Mass General Brigham Incorporated and Affiliates

Consolidated Financial Statements September 30, 2023 and 2022

Mass General Brigham Incorporated and Affiliates Index

September 30, 2023 and 2022

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Report of Independent Auditors

To the Board of Directors of Mass General Brigham Incorporated

Opinion

We have audited the accompanying consolidated financial statements of Mass General Brigham Incorporated (the Company) and its affiliates, which comprise the consolidated balance sheets as of September 30, 2023 and 2022, and the related consolidated statements of operations, of changes in net assets and of cash flows for the years then ended, including the related notes (collectively referred to as the "consolidated financial statements").

In our opinion, the accompanying consolidated financial statements present fairly, in all material respects, the financial position of the Company and its affiliates as of September 30, 2023 and 2022, and the results of its operations, changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with the auditing standards generally accepted in the United States of America (US GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Consolidated Financial Statements section of our report. We are required to be independent of the Company and its affiliates and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Consolidated Financial Statements

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

In preparing the consolidated financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company and its affiliates' ability to continue as a going concern for one year after the date the consolidated financial statements are issued.



Auditors' Responsibilities for the Audit of the Consolidated Financial Statements

Our objectives are to obtain reasonable assurance about whether the consolidated financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with US GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud many involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the consolidated financial statements.

In performing an audit in accordance with US GAAS, we:

waterhouse Coopus LLP

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the consolidated financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks.
 Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the consolidated financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures
 that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the
 effectiveness of the Company and its affiliates' internal control. Accordingly, no such opinion is
 expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the consolidated financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that
 raise substantial doubt about the Company and its affiliates' ability to continue as a going concern for
 a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Boston, Massachusetts December 8, 2023

Mass General Brigham Incorporated and Affiliates Consolidated Balance Sheets September 30, 2023 and 2022

(in thousands of dollars)	2023	2022
Assets Current assets		
Cash and equivalents Investments Current portion of investments limited as to use Patient accounts receivable, net Research grants receivable, net Other current assets	\$ 279,459 3,397,634 3,505,987 1,638,306 228,117 946,875	\$ 193,919 2,390,217 4,144,531 1,438,412 215,462 722,486
Total current assets	9,996,378	9,105,027
Investments limited as to use, less current portion Long-term investments Property and equipment, net Right-of-use operating lease assets Other assets	5,440,702 2,713,547 6,777,363 1,024,336 2,722,977	4,961,378 2,582,271 6,442,260 1,135,787 1,981,608
Total assets	\$ 28,675,303	\$ 26,208,331
Liabilities and Net Assets Current liabilities Current portion of long-term obligations Accounts payable and accrued expenses	\$ 481,130 1,305,876	\$ 519,354 1,183,843
Accrued medical claims and related expenses Accrued employee compensation and benefits Current portion of operating lease obligations Unexpended funds on research grants	192,435 1,150,128 207,671 377,730	119,237 1,203,729 206,350 355,934
Total current liabilities	3,714,970	3,588,447
Accrued professional liability Accrued employee benefits Interest rate swaps liability Accrued other Operating lease obligations, less current portion Long-term obligations, less current portion	576,038 718,087 67,075 331,166 696,740 5,469,626	570,862 633,894 156,705 274,931 801,038 5,557,177
Total liabilities	11,573,702	11,583,054
Commitments and contingencies		
Net assets Without donor restrictions With donor restrictions	13,362,445 3,739,156	11,577,802 3,047,475
Total net assets	17,101,601	14,625,277
Total liabilities and net assets	\$ 28,675,303	\$ 26,208,331

Mass General Brigham Incorporated and Affiliates Consolidated Statements of Operations Years Ended September 30, 2023 and 2022

(in thousands of dollars)	2023	2022
Operating revenues		
Net patient service revenue	\$ 12,792,586	\$ 11,869,451
Premium revenue	1,518,556	930,753
Direct academic and research revenue	2,066,518	1,937,738
Indirect academic and research revenue	641,492	569,624
Other revenue	1,807,885	1,402,801
Total operating revenues	18,827,037	16,710,367
Operating expenses		
Employee compensation and benefit expenses	9,659,280	9,144,470
Supplies and other expenses	4,976,156	4,402,993
Medical claims and related expenses	1,086,589	722,212
Direct academic and research expenses	2,066,518	1,937,738
Depreciation and amortization expenses	774,563	769,783
Interest expense	168,765	164,833
Total operating expenses	18,731,871	17,142,029
Income (loss) from operations	95,166	(431,662)
Nonoperating gains (loss)		
Income (loss) from investments	962,128	(2,271,500)
Change in fair value of interest rate swaps	130,393	330,530
Other nonoperating expenses	(115,822)	(109,971)
Net academic and research gifts (expenses)	(68,062)	23,976
Nonservice related pension income	233,827	201,000
Total nonoperating gains (loss), net	1,142,464	(1,825,965)
Excess (deficit) of revenues over expenses	1,237,630	(2,257,627)
Other changes in net assets		
Funds utilized for property and equipment	54,110	44,340
Change in funded status of defined benefit plans	476,211	965,424
Other changes in net assets	16,692	19,337
Increase (decrease) in net assets without donor restrictions	\$ 1,784,643	\$ (1,228,526)

Mass General Brigham Incorporated and Affiliates Consolidated Statements of Changes in Net Assets Years Ended September 30, 2023 and 2022

