGE STATE-OF-THE-ART TECHNOLOGY TO
TRANSFORM CARE DELIVERY.

UPMC PRESBYTERIAN SHADYSIDE'S ORGAN TRANSPLANTATION PROGRAM IS AMONG THE
OLDEST, LARGEST, AND MOST COMPREHENSIVE IN THE WORLD. ESTABLISHED IN
1981, THE PROGRAM PROVIDES TRANSPLANTATION ACROSS EVERY MAJOR ORGAN
SYSTEM AND HAS BEEN A GLOBAL LEADER IN ADVANCING TRANSPLANT IMMUNOLOGY,
SURGICAL TECHNIQUES, ORGAN PRESERVATION, AND MULTIDISCIPLINARY CARE.
TODAY, UPMC PRESBYTERIAN SHADYSIDE CONTINUES TO SET THE STANDARD THROUGH
CLINICAL EXCELLENCE AND ONGOING INNOVATION, INCLUDING THE NATION'S
LARGEST LIVING DONOR LIVER TRANSPLANT PROGRAM.

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UPMC PRESBYTERIAN SHADYSIDE HAS BEEN DESIGNATED AS A COMPREHENSIVE
RADIOPHARMACEUTICAL THERAPY CENTER OF EXCELLENCE BY THE SOCIETY OF
NUCLEAR MEDICINE & MOLECULAR IMAGING (SNMMI), A DESIGNATION RECOGNIZING
FACILITIES THAT DELIVER LEADING-EDGE TECHNOLOGY, FDA-APPROVED
RADIOPHARMACEUTICAL THERAPIES, AND ADVANCED CLINICAL RESEARCH. IN
ADDITION, UPMC SHADYSIDE IS NATIONALLY RECOGNIZED FOR ITS SPECIALIZATION
IN THE TREATMENT OF COMPLEX INPATIENT ONCOLOGY CONDITIONS AND SERVES AS
THE HUB FOR UPMC'S NETWORK OF RADIATION ONCOLOGY AND MEDICAL ONCOLOGY
PRACTICES, SUPPORTING HIGHLY COORDINATED, MULTIDISCIPLINARY CANCER CARE.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

IN 2019, UPMC ANNOUNCED PLANS TO BUILD A NEW, STATE-OF-THE-ART, 17-STORY
BED TOWER SPANNING 900,000 SQUARE FEET AND HOUSING 636 INPATIENT BEDS.
THIS ADDITION WILL ALLOW UPMC PRESBYTERIAN TO FULLY PRIVATIZE ALL
INPATIENT ROOMS ON CAMPUS, A SIGNIFICANT DRIVER OF PATIENT SATISFACTION.
THE TOWER'S PATIENT CARE AREAS FEATURE MODERNIZED ACCOMMODATIONS,
ADVANCED TECHNOLOGY, AND FLEXIBLE SPACES DESIGNED TO ENHANCE PATIENT CARE
AND FAMILY SUPPORT, INCLUDING EASIER ACCESS TO SERVICES. INNOVATIVE
TECHNOLOGY IS INTEGRATED THROUGHOUT THE BUILDING TO SUPPORT HIGH-QUALITY
CLINICAL CARE WHILE ENHANCING THE EXPERIENCE OF BOTH PATIENTS AND STAFF.
SHARED SPACES PROVIDE AREAS FOR LOVED ONES TO SPEND TIME TOGETHER, AND
THE 290,000 SQUARE FEET OF GLASS EXTERIOR MAXIMIZES NATURAL LIGHT,
CREATING A HEALING ENVIRONMENT.

NEARLY ONE-FOURTH OF THE ROOMS ARE INTENSIVE CARE UNIT (ICU) OR
ACUITY-ADAPTABLE ROOMS, ENABLING SEAMLESS CONTINUITY OF COMPLEX, CRITICAL

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CARE BY UPMC'S EXPERT PHYSICIANS AND CARE TEAMS. THE BUILDING SUPPORTS COLLABORATION ACROSS THE FULL RANGE OF MEDICAL AND SURGICAL SERVICES, INCLUDING OPERATING ROOMS EQUIPPED WITH THE NEWEST TECHNOLOGY. UPMC'S CONDITION- AND DISEASE-SPECIFIC CARE MODEL GROUPS PATIENTS BY SIMILAR MEDICAL NEEDS, FURTHER ENHANCING COORDINATED CARE. BY PIONEERING ACUITY-ADAPTABLE FLOORS, UPMC MINIMIZES PATIENT TRANSFERS BETWEEN UNITS AND CARE TEAMS, ENSURING CONTINUITY OF CARE, IMPROVING OUTCOMES, REDUCING LENGTH OF STAY, AND ULTIMATELY LOWERING HEALTHCARE COSTS. THE PROJECT ALSO INCORPORATES COMMUNITY-FOCUSED AMENITIES, INCLUDING LOCAL VENDORS, INTERFAITH SPACES, A COMMUNITY RESOURCE CENTER, FLEXIBLE OUTDOOR SPACES, ROOFTOP GARDENS, LOCAL FARMERS MARKETS, AND A FULL-SERVICE RESTAURANT.

UPMC PRESBYTERIAN SHADYSIDE TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, UPMC PRESBYTERIAN SHADYSIDE ADMITTED 43,383 PATIENTS, RENDERING 321,067 PATIENT DAYS. THE HOSPITAL RECORDED 92,499 EMERGENCY ROOM VISITS, 598,982 OUTPATIENT VISITS, AND PERFORMED 37,039 SURGERIES. DURING THIS SAME PERIOD, UPMC PRESBYTERIAN SHADYSIDE PERFORMED 560 ORGAN TRANSPLANTS.

UPMC PRESBYTERIAN SHADYSIDE, INCLUSIVE OF ALL CAMPUSES, PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST OF APPROXIMATELY \$515,490,000 DURING THE YEAR ENDED JUNE 30, 2025. IN ADDITION, THE HOSPITAL INVESTED OVER \$156,747,000 IN COMMUNITY BENEFIT PROGRAMS, INCLUDING CHARITABLE DONATIONS, SUBSIDIZED SERVICES, OUTREACH INITIATIVES, REFERRAL CENTERS, SCREENINGS, EDUCATIONAL

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PROGRAMMING, AND MENTORSHIPS. UPMC PRESBYTERIAN SHADYSIDE ALSO FUNDED RESEARCH AND HEALTH PROFESSIONS EDUCATION AT A COST OF \$271,339,000.

SUPPORTING AND SERVING THE COMMUNITY HAS BEEN A HIGH PRIORITY FOR UPMC PRESBYTERIAN SHADYSIDE. UPMC CONDUCTED COMMUNITY HEALTH NEEDS ASSESSMENTS CHNAS, IN COMPLIANCE WITH INTERNAL REVENUE CODE SECTION 501(R) REQUIREMENTS. INCORPORATING INPUT FROM COMMUNITY STAKEHOLDERS AND PUBLIC HEALTH EXPERTS, THESE ASSESSMENTS HELP IDENTIFY ACTIONS AND CREATE IMPLEMENTATION PLANS TO IMPROVE COMMUNITY HEALTH. UPMC PRESBYTERIAN SHADYSIDE PROVIDED OUTREACH TO THE COMMUNITY THROUGH MANY EDUCATIONAL PRESENTATIONS, VIRTUAL CONFERENCES, HEALTH FAIRS AT SCHOOLS AND NEIGHBORHOOD CENTERS, FREE HEALTH SCREENINGS, AND COMMUNITY EVENTS INCLUDING BASIC LIFE SUPPORT FOR TEACHERS, HEALTHY CHOICES FOR STUDENTS, CPR FOR THIEL COACHES, CONCUSSION EDUCATIONAL SESSIONS, WALK TO SCHOOL DAY, KIDS SAFETY DAY, FIRST AID TRAINING FOR COACHES, ALLEGHENY CO. HEALTH AND SAFETY, FAMILY HOUSE HEALTHY BREAKFAST PROGRAM, SCOUTING FOR FOOD, AND THE MUNCH, MINGLE, MOVE COMMUNITY WELLNESS DAY. OTHER COMMUNITY PROGRAMS THAT BENEFITED PATIENTS AND GUESTS INCLUDE DISCOUNTED OR FREE PARKING AND USE OF THE BLUE SHUTTLE, WHICH PROVIDES FREE TRANSPORTATION FROM THE FAMILY HOUSE TO UPMC PRESBYTERIAN, UPMC SHADYSIDE, HILLMAN CANCER CENTER AND UPMC MONTEFIORE. ASSISTANCE WITH GUARDIANSHIP AND TRANSPORTATION SERVICES WAS PROVIDED TO PATIENTS AND THEIR FAMILIES WHO WERE EXPERIENCING FINANCIAL DIFFICULTY. BUS, WHEELCHAIR VAN, AND AMBULANCE TRANSPORTATION WERE PROVIDED TO PATIENTS IN NEED.

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FOR MORE THAN 70 YEARS, UPMC WESTERN INSTITUTE AND CLINIC (WPIC) HAS BEEN A NATIONALLY RECOGNIZED LEADER IN MENTAL AND BEHAVIORAL HEALTH CLINICAL CARE, RESEARCH AND EDUCATION. WPIC, PART OF UPMC PRESBYTERIAN/SHADYSIDE, IS A 255-INPATIENT-BED FACILITY AND IS A NATIONAL LEADER IN THE TREATMENT OF MENTAL HEALTH AND ADDICTIVE DISORDERS THROUGH ITS INPATIENT AND OUTPATIENT SERVICES. THEIR SERVICES INCLUDE UPMC WESTERN BEHAVIORAL HEALTH, A NETWORK OF NEARLY 60 COMMUNITY-BASED PROGRAMS PROVIDING SPECIALIZED MENTAL HEALTH AND ADDICTION CARE THROUGHOUT WESTERN PENNSYLVANIA. WPIC TREATS MANY MENTAL HEALTH CONDITIONS SUCH AS ADDICTION, ATTENTION DEFICIT HYPERACTIVITY DISORDER ADHD, AUTISM SPECTRUM DISORDERS AND INTELLECTUAL DEVELOPMENTAL DISABILITIES, MOOD AND ANXIETY DISORDERS, PSYCHOSIS, EATING DISORDERS AND OBSESSIVE-COMPULSIVE DISORDERS. WPIC OFFERS ITS PATIENTS SUPPORT AND EXPERTISE AT EVERY STAGE OF THEIR CARE AND RECOVERY, INCLUDING ACUTE INPATIENT SERVICES, EMERGENCY AND CRISIS SERVICES, OUTPATIENT SERVICES AND TELEPSYCHIATRY SERVICES.

WPIC TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY. FOR FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 5,074 PATIENTS, RENDERING 66,067 PATIENT DAYS. WPIC HAD 10,021 EMERGENCY ROOM VISITS AND 386,495 OUTPATIENT VISITS.

IN 2014, WPIC BECAME THE FIRST UPMC HOSPITAL DESIGNATED AS A LEADER IN THE HEALTHCARE EQUALITY INDEX FOR LESBIAN, GAY, BISEXUAL, TRANSGENDER, AND QUEER LGBTQ HEALTH CARE EQUITY BY THE HUMAN RIGHTS CAMPAIGN. WPIC HAS ALSO COLLABORATED WITH OTHER UPMC HOSPITALS THROUGHOUT THEIR HEALTHCARE

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EQUALITY INDEX JOURNEY. WPIC RECOGNIZES THE UNIQUE BEHAVIORAL HEALTH NEEDS OF THE LGBTQ+ COMMUNITY AND THE IMPORTANCE AFFIRMATION AND ACCEPTANCE PLAY IN BEHAVIORAL HEALTH. RESEARCH SHOWS THE LGBTQ+ COMMUNITY, PARTICULARLY TRANS AND NONBINARY PEOPLE, FACE GREATER BARRIERS TO QUALITY BEHAVIORAL HEALTHCARE AND INCREASED RISK OF BEHAVIORAL HEALTH CRISES. WPIC STRIVES TO ADHERE TO THE AMERICAN PSYCHOLOGICAL ASSOCIATION'S GUIDELINES FOR PSYCHOLOGICAL PRACTICE WITH TRANSGENDER AND GENDER NONCONFORMING PEOPLE AS WELL AS THE CORE VALUE OF TREATING EVERY PATIENT WITH DIGNITY AND RESPECT.

WPIC PROVIDED COMMUNITY OUTREACH THROUGH MANY EDUCATIONAL PRESENTATIONS, VIRTUAL CONFERENCES, HEALTH FAIRS AT SCHOOLS AND NEIGHBORHOOD CENTERS, FREE HEALTH SCREENINGS, AND COMMUNITY EVENTS ON SEVERAL TOPICS INCLUDING - UNDERSTANDING MENTAL HEALTH AND WELLNESS PANELS; DEMENTIA AND DOWN SYNDROME; CRISIS SERVICES AND RESOLVE; ENDURANCE: CRISIS AND COPING; VIOLENCE AND THREAT MANAGEMENT; FIREARMS AND SUICIDE; GUN VIOLENCE REDUCTION; COPING WITH MASS CASUALTY EVENTS; SUICIDE RISK: SCREENING, UNDERSTANDING AND MITIGATION; THE GUN TALK: HOW TO HAVE MEANINGFUL CONVERSATIONS WITH FAMILIES ABOUT FIREARMS; AND VIOLENCE 301: HOW ANTIRACISM AND DIVERSITY HELP US MANAGE VIOLENT RISK.

TO HELP MEET THE GROWING NEED FOR SPECIALIZED CHILD AND ADOLESCENT BEHAVIORAL HEALTH SERVICES, UPMC WESTERN BEHAVIORAL HEALTH OPENED A NEW FACILITY, UPMC MATILDA H. THEISS CHILD DEVELOPMENT CENTER, WHICH WILL INCREASE COMMUNITY ACCESS TO CARE. LOCATED IN PITTSBURGH'S SOUTHSIDE

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NEIGHBORHOOD, THE FACILITY INCLUDES A WIDE VARIETY OF BEHAVIORAL HEALTH CARE SERVICES FOR UPMC CENTER FOR AUTISM & DEVELOPMENT DISORDERS, THE EARLY INTENSIVE BEHAVIORAL INTERVENTION PROGRAM, AND THE THERAPEUTIC EARLY AUTISM PROGRAM.

THE NEW FACILITY INCLUDES SERVICES FOR YOUNG CHILDREN WITH EMOTIONAL NEEDS, CHILDREN AND ADOLESCENTS THROUGH AGE 17 WHO HAVE EXPERIENCED TRAUMA, AND MOTHERS EXPERIENCING MOOD CHALLENGES DURING AND AFTER PREGNANCY OR THE BIRTH OF A CHILD.

THE EARLY CHILDHOOD MENTAL HEALTH THERAPEUTIC PROGRAMS AT MATILDA THEISS PROVIDE A FOUNDATION FOR THE ENDURING EMOTIONAL AND BEHAVIORAL HEALTH OF YOUNG CHILDREN WITH PSYCHIATRIC DISORDERS, OR THOSE WHO ARE AT HIGH RISK OF DEVELOPING PSYCHIATRIC OR DEVELOPMENTAL DIFFICULTIES. THE CENTER PROVIDES A COMPREHENSIVE, COORDINATED PROGRAM OF SERVICES WITH AN AGE-APPROPRIATE, NATURALISTIC ENVIRONMENT THAT PROVIDES SUPPORT, NURTURING CARE, HEALTHY ATTACHMENTS AND EMOTIONAL BONDS WITH PARENTS AND CAREGIVERS TO ENHANCE A CHILD'S CAPACITY FOR TRUST, EMPATHY, AND COMPASSION.

THIS LOCATION IS ALSO THE NEW HOME FOR AN ARRAY OF TRAUMA-FOCUSED SERVICES FOR CHILDREN, WHICH PROVIDES THERAPEUTIC CARE FOR CHILDREN WITH SPECIAL NEEDS RELATED TO EMOTIONAL AND BEHAVIORAL DISTURBANCES, PRENATAL DRUG AND ALCOHOL EXPOSURE AND PARENTS' MENTAL HEALTH CONDITIONS AS WELL AS ADOLESCENT AND CHILD OUTPATIENT FOR TRAUMA, ALL WITH A GREATER

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CAPACITY FOR MORE PATIENTS. THE UPMC MATILDA H. THEISS EARLY CHILDHOOD TRAUMA PROGRAMS ARE PART OF THE NATIONAL CHILD TRAUMATIC STRESS NETWORK, AND THROUGH THAT NETWORK, CONDUCT RESEARCH ON THE EFFECTIVENESS OF EARLY CHILDHOOD TREATMENT FOR TRAUMA.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

RENOWNED FOR ITS OUTSTANDING CLINICAL SERVICES, RESEARCH PROGRAMS AND MEDICAL EDUCATION, UPMC CHILDREN'S HOSPITAL OF PITTSBURGH (CHILDREN'S) HAS HELPED TO ESTABLISH STANDARDS OF EXCELLENCE IN PEDIATRIC CARE. CHILDREN'S WAS AWARDED THE PRESTIGIOUS MAGNET DESIGNATION FOR THE THIRD TIME LAST YEAR. MAGNET HOSPITALS ARE RECOGNIZED FOR BUILDING AND SUPPORTING A CONTINUOUS CULTURE OF TRANSFORMATIONAL LEADERSHIP, STRUCTURAL EMPOWERMENT, EXEMPLARY EVIDENCE-BASED PRACTICE, ADVANCED TRAINING AND NEW KNOWLEDGE APPLICATION AND INNOVATIONS. CHILDREN'S IS DEDICATED TO IMPROVING THE HEALTH AND WELL-BEING OF CHILDREN, TEENAGERS AND YOUNG ADULTS THROUGH EXCELLENCE IN PATIENT CARE, TEACHING, RESEARCH AND ADVOCACY.

LAST YEAR, CHILDREN'S BEGAN CONSTRUCTION OF A STATE-OF-THE-ART HEART INSTITUTE CREATED TO PROVIDE THE "BEST CARE FOR THE MOST KIDS" THROUGH THE CONTINUED GROWTH, QUALITY AND INNOVATION THAT HAS ALREADY MADE CHILDREN'S HOSPITAL ONE OF THE BEST PEDIATRIC HEART PROGRAMS IN THE COUNTRY. PROJECT COMPLETION IS EXPECTED IN MID-2026.

LAST YEAR, CHILDREN'S ALSO OPENED A PEDIATRIC BEHAVIORAL HEALTH WALK-IN CLINIC, WHERE PATIENTS UP TO THE AGE OF 18 CAN BE SEEN FOR A VARIETY OF

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BEHAVIORAL HEALTH CONCERNS. THE CLINIC, LOCATED ON THE THIRD FLOOR OF THE MAIN HOSPITAL, OFFERS A WELCOMING AND COMFORTABLE ENVIRONMENT FOR CHILDREN AND TEENS WITH MENTAL HEALTH CONCERNS TO GET EXPERT CARE. IN ADDITION TO THE WALK-IN CLINIC, CHILDREN'S SUPPORTS BEHAVIORAL HEALTH IN A VARIETY OF OTHER WAYS INCLUDING BEHAVIORAL HEALTH NAVIGATORS IN THE EMERGENCY DEPARTMENT WHO ASSIST THE MEDICAL TEAM IN PROVIDING ASSESSMENTS AND RESOURCES FOR PATIENTS AND FAMILIES. ALSO, BEHAVIORAL SCIENCE DIVISION PSYCHOLOGISTS ARE EMBEDDED IN INPATIENT AND OUTPATIENT SETTINGS AS WELL AS A BEHAVIORAL HEALTH NURSE CLINICIAN WHO WORKS WITH THE INPATIENTS.

CHILDREN'S RECOGNIZES THAT THE NEED FOR EXCELLENT PATIENT CARE DOES NOT ONLY EXIST WITHIN ITS OWN LOCAL COMMUNITY BUT ALSO EXISTS THROUGHOUT THE UNITED STATES AND GLOBALLY. CHILDREN'S IS A 317-BED HOSPITAL THAT PROVIDES THE FULL SPECTRUM OF PEDIATRIC SERVICES, FROM AMBULATORY CARE TO TRANSPLANTATION TO CARDIAC CARE. OVER 1,000,000 INFANTS, CHILDREN AND ADOLESCENTS VISIT CHILDREN'S AND ITS SATELLITE LOCATIONS TO BE SEEN BY TALENTED AND COMMITTED PEDIATRIC EXPERTS. CHILDREN'S IS A LEADER IN LIVER TRANSPLANTATION AND CARDIOTHORACIC SERVICES. TO INCREASE ACCESS TO CARE FOR PATIENTS THROUGHOUT THE STATES OF FLORIDA, VIRGINIA AND NORTH CAROLINA, CHILDREN'S HAS CREATED PARTNERSHIPS WITH ST. JOSEPH'S CHILDREN'S HOSPITAL, FLORIDA CHILDREN'S HOSPITAL, ATRIUM HEALTH AND THE UNIVERSITY OF VIRGINIA'S CHILDREN'S HOSPITAL. THE PRIMARY MISSION OF CHILDREN'S IS TO SERVE AS A COMMUNITY RESOURCE DEDICATED TO IMPROVING THE HEALTH AND WELL-BEING OF CHILDREN OF ALL AGES, THROUGH EXCELLENCE IN

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PATIENT CARE, TEACHING AND RESEARCH.

CHILDREN'S TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY.

FOR FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 13,353

PATIENTS, RENDERING 87,076 PATIENT DAYS. CHILDREN'S HAD 77,301 EMERGENCY

ROOM VISITS, 374,616 OUTPATIENT VISITS, PERFORMED 20,895 SURGERIES AND

COMPLETED 104 TRANSPLANTS.

CHILDREN'S LEADS THE WAY IN ADVANCED TECHNOLOGY APPLICATIONS WITH RESPECT

TO ITS USE OF ELECTRONIC HEALTH RECORDS AND PATIENT PORTALS. CHILDREN'S

WAS THE FIRST PEDIATRIC HOSPITAL IN THE COUNTRY TO ACHIEVE STAGE 7

(HIGHEST STAGE) CERTIFICATION FROM THE HEALTHCARE INFORMATION AND

MANAGEMENT SYSTEMS SOCIETY (HIMSS) FOR THE ELECTRONIC MEDICAL RECORD

ADOPTION MODEL (EMRAM) STAGING. HIGHLIGHTING ITS COMMITMENT TO PATIENT

SAFETY AND QUALITY, CHILDREN'S WAS RECENTLY NAMED ONE OF THE LEAPFROG

GROUP'S PRESTIGIOUS 'TOP CHILDREN'S HOSPITALS', ONE OF ONLY 15 PEDIATRIC

HOSPITALS IN THE NATION NAMED TO THIS ELITE CLASS. ADDITIONALLY, UPMC HAS

BEEN RECOGNIZED BY THE COLLEGE OF HEALTHCARE INFORMATION MANAGEMENT

EXECUTIVES (CHIME) AS ONE OF THE NATION'S "DIGITAL HEALTH MOST WIRED"

HEALTH SYSTEMS FOR 26 CONSECUTIVE YEARS, ACHIEVING LEVEL 10 STATUS, THE

HIGHEST RECOGNITION FOR BOTH AMBULATORY AND ACUTE CARE SETTINGS.

WITH FOCUSED EFFORT AND INTENTIONAL ACTION PLANS, CHILDREN'S DECREASED

HOSPITAL ACQUIRED INFECTIONS AND IMPROVED QUALITY OF CARE WHILE RANKING

NATIONALLY IN ALL 11 RATED SPECIALTIES WITH DIABETES AND ENDOCRINOLOGY

RANKING NO. 2 IN THE NATION FROM U.S. NEWS AND WORLD REPORT'S BEST

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CHILDREN'S HOSPITALS. CHILDREN'S CONTINUES TO BE RECOGNIZED BY CRIBS FOR KIDS AS A GOLD SAFE SLEEP HOSPITAL, WHICH IS THE HIGHEST DESIGNATION IN THE ORGANIZATION'S NATIONAL SAFE SLEEP CERTIFICATION PROGRAM. THIS DESIGNATION MEANS THAT EVERY PATIENT, UNDER THE AGE OF ONE, IS ENSURED SAFE SLEEP CARE AND THEIR CAREGIVERS ARE EDUCATED IN SAFE SLEEP PRACTICES. CRIBS FOR KIDS CITED CHILDREN'S LEADERSHIP AND HEALTH CARE TEAM MEMBERS' COMMITMENT TO BEST PRACTICES, EDUCATION AND COMMUNITY OUTREACH AS COMMENDABLE.

CHILDREN'S AND ITS SATELLITE LOCATIONS ARE DESIGNATED AS ACR DIAGNOSTIC IMAGING CENTERS OF EXCELLENCE (DICOE) BY THE AMERICAN COLLEGE OF RADIOLOGY. THIS ACHIEVEMENT IS THE HIGHEST RECOGNITION A MEDICAL FACILITY CAN BE AWARDED RELATED TO STRUCTURE, OPERATIONS, AND OUTCOMES IN DIAGNOSTIC IMAGING. ACR ACCREDITATION FOR CT, MRI, ULTRASOUND, NUCLEAR MEDICINE AND PET CONTINUE TO BE AWARDED FOR EXPERIENCE AND QUALIFICATIONS OF STAFF, QUALITY ASSURANCE OF IMAGING EQUIPMENT AND OPTIMAL QUALITY IMAGING.

THE CARDIAC INTENSIVE CARE UNIT (CICU) WAS AWARDED THE BEACON AWARD OF EXCELLENCE WHICH IS THE THIRD BEACON AWARD OF EXCELLENCE AT CHILDREN'S AS OUR PEDIATRIC ICU AND OUR NEONATAL ICU ALREADY HAVE RECEIVED THIS ACHIEVEMENT.

CHILDREN'S PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICARE AND MEDICAID SHORTFALLS, AT A COST OF OVER \$37,605,000 IN 2025.

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SERVICES WERE PROVIDED TO THE COMMUNITY THROUGH CHARITABLE CONTRIBUTIONS, OUTREACH PROGRAMS, REFERRAL CENTERS, SCREENINGS, EDUCATIONAL CLASSES AND MENTORSHIPS WHICH WERE TARGETED AT PATIENTS, PATIENTS' FAMILIES AND THE COMMUNITY AT LARGE, AT A COST OF \$68,544,000. CHILDREN'S SUPPORTED RESEARCH AND HEALTH PROFESSIONS EDUCATION WITH A BUDGET OF \$68,255,000 DURING 2025.

ONE OF THE MANY COMMUNITY PROGRAMS OFFERED BY CHILDREN'S IS THE FAMILY CARE CONNECTION (FCC), WITH THE GOAL OF IMPROVING THE HEALTH OF CHILDREN AND FAMILIES IN AREAS WITH HIGH RATES OF CHILD ABUSE, INFANT MORTALITY AND POVERTY. THE FCC OFFERS A VARIETY OF FAMILY SUPPORT PROGRAMS THAT ENHANCE RELATIONSHIPS BETWEEN PARENTS AND CHILDREN, IMPROVE MATERNAL AND CHILD HEALTH, ADDRESS SCHOOL READINESS THROUGH CHILD DEVELOPMENT ACTIVITIES AND ASSESS AND EDUCATE THE PUBLIC TO PREVENT CHILD ABUSE AND NEGLECT. FCC STAFF PROVIDES HOME VISITS, ON-SITE PROGRAMMING AND CONSULTATION, REFERRALS AND LINKAGES TO A VAST NUMBER OF COMMUNITY AGENCIES, AS WELL AS CHILD DEVELOPMENT, PARENTING, EDUCATIONAL AND COMMUNITY-BUILDING ACTIVITIES.

CHILDREN'S PHYSICIANS IN THE PEDIATRIC RESIDENCY PROGRAM PARTICIPATE IN VOLUNTEER SERVICES IN WHICH THEY PROVIDE FREE SCREENINGS FOR THE WOMEN'S CENTER AND AMISH OUTREACH THROUGH THE HEMOPHILIA CENTER OF PITTSBURGH. THEY ALSO PROVIDE NUTRITIONAL, DIETARY AND DENTAL HYGIENE GUIDANCE FOR BOTH OF THOSE PROGRAMS.

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CHILDREN'S HAS A SAFETY CENTER IN THE HOSPITAL THAT IS OPEN TO THE COMMUNITY. IT PROVIDES EDUCATION, HANDS ON TRAINING AND SAFETY RESOURCES TO FAMILIES AT NO COST. PROGRAMS OFFERED HAVE INCLUDED CHILD PASSENGER SAFETY, SAFER FIREARM STORAGE, ATV SAFETY AND LAWNMOWER SAFETY. DURING THE YEAR, CHILDREN'S PROVIDED CAR SEATS TO 1,143 FAMILIES IN NEED AS WELL AS 2,593 BIKE HELMETS AS PART OF THEIR BIKE SAFETY PROGRAM. CHILDREN'S ALSO OFFERED PARENTS AND CAREGIVERS OF PATIENTS FREE FLU SHOTS.

CHILDREN'S VISITS THE WOMEN'S SHELTER OF PITTSBURGH MONTHLY TO SEE PATIENTS AND PROVIDE CARE. CHILDREN'S ALSO PROVIDED ART AND MUSIC THERAPY TO ATTENDEES AT CAMP CHIHOPI, CHILDREN'S SOLID ORGAN TRANSPLANT CAMP AT THE EMMA KAUFMANN CAMP IN MORGANTOWN, WEST VIRGINIA AND AT CAMP INSPIRE, A CHILDREN'S SPONSORED CAMP AT THE WOODLANDS FOUNDATION FOR CHILDREN WITH TRACHEOSTOMY AND VENTILATOR SUPPORT.

THE RONALD MCDONALD'S CARE MOBILE IS A STATE-OF-THE-ART PEDIATRIC AND ADOLESCENT MEDICAL SERVICE MOBILE UNIT THAT IS STAFFED BY CHILDREN'S PROVIDERS INCLUDING PHYSICIANS, ADVANCED PRACTICE PROVIDERS AND NURSES. THE CARE MOBILE TEAM CAN PROVIDE COMMUNITY RESOURCES TO PATIENTS AND FAMILIES WHO RECEIVE MEDICAL SERVICES, SUCH AS FOOD RESOURCES, WARM HAND-OFF TO A PRIMARY CARE PROVIDER AS WELL AS COORDINATING CARE FOR BEHAVIORAL HEALTH. THE CARE MOBILE PARTNERS WITH MANY SCHOOL DISTRICTS, PUBLIC SITES, FAMILY CENTERS AND OUT-OF-SCHOOL PROGRAMS.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

BASED IN PITTSBURGH, PENNSYLVANIA, UPMC MAGEE-WOMEN'S HOSPITAL (MAGEE)

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ENHANCES THE HEALTH CARE AND WELL-BEING OF WOMEN, MEN, INFANTS, AND THEIR FAMILIES. IT IS A 389-BED, FULL-SERVICE ACUTE CARE, RESEARCH AND TEACHING HOSPITAL. AS A NATIONAL CENTER OF EXCELLENCE IN WOMEN'S HEALTH, MAGEE IS CONSISTENTLY RECOGNIZED FOR MEDICAL EXCELLENCE AND INNOVATION, OUTSTANDING PATIENT CARE, EDUCATION, RESEARCH, STANDARDS DEVELOPMENT, AND ADVOCACY. IN ADDITIONAL TO WOMEN'S HEALTH EXPERTISE MAGEE ALSO PROVIDES AN EXPANDED RANGE OF SERVICES TO PATIENTS INCLUDING DIAGNOSTIC IMAGING, INCLUDING CT AND MRI, A HEART CENTER, BARIATRIC SURGERY, ORTHOPEDICS, DIGESTIVE DISORDER TREATMENT, PULMONOLOGY, PLASTIC SURGERY, VASCULAR SURGERY, CANCER TREATMENT, AND UROLOGY.

MAGEE TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY. FOR FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 18,853 PATIENTS, RENDERING 91,498 PATIENT DAYS. MAGEE HAD 30,035 EMERGENCY ROOM VISITS, 777,801 OUTPATIENT VISITS AND PERFORMED 21,676 SURGERIES.

MAGEE HAS ACHIEVED MAGNET DESIGNATION TWICE BECAUSE OF ITS NURSING QUALITY, PROFESSIONALISM AND PATIENT CARE TEAMWORK. WITH THIS CREDENTIAL, MAGEE JOINS THE GLOBAL COMMUNITY OF MAGNET-RECOGNIZED ORGANIZATIONS. FEWER THAN 10% OF HOSPITALS NATIONWIDE ARE DESIGNATED MAGNET, ONE OF THE HIGHEST ACHIEVEMENTS IN PROFESSIONAL NURSING.

RECOGNIZED AS A NATIONAL CENTER OF EXCELLENCE IN WOMEN'S HEALTH BY THE US DEPARTMENT OF HEALTH AND HUMAN SERVICES, MAGEE SERVES AS THE TEACHING FACILITY FOR OBSTETRICS, GYNECOLOGY, GYNECOLOGIC ONCOLOGY, AND

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NEONATOLOGY FOR THE UNIVERSITY OF PITTSBURGH THE UNIVERSITY ("THE UNIVERSITY"). MEMBERS OF THE MEDICAL STAFF HOLD ACADEMIC APPOINTMENTS AT THE UNIVERSITY AND ARE ACTIVELY INVOLVED IN EDUCATION AND RESEARCH, AS WELL AS PATIENT CARE. MAGEE IS ALSO THE REGIONAL REFERRAL CENTER FOR HIGH-RISK MATERNAL CARE. THE HOSPITAL'S NEONATAL INTENSIVE CARE UNIT IS ONE OF THE LARGEST IN PENNSYLVANIA, TREATING APPROXIMATELY 1,675 INFANTS IN 2025.

MAGEE, A GLOBAL LEADER IN WOMEN'S HEALTH CARE AND RESEARCH, HAS BEEN RECOGNIZED AS #32 FOR THE 2024/2025 BEST OBSTETRICS AND GYNECOLOGY HOSPITALS BY US NEWS AND WORLD REPORT. US NEWS EVALUATED NEARLY 650 HOSPITALS THAT PROVIDE HIGH-QUALITY LABOR AND DELIVERY SERVICES FOR UNCOMPLICATED PREGNANCIES. FEWER THAN HALF OF ALL HOSPITALS THAT OFFER MATERNITY CARE THAT PARTICIPATED IN THE SURVEY RECEIVED A HIGH PERFORMING DESIGNATION. TO BE RECOGNIZED AMONG THE BEST HOSPITALS FOR MATERNITY, HOSPITALS HAD TO EXCEL ON MULTIPLE QUALITY METRICS THAT MATTER TO EXPECTANT FAMILIES - C-SECTION RATES IN LOWER RISK PREGNANCIES, NEWBORN COMPLICATION RATES, EXCLUSIVE BREAST MILK FEEDING RATES, EARLY ELECTIVE DELIVERY RATES AND VAGINAL BIRTH AFTER CESAREAN RATES, AMONG OTHER MEASURES. ADDITIONALLY, UPMC MAGEE-WOMEN'S HOSPITAL WAS IDENTIFIED AS ONE OF FEWER THAN 30 HOSPITALS IN THE U.S. THAT ARE HIGH PERFORMING IN MATERNITY CARE AND ACHIEVING EXCELLENT OUTCOMES FOR CESAREAN SECTION AND UNEXPECTED NEWBORN COMPLICATIONS AMONG BLACK PATIENTS. MAGEE WAS RECOGNIZED BY PRACTICE GREEN HEALTH AS A PARTNER FOR CHANGE. THE AWARD IS PRESENTED IN RECOGNITION OF SUCCESSFUL PROGRAMS TO REDUCE

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OPERATIONAL ENVIRONMENTAL IMPACT TO HEALTH CARE FACILITIES THAT CONTINUOUSLY IMPROVE AND EXPAND UPON PROGRAMS TO ELIMINATE MERCURY, REDUCE AND RECYCLE WASTE, AND SOURCE PRODUCTS SUSTAINABLY. MAGEE PREVIOUSLY EARNED RECOGNITION FOR ITS GREEN PRACTICES, INCLUDING RECYCLING, REDUCING WASTE, ENERGY AND CHEMICALS IN SURGICAL PROCEDURES, MAINTAINING AN ORGANIC GARDEN THAT PROVIDES VEGETABLES USED FOR PATIENT AND CAFETERIA MEALS, AND INCORPORATING ENVIRONMENTAL HEALTH INTO COMMUNITY EDUCATION PROGRAMS.

MAGEE HAS BEEN RECOGNIZED BY CRIBS FOR KIDS AS A GOLD SAFE SLEEP HOSPITAL, WHICH IS THE HIGHEST DESIGNATION IN THE ORGANIZATION'S NATIONAL SAFE SLEEP CERTIFICATION PROGRAM. THIS DESIGNATION MEANS THAT EVERY PATIENT, UNDER THE AGE OF ONE, IS ENSURED SAFE SLEEP CARE, AND THEIR CAREGIVERS ARE EDUCATED IN SAFE SLEEP PRACTICES. CRIBS FOR KIDS CITED UPMC'S LEADERSHIP AND HEALTH CARE TEAM MEMBERS' COMMITMENT TO BEST PRACTICES, EDUCATION, AND COMMUNITY OUTREACH AS COMMENDABLE.

MAGEE IS ACTIVELY INVOLVED IN THE COMMUNITY, SERVING INFANTS, TEENS, WOMEN, MEN, AND THEIR FAMILIES. DURING THE FISCAL YEAR ENDED JUNE 30, 2025, MAGEE PROVIDED CHARITABLE CONTRIBUTIONS AND COMMUNITY SERVICE PROGRAMS AND SIMILAR FUNDING OF APPROXIMATELY \$6,917,000. MAGEE PROVIDED FUNDING FOR RESEARCH AND HEALTH PROFESSIONS EDUCATION AT A COST OF OVER \$27,338,000. MAGEE PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST OF APPROXIMATELY \$246,300,000.

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MAGEE PROVIDED OUTREACH TO THE COMMUNITY THROUGH MANY EDUCATIONAL PRESENTATIONS, HEALTH FAIRS, FREE HEALTH SCREENINGS, AND COMMUNITY EVENTS INCLUDING INFANT AND CHILD HEARTSAVER CPR AND FIRST AID; SAFE SLEEP FOR BABIES; SIDS AWARENESS; MOMMY AND BABY CONFERENCE; BIRTHING WHILE BLACK; PREGNANCY LEARNING SERIES AND THE BLACK BREASTFEEDING WEEK SYMPOSIUM. VIRTUAL EDUCATIONAL SERIES INCLUDED: VAGINAL BIRTH AFTER CAESAREAN; PREPARING FOR CHILDBIRTH; AND DOGS AND TODDLERS. MAGEE PARTICIPATED IN A LITANY OF EVENTS INCLUDING WILKINSBURG HEALTHY LIVING FAIR; LATINO HEALTHY LIVING FAIR; HEINZ FIELD HEALTH FAIR AND CRANBERRY COMMUNITY DAYS. BREAST CANCER AWARENESS SYMPOSIUMS WERE OFFERED, AS WELL AS EDUCATION ABOUT THE ISSUES CANCER SURVIVORS FACE. MAGEE HOSTED A SERIES OF WALK-IN SCREENING MAMMOGRAPHY, BLOOD PRESSURE, BONE DENSITY, CHOLESTEROL, AND DIABETES AT NO CHARGE TO COMMUNITY MEMBERS WITHOUT HEALTH INSURANCE.

UPMC MERCY (MERCY), ESTABLISHED IN 1847 BY THE SISTERS OF MERCY, WAS THE FIRST HOSPITAL IN PITTSBURGH AND THE FIRST MERCY HOSPITAL IN THE UNITED STATES. UPMC MERCY OFFERS A BROAD RANGE OF SERVICES AND PROVIDES COMPASSIONATE CARE IN THE CATHOLIC TRADITION. THE SOCIAL RESPONSIBILITY OF CATHOLIC HEALTH CARE IS GUIDED BY FIVE ESSENTIAL PRINCIPLES: TO PROMOTE HUMAN DIGNITY, TO CARE FOR THE POOR, TO CONTRIBUTE TO THE COMMON GOOD, TO EXERCISE RESPONSIBLE STEWARDSHIP, AND ADHERENCE TO THE MORAL TEACHINGS OF THE CHURCH.

MERCY HAS 435 LICENSED BEDS AND IS PITTSBURGH'S FIRST AND ONLY CATHOLIC

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HOSPITAL WITH SPECIALIZED SERVICES, INCLUDING THE NEUROSCIENCES, LEVEL 1 TRAUMA AND BURN SERVICES, OPHTHALMOLOGY, ORTHOPEDICS, AND PHYSICAL MEDICINE AND REHABILITATION. MERCY CARRIES OUT ITS MISSION THROUGH ITS CORE VALUES WITH A COMMITMENT TO BEING A TRANSFORMING, HEALING PRESENCE WITHIN THE COMMUNITIES IT SERVES.

MERCY TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 13,912 PATIENTS, RENDERING 94,698 PATIENT DAYS. MERCY HAD 53,564 EMERGENCY ROOM VISITS, 142,774 OUTPATIENT VISITS AND PERFORMED 18,589 SURGERIES.

MERCY PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST OF APPROXIMATELY \$127,844,000 IN THE FISCAL YEAR ENDED JUNE 30, 2025. MERCY ALSO PROVIDED SERVICES TO THE COMMUNITY THROUGH VARIOUS OUTREACH AND OTHER COMMUNITY SERVICES PROGRAMS AT A COST OF OVER \$23,888,000 AND PROVIDED FUNDING OF OVER \$19,669,000 FOR RESEARCH AND HEALTH PROFESSIONS EDUCATION. MERCY PROVIDES JOB SHADOWING AND MENTORING EXPERIENCES FOR NURSING STUDENTS AND MENTORS OTHER STUDENTS FROM VARIOUS HEALTH CARE RELATED DISCIPLINES.

STAFF FROM MERCY PARTICIPATED IN MANY COMMUNITY HEALTH FAIRS. THEY PROVIDED EDUCATIONAL INFORMATION IN THE AREAS OF BURNS AND BURN CARE, STROKE, AND DIABETES. IN ADDITION, SUPPORT GROUPS FOR ALZHEIMER'S, SPINAL CORD INJURY, BRAIN INJURY, STROKE, AND AMPUTEES ARE OFFERED BY MERCY. THE HOSPITAL ALSO PROVIDED SPIRITUAL CARE AND HEALTH CARE TO THE HOMELESS.

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MERCY PROVIDED CAB SERVICE VOUCHERS TO PATIENTS IN NEED AND MADE CONTRIBUTIONS TO SUPPORT AREA HEALTH AND WELFARE PROGRAMS AND CHARITIES. THE HOSPITAL CONDUCTED A STROKE CAMP FOR SURVIVORS AND CAREGIVERS. IT ALLOWED SURVIVORS TO INTERACT AND NETWORK WITH OTHER STROKE SURVIVORS AND THEIR CAREGIVERS AND GAVE CAREGIVERS A RESPITE AS VOLUNTEERS HELPED WITH THE CARE OF THE STROKE SURVIVORS. THE HOSPITAL ALSO PROVIDED FREE AND REDUCED PARKING VALIDATIONS FOR PATIENTS, TRANSPORTATION VOUCHERS AND FREE AND DISCOUNTED MEAL TICKET VOUCHERS TO FAMILIES AND VOLUNTEERS.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

UPMC BROKE GROUND IN 2019 ON THE NEW UPMC VISION INSTITUTE WHICH OPENED IN 2023, WHICH WAS DESIGNED FOR THE MANY PATIENTS IN THE PITTSBURGH REGION AND BEYOND WHO NEED PHYSICAL REHABILITATION AND THOSE WHO HAVE DISEASES OF THE EYE OR VISION IMPAIRMENT. THE FACILITY WAS PART OF UPMC'S \$2 BILLION INVESTMENT IN SPECIALTY CARE AND WILL POSITION UPMC AT THE GLOBAL FOREFRONT OF REHABILITATION AND OPHTHALMIC RESEARCH AND CARE. THE STATE-OF-THE-ART FACILITY IN PITTSBURGH'S UPTOWN NEIGHBORHOOD INCLUDES MANY RESOURCES FOR THEIR EXPERTS, PATIENTS, VISITORS AND NEIGHBORS SUCH AS: 410,000 SQUARE FEET OF CLINICAL AND RESEARCH SPACE, CUTTING-EDGE BIOTHERAPY TREATMENTS, PATIENT-CENTERED RESOURCES, INCLUDING A LIFE SKILLS APARTMENT, STREET LAB AND ROOFTOP SENSORY GARDEN, COMPLETE LOW-VISION REHAB TECHNOLOGIES AND SERVICES, AND ENHANCED AND PROACTIVE SCREENING AND CARE FOR UNDERSERVED POPULATIONS. THE DOCTORS AT THE UPMC VISION INSTITUTE HAVE SPECIAL TRAINING TO HANDLE ALL TYPES OF OCULAR SYSTEM PROBLEMS, INCLUDING CORNEA DISORDERS, DIABETIC RETINOPATHY, GLAUCOMA, MACULAR DEGENERATION, RETINITIS PIGMENTOSA AND OTHER GENETIC

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RETINAL DYSTROPHIES. OTHER VISION SERVICES FOR PATIENTS INCLUDE
HIGH-RESOLUTION IMAGING AND STATE-OF-THE-ART OCULAR TESTING,
LASER-ASSISTED CATARACT SURGERY, MICRO-INVASIVE OCULAR SURGERY AND MORE
THAN 25 SCIENTIFIC TEAMS DEVELOPING THE THERAPIES OF TOMORROW TO FIGHT
BLINDNESS. IN ADDITION, THE FACILITY OFFERS AN URGENT CARE EYE CLINIC FOR
EYE AND VISION EMERGENCIES WITH EXTENDED HOURS WHERE PATIENTS CAN ACCESS
OPHTHALMOLOGIST SPECIALISTS DIRECTLY.

INPATIENT REHABILITATION SERVICES ARE WIDELY RECOGNIZED FOR QUALITY AND
OUTCOMES. DESIGNATIONS AND AWARDS INCLUDE BEING RANKED #14 IN U.S. NEWS &
WORLD REPORT BEST HOSPITALS LIST FOR REHABILITATION, A CMS DESIGNATED
REHABILITATION INNOVATION CENTER, AND FULL ACCREDITATION AS A CARF
(COMMISSION ON ACCREDITATION OF REHABILITATION FACILITIES) CERTIFIED
FACILITY.

MERCY'S FOCUS ON GERIATRIC CARE, AND GERIATRIC EMERGENCY MEDICINE, HAS
RESULTED IN THE SILVER GEDA (GERIATRIC EMERGENCY DEPARTMENT ACCREDITATION
PROGRAM) CERTIFICATION.

UPMC ST. MARGARET (ST. MARGARET) IS A 250-BED ACUTE-CARE AND TEACHING
HOSPITAL THAT HAS RECENTLY RECEIVED ITS FOURTH MAGNET DESIGNATION. MAGNET
STATUS IS THE HIGHEST INTERNATIONAL RECOGNITION FOR THE HIGHEST STANDARD
OF EXCELLENCE IN PATIENT CARE FOR HOSPITALS. FOUNDED IN 1898, UPMC ST.
MARGARET IS HOME TO ONE OF THE OLDEST AND LARGEST FAMILY PRACTICE
RESIDENCY PROGRAMS IN PENNSYLVANIA.

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ST. MARGARET IS COMMITTED TO ITS MISSION OF PROVIDING QUALITY HEALTH CARE TO ALL IN NEED AND HAS IMPLEMENTED POLICIES TO ASSURE ACCESS TO ITS SERVICES, REGARDLESS OF ABILITY TO PAY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 8,256 PATIENTS, RENDERING 41,734 PATIENT DAYS. ST. MARGARET HAD 31,326 EMERGENCY ROOM VISITS, 156,960 OUTPATIENT VISITS AND PERFORMED 14,381 SURGERIES. IT PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST OF APPROXIMATELY \$53,460,000. ST. MARGARET ALSO PROVIDED SERVICES TO THE COMMUNITY THROUGH FREE OR LOW-COST OUTREACH PROGRAMS TARGETED AT PATIENTS, PATIENTS' FAMILIES, AND THE COMMUNITY. THESE PROGRAMS HAVE ASSISTED THOUSANDS OF PEOPLE IN THE COMMUNITY AT A COST TO THE HOSPITAL OF OVER \$5,227,000 IN THE FISCAL YEAR ENDED JUNE 30, 2025. UPMC ST. MARGARET ALSO FUNDED HEALTH PROFESSIONS AND MEDICAL RESIDENCY PROGRAMS AS WELL AS MEDICAL RESEARCH AT A COMBINED COST OF OVER \$9,622,000 IN FISCAL YEAR 2025.

UPMC ST. MARGARET WAS RANKED IN AMERICA'S 100 BEST JOINT REPLACEMENT FACILITIES FOR FOUR YEARS (2022-2025) AND AMERICA'S 100 BEST SPINE SURGERY FOR THE LAST TWO YEARS (2023-2024) BY HEALTHGRADES. HEALTHGRADES AMERICA'S 100 BEST HOSPITALS AWARD RECOGNIZES THE TOP 100 HOSPITALS AS THE TOP 2% IN THE NATION FOR CONSISTENT CLINICAL EXCELLENCE BASED ON ANALYSIS OF RISK-ADJUSTED MORTALITY AND COMPLICATIONS RATES FOR COMMON PROCEDURES AND CONDITIONS.

ST. MARGARET OFFERED FREE HEALTH SCREENINGS AND EDUCATION TO THE

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COMMUNITY THAT INCLUDED: SCREENINGS FOR BLOOD PRESSURE, CHOLESTEROL,
BLOOD SUGAR, BONE DENSITY AND DIABETES. ST. MARGARET HOSTED SEVERAL FREE
COMMUNITY HEALTH AND WELLNESS FAIRS WHERE COMMUNITY MEMBERS COULD OBTAIN
FREE SERVICES, SCREENINGS AND INTERACT WITH BOTH PHYSICIANS AND
PHARMACISTS. FREE FLU SHOTS WERE PROVIDED TO MEMBERS OF SEVERAL
COMMUNITIES, INCLUDING NEW KENSINGTON, CHESWHICK, NORTHVIEW HEIGHTS,
VERONA, AND MORE.

IN EARLY 2025, UPMC ST. MARGARET OPENED AN EXPANSION OF UPMC ST. MARGARET
DERMATOLOGY AFTER INVESTING \$150,000 IN EQUIPMENT AND DOUBLING THE MOHS
PROCEDURE ROOMS. MOHS MICROGRAPHIC SURGERY IS A HIGHLY EFFECTIVE
TREATMENT THAT REMOVES SKIN CANCER ONE LAYER AT A TIME, SAVING AS MUCH
HEALTHY TISSUE AS POSSIBLE. ADDITIONALLY, ST. MARGARET OPENED A NEWLY
RENOVATED AND EXPANDED UROLOGY CLINIC, WHICH NOW OFFERS TWO NEW
DIAGNOSTIC PROCEDURES: TRANSPERINEAL PROSTATE BIOPSIES AND PROSTATE MRI
(MAGNETIC RESONANCE IMAGING). THE NEW SERVICE ADVANCEMENTS UNDERSCORE
UPMC ST. MARGARET'S DEDICATION TO DISEASE PREVENTION AND COMMUNITY-WIDE
HEALTHY LIVING, KEY PRIORITIES IDENTIFIED IN THE HOSPITAL'S COMMUNITY
HEALTH NEEDS ASSESSMENT, DURING MEN'S HEALTH MONTH AND BEYOND.

FOUNDED IN 1849, UPMC PASSAVANT (PASSAVANT) IS A PROVIDER OF QUALITY
HEALTH CARE SERVICES TO PATIENTS IN THE AREAS OF ACUTE CARE, EMERGENCY
CARE, INPATIENT CARE, AND OUTPATIENT CARE. UPMC PASSAVANT IS A 423-BED
HOSPITAL THAT PROVIDES THESE SERVICES TO PATIENTS IN THE NORTHERN
METROPOLITAN REGION OF PITTSBURGH AND ALLEGHENY COUNTY AND SOUTHERN
BUTLER COUNTY. AS UPMC'S TERTIARY CARE CENTER NORTH OF PITTSBURGH, THIS

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STATE-OF-THE-ART HOSPITAL OFFERS UPMC'S BRAND OF WORLD-CLASS MEDICAL CARE
AT TWO CAMPUSES TO SERVE COMMUNITIES NORTH OF THE CITY.

THROUGH UPMC PASSAVANT, HIGH-QUALITY CARE AND ALL THE RESOURCES OF AN
ACADEMIC MEDICAL CENTER ARE NOW MORE READILY AVAILABLE TO RESIDENTS NORTH
OF PITTSBURGH. PASSAVANT HAS EXPANDED THEIR SPECIALTY CARE BY BRINGING
UPMC HILLMAN CANCER CENTER, UPMC MAGEE-WOMENS HOSPITAL, AND UPMC HEART
AND VASCULAR INSTITUTE TO THEIR HOSPITALS AND OUTPATIENT CARE CENTERS.
WITH STRONG SPECIALTY PROGRAMS IN HEART CARE, ONCOLOGY, ORTHOPEDICS, AND
SPINE SURGERY AT THE MCCANDLESS CAMPUS; A COMPREHENSIVE BREAST CENTER AND
STATE-OF-THE-ART IMAGING CENTER AT THE CRANBERRY CAMPUS; THE UPMC
PASSAVANT PAVILION FEATURING ADDITIONAL CAPACITY FOR UPMC HILLMAN CANCER
CENTER, THE EMERGENCY DEPARTMENT, SURGICAL SERVICES, AND ALL LEVELS OF
INPATIENT CARE; A TRULY PATIENT-AND-FAMILY-CENTERED ATMOSPHERE; AND
EXPANSION PROJECTS UNDER WAY AT BOTH HOSPITAL CAMPUSES, UPMC PASSAVANT IS
DEMONSTRATING ITS COMMITMENT TO EXCELLENCE IN PATIENT CARE. PASSAVANT HAS
RECEIVED A MAGNET DESIGNATION, THE HIGHEST INTERNATIONAL RECOGNITION OF
NURSING EXCELLENCE AND LEADERSHIP, FOR THE THIRD TIME.

THE EMERGENCY DEPARTMENT AT UPMC PASSAVANT FEATURES A "FAST-TRACK" AREA
(FOR MORE MINOR MEDICAL ISSUES), STATE-OF-THE-ART CRITICAL CARE ROOMS,
THREE TRAUMA ROOMS, 26 ACUTE TREATMENT ROOMS AND A 10-BED OBSERVATION
AREA. A STROKE TELEMEDICINE PROGRAM WAS ESTABLISHED TO PROVIDE ER
PHYSICIANS AT BOTH PASSAVANT CAMPUSES IMMEDIATE, 24-HOUR ACCESS TO

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EXPERTS AT THE UPMC STROKE INSTITUTE IN OAKLAND VIA STATE-OF-THE-ART VIDEOCONFERENCING TECHNOLOGY. THE SURGICAL SERVICE IMPROVEMENTS INCLUDE 6 STATE-OF-THE-ART OPERATING ROOMS FOR VASCULAR, SPINAL, AND ONCOLOGY CASES, AN ONSITE BLOOD BANK, TWO ROOMS DEDICATED TO IMAGE-GUIDED PROCEDURES AND SATELLITE PHARMACY AND PATHOLOGY LABS FOR IMPROVED EFFICIENCY. IN MARCH 2025, THE EMERGENCY DEPARTMENT AT UPMC PASSAVANT CRANBERRY OPENED A NEWLY DEVELOPED UPMC WESTERN BEHAVIORAL HEALTH ROOM, SETTING A NEW STANDARD FOR SAFETY AND ADAPTABILITY. THIS NEW ROOM MARKS THE THIRD STEP IN A COMPREHENSIVE PLAN TO ENHANCE BEHAVIORAL HEALTH TREATMENT AT THE CRANBERRY CAMPUS IN ADDITION TO THE INTRODUCTION OF PSYCHIATRIC TELEMEDICINE AND BEHAVIORAL HEALTH NAVIGATORS.

UPMC PASSAVANT TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 15,813 PATIENTS, RENDERING 87,560 PATIENT DAYS. PASSAVANT HAD 60,868 EMERGENCY ROOM VISITS, 332,469 OUTPATIENT VISITS AND PERFORMED 18,186 SURGERIES.

DURING THE FISCAL YEAR ENDED JUNE 30, 2025, UPMC PASSAVANT PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST OF OVER \$91,357,000.

PASSAVANT PROVIDED MANY SUPPORT PROGRAMS AND COMMUNITY OUTREACH IN FISCAL YEAR 2025 THAT INCLUDED HEALTH FAIRS, HEALTH SCREENINGS, EDUCATIONAL/COUNSELING PROGRAMS, IMMUNIZATIONS, SUPPORT GROUPS, AND OTHER PROGRAMS. THESE SERVICES HELPED THOUSANDS OF COMMUNITY MEMBERS UNDERSTAND

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AND MANAGE A WIDE ARRAY OF HEALTH CARE ISSUES AND CONDITIONS. THE VALUE OF THESE PROGRAMS AND OTHER FUNDING TO THE COMMUNITY WAS APPROXIMATELY \$5,500,000 IN THE FISCAL YEAR ENDED JUNE 30, 2025. PASSAVANT ALSO PROVIDED FUNDING FOR RESEARCH AND HEALTH PROFESSIONS EDUCATION IN FISCAL YEAR 2025 AT A COST OF OVER \$5,700,000.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

THE COMMUNITY BENEFITED FROM THE MANY HEALTH FAIRS THAT UPMC PASSAVANT SPONSORED AND PARTICIPATED IN. INFORMATION WAS OFFERED ON POISON PREVENTION, CANCER, STROKE, AND SMOKING CESSATION. SCREENINGS FOR FOOT CARE, BONE DENSITY, AND HIGH BLOOD PRESSURE WERE ALSO PROVIDED. PASSAVANT OFFERS A FREE VALET SERVICE TO ALL CANCER CENTER PATIENTS. PASSAVANT UNDERSTANDS THE CHALLENGES ITS PATIENTS AND FAMILY MEMBERS FACE WHEN DEALING WITH THE LOSS OF A LOVED ONE. THE HOSPITAL OFFERED A SIX-WEEK BEREAVEMENT SUPPORT GROUP THAT WAS FREE AND OPEN TO THE PUBLIC. PASSAVANT HOSTED FREE LIVE VIRTUAL EVENTS FOCUSED ON COLON CANCER SCREENING, COMMON SLEEP DISORDERS AND HOW THEY AFFECT THE BODY - INCLUDING SNORING AND SLEEP APNEA, AND WOMEN'S BREAST HEALTH, FOCUSING ON THE LATEST IN BREAST CANCER RESEARCH, DIAGNOSIS AND TREATMENTS, AND ADVANCEMENT IN DIAGNOSTIC SCREENINGS. PASSAVANT HOSTED A FREE HEALTHY LIVING FAIR FREE TO THE PUBLIC, WHICH OFFERED BLOOD PRESSURE SCREENINGS, WALK-IN-MAMMOGRAMS, GIVEAWAYS, FOOD AND REFRESHMENTS, EDUCATION ON BONE AND JOINT HEALTH, AND BIKE SAFETY INCLUDING FREE BIKE HELMETS. UPMC PASSAVANT PROVIDED SEMINARS ON BETTER BREATHING, HEART FAILURE, STRESS, TAKING CARE OF YOUR HEART, AND WOMEN'S HEART HEALTH TO INFORM PEOPLE ABOUT THE SIGNS AND SYMPTOMS OF HEART ATTACK FOR EARLY RECOGNITION, REVIEW RISK FACTORS FOR HEART DISEASE

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AND OUTLINE POSITIVE LIFESTYLE BEHAVIORS TO PROMOTE WELLNESS.

MATT EL-KADI, MD, CHIEF OF NEUROSURGERY AT UPMC PASSAVANT AND VICE CHAIR, CLINICAL OPERATIONS, UPMC DEPARTMENT OF NEUROLOGICAL SURGERY, HAS IMPACTED THE LIVES OF THOUSANDS OF PEOPLE DURING HIS 25-YEAR CAREER WITH UPMC. AS A PART OF DR. EL-KADI'S VISION, THE UPMC SPECIALTY CARE CENTER IN WEXFORD, PA., ESTABLISHED IN 2015, WAS DESIGNED AS AN ADVANCED SPINE CARE CENTER TO STREAMLINE CARE FOR PEOPLE WITH NEUROLOGICAL AND SPINE CONDITIONS. IN OCTOBER 2024, THE CENTER WAS RENAMED UPMC MATT EL-KADI SPINE CENTER IN HONOR OF DR. EL-KADI'S VISION AND THE IMPACT IT HAS HAD ON SO MANY PEOPLE'S LIVES. OVER THE PAST TWO YEARS, DR. EL-KADI AND THE UPMC SPINE CARE TEAM HAVE CARED FOR PEOPLE FROM 32 U.S. STATES AND 50 COUNTIES ACROSS PENNSYLVANIA.

FOUNDED IN 1906, UPMC HORIZON (HORIZON) A 116-BED HOSPITAL, STRIVES TO BE THE PREMIER HEALTH CARE DELIVERY SYSTEM IN MERCER COUNTY, PENNSYLVANIA. IN FURTHERANCE OF ITS MISSION TO PROVIDE EXEMPLARY HEALTH CARE SERVICES, UPMC HORIZON PROVIDES PATIENT-CENTERED, QUALITY HEALTH CARE IN A COST-EFFECTIVE MANNER, ADHERING TO THE VALUES OF EXCELLENCE, COMPASSION, AND THE RESPECT FOR HUMAN DIGNITY. HORIZON, WITH CAMPUSES IN GREENVILLE AND SHENANGO VALLEY, OFFERS CLINICAL EXPERTISE IN PRIMARY CARE MEDICINE, CARDIOLOGY, ONCOLOGY, DIGESTIVE DISORDERS, WOMEN'S HEALTH, RADIOLOGY/IMAGING SERVICES, WOUND, AND PAIN MANAGEMENT.

HORIZON TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY. FOR

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THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 4,663 PATIENTS, RENDERING 15,096 PATIENT DAYS. HORIZON HAD 37,763 EMERGENCY ROOM VISITS, 283,802 OUTPATIENT VISITS AND PERFORMED 5,187 SURGERIES.

DURING THE FISCAL YEAR ENDED JUNE 30, 2025, HORIZON PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST IN EXCESS OF \$34,990,000. THE COMMUNITIES SERVED BY HORIZON ARE IN AN ECONOMICALLY DISTRESSED AND MEDICALLY UNDERSERVED AREA. IN THE YEAR ENDED JUNE 30, 2025, UPMC HORIZON PROVIDED COMMUNITY SERVICE PROGRAMS AND OTHER FUNDING AT A COST OF OVER \$4,162,000 AND FUNDING FOR EDUCATION AND RESEARCH AT A COST OF APPROXIMATELY \$3,316,000.

UPMC HORIZON IS PARTNERED WITH UPMC MAGEE-WOMENS HOSPITAL TO PROVIDE COMPREHENSIVE MATERNITY AND INFANT CARE TO MOTHERS AND THEIR BABIES. LOCATED AT THE SHENANGO VALLEY HOSPITAL CAMPUS, BIRTH PLACE OFFERS ADVANCED MATERNITY CARE IN A COMFORTABLE, HOME-LIKE SETTING, WHILE WIRELESS FETAL MONITORING ALLOWS OUR LABORING PATIENTS MORE FREEDOM TO MOVE AROUND AND SEEK COMFORT MEASURES SUCH AS HYDROTHERAPY. THEIR SERVICES INCLUDE LABOR, DELIVERY, AND RECOVERY ROOMS; ANTEPARTUM/TRIAGE ROOMS; A MOTHER-BABY UNIT; LEVEL 1 & 2 NURSERIES; COUPLET CARE (MOTHERS MAY HAVE THEIR BABIES STAY WITH THEM IN THEIR ROOMS); SURGICAL SUITE FOR CAESAREAN SECTIONS; EPIDURAL AVAILABILITY 24 HOURS A DAY, 7 DAYS A WEEK; TELEMEDICINE PROGRAMS WITH UPMC MAGEE (MATERNAL-FETAL MEDICINE) AND UPMC CHILDREN'S HOSPITAL OF PITTSBURGH (NEONATOLOGY); CERTIFIED LACTATION CONSULTANT AND BREASTFEEDING COUNSELORS, AND A CERTIFIED CAR SEAT

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TECHNICIAN.

UPMC NORTHWEST (NORTHWEST), FOUNDED IN 1899, SERVES THE RESIDENTS OF THE FRANKLIN, OIL CITY AND SURROUNDING PENNSYLVANIA COMMUNITIES. UPMC NORTHWEST IN SENECA, CRANBERRY TOWNSHIP, HAS 96 PRIVATE ROOMS, INCLUDING 30 THAT CAN BE CONVERTED FOR SEMI-PRIVATE OCCUPANCY, YIELDING AS MANY AS 126 BEDS WITH 167-LICENSED BEDS, WHICH PROVIDES ACUTE INPATIENT, OUTPATIENT, BEHAVIORAL HEALTH, REHABILITATION, SKILLED NURSING, AND SUPPORT AND EDUCATION SERVICES.

STATE-OF-THE-ART TREATMENT TECHNOLOGY EQUIPS UPMC NORTHWEST TO MEET THEIR PATIENTS' HEALTH CARE NEEDS. UPMC NORTHWEST USES INNOVATIONS SUCH AS: ELECTRONIC HEALTH RECORD WITH VARIOUS APPLICATIONS, INCLUDING COMPUTERIZED PHYSICIAN ORDER ENTRY, A PATIENT PORTAL, AND EMERGENCY ROOM AUTOMATION; NURSE SERVER CARTS THAT PROVIDE COMPUTERIZED DOCUMENTATION AND RECORD KEEPING AS WELL AS A MOBILE MEDICATION CART THAT ALLOWS FOR POSITIVE PATIENT IDENTIFICATION FOR MEDICATION ADMINISTRATION; OMNICELL MEDICATION MANAGEMENT

SYSTEM THAT AUTOMATES ACQUISITION AND DISPENSING OF DRUGS, MAKING THE PROCESS FASTER AND SAFER; RESPONDER NURSE CALL SYSTEM; TRANSLOGIC PNEUMATIC TUBE SYSTEM WHICH PROVIDES HIGH-SPEED DELIVERY OF MEDICATIONS, LAB SPECIMENS, AND OTHER ITEMS THROUGHOUT THE FACILITY; AND HUGS INFANT PROTECTION SYSTEM THAT USES ELECTRONIC ID/SECURITY TECHNOLOGY TO ENSURE SAFETY OF NEWBORNS.

UPMC NORTHWEST TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO

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PAY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 5,976 PATIENTS, RENDERING 32,268 PATIENT DAYS. NORTHWEST HAD 29,005 EMERGENCY ROOM VISITS, 164,410 OUTPATIENT VISITS AND PERFORMED 4,819 SURGERIES.

DURING THE FISCAL YEAR ENDED JUNE 30, 2025, NORTHWEST PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST IN EXCESS OF \$29,528,000. THE HOSPITAL PROVIDED FUNDING AND SERVICES TO THE COMMUNITY IN THE AGGREGATE OF \$1,418,000 THROUGH COMMUNITY OUTREACH PROGRAMS TARGETED AT PATIENTS, THEIR FAMILIES, AND THE COMMUNITY, AS WELL AS DONATIONS AND VOLUNTEER SERVICES. NORTHWEST ALSO PROVIDED FUNDING FOR RESEARCH AND HEALTH PROFESSIONS EDUCATION IN FISCAL YEAR 2025 AT A COST OF OVER \$754,000.