(in thousands of dollars)	Without Donor Restrictions	With Donor Restrictions	Total
Net assets at September 30, 2021	\$ 12,806,328	\$ 3,369,175	\$ 16,175,503
Increases (decreases)			
Loss from operations	(431,662)	-	(431,662)
Loss from investments	(2,271,500)	(517,571)	(2,789,071)
Change in fair value of interest rate swaps	330,530	-	330,530
Other nonoperating (expenses) income	(109,971)	218,180	108,209
Academic and research gifts, net of expenses	23,976	-	23,976
Nonservice related pension income	201,000	-	201,000
Funds utilized for property and equipment	44,340	(14,136)	30,204
Change in funded status of defined benefit plans	965,424	-	965,424
Other changes in net assets	19,337	(8,173)	11,164
Change in net assets	(1,228,526)	(321,700)	(1,550,226)
Net assets at September 30, 2022	11,577,802	3,047,475	14,625,277
Increases (decreases)			
Income from operations	95,166	-	95,166
Income from investments	962,128	127,629	1,089,757
Change in fair value of interest rate swaps	130,393	-	130,393
Other nonoperating (expenses) income	(115,822)	589,157	473,335
Net academic and research gifts (expenses)	(68,062)	-	(68,062)
Nonservice related pension income	233,827	-	233,827
Funds utilized for property and equipment	54,110	(28,088)	26,022
Change in funded status of defined benefit plans	476,211	-	476,211
Other changes in net assets	16,692	2,983	19,675
Change in net assets	1,784,643	691,681	2,476,324
Net assets at September 30, 2023	\$ 13,362,445	\$ 3,739,156	\$ 17,101,601

Mass General Brigham Incorporated and Affiliates Consolidated Statements of Cash Flows Years Ended September 30, 2023 and 2022

(in thousands of dollars)	2023		2022
Cash flows from operating activities			
Change in net assets	\$ 2,476,324	\$	(1,550,226)
Adjustments to reconcile change in net assets to net cash			
provided by (used in) operating activities			
Change in funded status of defined benefit plans	(476,211)		(965,424)
Change in fair value of interest rate swaps	(130,393)		(330,530)
Depreciation and amortization	774,563		769,783
Amortization of bond discount, premium and issuance costs	(10,646)		(11,923)
Gain on disposal of property	(13,086)		(222)
Change in right-of-use operating lease assets	174,612		165,958
Net realized and unrealized change in investments	(1,266,094)		2,580,370
Restricted contributions and investment income	(239,437)		(220,648)
Increases (decreases) in cash resulting from a change in			
Patient accounts receivable	(199,894)		(106,008)
Other assets	(466,316)		6,492
Accounts payable and other accrued expenses	241,617		(202,328)
Accrued medical claims and related expenses	73,198		31,948
Operating lease obligations	(166,138)		(169,438)
Settlements with third-party payers	(13,271)		(45,553)
Medicare accelerated payments	 		(724,469)
Net cash provided by (used in) operating activities	 758,828	_	(772,218)
Cash flows from investing activities			
Purchases of property and equipment	(1,098,913)		(863,717)
Proceeds from sale of property	14,696		436
Purchase of investments	(2,273,363)		(2,281,901)
Proceeds from sales of investments	2,550,984		3,809,183
Net cash (used for) provided by investing activities	(806,596)		664,001
Cash flows from financing activities			
Borrowings under taxable commercial paper	169,885		-
Repayments of borrowings under taxable commercial paper	(50,015)		-
Payments on long-term obligations	(106,306)		(104,771)
Proceeds from long-term obligations	100,230		59,235
Deposits into refunding trusts	(219,923)		(50,235)
Restricted contributions and investment income	239,437		220,648
Net cash provided by financing activities	133,308		124,877
Net increase in cash and equivalents	85,540		16,660
Cash and equivalents			
Beginning of year	193,919		177,259
End of year	\$ 279,459	\$	193,919
Noncash purchases of property and equipment in accounts			
payable and accrued expenses	\$ 129,552	\$	119,196

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

(in thousands of dollars)

1. Organization and Community Benefit Commitments

Mass General Brigham Incorporated (the Company) is the parent organization and sole corporate member of numerous organizations whose financial condition and operations are described in these consolidated financial statements. The terms Mass General Brigham, We, Our or Us as used herein, unless otherwise stated or indicated by context, refer collectively to the Company and its affiliated organizations.

Mass General Brigham operates academic medical centers, community acute care hospitals, inpatient and outpatient mental health services facilities, urgent care centers, facilities that provide rehabilitation medicine and long-term care services, physician organizations, home health services, nursing homes and a graduate level program for health professions. Our mission is to provide world class health care services to the local communities in which we operate as well as to patients across the United States and the world. In addition, we are a nonuniversity-based nonprofit private medical research enterprise and a principal teaching affiliate of the medical and dental schools of Harvard University. Our licensed, not-for-profit managed care organization (Mass General Brigham Health Plan, Inc.) and licensed, for-profit insurance company (Mass General Brigham Health Insurance Company) (collectively referred to as MGB Health Plan) provide health insurance products and administrative services to the Massachusetts Medicaid program (MassHealth), ConnectorCare (a state subsidized program for adults who meet income and immigration guidelines) and commercial populations.

Community Health

Through our community health programs we work with community residents and community-based organizations to make measurable, sustainable improvements in the health status of underserved populations with focus on the leading causes of death and premature mortality. In addition, we support and implement initiatives that address social risk factors that contribute to health inequities. Our hospitals and licensed health centers partner with the community to help low-income, vulnerable families overcome barriers to accessing care.

Charity Care

We provide charity care to all emergent patients regardless of their ability to pay. The cost of and reimbursement for providing that care, as reflected in the consolidated statements of operations, is summarized below.

State Programs Massachusetts

Acute care hospitals in The Commonwealth of Massachusetts (the Commonwealth or Massachusetts) are partially reimbursed for charity care services through the statewide Health Safety Net Trust Fund (HSN). A portion of the funding for the HSN is paid by an assessment on acute care hospitals' charges for private sector payers. The statewide assessment was \$165,313 and \$165,308 in 2023 and 2022, respectively, and the assessment expense on our acute care hospitals was \$57,819 and \$61,696 in 2023 and 2022, respectively.

Acute care hospitals are reimbursed for charity care based on claims for eligible patients and services that are submitted to and adjudicated by the HSN. Payments are based on Medicare rates and payment policies. The Commonwealth reported HSN was under-funded by approximately \$115,828 and \$68,030 as of September 30, 2023 and 2022, respectively. This shortfall is allocated to acute care hospitals based on their share of total statewide patient care

(in thousands of dollars)

costs. We have estimated our share being approximately \$48,547 and \$27,938 as of September 30, 2023 and 2022, respectively. Each hospital's share of the overall state shortfall cannot exceed its total charity care reimbursement. Hospitals with a high proportion of charity care and government funding receive more favorable reimbursement, including limiting their shortfall allocation to no more than 15% of their payments for charity care. In aggregate, our acute care hospitals received charity care funding covering 41% and 53% of the estimated cost of charity care provided in 2023 and 2022, respectively.

The Commonwealth levies an additional assessment on Massachusetts acute care hospitals that is redistributed back to hospitals based on provisions within the 1115 MassHealth Demonstration. A new five-year waiver period began effective October 1, 2022. The value of both the assessment and the redistribution are higher than the prior waiver period. The total assessment was \$709,602 and \$257,500 in 2023 and 2022, respectively, and our assessment expense was \$197,473 and \$95,527 in 2023 and 2022, respectively. The total amount redistributed to hospitals was \$1,387,500 and \$265,000 in 2023 and 2022, respectively, of which we recognized \$188,084 and \$55,338 in 2023 and 2022, respectively.

There is an assessment for our post-acute hospitals which totaled \$5,756 and \$6,045 in 2023 and 2022, respectively.

New Hampshire

The State of New Hampshire (New Hampshire) imposes a Medicaid Enhancement Tax (MET) on hospital net patient service revenue. For both of New Hampshire's fiscal years ended June 30, 2023 and 2022, the MET imposed was 5.4%. We incurred \$25,724 and \$27,046 of MET in 2023 and 2022, respectively.

New Hampshire acute care hospitals receive disproportionate share payments based on a portion of their charity care relative to other acute care hospitals. We received \$14,992 and \$14,634 in 2023 and 2022, respectively.

Medicaid

Medicaid is a health insurance program jointly funded by the states and the federal government. Each state administers its own program and sets rules for eligibility, benefits and provider payments within broad federal guidelines and in some cases, including the Commonwealth and New Hampshire, within a Waiver Agreement between each state and the federal government. The program provides health care coverage to low-income adults and children. Eligibility is determined by a variety of factors which include income relative to the federal poverty line, age, immigrant status and assets.

Medicaid payments to our providers do not cover the full cost of services provided to Medicaid patients. In aggregate, reimbursement from Medicaid covered approximately 70% and 61% of the estimated cost of services provided in 2023 and 2022, respectively.

On April 1, 2023, Mass General Brigham Health Plan, Inc. entered into an Accountable Care Organization (ACO) contract with the Executive Office of Health and Human Services of the Commonwealth (EOHHS) covering over 150,000 MassHealth members whose providers participate in the Mass General Brigham ACO.

(in thousands of dollars)

Federal Program *Medicare*

Medicare is a federally sponsored health insurance program for people age 65 or older, under age 65 with certain disabilities and any age with End-Stage Renal Disease. Medicare's payments historically have not kept pace with increases in the cost of care provided at many hospitals. Compounding this shortfall in payments is the continued shift of care from higher paying inpatient services to lower paying outpatient services.

Consequently, Medicare payments to our providers do not cover the full cost of services provided. In aggregate, reimbursement from Medicare covered approximately 68% and 69% of the estimated cost of services provided in 2023 and 2022, respectively.

Mass General Brigham Health Plan, Inc. has been authorized by the Centers for Medicare & Medicaid Services to offer Medicare Advantage products to its eligible members effective January 1, 2023.

Summary

For charity care, Medicaid and Medicare, the estimated cost of services provided is either obtained directly from a costing system or based on an entity specific ratio of cost to gross charges. In the latter case, cost is derived by applying this ratio to gross charges associated with providing care to charity care, Medicaid and Medicare patients. The following summarizes, by program, the cost of services provided, net reimbursement and cost of services in excess of reimbursement for each year:

	Years Ended September 30,							
			2022					
Cost of services provided								
Charity care	\$	113,167	\$	103,420				
Medicaid	Ψ	•	Ψ	•				
		1,777,454		1,700,493				
Medicare		5,585,749	_	5,057,826				
	\$	7,476,370	\$	6,861,739				
Net reimbursement								
Charity care	\$	38,035	\$	44,683				
Medicaid		1,250,916		1,029,883				
Medicare		3,790,457		3,502,359				
	\$	5,079,408	\$	4,576,925				
Cost of services in excess of reimbursement								
Charity care	\$	75,132	\$	58,737				
Medicaid		526,538		670,610				
Medicare		1,795,292		1,555,467				
	\$	2,396,962	\$	2,284,814				

(in thousands of dollars)

In addition to charity care and inadequate funding from the Medicaid and Medicare programs, there are significant losses related to self-pay patients who fail to make payment for services rendered or insured patients who fail to remit co-payments and deductibles as required under the applicable health insurance arrangement. The estimated cost of providing these services was approximately \$82,938 and \$73,165 for 2023 and 2022, respectively.