FAMILIES BENEFITED FROM UPMC NORTHWEST'S PREPARED CHILDBIRTH CLASSES, WHICH READIED PARTICIPANTS FOR THEIR CHILDBIRTH EXPERIENCES. NORTHWEST ALSO OFFERED INFANT CARE CLASSES WHICH PROVIDED INFORMATION TO PARENTS ON HOW TO CARE FOR NEWBORNS, BREASTFEEDING CLASSES, AND SIBLING CLASSES WHICH PREPARED CHILDREN TO BECOME BIG BROTHERS OR BIG SISTERS. THE UPMC NORTHWEST DOULA PROGRAM OFFERS A RANGE OF SERVICES TO SUPPORT PREGNANT, BIRTHING, AND POSTPARTUM PATIENTS NORTHWEST'S ESPECIALLY FOR YOU PROGRAM PROVIDED INFORMATION AND SCREENINGS FOR COMMON HEALTH CONCERNS. THROUGH HEALTH FAIRS AND EDUCATIONAL PROGRAMS, THE ORGANIZATION PROVIDED SCREENINGS FOR OSTEOPOROSIS, PROSTATE HEALTH, STROKES, HEARING AND VISION SCREENINGS AND EDUCATIONAL INFORMATION ON SMOKING CESSATION, NUTRITION, STROKES. FREE SERVICES INCLUDED THERAPEUTIC CHAIR MASSAGE, PREVENTATIVE

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SCREENINGS AND FLU SHOTS. NORTHWEST PROVIDED TRANSPORTATION TO PATIENTS WHO WERE IN NEED UPON DISCHARGE FROM THE HOSPITAL AND PROVIDED COMPLEMENTARY ROOM USAGE TO VARIOUS COMMUNITY ORGANIZATIONS.

FOUNDED IN 1894, UPMC MCKEESPORT (MCKEESPORT) IS A 176-BED, NONPROFIT ACUTE CARE COMMUNITY HOSPITAL THAT PRIMARILY SERVES THE RESIDENTS OF THE MONONGAHELA, YOUGHIOGHENY, AND TURTLE CREEK VALLEYS. MCKEESPORT IS A TEACHING HOSPITAL, WITH RESIDENCY PROGRAMS IN BOTH FAMILY PRACTICE AND INTERNAL MEDICINE.

UPMC MCKEESPORT PROVIDES A WIDE RANGE OF QUALITY HEALTH CARE SERVICES. MCKEESPORT IS LOCATED 15 MILES SOUTHEAST OF PITTSBURGH, IN A GEOGRAPHIC AREA OF ECONOMIC DISTRESS, AND MUCH OF THE SURROUNDING COMMUNITY IS RECOGNIZED AS MEDICALLY UNDERSERVED, WITH A POPULATION THAT IS PREDOMINANTLY ELDERLY AND ECONOMICALLY DISADVANTAGED. THE HOSPITAL'S MISSION IS TO SERVE THE COMMUNITY BY PROVIDING HEALTH CARE SERVICES AND HEALTH CARE EDUCATION TO ALL PERSONS. THEREFORE, IN KEEPING WITH THE HOSPITAL'S COMMITMENT TO SERVE ALL MEMBERS OF ITS COMMUNITY, REGARDLESS OF AN INDIVIDUAL'S ABILITY TO PAY, THE FOLLOWING WERE PROVIDED: SUBSIDIZED AND/OR FREE CARE, CARE PROVIDED TO PERSONS COVERED BY GOVERNMENTAL PROGRAMS AT BELOW COST, AND HEALTH ACTIVITIES AND PROGRAMS TO SUPPORT THE COMMUNITY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 4,256 PATIENTS, RENDERING 28,966 PATIENT DAYS. MCKEESPORT HAD 24,474 EMERGENCY ROOM VISITS, 99,066 OUTPATIENT VISITS AND PERFORMED 903 SURGERIES.

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PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

DURING THE FISCAL YEAR ENDED JUNE 30, 2025, UPMC MCKEESPORT PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST IN EXCESS OF \$35,911,000. THE HOSPITAL ALSO PROVIDED SERVICES TO THE COMMUNITY THROUGH OUTREACH PROGRAMS, REFERRAL CENTERS, SCREENINGS, EDUCATIONAL CLASSES, AND FUNDING OF SCHOOLS FOR HEALTH PROFESSIONS WITH THE VALUE TO THE COMMUNITY OF APPROXIMATELY \$5,834,000 AND FUNDING FOR EDUCATION AND RESEARCH AT A COST OF APPROXIMATELY \$6,640,000.

UPMC MCKEESPORT WAS RECOGNIZED BY THE AMERICAN HEART ASSOCIATION AS A STROKE READY CENTER CERTIFIED BY THE JOINT COMMISSION. OPERATING 24/7, THE PROGRAM INCLUDES A TEAM OF DOCTORS, NURSES AND OTHER STAFF WITH EXPERIENCE IN DIAGNOSING AND TREATING STROKES. STROKE EDUCATION WAS ALSO PROVIDED TO OVER 20 BUSINESSES AND ORGANIZATIONS AS WELL AS 2 COMMUNITY EVENTS.

UPMC MCKEESPORT IS ALSO A TEACHING HOSPITAL, WITH RESIDENCY PROGRAMS IN BOTH FAMILY AND INTERNAL MEDICINE. FAMILY MEDICINE FACULTY VOLUNTEERED AT A FREE CLINIC ON A WEEKLY BASIS, PROVIDING MEDICAL CARE AND PHARMACY SERVICES TO THE UNINSURED AND HOMELESS RESIDENTS OF MCKEESPORT AND SURROUNDING AREAS.

THROUGH LECOM UPMC EAST AND UPMC MCKEESPORT PARTNER TO TRAIN 3RD AND 4TH YEAR MEDICAL STUDENTS WITH HANDS ON PATIENT CARE EDUCATION. UPMC MCKEESPORT HAS PARTNERED WITH CCAC TO OFFER A SCHOLARS PROGRAM THAT SUPPORTS STUDENTS PURSUING CAREERS IN ALLIED HEALTH AND NURSING.

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THE HOSPITAL OFFERED FACILITY SPACE AT REDUCED RATES TO VARIOUS CHARITABLE/COMMUNITY ORGANIZATIONS AND ENHANCED THE QUALITY OF LIFE FOR AREA SENIORS BY OFFERING SCREENINGS, SOCIALIZATION OPPORTUNITIES, AND HEALTH EDUCATION. MCKEESPORT ALSO PROVIDED TRANSPORTATION FOR PATIENTS AS WELL AS HOSTING FREE LIVE AND VIRTUAL EVENTS TO EDUCATE THE PUBLIC ABOUT OVERDOSE PREVENTION AND PARTICIPATED IN AN STD PREVENTION RESOURCE FAIR. UPMC MCKEESPORT HELD A 2025 COMMUNITY DAY AT THE MCKEESPORT CITY CENTER WITH OVER 1,000 PARTICIPANTS CONNECTING WITH THE COMMUNITY WHILE PROMOTING HEALTH AWARENESS AND HEALTHIER LIFESTYLES THROUGH FREE HEALTH SCREENINGS, HEALTH EDUCATION AND ACCESS TO LOCAL RESOURCES. UPMC MCKEESPORT HOSTS BRIDGE TO HOPE SEMI-MONTHLY MEETINGS AS A RESOURCE FOR FAMILIES SUFFERING WITH A LOVED ONE'S ADDICTION.

UPMC MCKEESPORT PARTNERED WITH UPMC EAST TO HOLD A LADIES DAY OUT EVENT THAT FOCUSED ON WOMEN'S HEALTH AND INCLUDED A VIRTUAL OPTION TO PARTICIPATE.

UPMC MCKEESPORT PARTICIPATED IN THE 2025 GOOD NEIGHBOR DAY HOSTED BY MAYOR MICHAEL CHEREPKO, THE CITY OF MCKEESPORT AND THE GOOD NEIGHBOR DAY COMMITTEE. THIS SIGNATURE COMMUNITY CELEBRATION HIGHLIGHTED ALL THAT MCKEESPORT HAS TO OFFER. THE EVENT FEATURED A VARIETY OF ACTIVITIES FOR ALL AGES SUCH AS STREET FOOD, GAMES, A CHILDREN'S AREA, LIVE MUSIC, COMMUNITY RESOURCES AND VENDOR EXHIBITS. REPRESENTING UPMC AT THE EVENT WERE THE LATTERMANN FAMILY HEALTH CENTER, UPMC ADDICTION MEDICINE SERVICES AT UPMC MCKEESPORT AND THE UPMC HEALTH PLAN, ALLOWING ATTENDEES TO

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CONNECT DIRECTLY WITH LOCAL HEALTHCARE RESOURCES.

UPMC MCKEESPORT ALSO PARTICIPATED IN SENATOR BREWSTER'S SENIOR WELLNESS AND SAFETY EXPO WHICH WELCOMED MORE THAN 300 ATTENDEES FOCUSED ON HEALTH, WELLNESS, AND SAFETY EDUCATION. DURING THE EVENT UPMC MCKEESPORT ADMINISTERED 35 FLU SHOTS AND PROVIDED ACCESS TO VALUABLE HEALTH INFORMATION AND SERVICES. UPMC REPRESENTATION INCLUDED UPMC IMAGING SERVICES, THE UPMC REHABILITATION INSTITUTE, UPMC MAGEE-WOMEN'S IMAGING, THE UPMC HEALTH PLAN AND THE UPMC MOBILE UNIT WHERE HEALTH SCREENINGS WERE OFFERED TO COMMUNITY MEMBERS.

IN ADDITION, UPMC MCKEESPORT HOSTED A COMMUNITY OPEN HOUSE SHOWCASING THE NEWLY EXPANDED UPMC WOUND HEALING SERVICES. COMMUNITY MEMBERS WERE INVITED TO TOUR THE UPDATED SPACE, MEET PHYSICIANS, AND LEARN ABOUT ADVANCED TREATMENTS AND TECHNOLOGIES INCLUDING HYPERBARIC OXYGEN THERAPY DESIGNED TO CARE FOR CHRONIC OR DIFFICULT-TO-HEAL WOUNDS. ATTENDEES ALSO HAD ACCESS TO FOOT CHECKS, CHOLESTEROL SCREENINGS AND GLUCOSE TESTING AS PART OF UPMC'S ONGOING COMMITMENT TO COMMUNITY HEALTH AND WELLNESS.

UPMC BEDFORD (BEDFORD) IS A 40-BED, ACUTE CARE GENERAL HOSPITAL, LOCATED IN EVERETT, PENNSYLVANIA, WITH UNITS FOR MEDICAL CARE, SURGICAL CARE, AND TELEMETRY SERVICES, WHICH SERVES AS AN OBSERVATION TOOL THAT ALLOWS MEDICAL STAFF TO MONITOR BLOOD PRESSURE, BODY TEMPERATURE, HEART RATE, MUSCLE FUNCTION AND MORE. IT OFFERS A VARIETY OF DIAGNOSTIC CAPABILITIES, INCLUDING CT, NUCLEAR MEDICINE, ULTRASOUND AND MRI. THE

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HOSPITAL OPERATES A CARDIAC-PULMONARY REHABILITATION PROGRAM, AN
OUTPATIENT PROCEDURE UNIT, AND AN AMBULATORY SURGICAL UNIT. THE EMERGENCY
FACILITIES INCLUDE 24-HOUR COVERAGE, A LICENSED HELIPORT FOR EMERGENCY
TRANSPORT, AND TRAUMA CENTER AFFILIATION.

UPMC BEDFORD IS COMMITTED TO PROVIDING SERVICES TO ALL MEMBERS OF THE
COMMUNITY, REGARDLESS OF THEIR ABILITY TO PAY. FOR THE FISCAL YEAR ENDED
JUNE 30, 2025, THE HOSPITAL ADMITTED 1,257PATIENTS, RENDERING 3,374
PATIENT DAYS. BEDFORD HAD 18,521 EMERGENCY ROOM VISITS, 104,498
OUTPATIENT VISITS AND PERFORMED 2,911 SURGERIES.

DURING THE FISCAL YEAR ENDED JUNE 30, 2025, UPMC BEDFORD PROVIDED CHARITY
CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE
SHORTFALLS, AT A COST OF APPROXIMATELY \$5,535,000. THE HOSPITAL ALSO
PROVIDED SERVICES, WITH AN AGGREGATE VALUE OF OVER \$737,980, TO THE
GENERAL POPULATION THROUGH OUTREACH PROGRAMS TARGETED AT PATIENTS,
PATIENTS' FAMILIES, AND THE COMMUNITY, AND PROVIDED FUNDING OF OVER
\$36,000 FOR RESEARCH AND HEALTH PROFESSIONS EDUCATION.

EARLY DETECTION PLAYS AN IMPORTANT ROLE IN THE FIGHT AGAINST BREAST
CANCER. BEDFORD HOSTED THEIR ANNUAL WALK-IN MAMMOGRAPHY SCREENINGS TO
PROVIDE WOMEN WITH AN UP-TO-DATE ANNUAL SCREENING. FUNDING FOR
PARTICIPANTS WITHOUT INSURANCE WAS PROVIDED BY THE ALTOONA FOUNDATION.

UPMC BEDFORD HOSTED A DIABETES HEALTH FAIR PROVIDING INFORMATION ABOUT
MEAL PLANNING, BLOOD SUGAR MONITORING, MEDICATIONS, BREATHING PROBLEMS,

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WELLNESS AND PREVENTION TIPS, HOME HEALTH, AND DIABETES PRODUCTS AND SHOES. AT THIS EVENT, THEY PROVIDED FREE FOOT AND EYE EXAMS AND BLOOD PRESSURE CHECKS.

UPMC BEDFORD'S WOUND CARE CENTER IS ESPECIALLY HELPFUL FOR INDIVIDUALS SUFFERING FROM A CHRONIC OR COMPLEX WOUND. CHRONIC WOUNDS ARE CAUSED WHEN THE BODY'S HEALING PROCESS IS DELAYED, USUALLY BECAUSE OF COMMON HEALTH PROBLEMS SUCH AS DIABETES OR POOR CIRCULATION. UPMC WOUND HEALING SERVICES AT BEDFORD OFFERS THE LATEST WOUND HEALING TECHNOLOGIES AND A RANGE OF ADVANCED, EFFECTIVE OUTPATIENT TREATMENTS INCLUDING NEGATIVE PRESSURE WOUND THERAPY, BIOENGINEERED SKIN SUBSTITUTE AND ADVANCED DRESSINGS, ADVANCED MEDICAL AND SURGICAL WOUND CARE, COMPRESSION WRAPS, WHEELCHAIRS, CRUTCHES OR CASTS FOR FOOT ULCERS, OSTOMY CARE, NUTRITION HELP AND RESOURCES AND AMPUTATION PREVENTION.

UPMC EAST (EAST) IS A FULL-SERVICE ACUTE CARE COMMUNITY HOSPITAL WITH 155-BEDS WHICH PROVIDES PATIENT-CENTERED CARE. LOCATED IN MONROEVILLE, PENNSYLVANIA, EAST SERVES PATIENTS USING ADVANCED TECHNOLOGIES AND WAS BUILT USING ENVIRONMENTALLY EFFICIENT CONSTRUCTION PRACTICES. IN 2020, UPMC EAST ADDED 30,000 SQUARE FEET OF SPACE TO THEIR ER DEPARTMENT - DOUBLING ITS CAPACITY. IT INCREASED PRIVATE EMERGENCY EXAM ROOMS FROM 24 TO 44, WITH 10 NEW, DEDICATED OBSERVATION ROOMS. GROUND FLOOR SERVICE AREAS IN CENTRAL STERILE PROCESSING, CLINICAL ENGINEERING AND INFORMATION TECHNOLOGY WERE ALSO EXPANDED.

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TO ADDRESS THE INCREASING NUMBER OF PATIENTS FROM THE SURROUNDING AREA SEEKING HIGH-QUALITY CARE AT UPMC EAST, THE HOSPITAL RECENTLY EXPANDED SPECIALTY SERVICES AND OPENED A NEW 2,520 SQUARE-FOOT MULTI-SPECIALTY CLINIC THAT BRINGS AN ARRAY OF PATIENT-CENTERED OUTPATIENT SERVICES TO THE GREENSBURG AREA. SERVICES AVAILABLE INCLUDE UPMC'S ORTHOPEDIC AND SPORTS MEDICINE, HEART AND VASCULAR, PAIN MANAGEMENT, GASTROENTEROLOGY, GENERAL SURGERY, AND MAGEE WOMEN'S HEALTH SERVICES.

UPMC EAST IMPLEMENTED THE DA VINCI SURGICAL SYSTEM, WHICH ALLOWS SURGEONS TO MAKE SMALL INCISIONS AND PERFORM ROBOTIC SURGERY WITH TINY ROBOTIC SURGICAL INSTRUMENTS AND CAMERAS. THIS SYSTEM IS A DUAL-CONSOLE SYSTEM ALLOWING A SECOND SURGEON TO ASSIST IN THE PROCEDURE. THE DA VINCI SYSTEM AT UPMC EAST IS USED FOR GENERAL SURGERY ALONG WITH UROLOGY, GYNECOLOGY, THORACIC AND COLORECTAL PROCEDURES.

THE HOSPITAL IS COMMITTED TO PROVIDING SERVICES TO ALL MEMBERS OF THE COMMUNITY, REGARDLESS OF THEIR ABILITY TO PAY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 8,621 PATIENTS, RENDERING 48,655 PATIENT DAYS. UPMC EAST HAD 39,958 EMERGENCY ROOM VISITS, 99,503 OUTPATIENT VISITS AND PERFORMED 10,333 SURGERIES.

DURING THE FISCAL YEAR ENDED JUNE 30, 2025, EAST PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST OF APPROXIMATELY \$26,023,000. THE HOSPITAL ALSO PROVIDED SERVICES WITH AN AGGREGATE VALUE OF OVER \$1,696,000 FOR OUTREACH PROGRAMS

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AND DONATIONS AND PROVIDED FUNDING OF OVER \$2,324,000 FOR RESEARCH AND
HEALTH PROFESSIONS EDUCATION.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

UPMC EAST STAFF PARTICIPATED IN VARIOUS AREA HEALTH FAIRS AND PRESENTED
EDUCATIONAL SEMINARS TO THE COMMUNITY. TOPICS COVERED INCLUDED EPILEPSY,
BACK PAIN, HERNIA HEALTH, CANCER, BAD HIPS AND KNEES, SKIN CANCER,
STROKE, AND BLOOD PRESSURE. FREE EDUCATION AND SUPPORT PROGRAMS WERE
OFFERED TO THOSE DIRECTLY OR INDIRECTLY AFFECTED BY ADDICTION. UPMC EAST
PARTNERED WITH MOTHER OF SORROWS CHURCH AND PARTICIPATED IN THE ANNUAL
COMMUNITY FESTIVAL. UPMC EAST HAD A TABLE ALLOWING COMMUNITY MEMBERS TO
BUILD THEIR OWN FIRST AID KIT WHILE THEY RECEIVED HEALTH EDUCATION FROM
UPMC'S EAST PRE-HOSPITAL CARE TEAM. UPMC EAST HELD A LADIES DAY OUT
EVENT THAT FOCUSED ON WOMEN'S HEALTH AND INCLUDED A VIRTUAL OPTION TO
PARTICIPATE. THROUGH LECOM UPMC EAST AND UPMC MCKEESPORT PARTNER TO
TRAIN 3RD AND 4TH YEAR MEDICAL STUDENTS WITH HANDS ON PATIENT CARE
EDUCATION.

UPMC EAST SPONSORED THE SAMPSON FAMILY YMCA HEALTHY KIDS DAY, SUPPORTING
A FUN AND EDUCATIONAL EVENT FOCUSED ON FAMILY WELLNESS. UPMC EAST HOSTED
AN INTERACTIVE TABLE WHERE CHILDREN AND PARENTS HAD THE OPPORTUNITY TO
BUILD THEIR OWN FIRST AID KITS WHILE LEARNING ESSENTIAL LIFESAVING AND
SAFETY SKILLS. UPMC EAST ALSO PARTICIPATED IN THE WESTINGHOUSE S.U.R.E.
(SERVICE UNITING RETIRED EMPLOYEES) SENIOR HEALTH FAIR, HELD AT
MONROEVILLE COMMUNITY PARK. THE EVENT WAS ORGANIZED BY RETIRED AND FORMER
WESTINGHOUSE EMPLOYEES WHO REMAIN ACTIVELY ENGAGED IN SERVING THE

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COMMUNITY THROUGH VOLUNTEER INITIATIVES. DURING THE EVENT UPMC RESIDENTS PROVIDED BLOOD PRESSURE SCREENINGS AND SHARED HEALTH EDUCATION RESOURCES WITH ATTENDEES. IN ADDITION, UPMC EAST DONATED TOTE BAGS IN SUPPORT OF THE EASTERN AREA LENTEN FISH FRY, WHICH WERE USED TO PACKAGE AND DISTRIBUTE MEALS TO THE COMMUNITY.

UPMC URGENT CARE AND THE UPMC HEALTH PLAN REPRESENTED UPMC EAST AT THE 6TH ANNUAL MONROEVILLE LIBRARY FUN FE4ST, WHICH WELCOMED MORE THAN 2,000 ATTENDEES. THE EVENT FEATURED HEALTH EDUCATION, FAMILY-FRIENDLY ACTIVITIES, GAMES, FOOD, AND LIVE MUSIC, OFFERING UPMC AN OPPORTUNITY TO ENGAGE WITH COMMUNITY MEMBERS IN A FESTIVE SETTING.

UPMC EAST PARTNERED WITH THE MONROEVILLE SENIOR CENTER TO OFFER BRUNCH AND LEARN EDUCATIONAL PRESENTATIONS FOR OLDER ADULTS AND COMMUNITY MEMBERS. TOPICS INCLUDED ARTHRITIS, COLON CANCER, EMERGENCY FIRST AID INSTRUCTION, INCLUDING STOP THE BLEED AND AED TRAINING AS WELL AS INTERACTIVE "ASK THE PHARMACIST" SESSIONS. ADDITIONALLY, UPMC EAST SPONSORED THE MONROEVILLE CHAMBER OF COMMERCE AND MONROEVILLE FOUNDATION GREAT PUMPKIN RACE, PROVIDING SUPPLIES AND GIVEAWAYS TO HELP MAKE THIS POPULAR COMMUNITY EVENT A SUCCESS.

UPMC HAMOT (HAMOT) IS A 445-BED TERTIARY MEDICAL CENTER WITH SPECIALTIES THAT INCLUDE CARDIOLOGY, NEUROSCIENCE, CRITICAL CARE, ORTHOPEDICS, AND WOMEN'S HEALTH SERVICES. THE MEDICAL CENTER REACHES OUT TO MORE THAN ONE MILLION PEOPLE IN NORTHWESTERN PENNSYLVANIA, WESTERN NEW YORK, AND

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EASTERN OHIO. THE MISSION IS TO SERVE PATIENTS, COMMUNITIES AND ONE ANOTHER IN THE HAMOT TRADITION OF QUALITY, HEALTH, HEALING, AND EDUCATION. IN PARTNERSHIP WITH ITS PHYSICIANS, PAYERS, AND OTHER STAKEHOLDERS, HAMOT WILL CONTINUE TO ADVANCE THE HEALTH AND WELLNESS OF THE COMMUNITIES IT SERVES, REGARDLESS OF PATIENTS' ABILITY TO PAY, BY ACHIEVING CLINICAL QUALITY OF THE HIGHEST NATIONAL STANDARDS AND MAXIMIZING OPERATIONAL EFFICIENCIES.

UPMC HAMOT IS A LEVEL II TRAUMA CENTER AND IS THE ONLY ACCREDITED TRAUMA CENTER IN THE ERIE REGION. TRAUMA CENTERS CARE FOR PATIENTS WITH MAJOR INJURIES THAT MAY BE LIFE-THREATENING. TO BE ACCREDITED AS A TRAUMA CENTER, A HOSPITAL MUST MEET STRICT GUIDELINES SET BY THE PENNSYLVANIA TRAUMA SYSTEMS FOUNDATION (PTSF). AN ACCREDITED TRAUMA CENTER HAS ACCESS 24 HOURS A DAY, 7 DAYS A WEEK, TO A TEAM OF SKILLED MEDICAL PROFESSIONALS WHO ARE SPECIALLY TRAINED TO PROVIDE THE HIGHEST LEVEL OF CARE AVAILABLE TO SEVERELY INJURED OR ILL PATIENTS. AT UPMC HAMOT, THE TRAUMA STAFF INCLUDES EMERGENCY PHYSICIANS AND NURSES, GENERAL AND TRAUMA SURGEONS, NEUROSURGEONS, INTERVENTIONAL RADIOLOGISTS, ORTHOPEDIC SURGEONS, CARDIOVASCULAR SURGEONS, RADIOLOGISTS, ANESTHESIOLOGISTS AND RECONSTRUCTIVE SURGEONS.

HAMOT TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 20,006 PATIENTS, RENDERING 108,552 PATIENT DAYS. HAMOT HAD 59,717 EMERGENCY ROOM VISITS, 257,179 OUTPATIENT VISITS AND PERFORMED 13,894 SURGERIES.

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HAMOT PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST OF APPROXIMATELY \$50,725,000 DURING FISCAL YEAR 2025. SERVICES WERE PROVIDED TO THE COMMUNITY THROUGH DONATIONS, OUTREACH PROGRAMS, SCREENINGS, AND EDUCATIONAL CLASSES AT A COST OF \$8,290,000. HAMOT SUPPORTED UNFUNDED RESEARCH AND HEALTH PROFESSIONS EDUCATION AT A COST OF \$7,758,000 DURING FISCAL YEAR 2025.

HAMOT HAS BEEN RECOGNIZED AS A MAGNET DESIGNATED HOSPITAL SINCE 2016. MAGNET STATUS IS THE HIGHEST INTERNATIONAL RECOGNITION FOR NURSING EXCELLENCE AND LEADERSHIP. THE HOSPITAL WAS REQUIRED TO MEET NEARLY 80 STANDARDS OF EXCELLENCE AND WAS RECOGNIZED FOR BUILDING AND SUPPORTING A CONTINUOUS CULTURE OF TRANSFORMATIONAL LEADERSHIP, ADVANCED TRAINING, AND NEW KNOWLEDGE APPLICATION AND INNOVATIONS. HAMOT IS THE FIRST AND ONLY ACCREDITED KIDNEY TRANSPLANT PROGRAM, COMPREHENSIVE STROKE CENTER, AND JOINT COMMISSION COMPREHENSIVE CARDIAC CENTER IN THE NORTHWESTERN PENNSYLVANIA REGION.

HAMOT REACHED THE COMMUNITY THROUGH PROGRAMS LIKE WEAR RED WHICH WAS A COMMUNITY EVENT WITH THE AMERICAN HEART ASSOCIATION TO RAISE AWARENESS ABOUT CARDIOVASCULAR DISEASE, ESPECIALLY THE FACTORS THAT INCREASE RISK TO WOMEN'S HEALTH. THE EVENT INCLUDED EDUCATION, COUNSELING, AND SCREENING ACTIVITIES INCLUDING BLOOD PRESSURE SCREENINGS, WEIGHT MANAGEMENT, CHOLESTEROL AND PERIPHERAL VASCULAR DISEASE SCREENINGS, SMOKING CESSATION, DIABETES MANAGEMENT, DIET AND EXERCISE INFORMATION,

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AND MORE.

FOR OVER 15 YEARS, UPMC HAMOT'S MAMMO-MARATHON PROGRAM HAS SOUGHT TO MAKE SCREENING FOR BREAST CANCER LESS INTIMIDATING. THE EVENT OFFERED FREE BREAST SCREENING FOR WOMEN OVER 40 AND WAS DESIGNED TO MAKE THE PROCESS LESS INTIMIDATING BY ENCOURAGING WOMEN TO ATTEND TOGETHER. FREE SNACKS, REFRESHMENTS AND CHAIR MASSAGES WERE PROVIDED.

UPMC ALTOONA IS A 335-BED HOSPITAL SERVING PRIMARILY THE MORE THAN 20 COUNTIES THROUGHOUT CENTRAL PENNSYLVANIA. IT MAINTAINS A LEVEL III ADULT TRAUMA CENTER, PROVIDING COMPREHENSIVE CARE FOR THE MOST SEVERELY INJURED. UPMC ALTOONA CARES FOR THE BEHAVIORAL HEALTH OF THE REGION THROUGH A 34-BED INPATIENT FACILITY AND OFFERS OUTPATIENT THERAPY. UPMC ALTOONA'S STATION MEDICAL CENTER BRINGS OUTPATIENT SERVICES CLOSER TO PATIENTS BY PROVIDING MANY STATE-OF-THE-ART DIAGNOSTIC SERVICES. THESE SERVICES INCLUDE NEUROLOGY TESTING, SLEEP STUDIES, FULL SERVICE MEDICAL IMAGING, LABORATORY SERVICES, A BREAST CENTER, CARDIAC REHABILITATION, AND PHYSICAL AND OCCUPATIONAL THERAPY.

UPMC ALTOONA IS COMMITTED TO ITS MISSION OF PROVIDING EXCEPTIONAL HEALTH CARE TO ALL IN NEED, REGARDLESS OF ABILITY TO PAY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 16,228 PATIENTS, RENDERING 78,824 PATIENT DAYS. ALTOONA HAD 48,426 EMERGENCY ROOM VISITS, 382,690 OUTPATIENT VISITS AND PERFORMED 11,742 SURGERIES.

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UPMC ALTOONA PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST OF OVER \$59,662,000 IN THE FISCAL YEAR ENDED JUNE 30, 2025. UPMC ALTOONA ALSO PROVIDED SERVICES TO THE COMMUNITY THROUGH FREE OR LOW-COST OUTREACH PROGRAMS TARGETED AT PATIENTS, PATIENTS' FAMILIES, AND THE COMMUNITY. THESE PROGRAMS AND SUPPORT, INCLUDING DIRECT DONATIONS, HAVE ASSISTED THOUSANDS OF PEOPLE IN THE COMMUNITY WITH COSTS TO THE HOSPITAL OF APPROXIMATELY \$11,510,000 IN THE FISCAL YEAR ENDED JUNE 30, 2025. UPMC ALTOONA ALSO FUNDED SCHOOLS OF HEALTH PROFESSIONS AND MEDICAL RESIDENCY PROGRAMS AS WELL AS MEDICAL RESEARCH AT A COMBINED COST OF \$13,015,000 IN FISCAL YEAR 2025.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

UPMC ALTOONA EARNED THE THROMBECTOMY-CAPABLE STROKE CENTER CERTIFICATION FROM THE JOINT COMMISSION AND AMERICAN HEART ASSOCIATION/AMERICAN STROKE ASSOCIATION. THE TCS CENTER DESIGNATION IS THE SECOND HIGHEST LEVEL OF EXCELLENCE RECOGNIZED BY THE JOINT COMMISSION, REQUIRING A RIGOROUS PROCESS BASED ON STANDARD OF QUALITY MEASURES AND EVIDENCE-BASED PRACTICE OF DATA PERFORMANCE. UPMC ALTOONA HAS ACHIEVED THE HIGHEST LEVEL OF SAFETY AND QUALITY OF CARE FOR BARIATRIC PATIENTS FROM THE METABOLIC AND BARIATRIC SURGERY ACCREDITATION AND QUALITY IMPROVEMENT PROGRAM, AS A COMPREHENSIVE CENTER FOR BARIATRIC SURGERY. UPMC ALTOONA HAS BEEN RECOGNIZED BY CRIBS FOR KIDS AS A GOLD SAFE SLEEP HOSPITAL, WHICH IS THE HIGHEST DESIGNATION IN THE ORGANIZATION'S NATIONAL SAFE SLEEP CERTIFICATION PROGRAM. THIS DESIGNATION MEANS THAT EVERY PATIENT, UNDER THE AGE OF ONE, IS ENSURED SAFE SLEEP CARE, AND THEIR CAREGIVERS ARE

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EDUCATED IN SAFE SLEEP PRACTICES. CRIBS FOR KIDS CITED UPMC'S LEADERSHIP AND HEALTH CARE TEAM MEMBERS' COMMITMENT TO BEST PRACTICES, EDUCATION, AND COMMUNITY OUTREACH AS COMMENDABLE. THIS YEAR THROUGH THE PA PQC UPMC ALTOONA EARNED A SILVER DESIGNATION FOR QUALITY IMPROVEMENT WORK IN THE MATERNAL SEPSIS FOR PATIENT VOICE INITIATIVE AND BRONZE DESIGNATION FOR QUALITY WORK IN OPIOID USE DISORDER, NEONATAL ABSTINENCE SYNDROME, AND SAFE SLEEP. ADDITIONALLY, UPMC ALTOONA HAS RECEIVED "MATERNITY CARE ACCESS" DESIGNATION AS PART OF U.S. NEWS & WORLD REPORT'S 2026 BEST HOSPITALS FOR MATERNITY RANKINGS

UPMC ALTOONA PROVIDES FREE, WALK-IN SCREENING MAMMOGRAPHY DAYS AT SEVERAL LOCATIONS. UPMC ALTOONA PROVIDED NUMEROUS PRESENTATIONS TO PROVIDE HEALTH EDUCATION TO THE COMMUNITY INCLUDING PREVENTING HEART DISEASE AND VARIOUS OTHER DISEASES AND CONDITIONS THAT AFFECT THE HEART, INCLUDING VALVE REPLACEMENT AND REPAIR, CORONARY ARTERY BYPASS SURGERY, AND SURGICAL TREATMENTS FOR ATRIAL FIBRILLATION. THE HOSPITAL PROMOTED HEALTH BY PERFORMING FREE SCREENINGS AND PROVIDING INFORMATION AT THEIR HEALTH AND WELLNESS FAIRS. DIABETES SELF-MANAGEMENT & EDUCATION CLASSES WERE PROVIDED TO PATIENTS WITH DIABETES TO HELP THEM BETTER MANAGE THEIR CONDITION. ALTOONA CURVE BASEBALL HAD A MENTAL HEALTH AWARENESS NIGHT FOR PROGRAMS AND SET-UP TABLES WITH EDUCATION MATERIALS AND OTHER OFFERINGS FOR THE PUBLIC TO VIEW AND ASK QUESTIONS ABOUT THE PROGRAMS THOSE SERVICES OFFER.

FREE MEDICATIONS WERE DISTRIBUTED BY UPMC ALTOONA TO PATIENTS UPON

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DISCHARGE WHO LACK THE RESOURCES OR INSURANCE COVERAGE TO COVER THE COSTS OF MEDICATIONS OR COPAYS. UPMC ALTOONA PROVIDED FREE PARKING AND FREE TRANSPORTATION FOR INDIGENT PATIENTS, AS WELL AS TRANSPORT FOR UNINSURED OR UNDERINSURED PATIENTS WHO REQUIRED A HIGHER LEVEL OF CARE.

LOCATED IN NEW CASTLE, PENNSYLVANIA, UPMC JAMESON (JAMESON) IS A FULL-SERVICE, 146-BED, COMMUNITY HOSPITAL PROVIDING INPATIENT HOSPITAL CARE, SURGICAL SERVICES, DIAGNOSTIC IMAGING, EMERGENCY MEDICINE, SENIOR CARE, REHABILITATION, AND A VARIETY OF SPECIALIZED HEALTH CARE SERVICES FOR THE RESIDENTS OF LAWRENCE COUNTY AND ITS SURROUNDING COMMUNITIES. JAMESON IS THE REGIONAL DESTINATION FOR BARIATRIC SURGERY, CRITICAL CARE MEDICINE, HEART AND VASCULAR CARE, INPATIENT REHABILITATION, AND ROBOTIC SURGERY.

UPMC JAMESON TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 6,725 PATIENTS, RENDERING 32,280 PATIENT DAYS. JAMESON HAD 32,747 EMERGENCY ROOM VISITS, 170,384 OUTPATIENT VISITS AND PERFORMED 6,340 SURGERIES.

DURING THE FISCAL YEAR ENDED JUNE 30, 2025, UPMC JAMESON PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST IN EXCESS OF \$11,568,000. UPMC JAMESON PROVIDED COMMUNITY SERVICE PROGRAMS AND OTHER FUNDING AT A COST OF OVER \$11,769,000 AND FUNDING FOR EDUCATION AND RESEARCH AT A COST OF APPROXIMATELY \$3,984,000.

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UPMC JAMESON IS ACCREDITED BY THE METABOLIC AND BARIATRIC SURGERY ACCREDITATION AND QUALITY IMPROVEMENT PROGRAM (MBSAQIP) AS A COMPREHENSIVE CENTER. THE UPMC HEART AND VASCULAR INSTITUTE AT UPMC JAMESON IS ACCREDITED BY CORAZON, INC., A PITTSBURGH-BASED ACCREDITATION AGENCY ON BEHALF OF THE PENNSYLVANIA DEPARTMENT OF HEALTH.

THE UPMC JAMESON REHABILITATION INSTITUTE AT UPMC JAMESON IS A 12-BED UNIT OFFERING STATE-OF-THE-ART TECHNOLOGY AND COMPLETE INPATIENT CARE FOR NEUROLOGICAL DISORDERS, LIMB LOSS AND TRAUMA, INJURIES TO JOINTS, BONES, MUSCLES, TENDONS AND NERVES, STROKE AND GENERAL DEBILITATION. SERVICES INCLUDE EXPERT CARE FROM THE UPMC PHYSICAL MEDICINE AND REHAB TEAM, PHYSICAL, OCCUPATIONAL, AND SPEECH-LANGUAGE THERAPY, HEART AND LUNG DISEASE REHAB, AND DIET AND NUTRITION SERVICES, SOCIAL SUPPORT AND CASE MANAGEMENT.

UPMC KANE (KANE) IS A 14-BED, CRITICAL ACCESS HOSPITAL (CAH) LICENSED BY THE COMMONWEALTH OF PENNSYLVANIA SERVING COMMUNITY MEMBERS MAINLY FROM THE THREE-COUNTY REGION OF MCKEAN, ELK AND WARREN. KANE'S ACTIVE AND CONSULTING MEDICAL STAFF AND CARE PROVIDERS OFFER A BROAD BASE OF PRIMARY AND SPECIALTY CARE AND SERVICES INCLUDING: FAMILY AND INTERNAL MEDICINE, SURGICAL SERVICES, A 24 HOUR EMERGENCY ROOM, CENTER FOR ORTHO, THE FULL RANGE OF REHABILITATION SERVICES (PHYSICAL, OCCUPATIONAL, AND SPEECH THERAPIES) AND PAIN MANAGEMENT; KANE CARDIAC REHAB, CARDIOLOGY AND GASTROENTEROLOGY (DIGESTIVE HEALTH) CLINICS IN COOPERATION WITH UPMC

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HAMOT; AND GYNECOLOGY. UPMC CREATED A FIRST-OF-ITS KIND TELE-EMERGENCY DEPARTMENT AT UPMC KANE. THIS APPROACH ELIMINATED SOME OF THE NEED TO SEND PATIENTS TO A BIGGER HOSPITAL USUALLY AT A FURTHER DISTANCE BY ALLOWING PATIENTS ACCESS TO EXCELLENT EMERGENCY MEDICAL CARE AT KANE.

IN FURTHERANCE OF ITS MISSION TO PROVIDE EXEMPLARY HEALTH CARE SERVICES, KANE PROVIDES PATIENT-CENTERED, QUALITY HEALTH CARE IN A COST-EFFECTIVE MANNER, ADHERING TO THE VALUES OF EXCELLENCE, COMPASSION, AND THE RESPECT FOR HUMAN DIGNITY, REGARDLESS OF A PATIENT'S ABILITY TO PAY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 238 PATIENTS, RENDERING 870 PATIENT DAYS. KANE HAD 7,484 EMERGENCY ROOM VISITS, 66,431 OUTPATIENT VISITS AND PERFORMED 1,259 SURGERIES.

DURING THE FISCAL YEAR ENDED JUNE 30, 2025, UPMC KANE PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST IN EXCESS OF \$5,828,000. THE HOSPITAL PROVIDED FUNDING AND SERVICES TO THE COMMUNITY IN THE AGGREGATE OF \$481,000 THROUGH COMMUNITY OUTREACH PROGRAMS TARGETED AT PATIENTS, THEIR FAMILIES, AND THE COMMUNITY, AS WELL AS DONATIONS, VOLUNTEER SERVICES, AND RESEARCH AND EDUCATION PROGRAMS.

UPMC KANE IS A PARTICIPANT IN THE PA RURAL HEALTH MODEL (PARHM), A JOINT EFFORT BETWEEN THE PA DEPARTMENT OF HEALTH AND THE CENTER FOR MEDICARE AND MEDICAID INNOVATION (CMMI) THAT PROVIDES FINANCIAL STABILITY TO RURAL PA HOSPITALS TRANSITIONING TO VALUE-BASED CARE THROUGH GLOBAL BUDGET

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PAYMENTS. PARHM IS AIMED AT DEVELOPING INNOVATIVE MODELS TO SUSTAIN EVERY LEVEL OF ACTIVITY IN RURAL COMMUNITIES, WITH THE HIGHEST LEVELS OF QUALITY AND PATIENT SAFETY, AND IN A WAY THAT REDUCES COSTS.

THE COMMUNITY BENEFITED FROM A VARIETY OF PROGRAMS OFFERED BY KANE. THE HOSPITAL COLLABORATED WITH COMMUNITY PARTNERS TO HOST MULTIPHASIC BLOOD SCREENINGS, PARTICIPATED ON LOCAL BOARDS AND COMMITTEES TO PROMOTE COMMUNITY WELLNESS, AND IMPLEMENTED NEW TELEMEDICINE SPECIALTY CONSULTS TO IMPROVE LOCAL ACCESS TO SPECIALIST CARE. THEY SUPPORTED COMMUNITY BLOOD BANK DRIVES QUARTERLY AND PROVIDED RESOURCES AT SENIOR EXPOS AND WELLNESS FAIRS FOR THE LOCAL SCHOOL DISTRICT.

UPMC MUNCY IS A 20-BED CRITICAL ACCESS HOSPITAL THAT PRIMARILY SERVES RESIDENTS OF LYCOMING COUNTY AND THE SURROUNDING REGION. THE HOSPITAL DELIVERS A COMPREHENSIVE RANGE OF OUTPATIENT AND EMERGENCY SERVICES AND OPERATES A 138-BED LONG-TERM CARE FACILITY. FOR THE FISCAL YEAR ENDING JUNE 30, 2025, UPMC MUNCY ADMITTED 748 PATIENTS, ACCOUNTING FOR 3,784 PATIENT DAYS. DURING THE SAME PERIOD, THE HOSPITAL RECORDED 10,524 EMERGENCY DEPARTMENT VISITS, 36,511 OUTPATIENT VISITS, AND PERFORMED 3,489 SURGICAL PROCEDURES.

DURING FISCAL YEAR 2025, UPMC MUNCY PROVIDED MORE THAN \$12.64 MILLION IN CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS. THE HOSPITAL ALSO SUPPORTED THE COMMUNITY THROUGH OUTREACH PROGRAMS, EDUCATIONAL INITIATIVES, AND CHARITABLE CONTRIBUTIONS

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VALUED AT APPROXIMATELY \$185,000. UPMC MUNCY IS COMMITTED TO TREATING ALL PATIENTS WITH DIGNITY AND RESPECT, REGARDLESS OF THEIR ABILITY TO PAY.

UPMC MUNCY HAS BEEN RECOGNIZED BY BECKER'S HOSPITAL REVIEW AS ONE OF THE 374 CLEANEST HOSPITALS IN THE NATION, RANKED BY STATE-AN HONOR SHARED WITH UPMC COLE AND UPMC WELLSBORO.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

DEMONSTRATING A DEEPENED COMMITMENT TO PATIENT CARE ACROSS LYCOMING COUNTY AND NORTHCENTRAL PENNSYLVANIA, UPMC MUNCY HAS PARTNERED WITH STAT MEDEVAC TO ESTABLISH A NEW CRITICAL CARE TRANSPORT BASE AT THE HOSPITAL. THIS INITIATIVE REPRESENTS A SIGNIFICANT ADVANCEMENT IN PRE-HOSPITAL CARE DELIVERY FOR THE REGION. WITH A DEDICATED HELICOPTER AND FLIGHT CREW STATIONED AT UPMC MUNCY, PATIENTS-PARTICULARLY THOSE IN RURAL COMMUNITIES-WILL BENEFIT FROM EXPANDED, RAPID ACCESS TO LIFE-SAVING CARE WHERE TIME AND DISTANCE ARE CRITICAL FACTORS.

FOLLOWING THE 2025 COMMUNITY HEALTH NEEDS ASSESSMENT, BEHAVIORAL HEALTH WAS IDENTIFIED AS AN ONGOING PRIORITY AREA. PLANNED ACTIONS INCLUDE IMPROVING LOCAL ACCESS TO BEHAVIORAL HEALTH SPECIALISTS TO REDUCE THE NEED FOR PATIENTS TO TRAVEL OUTSIDE THE COMMUNITY FOR CARE, AS WELL AS ENHANCING CARE COORDINATION FOR INDIVIDUALS WITH BEHAVIORAL HEALTH NEEDS. ADDITIONALLY, UPMC MUNCY WILL EMPHASIZE PREVENTION AND COMMUNITY-WIDE HEALTHY LIVING BY RAISING AWARENESS OF OUTPATIENT THERAPY SERVICES THROUGH TARGETED COMMUNITY OUTREACH AND PROMOTING EARLY DETECTION AND PREVENTION THROUGH SCREENINGS AND EDUCATIONAL INITIATIVES.

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UPMC WELLSBORO IS A 25-BED CRITICAL ACCESS HOSPITAL LOCATED IN WELLSBORO, PENNSYLVANIA. THE HOSPITAL OFFERS A BROAD RANGE OF SERVICES, INCLUDING A STATE-OF-THE-ART EMERGENCY DEPARTMENT, OUTPATIENT SURGERY CENTER, REHABILITATION SERVICES, OPHTHALMOLOGY, MATERNITY CARE, CARDIOVASCULAR SERVICES, LABORATORY AND IMAGING SERVICES, AND A COMPREHENSIVE SLEEP CENTER.

UPMC WELLSBORO IS COMMITTED TO PROVIDING CARE TO ALL PATIENTS REGARDLESS OF THEIR ABILITY TO PAY. FOR THE FISCAL YEAR ENDING JUNE 30, 2025, THE HOSPITAL ADMITTED 1,141 PATIENTS, ACCOUNTING FOR 5,455 PATIENT DAYS. DURING THE SAME PERIOD, UPMC WELLSBORO RECORDED 12,100 EMERGENCY DEPARTMENT VISITS, 64,833 OUTPATIENT VISITS, AND PERFORMED 1,424 SURGICAL PROCEDURES.

DURING FISCAL YEAR 2025, UPMC WELLSBORO PROVIDED MORE THAN \$2.08 MILLION IN CHARITY CARE AND OTHER UNCOMPENSATED CARE. THE HOSPITAL ALSO INVESTED IN COMMUNITY OUTREACH AND SUPPORT PROGRAMS, ALONG WITH CHARITABLE CONTRIBUTIONS, TOTALING APPROXIMATELY \$198,000 FOR THE YEAR.

UPMC WELLSBORO RECEIVED A FOUR-STAR RATING FROM THE CENTERS FOR MEDICARE & MEDICAID SERVICES, PLACING IT AMONG ONLY 455 HOSPITALS NATIONWIDE TO EARN THIS DISTINCTION IN THE MOST RECENT OVERALL HOSPITAL QUALITY STAR RATING. THE HOSPITAL HAS ALSO BEEN RECOGNIZED BY BECKER'S HOSPITAL REVIEW AS ONE OF THE 374 CLEANEST HOSPITALS IN THE COUNTRY, RANKED BY STATE-AN

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HONOR SHARED WITH UPMC COLE AND UPMC MUNCY. ADDITIONALLY, UPMC HILLMAN CANCER CENTERS IN COUDERSPORT, WELLSBORO, AND WILLIAMSPORT HAVE EARNED NATIONAL RECOGNITION FOR EXCELLENCE IN CANCER CARE THROUGH THE QOPI® CERTIFICATION PROGRAM OF THE AMERICAN ASSOCIATION FOR CLINICAL ONCOLOGY, AN AFFILIATE OF THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY.

THE WELLSBORO COMMUNITY BENEFITS FROM A WIDE VARIETY OF EDUCATIONAL AND PREVENTIVE HEALTH PROGRAMS OFFERED BY THE HOSPITAL, INCLUDING LOW-COST BLOOD SCREENINGS, SKIN CANCER SCREENINGS, A CHILDREN'S HEALTH FAIR, SENIOR EXPO, BACK 2 SCHOOL EVENTS, HEARTSAVER CPR TRAINING, AND STOP THE BLEED COURSES.

FOOD INSECURITY CONTINUES TO BE A KEY AREA OF FOCUS FOR UPMC WELLSBORO IN CONJUNCTION WITH UPMC COLE. THE HOSPITAL HOSTS A MONTHLY OUTREACH EVENT THAT SERVES AN AVERAGE OF 150 VEHICLES-APPROXIMATELY 300 INDIVIDUALS-EACH MONTH. THESE EVENTS PROVIDE ESSENTIAL FOOD, HEALTH EDUCATION, AND COMPASSIONATE OUTREACH DIRECTLY TO FAMILIES THROUGH A MOBILE UNIT, ALLOWING PARTICIPANTS TO RECEIVE SUPPORT WITHOUT LEAVING THEIR VEHICLES.

UPMC WILLIAMSPORT IS A 269-BED ACUTE CARE COMMUNITY HOSPITAL THAT PRIMARILY SERVES LYCOMING COUNTY AND THE SURROUNDING REGION. THE HOSPITAL OFFERS A COMPREHENSIVE RANGE OF SERVICES, INCLUDING ACUTE AND INTENSIVE CARE, SURGICAL SERVICES, HEART AND LUNG CARE, REHABILITATION, DIALYSIS, LABORATORY AND RADIOLOGY SERVICES, PSYCHOLOGY, AND EMERGENCY CARE. IN ADDITION, UPMC WILLIAMSPORT OPERATES A 31-BED SPECIALTY HOSPITAL AT ITS

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DIVINE PROVIDENCE SITE, WHICH PROVIDES INPATIENT PSYCHIATRIC CARE, HOME HEALTH SERVICES, AND A WIDE ARRAY OF OUTPATIENT HOSPITAL SERVICES TO RESIDENTS OF LYCOMING AND NEIGHBORING COUNTIES.

UPMC WILLIAMSPORT IS COMMITTED TO CARING FOR ALL PATIENTS REGARDLESS OF THEIR ABILITY TO PAY. FOR THE FISCAL YEAR ENDING JUNE 30, 2025, THE HOSPITAL ADMITTED 11,397 PATIENTS AND PROVIDED 66,083 PATIENT DAYS. DURING THIS PERIOD, UPMC WILLIAMSPORT RECORDED 48,583 EMERGENCY DEPARTMENT VISITS, 351,170 OUTPATIENT VISITS, AND PERFORMED 10,765 SURGICAL PROCEDURES.

DURING FISCAL YEAR 2025, UPMC WILLIAMSPORT, INCLUSIVE OF BOTH HOSPITAL SITES, DELIVERED MORE THAN \$116.4 MILLION IN CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS. THE HOSPITAL ALSO INVESTED APPROXIMATELY \$19.2 MILLION IN COMMUNITY OUTREACH, SUPPORT PROGRAMS, CONTRIBUTIONS, AND EDUCATIONAL INITIATIVES, IN ADDITION TO \$4.07 MILLION IN FUNDING FOR EDUCATION AND RESEARCH.

UPMC WILLIAMSPORT HAS RECEIVED NUMEROUS RECOGNITIONS FOR CLINICAL EXCELLENCE AND COMMUNITY IMPACT. ALONGSIDE UPMC MAGEE-WOMENS, THE HOSPITAL WAS NAMED A 2025 HIGH PERFORMING HOSPITAL FOR MATERNITY CARE (UNCOMPLICATED PREGNANCY) BY U.S. NEWS & WORLD REPORT-THE ORGANIZATION'S HIGHEST HONOR FOR MATERNITY CARE. THE DESIGNATION SUPPORTS EXPECTANT PARENTS IN MAKING INFORMED DECISIONS ABOUT WHERE TO RECEIVE MATERNITY SERVICES THAT BEST MEET THEIR FAMILY'S NEEDS. UPMC WILLIAMSPORT WAS ALSO NAMED ONE OF PENNSYLVANIA'S TOP-PERFORMING HOSPITALS IN THE 2025

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EXCELLENCE IN PATIENT SAFETY RECOGNITION PROGRAM BY THE HOSPITAL AND
HEALTHSYSTEM ASSOCIATION OF PENNSYLVANIA (HAP).

ADDITIONALLY, UPMC HILLMAN CANCER CENTERS IN COUDERSPORT, WELLSBORO, AND
WILLIAMSPORT HAVE EARNED NATIONAL RECOGNITION FOR DELIVERING HIGH-QUALITY
CANCER CARE THROUGH THE QOPI® CERTIFICATION PROGRAM, ADMINISTERED BY THE
AMERICAN ASSOCIATION FOR CLINICAL ONCOLOGY AND AFFILIATED WITH THE
AMERICAN SOCIETY OF CLINICAL ONCOLOGY. UPMC WILLIAMSPORT ALSO EARNED
THIRD PLACE AS A TOP-PERFORMING HOSPITAL FOR THE GIFT OF LIFE DONOR
PROGRAM IN HAP'S 2025 DONATE LIFE PENNSYLVANIA HOSPITAL CHALLENGE.

ADDRESSING FOOD INSECURITY REMAINS A SIGNIFICANT COMMUNITY PRIORITY FOR
UPMC WILLIAMSPORT, WHERE THE BELIEF THAT "FOOD IS MEDICINE" IS ACTIVELY
PUT INTO PRACTICE BY THE FAMILY MEDICINE RESIDENCY TEAM. THROUGH A
COLLABORATIVE EFFORT LED BY THIRD-YEAR RESIDENT DR. TAYLOR RIDER, A NEW
DRIP IRRIGATION SYSTEM WAS INSTALLED AT THE SALVATION ARMY COMMUNITY
GARDEN IN WILLIAMSPORT. PARTNERS IN THE INITIATIVE INCLUDED FACULTY
MEMBER JOHN BOLL, DO, UPMC WILLIAMSPORT FAMILY MEDICINE RESIDENCY STAFF,
MEMBERS OF THE UPMC WILLIAMSPORT FACILITIES TEAM, SALVATION ARMY GARDEN
MANAGER SID FURST, AND DEDICATED VOLUNTEERS.

THE NEW IRRIGATION SYSTEM ENHANCES THE GARDEN'S CAPACITY TO GROW FRESH
PRODUCE BY INCREASING HARVEST YIELDS, REDUCING MAINTENANCE DEMANDS, AND
EXPANDING OPPORTUNITIES FOR EDUCATION AND COMMUNITY VOLUNTEERISM.

ACCORDING TO THE CENTRAL PENNSYLVANIA FOOD BANK, ONE IN TEN INDIVIDUALS

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IN THE REGION EXPERIENCE FOOD INSECURITY, WITH CHILDREN AND SENIORS
DISPROPORTIONATELY AFFECTED. THE SALVATION ARMY COMMUNITY GARDEN PLAYS A
VITAL ROLE IN ADDRESSING THIS NEED BY SUPPLYING HEALTHY PRODUCE TO LOCAL
FOOD PROGRAMS AND FAMILIES IN NEED.

CHARLES COLE MEMORIAL HOSPITAL (UPMC COLE) IS A PROGRESSIVE, RURAL
CRITICAL ACCESS HOSPITAL WITH 39 BEDS THAT PRIMARILY SERVES POTTER COUNTY
AND THE SURROUNDING REGION. SINCE OPENING IN 1967, UPMC COLE HAS BEEN
DEDICATED TO PROVIDING HIGH-QUALITY, PATIENT-CENTERED CARE TAILORED TO
THE NEEDS OF ITS COMMUNITY. AS A CRITICAL ACCESS COMMUNITY HOSPITAL, UPMC
COLE OFFERS A COMPREHENSIVE RANGE OF SERVICES DELIVERED WITH A COMMITMENT
TO COMPASSION, EFFICIENCY, TRUST, RESPONSIVENESS, AND COURTESY.

FOLLOWING THE 2025 COMMUNITY HEALTH NEEDS ASSESSMENT, BEHAVIORAL HEALTH
WAS IDENTIFIED AS A CONTINUED PRIORITY FOCUS AREA. PLANNED ACTIONS
INCLUDE STRENGTHENING LOCAL ACCESS TO BEHAVIORAL HEALTH SPECIALISTS AND
SERVICES, AS WELL AS EVALUATING THE FEASIBILITY OF IMPLEMENTING A
MEDICATION-ASSISTED TREATMENT (MAT) PROGRAM. ADDITIONALLY, UPMC COLE WILL
PLACE STRONG EMPHASIS ON PREVENTION AND COMMUNITY-WIDE HEALTHY LIVING BY
INCREASING AWARENESS OF DISEASE PREVENTION, ADDRESSING HEALTH-RELATED
SOCIAL NEEDS, AND PROMOTING PALLIATIVE CARE SERVICES.

UPMC COLE HAS BEEN RECOGNIZED BY BECKER'S HOSPITAL REVIEW AS ONE OF THE
374 CLEANEST HOSPITALS IN THE NATION, AS RANKED BY STATE. THIS
DISTINCTION PLACES UPMC COLE ALONGSIDE UPMC MUNCY AND UPMC WELLSBORO.

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FURTHERMORE, UPMC HILLMAN CANCER CENTERS LOCATED IN COUDERSPORT, WELLSBORO, AND WILLIAMSPORT HAVE ACHIEVED NATIONAL RECOGNITION FOR EXCELLENCE IN CANCER CARE THROUGH THE QOPI® CERTIFICATION PROGRAM, A PROGRAM OF THE AMERICAN ASSOCIATION FOR CLINICAL ONCOLOGY AND AN AFFILIATE OF THE AMERICAN SOCIETY OF CLINICAL ONCOLOGY.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

ADDRESSING FOOD INSECURITY REMAINS A SIGNIFICANT FOCUS FOR UPMC COLE. THE HOSPITAL HOSTS A MONTHLY OUTREACH EVENT THAT SERVES AN AVERAGE OF 150 VEHICLES, APPROXIMATELY 300 INDIVIDUALS-EACH MONTH. THESE EVENTS DELIVER ESSENTIAL FOOD, HEALTH EDUCATION, AND COMPASSIONATE SUPPORT DIRECTLY TO FAMILIES IN NEED THROUGH A MOBILE UNIT, ALLOWING RECIPIENTS TO REMAIN IN THEIR VEHICLES.

FOR THE FISCAL YEAR ENDING JUNE 30, 2025, UPMC COLE ADMITTED 852 PATIENTS AND RECORDED 3,035 PATIENT DAYS. DURING THIS PERIOD, THE HOSPITAL PROVIDED CARE FOR 11,024 EMERGENCY DEPARTMENT VISITS, 110,124 OUTPATIENT VISITS, AND PERFORMED 3,772 SURGICAL PROCEDURES.

DURING THE SAME FISCAL YEAR, UPMC COLE DELIVERED MORE THAN \$23.6 MILLION IN CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS. IN ADDITION, THE HOSPITAL INVESTED APPROXIMATELY \$311,000 IN COMMUNITY OUTREACH, SUPPORT PROGRAMS, CONTRIBUTIONS, AND EDUCATIONAL INITIATIVES. UPMC COLE REMAINS COMMITTED TO TREATING ALL PATIENTS WITH DIGNITY AND RESPECT, REGARDLESS OF THEIR ABILITY TO PAY.

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UPMC SOMERSET (SOMERSET) IS A 111 LICENSED-BED HOSPITAL. THE HOSPITAL PRESENTLY HAS A COMPLEMENT OF MEDICAL/SURGICAL BEDS, AN INTENSIVE CORONARY CARE UNIT, SKILLED NURSING BEDS, AND AN ADULT NEUROPSYCHIATRIC SERVICE WITH AN 18-BED HOSPITAL-BASED UNIT. OTHER SERVICES INCLUDE MEDICAL ONCOLOGY, A SLEEP LAB, A DIALYSIS CENTER, A CARDIAC CATHETERIZATION LABORATORY, A PAIN MANAGEMENT PROGRAM, DIABETES AND NUTRITION EDUCATION AND COMMUNITY EDUCATION. ROUND THE CLOCK EMERGENCY CARE IS PROVIDED BY THE HOSPITAL. ANCILLARY SERVICES INCLUDE RADIOLOGY, LABORATORY, REHABILITATION AND CARDIOPULMONARY SERVICES.

UPMC SOMERSET HOSPITAL TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 2,401 PATIENTS, RENDERING 11,653 PATIENT DAYS. SOMERSET HAD 18,426 EMERGENCY ROOM VISITS, 129,255 OUTPATIENT VISITS AND PERFORMED 3,585 SURGERIES.

DURING THE FISCAL YEAR ENDED JUNE 30, 2025, SOMERSET HOSPITAL PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID SHORTFALLS, AT A COST OF OVER \$400,000. UPMC SOMERSET PROVIDED COMMUNITY OUTREACH AND SUPPORT PROGRAMS AS WELL AS CONTRIBUTIONS AND SUPPORT OF EDUCATION IN FISCAL YEAR 2025. THE VALUE OF THESE PROGRAMS TO THE COMMUNITY WAS APPROXIMATELY (\$933,000).

UPMC SOMERSET PARTICIPATED IN A MINUTES MATTER EVENT THAT INCLUDED HANDS ONLY CPR, AED OPERATION, STOP THE BLEED, OVERDOSE AWARENESS AND

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TREATMENT, AND MENTAL HEALTH FIRST AID FOR THE COMMUNITY'S BENEFIT. STAFF PARTICIPATED IN SENIOR EXPO 2025 PROVIDING EDUCATION ON STROKE SYSTEMS AND WHAT TO DO IF EXPERIENCING THE SYMPTOMS OF STROKE AS WELL AS INFORMATION ABOUT SERVICES AND PROVIDERS AT THE HOSPITAL. UPMC SOMERSET HOSTED TWO HIGH SCHOOL EXPOS THAT HOSTED OVER 100 HIGH SCHOOL STUDENTS FOR CAREER EXPLORATION. THE HOSPITAL ALSO PROVIDES CLINICAL EXPERIENCE FOR HEALTH CARE STUDENTS FROM SEVERAL SURROUNDING COLLEGES.

THERE ARE SIXTEEN PHYSICIAN SERVICE ENTITIES THAT ARE PART OF UPMC GROUP, INCLUDING UNIVERSITY OF PITTSBURGH CANCER INSTITUTE CANCER SERVICES, UNIVERSITY OF PITTSBURGH PHYSICIANS, UPMC COMMUNITY MEDICINE, INC., UPMC EMERGENCY MEDICINE, INC., REGIONAL HEALTH SERVICES, INC., BUTLER HEALTH SYSTEM/UPMC MUSCULOSKELETAL JOINT VENTURE, INC., UPMC OB/GYN JOINT VENTURE, INC., ERIE PHYSICIAN NETWORK-UPMC, INC., UPMC MEDICAL EDUCATION, JAMESON MEDICAL CARE, INC., UPMC LOCUM CLINICIANS; SUSQUEHANNA PHYSICIAN SERVICES, UPMC ADVANCED PRACTICE PROVIDERS, PINNACLE HEALTH MEDICAL SERVICES, AND PINNACLE HEALTH REGIONAL PHYSICIANS.

UNIVERSITY OF PITTSBURGH PHYSICIANS (UPP) IS A MULTI-SPECIALTY FACULTY/PHYSICIAN PRACTICE PLAN WHOSE MISSION IS TO SUPPORT THE CLINICAL AND ACADEMIC MISSIONS OF UPMC, SUPPORT UPMC'S HEALTH CARE SERVICES SUBSIDIARIES AND THE UNIVERSITY OF PITTSBURGH SCHOOL OF MEDICINE, AND PROVIDE HIGHLY ACCESSIBLE, HIGH-QUALITY PATIENT CARE THROUGH A WIDE ARRAY OF PHYSICIAN/MEDICAL SPECIALTIES AT UPMC AND ITS AFFILIATED HOSPITALS AND HEALTH CARE ENTITIES.

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UPP INCLUDES OVER 4,200 ACADEMIC PHYSICIANS AND ALLIED HEALTH CARE PROVIDERS AT OVER 600 CLINICAL LOCATIONS. THE PHYSICIANS' SPECIALTIES INCLUDE ANESTHESIOLOGY, CRITICAL CARE MEDICINE, CARDIOVASCULAR SERVICES, UROLOGY, PHYSICAL MEDICINE AND REHABILITATION, EMERGENCY MEDICINE, FAMILY MEDICINE, PATHOLOGY, PSYCHIATRY, RADIOLOGY, RADIATION ONCOLOGY, INTERNAL MEDICINE, ORTHOPEDICS, NEUROLOGY, NEUROSURGERY, PEDIATRICS, OBSTETRICS AND GYNECOLOGY, SURGERY, DERMATOLOGY, OPHTHALMOLOGY, OTOLARYNGOLOGY, AND HEART, LUNG AND ESOPHAGEAL SURGERY, AS WELL AS SUBSPECIALTIES WITHIN EACH OF THESE BROAD CATEGORIES. UPP PHYSICIANS ARE ALSO MEMBERS OF THE FACULTY OF THE UNIVERSITY OF PITTSBURGH'S SCHOOL OF MEDICINE. AS FACULTY, THEY EDUCATE MEDICAL STUDENTS AND DOCTORS IN TRAINING. IN ADDITION TO CLINICAL PATIENT CARE AND RESIDENT EDUCATION, MANY UPP PHYSICIANS ARE INVOLVED IN CUTTING-EDGE MEDICAL RESEARCH.

ONE OF THE PRIMARY PURPOSES OF UPP IS TO PROVIDE QUALITY AND ACCESSIBLE MEDICAL CARE TO THE PUBLIC, WITHOUT REGARD FOR A PATIENT'S ABILITY TO PAY. THIS COMMITMENT IS EVIDENCED BY THE FACT THAT UPP PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE AT A COST OF OVER \$25,457,000 IN THE FISCAL YEAR ENDED JUNE 30, 2025. UPP SERVES TO ENHANCE THE QUALITY HEALTH CARE SERVICES OF ALL THE TERTIARY AND ADVANCED CARE ENTITIES, AS WELL AS ACADEMIC SUBSIDIARIES AND AFFILIATES OF UPMC.

AS PART OF THIS MISSION, UPP ALSO SERVES THE COMMUNITY BY PROVIDING FREE SERVICES AND PROGRAMS. THROUGHOUT THE YEAR, UPP OFFERED LIPID, BLOOD

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PRESSURE, AND BMI SCREENINGS, AND PROVIDED EDUCATIONAL INFORMATION ON BARIATRIC SURGERY, DIABETES, AND OBESITY.

THE HOMELESS, WORKING POOR, TRANSIENTLY HOUSED, AND UNINSURED ARE PROVIDED HEALTH CARE SERVICES AT NO CHARGE THROUGH THE PROGRAM FOR HEALTH CARE TO UNDERSERVED POPULATIONS. THIS INCLUDES VOLUNTEER-STAFFED BASIC CARE CLINICS THAT OFFER SERVICES THAT INCLUDE GENERAL PRIMARY CARE, ACUTE CARE, CHRONIC DISEASE MANAGEMENT, SPECIALTY CARE, PREVENTATIVE CARE, AND IMMUNIZATIONS, AS WELL AS FREE PHARMACEUTICALS AND PHARMACEUTICAL ASSISTANCE PROGRAMS AND HEALTH EDUCATION. THESE CLINICS ARE STAFFED BY VOLUNTEER PHYSICIANS AND PHARMACISTS.

IN TOTAL, UPP PROVIDED COMMUNITY SERVICE PROGRAMS AND DONATIONS OF \$8,448,000 AND FUNDED OVER \$83,338,000 IN MEDICAL EDUCATION AND RESEARCH IN THE FISCAL YEAR ENDED JUNE 30, 2025.

IT IS THE MISSION OF UPMC COMMUNITY MEDICINE, INC. (CMI) TO PROVIDE HIGH-QUALITY AND ACCESSIBLE PATIENT CARE THROUGH PRIMARY CARE PHYSICIANS AND OTHER PHYSICIAN/MEDICAL SPECIALTIES AT UPMC AND ITS AFFILIATED HOSPITALS AND HEALTH CARE ENTITIES. CMI HAS APPROXIMATELY 650 PHYSICIANS AND PHYSICIAN EXTENDERS AT OVER 200 CLINICAL LOCATIONS.