2. Summary of Significant Accounting Policies

Basis of Accounting

The accompanying consolidated financial statements have been prepared on the accrual basis of accounting and include the accounts of the Company and its affiliates. Interaffiliate accounts and transactions have been eliminated.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates. Significant estimates are made in the areas of patient accounts receivable, research grants receivable, investments, receivables and accrual for settlements with third-party payers, accrued medical claims and related expenses, accrued employee compensation and benefits, accrued professional liability, interest rate swaps liability and accrued other.

Income Taxes

The Company and substantially all of its affiliates are tax-exempt organizations under Sections 501(c)(3) or 501(c)(4) of the Internal Revenue Code (IRC) or are disregarded entities for tax purposes and therefore are exempt from federal and state income tax except on unrelated business taxable income. No provision for income taxes related to these tax-exempt entities has been made as the effect of any unrelated business income tax is not material to the accompanying consolidated financial statements.

Fair Value of Financial Instruments

The fair value of financial instruments approximates the carrying amount reported in the consolidated balance sheets for cash and equivalents, investments and investments limited as to use, patient accounts receivable, research grants receivable, accounts payable and accrued expenses and interest rate swaps liability.

Cash and Equivalents

Cash and equivalents represent cash, registered money market funds and highly liquid debt instruments with a maturity at the date of purchase of three months or less. Our cash and equivalents are maintained with several national banks, and cash deposits typically exceed federal insurance limits. Our policy is to monitor these banks' financial strength on an ongoing basis, and no losses have been experienced to date.

Investments

Investments in equity securities with readily determinable fair values, debt securities and alternative investments are measured at fair value. Alternative investments, consisting of various hedge funds, private equity funds, private debt funds, other private partnerships and restricted securities

(in thousands of dollars)

of public companies that are not traded on a national securities exchange, are valued based on amounts reported by the fund manager and evaluated by management. Investments in securities sold short or traded on a national securities exchange are valued based on quoted market prices.

Income (loss) from investments (including realized gains and losses, unrealized change in value of investments, interest, dividends and endowment income distributions) is included in excess (deficit) of revenues over expenses unless the income or loss is restricted by donor or law. Income (loss) from investments is reported net of investment-related expenses.

Each year as part of our endowment spending policy, we establish a fixed distribution rate for spending. Distributions will come from either income and/or net accumulated appreciation. Effective July 1, 2023 we changed the endowment spending policy and adopted the Tobin Distribution Rule. The Tobin Distribution rule sets the annual distribution through a quantitative formula that has a stability term (a percentage of the prior year's spending, adjusted for inflation) and a market term (a percentage of the long-term sustainable rate of distribution times the market value of the endowment).

Investments Limited as to Use

Investments limited as to use primarily include assets whose use is contractually limited by external parties as well as assets set aside by the boards (or management) for identified purposes and over which the boards (or management) retain control such that the boards (or management) may, at their discretion, subsequently use such assets for other purposes. Certain investments corresponding to deferred compensation are accounted for such that all income and appreciation (depreciation) is recorded as a direct addition (reduction) to the asset and corresponding liability.

Derivative Instruments

Derivatives are recognized on the balance sheets at fair value with changes in the fair value recorded in excess (deficit) of revenues over expenses.

Patient Accounts Receivable

The payments received for healthcare services rendered from federal and state agencies (under the Medicare and Medicaid programs), managed care payers, commercial insurance companies and patients are subject to explicit and implicit discounts. These discounts are based on contractual agreements, discount policies and management's assessment of historical experiences and are reflected in the period of service.

Research Grants Receivable

Mass General Brigham receives direct and pass through research funding from the National Institutes for Health and other federal agencies, industry, corporate, foundation, nonprofits and other sponsors. Research grants receivable include amounts due from these sponsors of externally funded research. These amounts have been billed or are billable to the sponsor, or in limited circumstances, represent accelerated spending in anticipation of future funding. Research grants receivable are recognized at net realizable value.

As of September 30, 2023, and 2022, we have approximately \$4,408,631 and \$4,239,039, respectively, of conditional research grants for future research to be performed. The timing and amounts of funds received under such grants are subject to continued government funding and may change over time.

(in thousands of dollars)

Other Current Assets

Other current assets include prepaid expenses, inventory, nonpatient receivables, current portion of receivable for settlements with third-party payers, current portion of pledges receivable and premiums receivable. Inventory (primarily supplies and pharmaceuticals) is accounted for on a first-in, first-out method basis and is recorded at the lower of average weighted cost or net realizable value.

Property and Equipment

Property and equipment is reported on the basis of cost less accumulated depreciation. Donated items are recorded at fair value at the date of contribution. All research grants received for capital are recorded in the year of expenditure as a change in net assets without donor restrictions. Property and equipment is reviewed for impairment whenever events or changes in circumstances indicate that its carrying amount may not be recoverable. Depreciation of property and equipment is calculated by use of the straight-line method at rates intended to depreciate the cost of assets over their estimated useful lives, which generally range from three to fifty years. Interest costs incurred on borrowed funds during the period of construction of capital assets are capitalized, net of any interest earned, as a component of the cost of acquiring those assets.

Asset Retirement Obligations

Asset retirement obligations, reported in accrued other, are legal obligations associated with the retirement of long-lived assets. These liabilities are initially recorded at fair value and the related asset retirement costs are capitalized by increasing the carrying amount of the related assets by the same amount as the liability. Asset retirement costs are subsequently depreciated over the useful lives of the related assets. Any changes to the liability due either to the passage of time, better information or the settlement of an obligation are reflected in the current period.

Other Assets

Other assets consist of long-term receivables, intangible assets, malpractice insurance receivables, receivable for settlements with third-party payers, investments in healthcare related limited partnerships and long-term pledges and contributions receivable. The carrying value of other assets is evaluated for impairment if the facts and circumstances suggest that the carrying value may not be recoverable.

Compensated Absences

In accordance with formal policies concerning vacation and other compensated absences, accruals of \$422,745 and \$404,123 were recorded as of September 30, 2023 and 2022, respectively.

Unexpended Funds on Research Grants

Research grants received in advance of corresponding grant expenditures are accounted for as a direct addition to investments limited as to use and unexpended funds on research grants.

Self-Insurance Reserves

We are generally self-insured for employee healthcare, disability, workers' compensation and certain other employee benefits. These costs are accounted for on an accrual basis to include estimates of future payments for claims incurred prior to year-end and are included in accrued employee compensation and benefits and long-term accrued employee benefits.

(in thousands of dollars)

Net Assets

Net assets with donor restrictions include (a) the historical dollar amounts of contributions and the income and gains on such contributions which are required by donors to be retained and (b) contributions and the income and gains on these contributions which can be expended but for which restrictions have not yet been met. Such restrictions include purpose restrictions where donors have specified the purpose for which the net assets are to be spent, or time restrictions imposed by donors or implied by the nature of the contribution (capital projects, pledges to be paid in the future and life income funds) or by interpretations of law (gains available for appropriation but not appropriated in the current period). All remaining net assets are considered to be without donor restrictions.

Realized gains and losses are classified as net assets without donor restrictions unless they are restricted by the donor or law. Realized gains and net unrealized appreciation on contributions with donor restrictions are classified as net assets with donor restrictions until appropriated for spending in accordance with policies established by Mass General Brigham and applicable provisions of the Uniform Prudent Management of Institutional Funds Acts (UPMIFA). Net losses on donor endowment funds with donor restrictions are classified as a reduction to net assets with donor restrictions.

Contributed Securities

Our policy is to sell securities contributed by donors upon receipt, unless prevented from doing so by donor request. For the years ended September 30, 2023 and 2022, contributed securities of \$58,257 and \$54,254, respectively, were received and liquidated. Donors restricted \$25,545 and \$27,628 of the proceeds received from the sale of these contributed securities for long-term purpose for the years ended September 30, 2023 and 2022, respectively.

Statement of Operations

Activities deemed by management to be ongoing, major and central to the provision of healthcare services, teaching, research activities and health insurance are reported as operating revenues and expenses. Other activities are deemed to be nonoperating and include contributions without donor restrictions (net of fundraising expenses), external community benefit program support, net change in unexpended academic and research contributions, change in fair value of interest rate swaps, substantially all income (loss) from investments, interest on advanced borrowings and nonservice related pension income. Academic and research contributions largely consist of donor contributions (and the related investment income including realized gains and losses) designated to support the clinical, teaching or research efforts of a physician or department as directed by the donor. These contributions are reported as being without donor restrictions, net of related support expenses, when donor restrictions are of a general nature that are inherent in the normal activities of the organization.

The consolidated statements of operations include excess (deficit) of revenues over expenses. Changes in net assets without donor restrictions, which are excluded from excess (deficit) of revenues over expenses, include contributions of long-lived assets (including assets acquired using contributions which by donor restriction were to be used for acquisition of such assets) and change in funded status of defined benefit plans.

(in thousands of dollars)

Revenues

To determine the appropriate revenue recognition policy, we first assess whether the transaction is an exchange or nonexchange transaction in accordance with accounting guidance. In general, an exchange transaction consists of an exchange of goods and/or services for commensurate value. Transactions that consist of transferring goods and/or services without receiving commensurate value in return are considered nonexchange transactions.

For exchange transactions, revenue is recognized as goods and/or services are provided and is based on the amount expected to be received in exchange for those goods and/or services. Revenue recognized as exchange transactions include net patient service revenue, premium revenue and other revenue.

Nonexchange transactions include contributions and grants for which the service provider does not receive commensurate value in return for the funding.

Contributions

Contributions are generally reported as other nonoperating gains in the consolidated statements of operations. Unconditional promises to give cash and other assets are reported at fair value at the date the promise is received. Conditional promises to give are recognized when the conditions are substantially met and totaled \$371,648 and \$263,420 as of September 30, 2023 and 2022, respectively. Contributions are reported as support with donor restrictions if they are received with donor stipulations that limit the use of the donated assets. Contributions with donor restrictions whose restrictions are met within the same year as received are reported as contributions without donor restrictions in the consolidated statements of operations.

Contributions of long-lived assets with explicit restrictions that specify use of assets and contributions of cash or other assets that must be used to acquire long-lived assets are reported as additions to net assets with donor restrictions if the assets are not placed in service during the year.

Grants

Grants and contracts normally provide for the recovery of direct and indirect costs, subject to audit. Revenue associated with direct and indirect costs is recognized as direct costs are incurred. The recovery of indirect costs is based on predetermined rates for U.S. Government grants and contracts and negotiated rates for other grants and contracts.