THE CREATION OF CMI AS A MULTI-SPECIALTY PHYSICIAN PRACTICE PLAN HAS MADE OBTAINING MEDICAL CARE EASIER, MORE EFFICIENT, AND MORE EFFECTIVE FOR PATIENTS. THE VAST ARRAY OF MEDICAL PHYSICIANS AND SPECIALISTS ARE

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READILY ACCESSIBLE TO VIRTUALLY ALL PATIENTS WITHIN CMI'S SERVICE AREAS WHICH INCLUDE WESTERN PENNSYLVANIA AND THE TRI-STATE AREA. THE PHYSICIANS' SPECIALTIES AVAILABLE WITHIN CMI INCLUDE FAMILY MEDICINE, INTERNAL MEDICINE, GERIATRICS, ORTHOPEDICS, NEUROSURGERY, PEDIATRICS, OBSTETRICS/GYNECOLOGY, SURGERY, OPHTHALMOLOGY, NEUROLOGY, RHEUMATOLOGY, ENDOCRINOLOGY, AND PULMONOLOGY.

ONE OF THE PRIMARY MISSIONS OF CMI IS TO PROVIDE ACCESSIBLE, QUALITY MEDICAL CARE TO THE PUBLIC, WITHOUT REGARD FOR A PATIENT'S ABILITY TO PAY. THIS COMMITMENT IS EVIDENCED BY THE FACT THAT CMI PROVIDED CHARITY CARE OR OTHER UNCOMPENSATED CARE AND COMMUNITY SERVICES, AT A COST OF \$3,427,000 IN THE FISCAL YEAR ENDED JUNE 30, 2025. CMI ALSO SERVES TO ENHANCE THE QUALITY OF HEALTH CARE SERVICES PROVIDED BY THE HOSPITALS AND OTHER HEALTHCARE SUBSIDIARIES AND AFFILIATES OF UPMC. CMI PROVIDED CHARITABLE CONTRIBUTIONS AND SUBSIDIZED HEALTH SERVICES TO THE COMMUNITY AT A COST OF OVER \$97,597,000.

AS A PART OF ITS MISSION, CMI PHYSICIANS AND STAFF PROVIDE SERVICES TO THE COMMUNITY THROUGH VARIOUS PROGRAMS WHICH ARE TARGETED TO PATIENTS, PATIENTS' FAMILIES, AND THE COMMUNITY AT LARGE TO EDUCATE AND PROMOTE GOOD HEALTH. IN CONJUNCTION WITH OTHER UPMC ENTITIES AND COMMUNITY RESOURCES, CMI PHYSICIANS AND STAFF ROUTINELY PARTICIPATE IN VARIOUS SCREENING PROGRAMS FOR MEDICAL CONDITIONS SUCH AS OSTEOPOROSIS, HIGH BLOOD PRESSURE, DIABETES, CORONARY HEART FAILURE, AND BARIATRIC SURGERY. MANY CMI PHYSICIANS AND STAFF ALSO PARTICIPATE IN ONGOING PATIENT,

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FAMILY, COMMUNITY, AND PHYSICIAN EDUCATIONAL PROGRAMS RELATED TO THESE MEDICAL CONDITIONS AND A VARIETY OF OTHER MEDICAL TOPICS WHICH ARE DESIGNED TO IMPROVE THE QUALITY OF PATIENT CARE AND PATIENT OUTCOMES.

CMI PROVIDES PHYSICIAN AND MEDICAL SERVICES THROUGHOUT WESTERN PENNSYLVANIA AND THE TRI-STATE AREA IN BOTH URBAN AND RURAL SETTINGS, INCLUDING MANY UNDERSERVED AREAS. SOME OF THESE AREAS WOULD OTHERWISE HAVE NO OTHER PHYSICIAN PRESENCE.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

REGIONAL HEALTH SERVICES, INC. (RHS) OFFERS PHYSICIAN SERVICES SERVING MAINLY ERIE AND VENANGO COUNTY AND SURROUNDING COMMUNITIES. ITS MISSION IS TO SERVE PATIENTS AND THE COMMUNITY THROUGH CLINICAL EXCELLENCE, ALIGNMENT OF PHYSICIANS, AND OUTPATIENT SERVICES. RHS IS COMPRISED OF NETWORKS OF PHYSICIANS OFFERING A LARGE CONTINUUM OF SPECIALTY AND PRIMARY CARE SERVICES. THE PHYSICIANS PRACTICE IN MULTIPLE LOCATIONS AND PROVIDE SERVICES THAT INCLUDE PLASTIC SURGERY, EMERGENCY ROOM, INTENSIVISTS, HOSPITALISTS, GENERAL SURGERY, RADIOLOGY, NEUROSURGERY, PAIN MEDICINE, PULMONOLOGY, BARIATRIC SURGERY, UROLOGY, ORTHOPEDIC SURGERY, SPORTS MEDICINE, GASTROENTEROLOGY, AND INFECTIOUS DISEASE SERVICES, AS WELL AS OTHER SPECIALTIES, AND PRIMARY CARE.

RHS HAS 504 PHYSICIANS AND PHYSICIAN EXTENDERS. THEY HAD 499,991 PATIENT OFFICE VISITS IN FISCAL YEAR 2025. RHS PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, AT A COST OF APPROXIMATELY \$2,566,000 IN THE FISCAL YEAR ENDED JUNE 30, 2025, AS WELL AS \$17,844,000 IN SUBSIDIZED HEALTH

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SERVICES AND COMMUNITY PROGRAMS.

BUTLER HEALTH SYSTEM/UPMC MUSCULOSKELETAL JOINT VENTURE, INC. UPMC MULTISPECIALTY GROUP PROVIDES A BROAD SPECTRUM OF MUSCULOSKELETAL CARE TO THE COMMUNITIES IT SERVES. APPROXIMATELY 215 STAFF MEMBERS, INCLUDING PHYSICIANS AND ADVANCED PRACTICE PROVIDERS, SUPPORT THE GROUP'S ONGOING COMMITMENT TO PROVIDING QUALITY, COMMUNITY-BASED MUSCULOSKELETAL CARE TO PATIENTS IN NORTHERN ALLEGHENY, BUTLER AND CONTIGUOUS COUNTIES IN WESTERN PENNSYLVANIA, REGARDLESS OF A PATIENTS' ABILITY TO PAY. OVER \$257,000 WAS PROVIDED FOR CHARITY CARE AND UNCOMPENSATED CARE IN THE FISCAL YEAR ENDED JUNE 30, 2025. PHYSICIANS AND ADVANCED PRACTICE PROVIDERS PERFORMED SPORTS PHYSICALS AND CONCUSSION SCREENINGS. THEY ALSO REGULARLY VOLUNTEER THEIR TIME TO PARTICIPATE IN FREE COMMUNITY HEALTH EVENTS AND SERVE AS SPEAKERS AT FREE HEALTH EDUCATION PROGRAMS.

UPMC MEDICAL EDUCATION PRIMARY PURPOSE IS TO PROVIDE LEADERSHIP AND MANAGEMENT AND OVERSIGHT TO UPMC'S ALMOST 190 GRADUATE MEDICAL EDUCATION PROGRAMS.

UPMC MEDICAL EDUCATION DEVELOPS, FOCUSES, FACILITATES, AND IMPLEMENTS RELATIONSHIPS WITH THE UNIVERSITY OF PITTSBURGH AND MORE PARTICULARLY WITH THE SCHOOLS OF MEDICINE AND HEALTH SCIENCES. UPMC MEDICAL EDUCATION TRAINS APPROXIMATELY 2,100 RESIDENTS AND FELLOWS IN A MODEL OF PATIENT-CENTERED CARE TO BUILD A FOUNDATION OF SCIENTIFIC KNOWLEDGE, DESIRABLE OUTCOMES, AND HIGH-VALUE CARE. OUR ACCREDITED TRAINING PROGRAMS

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OFFER OPPORTUNITIES TO UPMC'S RESIDENTS AND FELLOWS, AS WELL AS OVER 400 RESIDENTS AND FELLOWS FROM NON-UPMC HOSPITALS, IN MORE THAN 25 CLINICAL DEPARTMENTS AFFILIATED WITH THE UNIVERSITY OF PITTSBURGH SCHOOL OF MEDICINE, THE UNIVERSITY OF PITTSBURGH DENTAL SCHOOL, THE UNIVERSITY OF PITTSBURGH SCHOOL OF PHARMACY AND THE VA PITTSBURGH HEALTHCARE SYSTEM TO SERVE OUR DIVERSE COMMUNITIES.

SUSQUEHANNA PHYSICIAN SERVICES IS COMPRISED OF A GROUP OF PRIMARY CARE AND SPECIALTY PHYSICIANS THAT PRIMARILY SERVE LYCOMING AND SURROUNDING COUNTIES. SUSQUEHANNA PHYSICIAN SERVICES HAS 540 PHYSICIANS AND PHYSICIAN EXTENDERS, ENCOMPASSES 3 MEDICAL GROUPS AT 113 CLINICAL LOCATIONS AND HAD OVER 492,792 PATIENT VISITS DURING FISCAL YEAR 2025. SUSQUEHANNA PHYSICIAN SERVICES TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY. DURING THE YEAR THEY PROVIDED COMMUNITY SERVICES INCLUDING FREE CARE AND COMMUNITY PROGRAMS AND SUBSIDIZED SERVICES AT A COST OF OVER \$2,547,000.

ERIE PHYSICIAN NETWORK-UPMC IS COMPRISED OF A GROUP OF PRIMARY CARE AND SPECIALTY PHYSICIANS THAT PRIMARILY SERVE ERIE AND SURROUNDING AREAS. ERIE PHYSICIAN NETWORK HAS 17 PHYSICIAN AND PHYSICIAN EXTENDERS, AT 5 CLINICAL LOCATIONS AND HAD OVER 24,721 PATIENT OFFICE VISITS DURING FISCAL YEAR 2025. ERIE PHYSICIAN NETWORK TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY. DURING THE YEAR THEY PROVIDED COMMUNITY SERVICES INCLUDING FREE CARE AND COMMUNITY PROGRAMS AND SUBSIDIZED SERVICES AT A COST OF OVER \$38,000.

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UPMC HOME HEALTHCARE OF WESTERN PENNSYLVANIA IS A GROUP OF ORGANIZATIONS PROVIDING HOME HEALTH CARE, FOR PATIENTS OF ALL AGES, IN THREE-QUARTERS OF THE COUNTIES ACROSS PENNSYLVANIA. THEIR MISSION IS TO IMPROVE THE QUALITY OF LIFE FOR THOSE THEY SERVE THROUGH CLINICAL EXCELLENCE, EXTRAORDINARY SERVICE AND COMPASSIONATE CARE, WHILE BEING RECOGNIZED AS THE LEADER IN HOME AND COMMUNITY-BASED CARE. THEY HAVE PROVIDED OVER 325,000 HOME VISITS THIS FISCAL YEAR. THE ORGANIZATION PROVIDES COMPLETE HOME HEALTH NURSING SERVICES, INCLUDING BEHAVIORAL HEALTH, IV THERAPY, MEDICAL-SURGICAL, OBSTETRICS, PEDIATRICS, AND REHABILITATION, AS WELL AS HOSPICE NURSING AND OTHER HOSPICE CARE SERVICES REGARDLESS OF A PATIENT'S ABILITY TO PAY. THEY PROVIDED UNCOMPENSATED CARE AND COMMUNITY PROGRAMS OF OVER \$671,000 DURING THE FISCAL YEAR.

UPMC HOME HEALTHCARE OF CENTRAL PENNSYLVANIA PROVIDES HOME HEALTH SERVICES TO CLIENTS FROM CENTRAL OFFICES IN THE PENNSYLVANIA COUNTIES OF BLAIR, BEDFORD, CAMBRIA, CENTRE, CLEARFIELD, DAUPHIN, INDIANA, HUNTINGDON, JUNIATA, MCKEAN, WARREN, FULTON, MIFFLIN, SOMERSET, LYCOMING, TIOGA, CLINTON, BRADFORD, POTTER, SULLIVAN, MONTOUR, COLUMBIA, NORTHUMBERLAND, UNION, AND SNYDER. ADDITIONAL SERVICES OFFERED INCLUDE HOSPICE SERVICES IN THE AFOREMENTIONED COUNTIES PLUS ALLEGHENY, BEAVER, BUTLER, LAWRENCE, AND MERCER COUNTIES, COMMUNITY HEALTH AND WELLNESS PROGRAMS WHICH INCLUDE NURSE FAMILY PARTNERSHIP AND WOMEN, INFANTS, CHILDREN (WIC) PROGRAMS IN THE CENTRAL, NORTH-CENTRAL, AND SOUTH-CENTRAL PENNSYLVANIA MARKET AREA. THEY PROVIDED OVER 300,000 HOME VISITS IN

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THE ORGANIZATION PROVIDES COMPLETE HOME HEALTH NURSING SERVICES, INCLUDING BEHAVIORAL HEALTH, IV THERAPY, MEDICAL-SURGICAL, OBSTETRICS, PEDIATRICS, AND REHABILITATION, AS WELL AS HOSPICE NURSING AND OTHER HOSPICE CARE SERVICES REGARDLESS OF A PATIENT'S ABILITY TO PAY. UPMC HOME HEALTHCARE OF CENTRAL PA OFFERED SEVERAL SUPPORT GROUPS SUCH AS, SUPPORT AND EDUCATION FOR GRIEVING CHILDREN, NAVIGATING LOSS AND GRIEF. THE HEALING PATCH IS A FREE PEER SUPPORT PROGRAM DESIGNED SPECIFICALLY FOR CHILDREN AND THEIR FAMILIES THAT HAVE SUFFERED THE LOSS OF A SIGNIFICANT PERSON. THE HEALING PATCH OFFERS A SAFE ENVIRONMENT WHERE CHILDREN AND THEIR FAMILIES CAN DISCOVER THEY ARE NOT ALONE IN THEIR GRIEF BY INTERACTING WITH OTHERS WHO HAVE ENCOUNTERED SIMILAR LOSSES. BY SHARING MEMORIES AND EXPERIENCES, FAMILIES DISCOVER THAT WHAT THEY ARE GOING THROUGH IS NORMAL AND THAT HOPE, AND HEALING IS POSSIBLE. CHILDREN, CAREGIVERS, AND COMMUNITY MEMBERS ARE SUPPORTED THROUGH THE FOLLOWING: FAMILY PEER SUPPORT GROUPS, IN-SCHOOL PEER SUPPORT GROUPS, GRIEF EDUCATION FOR STUDENTS, AND EDUCATIONAL IN-SERVICES/OUTREACH FOR SCHOOL OFFICIALS AND COMMUNITY MEMBERS AND A LENDING LIBRARY OF RESOURCES. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, UPMC HOME HEALTHCARE OF CENTRAL PENNSYLVANIA PROVIDED TOTAL UNCOMPENSATED CARE AND COMMUNITY BENEFIT PROGRAMS TOTALING APPROXIMATELY \$1,213,000.

HOME NURSING AGENCY AFFILIATES PROVIDES FACILITIES MANAGEMENT AND ADMINISTRATIVE SUPPORT FOR OWNED AND RENTED BUILDINGS OCCUPIED BY UPMC

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HOME HEALTHCARE OF CENTRAL PA AND HOME NURSING AGENCY FOUNDATION. HOME NURSING AGENCY AFFILIATES PARTICIPATED IN NUMEROUS COMMUNITY EVENTS INCLUDING CENCLEAR CHILD ABUSE SAFETY FAIR; HOLLIDAYSBURG FARMER'S MARKET WHERE THEY PROVIDED INFORMATION ON RECIPES, FOOD PREPARATION AND IN-SEASON PRODUCE; FOREVER MEDIA SAFE TRICK-OR-TREAT; YMCA EASTER BUNNY BRUNCH; MENTAL HEALTH AWARENESS AT ALTOONA CURVE; HOLLIDAYSBURG LIBRARY PRE-SCHOOL PLAYTIME TO DISCUSS WIC (WOMEN, INFANTS & CHILDREN) SERVICES; YMCA HEALTH KIDS DAY TO ENCOURAGE FITNESS AND HEALTHY EATING AND HANDED OUT 2,300 TO STUDENTS THAT ATTENDED ALTOONA CURVE BASEBALL GAMES.

HOME NURSING AGENCY FOUNDATION (FOUNDATION) BENEFITS AND SUPPORTS UPMC HOME HEALTHCARE OF CENTRAL PENNSYLVANIA AND ITS RELATED PROGRAMS AND SERVICES. THE FOUNDATION CONTRIBUTED TO UPMC HOME HEALTHCARE OF CENTRAL PENNSYLVANIA TO SUPPORT VARIOUS HOME HEALTH AND HOSPICE CHARITABLE CENTRAL PENNSYLVANIA NEEDS AS WELL AS HOSPICE CHARITABLE WESTERN PENNSYLVANIA NEEDS AND PROVIDED GRANTS AND CONTRIBUTIONS TO COMMUNITY HEALTH AND WELLNESS PROGRAMS TO FUND CLIENT SERVICES AND MUCH NEEDED PROGRAM SUPPLIES. ADDITIONALLY, THE FOUNDATION PROVIDES GRANTS AND CONTRIBUTIONS TO THE HEALING PATCH GRIEF PROGRAM.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

THE MISSION OF THE UPMC HORIZON COMMUNITY HEALTH FOUNDATION (FOUNDATION) IS A FEDERALLY TAX-EXEMPT SECTION 501(C)(3) NONPROFIT ORGANIZATION THAT RAISES, MANAGES, AND ALLOCATES FUNDS IN SUPPORT OF UPMC HORIZON AND COMMUNITY HEALTH WITHIN THE HOSPITAL'S SERVICE AREA. THE MISSION OF THE FOUNDATION IS TO DEVELOP THE FINANCIAL RESOURCES NEEDED TO ENHANCE HEALTH

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AND WELLNESS, AND SUPPORT HIGH-QUALITY, ACCESSIBLE HEALTH CARE IN THE COMMUNITY. THE FOUNDATION MAINTAINS A VARIETY OF FUNDS WHICH SUPPORT SPECIFIC AREAS OF COMMUNITY AND HOSPITAL HEALTH, INCLUDING BUT NOT LIMITED TO CANCER PATIENTS, COMMUNITY ACCESS TO CARE, HEALTHCARE EDUCATION, STAFF SUPPORT, AND THE MEDICAL EQUIPMENT RECYCLING PROGRAM, A MULTI-LOCATION INITIATIVE WHICH LOANS DURABLE MEDICAL EQUIPMENT, AT NO COST AND WITHOUT DISCRIMINATION, TO THOUSANDS OF AREA RESIDENTS EACH YEAR. THE FOUNDATION REGULARLY PROVIDES GRANTS TO UPMC HORIZON AND INDEPENDENT COMMUNITY ORGANIZATIONS FOR THE PURPOSE OF ADVANCING INITIATIVES WHICH IMPROVE LOCAL HEALTH. THE FOUNDATION IS SUPPORTED BY DONORS, GRANTMAKING ORGANIZATIONS, AND A BOARD OF DIRECTORS MADE UP OF COMMUNITY MEMBERS AND HOSPITAL STAFF WHO OVERSEE THE FOUNDATION'S OPERATIONS AND FINANCES.

UPMC WESTERN BEHAVIORAL HEALTH OF THE ALLEGHENIES (WBHA) WITH ALMOST 180 STAFF MEMBERS TODAY, BEGAN PROVIDING MENTAL HEALTH SERVICES IN BLAIR COUNTY OVER 45 YEARS AGO. DRUG & ALCOHOL SERVICES HAVE BEEN PROVIDED IN BLAIR COUNTY SINCE 1988. THE ADULT CENTER FOR EXCEPTIONAL LEARNING (ACEL) WAS ACQUIRED IN MARCH 1996. CHILDREN'S SERVICES INCLUDING CENTER FOR COUNSELING AND STUDENT ASSISTANCE PROGRAM (SAP) PROVIDE SERVICES IN 7 SCHOOL DISTRICTS THROUGH BLAIR AND CENTRE COUNTIES. WBHA ALSO PROVIDES A SCHOOL BASED PARTIAL HOSPITALIZATION PROGRAM IN THE STATE COLLEGE SCHOOL DISTRICT.

SINCE 1975 WBHA HAS BEEN OFFERING MENTAL HEALTH AND SUBSTANCE ABUSE

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OUTPATIENT COUNSELING IN CONJUNCTION WITH PSYCHOPHARMACOLOGY MANAGEMENT;
CASE MANAGEMENT; RESOURCE COORDINATION; PEER SUPPORT; WELLNESS COACHING;
STUDENT ASSISTANCE PROGRAM; LEXINGTON CLUBHOUSE; HOUSING PROGRAMS; AND
ADULT CENTER FOR EXCEPTIONAL LEARNING (INTELLECTUAL DISABILITY SERVICES).

OUR STAFF HAVE YEARS OF EXPERIENCE PROVIDING MENTAL HEALTH AND DRUG &
ALCOHOL SERVICES TO INDIVIDUALS IN OUR COMMUNITY.

WBHA HAS GROWN AND CONTINUES TO GROW SERVICES TO MEET THE GROWING NEEDS
OF OUR COMMUNITY.

WBHA ACTIVELY PARTICIPATES IN LOCAL ACTIVITIES AND SPONSORS MULTIPLE
INITIATIVES THROUGHOUT THE YEAR TO INCLUDE MENTAL HEALTH AWARENESS DAY,
SUICIDE PRESENTATION, ETC. WBHA HAS AND STATEWIDE INITIATIVES,
MAINTAINING A CONSTANT EMPHASIS ON EASY ACCESS AND QUALITY SERVICES FOR
THE PEOPLE IT SERVES.

AS A PART OF THE UPMC HEALTH SYSTEM AND WESTERN BEHAVIORAL HEALTH
NETWORK, WBHA PROVIDES A VARIETY OF COMMUNITY-BASED SERVICES INCLUDING
MENTAL AND BEHAVIORAL HEALTH TREATMENT AND CASE MANAGEMENT SERVICES,
DEVELOPMENTAL AND INTELLECTUAL DISABILITIES LIVING ARRANGEMENTS AND
VOCATIONAL TRAINING, AND SUBSTANCE USE TREATMENT AND PREVENTION. ITS
COMPREHENSIVE SERVICE CONTINUUM RANGES FROM OUTPATIENT THERAPY TO
RESIDENTIAL SERVICES, VOCATIONAL TRAINING, AND SUPPORTED EMPLOYMENT, TO
IN-SCHOOL PREVENTION AND TREATMENT PROGRAMS, TO PSYCHOSOCIAL
REHABILITATION. BHA WORKS WITH PEOPLE WHERE THEY ARE, GEOGRAPHICALLY AND

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EMOTIONALLY, SERVING, 2,350 INDIVIDUALS BETWEEN JULY 2024-JUNE 2025.

UPMC HOME CARE MANAGEMENT SERVICES OPERATES INNOVATIVE POST-ACUTE AND COMMUNITY-BASED PROGRAMS THAT PROVIDE HIGH-VALUE CARE WHILE IMPROVING THE PATIENT EXPERIENCE. THE MISSION IS TO TRANSFORM CLINICAL CARE AND CREATE COMMUNITY-BASED PROGRAMS TO BETTER SERVE OUR PATIENTS WHILE LOWERING THE COST OF CARE, WITH MANY OF THE PROGRAMS BEING NON-REVENUE GENERATING. THE PROGRAMS INCLUDE, BUT ARE NOT LIMITED TO, CHRONIC ILLNESS MANAGEMENT REMOTE PATIENT MONITORING, HOME ASSESSMENT TEAMS, AND POST-DISCHARGE CARE COORDINATION.

UPMC ALTOONA PARTNERSHIP FOR A HEALTHY COMMUNITY PROVIDES DENTAL CARE TO THE MEDICAL ASSISTANCE AND MEDICARE POPULATION. THE ORGANIZATION ALSO PROVIDES FREE AND REDUCED DENTAL CARE TO THE LOW-INCOME, UNINSURED DENTAL COMMUNITY IN BLAIR COUNTY AND SURROUNDING REGIONS. THE DENTAL ORGANIZATION ENGAGES WITH THE COMMUNITY BY PARTICIPATING IN MANY HEALTH FAIRS THROUGHOUT THE YEAR. THESE EVENTS PROVIDE AN OPPORTUNITY TO EDUCATE THE PUBLIC ABOUT DENTAL HEALTH AND ACCESS TO DENTAL CARE. ADDITIONALLY, THE DENTAL CLINIC WORKS CLOSELY WITH THE CARDIOLOGY AND ONCOLOGY DEPARTMENT WITHIN UPMC ALTOONA FOR COORDINATION OF CARE ON MUTUAL PATIENTS.

THE PROGRAMS CURRENTLY TREAT OVER 2,940 ACTIVE DENTAL PATIENTS, COMPRISED OF 70% MEDICAL ASSISTANCE PATIENTS, 25% MEDICARE PATIENTS, 5% COMMERCIAL PATIENTS AND 1% UNINSURED PATIENTS. THE DENTAL CLINIC OFFERS

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MANY DENTAL SERVICES, INCLUDING EXTRACTIONS, ROOT CANALS, RESTORATIONS,
CROWNS AND DENTURES.

UPMC ALTOONA FOUNDATION (FOUNDATION) PROVIDES A COMPREHENSIVE FUND AND
GRANT DEVELOPMENT PROGRAM TO SUPPORT THE EXEMPT MISSION OF UPMC ALTOONA.
THE FOUNDATION IS COMMITTED TO THE HEALTH AND WELL-BEING OF ITS
COMMUNITIES. THE FOUNDATION HAS HOSTED ITS ANNUAL WINTER SPLENDOR TO
RAISE FUNDS TO SUPPORT THE CONSTRUCTION OF A NEW BEHAVIORAL HEALTH POD IN
THE EMERGENCY DEPARTMENT TO HELP MEET THE GROWING NEEDS OF THOSE IN THE
COMMUNITY FIGHTING MENTAL ILLNESS.

THE FOUNDATION AND UPMC HILLMAN CANCER CENTER HAVE HOSTED AN ANNUAL
PICNIC FOR OVER 2,000 PARTICIPANTS INCLUDING CANCER PATIENTS, CANCER
SURVIVORS, FAMILY MEMBERS, SURVIVING FAMILY MEMBERS OF CANCER PATIENTS
AND CAREGIVERS. IN ADDITION, THE FOUNDATION SUPPLIED OVER \$200,000 TO
THE UPMC ALTOONA SURGERY CENTER TO UPGRADE ITS CLINICAL TECHNOLOGY FOR
THE TREATMENT OF CANCER. THESE INVESTMENTS INCLUDED A SENTIMAG SYSTEM
USED TO PLACE SURGICAL MARKERS PRIOR TO THE DAY OF SURGERY-STREAMLINING
PREPARATION AND MATCHING THE CAPABILITIES OF THE MAIN OPERATING ROOM; AN
XPERT 40 SPECIMEN RADIOGRAPH SYSTEM, BRINGING THE CENTER'S IMAGING
CAPABILITIES TO PARITY WITH THE HOSPITAL OR; AND A NEOPROBE SYSTEM, A
STANDARD-OF-CARE TOOL FOR SENTINEL LYMPH NODE MAPPING, ENABLING BOTH
SURGICAL VENUES TO OPERATE EFFICIENTLY WITHOUT SHARING EQUIPMENT.

THE UPMC ALTOONA FOUNDATION CONTINUES TO MAKE A POSITIVE IMPACT ON THE

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LIVES OF UPMC ALTOONA PATIENTS THROUGH THE GENEROUS CONTRIBUTIONS OF ITS DONORS. SOME OF THE EFFORTS RECENTLY FUNDED AND SUPPORTED BY THE FOUNDATION INCLUDE CONTINUED FUNDING FOR NURSING SCHOLARSHIPS FOR LOCAL STUDENTS PURSUING UNDERGRADUATE AND GRADUATE LEVEL NURSING EDUCATION, AS WELL AS FUNDING FOR NEW EQUIPMENT IN THE DENTAL CLINIC AT THE PARTNERSHIP FOR A HEALTH COMMUNITY, PROVIDING DENTAL CARE TO PATIENTS REGARDLESS OF THEIR ABILITY TO PAY, SUPPORTED MANY LOCAL EMERGENCY SERVICE PROVIDERS WITH FUNDS TO COVER THE COST OF MEDICAL SUPPLIES USED ON AMBULANCE CALLS AND EQUIPMENT TO TREAT PATIENTS AT THE SCENE OF MEDICAL EMERGENCIES.

THE FOUNDATION SUPPLIED STOP THE BLEED KITS AND PROVIDED TRAINING FOR THEIR USE TO A NUMBER OF LOCAL VENUES. THE STOP THE BLEED CAMPAIGN TRAINS BYSTANDERS TO RECOGNIZE A BLEEDING EMERGENCY AND HOW TO PROVIDE HELP BEFORE PROFESSIONALS ARRIVE. THE FOUNDATION ALSO PARTNERED WITH FAMILY SERVICES AND SHOEFLY TO RAISE MONEY TO PURCHASE WINTER BOOTS AND SOCKS FOR THOSE IN NEED, WHICH INCLUDED A FREE FOOT AND ANKLE EXAMINATION.

THE FOUNDATION ALSO AWARDED GRANTS FOR KANGOO DEVICES TO SUPPORT SAFE AND EFFICIENT INFANT TRANSPORT WITH THEIR MOTHERS IN AN AMBULANCE.

ADDITIONALLY, IT FUNDED THE ACQUISITION OF A TOPUS ULTRASOUND IMAGING MACHINE FOR UPMC ALTOONA STROKE CENTER AND PROVIDED NUMEROUS AEDS TO LOCAL SCHOOLS AND EMERGENCY RESPONDERS AS PART OF THE MINUTES MATTER CAMPAIGN.

THE FOUNDATION FURTHER SUPPORTED EMERGENCY CARE IN THE EMERGENCY

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DEPARTMENT BY FUNDING LUCAS MECHANICAL CPR DEVICES, ENHANCING CRITICAL
RESPONSE CAPABILITIES FOR CARDIAC PATIENTS.

THE CENTRAL PENNSYLVANIA MEDICAL FOUNDATION GENERATES FUNDS IN SUPPORT OF
UPMC ALTOONA AND ITS EXEMPT SUBSIDIARIES TO AID THESE SUPPORTED
ORGANIZATIONS IN PROVIDING COST EFFECTIVE HEALTHCARE AND SUPPORT SERVICES
AND PROGRAMS TO THE RESIDENTS OF CENTRAL PENNSYLVANIA.

UPMC COMMUNITY PROVIDER SERVICES' PROGRAMS INCLUDE LIVING-AT-HOME,
STAYING-AT-HOME, THE INSTITUTE FOR REHABILITATION AND RESEARCH, AND THE
INSTITUTE ON AGING. "COMMUNITY PROVIDER SERVICES" IS ALSO THE LEGAL
PARENT OF UPMC'S COMPANIES THAT CONSOLIDATE THE SYSTEM'S INTEREST IN
URGENT CARE, HOME HEALTH, HOSPICE, AND PHYSICAL REHABILITATION CENTERS.
CPS ALSO HOLDS UPMC'S INTEREST IN A DURABLE MEDICAL EQUIPMENT COMPANY,
CALLED MEDCARE.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

LIVING-AT-HOME AND STAYING-AT-HOME ARE COMMUNITY OUTREACH PROGRAMS THAT
PROVIDE ONGOING CASE MANAGEMENT SERVICES TO SENIOR CITIZENS. THE
INSTITUTE FOR REHABILITATION AND RESEARCH AND THE INSTITUTE ON AGING ARE
BOTH COLLABORATIVE PROGRAMS THAT ARE DESIGNED TO IMPROVE CLINICAL AND
RESEARCH CAPABILITIES TO IMPROVE QUALITY OF CARE AND OUTCOMES FOR
SPECIFIC POPULATIONS WITHIN WESTERN PENNSYLVANIA AND THE NATION. THE
AGING INSTITUTE'S INFORMATION AND REFERRAL LINE PROVIDES ACCESS TO
INFORMATION, SERVICES, AND RESOURCES FOR OLDER ADULTS, CAREGIVERS,
RESEARCHERS, EDUCATORS, AND PROFESSIONALS THROUGH ADVOCACY SERVICES

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FOCUSED ON GUIDANCE AND SUPPORT. EACH CALL IS HANDLED BY A SOCIAL WORKER WHO PROVIDES APPROPRIATE COUNSELING AND SUPPORT BASED ON A THOROUGH NEEDS ASSESSMENT. THE SOCIAL WORKER ALSO PROVIDES OUTREACH AND EDUCATION. THE LIVING-AT-HOME PROGRAM PROVIDES CHRONIC CARE MANAGEMENT TO HELP MAINTAIN INDEPENDENCE AND FUNCTION OF THE ELDERLY BY COORDINATING THEIR CARE, PROVIDING EDUCATION ABOUT THEIR CONDITIONS, AND ASSISTING THEM IN MANAGING THEIR MEDICATIONS AND OBTAINING SERVICES THROUGH COMMUNITY RESOURCES. THIS PROGRAM ALSO PROVIDES HEALTH SELF-MANAGEMENT INFORMATION THROUGH SENIOR CENTERS AND HOUSING. UPMC COMMUNITY PROVIDER SERVICES PROVIDED OVER \$1,626,000 IN SUPPORT FOR COMMUNITY BENEFIT PROGRAMS IN THE FISCAL YEAR ENDED JUNE 30, 2025.

UPMC COMMUNITY PROVIDER SERVICES LIVING-AT-HOME PROGRAM PROVIDES CARE COORDINATION FOR ONGOING IN-HOME CARE FOR OLDER ADULTS. THE PROGRAM MAKES REFERRALS FOR A RANGE OF SERVICES, TO HELP OLDER ADULTS LIVE INDEPENDENTLY FOR AS LONG AS POSSIBLE, SUCH AS: HOME DELIVERED MEALS, GROCERY SHOPPING, HOUSEKEEPING AND YARD WORK.

COMMUNITY CARE BEHAVIORAL HEALTH ORGANIZATION (COMMUNITY CARE) IS A BEHAVIORAL HEALTH MANAGED CARE ORGANIZATION BH-MCO WHICH EITHER MANAGES BEHAVIORAL HEALTH SERVICES OR PROVIDES NETWORK SUPPORT FOR APPROXIMATELY 2.0 MILLION MEMBERS WHOSE HEALTH COVERAGE IS SPONSORED THROUGH MEDICAID, MEDICARE, OR COMMERCIAL PLANS. COMMUNITY CARE'S MISSION IS TO IMPROVE THE HEALTH AND WELL-BEING OF THE COMMUNITY THROUGH THE DELIVERY OF CLINICALLY

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EFFECTIVE, COST-EFFICIENT, AND ACCESSIBLE BEHAVIORAL HEALTH SERVICES. IT SEEKS TO IMPROVE THE QUALITY OF SERVICES FOR MEMBERS THROUGH A STAKEHOLDER PARTNERSHIP FOCUSED ON OUTCOMES. COMMUNITY CARE BELIEVES THAT QUALITY IS MEASURED BY THE IMPROVED HEALTH OF ITS MEMBERS, WHICH TRANSLATES TO HIGHER FUNCTIONING IN THE COMMUNITY.

COMMUNITY CARE BELIEVES THAT THE HIGHEST QUALITY SERVICES ARE BEST PROVIDED THROUGH A NOT-FOR-PROFIT PARTNERSHIP WITH PUBLIC AGENCIES, EXPERIENCED LOCAL PROVIDERS, AND INVOLVED MEMBERS AND FAMILIES. COMMUNITY CARE'S PRIMARY OPERATIONS CONSIST OF MANAGING BEHAVIORAL HEALTH SERVICES, AS WELL AS TREATMENT FOR DRUG AND ALCOHOL ABUSE TO MEDICAL ASSISTANCE ENROLLEES UNDER CONTRACTS WITH 41 PENNSYLVANIA COUNTIES. AT THE END OF CALENDAR YEAR 2025, THERE WERE APPROXIMATELY 1.2 MILLION HEALTHCHOICES MEMBERS.

WITH A NETWORK OF APPROXIMATELY 10,000 BEHAVIORAL HEALTH CARE PROVIDERS, COMMUNITY CARE IS THE ONLY BH-MCO WITH CONTRACTS IN EVERY PENNSYLVANIA HEALTHCHOICES REGION SOUTHEAST, SOUTHWEST, NORTHEAST, NORTH CENTRAL, AND LEHIGH-CAPITAL. COMMUNITY CARE'S ACTIVITIES INCLUDE THE FULL RANGE OF SERVICES NECESSARY TO MANAGE EFFECTIVE TREATMENT FOR ITS BEHAVIORAL/MENTAL HEALTH ENROLLEES, INCLUDING CARE MANAGEMENT, TREATMENT COORDINATION WITH OTHER HEALTHCARE PROVIDERS, CLAIMS PROCESSING, AND QUALITY MANAGEMENT PURSUANT TO NATIONAL COMMITTEE FOR QUALITY ASSURANCE STANDARDS.

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COMMUNITY CARE HAS AN ARRANGEMENT WITH UPMC HEALTH PLAN TO PROVIDE ADMINISTRATIVE MANAGEMENT AND NETWORK FUNCTIONS FOR ITS MEMBERS. AT YEAR-END 2025, THERE WERE APPROXIMATELY 788,000 COMMERCIAL AND MEDICARE MEMBERS.

COMMUNITY CARE ALSO HAS A REINSURANCE ASSUMPTION AGREEMENT WITH UPMC HEALTH PLAN TO MANAGE THE UPMC FOR KIDS BUSINESS. UPMC FOR KIDS IS PENNSYLVANIA'S LARGEST AND FASTEST GROWING CHILDREN'S HEALTH INSURANCE PROGRAM CHIP PLAN. UPMC FOR KIDS OFFERS A WIDE RANGE OF BENEFITS, INCLUDING ACCESS TO PREVENTIVE CARE, DOCTOR VISITS, BEHAVIORAL HEALTH CARE, EMERGENCY DEPARTMENT CARE, PRESCRIPTION MEDICATION, AND DENTAL AND VISION CARE. CHIP IS A STATE AND FEDERALLY FUNDED PROGRAM THAT PROVIDES COMPREHENSIVE HEALTH INSURANCE TO UNINSURED CHILDREN AND TEENS UP TO AGE 19 WHO ARE NOT ELIGIBLE FOR MEDICAL ASSISTANCE. AT THE END OF 2025, UPMC FOR KIDS HAD APPROXIMATELY 38,000 MEMBERS IN ALL 67 COUNTIES THROUGHOUT PENNSYLVANIA.

UPMC FOR YOU IS A MANAGED CARE ORGANIZATION (MCO) LICENSED BY THE PENNSYLVANIA DEPARTMENT OF HEALTH AND THE PENNSYLVANIA INSURANCE DEPARTMENT. THROUGH CONTRACTS WITH THE DEPARTMENT OF HUMAN SERVICES, UPMC FOR YOU OFFERS PHYSICAL HEALTH COVERAGE TO ELIGIBLE MEDICAL ASSISTANCE RECIPIENTS LIVING IN ALL 67 COUNTIES IN PENNSYLVANIA. UPMC FOR YOU CONTINUES TO BE THE LARGEST AND FASTEST GROWING MEDICAL ASSISTANCE MCO IN SOUTHWESTERN AND NORTHWESTERN PENNSYLVANIA, SERVING 591,466 MEDICAL ASSISTANCE MEMBERS DURING FISCAL YEAR 2025. UPMC FOR YOU SERVES THOSE

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MEMBERS THAT MEET CERTAIN FEDERAL POVERTY GUIDELINES, INCLUDING THE AGED, BLIND, AND DISABLED, AND HAS BEEN VERY SUCCESSFUL IN MEETING THE NEEDS OF THIS UNIQUE POPULATION. BESIDES PHYSICAL HEALTH COVERAGE, UPMC FOR YOU OFFER TWO ADDITIONAL PRODUCT OFFERINGS. THEY ARE UPMC FOR LIFE DUAL, WHICH PROVIDES BENEFITS AND SERVICES FOR THOSE ELIGIBLE FOR BOTH MEDICARE AND MEDICAID AND UPMC COMMUNITY HEALTHCHOICES, WHICH PROVIDES BENEFITS AND SERVICES FOR THOSE DUALY ELIGIBLE FOR MEDICAID AND MEDICARE OR QUALIFY FOR MEDICAID LONG TERM SERVICES AND SUPPORTS. UPMC FOR YOU ASSISTED THE COMMUNITY WITH OVER \$2,600,000 IN CHARITABLE DONATIONS IN FISCAL YEAR 2025.

FOR THE THIRD YEAR IN A ROW, UPMC FOR YOU ACHIEVED A 4.5-STAR RATING, PUTTING US IN THE TOP FIVE PERCENT OF MEDICAID PLANS NATIONALLY. IT HAS CONTINUALLY BEEN RANKED AS ONE OF THE TOP MEDICAID PLANS IN PA FOR THE PAST 14 YEARS. UPMC FOR YOU REMAINS A HIGH PERFORMING HEALTH INSURANCE PLAN IN PENNSYLVANIA AND HAS AN OVERALL RATING OF 4.5 OUT OF 5 IN THE NATIONAL COMMITTEE FOR QUALITY ASSURANCE NCQA HEALTH PLAN RATING FOR 2024-2025.

THE CENTER FOR EMERGENCY MEDICINE OF WESTERN PENNSYLVANIA (THE CENTER) IS DEDICATED TO THE REDUCTION OF MORBIDITY AND MORTALITY BY PROVIDING QUALITY EDUCATION PROGRAMS AS WELL AS DESIGNING AND DEVELOPING QUALITY EDUCATIONAL PRODUCTS. THE CENTER WAS ORIGINALLY FORMED IN 1978 TO BRING THE CITY OF PITTSBURGH AND THE UNIVERSITY OF PITTSBURGH SCHOOL OF MEDICINE TOGETHER TO IMPROVE THE QUALITY AND DELIVERY OF EMERGENCY

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MEDICAL SERVICES IN PITTSBURGH. THE CENTER IS A MULTI-HOSPITAL CONSORTIUM DEDICATED TO THE ADVANCEMENT OF EMERGENCY MEDICINE THROUGH RESEARCH, EDUCATION, AIR MEDICAL TRANSPORT AND QUALITY CARE. CURRENTLY, THE CENTER PROVIDES MEDICAL DIRECTION FOR THE CITY OF PITTSBURGH BUREAU OF EMS.

AS A CONSORTIUM, THE CENTER FOR EMERGENCY MEDICINE IS A UNIQUE MODEL OF SUCCESS -- AN ADVANCED SYSTEM OF EMERGENCY TRANSPORT, CLINICAL CARE, AND EDUCATION AND RESEARCH. THE CENTER HAS BECOME THE WORLD'S LEADING INSTITUTE FOR THE ADVANCEMENT OF EMERGENCY MEDICINE RESEARCH AND EDUCATION, AND MOST IMPORTANTLY, PATIENT CARE. DURING FISCAL YEAR 2025, THE CENTER FOR EMERGENCY MEDICINE PROVIDED UNCOMPENSATED CARE AT A COST OF OVER \$34,765,000.

THE CENTER IS COMPRISED OF THREE DIVISIONS AND EMPLOYS MORE THAN 400 CLINICIANS, EDUCATORS AND RESEARCHERS THROUGHOUT PENNSYLVANIA, OHIO, MARYLAND, AND WASHINGTON DC.

STAT MEDEVAC IS WIDELY RECOGNIZED AS ONE OF THE PREMIER AIR MEDICAL AND CRITICAL CARE TRANSPORTATION SERVICES IN THE COUNTRY. IT CURRENTLY OPERATES 18 HELICOPTER BASES IN FOUR STATES. THE ORGANIZATION TRANSPORTS MORE THAN 12,000 CRITICAL PATIENTS A YEAR AND HAS FLOWN OVER 400,000 PATIENTS SINCE IT BEGAN OPERATIONS IN 1984.

THE CENTER'S OFFICE OF EDUCATION IS INTERNATIONALLY RECOGNIZED FOR ITS PREMIER PARAMEDIC AND EMT TRAINING PROGRAMS AND WORLD-RENOWNED FACILITY.

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EACH YEAR THEIR ACCREDITED PROGRAMS TRAIN HUNDREDS OF EMTS AND PARAMEDICS IN A VARIETY OF ORIGINAL AND CONTINUING EDUCATION PROGRAMS. SINCE 1994, THE VAST MAJORITY OF EMS PROVIDERS IN THE UNITED STATES HAVE BEEN TRAINED USING A NATIONAL STANDARD CURRICULUM DEVELOPED BY THEIR FACULTY.

THE CENTER FOR RESEARCH IN EMERGENCY IS THE NATION'S MOST PROLIFIC RESEARCH INSTITUTION IN THE WORLD FOR PREHOSPITAL CARE AND EMERGENCY MEDICINE RESEARCH. WITH SEVERAL HUNDRED PUBLICATIONS IN THE PAST 30 YEARS, STUDIES CONDUCTED BY THEIR RESEARCH FACILITY HAVE HAD A SIGNIFICANT IMPACT ON IMPROVING CARE DELIVERED TO PATIENTS BEFORE THEY REACH THE HOSPITAL. THEIR RESEARCH TEAM IS WORLD-RENOWNED FOR THEIR WORK HAVE RECEIVED DOZENS OF AWARDS FROM NATIONAL ASSOCIATIONS LIKE THE AMERICAN HEART ASSOCIATION FOR THEIR NUMEROUS AND VALUABLE CONTRIBUTIONS TO SCIENCE.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

SINCE 1993, SAFE HARBOR BEHAVIORAL HEALTH OF UPMC HAMOT (SAFE HARBOR) OFFERS OUTPATIENT BEHAVIORAL HEALTH SERVICES FOR PEOPLE IN ERIE COUNTY, AND IN THE REGION. SAFE HARBOR SERVES AS THE COUNTY'S CRISIS HOTLINE OPERATOR AND COMMUNITY CRISIS RESPONDER AND IS A 988 NATIONAL SUICIDE & CRISIS LIFELINE CENTER. SUPPORTED BY ALMOST 140 STAFF MEMBERS SAFE HARBOR IS COMMITTED TO PROVIDING QUALITY MENTAL HEALTH CARE. SAFE HARBOR SERVES ABOUT 9,700 INDIVIDUALS PER YEAR.

SAFE HARBOR OFFERS BEHAVIORAL HEALTH ASSISTANCE TO ADULTS AND CHILDREN USING THERAPY, PSYCHIATRIC SERVICES, AND NURSING SUPPORT. SAFE HARBOR HAS

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MULTIPLE PROGRAMS THAT ARE TAILORED TO FIT AN INDIVIDUAL AND HIS OR HER RECOVERY FROM A VARIETY OF MENTAL HEALTH CONCERNS SUCH AS: ANXIETY, DEPRESSION, ANGER MANAGEMENT, ATTENTION DEFICIT DISORDER ADD, ADHD, BEHAVIOR DISORDERS, BIPOLAR DISORDER, GRIEF AND LOSS, SUBSTANCE USE, MOOD DISORDERS, OBSESSIVE-COMPULSIVE DISORDER OCD, STRESS MANAGEMENT, SCHIZOPHRENIA, BORDERLINE PERSONALITY DISORDER, PARENTING OR OTHER FAMILY NEEDS, TRAUMA, AND ABUSE. A FIRST EPISODE PSYCHOSIS PROGRAM AND MANY SCHOOL-BASED SATELLITES ARE AMONG THE SPECIALIZED PROGRAMMING DESIGNED TO MEET UNIQUE NEEDS AND ENHANCE ACCESS.

OUTPATIENT, INTENSIVE OUTPATIENT, AND MEDICATION MANAGEMENT SERVICES ARE AVAILABLE FOR ADULTS AND ADOLESCENTS WITH SUBSTANCE USE DISORDER RELATED NEEDS. MEDICATIONS FOR OPIOID AND ALCOHOL USE DISORDER ARE AVAILABLE. THE ADDICTION MEDICINE SERVICES TEAM AT SAFE HARBOR ALSO PROVIDES A WARM HAND OFF PROGRAM FOR PATIENTS AT UPMC HAMOT HOSPITAL AND HAS A CERTIFIED RECOVERY SPECIALIST DEVOTED TO THE LAW ENFORCEMENT TREATMENT INITIATIVE IN ERIE COUNTY.

CRISIS SERVICES, ASSISTS INDIVIDUALS EXPERIENCING A CRISIS 24/7/365 THROUGH TELEPHONE, WALK-IN, OR MOBILE SUPPORT. EXAMPLES OF THE TYPES OF CRISES ARE THOUGHTS OF SUICIDE, UNCOMFORTABLE SYMPTOMS OF MENTAL ILLNESS, CO-OCCURRING SUBSTANCE USE, BEREAVEMENT, RELATIONSHIP DIFFICULTIES, EXPERIENCE OF TRAUMA, FAMILY CONCERNS, PARENTING NEEDS AND SITUATIONAL STRESS (FINANCIAL, JOB LOSS, HOMELESSNESS). PEER SERVICES ARE AVAILABLE THROUGH THE COUNTY'S WARMLINE, HOUSED AT CRISIS SERVICES. ADDITIONALLY,

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CRISIS SERVICES PROVIDES CO-RESPONSE WITH LOCAL LAW ENFORCEMENT,
INCLUDING TWO DEPARTMENTS THAT HAVE DEDICATED CRISIS STAFF.

SAFE HARBOR'S CRISIS RESIDENTIAL UNIT, AN 8-BED UNIT, IS A COMMUNITY
ALTERNATIVE TO INPATIENT MENTAL HEALTH TREATMENT AT THE HOSPITAL.
RESIDENTS MAY STAY UP TO FIVE DAYS AND RECEIVE 24-HOUR CARE INCLUDING
DAILY MEDICATION MANAGEMENT, AROUND THE CLOCK NURSING, DAILY THERAPY,
ACTIVITY, AND ACCESS TO A PEER SPECIALIST.

THE ORGANIZATION PROVIDES BLENDED CASE MANAGEMENT TO MEET THE NEEDS OF
INDIVIDUALS WITH SERIOUS MENTAL ILLNESS, WHO HAVE ADDITIONAL COMPLEX
NEEDS ACROSS MULTIPLE DOMAINS. SPECIALIZED CASE MANAGEMENT SERVICES ARE
PROVIDED BY CONTRACT TO ERIE'S PUBLIC SCHOOLS, WITH EMPHASIS ON
ADDRESSING PSYCHOSOCIAL BARRIERS THAT STUDENTS AND FAMILIES EXPERIENCE TO
PROMOTE SUCCESS IN THE EDUCATIONAL ENVIRONMENT.

OUTPATIENT PEER SERVICES ARE AVAILABLE THROUGH MENTAL HEALTH CERTIFIED
PEER SPECIALISTS AND RECOVERY SPECIALISTS, WHO HAVE LIVED EXPERIENCE WITH
SUBSTANCE USE RECOVERY.

SAFE HARBOR ALSO PARTNERS WITH A VARIETY OF GRANT PROJECTS TO ENHANCE
EDUCATION, ACCESS, PREVENTION, TREATMENT, AND RECOVERY RELATED RESOURCES
ACROSS A VARIETY OF DOMAINS. EXAMPLES INCLUDE PARTICIPATION AS A TRAINING
PARTNER IN THE UNIVERSITY OF PITTSBURGH'S PROGRAM EVALUATION AND RESEARCH
UNIT'S NWPA VETERAN SUICIDE PREVENTION PROGRAM AND SERVING AS THE
ORGANIZATION HOUSING THE PROJECT DIRECTOR IN MULTIPLE HAMOT HEALTH

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FOUNDATION GRANTS THROUGH HRSA'S RURAL COMMUNITY OPIOID RESPONSE PROGRAM.

SAFE HARBOR OFFERED EDUCATIONAL MATERIALS AND PRESENTATIONS INCLUDING MENTAL HEALTH AWARENESS; MENTAL HEALTH AND SUICIDE; SUICIDE PREVENTION GATEKEEPER TRAINING, CRISIS INTERVENTION, SUICIDE AND SUBSTANCE USE DISORDER; DRUG TRENDS; SCREENING, BRIEF INTERVENTION AND REFERRAL TO TREATMENT; AND AN ARRAY OF OTHER TOPICS. SAFE HARBOR PROVIDED TRAINING TO THE ERIE POLICE DEPARTMENT VISITED LOCAL SCHOOLS, CONTINUED TO LEAD THE ERIE COUNTY SUICIDE ADVISORY BOARD AT SAFE HARBOR AND HOSTED A LARGE SUICIDE PREVENTION CONFERENCE, AND PARTICIPATED IN THE ANNUAL AMERICAN FOUNDATION FOR SUICIDE PREVENTION/AWARENESS WALK AT PRESQUE ISLE. STAFF ATTENDED NUMEROUS HEALTH FAIR EVENTS AND PROVIDED INFORMATION ABOUT MENTAL HEALTH AND CRISIS SERVICES WITH THE COMMUNITY.

SAFE HARBOR REPRESENTATIVES PARTICIPATED IN A TABLING EVENT DURING THE OUT OF THE DARKNESS COMMUNITY WALK HELD AT PRESQUE ISLE'S ROTARY PAVILION. THE PURPOSE OF THE EVENT IT TO RAISE AWARENESS/FUNDS & PROVIDE SUPPORT TO THOSE IMPACTED BY SUICIDE. STAFF PROVIDED INFORMATION ABOUT LOCAL MENTAL HEALTH AND CRISIS SERVICES TO PARTICIPANTS OF THE EVENT. WE TABLED AT NUMEROUS OTHER EVENTS INCLUDING THE TRAIL OF TREATS, HAMOT HEALTH FOUNDATION LEADERSHIP EVENT; TRUNK OR TREAT; AND MINUTES MATTER EVENTS. ADDITIONALLY, STAFF DID DIRECT OUTREACH IN THE COMMUNITY TO DISTRIBUTE NALOXONE AND HARM REDUCTION SUPPLIES, INCLUDING TO BUSINESSES AND SOCIAL SERVICE AGENCIES. SAFE HARBOR CONTINUED TO PARTICIPATE IN THE

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PENNSYLVANIA OVERDOSE PREVENTION PROGRAM AS A RECOGNIZED ENTITY, AND STAFF PARTICIPATED IN MULTIPLE COMMUNITY INITIATIVES AND TASK FORCES, SUCH AS ERIE COALITION FOR A TRAUMA INFORMED COMMUNITY, THE CHILD ABUSE PREVENTION TASK FORCE, PURPLE ONE, AND IN BOARD SERVICE.

SINCE 1969, MON YOUGH COMMUNITY SERVICES, INC. (MYCS) HAS SERVED THE MEN, WOMEN, AND CHILDREN OF THE MCKEESPORT AND MON VALLEY AREAS. IT CONTINUES TO PROVIDE CRITICAL SERVICES TO THOSE WITH MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES, SUBSTANCE USE AND BEHAVIORAL HEALTH ISSUES, AND THOSE IN NEED OF TRAINING AND REHABILITATION PROGRAMS.

STARTING OUT AS A MENTAL HEALTH OUTPATIENT FACILITY WITH THREE EMPLOYEES, MYCS HAS SUCCESSFULLY GROWN AND ADAPTED TO MEET THE GROWING NEEDS OF A CHANGING COMMUNITY. TODAY, IT HAS A STAFF OF ALMOST 235 FULL-TIME EMPLOYEES AND IS POSITIONED AS ONE OF THE LARGEST EMPLOYERS IN MCKEESPORT AND SURROUNDING COMMUNITIES.

MYCS ACTIVELY PARTICIPATES IN LOCAL AND STATEWIDE INITIATIVES, MAINTAINING A CONSTANT EMPHASIS ON EASY ACCESS AND QUALITY SERVICES FOR THE PEOPLE IT SERVES. MYCS PROVIDES EXPERT COUNSELING AND RECOVERY-BASED PROGRAMS IN BEHAVIORAL HEALTH INCLUDING MENTAL HEALTH AND ADDICTION TREATMENT AND INTERVENTION AND INTELLECTUAL AND DEVELOPMENTAL DISABILITIES. MON YOUGH STRIVES TO MEET CLIENT NEEDS BY UTILIZING BOTH IN-PERSON AND VIDEO OPTIONS FOR SEVERAL SERVICE LINES.

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MON YOUGH COMMUNITY SERVICES EMPLOYEES INTERACT WITH AND SERVE NEARLY 3,000 INDIVIDUALS A YEAR WHO ARE STRUGGLING WITH A VARIETY OF ISSUES RANGING FROM MENTAL ILLNESS, ADDICTION, AND DEVELOPMENTAL CHALLENGES. WE MAINLY SERVE CLIENTS IN ALLEGHENY COUNTY BUT HAVE RECENTLY EXPANDED TO WESTMORELAND, FAYETTE AND WASHINGTON COUNTIES FOR THE FOSTER CARE SERVICE LINE.

AS A PART OF THE UPMC HEALTH SYSTEM, MYCS PROVIDES A VARIETY OF COMMUNITY-BASED SERVICES INCLUDING MENTAL AND BEHAVIORAL HEALTH TREATMENT AND CASE MANAGEMENT SERVICES, DEVELOPMENTAL AND INTELLECTUAL DISABILITIES LIVING ARRANGEMENTS AND VOCATIONAL TRAINING, AND SUBSTANCE USE TREATMENT AND PREVENTION. THE COMPREHENSIVE SERVICE CONTINUUM RANGES FROM OUTPATIENT THERAPY TO RESIDENTIAL SERVICES, VOCATIONAL TRAINING, AND SUPPORTED EMPLOYMENT, TO IN-SCHOOL PREVENTION AND TREATMENT PROGRAMS, TO PSYCHOSOCIAL REHABILITATION AND WORKS WITH PEOPLE WHERE THEY ARE, GEOGRAPHICALLY AND EMOTIONALLY.

THE SUSQUEHANNA HEALTH FOUNDATION (FOUNDATION) IS ORGANIZED AND OPERATED TO ASSIST ITS RELATED EXEMPT ORGANIZATION TO CARRY OUT ITS CHARITABLE HEALTH CARE MISSION. THESE RELATED EXEMPT ORGANIZATIONS INCLUDE UPMC WILLIAMSPORT, UPMC MUNCY, UPMC WELLSBORO, AND UPMC LOCK HAVEN. EVERY DOLLAR STAYS LOCAL TO PROVIDE LIFE-CHANGING MEDICINE IN THE SUSQUEHANNA COMMUNITY.

THE FOUNDATION MANAGES A FULL COMPLEMENT OF FUNDRAISING PROGRAMS

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INCLUDING ANNUAL CAMPAIGNS, MEMORIAL GIFTS, SPECIAL EVENTS, MAJOR GIFTS, CAPITAL CAMPAIGNS, AND PLANNED GIVING. PROGRAMS INCLUDE THE BENEVOLENT CARE FUND WHICH OFFERS EMERGENCY, SHORT-TERM FINANCIAL ASSISTANCE TO PATIENTS OF UPMC IN NORTH CENTRAL, WHO WOULD OTHERWISE HAVE NO SOURCE OF PAYMENT FOR PHYSICIAN PRESCRIBED MEDICATIONS, TRANSPORTATION, INFANT CARE NECESSITIES, MEDICAL EQUIPMENT, MEDICAL SUPPLIES, OR CO-PAYS. THE FOUNDATION HAS BEEN WORKING WITH LOCAL COMMUNITY ORGANIZATIONS TO HELP OFFSET THE COST OF AUTOMATED EXTERNAL DEFIBRILLATORS (AEDS) TO ENSURE MORE ARE AVAILABLE FOR THE COMMUNITY.

UPMC SUSQUEHANNA IS ORGANIZED AND OPERATED TO COORDINATE THE ACTIVITIES OF FEDERALLY TAX-EXEMPT SECTION 501(C) (3) SUPPORTED ORGANIZATIONS AS THEY PURSUE THEIR CHARITABLE, EDUCATIONAL, BENEVOLENT, AND OTHER PURPOSES RELATED TO HEALTH CARE, HEALTH EDUCATION AND TRAINING, HEALTH FACILITIES, AND SCIENTIFIC RESEARCH AND HEALTH. THE SUPPORTED ORGANIZATIONS INCLUDE UPMC WILLIAMSPORT, UPMC MUNCY, SUSQUEHANNA PHYSICIAN SERVICES, AND UPMC WELLSBORO.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

UPMC SUSQUEHANNA IS ALSO OPERATED TO ESTABLISH, SPONSOR, AND DEVELOP, DIRECTLY OR INDIRECTLY, FACILITIES AND PROGRAMS FOR THE ACCOMMODATION, CARE AND TREATMENT OF INDIVIDUALS SUFFERING FROM ILLNESS, INJURY, DISEASE, DISABILITY OR INFIRMITY, INCLUDING BUT NOT LIMITED TO HOSPITALS, NURSING HOMES, RESIDENTIAL FACILITIES FOR THE ELDERLY, LIFE CARE CENTERS, AMBULATORY MEDICAL TREATMENT FACILITIES, CLINICS, REHABILITATION CENTERS, ALCOHOLISM TREATMENT CENTERS, HOME HEALTH PROGRAMS, MENTAL HEALTH

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CENTERS, HOSPICE PROGRAMS, PHARMACIES, LABORATORIES, AND TRAINING AND RESEARCH FACILITIES.

CHILDREN'S ADVOCACY CENTER OF LAWRENCE COUNTY (CAC) IS A MULTI-PURPOSE, KID- AND FAMILY- FRIENDLY, PRIVATE NONPROFIT AGENCY. ITS MISSION IS TO STOP CHILD ABUSE AND INSPIRE HOPE THROUGH INTERVENTION, PREVENTION, EDUCATION, AND COMMUNITY OUTREACH. CAC WAS CREATED IN 1989 BY A GROUP OF PEOPLE WHO WERE CONCERNED ABOUT THE WELFARE OF ABUSED CHILDREN. IN 1996, IT PARTNERED WITH UPMC JAMESON. CAC OFFERS PROGRAMS THROUGHOUT LAWRENCE COUNTY WITH OFFICES IN NEW CASTLE AND ELLWOOD CITY. THE CENTER'S FOUR MAIN PRINCIPLES ARE PREVENTION, INTERVENTION, EDUCATION, AND OUTREACH. CAC IS FULLY ACCREDITED THROUGH THE NATIONAL CHILDREN'S ALLIANCE AND IS A PROUD MEMBER OF THE UNITED WAY OF LAWRENCE COUNTY.

THE CAC HAS BEEN AWARDED RE-ACCREDITATION BY THE NATIONAL CHILDREN'S ALLIANCE FOR ITS ONGOING DELIVERY OF HIGH QUALITY AND EFFECTIVE SERVICES TO CHILD ABUSE VICTIMS. NATIONAL CHILDREN'S ALLIANCE AWARDS VARIOUS LEVELS OF ACCREDITATION AND MEMBERSHIP TO CENTERS RESPONDING TO ALLEGATIONS OF CHILD ABUSE IN WAYS THAT ARE EFFECTIVE AND EFFICIENT, AND PUT THE NEEDS OF CHILD VICTIMS OF ABUSE FIRST. FOLLOWING AN EXTENSIVE APPLICATION AND SITE REVIEW PROCESS, ACCREDITATION IS THE HIGHEST LEVEL OF MEMBERSHIP AND DENOTES EXCELLENCE IN SERVICE PROVISION. THE CAC HAS BEEN PROVIDING CHILD ABUSE INTERVENTION AND PREVENTION SERVICES TO CHILDREN AND FAMILIES FOR 36 YEARS. LAST YEAR, 165 CHILDREN VISITED THE CAC FOR A CHILD ABUSE FORENSIC INTERVIEW. IN ADDITION, THE

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MULTIDISCIPLINARY TEAM REVIEWED 311 CHIDLINER CASES AND 89 CHILDREN
RECEIVED THERAPEUTIC SERVICES AT THE CENTER.

THE LICENSED THERAPISTS AT CAC PROVIDE CHILD-FRIENDLY, TRAUMA-FOCUSED
THERAPY TO CHILDREN AND THEIR SUPPORTIVE CAREGIVERS WHO HAVE SUFFERED
ABUSE, HAVE SPECIAL TRAINING IN TREATING CHILDREN FROM BIRTH TO AGE 18,
KNOW HOW TRAUMA IMPACTS A CHILD'S WELL-BEING AND USE EVIDENCE-BASED
TREATMENTS TO HELP WITH HEALING. THE GOALS OF ITS THERAPY SERVICES ARE TO
RESTORE A CHILD'S SENSE OF SAFETY, START THE HEALING PROCESS AND LESSEN
THE LONG-TERM EFFECTS OF ABUSE. CAC PROVIDES TREATMENTS THAT ADDRESS THE
IMPACT OF CHILD ABUSE AND INCLUDES TRAUMA-FOCUSED COGNITIVE BEHAVIORAL
THERAPY (TF-CBT), ALTERNATIVES TO FAMILIES COGNITIVE BEHAVIORAL THERAPY
(AF-CBT), AND EYE MOVEMENT DESENSITIZATION AND REPROCESSING (EMDR).

CAC OF LAWRENCE COUNTY'S EXPERT MULTI-DISCIPLINARY TEAM COMES FROM A WIDE
RANGE OF FIELDS AND INCLUDES REPRESENTATION FROM LAW ENFORCEMENT,
CHILDREN AND YOUTH SERVICES, MEDICAL FIELD, PROSECUTION, VICTIM ADVOCACY,
MENTAL HEALTH AND FORENSIC INTERVIEWERS.

AN ADVOCATE AT CAC PROVIDES AND ARRANGES SERVICES WITH FAMILIES AND
COMMUNITIES THAT PROMOTE STRENGTH, HEALTHY LIVING, AND OVERALL
WELL-BEING. THEY ACT AS A LIAISON BETWEEN FAMILIES, STAFF, AND LAW
ENFORCEMENT. THEY DO A NEEDS ASSESSMENT AND MENTAL HEALTH SCREENING ON
CHILDREN AND MAKE ANY REFERRALS AND PROVIDE RESOURCES.

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PREVENTION SERVICES FOR FAMILIES, BIRTH TO AGE 5 ARE PROVIDED THROUGH THE PARENTS AS TEACHERS AND EARLY HEAD START HOME VISITING PROGRAMS. FAMILY DEVELOPMENT SPECIALISTS MEET WITH FAMILIES EITHER WEEKLY OR BI-WEEKLY PROVIDING EDUCATION ON FAMILY HEALTH AND WELL-BEING, CHILD DEVELOPMENT, AND INTRODUCTION OF ACTIVITIES TO STRENGTHEN THE PARENT-CHILD RELATIONSHIP. THE PRIMARY GOAL IS TO STOP CHILD ABUSE AND TO HELP FAMILIES DEVELOP PROTECTIVE FACTORS THAT STRENGTHEN AND SUPPORT THEM, ESPECIALLY DURING CHALLENGING TIMES. LAST YEAR 158 FAMILIES AND OVER 195 CHILDREN UNDER AGE 5 RECEIVED HOME VISITING PREVENTION SERVICES. THE FATHERHOOD PROGRAM PROVIDED SERVICES TO AN ADDITIONAL 170 FATHERS. THESE SERVICES COMPRISE INDIVIDUAL AND GROUP MEETINGS AT THE AGENCY AS WELL AS COLLABORATIVE VENTURES IN THE COMMUNITY. THIS INCLUDES A MONTHLY PROGRAM FOR FATHERS AND THEIR CHILDREN IN THE LARGEST SCHOOL DISTRICT IN THE COUNTY, AT THE COUNTY JAIL, AND AT A MEN'S HALFWAY HOUSE FOR THOSE IN RECOVERY FROM SUBSTANCE ABUSE.

ALL SERVICES PROVIDED BY THE AGENCY ARE FREE AND CONFIDENTIAL.

THE UPMC JAMESON HEALTH CARE FOUNDATION (FOUNDATION) IS A FEDERALLY TAX-EXEMPT SECTION 501(C)(3) NONPROFIT ORGANIZATION THAT RAISES, MANAGES, AND ALLOCATES FUNDS IN SUPPORT OF UPMC JAMESON AND COMMUNITY HEALTH WITHIN THE HOSPITAL'S SERVICE AREA. THE MISSION OF THE FOUNDATION IS TO DEVELOP THE FINANCIAL RESOURCES NEEDED TO ENHANCE HEALTH AND WELLNESS, AND SUPPORT HIGH-QUALITY, ACCESSIBLE HEALTH CARE IN THE COMMUNITY. THE FOUNDATION HAS A VARIETY OF FUNDS WHICH SUPPORT SPECIFIC AREAS OF

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COMMUNITY AND HOSPITAL HEALTH, INCLUDING BUT NOT LIMITED TO CANCER PATIENTS, COMMUNITY ACCESS TO CARE, HEALTHCARE EDUCATION AND STAFF SUPPORT. THE FOUNDATION REGULARLY PROVIDES GRANTS TO UPMC JAMESON AND INDEPENDENT COMMUNITY ORGANIZATIONS FOR THE PURPOSE OF INITIATIVES WHICH IMPROVE LOCAL HEALTH. THE FOUNDATION IS SUPPORTED BY DONORS, GRANTMAKING ORGANIZATIONS, AND A BOARD OF DIRECTORS MADE UP OF COMMUNITY MEMBERS AND HOSPITAL STAFF WHO OVERSEE THE FOUNDATION'S OPERATIONS AND FINANCES.

TWIN LAKES CENTER, INC. (TWIN LAKES). SINCE 1983, TWIN LAKES HAS PROVIDED A WIDE RANGE OF TREATMENT OPTIONS FOR THOSE SUFFERING FROM ADDICTION. WITH A 64-BED COMBINED 3.7 WITHDRAWAL MANAGEMENT, AND 3.5 INPATIENT RESIDENTIAL TREATMENT FACILITY LOCATED IN SOMERSET, PA, TWIN LAKES IS THE PREMIER TREATMENT PROVIDER IN THE REGION. ASSESSMENTS AND PHYSICAL EVALUATIONS ARE OFFERED UPON ADMISSION. THE WITHDRAWAL MANAGEMENT PROGRAM OFFERS MEDICALLY SUPPORTED WITHDRAWAL SERVICES THAT INCLUDE PHARMACOLOGICAL AND COUNSELING SUPPORT, STAFFED BY MEDICAL PROFESSIONALS 24 HOURS A DAY. THE 3.5 INPATIENT RESIDENTIAL SERVICES, LOCATED ON THE SAME CAMPUS, OFFERS INDIVIDUAL, GROUP, AND FAMILY THERAPY ALONG WITH PHARMACOLOGICAL TREATMENT FOR ALCOHOL AND OPIOID USE DISORDERS. TREATMENT INTERVENTIONS ARE COGNITIVE BEHAVIORAL THERAPY DRIVEN WITH DIALECTICAL BEHAVIORAL THERAPY AND MOTIVATIONAL INTERVIEWING ALSO BEING UTILIZED. RESIDENTS PARTICIPATE IN NUTRITIONAL WELLNESS CLASSES, OPTIONAL SPIRITUALITY AND PHYSICAL HEALTH ACTIVITIES AS WELL AS ENGAGE IN PEER AND COMMUNITY-BASED SUPPORT. UPON DISCHARGE FROM RESIDENTIAL SERVICES, MANY INDIVIDUALS CHOOSE TO CONTINUE TREATMENT AT A TWIN LAKES OUTPATIENT SITE.

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TWIN LAKES OFFERS INTENSIVE OUTPATIENT (9-19 HOURS/WEEK) AND OUTPATIENT (UP TO 8 HOURS/WEEK) SERVICES THAT INCLUDE GROUP, INDIVIDUAL, AND FAMILY THERAPY FOR INDIVIDUALS SEEKING TREATMENT FOR SUBSTANCE USE DISORDERS. COGNITIVE BEHAVIORAL THERAPY, DIALECTICAL BEHAVIORAL THERAPY, TRAUMA INFORMED CARE, AND MOTIVATIONAL INTERVIEWING INTERVENTIONAL ARE UTILIZED. GROUPS FOR THOSE INVOLVED IN THE LEGAL SYSTEM AND OTHER SPECIALTY CARE GROUPS ARE PROVIDED. SUBSTANCE USE OUTPATIENT TREATMENT FACILITIES ARE LOCATED IN CAMBRIA AND BEDFORD COUNTIES. TWIN LAKES' SOMERSET OUTPATIENT FACILITY OFFERS TREATMENT FOR BOTH SUBSTANCE USE AND BEHAVIORAL HEALTH DISORDERS THROUGH ASSESSMENTS AND PSYCHIATRIC SERVICES.

THE PREVENTION AND EDUCATION PROGRAM AT TWIN LAKES OFFERS A WIDE ARRAY OF COMMUNITY SERVICES AND INTERVENTIONS. DRIVING UNDER THE INFLUENCE PROGRAMS INCLUDE COURT REPORTING NETWORK THAT ASSESSES AND PROVIDES A SUMMARY OF DRUG AND ALCOHOL HIGHWAY SAFETY HISTORY FOR THOSE CONVICTED OF DU, WHICH IS REQUIRED BY PENNSYLVANIA LAW, ALCOHOL HIGHWAY SAFETY SCHOOL, AND VICTIM IMPACT PANEL. SCHOOL BASED SERVICES INCLUDE BOTVIN LIFE SKILLS TRAINING GEARED TOWARDS PREVENTING SUBSTANCE USE AND VIOLENCE, HEALTHY ALTERNATIVES FOR LITTLE ONES, PROJECT TOWARDS NO DRUG ABUSE, EVERFI PROGRAMS, PROJECT STICKER SHOCK, RED RIBBON WEEK, AND STUDENTS AGAINST DRIVING DRUNK.

TWIN LAKES WORKS TO REMAIN A PREMIER SUBSTANCE USE AND PREVENTION PROVIDER IN THE REGION. TWIN LAKES SERVED 1,250 INDIVIDUALS DURING FISCAL YEAR 2025 AND EMPLOYED 78 FULL TIME EMPLOYEES.

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SUGARCREEK STATION WAS A LICENSED 148-BED MEDICARE/MEDICAID CERTIFIED SKILLED NURSING FACILITY THAT PROVIDED SKILLED AND INTERMEDIATE LONG-TERM CARE SERVICES TO RESIDENTS 24 HOURS A DAY. DURING THE FISCAL YEAR ENDED JUNE 30, 2024, SUGARCREEK WAS SOLD TO "S C PROP 1 LLC", A DELAWARE LIMITED LIABILITY COMPANY. THIS SALE INCLUDED THE LICENSE TO OPERATE, THE CLINICAL ACTIVITIES AND RECORDS, AND THE UNDERLYING PROPERTY. THERE WERE NOT MEDICAID SHORTFALLS TO REPORT DURING THE FISCAL YEAR ENDED 06/30/2025. S C PROP 1 LLC CONTINUES TO OPERATE THE FACILITY AS A SKILLED NURSING AND REHABILITATION COMPLEX WITH INDEPENDENT LIVING APARTMENTS FOR OLDER ADULTS.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

CRANBERRY PLACE IS LICENSED AS A CONTINUING CARE RETIREMENT COMMUNITY. AS SUCH, CRANBERRY PLACE OPERATES THE ENTIRE CONTINUUM OF SENIOR CARE-INDEPENDENT LIVING, PERSONAL CARE, AND SKILLED NURSING FACILITIES.

CRANBERRY PLACE'S SKILLED NURSING FACILITY IS A 150-BED RESIDENCE THAT OFFERS SKILLED NURSING SERVICES, REHABILITATIVE SERVICES, COMPREHENSIVE LONG-TERM CARE, AND HOSPICE CARE FOR THE TERMINALLY ILL AND HAS AN ON-SITE DIALYSIS CENTER. THIS FACILITY IS DUALY CERTIFIED BY MEDICARE AND MEDICAID. SPACIOUS GROUNDS, COURTYARDS, AND SINGLE LEVEL DESIGN ALLOWS FOR SAFE MOVEMENT THROUGHOUT THE RESIDENCE. THE CRANBERRY PLACE SKILLED NURSING SITE IS LOCATED ON THE CAMPUS OF UPMC PASSAVANT-CRANBERRY HOSPITAL OF CRANBERRY TOWNSHIP.

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CRANBERRY PLACE PROVIDES THE HIGHEST LEVEL OF SKILLED CARE, REGARDLESS OF A PATIENT'S ABILITY TO PAY. DURING THE FISCAL YEAR ENDED JUNE 30, 2025, CRANBERRY PLACE PROVIDED UNCOMPENSATED CARE INCLUDING MEDICAID SHORTFALL OF APPROXIMATELY \$6,648,000.

AS OF APRIL 1, 2024 CRANBERRY PLACE SOLD THEIR OPERATIONS TO AN OUTSIDE PARTY WHO WILL CONTINUE TO OPERATE THE FACILITIES IN THE SAME TAX EXEMPT MANNER AS WHEN OPERATED BY UPMC SENIOR COMMUNITIES.

THE HERITAGE SHADYSIDE WAS A 143-BED SKILLED NURSING FACILITY LOCATED IN THE SQUIRREL HILL AREA OF PITTSBURGH. DURING THE FISCAL YEAR ENDED 06/30/24, THE HERITAGE SHADYSIDE WAS SOLD TO "HER PROP 1 LLC", A DELAWARE LIMITED LIABILITY COMPANY. THE SALE INCLUDED THE LICENSE TO OPERATE, THE CLINICAL ACTIVITIES AND RECORDS, AND THE UNDERLYING PROPERTY. THERE WERE NOT MEDICAID SHORTFALLS TO REPORT DURING THE FISCAL YEAR ENDED 06/30/2025. HER PROP 1 LLC CONTINUES TO OPERATE THE FACILITY AS A SKILLED NURSING AND REHABILITATION FACILITY.

UPMC WASHINGTON IS A 278-BED ACUTE CARE GENERAL HOSPITAL LOCATED IN WASHINGTON, PENNSYLVANIA. FOUNDED IN 1897, THE HOSPITAL SERVES SURROUNDING COMMUNITIES WITH A TOTAL PATIENT DRAW OF MORE THAN 300,000 RESIDENTS ACROSS 63 ZIP CODES. ITS SERVICE AREA EXTENDS TO THE WESTERN AND SOUTHERN BORDERS OF PENNSYLVANIA.

THE HOSPITAL DELIVERS A BROAD RANGE OF CLINICAL SERVICES AND SPECIALTIES THAT BENEFIT THE COMMUNITY, INCLUDING CARDIOVASCULAR DIAGNOSTICS AND

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20-8295721

SURGERY, ORTHOPEDICS, NEUROSCIENCES, SURGICAL SERVICES, WOMEN'S HEALTH, CANCER CARE, GENERAL AND SPECIALTY OUTPATIENT PEDIATRIC SERVICES, HOSPICE CARE, REHABILITATION, ADVANCED DIAGNOSTIC IMAGING, AND A HIGH-VOLUME EMERGENCY DEPARTMENT. ADDITIONAL COMMUNITY-FOCUSED PROGRAMS INCLUDE, BUT ARE NOT LIMITED TO, A TEENAGE ABSTINENCE EDUCATION PROGRAM, A FAMILY PRACTICE RESIDENCY PROGRAM, A SCHOOL OF NURSING, AND THE OPERATION OF A COMMUNITY WELLNESS CENTER.

UPMC WASHINGTON IS COMMITTED TO PROVIDING EXCEPTIONAL HEALTH CARE TO ALL INDIVIDUALS, REGARDLESS OF THEIR ABILITY TO PAY. FOR THE FISCAL YEAR ENDING JUNE 30, 2025, THE HOSPITAL ADMITTED 9,319 PATIENTS, RECORDED 41,740 PATIENT DAYS, AND TREATED 27,308 EMERGENCY DEPARTMENT VISITS. DURING THE SAME PERIOD, THE HOSPITAL PROVIDED 253,023 OUTPATIENT VISITS AND PERFORMED 5,140 SURGERIES.

DURING THE FISCAL YEAR ENDED JUNE 30, 2025, UPMC WASHINGTON PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST EXCEEDING \$30,609,000.

COMMUNITY SUPPORT AND ENGAGEMENT HAVE LONG BEEN A PRIORITY FOR UPMC WASHINGTON. IN COMPLIANCE WITH INTERNAL REVENUE CODE SECTION 501(R), UPMC CONDUCTS COMMUNITY HEALTH NEEDS ASSESSMENTS (CHNAS) WITH INPUT FROM COMMUNITY STAKEHOLDERS AND PUBLIC HEALTH EXPERTS TO IDENTIFY KEY HEALTH NEEDS AND GUIDE IMPLEMENTATION STRATEGIES. THE HOSPITAL PROVIDES EXTENSIVE OUTREACH THROUGH HEALTH FAIRS, FREE HEALTH SCREENINGS, AND

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PARTICIPATION IN COMMUNITY EVENTS, INCLUDING DONATING STAFF TIME TO OPERATE FIRST AID TENTS AT LOCAL FESTIVALS. ADDITIONAL INITIATIVES INCLUDE A FREE CLOTHING CLOSET FOR PATIENTS DISCHARGED WITHOUT CLEAN CLOTHING, FREE YOGA CLASSES OFFERED AT THE WELLNESS CENTER, COORDINATION OF FREE DENTAL EXAMS AT PEDIATRIC OFFICES, AND PARTNERSHIPS WITH A LOCAL FEDERALLY QUALIFIED HEALTH CENTER (FQHC) TO OFFER FREE CLINICS AT NEIGHBORHOOD CHURCHES.

UPMC WASHINGTON HAS RECEIVED NUMEROUS AWARDS AND RECOGNITIONS FOR EXCELLENCE IN PATIENT CARE AND SAFETY. THE HOSPITAL HAS EARNED THE AMERICAN HEART ASSOCIATION/AMERICAN STROKE ASSOCIATION'S GET WITH THE GUIDELINES® - STROKE GOLD PLUS QUALITY ACHIEVEMENT AWARD FOR 16 CONSECUTIVE YEARS AND HAS RECEIVED AN "A" RATING FROM THE LEAPFROG GROUP FOR EXCELLENCE IN PATIENT SAFETY. ADDITIONAL HONORS INCLUDE THE 20 YEAR BRONZE ACCREDITATION MILESTONE FOR EXCELLENCE IN ECHOCARDIOGRAPHY AND THE HAP EXCELLENCE IN PATIENT SAFETY RECOGNITION.

BASED IN CARLISLE, PA, UPMC CARLISLE OFFERS A WIDE RANGE OF SERVICES INCLUDING, BUT NOT LIMITED TO, CLINICAL AND TECHNOLOGICAL INNOVATION, RESEARCH AND EDUCATION. UPMC CARLISLE IS A 166-BED FACILITY IN THE HEART OF CUMBERLAND COUNTY THAT PROVIDES CANCER CARE, EMERGENCY CARE, LABORATORY AND IMAGING SERVICES, A LEVEL II NICU, ORTHOPEDICS, REHABILITATION, SURGERY, AND A WOMEN'S CENTER. UPMC CARLISLE IS PROUD TO HAVE SERVED THE COMMUNITY SINCE 1913.

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FOR THE SECOND YEAR IN A ROW, UPMC CARLISLE WAS NAMED A TOP GENERAL HOSPITAL BY THE LEAPFROG GROUP, HIGHLIGHTING ITS NATIONALLY RECOGNIZED ACHIEVEMENTS IN PATIENT SAFETY AND QUALITY. THE LEAPFROG TOP HOSPITAL AWARD IS WIDELY ACKNOWLEDGED AS ONE OF THE MOST COMPETITIVE AWARDS AMERICAN HOSPITALS CAN RECEIVE. THE TOP HOSPITAL DESIGNATION IS BESTOWED BY THE LEAPFROG GROUP, A NATIONAL WATCHDOG ORGANIZATION OF EMPLOYERS AND OTHER PURCHASERS KNOWN AS THE TOUGHEST STANDARD-SETTERS FOR HEALTH CARE SAFETY AND QUALITY. UPMC CARLISLE ALSO EXPANDED ACCESS BY ADDING PAIN MANAGEMENT SERVICES IN 2024. UPMC CARLISLE RECEIVED MBSAQIP BARIATRIC ACCREDITATION.

UPMC CARLISLE EARNED THE PATHWAY TO EXCELLENCE DESIGNATION IN AUGUST 2023, RECOGNIZING ITS COMMITMENT TO A POSITIVE NURSING WORK ENVIRONMENT. THIS ACHIEVEMENT SUPPORTS NURSE RETENTION AND IMPROVED PATIENT CARE. IN ADDITION, UPMC CARLISLE RECEIVED MULTIPLE AMERICAN HEART ASSOCIATION GET WITH THE GUIDELINES AWARDS IN JULY 2023 FOR EXCELLENCE IN STROKE, HEART FAILURE, AND HEART ATTACK TREATMENT. THESE HONORS CONFIRM ADHERENCE TO TOP-TIER PROTOCOLS THAT LEAD TO BETTER PATIENT OUTCOMES.

UPMC CARLISLE WAS NAMED AMONG THE NATION'S BEST HOSPITALS FOR MATERNITY CARE BY U.S. NEWS & WORLD REPORT IN 2023-24. THIS RECOGNITION HIGHLIGHTS HIGH-QUALITY LABOR AND DELIVERY CARE IN A REGION WITH LIMITED MATERNITY SERVICES.

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UPMC CARLISLE CONTINUES TO ENHANCE ITS SPECIALIZED CARE OFFERINGS TO MEET THE EVOLVING NEEDS OF THE COMMUNITY. IN JULY 2023, UPMC EXPANDED ORTHOPAEDIC SERVICES WITH THE LAUNCH OF A NEW FRACTURE CARE PROGRAM AT CARLISLE, LED BY A TRAUMA SURGEON, TO IMPROVE ACCESS TO EXPERT ORTHOPAEDIC TRAUMA CARE. ADDITIONALLY, IN MAY 2024, UPMC MAGEE-WOMENS AT CARLISLE INTRODUCED THE NICVIEW WEBCAM SYSTEM, A TECHNOLOGICAL ADVANCEMENT THAT ALLOWS FAMILIES TO REMOTELY VIEW THEIR INFANTS IN THE NICU. THIS INNOVATION FOSTERS PATIENT-CENTERED CARE BY EASING THE STRESS OF SEPARATION FOR PARENTS AND ENHANCING CONNECTIVITY DURING CRITICAL MOMENTS.

UPMC CARLISLE HAS MORE THAN 760 EMPLOYEES AND OFFERS ACCESS TO OUTPATIENT LOCATIONS WHICH INCLUDE PRIMARY AND SPECIALTY CARE OFFICES, UPMC URGENT CARE CENTERS, AND UPMC HILLMAN CANCER CENTERS. DURING FISCAL YEAR 2025, UPMC CARLISLE ADMITTED MORE THAN 5,700 INPATIENTS, AND RECORDED MORE THAN 23,200 INPATIENT DAYS, 29,900 EMERGENCY ROOM VISITS, 156,400 OUTPATIENT VISITS, 6,300 SURGERIES, AND 790 BIRTHS/DELIVERIES.

UPMC CARLISLE PROVIDED SERVICES TO THE COMMUNITY THROUGH CHARITABLE DONATIONS, SUBSIDIZED HEALTH AND COMMUNITY PROGRAMS, OUTREACH PROGRAMS, HEALTH SCREENINGS, EDUCATIONAL CLASSES, AND VOLUNTEER SERVICES. UPMC CARLISLE PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST IN EXCESS OF \$17,472,000. THE COMMUNITIES SERVED BY UPMC CARLISLE ARE IN AN ECONOMICALLY

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DISTRESSED AND MEDICALLY UNDERSERVED AREA. IN THE YEAR ENDED JUNE 30,
2025, UPMC CARLISLE PROVIDED COMMUNITY SERVICE PROGRAMS AND OTHER
FUNDING AT A COST OF OVER \$990,000 AND FUNDING FOR EDUCATION AND
RESEARCH AT A COST OF APPROXIMATELY \$11,000.

COMMUNITY HEALTH IMPROVEMENT SERVICES

UPMC CARLISLE SERVES CUMBERLAND AND PERRY COUNTIES, TAKING HEALTH CARE
BEYOND THE DOORS OF ITS HOSPITALS, CLINICS, AND OFFICES, AND BRINGING
IT INTO THE REGION'S TOWNS, SCHOOLS, AND WORKPLACES. UPMC CARLISLE'S
CHARITABLE GIVING AND COMMUNITY INITIATIVES ARE MAKING A DIFFERENCE IN
THE HEALTH AND WELL-BEING OF OUR NEIGHBORS.

SUPPORTING AND SERVING THE COMMUNITY REMAINS A HIGH PRIORITY FOR UPMC
CARLISLE. UPMC CARLISLE CONDUCTED COMMUNITY HEALTH NEEDS ASSESSMENTS
CHNAS, IN COMPLIANCE WITH INTERNAL REVENUE CODE SECTION 501(R)
REQUIREMENTS. INCORPORATING INPUT FROM COMMUNITY STAKEHOLDERS AND
PUBLIC HEALTH EXPERTS, THESE ASSESSMENTS HELP IDENTIFY ACTIONS AND
CREATE IMPLEMENTATION PLANS TO IMPROVE COMMUNITY HEALTH.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

THE HOSPITAL IS MAKING MEASURABLE PROGRESS ON EACH OF ITS HEALTH
INITIATIVES, DEMONSTRATING ITS CONTINUED COMMITMENT TO IMPROVING
COMMUNITY HEALTH. WE ARE PROUD TO PROVIDE SERVICES THAT DIRECTLY
SUPPORT THE COMMUNITIES WE SERVE, AND TO COLLABORATE WITH AREA
BUSINESSES AND ORGANIZATIONS TO INCREASE AWARENESS ON ALL ASPECTS OF
HEALTH, INCLUDING OUR PRIORITIES OUTLINED IN EACH OF THE LOCALLY

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FOCUSED COMMUNITY HEALTH NEEDS ASSESSMENT PLANS.

FROM PUBLIC HEALTH AND WELLNESS INITIATIVES TO SCHOOL HEALTH
SCREENINGS, INSURANCE ENROLLMENT HELP, HOME-VISIT PROGRAMS, CHARITY
CARE, AND FREE HEALTH CLASSES, UPMC CARLISLE OFFERS A NUMBER OF
SERVICES TO BENEFIT THE COMMUNITY.

COMMUNITY LIFE TEAM'S MISSION IS TO PROVIDE COMMUNITY-BASED, EFFICIENT,
AND COST-EFFECTIVE EMERGENCY MEDICAL TRANSPORT SERVICES, PRE-HOSPITAL EMS
(EMERGENCY MEDICAL SERVICES) FOR THE RESIDENTS AND COMMUNITIES OF THE
CENTRAL PA REGION. COMMUNITY LIFE TEAM STRIVES TO BE THE PROVIDER OF
CHOICE FOR CONSUMERS, HEALTHCARE INSTITUTIONS, INSURERS, AND HEALTH
MAINTENANCE ORGANIZATIONS THROUGH A COMMITMENT TO CONSTANT QUALITY
IMPROVEMENT AND COST-EFFECTIVE SERVICE, MEETING THE NEEDS OF OUR
COMMUNITIES. UPMC COMMUNITY LIFE TEAM PROVIDED FREE CARE DURING THE YEAR
IN THE AMOUNT OF \$1,497,000.

COMMUNITY LIFE TEAM PROVIDED EMERGENCY MEDICAL SERVICES TO CENTRAL PA
RESIDENTS UPON REQUEST AND AS NEEDED INCLUDING BASIC AND ASSISTED LIFE
SUPPORT SERVICES FOR EMERGENCY AND NON-EMERGENCY CASES. TOTAL SERVICE
CALLS DURING FY 2025 WERE 64,285.

UPMC GREENE IS AN 18-BED ACUTE CARE GENERAL HOSPITAL LOCATED IN
WAYNESBURG, PENNSYLVANIA. THE HOSPITAL SERVES SURROUNDING COMMUNITIES
WITH A TOTAL PATIENT DRAW OF MORE THAN 34,000 RESIDENTS ACROSS 18 ZIP

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CODES. ITS SERVICE AREA EXTENDS TO THE WESTERN AND SOUTHERN BORDERS OF PENNSYLVANIA. THE HOSPITAL'S SERVICE AREA IS GEOGRAPHICALLY LARGE AND INCLUDES A SUBSTANTIAL RURAL POPULATION. SEVERAL COMMUNITIES WITHIN UPMC GREENE'S SERVICE AREA ARE DESIGNATED AS MEDICALLY UNDERSERVED AND/OR HEALTH CARE PROFESSIONAL SHORTAGE AREAS.

THE HOSPITAL SUPPORTS THE HEALTH OF THE COMMUNITY BY DELIVERING KEY SERVICES AND SPECIALTIES, INCLUDING EMERGENCY DEPARTMENT SERVICES, REHABILITATION, ADVANCED DIAGNOSTIC IMAGING, AND ADDITIONAL OUTPATIENT CARE OFFERINGS.

UPMC GREENE IS COMMITTED TO PROVIDING EXCEPTIONAL HEALTH CARE TO ALL INDIVIDUALS, REGARDLESS OF THEIR ABILITY TO PAY. FOR THE FISCAL YEAR ENDED JUNE 30, 2025, THE HOSPITAL ADMITTED 335 PATIENTS, RECORDED 1,345 PATIENT DAYS, AND TREATED 11,468 EMERGENCY DEPARTMENT VISITS. DURING THE SAME PERIOD, UPMC GREENE PROVIDED 18,214 OUTPATIENT VISITS.

DURING THE FISCAL YEAR ENDED JUNE 30, 2025, UPMC GREENE PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST EXCEEDING \$6,514,000.

COMMUNITY SUPPORT AND ENGAGEMENT HAVE LONG BEEN A PRIORITY FOR UPMC GREENE. IN COMPLIANCE WITH INTERNAL REVENUE CODE SECTION 501(R), UPMC CONDUCTS COMMUNITY HEALTH NEEDS ASSESSMENTS (CHNAS) WITH INPUT FROM COMMUNITY STAKEHOLDERS AND PUBLIC HEALTH EXPERTS TO IDENTIFY PRIORITY

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HEALTH NEEDS AND GUIDE IMPLEMENTATION STRATEGIES. UPMC GREENE PROVIDES EXTENSIVE COMMUNITY OUTREACH THROUGH HEALTH FAIRS, FREE HEALTH SCREENINGS, AND PARTICIPATION IN COMMUNITY EVENTS DESIGNED TO IMPROVE ACCESS TO CARE AND OVERALL COMMUNITY HEALTH.

UPMC HANOVER STRIVES BE THE PROVIDER OF CHOICE FOR HOSPITAL SUPPORTED ACUTE CARE, DIAGNOSTIC, THERAPEUTIC, REHABILITATIVE, AND WELLNESS SERVICES REQUIRED TO SUPPORT OUR NETWORK OF CARE.

UPMC HANOVER IS A FULL-SERVICE ACUTE CARE HOSPITAL WITH 100 LICENSED BEDS. UPMC HANOVER'S METICULOUS PURSUIT OF EXCEPTIONAL MEDICINE SPRINGS FROM OUR MISSION, VALUES, AND COMMITMENT TO PROVIDING HEALING AND COMPASSIONATE CARE TO THE PATIENTS AND FAMILIES IN THE COMMUNITY WE SERVE. SOME OF THE HOSPITAL'S MAIN SERVICES INCLUDE: EMERGENCY SERVICES, GENERAL SURGERY, PULMONARY AND SLEEP MEDICINE, UPMC HEART AND VASCULAR INSTITUTE, A MAMMOGRAPHY CENTER, AND WOMEN'S SERVICES.

UPMC HANOVER IS ACCREDITED BY THE JOINT COMMISSION, INCLUDING BEING A CERTIFIED PRIMARY STROKE CENTER. IN ADDITION, UPMC HANOVER HAS ACHIEVED THE STATUS OF BLUE DISTINCTION CENTER FOR MATERNITY CARE AND GET WITH THE GUIDELINES STROKE GOLD PLUS. SOME OF HOSPITAL'S MAIN SERVICES INCLUDE: EMERGENCY SERVICES, GENERAL SURGERY, PULMONARY AND SLEEP MEDICINE, UPMC HEART AND VASCULAR INSTITUTE, A MAMMOGRAPHY CENTER, AND WOMEN'S SERVICES.

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UPMC HANOVER EARNED THE AMERICAN NURSES CREDENTIALING CENTER (ANCC) PATHWAY TO EXCELLENCE PROGRAM RECOGNITION IN 2024, UPMC HANOVER, UPMC HARRISBURG, UPMC MEMORIAL, AND UPMC WEST SHORE EARNED AMERICAN COLLEGE OF CARDIOLOGY'S NCDR CHEST PAIN MI REGISTRY PLATINUM PERFORMANCE ACHIEVEMENT AWARD FOR 2024.

IN 2024, UPMC HANOVER IMPLEMENTED INTUITIVE ION ROBOT TECHNOLOGY FOR BRONCHOSCOPY PROCEDURES. IT ALSO BEGAN PROVIDING MANOMETRY PROCEDURES, CARDIAC MR PROCEDURES AND IT ESTABLISHED AMBULATORY HEART FAILURE CLINIC WITH NP AND ROTATION ONCE A MONTH.

UPMC HANOVER HAS MORE THAN 940 EMPLOYEES, OFFERS ACCESS TO OUTPATIENT LOCATIONS WHICH INCLUDE PRIMARY AND SPECIALTY CARE OFFICES, UPMC URGENT CARE CENTERS, AND UPMC HILLMAN CANCER CENTERS.

DURING FISCAL YEAR 2025, UPMC HANOVER ADMITTED MORE THAN 6,200 INPATIENTS, AND RECORDED MORE THAN 27,400 INPATIENT DAYS, 32,000 EMERGENCY ROOM VISITS, 193,100 OUTPATIENT VISITS, 4,300 SURGERIES, AND 400 BIRTHS/DELIVERIES.

UPMC HANOVER PROVIDED SERVICES TO THE COMMUNITY THROUGH CHARITABLE DONATIONS, SUBSIDIZED HEALTH AND COMMUNITY PROGRAMS, OUTREACH PROGRAMS, HEALTH SCREENINGS, EDUCATIONAL CLASSES, AND VOLUNTEER SERVICES. UPMC HANOVER PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST IN EXCESS OF \$32,122,000.THE

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COMMUNITIES SERVED BY UPMC HANOVER ARE IN AN ECONOMICALLY DISTRESSED AND
MEDICALLY UNDERSERVED AREA. IN THE YEAR ENDED JUNE 30, 2025, UPMC HANOVER
PROVIDED COMMUNITY SERVICE PROGRAMS AND OTHER FUNDING AT A COST OF OVER
\$747,000 AND FUNDING FOR EDUCATION AND
RESEARCH AT A COST OF APPROXIMATELY \$11,000.

UPMC HANOVER SERVES YORK AND ADAMS COUNTIES, TAKING HEALTH CARE BEYOND
THE DOORS OF ITS HOSPITALS, CLINICS, AND OFFICES, AND BRINGING IT INTO
THE REGION'S TOWNS, SCHOOLS, AND WORKPLACES. UPMC HANOVER'S CHARITABL
GIVING AND COMMUNITY INITIATIVES ARE MAKING A DIFFERENCE IN THE HEALTH
AND WELL-BEING OF OUR NEIGHBORS.

THE HOSPITAL IS MAKING MEASURABLE PROGRESS ON EACH OF ITS HEALTH
INITIATIVES, DEMONSTRATING ITS CONTINUED COMMITMENT TO IMPROVING
COMMUNITY HEALTH. WE ARE PROUD TO PROVIDE SERVICES THAT DIRECTLY
SUPPORT THE COMMUNITIES WE SERVE, AND TO COLLABORATE WITH AREA
BUSINESSES AND ORGANIZATIONS TO INCREASE AWARENESS ON ALL ASPECTS OF
HEALTH, INCLUDING OUR PRIORITIES OUTLINED IN EACH OF THE LOCALLY
FOCUSED COMMUNITY HEALTH NEEDS ASSESSMENT PLANS.

FROM PUBLIC HEALTH AND WELLNESS INITIATIVES TO SCHOOL HEALTH
SCREENINGS, INSURANCE ENROLLMENT HELP, HOME-VISIT PROGRAMS, CHARITY
CARE, AND FREE HEALTH CLASSES, UPMC HANOVER PROVIDES A NUMBER OF
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UPMC LITITZ IS A FULL-SERVICE COMMUNITY HOSPITAL WITH 148 BEDS THAT HAS BEEN SERVING LANCASTER COUNTY, PENNSYLVANIA SINCE ITS FOUNDING IN 1927. THE SCENIC CAMPUS IN LITITZ OFFERS PRIMARY MEDICAL CARE, A GRADUATE MEDICAL EDUCATION RESIDENCY PROGRAM, AND A BROAD RANGE OF SPECIALTY HEALTH CARE SERVICES THAT INCLUDE: ORTHOPEDICS, PLASTIC AND RECONSTRUCTIVE SURGERY, INFUSION AND ONCOLOGY CARE, UPMC LITITZ WOMEN'S PLACE - A DESIGNATED BABY-FRIENDLY HOSPITAL SERVING LANCASTER COUNTY AND SURROUNDING COMMUNITIES PROVIDING THE BEST FAMILY-CENTERED CARE, AND HEART AND VASCULAR.

UPMC LITITZ WAS RECERTIFIED AS PRIMARY STROKE CENTER IN 2024 AND RECEIVED UPMC HEALTH PLAN HIP AND KNEE JOINT REPLACEMENT SURGERY CENTERS OF EXCELLENCE DESIGNATION. ADDITIONALLY, UPMC LITITZ EARNED THEIR FIRST PATHWAY TO EXCELLENCE DESIGNATION FROM AMERICAN NURSES CREDENTIALING CENTER IN 2024.

UPMC LITITZ HAS MORE THAN 560 EMPLOYEES AND OFFERS ACCESS TO OUTPATIENT LOCATIONS WHICH INCLUDE PRIMARY AND SPECIALTY CARE OFFICES, UPMC URGENT CARE CENTERS, AND UPMC HILLMAN CANCER CENTERS.

DURING FISCAL YEAR 2025, UPMC LITITZ ADMITTED MORE THAN 3,700 INPATIENTS, AND RECORDED MORE THAN 12,000 INPATIENT DAYS, 20,000 EMERGENCY ROOM VISITS, 118,400 OUTPATIENT VISITS, 4,000 SURGERIES, AND 1,100 BIRTHS/DELIVERIES. UPMC LITITZ PROVIDED SERVICES TO THE COMMUNITY THROUGH CHARITABLE DONATIONS, SUBSIDIZED HEALTH AND COMMUNITY PROGRAMS, OUTREACH PROGRAMS,

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HEALTH SCREENINGS, EDUCATIONAL CLASSES, AND VOLUNTEER SERVICES.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

UPMC LITITZ TREATS ALL PATIENTS WITHOUT REGARD TO THEIR ABILITY TO PAY.

UPMC

LITITZ PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE, INCLUDING
MEDICAID AND MEDICARE SHORTFALLS, AT A COST IN EXCESS OF \$17,876,000.

THE COMMUNITIES SERVED BY UPMC LITITZ ARE IN AN ECONOMICALLY DISTRESSED
AND MEDICALLY UNDERSERVED AREA. IN THE YEAR ENDED JUNE 30, 2025, UPMC
LITITZ PROVIDED COMMUNITY SERVICE PROGRAMS AND OTHER FUNDING AT A COST
OF OVER \$1,143,000.

UPMC LITITZ SERVES LANCASTER COUNTY, TAKING HEALTH CARE BEYOND THE
DOORS OF ITS HOSPITALS, CLINICS, AND OFFICES, AND BRINGING IT INTO THE
REGION'S TOWNS, SCHOOLS, AND WORKPLACES. UPMC LITITZ'S CHARITABLE
GIVING AND COMMUNITY INITIATIVES ARE MAKING A DIFFERENCE IN THE HEALTH
AND WELL-BEING OF OUR NEIGHBORS.

SUPPORTING AND SERVING THE COMMUNITY REMAINS A HIGH PRIORITY FOR UPMC
LITITZ. UPMC LITITZ CONDUCTED COMMUNITY HEALTH NEEDS ASSESSMENTS CHNAS,
IN COMPLIANCE WITH INTERNAL REVENUE CODE SECTION 501(R) REQUIREMENTS.
INCORPORATING INPUT FROM COMMUNITY STAKEHOLDERS AND PUBLIC HEALTH
EXPERTS, THESE ASSESSMENTS HELP IDENTIFY ACTIONS AND CREATE
IMPLEMENTATION PLANS TO IMPROVE COMMUNITY HEALTH.

THE HOSPITAL IS MAKING MEASURABLE PROGRESS ON EACH OF ITS HEALTH
INITIATIVES, DEMONSTRATING ITS CONTINUED COMMITMENT TO IMPROVING

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COMMUNITY HEALTH. WE ARE PROUD TO PROVIDE SERVICES THAT DIRECTLY
SUPPORT THE COMMUNITIES WE SERVE, AND TO COLLABORATE WITH AREA
BUSINESSES AND ORGANIZATIONS TO INCREASE AWARENESS ON ALL ASPECTS OF
HEALTH, INCLUDING OUR PRIORITIES OUTLINED IN EACH OF THE LOCALLY
FOCUSED COMMUNITY HEALTH NEEDS ASSESSMENT PLANS.

FROM PUBLIC HEALTH AND WELLNESS INITIATIVES TO SCHOOL HEALTH
SCREENINGS, INSURANCE ENROLLMENT HELP, HOME-VISIT PROGRAMS, CHARITY
CARE, AND FREE HEALTH CLASSES, UPMC LITITZ PROVIDES A NUMBER OF
SERVICES TO BENEFIT THE COMMUNITY.

UPMC MEMORIAL BASED IN MANCHESTER TOWNSHIP, YORK, PA, IS A
STATE-OF-THE-ART 104 BED AND PRIVATE ROOM IN A MODERN FIVE-LEVEL DESIGN.

UPMC MEMORIAL FEATURES:

-WORLD-CLASS CARDIOLOGY AND VASCULAR SERVICES WITH THE UPMC HEART AND
VASCULAR INSTITUTE.

-A COMPREHENSIVE REFLUX PROGRAM TO TREAT PATIENTS SUFFERING WITH
GASTROESOPHAGEAL REFLUX DISEASE (GERD).

-THE REGION'S LEADING LABOR AND DELIVERY SERVICES WITH A LEVEL II
NEONATAL INTENSIVE CARE UNIT (OPENED IN FEBRUARY 2020).

-ACUTE AND EMERGENCY MEDICAL CARE

-SURGICAL SERVICES.

NEXT TO THE HOSPITAL IS THE FIVE-LEVEL OUTPATIENT SERVICES BUILDING

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FEATURING:

- UPMC HILLMAN CANCER CENTER
- AMBULATORY SURGERY
- OUTPATIENT IMAGING
- WOMEN'S IMAGING SUITE
- SLEEP LAB
- INFUSION CENTER
- CARDIAC REHABILITATION

U.S. NEWS & WORLD REPORT NAMED UPMC MAGEE-WOMENS AT UPMC MEMORIAL AS A 2025 HIGH PERFORMING HOSPITALS FOR MATERNITY CARE. ADDITIONALLY, UPMC MEMORIAL EARNED AMERICAN COLLEGE OF CARDIOLOGY'S NCDR CHEST PAIN-MI REGISTRY PLATINUM PERFORMANCE ACHIEVEMENT AWARD FOR 2024.

IN 2024, UPMC MEMORIAL CONTINUED TO INCREASE ACCESS TO CARE. IT ADDED A XI DAVINCI ROBOT AT UPMC LEADER ASC. UPMC CENTRAL PA WEIGHT MANAGEMENT SERVICE ALSO STARTED LOW ACUITY BARIATRIC SURGERY AT UPMC MEMORIAL.

UPMC HEART AND VASCULAR INSTITUTE SUCCESSFULLY INCREASED ACCESS FOR CARDIAC DIAGNOSTIC TESTING AND EXPANDED ACCESS BY LAUNCHING A CARDIAC SURGERY SATELLITE CLINIC AT UPMC MEMORIAL. ADDITIONALLY, UPMC MEMORIAL SLEEP CENTER EXPANDED TO INCLUDE PEDIATRIC SERVICES.

UPMC MEMORIAL HAS MORE THAN 960 EMPLOYEES AND OFFERS ACCESS TO OUTPATIENT LOCATIONS WHICH INCLUDE PRIMARY AND SPECIALTY CARE OFFICES,

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UPMC URGENT CARE CENTERS, AND UPMC HILLMAN CANCER CENTERS.

DURING FISCAL YEAR 2025 UPMC MEMORIAL ADMITTED

6,400 INPATIENTS AND RECORDED MORE THAN 30,100 INPATIENT DAYS, 36,100

EMERGENCY ROOM VISITS, 170,700 OUTPATIENT VISITS, 11,100 SURGERIES, AND

470 BIRTHS/DELIVERIES.

UPMC MEMORIAL PROVIDED SERVICES TO THE COMMUNITY THROUGH CHARITABLE

DONATIONS, SUBSIDIZED HEALTH AND COMMUNITY PROGRAMS, OUTREACH PROGRAMS,

HEALTH SCREENINGS, EDUCATIONAL CLASSES, AND VOLUNTEER SERVICES.

UPMC MEMORIAL PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE,

INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST IN EXCESS OF

\$22,100,000. THE COMMUNITIES SERVED BY UPMC MEMORIAL ARE IN AN

ECONOMICALLY DISTRESSED AND MEDICALLY UNDERSERVED AREA. IN THE YEAR

ENDED JUNE 30, 2025, UPMC MEMORIAL PROVIDED COMMUNITY SERVICE PROGRAMS

AND OTHER FUNDING AT A COST OF OVER \$2,494,000 AND FUNDING FOR

EDUCATION AND RESEARCH AT A COST OF APPROXIMATELY \$17,000.

COMMUNITY HEALTH IMPROVEMENT SERVICES:

UPMC MEMORIAL SERVES YORK COUNTY, TAKING HEALTH CARE BEYOND THE DOORS

OF ITS HOSPITALS, CLINICS, AND OFFICES, AND BRINGING IT INTO THE

REGION'S TOWNS, SCHOOLS, AND WORKPLACES. UPMC MEMORIAL'S CHARITABLE

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SUPPORTING AND SERVING THE COMMUNITY REMAINS A HIGH PRIORITY FOR UPMC MEMORIAL. UPMC MEMORIAL CONDUCTED COMMUNITY HEALTH NEEDS ASSESSMENTS CHNAS, IN COMPLIANCE WITH INTERNAL REVENUE CODE SECTION 501(R) REQUIREMENTS. INCORPORATING INPUT FROM COMMUNITY STAKEHOLDERS AND PUBLIC HEALTH EXPERTS, THESE ASSESSMENTS HELP IDENTIFY ACTIONS AND CREATE IMPLEMENTATION PLANS TO IMPROVE COMMUNITY HEALTH.

THE HOSPITAL IS MAKING MEASURABLE PROGRESS ON EACH OF ITS HEALTH INITIATIVES, DEMONSTRATING ITS CONTINUED COMMITMENT TO IMPROVING COMMUNITY HEALTH. WE ARE PROUD TO PROVIDE SERVICES THAT DIRECTLY SUPPORT THE COMMUNITIES WE SERVE, AND TO COLLABORATE WITH AREA BUSINESSES AND ORGANIZATIONS TO INCREASE AWARENESS ON ALL ASPECTS OF HEALTH, INCLUDING OUR PRIORITIES OUTLINED IN EACH OF THE LOCALLY FOCUSED COMMUNITY HEALTH NEEDS ASSESSMENT PLANS.

FROM PUBLIC HEALTH AND WELLNESS INITIATIVES TO SCHOOL HEALTH SCREENINGS, INSURANCE ENROLLMENT HELP, HOME-VISIT PROGRAMS, CHARITY CARE, AND FREE HEALTH CLASSES, UPMC MEMORIAL PROVIDES BENEFITS TO THE COMMUNITY.

UPMC PINNACLE FOUNDATION (THE FOUNDATION) IS AN ORGANIZATION THAT ENGAGES IN INVESTMENT AND FUNDRAISING ACTIVITIES FOR THE BENEFIT OF RELATED TAX-EXEMPT ORGANIZATIONS. THROUGH INVESTMENT AND OFUNDRAISING ACTIVITIES, UPMC PINNACLE FOUNDATION SUPPORTS A WIDE SPECTRUM OF HEALTH CARE AND WELLNESS SERVICES DESIGNED TO IMPROVE ACCESS TO CARE, REDUCE BARRIERS TO TREATMENT AND IMPROVE OVERALL HEALTH AND QUALITY OF LIFE FOR THE REGION. FOUNDATION ALSO FUNDS SUPPORT AND UNDER-GIRD TECHNOLOGICAL INNOVATION AND

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DIRECTLY IMPACTS THE MANY NEEDS OF VULNERABLE, UNINSURED AND UNDERINSURED POPULATIONS.

WITH MORE THAN 200 DIFFERENT FUNDS THAT BENEFIT THE HOSPITALS AS WELL AS THE COMMUNITY, THE UPMC PINNACLE FOUNDATION INVESTS LOCALLY IN THE RESOURCES AND PEOPLE WHO CONTINUALLY MAKE THE LIFE-CHANGING MEDICINE OF UPMC IN CENTRAL PA A REALITY. ALL MONEY RAISED BY UPMC PINNACLE FOUNDATION REMAINS IN CENTRAL PENNSYLVANIA TO SUPPORT PROGRAMS AND SERVICES AT UPMC IN CENTRAL PA. THE FOUNDATION HAS IDENTIFIED THREE KEY PILLARS THAT ADDRESS THE MOST URGENT NEEDS OF THE CENTRAL PA. HOSPITALS, PATIENTS, AND COMMUNITY:

PATIENT AND COMMUNITY SUPPORT, HEALTH AND WELLNESS, AND WORKFORCE DEVELOPMENT. THESE EFFORTS TOTALED MORE THAN \$2,407,000 IN FY 2025.

FUNDS TO SUPPORT PATIENT AND COMMUNITY NEEDS COVERED EXPENSES SUCH AS PATIENT TRANSPORTATION, MEDICATIONS, RENT, MORTGAGE, UTILITIES, INSURANCE CO-PAYS, GENETIC COUNSELING AND PALLIATIVE CARE FOR PATIENTS LACKING THE RESOURCES TO COVER THESE COSTS.

THE FOUNDATION PROVIDED FUNDING FOR VARIOUS HEALTH AND WELLNESS ACTIVITIES LIKE MUSIC AND ART THERAPY PROGRAMS, SPIRITUAL CARE, PEDIATRIC REHABILITATION EQUIPMENT, INTEGRATED ONCOLOGY, AND TRAINING EQUIPMENT.

WORKFORCE DEVELOPMENT EFFORTS THROUGHOUT THE REGION BENEFITED IN FOUNDATION SUPPORT THROUGH STAFF CONFERENCES AND TRAINING, NURSING AND

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HEALTH CARE PROFESSIONAL SCHOLARSHIPS, SERVICE LINE RELATED EDUCATION
SUPPORT AND EQUIPMENT, MEDICAL ASSISTANT EXAM FEES, SHADYSIDE SCHOOL OF
NURSING STUDENT SCHOLARSHIPS AND EMPLOYEE RECOGNITION EVENTS.

PINNACLE HEALTH MEDICAL SERVICES (PHMS) IS A TAX-EXEMPT ENTITY THAT IS
THE PHYSICIAN SERVICES PROVIDED WITHIN PHMS SUPPORT AND ENHANCE THE
SERVICES OF UPMC PINNACLE HOSPITALS AND THE UPMC PINNACLE SYSTEM. IT
PROVIDES FIRST CLASS PREVENTATIVE CARE TO THE COMMUNITY AS WELL AS
COLLABORATES WITH ITS AFFILIATES TO IMPROVE THE QUALITY OF HEALTHCARE,
AND THE PATIENT'S EXPERIENCE.

PHMS PROVIDED FREE AND UNCOMPENSATED CARE DURING THE YEAR IN THE AMOUNT
OF \$7,690,000. PHMS PROVIDED CHARITABLE CONTRIBUTIONS AND SUBSIDIZED
HEALTH SERVICES TO THE COMMUNITY AT A COST OF OVER \$24,438,000.

PRIMARILY ENGAGED IN THE PROVISION OF PHYSICIAN SERVICES. MANAGEMENT
CONSIDERS THE INVESTMENT IN SPECIALTY SERVICES CRITICAL IN MAINTAINING AN
INTEGRATED DELIVERY SYSTEM AND TO THE FUTURE SUCCESS OF UPMC PINNACLE.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

THE SPECIALTY PHYSICIAN PRACTICES INCLUDE THE FOLLOWING:

SURGICAL ASSOCIATES - ON APRIL 1, 2010, PINNACLE HEALTH SURGICAL
ASSOCIATES CAME TO FRUITION WHEN THE GENERAL SURGEONS AND STAFF OF
CAPITAL AREA SURGICAL ASSOCIATES AND SUSQUEHANNA SURGEONS JOINED THE
UPMC PINNACLE NETWORK. EXCELLENT SURGICAL CARE DOESN'T JUST HAPPEN.
IT'S THE COMBINATION OF SKILLED SURGEONS, THE LATEST TECHNOLOGY AND

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EQUIPMENT AND THE EXPERTISE OF THE OPERATING ROOM TEAM WORKING TOGETHER. THE MORE ADVANCED, THE MORE PRECISE, THE BETTER OUTCOME FOR THE PATIENT. PHMS HAS A LONG HISTORY OF PROVIDING THE FINEST SURGICAL CARE IN CENTRAL PENNSYLVANIA, DATING TO THE OPENING OF OUR FIRST OPERATING ROOM IN 1900. TODAY, OUR OUTSTANDING TEAM OF GENERAL SURGEONS AT PINNACLE HEALTH SURGICAL ASSOCIATES CONTINUES THE TRADITION OF EXCELLENCE BY PERFORMING A WIDE RANGE OF OPEN AND MINIMALLY INVASIVE PROCEDURES. THE TEAM INCLUDES BOARD CERTIFIED AND FELLOWSHIP TRAINED PHYSICIANS WHO PROVIDE SUPERIOR SURGICAL SKILL AND CARE.

WOUND & HYPERBARIC PROGRAM - THIS PROGRAM OPENED IN JANUARY 2010. IT PROVIDES EXPERT MEDICAL CARE FOR CHRONIC WOUNDS THAT HAVE FAILED PREVIOUS METHODS OF TREATMENT. THE USE OF SPECIALIZED INTENSIVE WOUND THERAPIES AND, IN SPECIFIC CIRCUMSTANCES, THE APPROVED USE OF HYPERBARIC OXYGEN THERAPY ENHANCES THE HEALING PROCESS IN AN ATTEMPT TO RETURN PATIENTS TO THE HIGHEST LEVEL OF DAILY FUNCTIONING AND HEALING. ALSO, THE IMPLEMENTATION OF AN IN-PATIENT CONSULTATION PROGRAM AT THE HOSPITALS ALLOWS FOR OPTIMAL PATIENT FOLLOW-UP AND REFERRALS. THE PROGRAM ALSO PROVIDES FOR INCREASED EDUCATIONAL PROGRAMS FOR AREA PHYSICIANS, RESIDENTS AND MEDICAL STUDENTS IN THIS SPECIALTY. RHEUMATOLOGY - OPENED FOR BUSINESS ON MARCH 1, 2010. PHMS' RHEUMATOLOGY OFFICE WAS FOUNDED TO DIAGNOSE AND TREAT THE SURROUNDING COMMUNITY THAT EXPERIENCED CONSTANT PAIN WITH RHEUMATIC DISEASES. WHETHER FACED WITH AN INFLAMMATION OF THE JOINTS, TENDONS OR MUSCLES, OR CONSTANT PAIN, PINNACLE HEALTH'S RHEUMATOLOGY DOCTORS HELP DIAGNOSE THE CONDITION AND

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FIND THE COURSE OF TREATMENT SUITABLE FOR EACH INDIVIDUAL. MANY TYPES OF RHEUMATIC DISEASES ARE NOT EASILY IDENTIFIED IN THE EARLY STAGES AND BECAUSE SOME ARE MORE COMPLEX THAN OTHERS, MORE THAN ONE VISIT MAY BE NECESSARY. AS SUCH, OUR RHEUMATOLOGISTS WORK CLOSELY WITH PATIENTS TO DESIGN INDIVIDUALIZED TREATMENTS THAT MEET THEIR NEEDS.

PINNACLE HEALTH NEUROLOGISTS AND NEUROSURGERY - THIS PROGRAM WAS ESTABLISHED TO MEET THE EMERGENT NEED FOR NEUROLOGISTS IN CENTRAL PA. COVERAGE FOR INPATIENT PHYSICIAN COVERAGE AT UPMC PINNACLE HOSPITALS IS ITS PRIMARY FOCUS, AS WELL AS ESTABLISHING AND GROWING OUTPATIENT SERVICES TO ADDRESS COMMUNITY NEEDS. THIS DEPARTMENT ALSO PROVIDES THE EMERGENT NEED IN CENTRAL PA OF SKILLED NEUROSURGEONS. PENNSYLVANIA NEUROSURGERY AND NEUROSCIENCES INSTITUTE JOINED THIS PRACTICE IN SEPTEMBER 2013 AND PA NEUROLOGICAL ASSOCIATES JOINED IN NOVEMBER 2013.

PINNACLE HEALTH ENDOCRINOLOGISTS - THIS PROGRAM WAS ESTABLISHED IN JANUARY 2005 AND PROVIDES BOTH INPATIENT AND OUTPATIENT SERVICES. PINNACLE HEALTH ENDOCRINOLOGY ASSOCIATES PROVIDES COMPREHENSIVE CARE FOR ALL ENDOCRINOLOGY DISORDERS, ESPECIALLY COMPLEX PATIENTS WITH DIABETES. WE SPECIALIZE IN INSULIN PUMPS, CONTINUOUS GLUCOSE MONITORING, THYROID DISORDERS INCLUDING THYROID BIOPSIES, THYROID CANCERS, COMPREHENSIVE CARE FOR OSTEOPOROSIS WITH SPECIALIZED NURSE CARE, AND ALL THE OTHER ENDOCRINE DISORDERS INCLUDING POLYCYSTIC OVARY SYNDROME, ADRENAL, AND PITUITARY DISEASES.

PINNACLE HEALTH INFECTIOUS DISEASE ASSOCIATES - THIS PROGRAM WAS

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ESTABLISHED IN JANUARY 2005. PINNACLE HEALTH INFECTIOUS DISEASE ASSOCIATES SPECIALIZES IN THE TREATMENT OF ANY ORGAN INFECTION AND INFECTIOUS DISEASES INCLUDING, BUT NOT LIMITED TO, OSTEOMYELITIS, LYME DISEASE, MENINGITIS, HIV, AND HEPATITIS C. BOTH INPATIENT AND OUTPATIENT SERVICES ARE PROVIDED, WHICH INCLUDES A TRAVEL CLINIC.

PINNACLE HEALTH PALLIATIVE CARE - THE FOCUS OF THIS PROGRAM IS ON THE INPATIENT CARE OF PATIENTS DURING THE FINAL MONTHS OR DAYS OF THEIR LIVES, SEEKING TO IMPROVE BOTH THE BALANCE OF CARE VIA COMFORT AND DIGNITY AND THE QUALITY OF PAIN RELIEF TREATMENT. IN THE ROLE AS THE PAIN TEAM OF THE SYSTEM, THE PALLIATIVE CARE SPECIALIST WILL BE AVAILABLE TO ANY PATIENT WHO IS IN NEED OF SPECIALIZED ASSESSMENT AND TREATMENT OF DIFFICULT OR INTRACTABLE PAIN. THIS DOVETAILS NICELY WITH THE CANCER CENTER PROGRAM. END-OF-LIFE CARE HAS BEEN IDENTIFIED NATIONALLY AS A MOMENT OF TIME WHICH TAKES UP AN INORDINATE AMOUNT HEALTH CARE RESOURCES, WITH GREAT VARIATION GEOGRAPHICALLY AND LITTLE IN THE WAY OF DEMONSTRABLE VALUE; DYING WITH DIGNITY IS AN OPTION THAT ALL OF US SHOULD HAVE AT THE END OF LIFE.

BREAST CANCER CENTER - THIS PROGRAM HAS BEEN ESTABLISHED TO PROVIDE PATIENTS WITH EAST AND WEST SHORE LOCATIONS FOR THEIR BREAST CARE NEEDS, INCLUDING BREAST HEALTH SURGEONS, BREAST HEALTH NURSE SPECIALISTS, CERTIFIED MAMMOGRAPHERS, RADIOLOGISTS, PATHOLOGISTS AND PHYSICAL THERAPISTS, ALL OF WHOM ARE COMMITTED TO PROVIDING THE MOST UP-TO-DATE TECHNOLOGY AND CARE FOR COMPLETE BREAST HEALTH

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THE WOMEN'S CANCER CENTER IS A UNIQUE PRACTICE, SERVING PATIENTS ON BOTH THE EAST AND WEST SHORES, ADDRESSING THE PREVENTIVE, DIAGNOSTIC, SURGICAL, MEDICAL, AND CHEMOTHERAPY NEEDS OF WOMEN WITH GYNECOLOGIC CANCER AND OTHER COMPLICATED CONDITIONS OF THE FEMALE REPRODUCTIVE SYSTEM.

RADIATION ONCOLOGY - THIS PRACTICE OPENED IN JUNE OF 2013, GIVING PATIENTS THE MOST ADVANCED TECHNOLOGY IN CENTRAL PA. OUR SUPERIOR TREATMENT CAPABILITIES ALLOW US TO PROVIDE THE PATIENT WITH SHORTER TREATMENT TIMES AND FEWER SIDE EFFECTS WHILE ELIMINATING THEIR CANCER CELLS. WE MAINTAIN A HIGH LEVEL OF SKILL AND EXPERTISE WHILE PAYING CAREFUL ATTENTION TO THE PATIENT'S COMFORT AND CONCERNS.

HEMATOLOGY ONCOLOGY - LOCATED IN THE MEDICAL SCIENCES PAVILION ON THE COMMUNITY CAMPUS, THIS PRACTICE SPECIALIZES IN THE USE OF MEDICATIONS, SUCH AS CHEMOTHERAPY, HORMONES, AND PAIN MEDICATIONS IN THE MANAGEMENT OF CANCER. THE PRACTICE HAS ALSO OPENED A SECOND LOCATION ON THE WEST SHORE FOR PATIENT CONVENIENCE. PSYCHOLOGICAL ASSOCIATES - THIS PRACTICE IS STAFFED BY LICENSED, MASTERS LEVEL, PSY.D. AND PH.D. CLINICIANS WHO PROVIDE INDIVIDUAL, FAMILY OR MARITAL EVALUATIONS, THERAPY, AND MEDICATION MANAGEMENT AS NEEDED TO ALL AGES. WE ALSO OFFER GROUP THERAPY SHOULD YOU AND YOUR THERAPIST DETERMINE IT WOULD BE HELPFUL.

GROUPS INCLUDE THE ANGER MANAGEMENT GROUP, MOM'S NAVIGATING THROUGH LIFE GROUP, AND ADOLESCENT GROUPS. PINNACLE HEALTH OBSTETRICS AND GYNECOLOGY SPECIALISTS - THIS PRACTICE OPENED IN OCTOBER 2013 AND IS

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COMMITTED TO PROVIDING EXCEPTIONAL MEDICAL CARE TO WOMEN THROUGHOUT THEIR LIVES. THIS TEAM OF CULTURALLY SENSITIVE PROVIDERS USES THE MOST UP-TO-DATE INFORMATION AND PROCEDURES TO DELIVER THE BEST OBSTETRIC ANDGYNECOLOGIC HEALTH CARE TO THEIR PATIENTS. WHETHER A PREGNANCY IS PROGRESSING NORMALLY OR A PATIENT NEEDS SPECIALIZED CARE, PHMS' TEAM OF DOCTORS, NURSES, SPECIALISTS, AND EDUCATORS PROVIDE THE HIGHEST LEVEL OF CARE WHILE ALSO FOCUSING ON MAKING THE BIRTH EXPERIENCE AS POSITIVE AS POSSIBLE.

MATERNAL FETAL MEDICINE OF CENTRAL PENNSYLVANIA IS A PRACTICE DEDICATED TO CARING FOR WOMEN WITH HIGH-RISK PREGNANCIES IF THEY AND THEIR BABIES NEED SPECIAL CARE. SERVICES INCLUDE PERINATAL/PRECONCEPTION CONSULTATION AND FETAL ECHOCARDIOGRAPHY. PHMS MEDICAL GROUP- THE PRIMARY CARE PRACTICES COMPRISE 26% OF THE TOTAL PROGRAM EXPENSES OF PINNACLE HEALTH MEDICAL SERVICES. PRIMARY CARE SERVICES ARE CURRENTLY PROVIDED THROUGH 54 FAMILY CARE CENTERS LOCATED IN THE SURROUNDING CENTRAL PENNSYLVANIA COMMUNITIES. DURING THE FISCAL YEAR ENDED JUNE 30, 2025, PRIMARY CARE PATIENT VISITS TOTALED 564,744.

IN FISCAL YEAR 2024, FAMILY CARE ADDED TWO NEW PRACTICES: UPMC PRIMARY CARE WHITE ROSE AND UPMC PRIMARY CARE GETTYSBURG. THESE NEW LOCATIONS STRENGTHEN UPMC PINNACLE'S COMMITMENT TO THE COMMUNITY, ENHANCING LOCAL ACCESS TO HIGH-QUALITY PRIMARY CARE. PATIENTS NOW HAVE GREATER CONNECTIVITY TO UPMC PINNACLE'S NETWORK, BENEFITING FROM SPECIALTY CARE SERVICES AND ADVANCED DIAGNOSTIC AND TREATMENT

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TEC PHMS CLINICS - THE CLINICS COMPRISE 10% OF THE TOTAL PROGRAM EXPENSES OF PHMS. THERE ARE 9 CLINIC FACILITIES THROUGHOUT CENTRAL PENNSYLVANIA THAT PROVIDE PATIENT CARE TO THE SURROUNDING COMMUNITIES.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

DURING THE FISCAL YEAR ENDED JUNE 30, 2025, CLINICS HAD VISITS THAT TOTALED 76,717. THE CLINICS MAINLY SERVE AN UN-INSURED, UNDER-INSURED, AND LARGE MEDICAL ASSISTANCE COMMUNITY AS IT LIVES OUT ITS MISSION STATEMENT TO BE A CHARITABLE ORGANIZATION DEDICATED TO MAINTAINING AND IMPROVING THE HEALTH AND QUALITY OF LIFE. THE CLINICS INCLUDE THE FOLLOWING:

KLINE HEALTH CENTER - THIS PROGRAM PROVIDES PRIMARY AND SPECIALTY CARE TO A LARGELY URBAN POPULATION. WHILE THE PRACTICE DOES SEE PRIVATE PATIENTS, MUCH OF THE POPULATION SERVED IS OF LOW INCOME AND/OR UNDERINSURED. SINCE MANY OF OUR PATIENTS RELY ON PUBLIC TRANSPORTATION, KLINE IS ABLE TO MEET MANY OF THE PATIENT'S NEEDS AT ONE LOCATION. RESIDENT PHYSICIANS, UNDER THE SUPERVISION OF BOARD-CERTIFIED PHYSICIAN FACULTY AS WELL AS SPECIALTY PHYSICIANS, COME TO KLINE TO SEE PATIENTS FOR THEIR ORTHOPEDIC, ENDOCRINE, NEUROLOGICAL, INFECTIOUS DISEASE, AND SURGICAL NEEDS. THE OFFICE IS MANAGED BY A FULL-TIME RN WHO OVERSEES A NEEDS OF THE PATIENTS AND PROVIDERS.

CHILDREN'S AND TEEN CENTER - THIS PROGRAM PROVIDES PRIMARY, ACUTE, AND PREVENTATIVE CARE PLUS SOME SPECIALTY SERVICES FOR CHILDREN NEWBORN THROUGH 18 YEARS OF AGE. SPECIALTY SERVICES INCLUDE NEONATAL

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DEVELOPMENTAL CARE, LEAD POISONING DIAGNOSIS AND FOLLOW-UP, PEDIATRIC NEUROLOGY, AND CARE FOR CHILDREN INFECTED WITH HIV. WOMEN'S INPATIENT ST SERVICES - THIS PROGRAM PROVIDES COMPREHENSIVE INPATIENT OBSTETRICAL AND GYNECOLOGICAL SERVICES TO A PATIENT POPULATION CONSISTING LARGELY OF A MANAGED CARE MEDICAL ASSISTANCE PATIENT BASE. THIS PROGRAM WAS ESTABLISHED IN 2007.

WOMEN'S OUTPATIENT HEALTH CENTER - THIS PROGRAM PROVIDES COMPREHENSIVE OUTPATIENT OBSTETRICAL AND GYNECOLOGICAL SERVICES TO A LARGELY MANAGED CARE MEDICAL ASSISTANCE PATIENT POPULATION.

PINNACLE HEALTH RESOURCE EDUCATION AND COMPREHENSIVE CARE FOR HIV (REACCH) - THIS PROGRAM WAS ESTABLISHED TO PROVIDE PRIMARY AND SPECIALTY MEDICAL CARE FOR PEOPLE (INCLUDING PREGNANT WOMEN AND THEIR EXPOSED INFANTS) WHO ARE HIV-POSITIVE AS WELL AS TO PROVIDE SUPPORT SERVICES FOR THESE PATIENTS. ADDITIONAL SERVICES PROVIDED TO THIS PATIENT POPULATION INCLUDE NUTRITIONAL COUNSELING, TRANSPORTATION TO MEDICAL APPOINTMENTS, VISION CARE, ASSISTANCE WITH MEDICATION CO-PAYMENTS, AND ASSISTANCE WITH MENTAL HEALTH COUNSELING AND PSYCHIATRIC CARE. THE PROGRAM IS PARTIALLY GRANT FUNDED AND ALSO PROVIDES REIMBURSEMENT TO UPMC PINNACLE FOR SERVICES RENDERED TO PATIENTS WHO ARE HIV-POSITIVE AND ARE EITHER UNINSURED OR UNDERINSURED. AFF OF MEDICAL ASSISTANTS AND OTHER OFFICE SUPPORT STAFF TO MEET THEHNOLOGIES. AS PART OF OUR MISSION TO PROVIDE ACCESS TO CARE AND TO ACCOMMODATE

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THOSE PATIENTS WHO NEED CARE AT TIMES WHEN OUR PRIMARY CARE OFFICES CANNOT ASSIST THEM, PHMS HAS 19 RETAIL CLINICS. WITH ACCESS TO PATIENTS' MEDICAL RECORDS FROM THEIR RECENT PRIMARY CARE VISITS, THE CLINICS PROVIDE SEAMLESS FOLLOW UP CARE. THE RETAIL CLINICS ARE OPEN SEVEN DAYS A WEEK WITH EVENING HOURS AND NO APPOINTMENTS ARE NECESSARY. TOTAL PATIENT VISITS WERE 153,564 IN FISCAL YEAR 2025.

PINNACLE HEALTH REGIONAL PHYSICIANS (PHRP) IS A TAX-EXEMPT ENTITY THAT IS PRIMARILY ENGAGED IN THE PROVISION OF PHYSICIAN SERVICES.

THE PHYSICIAN SERVICES PROVIDED WITHIN PHRP SUPPORT AND ENHANCE THE SERVICES OF UPMC PINNACLE HOSPITALS AND THE UPMC PINNACLE CENTRAL PENNSYLVANIA MARKETS. IT PROVIDES FIRST CLASS PREVENTATIVE CARE TO THE COMMUNITY AS WELL AS COLLABORATES WITH ITS AFFILIATES TO IMPROVE THE QUALITY OF HEALTHCARE AND THE PATIENT EXPERIENCE.

PHRP PROVIDED FREE CARE DURING THE YEAR IN THE AMOUNT OF \$789,000. PHRP PROVIDED CHARITABLE CONTRIBUTIONS AND SUBSIDIZED HEALTH SERVICES TO THE COMMUNITY AT A COST OF OVER \$7,000,000.

PINNACLE HEALTH REGIONAL PHYSICIANS IS AN AMALGAMATION OF PRIMARY CARE, SPECIALTY CARE, AND CLINIC PHYSICIAN PRACTICES.