Medical Claims and Related Expenses

MGB Health Plan contracts with various hospitals, community health centers, primary care and specialty physician practices and other health care providers for the delivery of services to its members and compensates these providers on a capitated, fee-for-service, per diem or diagnosis-related group basis.

The cost of contracted health care services is accrued in the period in which services are provided and include certain estimated amounts. The estimated liability for medical claims and related expenses is actuarially determined based on analysis of historical claims-paid experience, modified for changes in enrollment, inflation and benefit coverage. The liability for medical claims and related expenses represents the anticipated cost of claims incurred but unpaid at the balance sheet date. Estimates for claims expense may be more or less than the amounts ultimately paid when claims are settled. Such changes in estimates are reflected in the current period in the consolidated statements of operations.

(in thousands of dollars)

In the normal course of business, overpayments are recouped through reductions in future payments made to hospitals and other providers. Such overpayments are the result of, among other things, coordination of benefits and provider claim audits. For the years ended September 30, 2023 and 2022, we recorded a reduction in medical claims expense of \$53,299 and \$37,915, respectively, for such overpayments. As of September 30, 2023 and 2022, respectively, approximately \$2,346 and \$1,812 are recorded as receivables related to such overpayments.

Reinsurance

Reinsurance premiums are reported as reductions of premium revenue in medical claims and related expenses and reinsurance recoveries are reported as reductions in medical claims and related expenses.

Settlements

MGB Health Plan contracts with certain providers at negotiated rates based on historical and anticipated experience. These methods of reimbursement result in settlements based on actual versus anticipated experience which could result in payments due from (to) these providers. Settlements receivable of \$3,647 and \$4,047 were recorded in other current assets as of September 30, 2023 and 2022, respectively. Settlements payable of \$4,633 and \$1,834 were recorded in accrued medical claims and related expenses as of September 30, 2023 and 2022, respectively. The settlements are intended to include both reported and unreported incurred claims as of September 30, 2023 and 2022.

In 2014, the Affordable Care Act introduced new settlements related to a risk adjustment program, a risk corridor program and a reinsurance program designed to mitigate the transitional impact on insurers for new members. The risk corridor program and reinsurance program ended on December 31, 2016 in accordance with the provision of the Affordable Care Act. Our estimated net receivable due from the federal government for the risk adjustment program was \$73,299 and \$73,868 as of September 30, 2023 and 2022, respectively. Similar to the federal program, EOHHS has a risk corridor program, and our estimated net payable due to EOHHS was \$95,619 and \$72,462 as of September 30, 2023 and 2022, respectively.

Premium Deficiency Reserves

Premium deficiency reserves are assessed and recognized on a product line basis based upon expected premium revenue, medical expense and administrative expense levels, and remaining contractual obligations using historical experience. As of September 30, 2023 and 2022, a premium deficiency reserve of \$24,071 and \$21,120, respectively, is included in accrued medical claims and related expenses in the accompanying consolidated financial statements.

Claims Adjustment Expenses

Claims adjustment expenses (CAE) are those costs expected to be incurred in connection with the adjustment and recording of health claims. We have recorded an estimate of unpaid CAE associated with incurred but unpaid claims, which is included in medical claims and related expenses in the accompanying consolidated statements of operations. Management believes the amount of the liability for unpaid CAE as of September 30, 2023, is adequate to cover the cost for the adjustment and recording of unpaid claims; however, actual expenses may differ from those established estimates. Adjustments to the estimates for unpaid CAE are reflected in operating results in the period in which the change in estimate is identified.

(in thousands of dollars)

3. Pandemic

On March 11, 2020, the World Health Organization designated COVID-19 as a global pandemic resulting in an extraordinary impact to Mass General Brigham. During certain periods since 2020, the COVID-19 pandemic has continued to impact patient activity and operating expenses. In response to COVID-19, various types of economic support were enacted by federal, state and local authorities to mitigate the financial impact, with the most significant impacts to Mass General Brigham in fiscal 2023 and 2022 summarized below.

Deferred Payment of Employer Payroll Taxes

The Coronavirus Aid Relief and Economic Security (CARES) Act allowed for deferred payments of only the employer share of payroll taxes through December 31, 2020 and required payment of 50% of these deferred taxes by December 31, 2022 and 50% by December 31, 2021. We made repayments of \$121,604 and \$117,862, during 2023 and 2022, respectively. As of September 30, 2023, all amounts have been repaid.

Provider Relief Funds (PRF)

During 2020 and 2021, we received PRF that were used to prevent, prepare for and respond to COVID-19. Based on our interpretation of available information as of September 30, 2023 and 2022, we have deferred \$86,487 of PRF we received.

Federal Emergency Management Agency (FEMA)

During 2023, we submitted applications to FEMA for the reimbursement of COVID-19 expenses and recognized grant revenue totaling \$99,372 as other operating revenue in the consolidated statement of operations. As of September 30, 2023 we have deferred \$35,092 of FEMA payments received.

4. Operating Revenues

Net Patient Service Revenue

Mass General Brigham's providers maintain agreements with The Centers for Medicare and Medicaid Services under the Medicare program, the Commonwealth under the Medicaid program and various managed care payers that govern payment for services rendered to patients covered by these agreements. The agreements generally provide for per case or per diem rates or payments based on discounted charges for inpatient care and discounted charges or fee schedules for outpatient care. Certain contracts also provide for payments that are contingent upon meeting agreed upon quality and efficiency measures.