IN FISCAL YEAR 2025, THERE WERE 22 SPECIALTY PRACTICES THROUGHOUT CENTRAL PENNSYLVANIA. PHRP INCLUDES THE FOLLOWING SPECIALTY PRACTICES: ARTHRITIS & RHEUMATOLOGY, CANCER CARE (INCLUDING BREAST HEALTH, HEMATOLOGY ONCOLOGY CARE, AND RADIATION THERAPY), CARDIOLOGY, FOOT & ANKLE, SURGICAL (INCLUDING ENT HEAD & NECK, GENERAL SURGERY, ONCOLOGY,

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ORTHOPEDIC, PLASTIC & AESTHETIC AND VASCULAR), INFECTIOUS DISEASE,
NEUROLOGY, OB GYN, PULMONARY & SLEEP AND UROLOGY.

MANAGEMENT CONSIDERS THE INVESTMENT IN SPECIALTY SERVICES CRITICAL IN
MAINTAINING AN INTEGRATED DELIVERY SYSTEM WHICH WILL AID IN THE FUTURE
SUCCESS OF THE UPMC PINNACLE MARKETS.

ONE CLINIC PRACTICE LOCATED WITHIN LANCASTER, PA SERVES AN UN-INSURED,
UNDER-INSURED AND LARGE MEDICAL ASSISTANCE COMMUNITY AS IT SERVES ITS
MISSION STATEMENT TO BE A CHARITABLE ORGANIZATION DEDICATED TO
MAINTAINING AND IMPROVING THE HEALTH AND QUALITY OF LIFE.

PRIMARY CARE SERVICES ARE CURRENTLY PROVIDED THROUGH 19 FAMILY CARE
PRACTICES LOCATED IN SURROUNDING CENTRAL PENNSYLVANIA COMMUNITIES.
DURING THE FISCAL YEAR ENDED JUNE 30, 2025, COMBINED PRIMARY CARE,
LANCASTER CLINIC, AND SPECIALTY CARE PATIENT ENCOUNTERS TOTALED 312,458.

UPMC PINNACLE HOSPITALS COMPRISES THREE ACUTE-CARE HOSPITAL FACILITIES
IN THE GREATER HARRISBURG AREA: UPMC HARRISBURG, UPMC COMMUNITY
OSTEOPATHIC, AND UPMC WEST SHORE, AND HAS MORE THAN 5,200 EMPLOYEES. UPMC
PINNACLE HOSPITALS ARE THE LEADING PROVIDER OF INPATIENT AND
OUTPATIENT HEALTH CARE IN THE GREATER HARRISBURG, PA. AREA, WITH A
NETWORK OF CARE THAT ALSO ENCOMPASSES CLINICAL SPECIALTY OFFICES,
PRIMARY CARE OFFICES, UPMC URGENT CARE CENTERS, AND UPMC HILLMAN CANCER
CENTERS. UPMC PINNACLE HOSPITALS IS DEDICATED TO MAINTAINING AND

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IMPROVING THE HEALTH AND QUALITY OF LIFE FOR ALL PERSONS OF THE CENTRAL
PA.

DURING FISCAL YEAR 2025, UPMC PINNACLE HOSPITALS ADMITTED MORE THAN
33,000 INPATIENTS, RECORDED 166,900 INPATIENT DAYS, 124,000 EMERGENCY
ROOM VISITS, 958,200 OUTPATIENT VISITS, 32,400 SURGERIES, 2,700
BIRTHS/DELIVERIES, AND 87 TRANSPLANTS.

UPMC PINNACLE HOSPITALS PROVIDED SERVICES TO THE COMMUNITY THROUGH
CHARITABLE DONATIONS, SUBSIDIZED HEALTH AND COMMUNITY PROGRAMS,
OUTREACH PROGRAMS, HEALTH SCREENINGS, EDUCATIONAL CLASSES, AND
VOLUNTEER SERVICES. UPMC PINNACLE HOSPITALS PROVIDED CHARITY CARE AND
OTHER UNCOMPENSATED CARE, INCLUDING MEDICAID AND MEDICARE SHORTFALLS,
AT A COST IN EXCESS OF \$219,053,000. THE COMMUNITIES SERVED BY UPMC
PINNACLE HOSPITALS ARE IN AN ECONOMICALLY DISTRESSED AND MEDICALLY
UNDERSERVED AREA. IN THE YEAR ENDED JUNE 30, 2025, UPMC PINNACLE
HOSPITALS PROVIDED COMMUNITY SERVICE PROGRAMS AND OTHER FUNDING AT A
COST OF OVER \$16,355,000 AND FUNDING FOR EDUCATION AND RESEARCH AT A
COST OF APPROXIMATELY \$126,000.

UPMC PINNACLE HOSPITALS ACHIEVED A FIVE-STAR RATING FROM CMS, THE
HIGHEST RATING POSSIBLE, RANKED AMONG THE BEST IN THE U.S. NEWS AND
WORLD REPORT 2024-2025 BEST HOSPITALS LISTING, AND WERE NAMED AMONG
AMERICA'S 250 BEST HOSPITALS BY HEALTHGRADES.

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FOUNDED IN 1873, UPMC HARRISBURG, LOCATED IN DOWNTOWN HARRISBURG, PA.,
IS A FULL-SERVICE ACUTE CARE HOSPITAL WITH 422 BEDS. THE HOSPITAL
SERVES AS THE HUB FOR THE UPMC CENTRAL PA. NETWORK, PROVIDING THE MOST
ADVANCED CARE TO THE RESIDENTS THROUGHOUT SOUTHCENTRAL PENNSYLVANIA.

UPMC PINNACLE HARRISBURG FEATURES:

-A STATE-OF-THE-ART LABOR AND DELIVERY AREA WITH A LEVEL III NEONATAL
INTENSIVE CARE UNIT.

-WORLD-CLASS CARDIOLOGY CARE THROUGH UPMC HEART AND VASCULAR INSTITUTE.

-THE REGION'S PREMIER KIDNEY TRANSPLANT CENTER.

-ADVANCED PEDIATRIC CARE WITH UPMC CHILDREN'S HARRISBURG IN PARTNERSHIP
WITH NATIONALLY RECOGNIZED UPMC CHILDREN'S HOSPITAL OF PITTSBURGH.

-LEADING-EDGE CARE IN NEUROSCIENCES, WOMEN'S CARE, COMPREHENSIVE STROKE
CARE, AND MORE. THIS CAMPUS IS ALSO HOME TO THE ALEX GRASS MEDICAL
SCIENCES BUILDING, WHICH INCLUDES:

BONE, JOINT, AND SPINE INSTITUTES, LABORATORY SERVICES, MATERNAL FETAL
MEDICINE, SELECT MEDICAL REHAB SERVICES

UPMC HARRISBURG HAS ACHIEVED ITS FOURTH CONSECUTIVE MAGNET DESIGNATION
FROM THE ANCC MAGNET RECOGNITION PROGRAM IN 2021. RECEIVING MAGNET

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RECOGNITION IS ONE OF THE HIGHEST ACHIEVEMENTS A HOSPITAL CAN OBTAIN IN PROFESSIONAL NURSING.

PART III STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED

IN 2025, UPMC HARRISBURG OPENED A NEW CHILD- AND FAMILY-FRIENDLY ED SPACE FOR PEDIATRIC PATIENTS, AND UPMC CHILDREN'S IN HARRISBURG EXPANDED CRITICAL CARE TRANSPORT SERVICES TO INCLUDE PEDIATRIC GROUND AND AIR CAPABILITIES. UPMC CHILDREN'S IN HARRISBURG, WITH SUPPORT FROM THE UPMC PINNACLE FOUNDATION, UNVEILED AN MRI SIMULATOR AND CINEMA SYSTEM TO EASE SCANS FOR CHILDREN. UPMC AND SELECT MEDICAL OPENED A NEW INPATIENT REHABILITATION HOSPITAL AT UPMC WEST SHORE WITH 20 BEDS, A THERAPY GYM. AND REHABILITATION TECHNOLOGIES TO TREAT PATIENTS RECOVERING FROM STROKE, SPINAL CORD AND BRAIN INJURIES, AMPUTATION, NEUROLOGICAL DISORDERS, AND ORTHOPEDIC CONDITIONS. UPMC HILLMAN CANCER CENTER IN CENTRAL PA., WITH THE SUPPORT OF THE UPMC PINNACLE FOUNDATION, LAUNCHED REGION'S FIRST BISPECIFIC T-CELL ENGAGER (BITE) THERAPY, CONTINUING EXPANSION OF THEIR CLINICAL TRIAL PROGRAMS. THE UPMC WEST SHORE CAMPUS OPENED A HOSPITAL-BASED BLADDER INSTILLATION CENTER TO PROVIDE CARE FOR PATIENTS WITH BLADDER CANCER. UPMC HEART AND VASCULAR INSTITUTE IN CENTRAL PA. STARTED OFFERING RENAL DENERVATION TO PATIENTS WITH HARD-TO-TREAT HIGH BLOOD PRESSURE.

UPMC HARRISBURG RANKED 17TH IN THE NATION, AND THIRD IN THE STATE, IN MONEY MAGAZINE'S ANNUAL LIST OF THE 75 TOP HOSPITALS FOR CARDIAC CARE IN THE U.S, RECEIVED THE ECMO SILVER CENTER OF EXCELLENCE AWARD, AND WAS RECOGNIZED AS GOLD PLUS FROM THE AMERICAN HEART ASSOCIATION FOR GET

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WITH THE GUIDELINES FOR HEART FAILURE & STROKE. IN ADDITION, UPMC HARRISBURG EARNED THE JOINT COMMISSION'S GOLD SEAL OF APPROVAL AND THE AMERICAN STROKE ASSOCIATION'S HEART-CHECK MARK FOR THROMBECTOMY-CAPABLE STROKE CENTER CERTIFICATION.

FOUNDED IN 1951, UPMC COMMUNITY OSTEOPATHIC, LOCATED IN SUBURBAN HARRISBURG IS AN ACUTE CARE HOSPITAL LICENSED FOR 177 BEDS. UPMC COMMUNITY OSTEOPATHIC FEATURES:

WORLD-CLASS CANCER CARE FROM UPMC HILLMAN CANCER CENTER HOUSED IN THE MEDICAL SCIENCES PAVILION. THE REGION'S PREMIERE ORTHOPAEDIC, BARIATRIC, AND UROLOGY CARE.

UPMC COMMUNITY OSTEOPATHIC HAS ACHIEVED ITS FOURTH CONSECUTIVE MAGNET DESIGNATION FROM THE ANCC MAGNET RECOGNITION PROGRAM IN 2021. RECEIVING MAGNET RECOGNITION IS ONE OF THE HIGHEST ACHIEVEMENTS A HOSPITAL CAN OBTAIN IN PROFESSIONAL NURSING.

DURING FISCAL YEAR 2024, UPMC COMMUNITY OSTEOPATHIC COMMUNITY OSTEOPATHIC RENEWED ITS ACCREDITATION FROM THE METABOLIC AND BARIATRIC SURGERY ACCREDITATION AND QUALITY IMPROVEMENT PROGRAM, MARKING 16 CONSECUTIVE YEARS OF RECOGNITION AS A COMPREHENSIVE CENTER. UPMC COMMUNITY OSTEOPATHIC'S LONGSTANDING ACCREDITATION HAS SET A STANDARD FOR EXCELLENCE, LEADING TO THE EXPANSION OF BARIATRIC SURGERY SERVICES IN CENTRAL PENNSYLVANIA.

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BUILT IN 2014, UPMC WEST SHORE IS A FIVE-STORY, 166-BED ACUTE-CARE HOSPITAL WITH ALL PRIVATE ROOMS LOCATED IN HAMPDEN TOWNSHIP. THE HOSPITAL FEATURES: WORLD-CLASS CANCER CARE AT THE UPMC HILLMAN CANCER CENTER, PREMIER ORTHOPAEDIC AND SPINE CARE AT UPMC ORTHOPAEDIC CARE LOCATIONS IN CENTRAL PA AND THE REGION'S LEADING THORACIC CARE, A MULTI-SPECIALTY OUTPATIENT CENTER THAT INCLUDES A VARIETY OF OUTPATIENT UPMC PINNACLE HOSPITALS 25-1778644 PRACTICES.

UPMC HILLMAN CANCER CENTER AT UPMC WEST SHORE EXPANDED ITS SERVICES TO A NEW BUILDING, NOW OPERATING TWO LOCATIONS DEDICATED TO COMPREHENSIVE CANCER CARE. THE UPMC OUTPATIENT CENTER AT 2020 TECHNOLOGY PARKWAY OFFERS MEDICAL ONCOLOGY, CLINICAL TRIALS, GENETIC COUNSELING, AND INFUSION SERVICES, WHILE THE ROCCO AND NANCY ORTENZIO PAVILION AT 2035 TECHNOLOGY PARKWAY PROVIDES RADIATION AND SURGICAL ONCOLOGY SERVICES. UPMC WEST SHORE HAS ACHIEVED ITS SECOND CONSECUTIVE MAGNET DESIGNATION FROM THE ANCC MAGNET RECOGNITION PROGRAM IN 2021.

UPMC PINNACLE HOSPITALS' MISSION IS TO SERVE OUR COMMUNITY BY PROVIDING OUTSTANDING PATIENT CARE AND SHAPING TOMORROW'S HEALTH SYSTEM THROUGH CLINICAL AND TECHNOLOGICAL INNOVATION, RESEARCH, AND EDUCATION. UPMC WILL LEAD THE TRANSFORMATION OF HEALTH CARE. THE UPMC MODEL WILL BE NATIONALLY RECOGNIZED FOR REDEFINING HEALTH CARE BY:

-PUTTING OUR PATIENTS, HEALTH PLAN MEMBERS, EMPLOYEES, AND COMMUNITY AT

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THE CENTER OF EVERYTHING WE DO AND CREATING A MODEL THAT ENSURES THAT
EVERY PATIENT GETS THE RIGHT CARE, IN THE RIGHT WAY, AT THE RIGHT TIME,
EVERY TIME.

-HARNESSING OUR INTEGRATED CAPABILITIES TO DELIVER BOTH SUPERB
STATE-OF-THE-ART CARE TO OUR PATIENTS AND HIGH VALUE TO OUR
STAKEHOLDERS.

-EMPLOYING OUR PARTNERSHIP WITH THE UNIVERSITY OF PITTSBURGH TO ADVANCE
THE UNDERSTANDING OF DISEASE, ITS PREVENTION, TREATMENT AND CURE.

-SERVING THE UNDERSERVED AND DISADVANTAGED AND ADVANCING EXCELLENCE AND
INNOVATION THROUGHOUT HEALTH CARE.

-FUELING THE DEVELOPMENT OF NEW BUSINESSES GLOBALLY THAT ARE CONSISTENT
WITH OUR MISSION AS AN ONGOING CATALYST AND DRIVER OF ECONOMIC
DEVELOPMENT FOR THE BENEFIT OF THE RESIDENTS OF THE REGION.

COMMUNITY HEALTH IMPROVEMENT SERVICES: TAKING HEALTH CARE BEYOND THE
DOORS OF ITS HOSPITALS, CLINICS, AND OFFICES, AND BRINGING IT INTO THE
REGION'S TOWNS, SCHOOLS AND WORKPLACES, UPMC PINNACLE HOSPITALS'
CHARITABLE GIVING AND COMMUNITY INITIATIVES ARE MAKING A DIFFERENCE IN
THE HEALTH AND WELL-BEING OF OUR NEIGHBORS.

SUPPORTING AND SERVING THE COMMUNITY REMAINS A HIGH PRIORITY FOR UPMC
PINNACLE HOSPITALS. UPMC PINNACLE HOSPITALS CONDUCTED COMMUNITY HEALTH

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NEEDS ASSESSMENTS CHNAS, IN COMPLIANCE WITH INTERNAL REVENUE CODE SECTION 501(R) REQUIREMENTS. INCORPORATING INPUT FROM COMMUNITY STAKEHOLDERS AND PUBLIC HEALTH EXPERTS, THESE ASSESSMENTS HELP IDENTIFY ACTIONS AND CREATE IMPLEMENTATION PLANS TO IMPROVE COMMUNITY HEALTH. THE HOSPITALS ARE MAKING MEASURABLE PROGRESS ON EACH OF THEIR HEALTH INITIATIVES, DEMONSTRATING THEIR CONTINUED COMMITMENT TO IMPROVING COMMUNITY HEALTH. WE ARE PROUD TO PROVIDE SERVICES THAT DIRECTLY SUPPORT THE COMMUNITIES WE SERVE, AND TO COLLABORATE WITH AREA BUSINESSES AND ORGANIZATIONS TO INCREASE AWARENESS ON ALL ASPECTS OF HEALTH, INCLUDING OUR PRIORITIES OUTLINED IN EACH OF THE LOCALLY FOCUSED COMMUNITY HEALTH NEEDS ASSESSMENT PLANS. FROM PUBLIC HEALTH AND WELLNESS INITIATIVES TO SCHOOL HEALTH SCREENINGS, INSURANCE ENROLLMENT HELP, HOME-VISIT PROGRAMS, CHARITY CARE, AND FREE HEALTH CLASSES, UPMC PINNACLE PROVIDES BENEFITS TO THE COMMUNITY.

UPMC PINNACLE LANCASTER AFTER CAREFUL ASSESSMENT OF HEALTH CARE SERVICES IN AND AROUND LANCASTER COUNTY, A DECISION WASMADE TO CONSOLIDATE UPMC PINNACLE LANCASTER AND UPMC LITITZ EFFECTIVE 2/28/19. THE HOSPITAL MOVED INPATIENT SERVICES FROM UPMC PINNACLE LANCASTER TO UPMC LITITZ AND COMBINED THE STRENGTHS OF THE OUTSTANDING PATIENT CARE TEAMS FROM BOTH HOSPITALS, UNIFYING EMPLOYEES AND EXPANDING UPMC PINNACLE'S HIGH QUALITY OF INPATIENT CARE AND EFFICIENT OPERATIONS.

UPMC PINNACLE (UPMC IN CENTRAL PA.) ENCOMPASSES 1,226 LICENSED BEDS, HAS SEVEN ACUTE CARE HOSPITALS AND OFFERS THE HELEN M. SIMPSON REHAB

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HOSPITAL, A 55-BED INPATIENT REHAB HOSPITAL JOINTLY OWNED WITH SELECT
MEDICAL.

UPMC IN CENTRAL PA OFFERS ACCESS TO MORE THAN 200 OUTPATIENT LOCATIONS,
INCLUDING PRIMARY AND SPECIALTY CARE, UPMC URGENT CARE CENTERS, AND UPMC
HILLMAN CANCER CENTERS. UPMC HAS MORE THAN 13,000 EMPLOYEES, INCLUDING
MORE THAN 3,100 PHYSICIANS AND ALLIED HEALTH PROFESSIONALS.

DURING FISCAL YEAR 2025, UPMC IN CENTRAL PA ADMITTED 53,000 INPATIENTS,
AND RECORDED MORE THAN RECORDED 267,000 INPATIENT DAYS, 239,000 EMERGENCY
ROOM VISITS, 1.5 MILLION OUTPATIENT, 56,000 SURGERIES 5,600
BIRTHS/DELIVERIES, 77 TRANSPLANTS, AND PARTICIPATED IN MORE THAN 400
CLINICAL TRIALS.

UPMC IN CENTRAL PA PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE,
INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST OF OVER \$6,655,000.
THE COMMUNITIES SERVED BY UPMC IN CENTRAL PA'S MEMBER ORGANIZATIONS ARE
IN AN ECONOMICALLY DISTRESSED AND MEDICALLY UNDERSERVED AREA. IN THE YEAR
ENDED JUNE 30, 2025, UPMC IN CENTRAL PA PROVIDED FUNDING FOR EDUCATION
AND RESEARCH AT A COST OF APPROXIMATELY \$32,114,000.

PART IV CHECKLIST OF REQUIRED SCHEDULES

IN 2025, UPMC HARRISBURG OPENED A NEW CHILD- AND FAMILY-FRIENDLY ED SPACE
FOR PEDIATRIC PATIENTS, AND UPMC CHILDREN'S IN HARRISBURG EXPANDED
CRITICAL CARE TRANSPORT SERVICES TO INCLUDE PEDIATRIC GROUND AND AIR
CAPABILITIES. UPMC CHILDREN'S IN HARRISBURG, WITH SUPPORT FROM THE UPMC

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PINNACLE FOUNDATION, UNVEILED AN MRI SIMULATOR AND CINEMA SYSTEM TO EASE SCANS FOR CHILDREN. UPMC AND SELECT MEDICAL OPENED A NEW INPATIENT REHABILITATION HOSPITAL AT UPMC WEST SHORE WITH 20 BEDS, A THERAPY GYM. AND REHABILITATION TECHNOLOGIES TO TREAT PATIENTS RECOVERING FROM STROKE, SPINAL CORD AND BRAIN INJURIES, AMPUTATION, NEUROLOGICAL DISORDERS, AND ORTHOPEDIC CONDITIONS. UPMC HILLMAN CANCER CENTER IN CENTRAL PA., WITH THE SUPPORT OF THE UPMC PINNACLE FOUNDATION, LAUNCHED REGION'S FIRST BISPECIFIC T-CELL ENGAGER (BITE) THERAPY, CONTINUING EXPANSION OF THEIR CLINICAL TRIAL PROGRAMS. THE UPMC WEST SHORE CAMPUS OPENED A HOSPITAL-BASED BLADDER INSTILLATION CENTER TO PROVIDE CARE FOR PATIENTS WITH BLADDER CANCER. UPMC HEART AND VASCULAR INSTITUTE IN CENTRAL PA. STARTED OFFERING RENAL DENERVATION TO PATIENTS WITH HARD-TO-TREAT HIGH BLOOD PRESSURE.

UPMC HARRISBURG RANKED 17TH IN THE NATION, AND THIRD IN THE STATE, IN MONEY MAGAZINE'S ANNUAL LIST OF THE 75 TOP HOSPITALS FOR CARDIAC CARE IN THE U.S, RECEIVED THE ECMO SILVER CENTER OF EXCELLENCE AWARD, AND WAS RECOGNIZED AS GOLD PLUS FROM THE AMERICAN HEART ASSOCIATION FOR GET WITH THE GUIDELINES FOR HEART FAILURE & STROKE. IN ADDITION, UPMC HARRISBURG EARNED THE JOINT COMMISSION'S GOLD SEAL OF APPROVAL AND THE AMERICAN STROKE ASSOCIATION'S HEART-CHECK MARK FOR THROMBECTOMY-CAPABLE STROKE CENTER CERTIFICATION.

FOUNDED IN 1951, UPMC COMMUNITY OSTEOPATHIC, LOCATED IN SUBURBAN

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HARRISBURG IS AN ACUTE CARE HOSPITAL LICENSED FOR 177 BEDS. UPMC

COMMUNITY OSTEOPATHIC FEATURES:

WORLD-CLASS CANCER CARE FROM UPMC HILLMAN CANCER CENTER HOUSED IN THE
MEDICAL SCIENCES PAVILION. THE REGION'S PREMIERE ORTHOPAEDIC,
BARIATRIC, AND UROLOGY CARE.

UPMC COMMUNITY OSTEOPATHIC HAS ACHIEVED ITS FOURTH CONSECUTIVE MAGNET
DESIGNATION FROM THE ANCC MAGNET RECOGNITION PROGRAM IN 2021. RECEIVING
MAGNET RECOGNITION IS ONE OF THE HIGHEST ACHIEVEMENTS A HOSPITAL CAN
OBTAIN IN PROFESSIONAL NURSING.

DURING FISCAL YEAR 2024, UPMC COMMUNITY OSTEOPATHIC RENEWED ITS
ACCREDITATION FROM THE METABOLIC AND BARIATRIC SURGERY ACCREDITATION AND
QUALITY IMPROVEMENT PROGRAM, MARKING 16 CONSECUTIVE YEARS OF RECOGNITION
AS A COMPREHENSIVE CENTER. UPMC COMMUNITY OSTEOPATHIC'S LONGSTANDING
ACCREDITATION HAS SET A STANDARD FOR EXCELLENCE, LEADING TO THE EXPANSION
OF BARIATRIC SURGERY SERVICES IN CENTRAL PENNSYLVANIA.

BUILT IN 2014, UPMC WEST SHORE IS A FIVE-STORY, 166-BED ACUTE-CARE
HOSPITAL WITH ALL PRIVATE ROOMS LOCATED IN HAMPDEN TOWNSHIP. THE
HOSPITAL FEATURES: WORLD-CLASS CANCER CARE AT THE UPMC HILLMAN CANCER
CENTER, PREMIER ORTHOPAEDIC AND SPINE CARE AT UPMC ORTHOPAEDIC CARE
LOCATIONS IN CENTRAL PA AND THE REGION'S LEADING THORACIC CARE, A
MULTI-SPECIALTY OUTPATIENT CENTER THAT INCLUDES A VARIETY OF OUTPATIENT
UPMC PINNACLE HOSPITALS 25-1778644

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PRACTICES.

UPMC HILLMAN CANCER CENTER AT UPMC WEST SHORE EXPANDED ITS SERVICES TO A NEW BUILDING, NOW OPERATING TWO LOCATIONS DEDICATED TO COMPREHENSIVE CANCER CARE. THE UPMC OUTPATIENT CENTER AT 2020 TECHNOLOGY PARKWAY OFFERS MEDICAL ONCOLOGY, CLINICAL TRIALS, GENETIC COUNSELING, AND INFUSION SERVICES, WHILE THE ROCCO AND NANCY ORTENZIO PAVILION AT 2035 TECHNOLOGY PARKWAY PROVIDES RADIATION AND SURGICAL ONCOLOGY SERVICES. UPMC WEST SHORE HAS ACHIEVED ITS SECOND CONSECUTIVE MAGNET DESIGNATION FROM THE ANCC MAGNET RECOGNITION PROGRAM IN 2021.

UPMC PINNACLE HOSPITALS' MISSION IS TO SERVE OUR COMMUNITY BY PROVIDING OUTSTANDING PATIENT CARE AND SHAPING TOMORROW'S HEALTH SYSTEM THROUGH CLINICAL AND TECHNOLOGICAL INNOVATION, RESEARCH, AND EDUCATION. UPMC WILL LEAD THE TRANSFORMATION OF HEALTH CARE. THE UPMC MODEL WILL BE NATIONALLY RECOGNIZED FOR REDEFINING HEALTH CARE BY:

-PUTTING OUR PATIENTS, HEALTH PLAN MEMBERS, EMPLOYEES, AND COMMUNITY AT THE CENTER OF EVERYTHING WE DO AND CREATING A MODEL THAT ENSURES THAT EVERY PATIENT GETS THE RIGHT CARE, IN THE RIGHT WAY, AT THE RIGHT TIME, EVERY TIME.

-HARNESSING OUR INTEGRATED CAPABILITIES TO DELIVER BOTH SUPERB STATE-OF-THE-ART CARE TO OUR PATIENTS AND HIGH VALUE TO OUR STAKEHOLDERS.

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-EMPLOYING OUR PARTNERSHIP WITH THE UNIVERSITY OF PITTSBURGH TO ADVANCE
THE UNDERSTANDING OF DISEASE, ITS PREVENTION, TREATMENT AND CURE.

-SERVING THE UNDERSERVED AND DISADVANTAGED AND ADVANCING EXCELLENCE AND
INNOVATION THROUGHOUT HEALTH CARE.

-FUELING THE DEVELOPMENT OF NEW BUSINESSES GLOBALLY THAT ARE CONSISTENT
WITH OUR MISSION AS AN ONGOING CATALYST AND DRIVER OF ECONOMIC
DEVELOPMENT FOR THE BENEFIT OF THE RESIDENTS OF THE REGION.

COMMUNITY HEALTH IMPROVEMENT SERVICES:

TAKING HEALTH CARE BEYOND THE DOORS OF ITS HOSPITALS, CLINICS, AND
OFFICES, AND BRINGING IT INTO THE REGION'S TOWNS, SCHOOLS AND WORKPLACES,
UPMC PINNACLE HOSPITALS' CHARITABLE GIVING AND COMMUNITY INITIATIVES ARE
MAKING A DIFFERENCE IN THE HEALTH AND WELL-BEING OF OUR NEIGHBORS.

SUPPORTING AND SERVING THE COMMUNITY REMAINS A HIGH PRIORITY FOR UPMC
PINNACLE HOSPITALS. UPMC PINNACLE HOSPITALS CONDUCTED COMMUNITY HEALTH
NEEDS ASSESSMENTS CHNAS, IN COMPLIANCE WITH INTERNAL REVENUE CODE
SECTION 501(R) REQUIREMENTS. INCORPORATING INPUT FROM COMMUNITY
STAKEHOLDERS AND PUBLIC HEALTH EXPERTS, THESE ASSESSMENTS HELP IDENTIFY
ACTIONS AND CREATE IMPLEMENTATION PLANS TO IMPROVE COMMUNITY HEALTH.
THE HOSPITALS ARE MAKING MEASURABLE PROGRESS ON EACH OF THEIR HEALTH
INITIATIVES, DEMONSTRATING THEIR CONTINUED COMMITMENT TO IMPROVING

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COMMUNITY HEALTH. WE ARE PROUD TO PROVIDE SERVICES THAT DIRECTLY SUPPORT THE COMMUNITIES WE SERVE, AND TO COLLABORATE WITH AREA BUSINESSES AND ORGANIZATIONS TO INCREASE AWARENESS ON ALL ASPECTS OF HEALTH, INCLUDING OUR PRIORITIES OUTLINED IN EACH OF THE LOCALLY FOCUSED COMMUNITY HEALTH NEEDS ASSESSMENT PLANS. FROM PUBLIC HEALTH AND WELLNESS INITIATIVES TO SCHOOL HEALTH SCREENINGS, INSURANCE ENROLLMENT HELP, HOME-VISIT PROGRAMS, CHARITY CARE, AND FREE HEALTH CLASSES, UPMC PINNACLE PROVIDES BENEFITS TO THE COMMUNITY.

UPMC PINNACLE LANCASTER AFTER CAREFUL ASSESSMENT OF HEALTH CARE SERVICES IN AND AROUND LANCASTER COUNTY, A DECISION WASMADE TO CONSOLIDATE UPMC PINNACLE LANCASTER AND UPMC LITITZ EFFECTIVE 2/28/19. THE HOSPITAL MOVED INPATIENT SERVICES FROM UPMC PINNACLE LANCASTER TO UPMC LITITZ AND COMBINED THE STRENGTHS OF THE OUTSTANDING PATIENT CARE TEAMS FROM BOTH HOSPITALS, UNIFYING EMPLOYEES AND EXPANDING UPMC PINNACLE'S HIGH QUALITY OF INPATIENT CARE AND EFFICIENT OPERATIONS.

UPMC PINNACLE (UPMC IN CENTRAL PA.) ENCOMPASSES 1,226 LICENSED BEDS, HAS SEVEN ACUTE CARE HOSPITALS AND OFFERS THE HELEN M. SIMPSON REHAB HOSPITAL, A 55-BED INPATIENT REHAB HOSPITAL JOINTLY OWNED WITH SELECT MEDICAL.

UPMC IN CENTRAL PA OFFERS ACCESS TO MORE THAN 200 OUTPATIENT LOCATIONS, INCLUDING PRIMARY AND SPECIALTY CARE, UPMC URGENT CARE CENTERS, AND UPMC HILLMAN CANCER CENTERS. UPMC HAS MORE THAN 13,000 EMPLOYEES, INCLUDING

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MORE THAN 3,100 PHYSICIANS AND ALLIED HEALTH PROFESSIONALS.

DURING FISCAL YEAR 2025, UPMC IN CENTRAL PA ADMITTED 53,000 INPATIENTS,
AND RECORDED MORE THAN RECORDED 267,000 INPATIENT DAYS, 239,000 EMERGENCY
ROOM VISITS, 1.5 MILLION OUTPATIENT, 56,000 SURGERIES 5,600
BIRTHS/DELIVERIES, 77 TRANSPLANTS, AND PARTICIPATED IN MORE THAN 400
CLINICAL TRIALS.

UPMC IN CENTRAL PA PROVIDED CHARITY CARE AND OTHER UNCOMPENSATED CARE,
INCLUDING MEDICAID AND MEDICARE SHORTFALLS, AT A COST OF OVER \$6,655,000.
THE COMMUNITIES SERVED BY UPMC IN CENTRAL PA'S MEMBER ORGANIZATIONS ARE
IN AN ECONOMICALLY DISTRESSED AND MEDICALLY UNDERSERVED AREA. IN THE YEAR
ENDED JUNE 30, 2025, UPMC IN CENTRAL PA PROVIDED FUNDING FOR EDUCATION
AND RESEARCH AT A COST OF APPROXIMATELY \$32,114,000.

PART V STATEMENTS REGARDING OTHER IRS FILINGS AND TAX COMPLIANCE

PART V, LINE 15

UPMC IS NOT REPORTING A SECTION 4960 EXCISE TAX LIABILITY ON FORM 4720
RELATED TO PAYMENTS OF \$1 MILLION OR MORE IN REMUNERATION OR EXCESS
PARACHUTE PAYMENTS FOR ITS TAX YEAR ENDED JUNE 30, 2025. REMUNERATION IS
NOT TAKEN INTO ACCOUNT FOR THE PURPOSES OF THE EXCISE TAX IF NO DEDUCTION
FOR THE REMUNERATION IS ALLOWED BY REASON OF SECTION 162(M). SECTION
162(M) (6) IMPOSES A COMPENSATION DEDUCTION LIMITATION ON CONTROLLED
GROUPS, SUCH AS THE UPMC CONTROLLED GROUP, THAT INCLUDE ONE OR MORE
COVERED HEALTH INSURANCE PROVIDERS.

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UPMC PARENT BOARD. THE UPMC PARENT BOARD HAS A MAJORITY OF MEMBERS THAT ARE INDEPENDENT (75%). PLEASE SEE THE UPMC PARENT FORM 990 (EIN 25-1423657) FOR MORE INFORMATION.

PART VI GOVERNANCE, MANAGEMENT, AND DISCLOSURE

SECTION A:

QUESTION 1A AND 1B: THE NUMBER REPORTED ON LINE 1A REPRESENTS THE NUMBER OF INDIVIDUALS ON THE UPMC BOARD OF DIRECTORS AS OF JUNE 30, 2025 AND THEREFORE MIRRORS NUMBER REPORTED ON THE UPMC FORM 990 (EIN: 25-1423657). UPMC IS CENTRAL PARENT ORGANIZATION OF THE UPMC GROUP RULING AND IS THE SOLE MEMBER, WHETHER DIRECTLY OR INDIRECTLY THROUGH OTHER SUBSIDIARIES, OF EACH OF THE 87 SUBORDINATE ORGANIZATIONS INCLUDED IN THE UPMG GROUP FORM 990. EACH OF THESE 87 SUBORDINATE ORGANIZATIONS HAVE BYLAWS PROVISIONS THAT RESERVE ALL GOVERNANCE AUTHORITY TO UPMC. THEREFORE, FOR THE PURPOSES OF PART VI, LINE 1A, THE UPMC BOARD OF DIRECTORS IS THE GOVERNING BODY OF EACH OF THE 87 SUBORDINATE ORGANIZATIONS INCLUDED IN THE UPMC GROUP FORM 990 AND THOSE THAT SIT ON SUCH BOARD OF DIRECTORS ARE THE VOTING MEMBERS OF SUCH GOVERNING BODY. AS OF JUNE 30, 2025, 18, OR 75%, OF THE 24 UPMC BOARD MEMBERS ARE CONSIDERED INDEPENDENT AS REFLECTED ON LINE 1B.

QUESTION 2: MULTIPLE UPMC OFFICERS, DIRECTORS, TRUSTEES, AND/OR KEY EMPLOYEES HAVE RELATIONSHIPS BY VIRTUE OF THE FACT THAT THEY ARE ALSO OFFICERS, DIRECTORS, TRUSTEES, AND/OR KEY EMPLOYEES OF UPMC SUBSIDIARIES AND AFFILIATES. THESE RELATIONSHIPS ARE NOT SEPARATELY DISCLOSED BELOW BECAUSE THEY ARE NOT "BUSINESS RELATIONSHIPS" FOR THE PURPOSES OF THE

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QUESTION 6: UPMC GROUP ENTITIES HAVE AN ULTIMATE SOLE CORPORATE MEMBER,
UPMC (EIN: 25-1423657). PER THE UPMC GROUP ENTITIES' BYLAW, ALL
GOVERNANCE AUTHORITY IS RESERVED TO UPMC. THIS INCLUDES, BUT IS NOT
LIMITED TO, APPOINTING THE UPMC GROUP ENTITIES' BOARDS OF DIRECTORS AND
INITIATING, APPROVING OR OVERTURNING ALL CORPORATE ACTIONS TAKEN BY THE
UPMC GROUP ENTITIES.

QUESTION 7A AND B: UPMC (EIN: 25-1423657), AS THE ULTIMATE SOLE CORPORATE
MEMBER OF THE UPMC GROUP ENTITIES, HAS RESERVED TO ITSELF ALL GOVERNANCE
AUTHORITY RELATED TO THE UPMC GROUP ENTITIES PER THE GROUP ENTITIES'
BYLAWS AND IS THEREFORE CONSIDERED THE UPMC GROUP ENTITIES' GOVERNING
BODY. THIS INCLUDES, BUT IS NOT LIMITED TO, APPOINTING THE UPMC GROUP
ENTITIES' BOARDS OF DIRECTORS AND INITIATING, APPROVING OR OVERTURNING ALL
CORPORATE ACTIONS TAKEN BY THE UPMC GROUP ENTITIES.

SECTION B: POLICIES

QUESTION 11A & B: UPMC IS THE PARENT ORGANIZATION OF THE FILING ENTITY,
GROUP, AND HAS, WITH RESPECT TO MOST ENTITIES IN THE GROUP, THE
DISCRETION AND AUTHORITY TO INITIATE OR VETO ACTIONS TAKEN BY GROUP
MEMBER GOVERNING BODIES. WITH RESPECT TO THE REMAINING MEMBERS, UPMC'S
AUTHORITY IS LIMITED SLIGHTLY BUT STILL SIGNIFICANT, ENCOMPASSING MAJOR
MATTERS INCLUDING FINANCIAL AND TAX MATTERS. THE COMPLETED GROUP FORM

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990 WAS REVIEWED BY THE UPMC CHIEF FINANCIAL OFFICER, MEMBERS OF THE CORPORATE TAX DEPARTMENT, MEMBERS OF THE CORPORATE LEGAL DEPARTMENT, AND OTHER MEMBERS OF UPMC'S MANAGEMENT PRIOR TO ITS FILING. VARIOUS SECTIONS OF THE 990 WERE ALSO REVIEWED BY THE CHIEF EXECUTIVE OFFICER OF UPMC AND COMMITTEES OF UPMC'S BOARD OF DIRECTORS, AS APPLICABLE. FOR EXAMPLE, THE EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD REVIEWED SECTIONS RELATED TO COMPENSATION AND RELATED PARTY TRANSACTIONS. IN ADDITION, THE BOARD OF DIRECTORS ESTABLISHED A 990 SUBCOMMITTEE, COMPRISED OF THE CHAIRS OF THE UPMC BOARD, EXECUTIVE COMPENSATION COMMITTEE, AUDIT AND COMPLIANCE COMMITTEE, AND FINANCE COMMITTEE, WHICH REVIEWED THE ENTIRE COMPLETED FORM 990.

ADDITIONALLY THE FORM 990 IS REVIEWED BY AN OUTSIDE INDEPENDENT PUBLIC ACCOUNTING FIRM WHO AS PART OF THE PROCESS SIGNS THE RETURN AS PAID PREPARER. AFTER THIS REVIEW BUT PRIOR TO FILING, THE FULL UPMC BOARD OF DIRECTORS WAS NOTIFIED THAT THE COMPLETED FORM 990 WAS AVAILABLE FOR REVIEW ON THE BOARD'S SECURE WEBSITE. ALSO PRIOR TO FILING, MANAGEMENT PROVIDED THE OPPORTUNITY FOR ALL BOARD MEMBERS OF THE FULL UPMC BOARD TO ASK ANY QUESTIONS OR RAISE ANY COMMENTS ON THE FULL RETURN THEY WERE PROVIDED.

QUESTION 12C: UPMC REQUIRES KEY EMPLOYED AND NON-EMPLOYED PERSONNEL TO COMPLY WITH ITS CONFLICT OF INTEREST POLICIES WHEN THEY ENGAGE IN UPMC-RELATED BUSINESS. PERSONS COVERED BY THE POLICIES INCLUDE:

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-UPMC BOARD MEMBERS, BOARD COMMITTEE MEMBERS, CORPORATE OFFICERS, AND KEY
EMPLOYEES

-UPMC PHYSICIANS AND NON-PHYSICIAN EMPLOYEES WHO HOLD A POSITION OF
INFLUENCE

-IDENTIFIED NON-EMPLOYED MEMBERS OF THE UPMC MEDICAL STAFF WHO HOLD A
POSITION OF INFLUENCE OR TRUST-INDIVIDUALS CONDUCTING CLINICAL RESEARCH
AT UPMC, WHETHER OR NOT THEY ARE EMPLOYED BY UPMC.

THESE INDIVIDUALS ARE REQUIRED TO COMPLETE A QUESTIONNAIRE AT LEAST
ANNUALLY, WHICH ALONG WITH OTHER DATA IS USED TO IDENTIFY POSSIBLE
INDIVIDUAL AND INSTITUTIONAL CONFLICTS OF INTEREST. IF A POTENTIAL
CONFLICT IS IDENTIFIED REGARDING A SPECIFIC UPMC ACTIVITY, THE CORPORATE
COMPLIANCE DEPARTMENT, WITH THE ASSISTANCE OF THE LEGAL DEPARTMENT,
EITHER DEVELOPS A WRITTEN PLAN DESIGNED TO PREVENT THE CONFLICT FROM
INFLUENCING DECISIONS RELATED TO THAT ACTIVITY, OR REQUIRES THAT THE
CONFLICTING RELATIONSHIP BE DIVESTED, AS APPROPRIATE. FOR EMPLOYED
PERSONNEL AND NON-BOARD MEMBER, NON EMPLOYED PERSONNEL, THE CONFLICT OF
INTEREST IDENTIFICATION AND MANAGEMENT PROCESS IS ULTIMATELY OVERSEEN BY
AN ETHICS AND COMPLIANCE COMMITTEE OF THE UPMC BOARD OF DIRECTORS ON
BEHALF OF UPMC AND ALL OF ITS SUBSIDIARIES. POTENTIAL CONFLICT OF
INTEREST TRANSACTIONS INVOLVING UPMC BOARD MEMBERS AND ENTITIES WITH
WHICH THEY ARE AFFILIATED ARE MONITORED AND SUBJECT TO PRE APPROVAL BY
THE GOVERNANCE AND NOMINATING COMMITTEE OF THE UPMC BOARD OF DIRECTORS.
IN ADDITION TO THE GENERAL CORPORATE AND BOARD POLICIES DESCRIBED ABOVE,
UPMC HAS ALSO DEVELOPED AND IMPLEMENTED A SEPARATE TAX QUESTIONNAIRE

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DISTRIBUTED TO OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES ANNUALLY THAT SPECIFICALLY ADDRESSES DISCLOSURE REQUIREMENTS OF FORM 990.

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QUESTION 15A AND B: TO SUPPORT UPMC'S MISSION AND AS SET FORTH IN THE UPMC BYLAWS, THE BOARD OF DIRECTORS HAS FORMED AN EXECUTIVE COMPENSATION COMMITTEE ("COMMITTEE") AND DELEGATED TO IT THE RESPONSIBILITY FOR ESTABLISHMENT AND IMPLEMENTATION OF OFFICER AND KEY EMPLOYEE TOTAL COMPENSATION PROGRAMS. AS PART OF THIS RESPONSIBILITY THE COMMITTEE REPORTS REGULARLY TO THE BOARD OF DIRECTORS. WITH BOARD OF DIRECTORS APPROVAL, THE COMMITTEE HAS ADOPTED A FORMAL CHARTER, WHICH INCLUDES THE ESTABLISHMENT OF A COMPENSATION PHILOSOPHY AND RELATED POLICIES WITH RESPECT TO THE TOTAL COMPENSATION PAID BY UPMC TO ITS OFFICERS AND KEY EMPLOYEES. THE UPMC TOTAL COMPENSATION PROGRAM FOR OFFICERS AND KEY EMPLOYEES IS PREDICATED UPON AN INCENTIVE COMPENSATION COMPONENT. THIS COMPONENT IS BASED UPON THE ACCOMPLISHMENT OF PREDETERMINED PERFORMANCE GOALS AND OBJECTIVES WHICH FOCUS ON THE ACHIEVEMENT OF MULTIPLE ANNUAL AND THREE YEAR INDIVIDUAL AND GROUP PERFORMANCE CRITERIA IN THE CONTEXT OF APPROPRIATE RISK TAKING. THESE CRITERIA DIRECTLY SUPPORT UPMC'S MISSION AND INCLUDE: PATIENT QUALITY AND SATISFACTION, COMMUNITY BENEFITS, OPERATIONAL AND FINANCIAL STRENGTH, LEADERSHIP DEVELOPMENT, AND STRATEGIC BUSINESS INITIATIVES AMONG OTHERS. THE TOTAL COMPENSATION PROGRAM IS INTEGRATED WITH AND REINFORCES THE UPMC BUSINESS PLANNING CYCLE AS WELL AS MANAGEMENT DEVELOPMENT AND SUCCESSION PLANNING PROCESSES. IT IS THE COMMITTEE'S JUDGMENT THAT THE STRUCTURE OF THE TOTAL COMPENSATION PROGRAM IS VITAL TO, AND STRONGLY SUPPORTIVE OF, THE HIGH

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LEVEL OF ONGOING SUCCESS OF UPMC AND FOSTERS THE RETENTION OF CRITICAL OFFICER AND KEY EMPLOYEE TALENT. THE TOTAL COMPENSATION DETERMINATION PROCESS UTILIZED BY THE COMMITTEE IS INTENDED TO SATISFY THE "REBUTTABLE PRESUMPTION OF REASONABLENESS" AS SET FORTH IN THE REGULATIONS TO SECTION 4958 OF THE INTERNAL REVENUE CODE ("CODE"). THIS MEANS THAT COMPENSATION PROGRAMS AND LEVELS ARE APPROVED IN ADVANCE BY THE COMMITTEE WHICH IS COMPOSED ENTIRELY OF OUTSIDE DIRECTORS WHO DO NOT HAVE A CONFLICT OF INTEREST, AS DEFINED BY THE RELEVANT REGULATIONS, WITH RESPECT TO THE COMPENSATION PROGRAM AND LEVELS. THE COMMITTEE OBTAINS AND RELIES UPON A BROAD RANGE OF APPROPRIATE DATA AS TO COMPARABILITY PRIOR TO MAKING ITS DETERMINATIONS. THE COMMITTEE THEN CONTEMPORANEOUSLY DOCUMENTS, IN FORMAL MEETING MINUTES, THE BASIS AND REASONS FOR ITS DETERMINATIONS. THE TOTAL COMPENSATION PROGRAM IS DESIGNED AND ADMINISTERED IN ACCORDANCE WITH THE UPMC BYLAWS, SOUND BUSINESS PRACTICES, THE TENETS OF COMMON LAW BUSINESS JUDGMENT AND FIDUCIARY RESPONSIBILITY AS WELL AS ADHERENCE TO ALL RELEVANT FEDERAL, STATE AND LOCAL LAWS. IN ADDITION TO CODE SECTION 4958, AS SET FORTH ABOVE, THIS INCLUDES BUT IS NOT LIMITED TO CODE SECTION 501(C)(3) AND THE APPLICABLE REGULATIONS THEREUNDER AS WELL AS ALL LAWS AND REGULATIONS PROHIBITING PRIVATE INUREMENT, PRIVATE BENEFIT TRANSACTIONS AND DISCRIMINATION. FURTHER, THE COMMITTEE HAS IDENTIFIED AND ADOPTED, AS APPROPRIATELY MODIFIED FOR UPMC, COMPENSATION PROGRAM "BEST PRACTICES" FROM THE BUSINESS WORLD (E.G. SARBANES OXLEY, SEC, ETC.). THE COMMITTEE BELIEVES THAT WHILE THESE PRACTICES ARE NOT REQUIRED IN THE TAX EXEMPT SECTOR, THEY ARE IN THE BEST INTERESTS OF THE ORGANIZATION AND FURTHER

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Name of the organization

UPMC GROUP

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SUPPORT UPMC'S NONPROFIT MISSION. IN ACCORDANCE WITH THE ABOVE,
DETERMINATION OF TOTAL COMPENSATION FOR THE CEO IS MADE EXCLUSIVELY BY
THE COMMITTEE. DETERMINATION OF TOTAL COMPENSATION FOR OTHER OFFICERS AND
KEY EMPLOYEES IS RECOMMENDED BY THE CEO AND SUBJECT TO REVIEW AND
APPROVAL BY THE COMMITTEE. THE COMMITTEE, WHICH MEETS AT LEAST FOUR
TIMES A YEAR, OBTAINS PROFESSIONAL ADVICE FROM ITS OWN EXPERTS, INCLUDING
ACCOUNTANTS, EXECUTIVE COMPENSATION CONSULTANTS AND LEGAL COUNSEL.

QUESTION 16A AND B: UPMC HAS A FORMAL WRITTEN POLICY PERTAINING TO JOINT
VENTURES BETWEEN UPMC TAX-EXEMPT ENTITIES AND TAXABLE ENTITIES. THE
POLICY EMPLOYS AN INTERNAL PROCEDURE FOR REVIEW OF ALL TRANSACTIONS
INVOLVING POTENTIAL PARTICIPATION IN JOINT VENTURES AND SIMILAR
ARRANGEMENTS TO ENSURE THAT SUCH ENTITIES OPERATE IN ACCORDANCE WITH
APPLICABLE IRS POLICIES AND WITHIN UPMC'S CHARITABLE PURPOSES.
ARRANGEMENTS TO ENSURE THAT SUCH ENTITIES OPERATE IN ACCORDANCE WITH
APPLICABLE IRS POLICIES AND WITHIN UPMC'S CHARITABLE PURPOSES.

PART VII COMPENSATION OF OFFICERS, DIRECTORS, TRUSTEES, KEY EMPL

SECTION C: DISCLOSURE

QUESTION 19: UPMC'S PUBLIC WEBSITE (WWW.UPMC.COM) MAKES ITS FINANCIAL
RESULTS, CONFLICT OF INTEREST PROCESS, AND VARIOUS INFORMATION ABOUT THE
GOVERNANCE AND OVERSIGHT AVAILABLE TO THE PUBLIC. ADDITIONAL INFORMATION
MAY BE SUPPLIED UPON SPECIFIC REQUEST FOR DATA NOT POSTED TO THE WEBSITE.

PART VII COMPENSATION OF OFFICERS, DIRECTORS, TRUSTEES, KEY EMPL

PART VII SECTION A

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THE 3-DIGIT ALPHA CODE LISTED BESIDE EACH NAME DISCLOSED AS AN OFFICER,
DIRECTOR OR KEY EMPLOYEE IS INDICATIVE OF THE UPMC GROUP MEMBER ENTITY
FOR WHICH THE DISCLOSURE IS MADE. UPMC GROUP ENCOMPASSES 87 SUBORDINATE
ENTITIES AS WELL AS THE GROUP SPONSOR, UPMC. UPMC, THE SPONSOR OF THE
UPMC GROUP, HAS DULY ELECTED FOR ITS OFFICERS, DIRECTORS AND KEY
EMPLOYEES TO BE DISCLOSED ON UPMC GROUP'S 990.

	CODE	LEGAL ENTITY
1	ALF	UPMC ALTOONA FOUNDATION
2	ALT	UPMC ALTOONA
3	APH	UPMC ALTOONA PARTNERSHIP FOR A HEALTHY COMMUNITY
4	APP	UPMC ADVANCED PRACTICE PROVIDERS
5	ASC	UPMC AMBULATORY SURGERY CENTER
6	AUE	AUUE INC
7	BDF	UPMC BEDFORD
8	BHA	UPMC BEHAVIORAL HEALTH OF THE ALLEGHENIES
9	BHM	BUTLER HEALTH SYSTEM/UPMC MUSCULOSKELETAL JV INC
10	BHO	UPMC OB/GYN JOINT VENTURE INC
11	CAC	CHILDRENS ADVOCACY CENTER OF LAWRENCE COUNTY
12	CAR	UPMC CARLISLE
13	CCB	COMMUNITY CARE BEHAVIORAL HEALTH ORGANIZATION
14	CCH	CHARLES COLE MEMORIAL HOSPITAL
15	CEM	CENTER FOR EMERGENCY MEDICINE OF WESTERN PA

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16	CHP	UPMC CHILDREN'S HOSPITAL OF PITTSBURGH
17	CHS	UPMC CHAUTAUQUA SERVICES INC
18	CLT	COMMUNITY LIFE TEAM
19	CMI	UPMC COMMUNITY MEDICINE INC
20	COL	COLE FOUNDATION INC
21	CPF	CENTRAL PENNSYLVANIA MEDICAL FOUNDATION INC
22	CPS	UPMC COMMUNITY PROVIDER SERVICES
23	CRP	CRANBERRY PLACE
24	DVP	DIVINE PROVIDENCE HOSPITAL OF THE SISTERS OF CHRISTIAN CHARITY
25	EAS	UPMC EAST
26	EMI	UPMC EMERGENCY MEDICINE INC
27	EPN	ERIE PHYSICIANS NETWORK - UPMC INC
28	ESS	UPMC EAST SIDE SURGERY CENTER
29	FYO	UPMC FOR YOU
30	HAN	UPMC HANOVER
31	HCM	UPMC HOME CARE MANAGEMENT SERVICES
32	HHP	HANOVER HEALTHCARE PLUS INC
33	HHC	UPMC HOME HEALTHCARE OF WESTERN PENNSYLVANIA
34	HMT	UPMC HAMOT
35	HCV	HAMOT COLE VENTURES
36	HNA	HOME NURSING AGENCY AFFILIATES
37	HNF	HOME NURSING AGENCY FOUNDATION
38	HNV	UPMC HOME HEALTHCARE OF CENTRAL PENNSYLVANIA
39	HRF	UPMC HORIZON COMMUNITY HEALTH FOUNDATION

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40	HRZ	UPMC HORIZON
41	GRE	UPMC GREENE
42	IHI	UPMC INTERNATIONAL HOLDINGS INC
43	JAM	UPMC JAMESON
44	JHF	JAMESON HEALTHCARE FOUNDATION
45	JMC	JAMESON MEDICAL CARE INC
46	KAN	UPMC KANE
47	LAN	UPMC LANCASTER
48	LIT	UPMC LITITZ
49	LHS	LAUREL HEALTH SYSTEM
50	LOC	UPMC LOCUM CLINICIANS
51	MAG	UPMC MAGEE - WOMENS HOSPITAL
52	MCK	UPMC MCKEESPORT
53	MEM	UPMC MEMORIAL
54	MER	UPMC MERCY
55	MUN	UPMC MUNCY
56	MYC	MON YOUGH COMMUNITY SERVICE INC
57	NWH	UPMC NORTHWEST
58	OVI	UPMC OVERSEAS INC
59	PDF	UPMC PINNACLE FOUNDATION
60	PHM	PINNACLE HEALTH MEDICAL SERVICES
61	PHR	PINNACLE HEALTH REGIONAL PHYSICIANS
62	PHO	UPMC PINNACLE HOSPITALS
63	PIN	UPMC PINNACLE
64	PRY	UPMC PRESBYTERIAN SHADYSIDE

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65	PSV	UPMC PASSAVANT
66	RHS	REGIONAL HEALTH SERVICES INC
67	SCH	SOMERSET COMMUNITY HOSPITAL FOUNDATION
68	SCS	SUGAR CREEK STATION
69	SHB	SAFE HARBOR BEHAVIORAL HEALTH OF UPMC HAMOT
70	SHF	SUSQUEHANNA HEALTH FOUNDATION
71	SHS	SUSQUEHANNA HEALTH SYSTEM INNOVATION CENTER INC
72	SMH	UPMC ST MARGARET
73	SOH	SOMERSET HEALTH SERVICES INC
74	SPS	SUSQUEHANNA PHYSICIAN SERVICES
75	SOM	UMPC SOMERSET
76	SUS	UPMC SUSQUEHANNA
77	THS	THE HERITAGE SHADYSIDE
78	TLC	TWIN LAKES CENTER INC
79	UHC	UPMC MEDICAL EDUCATION
80	ULH	UPMC LOCK HAVEN
81	UPC	UNIVERSITY OF PGH CANCER INSTITUTE CANCER SERVICES
82	UPM	UPMC
83	UPP	UNIVERSITY OF PITTSBURGH PHYSICIANS
84	UTS	UPMC TRAVEL STAFFING
85	WAS	UPMC WASHINGTON
86	WEL	UPMC WELLSBORO
87	WIL	UPMC WILLIAMSPORT
88	WMG	UPMC WEST MIFFLIN GI

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HIGHEST COMPENSATED EMPLOYEES AND INDEPENDENT CONTRACTORS

PURSUANT TO TREASURY REGULATION SECTION 1.6033-2(D)(5) THE SPONSORING ENTITY OF UPMC GROUP, UPMC, HAS ELECTED TO REPORT INFORMATION ABOUT CONTRIBUTIONS, GIFTS, GRANTS AND SIMILAR AMOUNTS RECEIVED; INFORMATION ABOUT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES; CERTAIN OTHER HIGHLY PAID EMPLOYEES; CERTAIN PROFESSIONAL CONTRACTORS; AND CERTAIN OTHER CONTRACTORS ON A CONSOLIDATED BASIS ALONG WITH ALL MEMBERS OF THE GROUP IN THE UPMC GROUP RETURN. THE COMPENSATION AMOUNTS LISTED REPRESENT THE FULL AND COMPLETE COMPENSATION PACKAGES PAID TO THE INDIVIDUALS FOR PERFORMING THEIR ASSIGNED DUTIES AT UPMC. A PORTION OF THE COMPENSATION DISCLOSED MAY RELATE TO EARNED AND PREVIOUSLY REPORTED DEFERRED COMPENSATION. A PORTION OF THE BENEFITS DISCLOSED MAY RELATE TO EARNED BUT UNPAID DEFERRED COMPENSATION. ALL SALARIES AND BENEFITS REPORTED ARE BASED ON INDIVIDUALS' OPERATIONAL POSITIONS AND ARE NOT FOR SERVICES PERFORMED AS DIRECTORS OR BOARD MEMBERS. BOARD POSITIONS ARE ALL VOLUNTEER AND UNPAID.

PART VII OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES INDIVIDUALS THAT HOLD REPORTING POSITIONS WITH MORE THAN ONE ORGANIZATION ARE LISTED SEPARATELY IN PART VII WITH REGARD TO EACH ENTITY. INDIVIDUALS ARE COMPENSATED FOR OPERATIONAL ROLES ONLY, NOT FOR DUTIES PERFORMED AS DIRECTORS OR BOARD MEMBERS. COMPENSATION DISCLOSED FOR PERSONS WHOSE ROLE IS LISTED AS BOARD MEMBER IS COMPENSATION FROM THE SAME OR RELATED ORGANIZATION FOR AN OPERATIONAL ROLE AND NOT FOR THE DISCLOSED PERSON'S

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ROLE AS A BOARD MEMBER. ALL BOARD POSITIONS FOR ALL GROUP ENTITIES ARE VOLUNTARY AND UNPAID.

THE TOTAL HOURS DISCLOSED IN PART VII RELATES TO THE POSITION FOR WHICH THE PERSON IS DISCLOSED EXCEPT IN THE CASE WHERE THE PERSON IS ALSO EMPLOYED BY ANY UPMC GROUP MEMBER ENTITY. IN SUCH CASE, THE HOURS REFLECT AVERAGE HOURS SPENT IN THEIR OPERATIONAL ROLE. FOR PURPOSES OF DISCLOSURE AVERAGE HOURS PER WEEK FOR A FULL TIME PERSON IS LISTED AS 40 HOURS, HOWEVER, IN ALMOST ALL CASES, THIS IS A CONSERVATIVE ESTIMATE AND MOST WORK HOURS IN EXCESS OF 40 PER WEEK.

FOR FISCAL YEAR 2025, IT WAS DETERMINED THAT INDIVIDUALS THAT SERVE ON THE BOARD OF DIRECTORS FOR EACH OF THE 87 ORGANIZATIONS INCLUDED IN THE UPMC GROUP FORM 990 ARE NOT DIRECTORS UNDER THE FORM 990 DEFINITION DUE TO THE FACT THAT THESE ORGANIZATIONS' BYLAWS RESERVE ALL GOVERNANCE AUTHORITY TO UPMC (25-1423657), THE ULTIMATE PARENT OF THESE ORGANIZATIONS AND THE CENTRAL PARENT ORGANIZATION OF THE UPMC GROUP RULING. ALTHOUGH THIS APPLIES TO UNIVERSITY OF PITTSBURGH PHYSICIANS ("UPP"), MEMBERS OF UPP'S BOARD OF DIRECTORS ARE REPORTED AS DIRECTORS FOR FISCAL YEAR 2025 (1) DUE TO THE FACT UPP'S BYLAWS RESERVE CERTAIN APPROVAL POWERS TO A SUBSET OF THE UPMC BOARD OF DIRECTORS, THUS PUTTING UPP IN A DIFFERENT CLASS THAN THE OTHER 86 UPMC GROUP ORGANIZATIONS, AND (2) IN THE INTEREST OF CONTINUED TRANSPARENCY SINCE UPP BOARD OF DIRECTORS IS COMPRISED LARGELY OF PHYSICIANS THAT ARE EMPLOYED BY UPP. ALSO, MEMBERS OF THE BOARDS OF DIRECTORS FOR THE FOLLOWING ORGANIZATIONS

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ARE BEING REPORTED AS DIRECTORS FOR FISCAL YEAR 2025 BECAUSE FOR PART OF
FISCAL YEAR 2025, THE BOARDS OF SUCH ENTITIES HELD A GREATER DEGREE OF
GOVERNANCE AUTHORITY THAN THEY HELD AT THE END OF FISCAL YEAR 2025, THUS
MAKING SUCH BOARD MEMBERS DIRECTORS PER THE FORM 990 DEFINITION FOR A
PORTION OF FISCAL YEAR 2025:

HANOVER HEALTHCARE PLUS

PINNACLE HEALTH MEDICAL SERVICES

PINNACLE HEALTH REGIONAL PHYSICIANS

UPMC CARLISLE

UPMC HANOVER

UPMC LITITZ

UPMC MEMORIAL

UPMC PINNACLE

UPMC PINNACLE FOUNDATION

UPMC PINNACLE HOSPITALS

BEGINNING IN FISCAL YEAR 2026, THE FIRST FULL YEAR WHEN THE AUTHORITY OF
THE BOARDS LISTED IMMEDIATELY ABOVE WILL BE CONSIDERED ADVISORY, THE
MEMBERS OF THESE BOARDS WILL NO LONGER BE REPORTED AS DIRECTORS.

PART XI RECONCILIATION OF NET ASSETS

PART XI RECONCILIATION OF NET ASSETS

ADDITION OF NEW GROUP MEMBERS	3,835,027,512
OTHER INCREASES/DECREASES IN FUND BALANCE	220,522,448
PARTNERSHIP/JV INVESTMENTS	50,740,813

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CHANGE IN BENEFICIAL INTEREST	30,447,328
NET TRANSFERS FROM EXEMPT PARENT	18,934,282
CURRENCY ADJUSTMENT	(3,146,503)
NET RESTRICTED SPF ACTIVITY	(38,225,857)
NET TRANSFERS TO EXEMPT AFFILIATES	(52,308,928)
TOTAL	4,061,991,095

PART XII FINANCIAL STATEMENTS

QUESTION 2B

AN EXTERNAL AUDIT IS COMPLETED AT A CONSOLIDATED UPMC SYSTEM LEVEL ONLY, INCLUDING UPMC AND ALL TAXABLE AND TAX-EXEMPT SUBSIDIARIES. THE ENTIRE SYSTEM'S FINANCIAL STATEMENTS, WHICH INCLUDES ALL SUBORDINATE MEMBERS OF THE UPMC GROUP, ARE POSTED ON THE UPMC WEBSITE. (WWW.UPMC.COM) THE FINANCIAL STATEMENT AUDIT DURING THE 990 FILING PERIOD IS FOR THE CALENDAR YEAR ENDED DECEMBER 31, 2024.

UPMC HAS AN AUDIT COMMITTEE THAT IS ESTABLISHED TO ASSIST THE BOARD OF DIRECTORS IN FULFILLING ITS OVERSIGHT RESPONSIBILITIES BY MONITORING UPMC CONSOLIDATED FINANCIAL REPORTS AND OTHER FINANCIAL INFORMATION PROVIDED BY UPMC TO GOVERNMENTAL BODIES, THE PUBLIC OR OTHER EXTERNAL ENTITIES. THE UPMC'S SYSTEM OF INTERNAL CONTROLS REGARDING FINANCE, ACCOUNTING, LEGAL COMPLIANCE AND ETHICS THAT MANAGEMENT AND THE BOARD HAVE ESTABLISHED AND UPMC'S INTERNAL AUDITING, ACCOUNTING AND FINANCIAL REPORTING PROCESSES ALSO PROVIDED OVERSIGHT.

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FORM 990, PART III - PROGRAM SERVICE

LINE 4A, PROGRAM SERVICE

SEE SCHEDULE O

Name of the organization

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FORM 990, PART VII-COMPENSATION OF THE 5 HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
WHITING-TURNER PJ DICK JV 225 NORTH SHORE DRIVE PITTSBURGH, PA 15212	CONSTRUCT CONTRACTOR	252,216,831.
SHIFTWISE 2999 OLYMPUS BLVD, STE 500 DALLAS, TX 75019	WORKFORCE MANAGEMENT	88,776,477.
MSP SYNCHRONIZED SOLUTIONS LLC 6 CONCOURSE PARKWAY, SUITE 2250 ATLANTA, GA 30328	PHYSICIAN SERVICES	85,524,692.
NORTH AMERICAN PARTNERS IN ANESTHESIA 1300 CONCORD TERRACE, STE 420 SUNRISE, FL 33323	ANESTHESIA SERVICES	50,980,557.
HARMELIN & ASSOCIATES 525 RIGTHERS FERRY ROAD BALA CYNWYD, PA 19004	MEDIA SERVICES	42,402,810.

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FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	ENDING BOOK VALUE	COST OR FMV
PUBLICLY TRADED	89,971,079.	FMV
TOTALS	89,971,079.	

**SCHEDULE R
(Form 990)**

(Rev. December 2024)

Department of the Treasury
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Name of the organization

UPMC GROUP

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

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Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

	(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)	SEE SUPPLEMENTAL PAGE					
(2)						
(3)						
(4)						
(5)						
(6)						

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
							Yes	No
(1)	SEE SUPPLEMENTAL PAGE							
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

PART I - IDENTIFICATION OF DISREGARDED ENTITIES

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) TOTAL INCOME	(E) EOY ASSETS	(F) DIRECT CONTROL
UPMC ITALY S.R.L.		PIAXXA SETT ANGELI 1090134		PALERMO, IT	
	HEALTHCARE	IT	59,632,998.	100029447.	UPMC OVERSEA
UPMC PHYS OPERATIONS & PROF SVCS LLC	47-2803100	600 GRANT STREET		PITTSBURGH, PA 15219	
	INACTIVE	PA	79,203,643.	147658723.	UOP PHYS
UPMC ONCOLOGY TREATMENT PLANNING	46-4936164	600 GRANT STREET		PITTSBURGH, PA 15219	
	ONCOLOGY	PA	NONE	-11,234.	UOP CN SRV
QUALITY FIRST HEALTHCARE LLC	46-0812493	600 GRANT STREET		PITTSBURGH, PA 15219	
	INACTIVE	PA	NONE	NONE	HNA AFFILIAT
COMMUNITY CARE IPA LLC	83-1646473	600 GRANT STREET		PITTSBURGH, PA 15219	
	PHYS NETWORK	PA	NONE	NONE	COMM CARE BE
PENNSYLVANIA PEDIATRIC HEALTH NWK LLC	83-0773278	600 GRANT STREET		PITTSBURGH, PA 15219	
	PHYS NETWORK		NONE	NONE	CHILDREN'S H
CORE NETWORK LLC	25-1786209	600 GRANT STREET		PITTSBURGH, PA 15219	
	HEALTHCARE	PA	115181751.	15,243,892.	UPMC COMM PR
UPMC URGENT CARE MEDICAL GROUP, LLC	99-5118203	600 GRANT STREET		PITTSBURGH, PA 15219	
	HEALTHCARE	PA	NONE	NONE	UPMC COMM ME
UCMG, LLC	33-2461082	3600 FORBES AVE		PITTSBURGH, PA 15213	
	HEALTHCARE	PA	11,805,014.	6,046,404.	UPMC COMM ME
WINGS MSO, LLC	33-1648045	5555 GLENRIDGE CONNECTOR		ATLANTA, GA 30342	
	MANAGEMENT SR	WV	NONE	NONE	UPMC GO HLTH

PART II - IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS

(A) NAME\ADDRESS\EIN	(B) ACTIVITY	(C) LEGAL DOMICILE	(D) EXEMPT CODE	(E) CHARITY STATUS	(F) DIRECT CONTROLLING	(G) SEC 512	
						YES	NO
UPMC SENIOR COMMUNITIES INC. 600 GRANT STREET	25-1574736 PITTSBURGH, PA 15219 SR LIVING	PA	501 (C) (3)	10	UPMC		X
PITTSBURGH LIFETIME CARE COMMUNITY 600 GRANT STREET	25-1335247 PITTSBURGH, PA 15219 CCRC	PA	501 (C) (3)	10	UPMC SR COMM		X
CANTERBURY PLACE 600 GRANT STREET	25-0965334 PITTSBURGH, PA 15219 SR LIVING	PA	501 (C) (3)	10	UPMC SR COMM		X
SENECA PLACE 600 GRANT STREET	72-1562844 PITTSBURGH, PA 15219 SR LIVING	PA	501 (C) (3)	10	UPMC SR COMM		X
SHADYSIDE HOSPITAL SUPPORTING FOUNDATION 600 GRANT STREET	26-0303394 PITTSBURGH, PA 15219 FOUNDATION	PA	501 (C) (3)	12 (A) I	UPMC		X
UPMC LEE 600 GRANT STREET	25-0613830 PITTSBURGH, PA 15219 INACTIVE	PA	501 (C) (3)	3	UPMC		X
PITTSBURGH CARE PARTNERSHIP INC. 600 GRANT STREET	25-1753852 PITTSBURGH, PA 15219 SR SERVICES	PA	501 (C) (3)	10	UPMC		X
UPMC CENTER FOR HIGH VALUE HEALTHCARE 600 GRANT STREET	45-2178782 PITTSBURGH, PA 15219 RESEARCH	PA	501 (C) (3)	7	UPMC		X
SHADYSIDE HOSPITAL FOUNDATION 532 SOUTH AIKEN AVENUE	25-1290546 PITTSBURGH, PA 15232 FOUNDATION	PA	501 (C) (3)	12 (C) III	UPMC PRESBY		X
PASSAVANT HOSPITAL FOUNDATION 9100 BABCOCK BLVD	25-1407815 PITTSBURGH, PA 15237 FOUNDATION	PA	501 (C) (3)	12 (B) II	UPMC PASS		X

(A) NAME\ADDRESS\EIN	(B) ACTIVITY	(C) LEGAL DOMICILE	(D) EXEMPT CODE	(E) CHARITY STATUS	(F) DIRECT CONTROLLING	(G) SEC 512	
						YES	NO
NORTHWEST HOSPITAL FOUNDATION 100 FARFIELD DRIVE	25-1483624 SENECA, PA 16346 FOUNDATION	PA	501 (C) (3)	12 (D) III	UPMC NORTHWE		X
ST. MARGARET FOUNDATION 600 GRANT STREET	25-1520340 PITTSBURGH, PA 15219 FOUNDATION	PA	501 (C) (3)	7	UPMC ST MARG		X
CHILDREN'S HOSPITAL OF PITTSBURGH FND 600 GRANT STREET	25-1865744 PITTSBURGH, PA 15219 FOUNDATION	PA	501 (C) (3)	7	UPMC CHP		X
MAGEE-WOMEN RES INST AND FOUNDATION 600 GRANT STREET	25-1462312 PITTSBURGH, PA 15219 FOUNDATION	PA	501 (C) (3)	7	N/A		X
GREAT LAKES PHYSICIAN PRACTICE P.C. 600 GRANT STREET, 58TH FLOOR	46-4186362 PITTSBURGH, PA 15219 PHYSICIAN SRV	NY	501 (C) (3)	3	REGNL HEALTH		X
HAMOT HEALTH FOUNDATION 302 FRENCH STREET	25-1400999 ERIE, PA 16507 FOUNDATION	PA	501 (C) (3)	12 (B) II	UPMC HAMOT		X
UPMC/JAMESON CANCER CENTER 600 GRANT STREET, 58TH FL	20-1459415 PITTSBURGH, PA 15219 INACTIVE	PA	501 (C) (3)	10	UPMC JAMESON		X
JAMESON CARE CENTER INC. 1211 WILMINGTON AVE	23-2871396 NEW CASTLE, PA 16105 SR LIVING	PA	501 (C) (3)	10	UPMC SR COMM		X
LAUREL REALTY INC. 32-36 CENTRAL AVENUE	23-1403678 WELLSBORO, PA 16901 REAL ESTATE	PA	501 (C) (2)	N/A	UPMC SUSQUEH		X
THE GREEN HOME 37 CENTRAL AVENUE	24-0804365 WELLSBORO, PA 16901 SKILLED NURSI	PA	501 (C) (3)	10	UPMC SUSQUEH		X

(A) NAME\ADDRESS\EIN	(B) ACTIVITY	(C) LEGAL DOMICILE	(D) EXEMPT CODE	(E) CHARITY STATUS	(F) DIRECT CONTROLLING	(G) SEC 512 YES NO
WILLIAMSPORT AREA AMB SERVICE COOP 700 HIGH STREET	23-2416166 WILLIAMSPORT, PA 17701 AMBULANCE SVC	PA	501 (C) (3)	10	UPMC WILLIAM	X
UPMC CHAUTAUQUA AT WCA 207 FOOTE AVENUE	16-0743226 JAMESTOWN, NY 14701 HOSPITAL	NY	501 (C) (3)	3	UPMC CHAUTAU	X
SOUTH CENTRAL ALPHA HOUSING & HEALTH 3410 W PITTSBURG ROAD	25-1701701 NEW CASTLE, PA 16101 SR LIVING	PA	501 (C) (3)	10	UPMC SR COMM	X
SOUTH WESTERN ALPHA HOUSING & HEALTH 745 GREENVILLE ROAD	25-1701700 MERCER, PA 16137 SR LIVING	PA	501 (C) (3)	10	UPMC SR COMM	X
*KANE COMMUNITY HOSPITAL FOUNDATION 4372 ROUTE 6	26-3906925 KANE, PA 16735 FOUNDATION	PA	501 (C) (3)	12 (B) (II)	N/A	X
*LAUREL HEALTH FOUNDATION 32-36 CENTRAL AVENUE	25-1810488 WELLSBORO, PA 16901 FOUNDATION	PA	501 (C) (3)	12 (B) II	N/A	X
W.C.A. FOUNDATION INC. 300 FOOTE AVENUE; P.O. BOX 840	22-2393584 JAMESTOWN, NY 14702 FOUNDATION	PA	501 (C) (3)	12 (C) III	N/A	X
VENANGO V.N.A. FOUNDATION 491 ALLEGHENY BOULEVARD	25-1472179 FRANKLIN, PA 16323 FOUNDATION	PA	501 (C) (3)	12 (D) III	N/A	X
UPMC PINNACLE 409 SOUTH SECOND STREET	25-1778658 HARRISBURG, PA 17104 SUPPORTING OR	PA	501 (C) (3)	12 (B) II	UPMC	X
UPMC CARLISLE 361 ALEXANDER SPRING ROAD	82-0880337 CARLISLE, PA 17105 HOSPITAL	PA	501 (C) (3)	3	UPMC PINNACL	X

(A) NAME\ADDRESS\EIN	(B) ACTIVITY	(C) LEGAL DOMICILE	(D) EXEMPT CODE	(E) CHARITY STATUS	(F) DIRECT CONTROLLING	(G) SEC 512 YES NO
UPMC PINNACLE LANCASTER 250 COLLEGE AVENUE	82-0896436 LANCASTER, PA 17603 HOSPITAL	PA	501 (C) (3)	3	UPMC PINNACL	X
UPMC LITITZ 1500 HIGHLANDS AVENUE	82-0844453 LITITZ, PA 17543 HOSPITAL	PA	501 (C) (3)	3	UPMC PINNACL	X
UPMC MEMORIAL 325 SOUTH BELMONT STREET	82-0912090 YORK, PA 17405 HOSPITAL	PA	501 (C) (3)	3	UPMC PINNACL	X
PINNACLE HEALTH REGIONAL PHYSICIANS 409 SOUTH SECOND STREET	82-0947698 HARRISBURG, PA 17104 PHYSICIAN SRV	PA	501 (C) (3)	3	UPMC PINNACL	X
UPMC PINNACLE FOUNDATION 409 SOUTH SECOND STREET	22-2691718 HARRISBURG, PA 17104 FOUNDATION	PA	501 (C) (3)	12 (B) II	UPMC PINNACL	X
COMMUNITY LIFE TEAM, INC. 409 SOUTH SECOND STREET	23-1890444 HARRISBURG, PA 17104 MED TRANSPORT	PA	501 (C) (3)	7	UPMC PINNACL	X
HANOVER HEALTHCARE PLUS, INC. 300 HIGHLAND AVENUE	22-2658574 HANOVER, PA 17331 SUPPORTING OR	PA	501 (C) (3)	12 (A) (I)	UPMC PINNACL	X
UPMC HANOVER 300 HIGHLAND AVENUE	23-1360851 HANOVER, PA 17331 HOSPITAL	PA	501 (C) (3)	3	HANNOVER HEA	X
UPMC PINNACLE HOSPITALS 409 SOUTH SECOND STREET	25-1778644 HARRISBURG, PA 17104 HOSPITAL	PA	501 (C) (3)	3	UPMC PINNACL	X
PINNACLE HEALTH MEDICAL SERVICES 409 SOUTH SECOND STREET	25-1709054 HARRISBURG, PA 17104 PHYSICIAN SRV	PA	501 (C) (3)	3	UPMC PINNACL	X

(A) NAME\ADDRESS\EIN	(B) ACTIVITY	(C) LEGAL DOMICILE	(D) EXEMPT CODE	(E) CHARITY STATUS	(F) DIRECT CONTROLLING	(G) SEC 512 YES NO
HENDORN INC. 1001 EAST SECOND STREET	23-1972659 COUDERSPORT, PA 16915 RES. CARE	PA	501 (C) (3)	10	C COLE MEM H	X
ASBURY HEIGHTS OF UPMC 600 GRANT STREET	25-1555687 PITTSBURGH, PA 15219 SUPPORTING OR	PA	501 (C) (3)	12 (B) (II)	UPMC SR COMM	X
ASBURY HEALTH CENTER 600 GRANT STREET	25-0969472 PITTSBURGH, PA 15219 CCRC	PA	501 (C) (3)	10	ASBURY HEIGH	X
ASBURY VILLAS 600 GRANT STREET	25-1819952 PITTSBURGH, PA 15219 PERSONAL CARE	PA	501 (C) (3)	10	ASBURY HEIGH	X
ASBURY PLACE 600 GRANT STREET	25-1729266 PITTSBURGH, PA 15219 PERSONAL CARE	PA	501 (C) (3)	10	ASBURY HEIGH	X
WESLEY HILLS 600 GRANT STREET	25-1507472 PITTSBURGH, PA 15219 INDEP LIVING	PA	501 (C) (3)	N/A	ASBURY HEIGH	X
ASBURY FOUNDATION 600 GRANT STREET	25-1555688 PITTSBURGH, PA 15219 FOUNDATION	PA	501 (C) (3)	7	ASBURY HEIGH	X
UPMC WESTERN MARYLAND CORPORATION PO BOX 539	52-0591531 CUMBERLAND, MD 21501 HOSPITAL	MD	501 (C) (3)	3	UPMC	X
WESTERN MARYLAND HEALTH SYSTEM FND PO BOX 539	35-2289841 CUMBERLAND, MD 21501 FOUNDATION	MD	501 (C) (3)	12 (C) III	UPMC WESTERN	X
*HANOVER HOSPITAL FOUNDATION 300 HIGHLAND AVENUE	82-2553293 HANOVER, PA 17331 FOUNDATION	PA	501 (C) (3)	12 (C) III	UPMC PINNACL	X

(A) NAME\ADDRESS\EIN	(B) ACTIVITY	(C) LEGAL DOMICILE	(D) EXEMPT CODE	(E) CHARITY STATUS	(F) DIRECT CONTROLLING	(G) SEC 512	
						YES	NO
RUSH TO CRUSH CANCER 200 LOTHROP STREET	87-4771624 PITTSBURGH, PA 15213 FOUNDATION	PA	501 (C) (3)	7	UOFP CANCER		X
UPMC WESTERN BEHAVIORAL HEALTH 200 LOTHROP STREET	92-3568793 PITTSBURGH, PA 15213 FOUNDATION	PA	501 (C) (3)	7	UPMC PRESBY		X
UPMC AMBULATORY SURGERY CENTER 600 GRANT STREET	99-2460242 PITTSBURGH, PA 15219 SURGERY CENT	PA	501 (C) (3)	3	UPMC		X
UPMC EAST END SURGERY CENTER 5800 CENTRE AVENUE	99-2636583 PITTSBURGH, PA 15206 SURGERY CENT	PA	501 (C) (3)	3	UPMC AMBULAT		X
UPMC WEST MIFFLIN GI 6161 CLAIRTON ROAD	99-2662946 WEST MIFFLIN, PA 15122 SURGERY CENT	PA	501 (C) (3)	3	UPMC AMBULAT		X
BUILD COMMUNITY DEVELOPMENT 100 STATE STREET STW 510	99-0539256 ERIE, PA 16507 FUNDRAISING	PA	501 (C) (3)	7	HAMOT HEALTH		X
AMBULANCE & CHAIR EMS, INC. 75 BRADEN STREET	25-1272075 WASHINGTON, PA 15301 MEDICAL TRANS	PA	501 (C) (3)	10	UPMC GREENE		X
UPMC GREENE 350 BODNAR AVENUE	47-3884840 WAYNESBURG, PA 15301 HOSPITAL	PA	501 (C) (3)	3	UPMC WASHING		X
WASHINGTON SENIOR CARE CORP 600 GRANT STREET	25-1849365 PITTSBURGH, PA 15219 SENIOR LIVING	PA	501 (C) (3)	10	UPMC WASHING		X
UPMC WASHINGTON 155 WILSON AVENUE	25-0965600 WASHINGTON, PA 15301 HOSPITAL	PA	501 (C) (3)	3	UPMC		X

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) SEE SUPPLEMENTAL PAGE												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2) SEE SUPPLEMENTAL PAGE									
(3)									
(4)									
(5)									
(6)									
(7)									

UPMC GROUP

20-8295721

590 SCH R, PART III-IDENTIFICATION OF REL. ORG. TAXABLE AS PARTNERSHIP

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) DIRECT CONTROLLING	(E) PREDOMINANT INCOME	(F) SHARE OF TOT INCOME	(G) SHARE EOY	(H) DISPROPORTIONATE YES NO	(I) CODE V-UBI	(J) PARTNER YES NO	(K) % OWNERSHIP
SENECA HILLS ASSISTED LIVING L 600 GRANT STREET PITTSBURGH, P	ASSISTED LIVI	PA	N/A		37,544.	9,519,298.	X	NONE		100.0000
ST. MARGARET MEDICAL ARTS ASSO 600 GRANT STREET PITTSBURGH, P	MED OFFICE BL	PA	N/A		211,007.	5,277,585.	X	NONE		100.0000
SHADYSIDE MEDICAL CENTER ASSOC 600 GRANT STREET PITTSBURGH, P	MED OFFICE BL	PA	N/A		1,653,439.	29,029,066.	X	NONE		100.0000
CHARTWELL PA LP 25-1729714 600 GRANT STREET PITTSBURGH, P	HOMEHEALTH	PA	UPMC COMM PROV		71,907,733.	344,020,474.	X	NONE		92.4000
LIFE CARE HOME SRV OF NW PA 25 1647 SASSAFRAS STREET ERIE, PA	HOME HEALTH S	PA	UPMC HAMOT		6,313,795.	30,276,991.	X	NONE		100.0000
HAMOT-KCH REAL ESTATE VENTURE 300 STATE STREET ERIE, PA 1650	MEDICAL OFFIC	PA	UPMC HAMOT		-16,729.	326,572.	X	NONE		100.0000
UPMC HAMOT SURGERY CENTER LLC 200 STATE STREET ERIE, PA 1650	AMBULATORY SU	PA	UPMC HAMOT		-277,930.	9,450,769.	X	NONE		81.3449
EPN-HAMOT URGENT CARE LLC 27-2 600 GRANT STREET PITTSBURGH, P	URGENT CARE	PA	VARIOUS		423,598.	3,999,907.	X	NONE		100.0000
*MEDCARE SUSQUEHANNA VALLEY LL 409 SOUTH SECOND STREET HARRIS	DME	PA	PINNACLE HEALTH		755,360.	3,694,478.	X	NONE		75.0000
OMICELLO RE I, LP 47-5603393 3525 LIBERTY AVENUE PITTSBURGH	REAL ESTATE D	DE	UPMC FOR YOU		-1,323,277.	8,206,217.	X	NONE		97.6800

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590 SCH R, PART III-IDENTIFICATION OF REL. ORG. TAXABLE AS PARTNERSHIP

(A) NAME/ADDRESS/EIN	B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) DIRECT CONTROLLING	(E) PREDOMINANT INCOME	(F) SHARE OF TOT INCOME	(G) SHARE EOY	(H) DISPROPORTIONATE YES NO	(I) CODE V-UBI	(J) PARTNER YES NO	(K) OWNERSHIP
BAYFRONT PROFESSIONAL BUILDING 3645 WEST LAKE ROAD ERIE, PA 1	REAL ESTATE	PA	UPMC HAMOT		51,328.	1,096,505.	X	NONE		50.7177
CHAUTAQUA INTEGRATED DELIVERY 200 HARRISON STREET, 2ND FLOOR	INTEGRATED DE	NY	UPMC CHAUTAQUA		437,130.	2,186,053.	X	NONE		55.8135
TRI-STATE SURGERY CENTER, LLC 80 LANDING DRIVE WASHINGTON, P	SURGERY CENT	PA	UPMC WASHINGTON		794,825.	8,578,131.	X	NONE		53.3109
MEDCARE EQUIPMENT COMPANY, LLC 115 EQUITY DRIVE GREENSBURG, P	MEDICAL EQUIP	PA	N/A		5,768,297.	18,037,356.	X	NONE		50.1268

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590 SCH R, PART IV-IDENTIFICATION OF REL. ORG. TAXABLE AS CORP/TRUST

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) DIRECT CONTROLLING	(E) ENTITY TYPE	(F) SHARE OF TOT INCOME	(G) SHARE OF EOY OWNERSHIP	(H) %	(I) SEC 512(B) (13) YES NO
R.C.PHARMACY CENTRAL INC. 600 GRANT STREET PITTSBURGH, PA 15219	PHARMACY CO-O	PA	VARIOUS	C	NONE	658,750.	76.4700	X
CHILDREN'S COMMUNITY CARE 600 GRANT STREET PITTSBURGH, PA 15219	PHYSICIAN SRV	PA	N/A	C				
UPMC PHYSICIAN SERVICES HOLDING COMPANY 600 GRANT STREET PITTSBURGH, PA 15219	HOLDING CO	PA	N/A	C				
FEMATOLOGY ONCOLOGY ASSOCIATION INC. 600 GRANT STREET PITTSBURGH, PA 15219	PHYSICIAN SRV	PA	N/A	C				
ONCOLOGY HEMATOLOGY ASSOCIATION INC. 600 GRANT STREET PITTSBURGH, PA 15219	PHYSICIAN SRV	PA	N/A	C				
TRI-STATE NEUROSURGICAL ASSOCIATES UPMC 600 GRANT STREET PITTSBURGH, PA 15219	PHYSICIAN SRV	PA	N/A	C				
RENAISSANCE FAMILY PRACTICE - UPMC INC. 600 GRANT STREET PITTSBURGH, PA 15219	PHYSICIAN SRV	PA	N/A	C				
UPMC HOLDING COMPANY INC. 600 GRANT STREET PITTSBURGH, PA 15219	HOLDING CO	PA	N/A	C				
UPMC COVERAGE PRODUCTS INC. 600 GRANT STREET PITTSBURGH, PA 15219	HOLDING CO	PA	N/A	C				
FREEDOM INSURANCE COMPANY 600 GRANT STREET PITTSBURGH, PA 15219	INSURANCE	VT	N/A	C				

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590 SCH R, PART IV-IDENTIFICATION OF REL. ORG. TAXABLE AS CORP/TRUST

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) DIRECT CONTROLLING	(E) ENTITY TYPE	(F) SHARE OF TOT INCOME	(G) SHARE OF EOY OWNERSHIP	(H) %	(I) SEC 512(B) (13) YES NO
TRI-CENTURY INSURANCE CO 600 GRANT STREET PITTSBURGH, PA 15219	INSURANCE	PA	N/A	C				
UPMC DNA INC. 600 GRANT STREET PITTSBURGH, PA 15219	INACTIVE	PA	N/A	C				
UPMC HEALTH BENEFITS INC. 600 GRANT STREET PITTSBURGH, PA 15219	HEALTH INSUR	PA	N/A	C				
UPMC HEALTH NETWORK INC. 600 GRANT STREET PITTSBURGH, PA 15219	HEALTH INSUR	PA	N/A	C				
UPMC HEALTH PLAN INC. 600 GRANT STREET PITTSBURGH, PA 15219	HEALTH INSUR	PA	N/A	C				
UPMC BENEFIT MANAGEMENT SERVICES INC. 600 GRANT STREET PITTSBURGH, PA 15219	WORKERS' COMP	PA	N/A	C				
UPMC DIVERSIFIED SERVICES INC. 600 GRANT STREET PITTSBURGH, PA 15219	HOLDING CO	PA	N/A	C				
MONROEVILLE SPECIALTY CLINIC 600 GRANT STREET PITTSBURGH, PA 15219	AMB SURG	PA	N/A	C				
MEDICAL ARCHIVAL SYSTEMS INC. 600 GRANT STREET PITTSBURGH, PA 15219	SOFTWARE DEVE	DE	N/A	C				
EX PARTNERS INC. 600 GRANT STREET PITTSBURGH, PA 15219	PHARMACY	PA	N/A	C				

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590 SCH R, PART IV-IDENTIFICATION OF REL. ORG. TAXABLE AS CORP/TRUST

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) DIRECT CONTROLLING	(E) ENTITY TYPE	(F) SHARE OF TOT INCOME	(G) SHARE OF EOY OWNERSHIP	(H) %	(I) SEC 512(B) (13) YES NO
BIOTRONICS INC. 600 GRANT STREET PITTSBURGH, PA 15219	EQUIP MAINTEN	PA	N/A	C				
MEDICAL CENTER PROPERTIES INC. 600 GRANT STREET PITTSBURGH, PA 15219	REAL ESTATE	PA	N/A	C				
ASKESIS DEVELOPMENT GROUP INC. 600 GRANT STREET PITTSBURGH, PA 15219	SOFTWARE DEVE	DE	N/A	C				
BAYSIDE DEVELOPMENT CORP 300 STATE STREET ERIE, PA 16507	REAL ESTATE	PA	N/A	C				
UPMC WORK ALLIANCE INC. 600 GRANT STREET PITTSBURGH, PA 15219	INSURANCE	PA	N/A	C				
UPMC HEALTH COVERAGE INC. 600 GRANT STREET, 58TH FLOOR PITTSBURGH, PA 15219	INSURANCE	PA	N/A	C				
UPMC HEALTH OPTIONS INC. 600 GRANT STREET PITTSBURGH, PA 15219	INSURANCE	PA	N/A	C				
AMERICAN HOME HEALTH SERVICES 668 CORPORATE WAY WESTLAKE, OH 44145	HOME HEALTH C	OH	QUALITY FIRST	C	NONE	NONE	100.0000	X
ALTOONA FAMILY INC. 620 HOWARD AVE ALTOONA, PA 16601	MGMT SVCS	PA	UPMC ALTOONA	C	-30,054.	18,592.	100.0000	X
LEXINGTON HOLDINGS INC. 620 HOWARD AVE ALTOONA, PA 16601	HOLDING CO	PA	CTRL PA MED FND	C	1,317,585.	290,785,592.	100.0000	X

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590 SCH R, PART IV-IDENTIFICATION OF REL. ORG. TAXABLE AS CORP/TRUST

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) DIRECT CONTROLLING	(E) ENTITY TYPE	(F) SHARE OF TOT INCOME	(G) SHARE OF EOY	(H) % OWNERSHIP	(I) SEC 512(B) (13) YES NO
LEXINGTON ONE INC. 620 HOWARD AVE ALTOONA, PA 16601	RENTAL	PA	LEXINGTON HOLD	C	1,865,978.	11,317,161.	100.0000	X
UPMC ALTOONA REGIONAL HEALTH SERVICES 1414 9TH AVENUE ALTOONA, PA 16602	PHYSICIAN SRV	PA	LEXINGTON FOUR	C	69,141,386.	19,285,739.	100.0000	X
UPMC EXCESS PL TRUST 600 GRANT STREET PITTSBURGH, PA 15219	TRUST	PA	N/A	TRUST				
EXANTE INC. 511 CONGRESS STREET #803 PORTLAND, ME 04101	MEDICATION MG	DE	N/A	C				
SUSQUEHANNA VENTURES INC. 1201 GRAMPIAN BOULEVARD WILLIAMSPORT, PA 17701	PHARMACY	PA	N/A	C				
W.C.A. SERVICE CORPORATION INC. 207 FOOTE AVENUE JAMESTOWN, NY 14701	SUPPORT	NY	CHAUT AT WCA	C	6,791,475.	5,032,120.	100.0000	X
*PINNACLE HEALTH CARDIOVASCULAR INSTITUT 409 SOUTH SECOND STREET HARRISBURG, PA 17104	PHYSICIAN SRV	PA	N/A	C				
*HANOVER HEALTH CORPORATION 300 HIGHLAND AVENUE HANOVER, PA 17331	HOLDING CO	PA	N/A	C				
*HANOVER APOTHECARY INC. 310 STOCK STREET SUITE 1 HANOVER, PA 17331	PHARMACY	PA	N/A	C				
*UNITED CENTRAL PA RECIPROCAL RISK RETEN 76 SAINT PAUL STREET SUITE 500 BURLINGTON, VT 05401	INSURANCE	VT	N/A	C				

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590 SCH R, PART IV-IDENTIFICATION OF REL. ORG. TAXABLE AS CORP/TRUST

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) DIRECT CONTROLLING	(E) ENTITY TYPE	(F) SHARE OF TOT INCOME	(G) SHARE OF EOY OWNERSHIP	(H) %	(I) SEC 512(B) (13) YES NO
*PINNACLE HEALTH VENTURES INC. 409 SOUTH SECOND STREET HARRISBURG, PA 17104	HOLDING CO	PA	N/A	C	2,539,121.	229,705.	100.0000	X
*PINNACLE HEALTH IMAGING INC. 409 SOUTH SECOND STREET HARRISBURG, PA 17104	IMAGING SVC	PA	N/A	C	805.	324,210,200.	100.0000	X
COLE CARE INC. 1001 EAST 2ND STREET COULERSPORT, PA 16915	DME	PA	N/A	C	2,539,121.	229,705.	100.0000	X
UPMC HOSPITALS LTD. C/O UPMC WHITFIELD CORK ROAD BUTLER WATERFORD, EI	HOLDING CO	EI	UPMC IRELAND LT	C	805.	324,210,200.	100.0000	X
UPMC PROPERTY LTD. C/O UPMC WHITFIELD CORK ROAD BUTLER WATERFORD, EI	PROPERTY	EI	UPMC INVEST LTD	C	218.	18,060,428.	100.0000	X
EURO CARE INFRASTRUCTURE LTD. C/O UPMC WHITFIELD CORK ROAD BUTLER WATERFORD, EI	PROPERTY MGMT	EI	UPMC INVEST LTD	C	218.	NONE	100.0000	X
EURO CARE PROPERTY MANAGEMENT LTD. C/O UPMC WHITFIELD CORK ROAD BUTLER WATERFORD, EI	PROPERTY MGMT	EI	UPMC INVEST LTD	C	11,208.	385.	100.0000	X
UPMC WHITFIELD HOSPITAL LTD C/O UPMC WHITFIELD CORK ROAD BUTLER WATERFORD, EI	HOSPITAL	EI	UPMC INVEST LTD	C	88,849,005.	69,443,122.	100.0000	X
UPMC GLOBAL OPERATIONS CENTER LTD 6TH FLOOR BEACON HOSPITAL SANDYFORD, EI DUBLIN 18	CANCER TREATM	EI	UPMC IRELAND LT	C	1,305,808.	19,950,624.	100.0000	X
FANTHER REINSURANCE COMPANY LTD. P.O. BOX 1109 GRAND CAYMAN, CAYMAN ISLANDS CJ	INSURANCE	CJ	N/A	C				

UPMC GROUP

20-8295721

590 SCH R, PART IV-IDENTIFICATION OF REL. ORG. TAXABLE AS CORP/TRUST

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) DIRECT CONTROLLING	(E) ENTITY TYPE	(F) SHARE OF TOT INCOME	(G) SHARE OF EOY OWNERSHIP	(H) %	(I) SEC 512(B) (13) YES NO
FORBES REINSURANCE COMPANY LTD. P.O. BOX 1109 GRAND CAYMAN, CAYMAN ISLANDS CJ	INSURANCE	CJ	N/A	C				
CATHEDRAL (RE) INSURANCE CO P.O. BOX 1109 GRAND CAYMAN, CAYMAN ISLANDS CJ	INSURANCE	CJ	N/A	C				
UPMC IRELAND LIMITED 6TH FLOOR BEACON HOSPITAL SANDYFORD, EI DUBLIN 18	HEALTHCARE SU	EI	UPMC INT'L HOLD	C	400,130.	38,895,751.	100.0000	X
BLUESPHERE BIO 6425 PENN AVENUE STE 200 PITTSBURGH, PA 15206	IMMUNOTHERAPY	DE	N/A	C				
INFECTIOUS DISEASE CONNECT, INC. 6425 PENN AVENUE STE 200 PITTSBURGH, PA 15206	TELEMEDICINE	DE	N/A	C				
NOVASENTA, INC. 6425 PENN AVENUE STE 200 PITTSBURGH, PA 15206	IMMUNOTHERAPY	DE	N/A	C				
*UPMC HILLMAN CANCER CENTER - PINNACLE 101 ERFORD ROAD CAMP HILL, PA 17701	CANCER TREATM	PA	N/A	C				
SHANGHAI UPMC CO., LTD 288 SHIMEN 1ST ROAD JING'AN DISTRIC SHANGHAI, CH 200041	HEALTHCARE MG	CH	UPMC INT'L HOLD	C	1,019,178.	15,164,709.	100.0000	X
SALVATOR MUNDI INTERNATIONAL HOSPITAL FOMA VIALE DELLE MURA GIANICOLENSI 67/77, IT CAP 00152	HOSPITAL	IT	UPMC ITALY SRL	C	18,746,581.	36,728,215.	100.0000	X
SOMERSET MANAGEMENT SERVICES, INC. 600 GRANT STREET PITTSBURGH, PA 15219	MOB OWNERSHIP	PA	SOMERSET HLT SR	C	260,251.	1,014,736.	100.0000	X

590 SCH R, PART IV-IDENTIFICATION OF REL. ORG. TAXABLE AS CORP/TRUST

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) DIRECT CONTROLLING	(E) ENTITY TYPE	(F) SHARE OF TOT INCOME	(G) SHARE OF EOY OWNERSHIP	(H) %	(I) SEC 512 (B) (13) YES NO
GENERIAN PHARMACEUTICALS, INC. 2425 SIDNEY STREET PITTSBURGH, PA 15203	PHARMACY	DE	N/A	C				
WORK PARTNERS NATIONAL INC 600 GRANT STREET PITTSBURGH, PA 15219	INSURANCE	PA	N/A	C				
ASTRATA INC 6425 PENN AVENUE STE 200 PITTSBURGH, PA 15206	SOFTWARE	DE	N/A	C				
VEGAVECT 6425 PENN AVENUE STE 200 PITTSBURGH, PA 15206	GENE THERAPY	DE	N/A	C				
NOVTMAB CORP. 6425 PENN AVENUE STE 200 PITTSBURGH, PA 15206	CLINICAL RESE	DE	N/A	C				
REALYZE INTELLIGENCE, INC. 6425 PENN AVENUE STE 200 PITTSBURGH, PA 15206	SOFTWARE	DE	N/A	C				
*HAYSTACK CONSOLIDATED SERVICES, INC. 12500 WILLOWBROOK ROAD CUMBERLAND, MD 21502	INACTIVE	PA	N/A	C				
*WESTERN MARYLAND INSURANCE COMPANY LTD P.O. BOX 10233 GRAND CAYMAN, CAYMAN ISLANDS CJ	INSURANCE	CJ	N/A	C				
*WILLOWBROOK HEALTHCARE CONDO 12401 WILLOWBROOK ROAD CUMBERLAND, MD 21502	REAL ESTATE	DE	N/A	C				
EXANTE PHARMACY SERVICES, INC. 511 CONGRESS STREET #803 PORTLAND, ME 04101	PHARMACY	DE	N/A	C				

UPMC GROUP

20-8295721

590 SCH R, PART IV-IDENTIFICATION OF REL. ORG. TAXABLE AS CORP/TRUST

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) DIRECT CONTROLLING	(E) ENTITY TYPE	(F) SHARE OF TOT INCOME	(G) SHARE OF EOY OWNERSHIP	(H) %	(I) SEC 512(B) (13) YES NO
CLANE HOSPITAL DEVELOPMENT ASSOCIATES, L C/O UPMC WHITFIELD, CORK ROAD BUTLERSTOWN NORTH, WATERFOR	MANAGEMENT	EI	N/A	C	NONE	15,089,595.	75.0000	X
UPMC KILDARE HOSPITAL LTD EROSPEROUS ROAD CLANE, COUNTY KILDARE, CLANE EI W91 W535	HOSPITAL	EI	N/A	C	26,152,312.	15,237,926.	75.0000	X
UPMC AUT EVEN HOSPITAL LTD FRESHFORD ROAD COUNTY KILKENNY, EI R95 D3760	HOSPITAL	EI	N/A	C	40,117,350.	28,732,641.	100.0000	X
AVISTA THERAPEUTICS, INC. 6425 PENN AVENUE STE 200 PITTSBURGH, PA 15206	GENE THERAPY	PA	N/A	C				
UPMC CROATIA D.O.O. VUKOVARA 269F ZAGREB, HR	CANCER CENTER	HR	UPMC IRELAND LT	C	182,131.	18,668,182.	75.0000	X
SWIFT SPRAOI HOLDINGS LTD NORTHWOOD AVENUE SANTRY DEMESNE, DUBLIN 9 EI D09 C523	HOLDING COMPA	EI	UPMC HOSPITALS	C	NONE	877.	100.0000	X
SPORTS SURGERY CLINIC LTD NORTHWOOD AVENUE SANTRY DEMESNE, DUBLIN 9 EI D09 C523	ORTHOPEDIC SE	EI	SWIFT SPRAOI HO	C	95,820,276.	119,029,792.	100.0000	X
MACRADI LTD NORTHWOOD AVENUE SANTRY DEMESNE, DUBLIN 9 EI D09 C523	INACTIVE	EI	SWIFT SPRAOI HO	C	NONE	21,186,235.	100.0000	X
MACRADI DEVELOPMENT LTD NORTHWOOD AVENUE SANTRY DEMESNE, DUBLIN 9 EI D09 C523	INACTIVE	EI	SPORT'S SURGERY	C	NONE	1,526,152.	100.0000	X
THE WASHINGTON PHYSICIAN SERVICE ORG 58 WILSON AVENUE WASHINGTON, PA 15301	PHYSICIAN SRV	PA	UPMC WASHINGTON	C				

UPMC GROUP

20-8295721

590 SCH R, PART IV-IDENTIFICATION OF REL. ORG. TAXABLE AS CORP/TRUST

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) DIRECT CONTROLLING	(E) ENTITY TYPE	(F) SHARE OF TOT INCOME	(G) SHARE OF EOY	(H) % OWNERSHIP	(I) SEC 512(B) (13) YES NO
HEALTH FUTURES, INC, 155 WILSON AVENUE WASHINGTON, PA 15301	INACTIVE	PA	THE WASHINGTON	C				
PHOENIX-WASHINGTON, INC. 155 WILSON AVENUE WASHINGTON, PA 15301	REAL ESTATE	PA	THE WASHINGTON	C				
UPMC ITALY S.R.L PIAXXA SETT ANGELI 1090134 PALERMO, IT	HEALTHCARE	IT	UPMC OVERSEA	C	31,336,755.	93,679,612.	100.0000	X
UPMC HILLMAN CANCER CTR CROATIA POLYCLIN BRACAK 8 BRACAK, HR 49210	CANCER CENTER	HR	UPMC IRELAND LT	C	57,828.	492,482.	75.0000	X
PROCIKA, INC. 1020 MADISON AVE PITTSBURGH, PA 15212		PA	UPMC HOLDING CO	C				X

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	BUTLER HEALTH SYSTEM/ UPMC MUSCULOSKELETAL JV	J	3,527,717.	COST		X
(2)	BUTLER HEALTH SYSTEM/ UPMC MUSCULOSKELETAL JV	M	706,291.	COST		X
(3)	BUTLER HEALTH SYSTEM/ UPMC MUSCULOSKELETAL JV	P	1,007,781.	COST		X
(4)	BUTLER HEALTH SYSTEM/ UPMC MUSCULOSKELETAL JV	Q	11,618,478.	COST		X
(5)	CENTER FOR EMERGENCY MEDICINE	H	122,503.	COST		X
(6)	CENTER FOR EMERGENCY MEDICINE	J	121,641.	COST		X

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
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- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	CENTER FOR EMERGENCY MEDICINE	M	3,926,052.	COST		
(2)	CENTER FOR EMERGENCY MEDICINE	P	3,683,963.	COST		
(3)	CHARLES COLE MEMORIAL HOSPITAL	H	64,977.	COST		
(4)	CHARLES COLE MEMORIAL HOSPITAL	J	741,642.	COST		
(5)	CHARLES COLE MEMORIAL HOSPITAL	K	220,591.	COST		
(6)	CHARLES COLE MEMORIAL HOSPITAL	M	3,440,703.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
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2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	CHARLES COLE MEMORIAL HOSPITAL	P	7,925,848.	COST		
(2)	CHARLES COLE MEMORIAL HOSPITAL	Q	355,186.	COST		
(3)	CHILDREN'S ADVOCACY CENTER OF LAWRENCE COUNTY	H	210,176.	COST		
(4)	CHILDREN'S HOSPITAL	B	52,951.	COST		
(5)	CHILDREN'S HOSPITAL	H	976,239.	COST		
(6)	CHILDREN'S HOSPITAL	J	415,703.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

- 1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
 - a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
 - b** Gift, grant, or capital contribution to related organization(s)
 - c** Gift, grant, or capital contribution from related organization(s)
 - d** Loans or loan guarantees to or for related organization(s)
 - e** Loans or loan guarantees by related organization(s)
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	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	CHILDREN'S HOSPITAL	K	8,572,481.	COST		
(2)	CHILDREN'S HOSPITAL	L	232,571.	COST		
(3)	CHILDREN'S HOSPITAL	M	17,961,488.	COST		
(4)	CHILDREN'S HOSPITAL	P	273,291,397.	COST		
(5)	CHILDREN'S HOSPITAL	Q	16,599,836.	COST		
(6)	COMMUNITY CARE BEHAVIORAL HEALTH ORGANIZATION	A	4,003,488.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
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2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	COMMUNITY CARE BEHAVIORAL HEALTH ORGANIZATION	J	377,902.	COST		
(2)	COMMUNITY CARE BEHAVIORAL HEALTH ORGANIZATION	K	396,344.	COST		
(3)	COMMUNITY CARE BEHAVIORAL HEALTH ORGANIZATION	M	15,163,475.	COST		
(4)	COMMUNITY CARE BEHAVIORAL HEALTH ORGANIZATION	P	11,430,030.	COST		
(5)	COMMUNITY LIFE TEAM, INC.	J	141,224.	COST		
(6)	COMMUNITY LIFE TEAM, INC.	L	2,022,091.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	COMMUNITY LIFE TEAM, INC.	M	317,659.	COST		
(2)	COMMUNITY LIFE TEAM, INC.	P	5,335,507.	COST		
(3)	CRANBERRY PLACE	H	62,886.	COST		
(4)	CRANBERRY PLACE	J	2,184,227.	COST		
(5)	CRANBERRY PLACE	M	690,913.	COST		
(6)	CRANBERRY PLACE	P	336,193.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	DIVINE PROVIDENCE HOSPITAL OF THE SCC	K	1,398,349.	COST		
(2)	ERIE PHYSICIANS NETWORK-UPMC, INC.	P	54,001.	COST		
(3)	ERIE PHYSICIANS NETWORK-UPMC, INC.	Q	3,126,239.	COST		
(4)	HAMOT COLE VENTURES	K	630,555.	COST		
(5)	HOME NURSING AGENCY AFFILIATES	K	818,580.	COST		
(6)	HOME NURSING AGENCY AFFILIATES	P	120,195.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
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- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
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	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	HOME NURSING AGENCY FOUNDATION	H	86,267.	COST		
(2)	JAMESON HEALTHCARE FOUNDATION	K	65,345.	COST		
(3)	MON YOUGH COMMUNITY SERVICES, INC.	H	234,900.	COST		
(4)	MON YOUGH COMMUNITY SERVICES, INC.	P	256,822.	COST		
(5)	PINNACLE HEALTH MEDICAL SERVICES	H	130,438.	COST		
(6)	PINNACLE HEALTH MEDICAL SERVICES	J	12,203,890.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	PINNACLE HEALTH MEDICAL SERVICES	K	1,552,966.	COST		
(2)	PINNACLE HEALTH MEDICAL SERVICES	L	208,275.	COST		
(3)	PINNACLE HEALTH MEDICAL SERVICES	M	3,213,062.	COST		
(4)	PINNACLE HEALTH MEDICAL SERVICES	P	56,943,748.	COST		
(5)	PINNACLE HEALTH MEDICAL SERVICES	Q	236,493,210.	COST		
(6)	PINNACLE HEALTH REGIONAL PHYSICIANS	J	1,895,332.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	PINNACLE HEALTH REGIONAL PHYSICIANS	K	110,889.	COST		
(2)	PINNACLE HEALTH REGIONAL PHYSICIANS	M	365,236.	COST		
(3)	PINNACLE HEALTH REGIONAL PHYSICIANS	P	7,365,864.	COST		
(4)	PINNACLE HEALTH REGIONAL PHYSICIANS	Q	32,676,092.	COST		
(5)	REGIONAL HEALTH SERVICES	H	76,345.	COST		
(6)	REGIONAL HEALTH SERVICES	J	2,541,954.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	REGIONAL HEALTH SERVICES	K	1,132,663.	COST		
(2)	REGIONAL HEALTH SERVICES	L	22,790,385.	COST		
(3)	REGIONAL HEALTH SERVICES	M	450,850.	COST		
(4)	REGIONAL HEALTH SERVICES	P	6,281,024.	COST		
(5)	REGIONAL HEALTH SERVICES	Q	7,164,400.	COST		
(6)	SAFE HARBOR BEHAVIORAL HEALTH OF UPMC HAMOT	A	76,645.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	SAFE HARBOR BEHAVIORAL HEALTH OF UPMC HAMOT	M	192,602.	COST		
(2)	SAFE HARBOR BEHAVIORAL HEALTH OF UPMC HAMOT	P	1,075,441.	COST		
(3)	SOMERSET HEALTH SERVICES	J	667,900.	COST		
(4)	SOMERSET HEALTH SERVICES	K	199,480.	COST		
(5)	SOMERSET HEALTH SERVICES	M	139,338.	COST		
(6)	SOMERSET HEALTH SERVICES	P	1,621,321.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	SOMERSET HEALTH SERVICES	Q	745,070.	COST		
(2)	SUSQUEHANNA HEALTH FOUNDATION	H	335,305.	COST		
(3)	SUSQUEHANNA HEALTH FOUNDATION	M	69,791.	COST		
(4)	SUSQUEHANNA HEALTH SYSTEM INNOV CENTER, INC.	K	950,004.	COST		
(5)	SUSQUEHANNA PHYSICIAN SERVICES	H	87,977.	COST		
(6)	SUSQUEHANNA PHYSICIAN SERVICES	J	4,309,044.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	SUSQUEHANNA PHYSICIAN SERVICES	K	230,823.	COST		
(2)	SUSQUEHANNA PHYSICIAN SERVICES	L	91,698.	COST		
(3)	SUSQUEHANNA PHYSICIAN SERVICES	M	1,278,510.	COST		
(4)	SUSQUEHANNA PHYSICIAN SERVICES	P	1,917,114.	COST		
(5)	SUSQUEHANNA PHYSICIAN SERVICES	Q	113,629,590.	COST		
(6)	TWIN LAKES CENTER, INC.	M	68,942.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	TWIN LAKES CENTER, INC.	P	79,686.	COST		
(2)	U OF P CANCER INSTITUTE CANCER SERVICES	B	530,000.	COST		
(3)	U OF P CANCER INSTITUTE CANCER SERVICES	H	53,512.	COST		
(4)	U OF P CANCER INSTITUTE CANCER SERVICES	J	314,458.	COST		
(5)	U OF P CANCER INSTITUTE CANCER SERVICES	L	28,003,527.	COST		
(6)	U OF P CANCER INSTITUTE CANCER SERVICES	M	6,699,968.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	U OF P CANCER INSTITUTE CANCER SERVICES	P	8,182,623.	COST		
(2)	U OF P CANCER INSTITUTE CANCER SERVICES	Q	65,329,034.	COST		
(3)	UNIVERSITY OF PITTSBURGH PHYSICIANS	B	5,178,998.	COST		
(4)	UNIVERSITY OF PITTSBURGH PHYSICIANS	H	415,661.	COST		
(5)	UNIVERSITY OF PITTSBURGH PHYSICIANS	J	38,158,846.	COST		
(6)	UNIVERSITY OF PITTSBURGH PHYSICIANS	K	2,508,194.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UNIVERSITY OF PITTSBURGH PHYSICIANS	M	4,212,137.	COST		
(2)	UNIVERSITY OF PITTSBURGH PHYSICIANS	P	151,606,078.	COST		
(3)	UNIVERSITY OF PITTSBURGH PHYSICIANS	Q	1,116,554,799.	COST		
(4)	UPMC ADVANCE PRACTICE PROVIDERS	J	184,028.	COST		
(5)	UPMC ADVANCE PRACTICE PROVIDERS	M	178,540.	COST		
(6)	UPMC ALTOONA	H	151,466.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC ALTOONA	J	472,985.	COST		
(2)	UPMC ALTOONA	K	1,680,046.	COST		
(3)	UPMC ALTOONA	L	125,447.	COST		
(4)	UPMC ALTOONA	M	3,535,856.	COST		
(5)	UPMC ALTOONA	P	130,518,363.	COST		
(6)	UPMC ALTOONA	Q	468,556.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity. b Gift, grant, or capital contribution to related organization(s). c Gift, grant, or capital contribution from related organization(s). d Loans or loan guarantees to or for related organization(s). e Loans or loan guarantees by related organization(s). f Dividends from related organization(s). g Sale of assets to related organization(s). h Purchase of assets from related organization(s). i Exchange of assets with related organization(s). j Lease of facilities, equipment, or other assets to related organization(s). k Lease of facilities, equipment, or other assets from related organization(s). l Performance of services or membership or fundraising solicitations for related organization(s). m Performance of services or membership or fundraising solicitations by related organization(s). n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s). o Sharing of paid employees with related organization(s). p Reimbursement paid to related organization(s) for expenses. q Reimbursement paid by related organization(s) for expenses. r Other transfer of cash or property to related organization(s). s Other transfer of cash or property from related organization(s).		
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved
(1)	UPMC BEDFORD	K	245,875.	COST
(2)	UPMC BEDFORD	M	159,134.	COST
(3)	UPMC BEDFORD	P	15,533,739.	COST
(4)	UPMC BEDFORD	Q	104,311.	COST
(5)	UPMC BEHAVIORAL HEALTH OF THE ALLEGHENIES	M	186,834.	COST
(6)	UPMC BEHAVIORAL HEALTH OF THE ALLEGHENIES	P	89,725.	COST

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity. b Gift, grant, or capital contribution to related organization(s). c Gift, grant, or capital contribution from related organization(s). d Loans or loan guarantees to or for related organization(s). e Loans or loan guarantees by related organization(s). f Dividends from related organization(s). g Sale of assets to related organization(s). h Purchase of assets from related organization(s). i Exchange of assets with related organization(s). j Lease of facilities, equipment, or other assets to related organization(s). k Lease of facilities, equipment, or other assets from related organization(s). l Performance of services or membership or fundraising solicitations for related organization(s). m Performance of services or membership or fundraising solicitations by related organization(s). n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s). o Sharing of paid employees with related organization(s). p Reimbursement paid to related organization(s) for expenses. q Reimbursement paid by related organization(s) for expenses. r Other transfer of cash or property to related organization(s). s Other transfer of cash or property from related organization(s).		
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		1q	
		1r	
		1s	

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved
(1)	UPMC CARLISLE	H	60,761.	COST
(2)	UPMC CARLISLE	J	147,375.	COST
(3)	UPMC CARLISLE	K	473,865.	COST
(4)	UPMC CARLISLE	L	6,151,311.	COST
(5)	UPMC CARLISLE	M	573,970.	COST
(6)	UPMC CARLISLE	P	14,307,964.	COST

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC CARLISLE	Q	27,319,204.	COST		
(2)	UPMC COMMUNITY MEDICINE, INC.	H	50,239.	COST		
(3)	UPMC COMMUNITY MEDICINE, INC.	J	9,849,265.	COST		
(4)	UPMC COMMUNITY MEDICINE, INC.	K	3,559,283.	COST		
(5)	UPMC COMMUNITY MEDICINE, INC.	M	3,078,523.	COST		
(6)	UPMC COMMUNITY MEDICINE, INC.	P	22,120,905.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC COMMUNITY MEDICINE, INC.	Q	178,678,037.	COST		
(2)	UPMC COMMUNITY PROVIDER SERVICES, INC.	H	63,616.	COST		
(3)	UPMC COMMUNITY PROVIDER SERVICES, INC.	J	3,879,965.	COST		
(4)	UPMC COMMUNITY PROVIDER SERVICES, INC.	K	1,639,942.	COST		
(5)	UPMC COMMUNITY PROVIDER SERVICES, INC.	L	48,469,477.	COST		
(6)	UPMC COMMUNITY PROVIDER SERVICES, INC.	M	554,293.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC COMMUNITY PROVIDER SERVICES, INC.	P	24,365,951.	COST		
(2)	UPMC EAST	J	463,525.	COST		
(3)	UPMC EAST	K	644,192.	COST		
(4)	UPMC EAST	M	822,187.	COST		
(5)	UPMC EAST	P	61,128,675.	COST		
(6)	UPMC EAST	Q	138,794.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

- 1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
 - a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
 - b** Gift, grant, or capital contribution to related organization(s)
 - c** Gift, grant, or capital contribution from related organization(s)
 - d** Loans or loan guarantees to or for related organization(s)
 - e** Loans or loan guarantees by related organization(s)
 - f** Dividends from related organization(s)
 - g** Sale of assets to related organization(s)
 - h** Purchase of assets from related organization(s)
 - i** Exchange of assets with related organization(s)
 - j** Lease of facilities, equipment, or other assets to related organization(s)
 - k** Lease of facilities, equipment, or other assets from related organization(s)
 - l** Performance of services or membership or fundraising solicitations for related organization(s)
 - m** Performance of services or membership or fundraising solicitations by related organization(s)
 - n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
 - o** Sharing of paid employees with related organization(s)
 - p** Reimbursement paid to related organization(s) for expenses
 - q** Reimbursement paid by related organization(s) for expenses
 - r** Other transfer of cash or property to related organization(s)
 - s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC FOR YOU	A	6,161,473.	COST		
(2)	UPMC FOR YOU	H	72,266.	COST		
(3)	UPMC FOR YOU	J	9,316,786.	COST		
(4)	UPMC FOR YOU	K	137,525.	COST		
(5)	UPMC FOR YOU	M	175,779,691.	COST		
(6)	UPMC FOR YOU	P	720,825,626.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC GREENE	K	94,332.	COST		
(2)	UPMC GREENE	M	743,729.	COST		
(3)	UPMC GREENE	P	328,247.	COST		
(4)	UPMC HAMOT	H	103,424.	COST		
(5)	UPMC HAMOT	J	237,609.	COST		
(6)	UPMC HAMOT	K	3,717,023.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC HAMOT	L	72,000.	COST		
(2)	UPMC HAMOT	M	2,582,598.	COST		
(3)	UPMC HAMOT	P	152,322,351.	COST		
(4)	UPMC HAMOT	Q	253,431.	COST		
(5)	UPMC HANOVER	A	321,068.	COST		
(6)	UPMC HANOVER	H	51,147.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity. b Gift, grant, or capital contribution to related organization(s). c Gift, grant, or capital contribution from related organization(s). d Loans or loan guarantees to or for related organization(s). e Loans or loan guarantees by related organization(s). f Dividends from related organization(s). g Sale of assets to related organization(s). h Purchase of assets from related organization(s). i Exchange of assets with related organization(s). j Lease of facilities, equipment, or other assets to related organization(s). k Lease of facilities, equipment, or other assets from related organization(s). l Performance of services or membership or fundraising solicitations for related organization(s). m Performance of services or membership or fundraising solicitations by related organization(s). n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s). o Sharing of paid employees with related organization(s). p Reimbursement paid to related organization(s) for expenses. q Reimbursement paid by related organization(s) for expenses. r Other transfer of cash or property to related organization(s). s Other transfer of cash or property from related organization(s).		
		1a	
		1b	
		1c	
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		1o	
		1p	
		1q	
		1r	
		1s	

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved
(1)	UPMC HANOVER	J	124,035.	COST
(2)	UPMC HANOVER	K	1,652,890.	COST
(3)	UPMC HANOVER	M	607,547.	COST
(4)	UPMC HANOVER	P	23,854,657.	COST
(5)	UPMC HANOVER	Q	28,508,133.	COST
(6)	UPMC HOME CARE MANAGEMENT SERVICES	L	6,097,656.	COST

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC HOME CARE MANAGEMENT SERVICES	M	101,313.	COST		
(2)	UPMC HOME CARE MANAGEMENT SERVICES	P	162,454.	COST		
(3)	UPMC HOME HEALTHCARE OF CENTRAL PENNSYLVANIA	H	192,801.	COST		
(4)	UPMC HOME HEALTHCARE OF CENTRAL PENNSYLVANIA	Q	1,542,021.	COST		
(5)	UPMC HOME HEALTHCARE OF CENTRAL PENNSYLVANIA	L	228,060.	COST		
(6)	UPMC HOME HEALTHCARE OF CENTRAL PENNSYLVANIA	M	1,819,783.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		
b Gift, grant, or capital contribution to related organization(s)		
c Gift, grant, or capital contribution from related organization(s)		
d Loans or loan guarantees to or for related organization(s)		
e Loans or loan guarantees by related organization(s)		
f Dividends from related organization(s)		
g Sale of assets to related organization(s)		
h Purchase of assets from related organization(s)		
i Exchange of assets with related organization(s)		
j Lease of facilities, equipment, or other assets to related organization(s)		
k Lease of facilities, equipment, or other assets from related organization(s)		
l Performance of services or membership or fundraising solicitations for related organization(s)		
m Performance of services or membership or fundraising solicitations by related organization(s)		
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		
o Sharing of paid employees with related organization(s)		
p Reimbursement paid to related organization(s) for expenses		
q Reimbursement paid by related organization(s) for expenses		
r Other transfer of cash or property to related organization(s)		
s Other transfer of cash or property from related organization(s)		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved
(1) UPMC HOME HEALTHCARE OF CENTRAL PENNSYLVANIA		P	2,213,874.	COST
(2) UPMC HOME HEALTHCARE OF WESTERN PA		K	100,790.	COST
(3) UPMC HOME HEALTHCARE OF WESTERN PA		L	3,896,995.	COST
(4) UPMC HOME HEALTHCARE OF WESTERN PA		M	1,642,241.	COST
(5) UPMC HOME HEALTHCARE OF WESTERN PA		P	2,000,881.	COST
(6) UPMC HORIZON		H	120,388.	COST

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC HORIZON	J	72,241.	COST		
(2)	UPMC HORIZON	K	973,238.	COST		
(3)	UPMC HORIZON	M	1,915,279.	COST		
(4)	UPMC HORIZON	P	63,552,135.	COST		
(5)	UPMC HORIZON	Q	280,744.	COST		
(6)	UPMC INTERNATIONAL HOLDINGS, INC.	A	1,089,691.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC JAMESON	H	63,980.	COST		
(2)	UPMC JAMESON	J	70,285.	COST		
(3)	UPMC JAMESON	M	1,080,165.	COST		
(4)	UPMC JAMESON	P	35,872,743.	COST		
(5)	UPMC JAMESON	Q	51,629.	COST		
(6)	UPMC KANE	B	65,612.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC KANE	M	269,220.	COST		
(2)	UPMC KANE	P	553,495.	COST		
(3)	UPMC LITITZ	H	58,290.	COST		
(4)	UPMC LITITZ	J	372,252.	COST		
(5)	UPMC LITITZ	K	3,074,133.	COST		
(6)	UPMC LITITZ	L	6,472,496.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC LITITZ	M	713,301.	COST		
(2)	UPMC LITITZ	P	12,073,308.	COST		
(3)	UPMC LITITZ	Q	35,723,814.	COST		
(4)	UPMC LOCUM CLINICIANS	M	391,514.	COST		
(5)	UPMC LOCUM CLINICIANS	Q	592,771.	COST		
(6)	UPMC MAGEE WOMENS HOSPITAL	H	248,371.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
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- c** Gift, grant, or capital contribution from related organization(s)
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- s** Other transfer of cash or property from related organization(s)

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC MAGEE WOMENS HOSPITAL	J	6,820,392.	COST		
(2)	UPMC MAGEE WOMEN'S HOSPITAL	K	4,589,214.	COST		
(3)	UPMC MAGEE WOMENS HOSPITAL	L	265,655.	COST		
(4)	UPMC MAGEE WOMENS HOSPITAL	M	7,227,159.	COST		
(5)	UPMC MAGEE WOMENS HOSPITAL	P	378,438,141.	COST		
(6)	UPMC MAGEE WOMENS HOSPITAL	Q	975,447.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC MCKEESPORT	H	67,760.	COST		
(2)	UPMC MCKEESPORT	K	743,902.	COST		
(3)	UPMC MCKEESPORT	M	1,594,130.	COST		
(4)	UPMC MCKEESPORT	P	42,156,502.	COST		
(5)	UPMC MCKEESPORT	Q	303,284.	COST		
(6)	UPMC MEMORIAL	J	62,619.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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c Gift, grant, or capital contribution from related organization(s)
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Table with 4 columns: (a) Name of related organization, (b) Transaction type (a - s), (c) Amount involved, (d) Method of determining amount involved. Rows include UPMC MEMORIAL, UPMC MEMORIAL, UPMC MEMORIAL, UPMC MEMORIAL, UPMC MEMORIAL, UPMC MERCY.

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC MERCY	J	90,000.	COST		
(2)	UPMC MERCY	K	6,131,938.	COST		
(3)	UPMC MERCY	L	125,883.	COST		
(4)	UPMC MERCY	M	4,121,079.	COST		
(5)	UPMC MERCY	P	139,177,069.	COST		
(6)	UPMC MERCY	Q	683,646.	COST		

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	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC MUNCY	K	149,027.	COST		
(2)	UPMC MUNCY	M	7,132,110.	COST		
(3)	UPMC MUNCY	P	9,772,314.	COST		
(4)	UPMC NORTHWEST	H	90,919.	COST		
(5)	UPMC NORTHWEST	K	191,390.	COST		
(6)	UPMC NORTHWEST	M	1,135,917.	COST		

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	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC NORTHWEST	P	55,376,754.	COST		
(2)	UPMC NORTHWEST	Q	108,768.	COST		
(3)	UPMC OVERSEAS, INC.	Q	100,809.	COST		
(4)	UPMC PASSAVANT	H	58,553.	COST		
(5)	UPMC PASSAVANT	J	341,584.	COST		
(6)	UPMC PASSAVANT	K	6,652,133.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC PASSAVANT	M	3,034,399.	COST		
(2)	UPMC PASSAVANT	P	159,888,566.	COST		
(3)	UPMC PASSAVANT	Q	660,760.	COST		
(4)	UPMC PINNACLE	H	125,160.	COST		
(5)	UPMC PINNACLE	J	874,884.	COST		
(6)	UPMC PINNACLE	M	2,242,528.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC PINNACLE	P	218,944,004.	COST		
(2)	UPMC PINNACLE	Q	3,654,330.	COST		
(3)	UPMC PINNACLE FOUNDATION	M	157,855.	COST		
(4)	UPMC PINNACLE FOUNDATION	P	1,672,376.	COST		
(5)	UPMC PINNACLE HOSPITALS	H	520,122.	COST		
(6)	UPMC PINNACLE HOSPITALS	J	7,536,637.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC PINNACLE HOSPITALS	K	17,452,722.	COST		
(2)	UPMC PINNACLE HOSPITALS	L	25,989,625.	COST		
(3)	UPMC PINNACLE HOSPITALS	M	8,412,013.	COST		
(4)	UPMC PINNACLE HOSPITALS	P	163,163,936.	COST		
(5)	UPMC PINNACLE HOSPITALS	Q	154,373,735.	COST		
(6)	UPMC PRESBYTERIAN SHADYSIDE	B	70,578.	COST		

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	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC PRESBYTERIAN SHADYSIDE	C	145,080.	COST		
(2)	UPMC PRESBYTERIAN SHADYSIDE	H	2,350,590.	COST		
(3)	UPMC PRESBYTERIAN SHADYSIDE	I	1,114,313,063.	COST		
(4)	UPMC PRESBYTERIAN SHADYSIDE	J	26,678,097.	COST		
(5)	UPMC PRESBYTERIAN SHADYSIDE	K	20,971,798.	COST		
(6)	UPMC PRESBYTERIAN SHADYSIDE	L	5,918,609.	COST		

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(1)	UPMC PRESBYTERIAN SHADYSIDE	M	106,535,090.	COST		
(2)	UPMC PRESBYTERIAN SHADYSIDE	P	436,444,028.	COST		
(3)	UPMC PRESBYTERIAN SHADYSIDE	Q	4,461,152.	COST		
(4)	UPMC SOMERSET	J	54,824.	COST		
(5)	UPMC SOMERSET	K	475,364.	COST		
(6)	UPMC SOMERSET	M	1,172,803.	COST		

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- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC SOMERSET	P	11,567,702.	COST		
(2)	UPMC ST. MARGARET	H	174,439.	COST		
(3)	UPMC ST. MARGARET	J	425,312.	COST		
(4)	UPMC ST. MARGARET	K	1,809,391.	COST		
(5)	UPMC ST. MARGARET	L	65,278.	COST		
(6)	UPMC ST. MARGARET	M	2,195,708.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC ST. MARGARET	P	96,041,927.	COST		
(2)	UPMC ST. MARGARET	Q	966,062.	COST		
(3)	UPMC TRAVEL STAFFING	J	77,050.	COST		
(4)	UPMC WASHINGTON	K	662,453.	COST		
(5)	UPMC WASHINGTON	L	345,400.	COST		
(6)	UPMC WELLSBORO	A	360,722.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC WELLSBORO	H	72,808.	COST		
(2)	UPMC WELLSBORO	J	190,821.	COST		
(3)	UPMC WELLSBORO	K	355,235.	COST		
(4)	UPMC WELLSBORO	M	6,878,681.	COST		
(5)	UPMC WELLSBORO	P	5,889,287.	COST		
(6)	UPMC WILLIAMSPORT	A	625,000.	COST		

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

- a** Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
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- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a - s)	(c) Amount involved	(d) Method of determining amount involved	Yes	No
(1)	UPMC WILLIAMSPORT	H	282,078.	COST		
(2)	UPMC WILLIAMSPORT	J	1,415,991.	COST		
(3)	UPMC WILLIAMSPORT	K	3,019,646.	COST		
(4)	UPMC WILLIAMSPORT	M	8,745,215.	COST		
(5)	UPMC WILLIAMSPORT	P	147,457,823.	COST		
(6)	UPMC WILLIAMSPORT	Q	54,429.	COST		

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
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(12)													
(13)													
(14)													
(15)													
(16)													

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

SCHEDULE R - RELATED ORGANIZATIONS AND UNRELATED PARTNERSHIPS

THE FOLLOWING IS A LIST OF RELATED ORGANIZATIONS THAT ARE PART OF THE
UPMC GROUP EXEMPTION:

AUUE INC.

BUTLER HEALTH SYSTEM/UPMC MUSCULOSKELETAL JOINT VENTURE, INC.

CENTER FOR EMERGENCY MEDICINE OF WESTERN PENNSYLVANIA

CENTRAL PENNSYLVANIA MEDICAL FOUNDATION, INC.

CHARLES COLE MEMORIAL HOSPITAL

CHILDREN'S ADVOCACY CENTER OF LAWRENCE COUNTY

COLE FOUNDATION, INC.

UPMC CHILDREN'S HOSPITAL OF PITTSBURGH

COMMUNITY CARE BEHAVIORAL HEALTH ORGANIZATION

CRANBERRY PLACE

DIVINE PROVIDENCE HOSPITAL OF THE SISTERS OF CHRISTIAN CHARITY

ERIE PHYSICIANS NETWORK-UPMC, INC.

HAMOT COLE VENTURES

HOME NURSING AGENCY AFFILIATES

HOME NURSING AGENCY FOUNDATION

JAMESON HEALTHCARE FOUNDATION

JAMESON MEDICAL CARE, INC.

LAUREL HEALTH SYSTEM

MAGEE-WOMEN'S HOSPITAL OF UPMC

MON YOUGH COMMUNITY SERVICES, INC.

REGIONAL HEALTH SERVICES INC.

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

SAFE HARBOR BEHAVIORAL HEALTH OF UPMC HAMOT

SOMERSET COMMUNITY HOSPITAL FOUNDATION

SOMERSET HEALTH SERVICES, INC.

SUGARCREEK STATION

SUSQUEHANNA HEALTH FOUNDATION

SUSQUEHANNA HEALTH SYSTEM INNOVATION CENTER, INC.

SUSQUEHANNA PHYSICIAN SERVICES

THE HERITAGE SHADYSIDE

TWIN LAKES CENTER, INC.

UNIVERSITY OF PITTSBURGH CANCER INSTITUTE CANCER SERVICES

UNIVERSITY OF PITTSBURGH PHYSICIANS

UPMC ADVANCED PRACTICE PROVIDERS

UPMC ALTOONA

UPMC ALTOONA FOUNDATION

UPMC ALTOONA PARTNERSHIP FOR A HEALTHY COMMUNITY

UPMC BEDFORD

UPMC BEHAVIORAL HEALTH OF THE ALLEGHENIES

UPMC CHAUTAUQUA SERVICES INC.

UPMC COMMUNITY MEDICINE, INC.

UPMC COMMUNITY PROVIDER SERVICES

UPMC EAST

UPMC EMERGENCY MEDICINE, INC.

UPMC FOR YOU, INC.