(in thousands of dollars)

We recognize net patient service revenue for services provided to patients who have third-party payer coverage based on contractual rates for the services rendered. For uninsured patients that do not qualify for charity care, we recognize revenue based on our standard rates (subject to discounts) for services provided. Based on our historical experience, a significant portion of uninsured patients are unable or fail to pay for the services provided. Consequently, we have provided implicit discounts to uninsured patients. These discounts represent the difference between amounts billed to patients and amounts expected to be collected based on historical experience. The following summarizes net patient service revenue, net of contractual adjustments and discounts by significant payer:

	Years Ended September 30,									
		202	3		2022					
Net patient service revenue (net of contractual adjustments and discounts)										
Medicare	\$	2,822,694	22.1 %	\$	2,677,395	22.6 %				
Medicare managed care		967,763	7.6 %		824,964	7.0 %				
Medicaid		689,718	5.4 %		730,116	6.2 %				
Medicaid managed care		561,198	4.4 %		299,767	2.5 %				
Massachusetts managed care organizations		4,569,756	35.7 %		4,306,308	36.3 %				
Other commercial		2,729,703	21.3 %		2,493,749	21.0 %				
All others		451,754	3.5 %	_	537,152	4.4 %				
Total all payers	\$	12,792,586	100.0 %	\$	11,869,451	100.0 %				

Net patient service revenue includes estimated retroactive revenue adjustments due to future audits, reviews and investigations. Retroactive adjustments are considered in the recognition of revenue on an estimated basis in the period the related services are rendered, and such amounts are adjusted in future periods as adjustments become known or as years are no longer subject to such audits, reviews and investigations. Contracts, laws and regulations governing the Medicare, Medicaid and charity care programs and managed care payer arrangements are complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term. A portion of the accrual for settlements with third-party payers has been classified as long-term because such amounts, by their nature or by virtue of regulation or legislation, will not be paid within one year.

Third-party payers (accrual) receivable consists of the following:

	Balance Sheet Classification		Septen	nber 3	30,
		2023		2022	
Current portion					
Receivable for settlements with third-party payers	Other current assets	\$	159,813	\$	136,498
Accrual for settlements with third-party payers	Accounts payable and accrued expenses	_	(59,584)		(72,765)
			100,229		63,733
Long-term portion					
Receivable for settlements with third-party payers	Other assets		6,700		26,567
Accrual for settlements with third-party payers	Accrued other		(28,526)		(25,168)
			(21,826)		1,399
Third-party payers receivable (accrual)		\$	78,403	\$	65,132

(in thousands of dollars)

We recognize changes in third-party payer settlements and other estimates in the year of the change in estimate. For the years ended September 30, 2023 and 2022, adjustments to prior year estimates resulted in an increase to net patient service revenue of \$47,842 and \$13,177, respectively. Subsequent changes to estimated discounts are generally recorded as adjustments to net patient service revenue in the period of change.

We provide either full or partial charity care to patients who cannot afford to pay for their medical services based on income and family size. Charity care is generally available to qualifying patients for medically necessary services. We report certain bad debts related to emergency services as charity care. As there is no expectation of collection, there is no net patient service revenue recorded related to charity care.

Premium Revenue

Premiums are due monthly and are recorded as earned during the period in which members are eligible to receive services. Premiums received prior to the first day of the coverage period are recorded as unearned premiums in accounts payable and accrued expenses.

Academic and Research Revenue

Academic and research revenue is recognized as either an exchange or nonexchange transaction, depending on the contract type. The following table sets forth total academic and research revenue received by funding source:

			Years Ended	Sep	tember 30,		
		20	23		20	22	
National Institute of Health and other							
federal agencies	\$	1,155,306	42.7 %	\$	1,046,056	41.7 %	
Federal subcontracts		260,323	9.6 %		252,503	10.1 %	
Industry/corporate		224,821	8.3 %		221,240	8.8 %	
Foundations/nonprofits and other sponsors		771,579	28.5 %		697,349	27.8 %	
Total research revenue		2,412,029			2,217,148		
Academic revenue	_	295,981	10.9 %	_	290,214	11.6 %	
Total academic and research revenue	\$	2,708,010	100.0 %	\$	2,507,362	100.0 %	

(in thousands of dollars)

Other Revenue

Other revenue includes all other operating revenue sources, the most significant being the following:

	Years Ended September 30,							
		2023		2022				
Specialty and retail pharmacy operations	\$	928,501	\$	652,109				
Contract revenue	•	132,070		111,081				
FEMA funding		99,372		-				
Parking and office rentals		77,249		71,087				
Tuition		62,482		64,885				
Outsourced services		58,801		57,082				
Blood factor sales		53,308		40,499				
Cafeteria sales		36,198		30,644				
Contract administrative fees		27,397		32,065				
ACO administration fees		24,926		47,135				
Consulting services		14,248		14,997				
International contracts		10,498		13,415				
Intellectual property and royalties		14,916		3,793				
Investment income		13,560		12,802				
Other		254,359		251,207				
Total other revenue	\$	1,807,885	\$	1,402,801				

5. Liquidity and Availability

Cash and investments are managed centrally under policies developed by the Investment Committee and reviewed by the Finance Committee of the Company's Board of Directors. Wherever possible, funds are commingled and are assigned to one of three investment pools (the Money Market Pool, the Aggregate Bond Pool and the Long-Term Pool, collectively, the Pools) which have been structured to provide a range of investment objectives, risk profiles and rates of return appropriate for our assets. Funds are allocated among the Pools based on expected liquidity needs as determined by multi-year financial plans, restrictions and management judgment.