UPMC HAMOT

UPMC HOME CARE MANAGEMENT SERVICES

UPMC HOME HEALTHCARE OF CENTRAL PENNSYLVANIA

UPMC HOME HEALTHCARE OF WESTERN PENNSYLVANIA

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

UPMC HORIZON

UPMC HORIZON COMMUNITY HEALTH FOUNDATION

UPMC INTERNATIONAL HOLDINGS, INC.

UPMC JAMESON

UPMC KANE

UPMC LOCK HAVEN

UPMC LOCUM CLINICIANS

UPMC MCKEESPORT

UPMC MEDICAL EDUCATION

UPMC MERCY

UPMC MUNCY

UPMC NORTHWEST

UPMC OB/GYN JOINT VENTURE INC.

UPMC OVERSEAS, INC.

UPMC PASSAVANT

UPMC PRESBYTERIAN SHADYSIDE

UPMC SOMERSET

UPMC ST. MARGARET

UPMC SUNBURY

UPMC SUSQUEHANNA

UPMC TRAVEL STAFFING

UPMC WELLSBORO

UPMC WILLIAMSPORT

UPMC WASHINGTON

UPMC GREENE

UPMC PINNACLE

UPMC PINNACLE HOSPITALS

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

UPMC PINNACLE HEALTH MEDICAL SERVICES

UPMC PINNACLE LANCASTER

UPMC LITITZ

UPMC MEMORIAL

PINNACLE HEALTH REGIONAL PHYSICIANS

UPMC CARLISLE

UPMC PINNACLE FOUNDATION

COMMUNITY LIFE TEAM, INC.

HANOVER HEALTHCARE PLUS, INC.

UPMC HANOVER

UPMC AMBULATORY SURGERY CENTER

UPMC WEST MIFFLIN GI

UPMC EAST SIDE SURGERY CENTER

ENTITIES REPORTED IN PARTS I THROUGH IV THAT ARE MARKED WITH AN * ARE NOT TECHNICALLY RELATED ORGANIZATIONS, AS DEFINED IN THE FORM 990 INSTRUCTIONS, OF UPMC AS THE REQUISITE CONTROL FOR A PARENT, SUBSIDIARY, BROTHER/SISTER RELATIONSHIP DID NOT EXIST DURING THE FISCAL YEAR ENDED JUNE 30, 2025. HOWEVER, BECAUSE THESE ENTITIES ARE AFFILIATED WITH UPMC AND THE UPMC PARENT ORGANIZATION HOLDS CERTAIN POWERS WITH RESPECT TO SUCH ENTITIES, UPMC IS ELECTING TO DISCLOSE THE ENTITIES AS RELATED ORGANIZATIONS IN SCHEDULE R IN THE INTEREST OF TRANSPARENCY.

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART V TRANSACTIONS WITH RELATED ORGANIZATIONS

IN GENERAL, THE CASH MANAGEMENT POLICY OF UPMC IS TO TEMPORARILY TRANSFER ALL EXCESS FUNDS AVAILABLE FROM EXEMPT SUBSIDIARIES TO UPMC, THE PARENT ENTITY. THESE ARE NOT CONSIDERED A TRANSFER OF NET ASSETS FOR WHICH DISCLOSURE IS REQUIRED IF 25% OR MORE OF NET ASSETS ARE TRANSFERRED.

PART V LINE 2

PART V, LINE 2. FOR FY25, IT WAS DETERMINED THAT THE INTERCOMPANY BALANCES FROM UPMC'S FY25 AUDITED CONSOLIDATED GAAP INCOME STATEMENT AND BALANCE SHEET ARE THE MOST ACCURATE INFORMATION AVAILABLE TO COMPLETE PART V, LINE 2. THESE BALANCE ARE REPORTED FOR EACH APPLICABLE INTERCOMPANY ACCOUNT THAT ALIGNS WITH A PART V LINE 1 TRANSACTION TYPE AND ARE REPORTED SEPARATELY FOR EACH OF THE 87 SUBORDINATE ORGANIZATIONS INCLUDED IN THE FY25 UPMC GROUP FORM 990, WITH THE SUBORDINATE ORGANIZATION REPORTED IN COLUMN (A) AND THE COLUMN (C) AMOUNT INVOLVED INCLUDING THE AGGREGATE ALL TRANSACTIONS WITH RELATED ORGANIZATIONS FOR THE COLUMN (B) TRANSACTION TYPE. ADDITION DETAIL, INCLUDING THE AMOUNT OF SPECIFIC TRANSACTIONS WITH RELATED ORGANIZATIONS INCLUDED IN THE COLUMN (C) AGGREGATE AMOUNTS, CAN BE PROVIDED UPON REQUEST.

Electronic Filing Information: PDF attachments Included in this Return

Tax Year: 2024
Name: UPMC GROUP
Return No: E25000M4

Jurisdiction: Federal
No of Attachments: 3

PDF Attachment Description	PDF File Name	File Size
Subordinates Included	E25000M4_FE_Subordinates Included FY25.pdf	57,418
Audited Financial Statements	E25000M4_FE_Audited Financial Statement 123124.pdf	10,039,225
8453 Signature Document	E25000M4_FE_8453 Signature Document FY25 UPMC GROUP.pdf	959,077

UPMC Group 20-8295721

List of Subordinates

Form 990, Page 1, H(a) & H(b)

- 1 AUUE, Inc.
- 2 Butler Health System/UPMC Musculoskeletal Joint Venture, Inc.
- 3 Center for Emergency Medicine
- 4 Central PA Medical Foundation Inc
- 5 Charles Cole Memorial Hospital
- 6 Children's Advocacy Center of Lawrence County
- 7 Children's Hospital of Pittsburgh of the UPMC Health System
- 8 Cole Foundation Inc
- 9 Community Care Behavioral Health Organization
- 10 Community Life Team, Inc.
- 11 Cranberry Place
- 12 Divine Providence Hospital of the Sisters of Christian Charity
- 13 Erie Physicians Network – UPMC Inc.
- 14 Hamot Cole Ventures
- 15 Hanover Healthcare Plus, Inc.
- 16 Home Nursing Agency Affiliates
- 17 Home Nursing Agency Foundation
- 18 Jameson Healthcare Foundation
- 19 Jameson Medical Care, Inc
- 20 Laurel Health System
- 21 Mon Yough Community Services, Inc.
- 22 Pinnacle Health Medical Services
- 23 Pinnacle Health Regional Physicians
- 24 Regional Health Services, Inc
- 25 Safe Harbor Behavioral Health of UPMC Hamot
- 26 Somerset Community Hospital Foundation

- 27 Somerset Health Services
- 28 Sugarcreek Station
- 29 Susquehanna Health Foundation
- 30 Susquehanna Health System Innovation Center
- 31 Susquehanna Physician Services
- 32 The Heritage Shadyside
- 33 Twin Lakes Center, Inc.
- 34 University of Pittsburgh Cancer Institute Cancer Services
- 35 University of Pittsburgh Physicians
- 36 UPMC Advance Practice Providers
- 37 UPMC Altoona
- 38 UPMC Altoona Foundation
- 39 UPMC Altoona Partnership for Healthy Community
- 40 UPMC Ambulatory Surgery
- 41 UPMC Bedford
- 42 UPMC Behavioral Health of the Alleghenies
- 43 UPMC Carlisle
- 44 UPMC Chautauqua Services, Inc.
- 45 UPMC Community Medicine, Inc.
- 46 UPMC Community Provider Services
- 47 UPMC East
- 48 UPMC East Side Surgery Center
- 49 UPMC Emergency Medicine, Inc.
- 50 UPMC For You
- 51 UPMC Greene
- 52 UPMC Hamot
- 53 UPMC Hanover
- 54 UPMC Home Care Management Services
- 55 UPMC Home Healthcare of Central PA

- 56 UPMC Home Healthcare of Western PA
- 57 UPMC Horizon
- 58 UPMC Horizon Community Health Foundation
- 59 UPMC International Holdings, Inc.
- 60 UPMC Jameson
- 61 UPMC Kane
- 62 UPMC Lititz
- 63 UPMC Lock Haven
- 64 UPMC Locum Clinicians
- 65 UPMC Magee Womens Hospital
- 66 UPMC McKeesport
- 67 UPMC Medical Education
- 68 UPMC Memorial
- 69 UPMC Mercy
- 70 UPMC Muncy
- 71 UPMC Northwest
- 72 UPMC OB/GYN Joint Venture Inc
- 73 UPMC Overseas, Inc.
- 74 UPMC Passavant
- 75 UPMC Pinnacle
- 76 UPMC Pinnacle Foundation
- 77 UPMC Pinnacle Hospitals
- 78 UPMC Pinnacle Lancaster
- 79 UPMC Presbyterian Shadyside
- 80 UPMC Somerset
- 81 UPMC St. Margaret
- 82 UPMC Susquehanna
- 83 UPMC Travel Staffing
- 84 UPMC Washington

- 85 UPMC Wellsboro
- 86 UPMC West Mifflin GI
- 87 UPMC Williamsport

UPMC Year End Financial and Operating Report & Audited Consolidated Financial Statements

FOR THE PERIOD ENDED DECEMBER 31, 2024



UPMC
LIFE CHANGING MEDICINE

UPMC Year End Financial and Operating Report & Audited Consolidated Financial Statements

FOR THE PERIOD ENDED DECEMBER 31, 2024

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The following financial data is as of and for the years ended December 31, 2024 and 2023. Operating and financial results reported herein are not necessarily indicative of the results that may be expected for any future periods.

The information contained herein is being filed by UPMC for the purpose of complying with its obligations under Continuing Disclosure Agreements entered into in connection with the issuance of the series of bonds listed herein and disclosure and compliance obligations in connection with various banking arrangements. Digital Assurance Certification, L.L.C., as Dissemination Agent, has not participated in the preparation of this Year End Financial and Operating Report & Audited Consolidated Financial Statements and has not examined its contents and makes no representations concerning the accuracy and completeness of the information contained herein.



MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

UPMC, doing business as the University of Pittsburgh Medical Center, is one of the world's leading Integrated Delivery and Financing Systems ("IDFS"). UPMC is based in Pittsburgh, Pennsylvania and primarily serves residents across the Commonwealth of Pennsylvania, as well as western New York and northwestern Maryland. UPMC also draws patients for highly specialized services from across the nation and around the world. UPMC's more than 40 hospitals and 800 clinical locations comprise one of the largest nonprofit health systems in the United States. UPMC serves patients and members across the continuum of healthcare with its hospital, physician and homecare services, physical and behavioral health insurance product offerings, international operations, and its Enterprises division.

UPMC is committed to providing high quality, cost-effective healthcare to its communities and its insurance members, while continuing to grow its business and execute on its mission of service. As part of this mission, UPMC continues to make significant investments in equipment, technology and operational strategies designed to improve clinical quality and to provide the best possible patient and member experience. Investments in our operations and continued capital improvements are expected to become increasingly important as the competitive environment of the market and national changes to the industry continue to shift the landscape of healthcare. UPMC builds new facilities, makes strategic acquisitions and enters into joint venture arrangements or affiliations with healthcare businesses — in each case in communities where it believes its mission can be effectively utilized to improve the overall health of those communities.

As the stewards of UPMC's community assets, UPMC is guided by its core values of integrity, excellence, respect and teamwork. These values govern the manner in which UPMC serves its communities and are embedded in the execution and delivery of Life Changing Medicine. By continually evolving and refining UPMC's world-class financial processes, UPMC focuses on achieving optimal financial results that support the continued development of its organization, as well as ongoing investment in the future of the communities it serves. UPMC is committed to achieving these objectives with unyielding commitments to transparency in reporting and disclosure, enterprise-wide integration and ongoing process improvement.

The purpose of this section, Management's Discussion and Analysis ("MD&A"), is to provide a narrative explanation of UPMC's consolidated financial statements that enhances its overall financial disclosures, to provide the context within which its financial information may be analyzed, and to provide information about the quality of, and potential variability of, its financial condition, results of operations and cash flows.

Unless otherwise indicated, all financial information included herein relates to its continuing operations, with dollar amounts expressed in millions (except for statistical information and as otherwise noted). MD&A should be read in conjunction with the accompanying audited consolidated financial statements.

MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

BUSINESS HIGHLIGHTS

Investing and Growing for our Future

In February 2024, the UPMC Hillman Cancer Center on the UPMC West Shore campus in Mechanicsburg, Pa. opened with 38,000-square-feet of newly renovated space, providing expanded state-of-the-art cancer treatment and comprehensive personalized care in a soothing and modern atmosphere designed to enhance the patient experience. As a result of the expansion, the clinical research team will be able to screen, qualify and enroll Mechanicsburg-area patients for appropriate clinical trials at UPMC Hillman Cancer Center and the University of Pittsburgh School of Medicine, a process that would have previously required a trip to Pittsburgh.

In February 2024, UPMC Jameson in New Castle, Pa. added UPMC Children's Rehabilitation Therapies, the only dedicated outpatient rehabilitation facility for children in the area, redefining local access to pediatric rehab services. Families in and around Lawrence and Mercer counties, in addition to those traveling from Pittsburgh's northern communities and neighboring areas, are now receiving family-centered, advanced pediatric rehabilitation in one location. The new center provides pediatric physical therapy and speech therapy and will soon provide pediatric occupational therapy. It complements UPMC Children's existing primary and specialty care presence in the region at UPMC Children's Community Pediatrics locations.

In April 2024, UPMC Ireland, in partnership with University College Cork (UCC), opened UPMC Sports Medicine Clinic, Mardyke Arena, UCC. Serving Ireland since 2006, UPMC is focused on improving access to advanced, specialized care, with the new clinic in Cork being the sixth UPMC Sports Medicine facility in Ireland. The combination of research and medicine between two academic centers lends itself to developing new solutions and opportunities for people across Ireland, while working closely with the country's public health system to meet the needs of those individuals. The growth of UPMC's signature specialty services across Ireland is in response to an increasing need and demand for UPMC's high-quality specialty care, with the sports medicine clinics being an essential part of UPMC Ireland's nationwide network of hospitals and centers.

In June 2023, the Boards of Directors of Washington Health System ("WHS") and UPMC announced an affiliation agreement between the two entities that would integrate WHS into the UPMC system. One year later, on June 1, 2024, that affiliation became official. UPMC has committed to invest \$300 million over 10 years to enhance clinical services and upgrade facilities at the UPMC Washington and UPMC Greene campuses. UPMC's investments combined with contributions from the WHS Foundation ensure UPMC Washington and UPMC Greene can provide state-of-the-art health care for local residents for years to come and maintain its position as one of the largest employers in both Washington and Greene counties. For the past decade, WHS and UPMC have been collaborating in several areas to deliver high-quality, patient-centered care to more than 10,000 patients annually. Such collaborations include partnerships with UPMC Hillman Cancer Center, UPMC Children's Hospital of Pittsburgh and other clinical synergies. UPMC will continue to invest in and advance these and other key services locally to ensure the residents of Washington and Greene counties have access to high-quality care.

In September 2024, UPMC entered into a joint venture with GoHealth Urgent Care, a national company with an established track record for running urgent care centers with high customer satisfaction. In addition to managing certain existing UPMC urgent care locations, the new joint venture will manage a number of other locations in Pennsylvania and certain neighboring states. All of these locations will be operated under the UPMC-GoHealth Urgent Care brand in spring 2025.

In October 2024, UPMC raised the final steel beams on two major hospital construction projects in Pittsburgh - the UPMC Presbyterian Tower and the UPMC Children's Heart Institute. The Presbyterian tower, which broke ground in June 2022, is Pennsylvania's largest current health care construction project and the largest health care building in Pittsburgh's history. The \$1.5 billion, 17-story hospital, scheduled to be completed in 2026, will be home to 636 private patient rooms and premier

MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

people-focused clinical facilities where clinical teams and physician-scientists will deliver nationally renowned specialty care that includes transplant, cardiology and cardiac surgery, and neurology and neurosurgery. The spaces within the new tower are designed to embrace scientific discovery and technology advances while supporting patients and staff in an attractive environment that matches the innovation and care provided by UPMC. The \$84 million UPMC Children's Heart Institute, expected to be completed in 2026, is a 50,000-square-foot, three-story addition to UPMC Children's Hospital that will elevate care and technology in pediatric cardiology. The new space will house cardiac catheterization labs, an interoperative MRI and inpatient and outpatient procedural, diagnostic and consultation rooms.

In December 2024, Italian officials approved €400 million in funding for UPMC ISMETT 2, a 250-bed public-private high-specialty care and surgical hospital to be built in Palermo, Italy. The facility will sit adjacent to the Biomedical Research and Biotechnology Center, a facility under construction and jointly managed by UPMC. ISMETT 2 will include a 40-bed ICU, advanced radiology, oncology, orthopedics and neuroscience services, significantly expanding access to specialized care for Sicily and beyond. The hospital is expected to open as early as 2030.

Providing More Access to Needed Care

In March 2024, UPMC North Central Pa. opened UPMC Spine Care in Lewisburg, Pa. As the first-of-its-kind in the region, it serves as a single access point connecting individuals experiencing back and neck pain with a centralized integrated team of UPMC's spine experts who specialize in the management and treatment, both surgical and non-surgical, of a wide array of spinal disorders.

In May 2024, UPMC Presbyterian was named "Best Regional Hospital for Equitable Access" by U.S. News & World Report. UPMC Presbyterian was one of 53 hospitals in 26 states to be recognized for caring for patients in historically underserved communities, achieving excellent outcomes among disadvantaged communities and providing socioeconomically vulnerable populations with substantial access to high-quality care.

In May 2024, Atrium Health Levine Children's Hospital in Charlotte, NC., began a partnership with UPMC Children's Hospital of Pittsburgh, allowing for Levine Children's Hospital to expand its ability to successfully perform life-saving liver transplants in infants and toddlers. This enables personalized care before, during and after transplantation in a close to home setting for young patients and their families. Atrium Health, part of Charlotte-based Advocate Health, began pediatric liver transplants in 2000 and offers the only pediatric transplant program in the greater Charlotte region at Levine Children's Hospital. Both Levine Children's Hospital and UPMC Children's Hospital's pediatric liver transplant programs consistently exceed national averages on patient and graft survival. With over 1,800 pediatric liver transplants performed, UPMC Children's has performed more than any other center in the United States. This expertise continues to attract patients from all over the world.

In August 2024, UPMC Horizon-Shenango Valley completed its \$1.5 million five-bed expansion of the emergency department providing greater capacity and the most accessible emergency medical care for residents in Mercer and Lawrence counties. The added beds allow for care of about 40 more people per day to meet growing community need.

In September 2024, in order to improve health care access for U.S. military veterans, leaders from UPMC and Veterans Administration ("VA") Healthcare co-signed a special memorandum of understanding, announcing a Pennsylvania statewide rollout of the VA-UPMC Community Nurse Liaison Program. Built off the success of the VA-UPMC Community Nurse Liaison Program established in central Pennsylvania in 2022, the newly expanded program embeds VA-registered nurses at eight UPMC hospitals across the state. Community nurse liaisons help extend and accelerate services to veterans through better care coordination, hospital admission and discharge planning and improved patient experiences. They help ensure that post-emergency follow-up care, including medications, physical therapy and needed social services are directed in a way that best meets veterans' needs. The program also helps identify veterans who are not in the VA system and helps enroll new veterans into VA health care.

MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

In October 2024, UPMC Jameson announced its partnership with Southwest Behavioral Health Management, Inc., on a \$9.5 million project to develop an 11-bed UPMC Western Behavioral Health adult inpatient unit. Scheduled to open in late 2025, the unit will be located in renovated space inside UPMC Jameson.

In December 2024, UPMC North Central Pa. expanded health care access directly to more rural communities with its new Mobile Health Center, a cutting-edge clinic on wheels, designed to help ensure that individuals facing transportation barriers, or other social determinants of health, receive the care they need without compromise.

Bolstering our Workforce

In October 2024, UPMC announced significant increases to the nursing salary structure in all UPMC hospitals beginning in 2025 and continuing through 2027, putting UPMC nursing hourly salaries 20% ahead of local competitors. These wage increases, along with UPMC's industry-leading benefits package, and accelerated career path opportunities show the health system's commitment to providing the best working environment and best economic reward for nurses.

Providing Quality Care

In February 2024, UPMC St. Margaret earned, for the fourth time, the distinguished Magnet® Recognition from the American Nurses Credentialing Center, which distinguishes organizations that meet rigorous standards for nursing excellence. Only 9.4% of U.S. health care organizations have achieved Magnet recognition, considered the highest honor and gold standard for nursing excellence. Four-time Magnet designations are received by fewer than 5% of hospitals nationwide, and only 10 hospitals in Pennsylvania have earned it three times or more. To maintain designation, organizations must reapply every four years. UPMC St. Margaret was the first hospital in the UPMC system to achieve Magnet designation in 2009. Other Magnet-designated UPMC hospitals are UPMC Presbyterian, UPMC Children's, UPMC Passavant, UPMC Community Osteopathic, UPMC Hamot, UPMC Harrisburg, UPMC Magee-Womens, UPMC Shadyside and UPMC West Shore.

In March 2024, for the sixth consecutive year, Ethisphere Institute named UPMC one of the World's Most Ethical Companies. UPMC is one of 136 honorees recognized for 2024, spanning across 44 industries and 20 countries, and is the only organization recognized in the integrated health care systems category. Ethisphere is a global leader in defining and advancing the standards of ethical business practices. Its "Most Ethical" designation is reserved for a select number of companies with exceptional programs and a commitment to advancing business integrity.

In October 2024, UPMC was again named one of the nation's "Digital Health Most Wired" health systems by the College of Healthcare Information Management Executives. This designation recognizes UPMC's success in digital health and efforts to reinvent healthcare for the new century. UPMC is one of only 26 organizations in the country to achieve the highest recognition of Level 10 status.

In December 2024, UPMC Mercy's inpatient rehabilitation program earned a three-year accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF International). In addition to the overall designation, the hospital's brain injury, spinal cord injury and stroke units also received accreditation.

In December 2024, UPMC Children's Hospital of Pittsburgh was named one of The Leapfrog Group's prestigious Top Children's Hospitals, among the most competitive awards American hospitals can receive, highlighting its commitment to patient safety and quality. UPMC Children's is one of only eight pediatric hospitals in the nation named to this elite class. According to U.S. News and World Report's 2024-2025 "Best Children's Hospitals" rankings, released in October 2024, UPMC Children's remains the No. 2 pediatric hospital in Pennsylvania, and ranks nationally in 11 specialties.

MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

Serving our Members

Through the Pathways to Work program, UPMC continues to focus on job training and career development for individuals who are unemployed and have significant barriers to work. In the first quarter of 2024, UPMC worked with Partner4Work and the PA Department of Labor & Industry to register three innovative apprenticeship programs in Pennsylvania. The Certified Nursing Assistant, Facilities Maintenance Technician and Surgical Technician programs will target individuals in communities impacted by health disparities.

In early 2024, the UPMC Center for Social Impact (the "Center") celebrated its 200th UPMC Health Plan member who transitioned from being unhoused to placement in stable housing through the Center's Cultivating Health for Success ("CHFS") program. The CHFS program combines expertise from community housing partners along with the UPMC Community Treatment Team with an objective of meeting health goals and securing rental subsidies to pay for housing. Evidence shows that housed members experience better health outcomes which leads to a higher quality of life all while lowering medical costs.

In 2024, UPMC's Insurance Services Division continues to be recognized as a leader in service and quality. UPMC Health Plan earned 10 Stevie Awards, including the prestigious Grand Stevie Award, for excellence in categories including customer service, sales, contact center quality and best use of technology to serve customers. UPMC Health Plan has expanded its Partner Network into Washington and Greene Counties following UPMC's affiliation with Washington Health System. The innovative plan designs continue to demonstrate success with over 5,000 members enrolled in UPMC VirtualCare and over 10,000 members in UPMC First Care.

UPMC *for You* achieved its first 4.5 star rating from the National Committee for Quality Assurance and expects to maintain this top rating next year. UPMC *for Life* Medicare plans also continued to grow membership and market share across Pennsylvania, where it maintains its year-round enrollment option because of its 5-Star Quality Rating from the Centers for Medicare & Medicaid Services ("CMS"). The UPMC *for Life* Complete Care special needs plans, serving almost 40,000 members, earned a Five-Star rating from CMS.

In August 2024, UPMC *for Life* launched a reorganization of care management in Allegheny County, dividing it into five regions with leadership oversight and realigning 28 staff to provide panel-management supported by new reporting structures, provider-level interventions, and community partnerships to optimize care protocols, reduce hospital-based utilization, and transition eligible members into the Your Care program. UPMC Community HealthChoices ("CHC") continued to retain market leadership across the state. In August, UPMC CHC was selected by the PA Department of Human Services through a competitive procurement with national competitors to continue to operate the CHC program.

In September 2024, the UPMC Health Plan received national recognition for clinical quality and member service excellence. The UPMC Health Plan ranks among the highest quality plans in Pennsylvania and the nation with the NCQA ranking its Medicaid plans in the top 4.8%, Medicare in the top 4.3% and Commercial in the top 5.5% nationally in terms of clinical excellence. J.D. Power designated UPMC's Medicare Advantage plan, UPMC *for Life*, as a top MA plan in Pennsylvania for member satisfaction for the second consecutive year.

UPMC Health Plan was recognized as a 2024 Press Ganey Human Experience Award Winner for achieving the Pinnacle of Excellence designation in the Member Experience - Highest Prescription Drug CAHPS ratings for Medicare HMOs category. This award evaluates member experience based on surveyed results for access and availability of prescribed drugs.

In 2024, Military Friendly®, a service-disabled, veteran owned business that measures organizations' commitment, effort and success in creating sustainable and meaningful benefits for the military community ranked UPMC 8th nationally as a Military Friendly Employer and designated UPMC as a National Military Friendly Spouse Employer. Annually, over 1,500 organizations compete for Military Friendly® designation.

MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

CONSOLIDATED FINANCIAL HIGHLIGHTS

Financial Results for the Years Ended December 31	2024	2023
Operating revenues	\$ 29,866	\$ 27,700
Operating loss prior to restructuring costs*	\$ (211)	\$ (198)
Operating margin % prior to restructuring costs*	(0.7)%	(0.7)%
Operating loss	\$ (339)	\$ (198)
Operating margin %	(1.1)%	(0.7)%
Operating margin % (after income tax and interest expense)	(1.9)%	(1.5)%
Gain from investing and financing activities	\$ 328	\$ 425
Excess of expenses over revenues attributable to controlling interest	\$ (15)	\$ (31)
Operating EBIDA	\$ 364	\$ 494
Capital expenditures	\$ 995	\$ 744
Reinvestment ratio	1.42	1.07

Selected Other Information as of	December 31, 2024	December 31, 2023
Total cash and investments	\$ 8,893	\$ 9,547
Unrestricted cash and investments	\$ 7,526	\$ 8,221
Unrestricted cash and investments over long-term debt	\$ 1,067	\$ 1,613
Days of cash on hand*	93	109
Days in net accounts receivable	41	44
Average age of plant (in years)	11.4	11.2

*Excludes \$128 million of restructuring costs for the year ended December 31, 2024.

Operating loss prior to restructuring costs for the year ended December 31, 2024 increased by \$13 million compared to prior year. This increase was primarily driven by elevated medical utilization across the Insurance Services division products, as well as increased pharmacy costs that exceeded revenue rate increases, including those associated with Glucagon-like peptide-1 ("GLP-1") drugs. This was partially offset by Federal Emergency Management Agency ("FEMA") reimbursement recognition of \$270 million related to expenses incurred during the COVID-19 pandemic, as well as continued improvements in patient volumes and decreases in contract labor expenses. As of December 31, 2024, UPMC had approximately \$8.9 billion of cash and investments, of which approximately \$2.8 billion was held by UPMC's regulated health and captive insurance companies. UPMC continues to have a long-term perspective with regard to its investment activities.

MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

CONDENSED CONSOLIDATING STATEMENTS OF OPERATIONS

Year Ended December 31, 2024

	Health Services	Insurance Services	Eliminations	Consolidated
Revenues:				
Net patient service revenue	\$ 15,825	\$ -	\$ (3,645)	\$ 12,180
Insurance enrollment revenue	-	15,112	-	15,112
Other revenue	1,743	921	(90)	2,574
Total operating revenues	\$ 17,568	\$ 16,033	\$ (3,735)	\$ 29,866
Expenses:				
Salaries, professional fees and benefits	\$ 9,394	\$ 659	\$ (85)	\$ 9,968
Insurance claims expense	-	14,825	(3,598)	11,227
Supplies, purchased services and general	7,220	1,011	(52)	8,179
Depreciation and amortization	697	6	-	703
Total operating expenses	17,311	16,501	(3,735)	30,077
Operating income (loss) prior to restructuring costs	257	(468)	-	(211)
Restructuring costs	90	38	-	128
Operating income (loss)	\$ 167	\$ (506)	\$ -	\$ (339)
Operating margin %	1.0%	(3.2)%	-	(1.1)%
Operating margin % (including income tax and interest expense)	(0.4)%	(3.2)%	-	(1.9)%
Operating EBIDA	\$ 864	\$ (500)	\$ -	\$ 364
Operating EBIDA %	4.9%	(3.1)%	-	1.2%

Year Ended December 31, 2023

	Health Services	Insurance Services	Eliminations	Consolidated
Revenues:				
Net patient service revenue	\$ 14,560	\$ -	\$ (3,384)	\$ 11,176
Insurance enrollment revenue	-	14,282	-	14,282
Other revenue	1,379	946	(83)	2,242
Total operating revenues	\$ 15,939	\$ 15,228	\$ (3,467)	\$ 27,700
Expenses:				
Salaries, professional fees and benefits	\$ 9,091	\$ 644	\$ (79)	\$ 9,656
Insurance claims expense	-	13,465	(3,341)	10,124
Supplies, purchased services and general	6,459	1,014	(47)	7,426
Depreciation and amortization	686	6	-	692
Total operating expenses	16,236	15,129	(3,467)	27,898
Operating (loss) income	\$ (297)	\$ 99	\$ -	\$ (198)
Operating margin %	(1.9)%	0.7%	-	(0.7)%
Operating margin % (including income tax and interest expense)	(3.2)%	0.5%	-	(1.5)%
Operating EBIDA	\$ 389	\$ 105	\$ -	\$ 494
Operating EBIDA %	2.4%	0.7%	-	1.8%

MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

Health Services

UPMC Health Services division ("Health Services") includes a comprehensive array of clinical capabilities consisting of hospitals, specialty service lines (e.g., transplantation services, woman care, behavioral health, pediatrics, cancer care and rehabilitation services), contract services (emergency medicine, pharmacy and laboratory) and approximately 5,200 employed physicians with associated practices. Also included within Health Services are supporting foundations and UPMC's captive insurance programs. Hospital activity is monitored in four distinct groups: (i) academic hospitals that provide a comprehensive array of clinical services that include the specialty service lines listed above and serve as the primary academic and teaching centers for UPMC and are located in Pittsburgh; (ii) community hospitals that provide core clinical services mainly to the suburban Pittsburgh marketplace; (iii) regional hospitals that provide core clinical services to certain other areas of western (including Erie), and central (including Williamsport and Harrisburg) Pennsylvania, as well as western New York and northwestern Maryland; and (iv) pre- and post-acute care capabilities that include: UPMC HomeCare, a network of home health services, and UPMC Senior Communities, the facilities of which provide a complete network of senior living capabilities in greater Pittsburgh and the surrounding counties.

Health Services also includes international activities, with locations across the globe, which extend UPMC's core mission and aim to bring new revenue streams into UPMC's domestic operations. In Italy, UPMC locations include ISMETT, a government-approved hospital for end-stage organ disease treatment and research, Salvator Mundi International Hospital in Rome and UPMC Cancer Centers in Rome, Sicily and Campania. In Ireland, UPMC has a network of four hospitals and two UPMC Hillman Cancer Centers across southeast Ireland, stretching from Cork to Dublin. Other UPMC international ventures include management services agreements in China and Croatia.

Operating income for the Health Services Division, prior to restructuring costs, increased by \$554 million for the year ended December 31, 2024, when compared to the prior year. This increase is primarily due to improved patient volumes, decreases in contract labor expenses and the recognition of \$270 million of revenue from FEMA for reimbursement of COVID-19 related expenses for the year ended December 31, 2024, compared to \$48 million of revenue recognized for the period ended December 31, 2023.

Insurance Services

UPMC holds various interests in health care financing initiatives and network care delivery operations that have over 4.1 million members as of December 31, 2024. UPMC Health Plan is a health maintenance organization ("HMO") offering coverage for commercial and Medicare members. UPMC *for You*, also an HMO, is engaged in providing coverage to Medical Assistance & Medicare Special Needs Plan beneficiaries. UPMC Health Network offers preferred provider organization ("PPO") plan designs to serve Medicare beneficiaries. UPMC Health Options offers PPO plan designs to serve commercial beneficiaries. UPMC *for Life* is a Medicare product line offered by various companies within the Insurance Services division. UPMC *Workpartners* provides fully insured workers' compensation, integrated workers' compensation and disability services to employers. Community Care Behavioral Health Organization ("Community Care") is a state-licensed HMO that manages the behavioral health services for Medical Assistance through mandatory managed care programs in Pennsylvania. Community HealthChoices ("CHC") is Pennsylvania's managed care program for individuals who are dual eligible for Medicaid and Medicare or qualify for Medicaid Long Term Services and Supports ("LTSS") and is designed to increase opportunities for older Pennsylvanians and individuals with physical disabilities to remain in their homes and communities rather than in facilities.

Operating results for the Insurance Services Division, prior to restructuring costs, decreased by \$567 million for the year ended December 31, 2024, when compared to the prior year. This decline is primarily attributable to elevated medical utilization and increased pharmacy costs, including those associated with GLP-1 drugs, which have exceeded revenue rate increases, particularly in governmental products.

MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

UPMC Enterprises

As an organization dedicated to outstanding patient care, UPMC has defined a bold mission: to shape the future of health care through innovation. UPMC Enterprises helps bring this mission to life by transforming ideas into thriving businesses and Life Changing Medicine. UPMC Enterprises leverages UPMC's integrated delivery and financing system capabilities to generate new revenue streams by collaborating across UPMC, the University of Pittsburgh and Carnegie Mellon University, as well as health care entrepreneurs, companies and investors across the globe in all stages of commercial development, to bring to market new health care companies, technologies, and solutions. These ventures both support UPMC's core mission and help stimulate the economy within the communities we serve.

UPMC Enterprises manages a portfolio that includes various research and product development initiatives and numerous operating companies with commercially available products and services directed toward the improvement of the delivery of health care. UPMC Enterprises' results are classified as investing and financing activity in the consolidated statements of operations and changes in net assets, consistent with the long-term nature of developing and commercializing life sciences and technology-enabled initiatives. Due to the nature of UPMC Enterprises' investment activity, financial results can fluctuate between periods.

MANAGEMENT'S DISCUSSION AND ANALYSIS

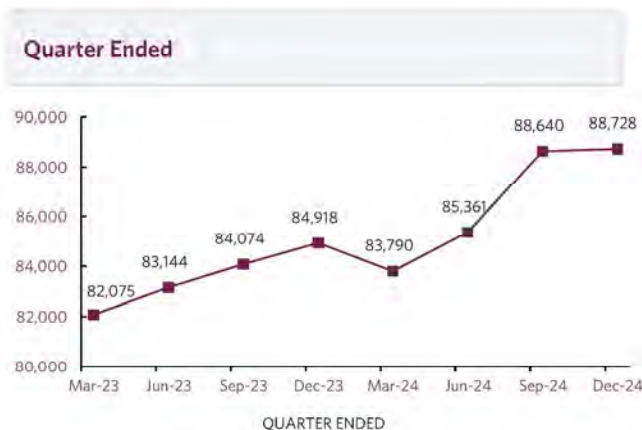
PERIOD ENDED DECEMBER 31, 2024

REVENUE METRICS - HEALTH SERVICES

Medical-Surgical Admissions and Observation Visits

Inpatient activity, as measured by medical-surgical admissions and observation visits at UPMC's hospitals for the year ended December 31, 2024, increased 4% compared to the same period in 2023.

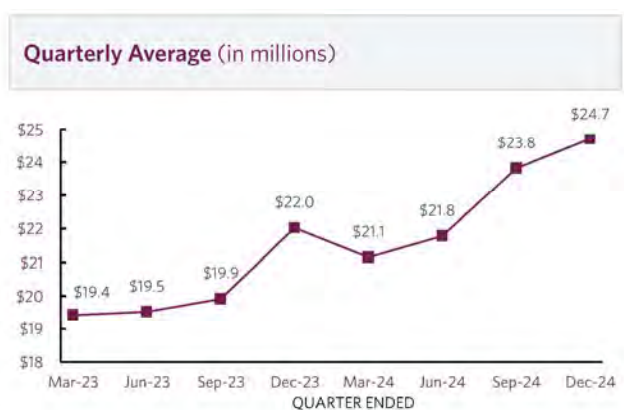
For the Years Ended December 31			
(in thousands)	2024	2023	Change
Academic	112.1	108.8	3%
Community	47.7	47.9	0%
Regional	186.7	177.5	5%
Total	346.5	334.2	4%



Outpatient Revenue per Workday

UPMC's outpatient activity for the year ended December 31, 2024, as measured by average revenue per workday, increased 13% compared to the same period in 2023. Surgical demand, particularly in the outpatient setting, has increased as former inpatient services continue to move to outpatient. This, coupled with the increase in ambulatory patient volumes, has caused the increase to outpatient revenue per workday. Hospital outpatient activity is measured on an equivalent workday ("EWD") basis to adjust for weekend and holiday hours.

For the Years Ended December 31			
(in thousands)	2024	2023	Change
Academic	\$ 8,564	\$ 7,599	13%
Community	2,252	2,026	11%
Regional	12,034	10,594	14%
Total	\$ 22,850	\$ 20,219	13%



MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

REVENUE METRICS – HEALTH SERVICES (CONTINUED)

Physician Service Revenue per Weekday

UPMC's physician activity for the year ended December 31, 2024, as measured by average revenue per weekday, increased 8% from the comparable period in 2023. Physician services activity is measured on a weekday basis.

For the Years Ended December 31			
(in thousands)	2024	2023	Change
Academic	\$ 4,153	\$ 3,853	8%
Community	2,058	1,917	7%
Regional	3,440	3,168	9%
Total	\$ 9,651	\$ 8,938	8%

Quarterly Average (in millions)



Sources of Patient Service Revenue

The gross patient service revenues, before price concessions and intercompany transactions, of UPMC are derived from payers which reimburse or pay UPMC for the services it provides to patients covered by such payers. The following table is a summary of the percentage of the hospitals' gross patient service revenue by payer.

	Years Ended December 31	
	2024	2023
Medicare	49%	48%
Medical Assistance	16%	17%
Commercial Insurers	16%	16%
UPMC Commercial	11%	11%
Self-pay/Other	8%	8%
Total	100%	100%

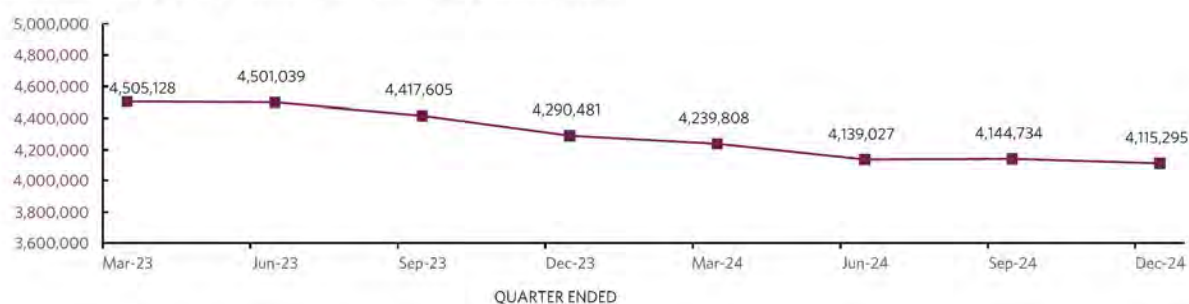
MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

OPERATING METRICS - INSURANCE SERVICES

Membership

Membership in the UPMC Insurance Services division decreased to 4,115,295 as of December 31, 2024, a 4% decrease versus December 31, 2023. The decrease is primarily attributable to Medical Assistance and Behavioral Health products as a result of the unwinding of the Public Health Emergency continuous enrollment, which began in early 2023 and carried into 2024.



As of	Dec 31, 2024	Dec 31, 2023
Commercial Health	559,662	562,847
Medicare	221,021	211,018
Medical Assistance	632,730	682,855
Sub-Total Physical Health Products	1,413,413	1,456,720
Community HealthChoices	134,058	139,161
Behavioral Health	1,206,971	1,328,650
Sub-Total Health Products	2,754,442	2,924,531
Workpartners	860,955	869,028
Ancillary Products	486,239	480,488
Third-Party Administration	13,659	16,434
Total Membership	4,115,295	4,290,481

Medical Expense Ratio

UPMC Insurance Services' medical expense ratio ("MER") for the trailing twelve months has increased to 92.3% as of December 31, 2024. Starting in 2023 and continuing throughout 2024, the increase in MER is primarily due to the rise in surgical volumes, significant case mix shifts and a rise in provider rates, which have driven up medical trends across all product lines. Additionally, pharmacy costs have continued to rise due to increased utilization within Medicaid, primarily due to GLP-1 drugs. The chart below is revised quarterly to reflect updated estimates and actual medical claims expense for each presented period.

Trailing Twelve Months



MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

KEY FINANCIAL INDICATORS

(Dollars in millions)

Operating Earnings before Interest, Depreciation and Amortization

Operating EBIDA for the year ended December 31, 2024 decreased \$2 million compared to the year ended December 31, 2023.

For the Years Ended December 31			
(in thousands)	2024*	2023	Change
Operating Loss	\$ (211)	\$ (198)	(7)%
Depreciation and Amortization	703	692	2%
Operating EBIDA	\$ 492	\$ 494	0%

Trailing Twelve Months Operating EBIDA



*Excludes restructuring costs of \$128 million for the period ended December 31, 2024.

**Excludes restructuring costs of \$40 million and \$88 million for the periods ended March 31, 2024 and June 30, 2024, respectively.

***Excludes restructuring costs of \$109 million and \$115 million of a premium deficiency reserve for the period ended September 30, 2024.

Unrestricted Cash and Investments Over Long Term Debt and Days Cash on Hand

Unrestricted cash and investments over long term debt as of December 31, 2024 decreased \$546 million when compared to December 31, 2023. The decrease is primarily driven by capital expenditures and offset by gains on investments for the year ended December 31, 2024.



*Excludes restructuring costs of \$40 million, \$88 million, \$109 million and \$128 million for the periods ended March 31, 2024, June 30, 2024, September 30, 2024 and December 31, 2024, respectively.

Days in Net Accounts Receivable

Days in net Accounts Receivable at December 31, 2024 and December 31, 2023 were 41 and 44, respectively.

By Receivable	2024 Balance	Days	
		Dec 31, 2024	Dec 31, 2023
Patient	\$ 1,661	47	49
Insurance and other	1,815	37	40
Consolidated	\$ 3,476	41	44



MANAGEMENT'S DISCUSSION AND ANALYSIS

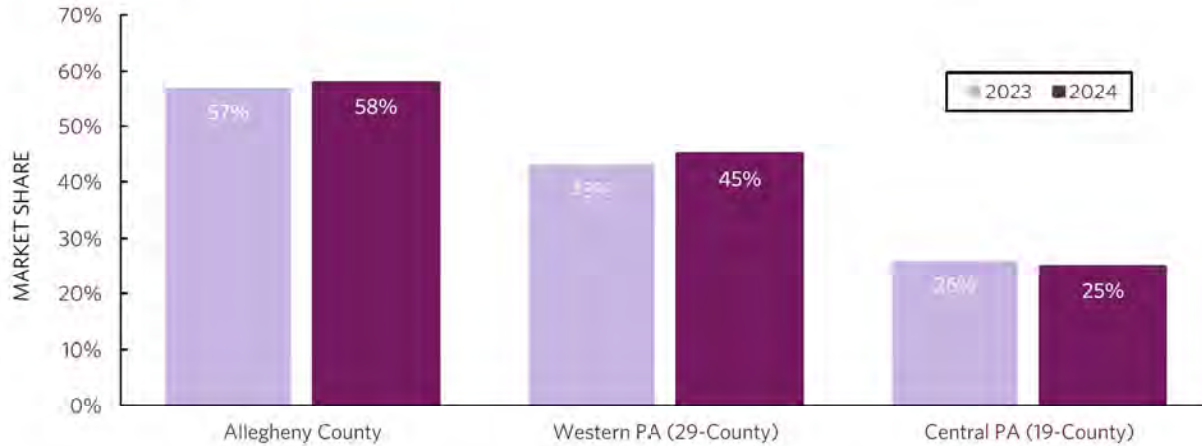
PERIOD ENDED DECEMBER 31, 2024

MARKET SHARE

The chart below shows the change in UPMC's estimated inpatient market share for the first two quarters of calendar years 2023 and 2024⁽¹⁾ by service area.⁽²⁾ This is the most recent market share data currently available.

UPMC INPATIENT MEDICAL-SURGICAL MARKET SHARE

AS OF JUNE 30⁽³⁾



⁽¹⁾ CY2024 is based on current system configuration. Washington Health System joined UPMC on June 1, 2024.

⁽²⁾ UPMC's three service areas are (1) Allegheny County, (2) a 29-county region which also includes Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Cameron, Centre, Clarion, Clearfield, Crawford, Elk, Erie, Fayette, Forest, Greene, Huntingdon, Indiana, Jefferson, Lawrence, McKean, Mercer, Potter, Somerset, Venango, Warren, Washington and Westmoreland counties, and (3) a 19-county region including Adams, Clinton, Columbia, Cumberland, Dauphin, Franklin, Fulton, Juniata, Lancaster, Lebanon, Lycoming, Mifflin, Montour, Northumberland, Perry, Snyder, Tioga, Union, and York counties.

⁽³⁾ Excludes psychiatry and substance abuse discharges.

MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

ASSET AND LIABILITY MANAGEMENT

As of December 31, 2024, UPMC's investment portfolio, excluding Enterprises and various restricted assets, utilized 172 ongoing external investment managers including 29 traditional managers, 15 hedge fund managers and 48 private capital managers. UPMC is also invested with an additional 80 legacy private capital and hedge fund managers. UPMC's investment portfolio has a long-term perspective and has generated annualized returns of 8.7%, 2.1% and 6.0% for the trailing one-, three- and five-year periods, respectively, ending December 31, 2024. As of December 31, 2024, 71% of UPMC's investment portfolio could be liquidated within three days.

UPMC's cost of capital during the twelve-month period ended December 31, 2024 was 3.6%. This cost of capital includes the accrual of interest payments, the amortization of financing costs and original issue discount or premium, the ongoing costs of variable rate debt and the cash flow impact of derivative contracts. As of December 31, 2024, the interest rates on UPMC's long-term debt were approximately 87% fixed and 13% variable after giving effect to derivative contracts. Interest cost for the variable rate debt for the period averaged 4.5%. The interest cost for the fixed rate debt was 3.5%. UPMC's primary credit facility, which expires in May 2028, has a borrowing limit of \$1 billion. As of December 31, 2024, UPMC had approximately \$128 million in letters of credit outstanding under the credit facility leaving \$872 million available to fund operating and capital needs, none of which was drawn.

In support of the Insurance Services Division, UPMC has credit facilities of \$350 million and \$250 million, the latter of which temporarily decreases each year to \$25 million from September 1st to April 30th. The credit facilities expire in May 2026 and May 2027, respectively. As of December 31, 2024, these credit facilities were undrawn.

MANAGEMENT'S DISCUSSION AND ANALYSIS

PERIOD ENDED DECEMBER 31, 2024

The table below compares reported Investing and Financing Activity for the years ended December 31, 2024 and 2023 by type.

Investing and Financing Activity by Type

Years Ended December 31	2024	2023
<i>(in thousands)</i>		
Realized gain	\$ 625,912	\$ 332,891
Interest and dividends, net of fees	198,868	174,899
Realized investment gain	\$ 824,780	\$ 507,790
Other unrealized (loss) gain	(144,944)	240,916
Unrealized gain (loss) on derivative contracts	87	(1,713)
Investment gain	\$ 679,923	\$ 746,993
Interest expense	(228,410)	(205,396)
Gain on extinguishment of debt	216	1,274
UPMC Enterprises activity	(124,055)	(118,133)
Gain from investing and financing activities	\$ 327,674	\$ 424,738

Sources and Uses of Cash

UPMC's primary source of operating cash is the collection of revenues and related accounts receivable. As of December 31, 2024, UPMC had approximately \$974 million of cash and cash equivalents.

Operating EBIDA prior to restructuring charges was \$492 million for the year ended December 31, 2024, compared to \$494 million for the year ended December 31, 2023. Key uses of cash for the year ended December 31, 2024, include capital expenditures, net of disposals, of approximately \$959 million (excluding any capital acquired through lease arrangements). Major capital projects included construction and improvements at UPMC Presbyterian, UPMC Central Pa. and UPMC North Central Pa., as well as ongoing expansion and improvement across the entirety of UPMC. Major information services projects included enhancements that are advancing UPMC's leading clinician centric computing environment, technology infrastructure that supports UPMC's diversified digital environment, investments in enterprise data analytics and other technologies that are transforming the consumer experience across the spectrum of health care.

UTILIZATION STATISTICS

PERIOD ENDED DECEMBER 31, 2024

The following table presents selected consolidated statistical indicators of medical-surgical, psychiatric, rehabilitation and skilled nursing patient activity for the years ended December 31, 2024 and 2023.

	Years Ended December 31	
	2024	2023
Licensed Beds	8,490	8,732
BEDS IN SERVICE		
Medical-Surgical	5,180	5,088
Psychiatric	437	430
Rehabilitation	242	243
Skilled Nursing	1,089	1,542
Total Beds in Service	6,948	7,303
PATIENT DAYS		
Medical-Surgical	1,350,179	1,339,318
Psychiatric	111,730	109,489
Rehabilitation	66,211	64,682
Skilled Nursing	289,307	360,141
Total Patient Days	1,817,427	1,873,630
Average Daily Census	4,966	5,133
Observation Days	157,790	175,571
Obs Average Daily Census	431	481
ADMISSIONS AND OBSERVATION CASES		
Medical-Surgical	252,253	237,909
Observation Cases	94,266	96,302
Subtotal	346,519	334,211
Psychiatric	10,191	10,114
Rehabilitation	4,522	4,389
Skilled Nursing	2,727	4,279
Total Admissions and Observation Cases	363,959	352,993
Overall Occupancy	78%	77%
AVERAGE LENGTH OF STAY		
Medical-Surgical	5.4	5.6
Psychiatric	11.0	10.8
Rehabilitation	14.6	14.7
Skilled Nursing	106.1	84.2
Overall Average Length of Stay	6.7	7.3
Emergency Room Visits	1,077,946	1,034,847
TRANSPLANTS (DOMESTIC AND INTERNATIONAL)		
Liver	282	268
Kidney	364	343
All Other	302	303
Total	948	914
OTHER POST-ACUTE METRICS		
Home Health Visits	524,913	505,098
Hospice Care Days	256,704	236,135
Outpatient Rehab Visits	740,012	690,401

OUTSTANDING DEBT

PERIOD ENDED DECEMBER 31, 2024

(DOLLARS IN THOUSANDS)

Issuer	Original Borrower	Series	Amount Outstanding
Allegheny County Hospital Development Authority	UPMC Health System	1997B	\$27,673
	UPMC	2007A	26,601
	UPMC	2017D	378,655
	UPMC	2019A	671,732
	UPMC	2021B	40,410
Monroeville Finance Authority	UPMC	2012	58,342
	UPMC	2014B	41,345
	UPMC	2022B	168,075
	UPMC	2023C	38,640
Pennsylvania Economic Development Financing Authority	UPMC	2014A	238,003
	UPMC	2015B	107,037
	UPMC	2016	197,487
	UPMC	2017A	365,862
	UPMC	2017B	83,801
	UPMC	2017C	127,503
	UPMC	2020A	261,469
	UPMC	2021A	238,395
	UPMC	2022A	222,866
	UPMC	2023A	464,166
	UPMC	2023B	91,946
Tioga County Industrial Development Authority	Laurel Health System	2010	4,585
	Laurel Health System	2011	2,917
Dauphin County General Authority	Pinnacle Health System	2016A	86,391
	Pinnacle Health System	2016B	75,515
General Authority of Southcentral Pennsylvania	Hanover Hospital	2015	19,487
Potter County Hospital Authority	UPMC	2018A	7,671
Washington County Hospital Authority	The Washington Hospital	2020A	38,480
	The Washington Hospital	2020B	4,110
Maryland Health and Higher Educational Facilities Authority	UPMC	2020B	189,190
None	UPMC	2020D	349,970
	UPMC	2020 Term Loan	299,953
	UPMC	2021C	399,809
	UPMC	2023	795,821
	Somerset Management Services	2013	1,210
	Various	Financing Leases & Loans	274,813
		Swap Liabilities	157
Total			\$6,649,156

Includes original issue discount and premium, deferred financing costs and other.

Source: UPMC Records

DEBT COVENANT CALCULATIONS

PERIOD ENDED DECEMBER 31, 2024

(Dollars in thousands)

DEBT SERVICE COVERAGE RATIO

UPMC is subject to a Debt Service Coverage Ratio covenant, tested annually at fiscal year-end, of 1.25x in various bank agreements and 1.10x in the 2007 MTI.

	Trailing Twelve-Month Period Ended December 31, 2024
Excess of expenses over revenues	\$ (14,688)
ADJUSTED BY:	
Net Unrealized Losses during Period ⁽¹⁾	144,857
Depreciation and Amortization ⁽¹⁾	702,560
Gain on Extinguishment of Debt ⁽¹⁾	(216)
Inherent Contribution ⁽¹⁾	(220,538)
Premium Deficiency Reserve ⁽¹⁾	115,000
Amortization of Premium Deficiency Reserve ⁽²⁾	(115,000)
Lease Impairment Realization - Facilities ⁽²⁾	(11,052)
Interest Expense ⁽³⁾	226,232
Revenues Available for Debt Service	\$ 827,155
Historical Debt Service Requirements - 2007 Master Trust Indenture ("MTI")	\$ 478,574
Debt Service Coverage Ratio - applicable to the 2007 MTI and various bank agreements	1.73X
<i>For informational purposes:</i>	
Historical Debt Service Requirements - All Debt and Finance Leases	\$ 526,660
Debt Service Coverage Ratio - All Debt and Finance Leases	1.57X

LIQUIDITY RATIO AS OF DECEMBER 31, 2024

UPMC is subject to a Liquidity Ratio covenant, tested annually at fiscal year-end, of 0.6x in various bank agreements and 0.5x in the 2007 MTI.

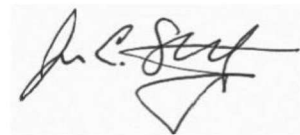
Unrestricted Cash and Investments	\$ 7,526,262
Master Trust Indenture Debt	6,144,361
Unrestricted Cash to MTI Debt	1.22

⁽¹⁾ Non-Cash.

⁽²⁾ Reflects ultimate realization of previous impairments.

⁽³⁾ Includes only interest on long-term debt.

I hereby certify to the best of my knowledge that, as of December 31, 2024, UPMC is in compliance with the applicable covenants contained in the financing documents for the bonds listed on the cover hereof and all applicable bank lines of credit and no Event of Default (as defined in any related financing document) has occurred and is continuing.



J.C. Stilley
Treasurer
UPMC

Audited Consolidated Financial Statements

FOR THE PERIOD ENDED DECEMBER 31, 2024



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Report of Independent Registered Public Accounting Firm

To the Board of Directors of UPMC

Opinion on the Financial Statements

We have audited the accompanying consolidated balance sheets of UPMC (the Company) as of December 31, 2024 and 2023, the related consolidated statements of operations and changes in net assets and cash flows for the years then ended, and the related notes (collectively referred to as the “consolidated financial statements”). In our opinion, the consolidated financial statements present fairly, in all material respects, the financial position of the Company at December 31, 2024 and 2023, and the results of its operations and its cash flows for the years then ended in conformity with U.S. generally accepted accounting principles.

We also have audited, in accordance with the auditing standards of the Public Company Accounting Oversight Board (United States) (PCAOB) and in accordance with auditing standards generally accepted in the United States of America, the Company’s internal control over financial reporting as of December 31, 2024, based on criteria established in Internal Control – Integrated Framework issued by the Committee of Sponsoring Organizations of the Treadway Commission (2013 framework) and our report dated March 4, 2025 (not presented herein) expressed an unqualified opinion thereon.

Basis for Opinion

These financial statements are the responsibility of the Company’s management. Our responsibility is to express an opinion on the Company’s financial statements based on our audits. We are required to be independent with respect to the Company in accordance with the relevant ethical requirements relating to our audit.

We conducted our audits in accordance with the auditing standards of the PCAOB and in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement, whether due to error or fraud. Our audits included performing procedures to assess the risks of material misstatement of the financial statements, whether due to error or fraud, and performing procedures that respond to those risks. Such procedures included examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements. Our audits also included evaluating the accounting principles used and significant estimates made by management, as well as evaluating the overall presentation of the financial statements. We believe that our audits provide a reasonable basis for our opinion.

Critical Audit Matter

The critical audit matter communicated below is a matter arising from the current period audit of the financial statements that was communicated or required to be communicated to the audit committee and that: (1) relates to accounts or disclosures that are material to the financial statements and (2) involved our especially challenging, subjective or complex judgments. The communication of the critical audit matter does not alter in any way our opinion on the consolidated financial statements, taken as a whole, and we are not, by communicating the critical audit matter below, providing a separate opinion on the critical audit matter or on the account or disclosure to which it relates.



Explicit Price Concessions for Revenue Recognition

Description of the Matter

For the year ended December 31, 2024, the Company’s net patient service revenue was \$12.2 billion. As discussed in Note 1 to the consolidated financial statements, net patient service revenue is recorded based upon the estimated amounts the Company expects to be entitled to receive from patients and third-party payers in exchange for providing patient care. Estimates of the explicit price concessions under managed care, commercial, and governmental insurance plans are based upon the payment terms specified in the related contractual agreements or as mandated under government payer programs. Management continually reviews the explicit price concession estimation process to consider and incorporate updates to laws and regulations and the frequent changes in managed care and commercial contractual terms resulting from contract negotiations and renewals.

Auditing management’s estimates of explicit price concessions was complex and judgmental due to the significant data inputs and subjective assumptions utilized in determining related amounts.

How We Addressed the Matter in Our Audit

We tested internal controls that address the risks of material misstatement related to the measurement and valuation of revenues, including estimation of explicit price concessions. For example, we tested management’s internal controls over the key data inputs to the explicit price concessions model, significant assumptions underlying management’s models, and management’s internal controls over retrospective hindsight reviews of historical reserve accuracy.

To test the estimated explicit price concessions, we performed audit procedures that included, among others, assessing methodologies and evaluating the significant assumptions discussed above and testing completeness and accuracy of the underlying data used by the Company in its estimates. We also assessed the historical accuracy of management’s estimates based on the results of the analysis comparing prior year estimates to actual results and other analytics as a source of potential corroborative or contrary evidence.

We have served as the Company’s auditor since 1994.
March 4, 2025

CONSOLIDATED BALANCE SHEETS

(DOLLARS IN THOUSANDS)

	As of	
	December 31, 2024	December 31, 2023
CURRENT ASSETS		
Cash and cash equivalents	\$ 974,097	\$ 1,104,198
Patient accounts receivable	1,661,310	1,587,557
Insurance and other receivables	1,815,329	1,789,429
Other current assets	855,721	717,144
Total current assets	5,306,457	5,198,328
Board-designated, restricted, trustee and other investments	7,918,918	8,442,381
Beneficial interests in foundations and trusts	801,970	726,515
Property, buildings and equipment:		
Land and land improvements	575,439	572,650
Buildings and fixed equipment	9,700,631	9,491,782
Movable equipment	3,690,485	3,606,010
Finance leases	129,775	186,957
Construction in progress	884,593	490,272
	14,980,923	14,347,671
Less allowance for depreciation	(7,983,109)	(7,723,246)
	6,997,814	6,624,425
Operating lease right-of-use assets	826,428	738,064
Other assets	915,148	917,022
Total assets	\$ 22,766,735	\$ 22,646,735
CURRENT LIABILITIES		
Accounts payable and accrued expenses	\$ 954,456	\$ 926,524
Accrued salaries and related benefits	1,121,930	1,060,393
Current portion of insurance reserves	1,371,581	1,301,619
Current portion of long-term obligations	538,249	171,239
Other current liabilities	690,557	878,322
Total current liabilities	4,676,773	4,338,097
Long-term obligations	6,110,907	6,623,508
Long-term insurance reserves	470,580	446,567
Operating lease noncurrent liabilities	787,352	707,447
Other noncurrent liabilities	557,218	546,479
Total liabilities	12,602,830	12,662,098
Net assets without donor restrictions	8,829,099	8,730,411
Net assets with donor restrictions	1,334,806	1,254,226
Total net assets	10,163,905	9,984,637
Total liabilities and net assets	\$ 22,766,735	\$ 22,646,735

See accompanying notes

CONSOLIDATED STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS

(DOLLARS IN THOUSANDS)

	Years Ended December 31	
	2024	2023
NET ASSETS WITHOUT DONOR RESTRICTIONS		
Net patient service revenue	\$ 12,180,180	\$ 11,176,052
Insurance enrollment revenue	15,112,377	14,281,945
Other revenue	2,573,709	2,242,491
Total operating revenues	29,866,266	27,700,488
Salaries, professional fees and employee benefits	9,968,163	9,656,301
Insurance claims expense	11,227,562	10,123,647
Supplies, purchased services and general	8,178,857	7,426,217
Depreciation and amortization	702,560	692,658
Total operating expenses	30,077,142	27,898,823
Operating loss prior to restructuring costs	(210,876)	(198,335)
Restructuring costs	(128,001)	-
Operating loss	(338,877)	(198,335)
Academic and research support provided	(253,000)	(247,300)
Inherent contribution from affiliations	220,538	-
Income tax and other non-operating activities	24,871	6,418
After-tax loss	\$ (346,468)	\$ (439,217)
Investing and financing activities:		
Investment gain	679,923	746,993
Interest expense	(228,410)	(205,396)
Gain on extinguishment of debt	216	1,274
UPMC Enterprises activity:		
Portfolio company revenue and net gains from sales	142,923	122,876
Portfolio company and research and development expense	(266,978)	(241,009)
Gain from investing and financing activities	327,674	424,738
Excess of expenses over revenues	(18,794)	(14,479)
Net activity attributable to noncontrolling interest	4,106	(16,175)
Excess of expenses over revenues attributable to controlling interest	(14,688)	(30,654)
Net change in pension liability and other	113,376	23,996
Change in net assets without donor restrictions	\$ 98,688	\$ (6,658)
NET ASSETS WITH DONOR RESTRICTIONS		
Change in beneficial interests in foundations and trusts	35,411	59,135
Restricted net assets acquired	40,044	-
Other changes in net assets with donor restrictions	5,125	25,278
Change in net assets with donor restrictions	80,580	84,413
Change in total net assets	179,268	77,755
Net assets, beginning of period	9,984,637	9,906,882
Net assets, end of period	\$ 10,163,905	\$ 9,984,637

See accompanying notes

CONSOLIDATED STATEMENTS OF CASH FLOWS

(DOLLARS IN THOUSANDS)

	Years Ended December 31	
	2024	2023
OPERATING ACTIVITIES		
Increase in total net assets	\$ 179,268	\$ 77,755
Adjustments to reconcile change in total net assets to net cash provided by (used in) operating activities:		
Depreciation and amortization	702,560	692,658
Change in beneficial interest in foundations and trusts	(35,411)	(59,135)
Restricted contributions and investment gains	(47,880)	(25,278)
Restricted net assets acquired	(40,044)	-
Unrealized losses (gains) on investments	144,944	(240,916)
Realized gains on investments	(625,912)	(332,891)
Purchases of non-alternative investments	(13,853,618)	(8,898,990)
Sales of non-alternative investments	14,834,630	8,822,079
Inherent contribution from affiliations	(220,538)	-
Changes in operating assets and liabilities:		
Accounts receivable	(6,396)	(25,243)
Other current assets	(123,647)	(122,776)
Accounts payable and accrued liabilities	50,844	128,710
Insurance reserves	93,975	134,768
Other current liabilities	(196,284)	(60,688)
Other noncurrent assets and liabilities	78,645	(234,304)
Other operating changes	58,125	(29,561)
Net cash provided by (used in) operating activities	993,261	(173,812)
INVESTING ACTIVITIES		
Purchases of property, buildings and equipment	(958,505)	(719,469)
UPMC Enterprises investments in non-consolidated entities	(70,845)	(57,500)
Cash used for acquisitions	-	(247,626)
Cash acquired through affiliations and asset sales	46,493	-
Net change in investments designated as nontrading	(24,434)	(30,676)
Purchases of alternative investments	(154,418)	(256,345)
Sales of alternative investments	345,170	255,629
Net change in other assets	(163,471)	93,848
Net cash used in investing activities	(980,010)	(962,139)
FINANCING ACTIVITIES		
Repayments of long-term obligations	(210,291)	(554,464)
Borrowings of long-term obligations	19,059	1,841,551
Restricted contributions and investment gains	47,880	25,278
Consideration paid to noncontrolling interest entities	-	(26,196)
Net cash (used in) provided by financing activities	(143,352)	1,286,169
Net change in cash and cash equivalents	(130,101)	150,218
Cash and cash equivalents, beginning of period	1,104,198	953,980
Cash and cash equivalents, end of period	\$ 974,097	\$ 1,104,198
SUPPLEMENTAL INFORMATION		
Finance lease obligations incurred to acquire assets	\$ 28,896	\$ 24,209

See accompanying notes

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

1. ORGANIZATIONAL OVERVIEW AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

UPMC is a Pennsylvania nonprofit corporation and is exempt from federal income tax pursuant to Section 501(a) of the Internal Revenue Code (the "Code") as an organization described in Section 501(c)(3) of the Code. Headquartered in Pittsburgh, Pennsylvania, UPMC is one of the world's leading integrated delivery and financing systems. UPMC comprises nonprofit and for-profit entities offering medical and health care-related services, including health insurance products. Closely affiliated with the University of Pittsburgh (the "University") and with shared academic and research objectives, UPMC partners with the University's Schools of the Health Sciences to deliver outstanding patient care, train tomorrow's health care specialists and biomedical scientists, and conduct groundbreaking research on the causes and course of disease.

The accompanying audited consolidated financial statements have been prepared in accordance with generally accepted accounting principles in the United States of America ("GAAP") and include the accounts of UPMC and its subsidiaries. Intercompany accounts and transactions are eliminated in consolidation.

Cash and Cash Equivalents

Cash and cash equivalents consist primarily of cash and investments, which are so near to maturity that they present insignificant risk of changes in value. Fixed income instruments with original, short-term maturities of less than 90 days that are held in Master Trust Funds ("MTF") are excluded from cash equivalents as they are commingled with longer-term investments.

Net Patient Service Revenue

UPMC's net patient service revenue is recorded based upon the estimated amounts UPMC expects to be entitled to receive from patients, third-party payers (including health insurers and government programs) and others and includes an estimate of variable consideration for retroactive revenue adjustments due to settlement of audits, reviews and investigations. Generally, UPMC bills the patients and third-party payers several days after the services are performed and/or the patient is discharged from the facility. Estimates of the explicit price concessions under managed care, commercial and governmental insurance plans are based upon the payment terms specified in the related contractual agreements or as mandated under government payer programs. UPMC continually reviews the explicit price concession estimation process to consider and incorporate updates to laws and regulations and the frequent changes in managed care and commercial contractual terms resulting from contract negotiations and renewals. Revenue is recognized as performance obligations are satisfied. Performance obligations are determined based on the nature of the services provided by UPMC. Revenue for performance obligations satisfied over time is recognized based on actual charges incurred in relation to total expected (or actual) charges. UPMC believes that this method provides a reasonable representation of the transfer of services over the term of the performance obligation based on the inputs needed to satisfy the obligation. Generally, performance obligations satisfied over time relate to inpatient services. UPMC measures the performance obligation from admission into the hospital to the point when it is no longer required to provide services to that patient, which is generally at the time of discharge. Revenue for performance obligations satisfied at a point in time is recognized when goods or services are provided and UPMC does not believe it is required to provide additional goods or services to the patient.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

The majority of UPMC's services are rendered to patients with third-party coverage. Payment under these programs for all payers is based on a combination of prospectively determined rates, discounted charges and historical costs. Amounts received under Medicare and Medical Assistance programs are subject to review and final determination by program intermediaries or their agents. The contracts UPMC has with commercial payers also provide for retroactive audit and review of claims. Agreements with third-party payers typically provide for payments at amounts less than established charges. Generally, patients who are covered by third-party payers are responsible for related deductibles and coinsurance, which vary in amount. UPMC also provides services to uninsured patients. Revenues related to uninsured patients and uninsured copayment and deductible amounts for patients who have health care coverage may have discounts applied (uninsured discounts and contractual discounts). UPMC also records estimated implicit price concessions (based primarily on historical collection experience) related to uninsured accounts to record these revenues at the estimated amounts UPMC expects to collect. Subsequent changes to the estimate of the transaction price are generally recorded as adjustments to net patient service revenue in the period of the change and are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods if final settlements differ from estimates. Adjustments arising from a change to previously estimated transaction prices were not significant in the years ended December 31, 2024 or 2023.

Consistent with UPMC's mission, care is provided to patients regardless of their ability to pay. UPMC has determined it has provided implicit price concessions to uninsured patients and patients with other uninsured balances (for example, copays and deductibles). The implicit price concessions included in estimating the transaction price represent the difference between amounts billed to patients and the amounts UPMC expects to collect based on its collection history with those patients. Patients who meet UPMC's criteria for charity care are provided care without charge or at amounts less than established rates and UPMC has determined it has provided an implicit price concession. Price concessions, including charity care, are deducted from net patient service revenue.

The collection of outstanding receivables from Medicare, Medicaid, managed care payers, other third-party payers and patients is UPMC's primary source of cash and is critical to its operating performance. The primary collection risks relate to uninsured patient accounts, including patient accounts for which the primary insurance carrier has paid the amounts covered by the applicable agreement, but patient responsibility amounts (deductibles and copayments) remain outstanding. Implicit price concessions relate primarily to amounts due directly from patients. Estimated implicit price concessions are recorded for all uninsured accounts, regardless of the age of those accounts. Accounts are written off when all reasonable internal and external collection efforts have been performed. The estimates for implicit price concessions are based upon UPMC's assessment of historical write-offs and expected net collections, business and economic conditions, trends in federal, state and private employer health care coverage and other collection indicators.

The composition of net patient service revenue for the years ended December 31, 2024 and 2023 is as follows:

Years Ended December 31	2024	2023
Commercial	37%	37%
Medicare	40%	41%
Medical Assistance	16%	16%
Self-pay/other	7%	6%
	100%	100%

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

Laws and regulations governing the Medicare and Medical Assistance programs are complex and subject to interpretation. Compliance with such laws and regulations is subject to government review and interpretation as well as significant regulatory action, including fines, penalties and exclusion from Medicare and Medical Assistance programs. As a result, there is at least a reasonable possibility that the recorded estimates may change.

Insurance Enrollment Revenue

UPMC's insurance subsidiaries (collectively, the "Health Plans") provide health care services on a prepaid basis under various contracts. Insurance enrollment revenues are recognized as income in the period in which enrollees are entitled to receive health care services, which represents the performance obligation. Health care premium payments received from UPMC's members in advance of the service period are recorded as unearned revenues.

Insurance enrollment revenues include premiums that are collected from companies, individuals, and government entities. Laws and regulations governing the Medicare and Medical Assistance programs are complex and subject to interpretation. Compliance with such laws and regulations can be subject to government review and interpretation as well as significant regulatory action, including fines, penalties and exclusion from the programs. As a result, there is at least a reasonable possibility that recorded estimates may change.

Other Revenue

UPMC's other revenue consists of various contracts related to its Health Services and Insurance Services divisions. These contracts vary in duration and in performance obligations. Revenues are recognized when the performance obligations identified within the individual contracts are satisfied and collectability is probable. Revenue recognized related to governmental funding in response to the COVID-19 pandemic is captured in other revenue.

Receivables

Concentrations of patient accounts receivable at December 31, 2024 and 2023 include:

Years Ended December 31	2024	2023
Commercial	45%	44%
Medicare	32%	32%
Medical Assistance	9%	11%
Self-pay/other	14%	13%
	100%	100%

Insurance and other receivables are primarily comprised of payments due to Insurance Services and include the uncollected amounts from fully insured groups, individuals and government programs and are reported net of an allowance for estimated terminations and uncollectible accounts.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

Board-Designated, Restricted, Trusteed and Other Investments

Substantially all of UPMC's investments in debt and equity securities are classified as trading. This classification requires UPMC to recognize unrealized gains and losses on substantially all of its investments in debt and equity securities as investment gain in the consolidated statements of operations and changes in net assets. This classification also includes UPMC Enterprises' cost basis investments in early stage entities, which are categorized as alternative investments. Gains and losses on the sales of securities are determined by the average cost method. Realized and unrealized gains and losses are included in investment gain in the consolidated statements of operations and changes in net assets. Realized and unrealized gains and losses on donor-restricted assets are recorded as changes in net assets with donor restrictions in the consolidated statements of operations and changes in net assets.

Investments in equity securities with readily determinable fair values and all investments in debt securities are measured at fair value using quoted market prices or model-driven valuations. These investments predominantly include those maintained in MTF and are summarized as nonalternative investments in Note 5.

Investments in limited partnerships that invest in marketable securities (hedge funds) are reported using the equity method of accounting based on information provided by the respective partnership, generally received on a one month lag. The values provided by the respective partnerships are based on historical cost, appraisals or other estimates that require varying degrees of judgment. Generally, UPMC's holdings reflect net contributions to the partnership and an allocated share of realized and unrealized investment income and expenses. The investments may individually expose UPMC to securities lending, short sales, and trading in futures and forward contract options and other derivative products. UPMC's risk is limited to its carrying value for these lending and derivatives transactions. Amounts can be divested only at specified times. The financial statements of the limited partnerships are audited annually, generally as of December 31.

The values of UPMC's private equity investments are based upon financial statements received from the general partners, which are generally received on a quarterly lag. As a result, the market values and earnings recorded as of December 31, 2024 generally reflect the partnership activity experienced during the year ended September 30, 2024. These investments are summarized as alternative investments in Note 5.

Fair Value Elections

Pursuant to accounting guidance provided by ASC 825-10, *Financial Instruments*, UPMC makes elections, on an investment-by-investment basis, as to whether it measures certain equity method investments that are traded in active markets at fair value. Fair value elections are generally irrevocable. The initial unrealized gains recognized upon election of the fair value option are recorded as operating revenue in the consolidated statements of operations and changes in net assets consistent with accounting for other equity method investments where UPMC has the ability to exercise significant influence but not control. Any subsequent changes in the fair value of the investment are recorded as investment gain in the consolidated statements of operations and changes in net assets, consistent with UPMC's reporting of gains and losses on other marketable securities included in board-designated, restricted, trusteed and other investments. Management believes this reporting increases the transparency of UPMC's financial condition.

Financial Instruments

Cash and cash equivalents and investments recorded at fair value aggregate to \$7,522,732 and \$8,277,332 at December 31, 2024 and 2023, respectively. The fair value of these instruments is based on market prices as estimated by financial institutions. The fair value of amounts owed to counterparties under derivative contracts at December 31, 2024 and 2023, is \$157 and \$244, respectively, based on pricing models that take into account the present value of estimated future cash flows.

UPMC participates in securities lending transactions whereby a portion of its investments are loaned, through its agent, to various parties in return for cash and securities from the parties as collateral for the securities loaned. The amount of cash collateral received under securities lending is reported as an asset with a corresponding payable in the consolidated balance

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

sheets. The total collateral is required to have a market value between 102% and 105% of the market value of securities loaned. As of December 31, 2024 and 2023, securities loaned to various parties, of which UPMC maintains ownership, were \$71,365 and \$173,154, respectively, and total collateral (cash and noncash) received related to the securities loaned was \$75,442 and \$181,122, respectively.

Premium Deficiency Reserve

UPMC evaluates certain of its insurances contracts to assess the sufficiency of premiums collected in relation to the expected future costs of policy benefits and expenses. If the review indicates that the present value of expected future claims, unamortized acquisition costs and maintenance costs exceeds the expected premium from in-force contracts, a premium deficiency reserve ("PDR") must be established. For purposes of determining a PDR, contracts are grouped in a manner consistent with the method of acquiring, servicing, and measuring profitability of such contracts and expected investment income is included. In September 2024, UPMC recorded a PDR of \$115,000, primarily related to its 2024 contract year Medicare and Medicaid products. The reserve was fully amortized during the fourth quarter of 2024, offsetting actual losses from that period. As of December 31, 2024 and 2023, UPMC determined that expected premiums were in excess of expected future costs and therefore no PDR was recorded.

Beneficial Interests in Foundations and Trusts

Several of UPMC's subsidiary hospitals have foundations that, according to their bylaws, were formed for the exclusive purpose of supporting and furthering the mission of the respective hospital. The foundations are separate corporations and are not liable for the obligations of UPMC, including any claims of creditors of any UPMC entities. The net assets of certain foundations are included in the consolidated balance sheets as beneficial interests in foundations and net assets with donor restrictions because the hospitals' use of these assets is at the discretion of the foundations' independent boards of directors.

Beneficial interests in foundations and trusts of \$801,970 and \$726,515 and the net assets with donor restrictions of consolidated foundations of \$99,968 and \$97,477 as of December 31, 2024 and 2023, respectively, are not pledged as collateral for UPMC's debt.

Property, Buildings and Equipment

Property, buildings and equipment are recorded at cost or, if donated or impaired, at fair market value at the date of receipt or impairment. Interest cost incurred on borrowed funds (net of interest earned on such funds) during the period of construction of capital assets is capitalized as a component of the cost of acquiring those assets.

Costs associated with the development and installation of internal-use software are expensed or capitalized depending on whether they are incurred in the preliminary project stage, application development stage or post-implementation stage.

Depreciation is computed using the straight-line method at rates designed to depreciate the assets over their estimated useful lives (predominantly ranging from 3 to 40 years) and includes depreciation related to finance leases. Certain newly constructed buildings have estimated useful lives of up to 60 years. Depreciation expense on property, buildings and equipment for the years ended December 31, 2024 and 2023 was \$702,038 and \$691,387, respectively.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

Leases

Leases are classified as either operating or financing, and the lease classification determines whether the expense is recognized on a straight-line basis (operating leases) or based on an effective interest method (finance leases). UPMC has made accounting policy elections not to apply lease recognition requirements to short-term leases as well as to use the risk-free discount rate for its operating leases. Assets acquired under operating lease arrangements are categorized as operating lease right-of-use assets on the consolidated balance sheets, while finance leases are recognized as property, buildings and equipment. UPMC has also made an accounting policy election not to bifurcate lease components from non-lease components. For leases that include variable lease payments, the payment is determined based on the executed contract terms. Some leases contain options to extend or terminate the lease, but these are not recognized in the right-of-use assets and lease liabilities as of December 31, 2024, unless it is probable that the option will be exercised.

Asset Impairment

UPMC evaluates the recoverability of the carrying value of long-lived assets by reviewing long-lived assets for impairment whenever events or changes in circumstances indicate that the carrying amount of an asset may not be recoverable and adjusts the asset cost to fair value if undiscounted cash flows are less than the carrying amount of the asset.

Other Assets

Investments in individual entities in which UPMC has the ability to exercise significant influence but does not control, generally 20% to 50% ownership, are reported using the equity method of accounting unless the fair value option is elected. Other assets includes approximately \$317,425 and \$370,404 at December 31, 2024 and 2023, respectively, relating to investments in partnerships and joint ventures that provide health care, management, and other goods and services to UPMC, its affiliates and the community at large.

Goodwill

Goodwill represents the excess of the cost of an acquired entity over the net of the amounts assigned to the fair value of assets acquired and liabilities assumed. As of December 31, 2024 and 2023, goodwill of \$417,552 and \$417,701 respectively, is recorded in UPMC's consolidated balance sheets as other assets.

Goodwill is reviewed annually for impairment, or more frequently if events or circumstances indicate that the carrying value of an asset may not be recoverable. UPMC has the option to qualitatively assess goodwill for impairment before completing a quantitative assessment. Under the qualitative approach, if, after assessing the totality of events or circumstances, including both macroeconomic, industry and market factors, and entity-specific factors, UPMC determines it is likely (more likely than not) that the fair value is greater than its carrying amount, then the quantitative impairment analysis is not required. As of December 31, 2024 and 2023, after application of the qualitative approach, there were no indicators of impairment.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

Derivatives

UPMC uses derivative financial instruments (“derivatives”) to modify the interest rates and manage risks associated with its asset allocation and outstanding debt. UPMC records derivatives as assets or liabilities in the consolidated balance sheets at fair value. The accounting for changes in the fair value (i.e., gains or losses) of a derivative depends on whether it has been designated and qualifies as part of a hedging relationship and, further, on the type of hedging relationship. UPMC has entered into interest rate swap agreements that convert a portion of its variable rate debt to a fixed interest rate. None of UPMC’s swaps outstanding as of December 31, 2024 and 2023 are designated as hedging instruments and, as such, changes in fair value are recognized in investing and financing activities as investment gain in the consolidated statements of operations and changes in net assets.

By using derivatives to manage these risks, UPMC exposes itself to credit risk and market risk. Credit risk is the failure of the counterparty to perform under the terms of the derivatives. When the fair value of a derivative is positive, the counterparty owes UPMC, which creates credit risk for UPMC. When the fair value of a derivative is negative, UPMC owes the counterparty, and therefore, it does not incur credit risk. UPMC minimizes the credit risk in derivatives by entering into transactions that require the counterparty to post collateral for the benefit of UPMC based on the credit rating of the counterparty and the fair value of the derivative. If UPMC has a derivative in a liability position, UPMC’s credit is a risk and fair market values could be adjusted downward. Market risk is the effect on the value of a financial instrument that results from a change in interest rates. The market risk associated with interest rate changes is managed by establishing and monitoring parameters that limit the types and degree of market risk that may be undertaken. Management also mitigates risk through periodic reviews of derivative positions in the context of UPMC’s total blended cost of capital.

Net Assets

Resources are classified for reporting purposes as net assets without donor restrictions and net assets with donor restrictions, according to the absence or existence of donor-imposed restrictions. Board-designated net assets are net assets without donor restrictions that have been set aside by the Board for specific purposes. Net assets with donor restrictions are those assets, including contributions and accumulated investment returns, whose use has been limited by donors for a specific purpose or time period or are those for which donors require the principal of the gifts to be maintained in perpetuity to provide a permanent source of income.

Net assets with donor restrictions include \$448,982 and \$403,884 of net assets held in perpetuity and \$885,824 and \$850,342 of temporary restricted net assets at December 31, 2024 and 2023, respectively. Net assets with donor restrictions include beneficial interests in foundations that support research and other health care programs. Some net assets with donor restrictions are limited by donors and the foundations to a specific time period or purpose and are reclassified to net assets without donor restrictions and included in the consolidated statements of operations and changes in net assets as other revenue or assets released from restriction for capital purchases when the restriction is met.

Excess of Revenues over Expenses

The consolidated statements of operations and changes in net assets include excess of revenues over expenses as a performance indicator. Excess of revenues over expenses includes all changes in net assets without donor restrictions except for contributions and distributions from foundations for the purchase of property and equipment, adjustments for pension liability, other than net periodic pension cost, discontinued operations, if any, and the cumulative effect of changes in accounting principles, if any.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

Use of Estimates

The preparation of financial statements in conformity with US GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

2. SIGNIFICANT TRANSACTIONS

Throughout 2024, UPMC has undertaken a comprehensive initiative aimed at enhancing operational efficiency and optimizing cost structures. As part of this initiative, UPMC incurred severance expense, operational restructuring and other related costs totaling \$128,001 for the year ended December 31, 2024. Of the expenses incurred, approximately \$115,000 were paid during the year ended December 31, 2024, and the remainder is accrued in accounts payable and accrued expenses in the consolidated balance sheet as of December 31, 2024.

In response to the COVID-19 pandemic, the United States Department of Homeland Security, through the Federal Emergency Management Agency ("FEMA"), enacted several programs that provide resources and relief funds to hospitals and other health care providers. FEMA funding has served as reimbursement for health care related expenses incurred as a result of the COVID-19 pandemic. For the years ended December 31, 2024 and 2023, UPMC has recognized approximately \$270,000 and \$48,000, respectively, within other revenue.

In June 2024, UPMC and the Washington Health System ("WHS") executed an Integration and Affiliation Agreement (the "Agreement") as part of UPMC's continued commitment to providing high-quality health care to residents in the Washington and Greene counties of Pennsylvania. As a result of the Agreement, UPMC acquired approximately \$369,000 of total assets, consisting of \$128,000 of investments, \$79,000 of property, plant and equipment, \$57,000 of current and long-term assets, \$40,000 of beneficial interest in foundations, \$37,000 of cash and \$28,000 of accounts receivable, assumed approximately \$108,000 of total liabilities including \$61,000 of current and long-term liabilities and \$47,000 of debt obligations, and acquired approximately \$40,000 of net assets with donor restrictions. UPMC applies the guidance set forth in Accounting Standards Codification ("ASC") 805 *Business Combinations* for affiliations and acquisitions and, as such, will continue to assess the fair value of any assets and liabilities acquired as of the acquisition date.

The purchase accounting is preliminary and subject to the completion of the fair value assessment. Material adjustments, if any, to provisional amounts in subsequent periods, will be reflected as required as adjustments to assets and liabilities acquired, along with an offsetting adjustment to inherent contribution in the period in which the purchase price allocation is completed. For this affiliation, UPMC applied the not-for-profit business combination accounting guidance, ASC Subtopic 958-805: *Not-for-Profit Entities - Business Combinations*. The guidance primarily characterizes business combinations between not-for-profit entities as nonreciprocal transfers of assets resulting in the contribution of the acquiree's net assets to the acquirer. As of the affiliation date, the guidance prescribes that the acquirer recognize the excess fair value of the net assets acquired over the fair value of the consideration transferred as a separate credit in its statement of operations as of the affiliation date. Accordingly, UPMC recognized an inherent contribution related to the net assets acquired in the transaction of \$220,538 in its consolidated statement of operations and changes in net assets for the year ended December 31, 2024. The inherent contribution recorded for the period is based on the preliminary fair market values of the net assets acquired.

In February 2023, CarepathRx, an equity investment of UPMC Chartwell, executed an agreement where a portion of its business was sold to a third party. UPMC Chartwell's equity investment in CarepathRx resulted in a gain of approximately \$163,000 in other revenues, of which approximately \$20,000 was attributed to noncontrolling interest, in its consolidated statement of operations and changes in net assets for the year ended December 31, 2023, in accordance with ASC 810, *Consolidation*.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

In March 2023, UPMC acquired the Sports Surgery Clinic (“SSC”) in Dublin, Ireland. As UPMC’s fourth hospital in Ireland, the transaction is intended to further UPMC’s commitment to clinical excellence in this region of the world. As a result of the acquisition, UPMC acquired approximately \$106,000 of total assets, consisting of \$100,000 of property, plant and equipment and \$6,000 of other assets. Total consideration paid by UPMC approximated \$247,000 and resulted in approximately \$141,000 of additional goodwill in the consolidated balance sheet as of December 31, 2023. UPMC applies the guidance set forth in ASC 805 *Business Combinations* for affiliations and acquisitions.

3. NEW ACCOUNTING PRONOUNCEMENTS

No new accounting pronouncements were released or adopted that will have a material effect on UPMC’s consolidated financial statements for the year ended December 31, 2024.

4. CHARITY CARE

UPMC’s patient acceptance policy is based on its mission and its community service responsibilities. Accordingly, UPMC accepts patients in immediate need of care, regardless of their ability to pay. UPMC does not pursue collection of amounts determined to qualify as charity care based on established policies of UPMC. These policies define charity care as those services for which no payment is due for all or a portion of the patient’s bill. For financial reporting purposes, charity care is excluded from net patient service revenue. The amount of charity care provided, determined on the basis of cost, was \$171,084 and \$122,140 for the years ended December 31, 2024 and 2023, respectively. UPMC estimates the cost of providing charity care using the ratio of average patient care cost to gross charges and then applying that ratio to the gross uncompensated charges associated with providing charity care.

5. CASH AND INVESTMENTS

Following is a summary of cash and investments included in the consolidated balance sheets:

	December 31	
	2024	2023
Internally designated:		
Health insurance programs	\$ 1,379,360	\$ 1,675,823
Professional and general liability insurance program	706,371	676,371
Employee benefit and workers’ compensation self-insurance programs	145,848	127,396
	2,231,579	2,479,590
Externally designated:		
Trusted assets for capital and debt service payments	1,179	15,667
Donor-restricted assets	495,386	490,379
	496,565	506,046
Other long-term investments	5,190,774	5,456,745
Board-designated, restricted, trustee and other investments	7,918,918	8,442,381
Cash and cash equivalents	974,097	1,104,198
	\$ 8,893,015	\$ 9,546,579

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

Investments are maintained and administered using a bank as trustee. As of December 31, 2024, UPMC's investment portfolio, excluding Enterprises and various restricted assets, utilized 172 ongoing external investment managers including 29 traditional managers, 15 hedge fund managers and 48 private capital managers. UPMC is also invested with an additional 80 legacy private capital and hedge fund managers. The largest allocation to any alternative investment fund is \$120,364 as of December 31, 2024. Certain managers use various equity and interest rate derivatives. These instruments are subject to various risks similar to nonderivative financial instruments, including market, credit, liquidity, operational and foreign exchange risk. UPMC's unfunded commitments to investments are \$391,620 and \$460,741 as of December 31, 2024 and 2023, respectively. Unfunded commitments may be called by managers pursuant to the terms of each specific fund's documents, which allow capital to be called during a fund's investment period for new investments. While terms may vary, investment periods are generally within six years.

Investment return from cash and investments is comprised of the following for the years ended December 31, 2024 and 2023:

	2024	2023
Interest income	\$ 183,049	\$ 155,674
Dividend income	48,376	54,460
Traditional investment manager and trustee fees	(32,557)	(35,235)
Net realized gains on sales of securities	625,912	332,891
	824,780	507,790
Other unrealized (loss) gain	(144,944)	240,916
Unrealized gain (loss) on derivative contracts	87	(1,713)
	(144,857)	239,203
Investment gain	\$ 679,923	\$ 746,993

In managing the UPMC investment strategy, an important consideration is to ensure sufficient liquidity. While UPMC's relationships with its external investment managers vary in terms of exit provisions, a percentage of the agreements allow ready access to underlying assets which are generally liquid and marketable. Liquidity as of December 31, 2024 is shown below:

Liquidity Availability	Cash and Cash Equivalents	Nonalternative Investments	Alternative Investments	Total
Within three days	\$ 974,097	\$ 5,353,962	\$ -	\$ 6,328,059
Within 30 days	-	-	45,789	45,789
Within 60 days	-	-	-	-
Within 90 days	-	-	646,327	646,327
More than 90 days	-	-	1,872,840	1,872,840
Total	\$ 974,097	\$ 5,353,962	\$ 2,564,956	\$ 8,893,015

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

6. CREDIT ARRANGEMENTS

UPMC has a revolving line and letter of credit facility (the "Revolving Facility") with a capacity of \$1,000,000. The Revolving Facility expires on May 24, 2028. The Revolving Facility is used to manage cash flow during the year and to provide for a consolidated method of issuing various letters of credit for certain business units. A note to secure UPMC's repayment obligation with respect to the Revolving Facility was issued under the 2007 Master Trust Indenture ("2007 UPMC MTI") and is secured by a pledge of and security interest in the gross revenues of UPMC's parent corporation, UPMC Presbyterian Shadyside, UPMC Magee-Womens Hospital, UPMC Passavant and UPMC St. Margaret as members of the obligated group under the 2007 UPMC MTI. At the option of UPMC, advances under the Revolving Facility bear interest on the basis of the prime rate, federal funds effective rate, or the secured overnight financing rate ("SOFR").

As of December 31, 2024 and 2023, UPMC had issued \$128,080 and \$130,080, respectively, of letters of credit under the Revolving Facility. These letters of credit predominantly support the capital requirements of certain insurance subsidiaries. As of December 31, 2024 and 2023, there was \$871,920 and \$869,920, respectively, available to borrow under the Revolving Facility. No amounts were outstanding under the Revolving Facility as of December 31, 2024 and 2023.

In support of the Insurance Services Division, UPMC has credit facilities of \$350,000 and \$25,000, the latter of which temporarily increases each year to \$250,000 from May 1st to August 31st. The credit facilities expire in May 2026 and May 2027, respectively. As of December 31, 2024, these credit facilities were undrawn.

7. LONG-TERM OBLIGATIONS AND DERIVATIVE INSTRUMENTS

Long-term obligations consist of the following:

	December 31	
	2024	2023
Fixed rate revenue bonds	\$ 5,271,193	\$ 5,369,977
Variable rate revenue bonds	873,325	896,291
Finance leases and other	276,794	273,750
Par value of long-term obligations	6,421,312	6,540,018
Net premium and other	227,844	254,729
	6,649,156	6,794,747
Less current portion	(538,249)	(171,239)
Total long-term obligations	\$ 6,110,907	\$ 6,623,508

Bonds and leases outstanding represent funds borrowed by the UPMC parent corporation and various subsidiaries pursuant to loan agreements and lease and sublease financing arrangements with governmental authorities. The proceeds were used for the purchase, construction and renovation of hospital facilities, certain buildings and equipment, as well as the extinguishment of debt.

The fixed rate revenue bonds bear interest at fixed coupon rates ranging from 1.40% to 6.00% as of December 31, 2024 and from 1.80% to 6.00% as of December 31, 2023. The average interest costs for the variable rate revenue bonds were 4.46% and 4.41% during the years ended December 31, 2024 and 2023, respectively. Bonds have varying principal payments and final maturities from 2025 through 2053. Certain revenue bonds (\$27,673 and \$35,872 for 2024 and 2023, respectively) are secured by bond insurance. The bonds contain redemption provisions whereby, at the direction of UPMC, the bonds may be redeemed on various dates as presented within the bond agreements.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

Bonds in the aggregate of \$6,144,361 and \$6,266,024 as of December 31, 2024 and 2023, respectively, are issued under the 2007 UPMC MTI. The bonds are secured by a pledge of and security interest in gross revenues. Certain amounts borrowed under the 2007 UPMC MTI are loaned to certain subsidiary corporations pursuant to loan and contribution agreements and require the transfer of subsidiary funds to the parent corporation in the event of failure to satisfy the UPMC parent corporation liquidity covenant.

The various indebtedness agreements contain restrictive covenants, the most significant of which are the maintenance of minimum debt service coverage and liquidity ratios, and restrictions as to the incurrence of additional indebtedness and transfers of assets. UPMC was in compliance with such covenants as of December 31, 2024 and 2023.

Aggregate maturities of long-term obligations for the next five years, assuming no remarketing of UPMC's variable rate debt, indicating the maximum potential payment obligations in these years, are as follows:

2025	\$	538,249
2026		608,237
2027		284,985
2028		182,991
2029		195,357

Interest paid, net of amounts capitalized on all obligations was \$270,070 and \$237,797 during the years ended December 31, 2024 and 2023, respectively.

During the year ended December 31, 2023, UPMC issued the tax-exempt Series 2023A, 2023B, 2023C, and 2023D bonds, as well as the taxable Series 2023 bonds in the amounts of \$445,000, \$89,000, \$36,000, \$250,000, and \$800,000, respectively. These bonds refunded certain indebtedness, funded capital projects and supported working capital. Details of the offerings can be found in the official statements for each issue. Additionally, UPMC incurred \$164,000 of indebtedness relating to its international operations.

UPMC maintains interest rate swap programs on certain of its debt in order to manage its interest rate risk. As of December 31, 2024, and December 31, 2023, UPMC is party to a floating-to-fixed interest rate swap where UPMC receives 68% of a one-month index rate and pays a fixed rate of 3.60% on a notional of \$13,330 and \$25,965, respectively. As of December 31, 2024, and December 31, 2023, UPMC is also party to a basis swap where UPMC receives 67% of a three-month index rate plus .3217% and pays Securities Industry and Financial Markets Association ("SIFMA") on a notional of \$26,675 and \$30,525, respectively. From origination through June 30, 2023, London Inter-Bank Offering Rate ("LIBOR") served as the receipt index for both agreements. Effective July 1, 2023, LIBOR ceased to be recognized as a representative index whereupon Secured Overnight Financing Rate ("SOFR") was selected as the replacement index. The aforementioned agreements are scheduled to mature in 2025 and 2037, respectively, and are carried as a liability with a combined market value of (\$157) as of December 31, 2024, and (\$244) as of December 31, 2023.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

8. FAIR VALUE MEASUREMENTS

As of December 31, 2024 and 2023, UPMC held certain assets that are required to be measured at fair value on a recurring basis. These include cash and cash equivalents, certain board-designated, restricted, trustee, and other investments and derivative instruments. Certain alternative investments are measured using the equity method of accounting and are therefore excluded from the fair value hierarchy tables presented herein. The valuation techniques used to measure fair value are based upon observable and unobservable inputs. Observable inputs reflect market data obtained from independent sources, while unobservable inputs are generally unsupported by market activity. The three-tier fair value hierarchy, which prioritizes the inputs used in measuring fair value, includes:

- Level 1: Quoted prices for identical assets or liabilities in active markets.
- Level 2: Quoted prices for similar instruments in active markets; quoted prices for identical or similar instruments in markets that are not active; and model-driven valuations whose inputs are observable or whose significant value drivers are observable.
- Level 3: Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities.

The following tables represent UPMC's fair value hierarchy for its financial assets and liabilities measured at fair value on a recurring basis as of December 31, 2024 and 2023. The interest rate swaps are valued using internal models, which are primarily based on market observable inputs, including interest rate curves. When quoted market prices are unobservable for fixed income securities, quotes from independent pricing vendors based on recent trading activity and other relevant information, including market interest rate curves, referenced credit spreads and estimated prepayment rates where applicable, are used for valuation purposes. These investments are included in Level 2 and include corporate fixed income, government bonds, and mortgage and asset-backed securities. As of December 31, 2024 and 2023, respectively, UPMC had \$1,370,283 and \$1,269,247 of alternative investments accounted for under the equity method, which approximates fair value, but are excluded from the following tables.

Other investments measured at fair value represent funds included on the consolidated balance sheets that are reported using net asset value ("NAV"). These amounts are not required to be categorized in the fair value hierarchy. The fair value of these investments is based on the net asset value information provided by the general partner. Fair value is based on the proportionate share of the NAV based on the most recent partners' capital statements received from the general partners, which is generally one quarter prior to the balance sheet date. Certain of UPMC's investments, including both alternative and nonalternative investments, are utilizing NAV to calculate fair value and are included in other investments in the following tables.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

FAIR VALUE MEASUREMENTS AS OF DECEMBER 31, 2024

	Level 1	Level 2	Level 3	NAV	Total Carrying Amount
ASSETS					
Fixed income	\$ -	\$ 2,352,381	\$ -	\$ -	\$ 2,352,381
Bond mutual funds	326,426	-	-	-	326,426
Domestic equity	1,296,224	9,304	-	-	1,305,528
International equity	555,260	-	-	-	555,260
Public real estate	84,489	-	-	-	84,489
Active equity	(36,721)	162,642	-	-	125,921
Absolute equity	130	66,587	-	-	66,717
Securities on loan	71,365	-	-	-	71,365
Securities lending collateral	28,344	-	-	-	28,344
Alternative and other investments at NAV	-	-	-	1,660,548	1,660,548
Total assets measured at fair value on a recurring basis	\$ 2,325,517	\$ 2,590,914	\$ -	\$ 1,660,548	\$ 6,576,979
LIABILITIES					
Payable under securities lending agreement	\$ (28,344)	\$ -	\$ -	\$ -	\$ (28,344)
Derivative instruments	-	(157)	-	-	(157)
Total liabilities measured at fair value on a recurring basis	\$ (28,344)	\$ (157)	\$ -	\$ -	\$ (28,501)

FAIR VALUE MEASUREMENTS AS OF DECEMBER 31, 2023

	Level 1	Level 2	Level 3	NAV	Total Carrying Amount
ASSETS					
Fixed income	\$ -	\$ 3,046,146	\$ -	\$ -	\$ 3,046,146
Bond mutual funds	268,853	-	-	-	268,853
Domestic equity	938,560	10,420	-	-	948,980
International equity	809,547	-	-	-	809,547
Public real estate	107,146	-	-	-	107,146
Long/short equity	25,411	182,487	-	-	207,898
Absolute equity	(231)	63,581	-	-	63,350
Securities on loan	173,154	-	-	-	173,154
Securities lending collateral	95,382	-	-	-	95,382
Alternative and other investments at NAV	-	-	-	1,548,060	1,548,060
Total assets measured at fair value on a recurring basis	\$ 2,417,822	\$ 3,302,634	\$ -	\$ 1,548,060	\$ 7,268,516
LIABILITIES					
Payable under securities lending agreement	\$ (95,382)	\$ -	\$ -	\$ -	\$ (95,382)
Derivative instruments	-	(244)	-	-	(244)
Total liabilities measured at fair value on a recurring basis	\$ (95,382)	\$ (244)	\$ -	\$ -	\$ (95,626)

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

9. PENSION PLANS

UPMC and its subsidiaries maintain defined benefit pension plans (the "Plans"), defined contribution plans and nonqualified pension plans that cover substantially all of UPMC's employees. Under the defined contribution plans, employees may elect to contribute a percentage of their salary, which is matched in accordance with the provisions of the defined contribution plans. Contributions to the nonqualified pension plans are based on a percentage of salary or contractual arrangements. The total expense within the performance indicator relating to the aforementioned pension plans was \$311,919 and \$304,587, respectively, for the years ended December 31, 2024 and 2023.

Benefits under the Plans vary and are generally based upon the employee's earnings and years of participation. It is UPMC's policy to meet the requirements of the Employee Retirement Income Security Act of 1974 ("ERISA") and the Pension Protection Act of 2006. For the years ended December 31, 2024 and 2023, contributions made to the Plans were \$35,601 and \$158,101, respectively.

To develop the expected long-term rate of return on plan assets assumption, UPMC considers the current level of expected returns on risk-free investments, the historical level of risk premium associated with the other asset classes in which the pension portfolio is invested and the expectations for future returns on each asset class. The expected return for each asset class is then weighted based on the target asset allocation to develop the expected long-term rate of return on assets assumption for the pension portfolio.

The table below sets forth the accumulated benefit obligation, the change in the projected benefit obligation and the change in the assets of the Plans. The table also reflects the funded status of the Plans as well as recognized and unrecognized amounts in the consolidated balance sheets. As of December 31, 2024 and December 31, 2023, the pension liability is included in other noncurrent liabilities on the consolidated balance sheets.

	Year Ended December 31	
	2024	2023
Accumulated benefit obligation	\$ 2,939,425	\$ 2,843,028
CHANGE IN PROJECTED BENEFIT OBLIGATION		
Projected benefit obligation at beginning of year	\$ 2,974,623	\$ 2,821,194
Service cost	168,168	158,126
Interest cost	151,918	148,925
Actuarial loss	12,004	35,763
Benefits paid	(238,444)	(189,385)
Projected benefit obligation at end of year	3,068,269	2,974,623
CHANGE IN PLAN ASSETS		
Fair value of plan assets at beginning of year	2,795,757	2,627,693
Actual return on plan assets	272,635	199,348
Employer contributions	35,601	158,101
Benefits paid	(238,444)	(189,385)
Fair value of plan assets at end of year	2,865,549	2,795,757
Pension liability at end of year	\$ 202,720	\$ 178,866

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

Included in net assets without donor restrictions at December 31, 2024 and 2023 are the following amounts that have not yet been recognized in net periodic pension cost:

	As of December 31	
	2024	2023
Unrecognized prior service credit	\$ 18,295	\$ 23,551
Unrecognized net actuarial loss	(326,404)	(406,870)
	\$ (308,109)	\$ (383,319)

Changes in plan assets and benefit obligations recognized in net assets without donor restrictions during 2024 and 2023 include the following:

	Year Ended December 31	
	2024	2023
Current year net actuarial gain (loss)	\$ 67,708	\$ (15,481)
Amortization of actuarial loss	12,758	14,583
Amortization of prior service credit	(5,256)	(5,256)
	\$ 75,210	\$ (6,154)

The service cost component of net periodic benefit cost is included in salaries, professional fees and employee benefits and all other components of net periodic benefit cost are included in other non-operating expenses in the consolidated statements of operations and changes in net assets. The components of net periodic pension cost for the Plans were as follows:

	Year Ended December 31	
	2024	2023
Service cost	\$ 168,168	\$ 158,126
Interest cost	151,918	148,925
Expected return on plan assets	(192,923)	(179,066)
Amortization of actuarial loss	12,758	14,583
Amortization of prior service credit	(5,256)	(5,256)
Net periodic pension cost	\$ 134,665	\$ 137,312

The weighted average actuarial assumptions used to determine the benefit obligations and net periodic pension cost for the Plans are as follows:

	As of December 31	
	2024	2023
Discount rates:		
Used for benefit obligations	5.73%	5.02%
Used for net periodic pension cost	5.02%	5.20%
Expected rate of compensation increase:		
Used for benefit obligations	Age-graded	Age-graded
Used for net periodic pension cost	Age-graded	Age-graded
Expected long-term rate of return on plan assets	7.00%	7.00%
Interest crediting rate:		
Used for benefit obligations	4.73%	4.02%
Used for net periodic pension cost	4.02%	4.20%

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

The assumptions for long-term rate of return are developed using the expected returns of the various asset classes in which the pension invests and the allocations of each asset class with respect to the investment as a whole. The change in discount rate from 5.02% to 5.73% decreased the projected benefit obligation by \$208,658 for the year ended December 31, 2024. The change in the interest crediting rate from 4.02% to 4.73% increased the projected benefit obligation by \$152,710 for the year ended December 31, 2024.

The following pension benefit payments are expected to be paid in the years ending December 31:

2025	\$	249,188
2026		256,001
2027		261,964
2028		266,204
2029		267,631
2030-2034		1,347,977

UPMC employs a total return investment approach whereby a mix of equities and fixed income investments are used to maximize the long-term return on plan assets subject to accepting a prudent level of risk. Risk tolerance is established through consideration of plan liabilities, plan funded status and corporate financial condition. The pension portfolio contains a diversified blend of equity, fixed income and alternative investments. Equity investments are diversified across United States and non-United States corporate stocks, as well as growth, value, and small and large capitalizations. Other assets such as real estate, private equity and hedge funds are used to enhance long-term returns while improving portfolio diversification. Investment risk is measured and monitored on an ongoing basis through quarterly investment portfolio reviews, annual liability measurements and periodic asset/liability studies.

As of December 31, 2024, UPMC employed 157 external investment managers to handle the investment of the assets in the pension portfolio. Of these, 8 managers manage equity investments, 8 manage fixed income investments and 141 managers oversee alternative investment strategies. The largest allocation to any alternative investment manager is \$53,100 as of December 31, 2024. Unfunded commitments due to investments within the Plans, funded with Plan assets, are \$236,424 and \$288,169 as of December 31, 2024 and 2023, respectively. Unfunded commitments may be called by managers pursuant to the terms of each specific fund's documents, which allow capital to be called during a fund's investment period for new investments. While terms vary, investment periods are generally within six years.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

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The following is a summary of the pension plan asset allocations at December 31, 2024 and 2023:

	2024	2023	2024 Target
Nonalternative investments:			
Fixed income	13.3%	11.3%	13.0%
Domestic equity	25.1%	20.7%	30.0%
International equity	9.9%	16.2%	12.0%
Total nonalternative investments	48.3%	48.2%	55.0%
Real assets:			
Real estate	4.9%	5.2%	4.0%
Income opportunities	1.2%	2.0%	2.0%
Natural resources	4.5%	5.0%	4.0%
Total real assets	10.6%	12.2%	10.0%
Alternative investments:			
Long/short equity	13.1%	9.7%	13.0%
Absolute return	6.7%	7.2%	7.0%
Private equity	21.3%	22.7%	15.0%
Total alternative investments	41.1%	39.6%	35.0%
Total	100.0%	100.0%	100.0%

All of the Plans' assets are measured at fair value, including its alternative investments. The same levels of the fair value hierarchy as described in Note 8 are used to categorize the Plans' assets. Corporate debt instruments and fixed income/bonds are valued using pricing models, quoted prices of securities with similar characteristics or discounted cash flows. The fair value of common/collective trust funds is determined by the issuer sponsoring such funds by dividing the fund's net assets at fair value by its units outstanding at the valuation dates. Partnership interests are valued using NAV, which is based on the unit values of the interests as determined by the issuer sponsoring such interests dividing the fund's net assets at fair value by its units outstanding at the valuation dates.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

The fair values of the Plans' assets at December 31, 2024, by asset category and by the level of inputs used to determine fair value, were as follows:

	Level 1	Level 2	Level 3	NAV	Total
ASSETS					
Equity securities:					
Domestic equity	\$ 681,850	\$ 1,359	\$ -	\$ -	\$ 683,209
International equity	201,436	-	-	-	201,436
U.S. REITS	36,647	-	-	-	36,647
Fixed income:					
Government securities	-	59,436	-	-	59,436
Corporate debt instruments	-	56,778	-	-	56,778
Asset and mortgage-backed securities	-	82,483	-	-	82,483
Bond mutual funds	78,243	-	-	-	78,243
Active equity	9,793	76,561	-	-	86,354
Absolute return	42	13,086	-	-	13,128
Other investments	-	-	-	1,567,835	1,567,835
Plans' assets at fair value	\$ 1,008,011	\$ 289,703	\$ -	\$ 1,567,835	\$ 2,865,549

The fair values of the Plans' assets at December 31, 2023, by asset category and by the level of inputs used to determine fair value, were as follows:

	Level 1	Level 2	Level 3	NAV	Total
ASSETS					
Equity securities:					
Domestic equity	\$ 506,632	\$ 631	\$ -	\$ -	\$ 507,263
International equity	316,023	-	-	-	316,023
International REITS	777	-	-	-	777
U.S. REITS	42,496	1,143	-	-	43,639
Fixed income:					
Government securities	(245)	105,496	-	-	105,251
Corporate debt instruments	-	47,347	-	-	47,347
Asset and mortgage-backed securities	-	74,043	-	-	74,043
Bond mutual funds	105,107	-	-	-	105,107
Long/short equity	-	8,922	-	-	8,922
Absolute return	(72)	13,163	-	-	13,091
Other investments	-	-	-	1,572,532	1,572,532
Net receivables	1,762	-	-	-	1,762
Plans' assets at fair value	\$ 972,480	\$ 250,745	\$ -	\$ 1,572,532	\$ 2,795,757

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

10. HEALTH INSURANCE REVENUE AND COSTS

Health care costs were \$14,825,681 and \$13,465,127, of which \$3,598,119 and \$3,341,480 were eliminated in consolidation representing medical services performed by UPMC provider entities for the years ended December 31, 2024 and 2023, respectively. Such costs are included in insurance claims expense. These costs include estimates of payments to be made on claims reported but not yet processed as of the balance sheet date and estimates of health care services incurred but not reported to the Health Plans. Such estimates include the cost of services that will continue to be incurred after the balance sheet date when the Health Plans are obligated to remit payment for such services in accordance with contract provisions or regulatory requirements. UPMC determines the amount of the reserve for incurred but not paid claims by following a detailed actuarial process that uses both historical claim payment patterns as well as emerging medical cost trends to project UPMC's best estimate of the reserve for physical health care costs. This process involves formatting of historical paid claims data into claim triangles, which compare claim incurred dates to the dates of claim payments. This information is analyzed to create completion factors that represent the average percentage of total incurred claims that have been paid through a given date after being incurred. Completion factors are applied to claims paid through the period-end date to estimate the ultimate claim expense incurred for the period. Actuarial estimates of incurred but not paid claim liabilities are then determined by subtracting the actual paid claims from the estimate of the ultimate incurred claims.

For the most recent incurred months, the percentage of claims paid for claims incurred in those months is generally low. This makes the completion factors methodology less reliable for such months. Therefore, incurred claims for most recent months are not projected from historical completion and payment patterns; rather, they are projected by estimating the claims expense for those months based on recent claims expense levels and health care trend levels, or trend factors.

While there are many factors that are used as part of the estimation of UPMC's reserve for physical health care costs, the two key assumptions having the most significant impact on UPMC's incurred but not paid claims liability as of December 31, 2024 were the completion and trend factors.

	2024	2023
Reserve for physical health care costs (beginning balance)	\$ 755,718	\$ 647,537
Add: Provisions for medical costs occurring in:		
Current year	13,474,141	12,097,561
Prior year	(11,981)	(13,028)
Net incurred medical costs	13,462,160	12,084,533
Deduct: Payments for claims occurring in:		
Current year	12,649,507	11,341,843
Prior year	743,737	634,509
Net paid medical costs	13,393,244	11,976,352
Reserve for physical health care costs (ending balance)	\$ 824,634	\$ 755,718

The foregoing rollforward shows favorable development of \$11,981 and \$13,028 for the years ended December 31, 2024 and 2023, respectively. UPMC regularly reviews and sets assumptions regarding cost trends and utilization when initially establishing a reserve for physical health care costs. UPMC continually monitors and adjusts the reserve and claims expense based on subsequent paid claims activity. If it is determined that UPMC's assumptions regarding cost trends and utilization are materially different from actual results, UPMC's consolidated statements of operations and changes in net assets and consolidated balance sheets could be impacted in future periods. Adjustments of prior year estimates may result in additional claims expense or a reduction of claims expense in the period an adjustment is made.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

Incurred claims development for the years ended December 31, 2024, 2023 and 2022 are as follows:

	(Unaudited) December 31, 2022	(Unaudited) December 31, 2023	December 31, 2024
December 31, 2022	\$ 10,622,623	\$ 10,609,595	\$ 10,609,595
December 31, 2023		12,097,561	12,085,580
December 31, 2024			13,474,141
			\$ 36,169,316

Paid claims development for the years ended December 31, 2024, 2023 and 2022 are as follows:

	(Unaudited) December 31, 2022	(Unaudited) December 31, 2023	December 31, 2024
December 31, 2022	\$ 9,975,085	\$ 10,609,595	\$ 10,609,595
December 31, 2023		11,341,843	12,085,580
December 31, 2024			12,649,507
			\$ 35,344,682

At December 31, 2024, the total of incurred but not reported ("IBNR") liabilities plus expected development on reported claims and the cumulative number of reported claims for the years ended December 31, 2024, 2023 and 2022 are as follows:

	Total IBNR and Expected Development on Reported Claims	(Unaudited) Cumulative Number of Reported Claims*
December 31, 2022	\$ -	27,268
December 31, 2023	-	29,034
December 31, 2024	824,634	31,279
Total	\$ 824,634	87,581

* In thousands

The cumulative number of reported claims for each claim year has been developed using historical data captured by UPMC's claims payment system and data warehouse.

Certain entities within the Insurance Services division are subject to risk-based capital requirements as specified by the National Association of Insurance Commissioners ("NAIC"). Under those requirements, the amount of capital and surplus maintained by these entities is determined based on the various risk factors related to it. Net assets without donor restrictions required to meet statutory requirements of the Health Plans were \$1,896,004 and \$1,740,233 at December 31, 2024 and 2023, respectively.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

11. PROFESSIONAL AND GENERAL LIABILITY INSURANCE

UPMC is insured for professional and general liability losses through wholly owned, multiprovider insurance companies (the "Captives"). The Captives provide primary and excess professional liability coverage to UPMC subsidiaries, employed physicians of UPMC and other entities not included in the consolidated financial statements. For those self-insured risks, UPMC has established irrevocable trust funds to pay claims and related costs.

Certain insurance agreements issued prior to January 1, 2022, have retrospective clauses that permit additional premiums or refunds to be made based on actual experience. The reserve for professional and general liability indemnity losses and loss adjustment expenses is determined using individual case-based evaluations and actuarial analyses and represents an estimate of reported claims and claims incurred but not reported. Those estimates are subject to the effects of trends in average loss severity and average frequency. Although considerable variability is inherent in such estimates, management believes that the reserves for professional and general liability losses and loss adjustment expenses are reasonable. The estimates are reviewed and adjusted as necessary as experience develops or new information becomes known. Such adjustments are included in current operations. Reserves for professional and general liability losses and loss adjustment expenses of \$599,072 and \$549,323, discounted at 4.00% and 4.25% (which approximates the risk-free rates), were recorded as of December 31, 2024 and 2023, respectively. At December 31, 2024 and 2023, respectively, \$147,954 and \$123,596 of the loss reserves are included in current portion of insurance reserves and \$451,118 and \$425,727 are included in long-term insurance reserves.

The following table provides a rollforward of the reserve balances for professional and general liability costs for the years ended December 31, 2024 and 2023.

	2024	2023
Reserve for professional and general liability costs (beginning balance)	\$ 549,323	\$ 541,413
Add: Provisions for claims expenses occurring in:		
Current year	149,895	143,486
Prior year	33,830	6,469
Change in discount rate	4,570	(11,697)
Net incurred claims expenses	188,295	138,258
Deduct: Payments for claims expenses occurring in:		
Current year	319	10,309
Prior year	135,629	118,824
Net paid claims expenses	135,948	129,133
Changes in other reserves	(2,598)	(1,215)
Reserve for professional and general liability costs (ending balance)	\$ 599,072	\$ 549,323

The foregoing rollforward shows unfavorable development of \$33,830 and \$6,469 for the years ended December 31, 2024 and 2023, respectively.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

The following table provides undiscounted information for claims development for incurred losses and paid claims loss by incident year for the year ended December 31, 2024. The information about incurred and paid claims development for the years ended December 2015 to 2023 is presented as supplementary information. For the reported development, the adequacy of case reserves has been consistent and favorable over time, and there have been no significant changes in the rate at which claims have been reported. For the paid development, the rate of payment of claims has been relatively consistent over time.

DIRECT CLAIM LOSS INCURRED

Accident Year	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
	Unaudited									
2015	\$ 96,593	\$ 102,111	\$ 89,569	\$ 88,801	\$ 83,033	\$ 80,946	\$ 79,273	\$ 79,446	\$ 80,648	\$ 86,729
2016	-	90,844	94,155	91,655	84,615	73,214	72,195	71,692	72,184	76,992
2017	-	-	100,732	99,428	104,403	103,570	100,146	99,861	89,391	90,596
2018	-	-	-	100,781	97,451	96,836	93,128	89,834	90,876	93,044
2019	-	-	-	-	103,995	106,787	109,126	109,640	99,129	104,570
2020	-	-	-	-	-	108,482	109,915	112,983	105,765	105,644
2021	-	-	-	-	-	-	125,437	125,368	126,944	130,226
2022	-	-	-	-	-	-	-	138,402	134,611	135,647
2023	-	-	-	-	-	-	-	-	143,486	146,558
2024	-	-	-	-	-	-	-	-	-	149,895
	Total									\$ 1,119,901

DIRECT CLAIM LOSS PAID

Accident Year	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
	Unaudited									
2015	\$ 355	\$ 16,914	\$ 26,838	\$ 48,191	\$ 58,646	\$ 65,427	\$ 68,562	\$ 70,716	\$ 72,721	\$ 80,566
2016	-	446	6,375	14,220	27,736	39,232	46,946	50,379	60,763	71,185
2017	-	-	1,610	10,168	27,867	50,244	55,202	60,770	74,538	77,839
2018	-	-	-	251	3,555	22,235	37,270	44,465	62,372	69,389
2019	-	-	-	-	216	13,936	25,751	40,448	54,122	70,505
2020	-	-	-	-	-	759	12,369	25,494	31,713	55,506
2021	-	-	-	-	-	-	363	18,416	28,271	48,619
2022	-	-	-	-	-	-	-	510	6,662	28,038
2023	-	-	-	-	-	-	-	-	10,309	15,508
2024	-	-	-	-	-	-	-	-	-	319
	Total									\$ 517,474

Net reserves **\$ 602,427**

Other reserves 41,357

Risk retention group 28,396

Discount adjustment (73,108)

Total reserves **\$ 599,072**

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

AVERAGE ANNUAL PERCENTAGE PAYOUT OF INCURRED CLAIMS (UNAUDITED)

Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7	Year 8	Year 9	Year 10 and Prior
1.1%	7.7%	12.6%	18.2%	15.7%	11.3%	7.8%	6.0%	5.8%	13.8%

In addition, the following table shows the total of IBNR plus expected development on reported claims by incident year and the cumulative number of reported claims by incident year. The cumulative number of reported claims are counted on a per occurrence and per coverage basis. Claim counts include open claims, claims that have been paid and closed, and asserted reported claims that have been closed without the need for any payment.

Incident Year	Incurring Claim Loss and Adjustment Expenses for the Year Ended December 31, 2024	Total Incurred but Not Reported as of December 31, 2024	Cumulative Number of Claims Reported as of December 31, 2024
2015	\$ 86,729	\$ -	307
2016	76,992	320	277
2017	90,596	7,832	272
2018	93,044	17,292	276
2019	104,570	20,490	304
2020	105,644	30,989	218
2021	130,226	40,242	225
2022	135,647	75,202	295
2023	146,558	105,141	200
2024	149,895	145,780	65

The methodology for reserving and determining the reserve for loss and loss adjustment expenses, IBNR reserves, considers, among other things, the line of business, the number of years of experience and the age of the experience year being developed.

Loss development factors are also applied to the current evaluations of losses to project the ultimate incurred losses arising from each period of coverage. The selected loss development factors are based on the historical loss experience of UPMC. Therefore, it is assumed that the selected loss development factors coupled with UPMC's experience and actuarial support are appropriate to project the loss development that will be experienced.

The reserve for costs and claims adjustment expenses was based on the best data available to UPMC; however, these estimates are subject to a degree of inherent variability. It is possible that UPMC's actual incurred costs and claim adjustment expenses will not conform to the assumptions inherent in the determination of the liability; accordingly, the ultimate settlement of costs and the related claims adjustment expenses may vary from the estimates included in the consolidated financial statements.

The Medical Care Availability and Reduction of Error ("MCARE") Act was enacted by the legislature of the Commonwealth of Pennsylvania (the "Commonwealth") in 2002. This Act created the MCARE Fund, which replaced The Pennsylvania Medical Professional Liability Catastrophe Loss Fund (the "Medical CAT Fund"), as the agency for the Commonwealth to facilitate the payment of medical malpractice claims exceeding the primary layer of professional liability insurance carried by UPMC and other health care providers practicing in the Commonwealth.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

The MCARE Fund is funded on a “pay as you go basis” and assesses health care providers based on a percentage of the rates established by the Joint Underwriting Association (also a Commonwealth agency) for basic coverage. The MCARE Act of 2002 provides for a further reduction to the current MCARE coverage of \$500 per occurrence to \$250 per occurrence and the eventual phaseout of the MCARE Fund, subject to the approval of the Pennsylvania Insurance Commissioner. To date, the Pennsylvania Insurance Commissioner has deferred the change in coverage and eventual phaseout of the MCARE Fund to future years.

12. RELATED-PARTY TRANSACTIONS

UPMC monitors its relationships with related or affiliated entities on an ongoing basis. The most significant of these relationships is with the University of Pittsburgh (“the University”) in which UPMC purchases and sells certain services. With shared academic and research objectives, UPMC provides financial support annually to the University to advance these objectives recognizing the long-term inherent benefit to UPMC’s core clinical operations. UPMC looks to the University to lead the efforts related to the academic and research support objectives of UPMC and believes that, while complementary to its mission, the support provided to the University for academics and research is not part of UPMC’s core operating activities of providing direct patient care or offering health insurance coverage. For the years ended December 31, 2024 and 2023, UPMC incurred expenses of \$253,000 and \$247,300, respectively, for academic and research support. Payments to the University that are core to UPMC’s missions related to providing clinical care totaled \$192,341 and \$172,591 for the years ended December 31, 2024 and 2023, respectively, which includes clinical services rendered by certain faculty and medical residents, facility rental agreements and other related services, and are reflected within operating expense.

13. LEASES

UPMC has operating and finance leases for corporate offices, physician offices and various equipment types, among others. These lease arrangements have remaining lease terms of one year to 25 years, some of which include options to extend the leases for several periods, and some of which include options to terminate the leases within one year. Statement of operations and changes in net assets information related to leases were as follows:

	Year Ended December 31	
	2024	2023
Finance lease cost:		
Depreciation	\$ 22,942	\$ 21,600
Interest on lease liabilities	2,066	1,851
Total finance lease cost	25,008	23,451
Operating lease cost	172,143	155,304
Short-term/variable lease cost	25,498	28,551
Total	\$ 222,649	\$ 207,306

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

Supplemental balance sheet information related to leases was as follows:

	Year Ended December 31	
	2024	2023
OPERATING LEASES		
Operating lease right-of-use assets	\$ 826,428	\$ 738,064
Other current liabilities	147,874	138,039
Operating lease liabilities	787,352	707,447
Total operating lease liabilities	\$ 935,226	\$ 845,486
FINANCE LEASES		
Property, plant and equipment, net	\$ 67,778	\$ 62,139
Current portion of long-term obligations	19,881	19,502
Long-term obligations	51,841	46,181
Total finance lease liabilities	\$ 71,722	\$ 65,683
WEIGHTED AVERAGE REMAINING LEASE TERM		
Operating leases	10.9 years	9.3 years
Finance leases	7.1 years	6.8 years
WEIGHTED AVERAGE DISCOUNT RATE		
Operating leases	3.0%	2.9%
Finance leases	3.1%	3.1%

Undiscounted maturities of lease liabilities were as follows:

For the Years Ended December 31	Operating Leases	Finance Leases
2025	\$ 172,373	\$ 20,002
2026	153,042	17,530
2027	132,357	12,361
2028	118,031	7,404
2029	103,893	2,701
Thereafter	412,934	14,967
Total undiscounted maturities of lease liabilities	\$ 1,092,630	\$ 74,965
Less: discount on lease liabilities	(157,404)	(3,243)
Total lease liabilities	\$ 935,226	\$ 71,722

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

14. INCOME TAXES

UPMC calculates income taxes using the balance sheet method for its taxable subsidiaries. Taxable income differs from pretax book income principally due to certain income and deductions for tax purposes being recorded in the financial statements in different periods. Deferred income tax assets and liabilities are recorded for the tax effect of these differences using enacted tax rates for the years in which the differences are expected to reverse. UPMC assesses the realization of deferred tax assets and the need for a valuation allowance to reduce those assets to their net realizable value based on future operations, reversal of existing temporary differences, carryforward and carryback periods for credits and net operating losses, and potential tax planning strategies that may exist. Based on this analysis, a full valuation allowance was applied for the December 31, 2024 and December 31, 2023 calendar years.

As of December 31, 2024, the for-profit entities of UPMC had gross federal net operating loss ("NOL") carryforwards of \$1,118,071 (expiring in years 2025 through 2044) and gross state (primarily related to Pennsylvania) NOL carryforwards of \$2,083,686 (expiring in years 2025 through 2044) that are available to offset future taxable income. During 2022, Pennsylvania enacted a corporate income tax rate reduction that will take effect incrementally from 2023 through 2031, which resulted in a reevaluation of UPMC's state NOLs to reflect the lower rate. Utilization of the Pennsylvania NOL carryforwards in any one year is limited to 40% of taxable income per company and NOLs may be carried forward 20 years. Federal NOLs generated prior to January 1, 2018 can be carried forward up to 20 years and there is no taxable income limitation on the utilization of such NOLs. Non-insurance company federal NOLs generated subsequent to December 31, 2017 carryforward indefinitely and utilization of such NOLs is limited to 80% of taxable income. Non-life insurance company federal NOLs generated subsequent to December 31, 2017 can be carried forward up to 20 years and there is no taxable income limitation on the utilization of such NOLs. During the calendar years ended December 31, 2024 and December 31, 2023, UPMC realized tax benefits of \$1,096 and \$84, respectively, from the use of NOL carryforwards to offset federal and state net taxable income.

The following is a reconciliation of income taxes computed at the statutory U.S. federal income tax rate to the actual effective income tax expense:

Years Ended December 31	2024	2023
Taxes computed at the federal rate	\$ (1,338)	\$ (35,592)
State income taxes, net of federal tax benefit	4,408	2,235
Valuation allowance	36,666	23,011
Permanent differences	(3,373)	9,907
Other items, net	(28,045)	13,207
Income tax expense	\$ 8,318	\$ 12,768

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

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The following table presents deferred tax assets as of December 31, 2024 and 2023:

	2024	2023
Deferred tax assets:		
Net operating losses	\$ 318,102	\$ 288,157
Accrued benefits	24,875	23,083
Other	52,758	22,230
	395,735	333,470
Less valuation allowance	(395,735)	(333,470)
	\$ -	\$ -

Tax benefits are recognized when it is more likely than not that a tax position will be sustained upon examination by the tax authorities based on the technical merits of the position. Such tax positions are measured as the largest amount of tax benefit that is greater than 50% likely to be realized upon ultimate settlement with the tax authorities assuming full knowledge of the position and all relevant facts. As of December 31, 2024, there were no uncertain tax positions. Certain of UPMC's subsidiaries are subject to taxation in the United States and foreign jurisdictions. As of December 31, 2024, UPMC's returns for the calendar years ended December 31, 2021, through December 31, 2023, are open for examination by the various taxing authorities.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

15. FUNCTIONAL EXPENSES

UPMC provides general health care services primarily to residents within its geographic locations and supports related research and education programs. For the years ended December 31, 2024 and 2023, expenses related to providing these services were as follows:

FOR THE YEAR ENDED DECEMBER 31, 2024

	Hospital & health care services	Insurance services	Academic & research activities	UPMC Enterprises activity	Admin support	Total
Salaries, professional fees and employee benefits	\$ 8,290,941	\$ 659,006	\$ -	\$ -	\$ 1,018,216	\$ 9,968,163
Insurance claims expense	-	11,227,562	-	-	-	11,227,562
Supplies, purchased services and general	6,626,319	918,330	-	-	634,208	8,178,857
Depreciation and amortization	505,952	5,606	-	-	191,002	702,560
Academic and research support provided	-	-	253,000	-	-	253,000
Restructuring costs	73,582	37,873	-	-	16,546	128,001
Income tax expense	-	-	-	-	8,318	8,318
Interest expense	228,410	-	-	-	-	228,410
Portfolio company and development expense	-	-	83,265	183,713	-	266,978
	\$ 15,725,204	\$ 12,848,377	\$ 336,265	\$ 183,713	\$ 1,868,290	\$ 30,961,849

FOR THE YEAR ENDED DECEMBER 31, 2023

	Hospital & health care services	Insurance services	Academic & research activities	UPMC Enterprises activity	Admin support	Total
Salaries, professional fees and employee benefits	\$ 8,004,186	\$ 643,932	\$ -	\$ -	\$ 1,008,183	\$ 9,656,301
Insurance claims expense	-	10,123,647	-	-	-	10,123,647
Supplies, purchased services and general	5,920,991	902,896	-	-	602,330	7,426,217
Depreciation and amortization	499,711	6,289	-	-	186,658	692,658
Academic and research support provided	-	-	247,300	-	-	247,300
Income tax expense	-	-	-	-	12,768	12,768
Interest expense	205,396	-	-	-	-	205,396
Portfolio company and development expense	-	-	82,899	158,110	-	241,009
	\$ 14,630,284	\$ 11,676,764	\$ 330,199	\$ 158,110	\$ 1,809,939	\$ 28,605,296

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

16. UPMC ENTERPRISES ACTIVITY

UPMC Enterprises conducts research, development and innovation activities on behalf of UPMC primarily focused on technologies for use in the health care industry to lower costs and improve care; such activities are expensed as incurred. From time to time, UPMC invests in companies that are developing technologies that align with its strategic imperatives, including companies that are not yet at the commercialization stage. UPMC's level of investment is dependent on numerous strategic considerations and may provide either a controlling or a non-controlling ownership interest. UPMC Enterprises also seeks partnerships with external companies to accelerate commercial growth of innovation activities, which may include the sale of internally developed technology solutions. Leveraging UPMC's long-standing reputation for academic excellence, UPMC Enterprises also sponsors the translation of basic science conducted in a research setting to its commercial use in bedside clinical practice, application in medical laboratories or use across emerging venues where medicine is delivered; such activities are expensed as incurred.

UPMC Enterprises activity is comprised of the following for the years ended December 31:

	2024	2023
Technology research and development costs	\$ (53,311)	\$ (58,076)
Investments in translational sciences	(29,954)	(24,823)
Revenue from portfolio companies with controlling interest	106,971	74,533
Expenses of portfolio companies with controlling interest	(174,884)	(155,901)
Net loss from non-consolidated interest in portfolio companies	(8,829)	(2,209)
Net gains from technology-related investments	35,952	48,343
UPMC Enterprises activity	\$ (124,055)	\$ (118,133)

17. CONTINGENCIES

UPMC is frequently made party to a variety of legal actions and regulatory inquiries, including class actions and suits brought by members, care providers, consumer advocacy organizations, customers and regulators. These matters include medical malpractice, employment, intellectual property, antitrust, privacy and contract claims, claims related to health care benefits coverage and other business practices. UPMC records liabilities for its estimates of probable costs resulting from these matters where appropriate. Estimates of costs resulting from legal and regulatory matters involving UPMC are inherently difficult to predict, particularly where the matters involve indeterminate claims for monetary damages or may involve fines, penalties or punitive damages; present novel legal theories or represent a shift in regulatory policy; involve a large number of claimants or regulatory bodies; are in the early stages of the proceedings; or could result in a change in business practices. Accordingly, UPMC is often unable to estimate the losses or ranges of losses for those matters where there is a reasonable possibility, or it is probable a loss may be incurred.

Concurrently, UPMC has been involved or is currently involved in various governmental investigations, audits and reviews. These include routine, regular and special investigations, audits and reviews by CMS, state insurance and health and welfare departments, state attorneys general, the Office of the Inspector General, the Office of Personnel Management, the Office of Civil Rights, the Government Accountability Office, the Federal Trade Commission, U.S. Congressional committees, the U.S. Department of Justice (DOJ), the IRS, the U.S. Drug Enforcement Administration, the U.S. Department of Labor, the FDIC, Consumer Financial Protection Bureau and other governmental authorities. UPMC records liabilities for estimates of probable cost resulting from these matters where appropriate. Estimates of cost resulting from governmental investigations, audits and reviews are inherently difficult to predict and as a result UPMC cannot reasonably estimate the outcome which may result from these matters given their procedural status.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

(DOLLARS IN THOUSANDS)

18. SUBSEQUENT EVENTS

Management evaluated events occurring subsequent to December 31, 2024 through March 4, 2025, the date the consolidated financial statements of UPMC were issued. During this period, there were no subsequent events requiring recognition or disclosure in the consolidated financial statements.

Tax Exempt Entity Declaration and Signature for E-file

For calendar year 2024, or tax year beginning 07/01/2024 and ending 06/30/2025

2024

Department of the Treasury Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP Go to www.irs.gov/Form8453TE for the latest information.

Name of filer

EIN or SSN

UPMC GROUP

20-8295721

Part I Type of Return and Return Information

Check the box for the type of return being filed with Form 8453-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

Table with 3 columns: Line number and description (1a-10a), Amount (b), and Label (1b-10b). Rows include Form 990, 990-EZ, 1120-POL, 990-PF, 8868, 990-T, 4720, 5227, 5330, and 8038-CP.

Part II Declaration of Officer or Person Subject to Tax

- 11a I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return...
b If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF...

Under penalties of perjury, I declare that I am an officer of the above named entity or I am the person subject to tax with respect to (name of entity) (EIN) and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Here Signature of officer or person subject to tax Date 5/13/2026 Title, if applicable EXECUTIVE VP & CFO

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

Form section for ERO's Use Only, including fields for signature, date, firm's name, address, and EIN.

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Form section for Paid Preparer Use Only, including fields for name, signature, date, firm's name, address, and EIN.

For Privacy Act and Paperwork Reduction Act Notice, see back of form.