The tiered time horizon structure of the Pools is designed to meet anticipated and contingent liquidity needs. The following tables set forth the periods within which funds are available to meet liquidity needs and based on redemption provisions with investment managers, the specific Pools from which such funds would be drawn as of:

	September 30, 2023													
Investment Pool	Same Day			1 Week	1 Month 3 Months			3 Months		1 Year		> 1 Year		Total
Money market	\$	167,997	\$	-	\$	-	\$	-	\$	-	\$	_	\$	167,997
Aggregate bond		327,089		2,985		-		-		-		-		330,074
Long-term		364,584		533,078		2,205,916	_	3,264,619	_	1,176,742	_	5,905,179	_	13,450,118
Total	\$	859,670	\$	536,063	\$	2,205,916	\$	3,264,619	\$	1,176,742	\$	5,905,179	\$	13,948,189
Cumulative total	\$	859,670	\$	1,395,733	\$	3,601,649	\$	6,866,268	\$	8,043,010	\$	13,948,189		

(in thousands of dollars)

	September 30, 2022												
Investment Pool		ame Day		1 Week	1 Month			3 Months		1 Year	> 1 Year		Total
Money market	\$	362,668	\$	-	\$	-	\$	-	\$	-	\$ -	\$	362,668
Aggregate bond		443,584		177,438		-		-		-	-		621,022
Long-term		146,618		1,013,946		1,464,776		2,870,543		907,734	5,803,923	_	12,207,540
Total	\$	952,870	\$	1,191,384	\$	1,464,776	\$	2,870,543	\$	907,734	\$ 5,803,923	\$	13,191,230
Cumulative total	\$	952,870	\$	2,144,254	\$	3,609,030	\$	6,479,573	\$	7,387,307	\$ 13,191,230		

As of September 30, 2023 and 2022, we had cash and equivalents not included in the Pools of \$228,351 and \$129,750, respectively. As of September 30, 2023 and 2022, we had net patient accounts receivable of \$1,638,306 and \$1,438,412, respectively, that would be available for general expenditures within one year of the balance sheet dates.

6. Investments and Investments Limited as to Use

Investments are either invested in the Pools or separately managed. Substantially all affiliates participate in the Pools. Their respective ownership interests are tracked and updated monthly and are accounted for using the fair value method. Income (including realized gains and losses) from the Pools is allocated to each participant on a monthly basis based on its proportionate interest in the Pools.

Oversight of the management of the investable assets, including the Pools and pension assets, is provided by the Investment Committee of the Company's Board of Directors which seeks to achieve incremental returns by manager selection and asset allocation (increasing/decreasing allocations within allowable ranges based on current and projected valuations). The Committee is supported by a professional staff, an outside investment consultant and a pension actuarial consultant.

We utilize a target allocation policy and balance projected returns, correlation and volatility of various asset classes within the overall risk tolerance. Asset allocations are managed based on relative valuations among and within asset classes and the perceived ability of managers to outperform passive benchmarks. Exposure by asset class is the sum of allocation to those mangers whose mandates most closely fit the listed asset classes. Asset allocation can and will deviate from target exposures and is regularly monitored for rebalancing.

The Pools invest in a variety of assets which include private partnerships whose assets include equity, fixed income and other investments. The Pools have unfunded commitments as follows:

	September 30,				
		2023		2022	
Private equity	\$	1,702,731	\$	1,732,382	
Private energy		109,042		136,032	
Private real estate		49,481		77,402	
Timber and agriculture		1,498		1,935	
Private alternatives and hedge funds		200,062		345,844	
	\$	2,062,814	\$	2,293,595	

(in thousands of dollars)

The unfunded commitments will be drawn down by the various general partners over the next several years. The maximum annual drawdown is expected to be 3% to 5% of investments and investments limited as to use.

Short-term Investments in Investment Pools

Within the Aggregate Bond Pool and the Long-Term Pool, there are assets that meet the definition of short-term investments. These short-term investments are considered part of the Aggregate Bond Pool and the Long-Term Pool and are not included in cash equivalents on the consolidated balance sheets. Accordingly, transactions within the Aggregate Bond Pool and the Long-Term Pool that result in the purchase of investments or result in proceeds from the sales of investments are excluded from the statement of cash flows purchases of investments and proceeds from the sales of investments. Within the Aggregate Bond Pool, purchases of investments and proceeds from the sales of investments not included in the statement of cash flows were \$100,124 and \$340,979 for the year ended September 30, 2023, and \$159,146 and \$1,536,389 for the year ended September 30, 2022, respectively. Within the Long-Term Pool, purchases of investments and proceeds from the sales of investments not included in the statement of cash flows were \$1,250,769 and \$1,326,573 for the year ended September 30, 2023, and \$1,888,457 and \$1,346,607 for the year ended September 30, 2022, respectively.

Investments limited as to use consist of the following:

	Septemb	er 30, 2023	September 30, 2022			
	Current	Long-Term	Current	Long-Term		
	Portion	Portion	Portion	Portion		
Internally designated funds						
Reserved for capital expenditures	\$ 1,257,712	\$ -	\$ 1,406,275	\$ -		
Unexpended academic and research gifts	-	4,363,810	-	3,989,979		
Deferred compensation	-	614,318	-	511,439		
Other	1,868,784	419,512	2,364,066	420,895		
	3,126,496	5,397,640	3,770,341	4,922,313		
Externally limited funds						
Unexpended funds on research	377,730	=	355,934	-		
Contributions held for others	1,531	=	1,405	=		
Professional liability trust fund	=	43,062	=	39,065		
Held by trustees under debt and other						
agreements	230	<u> </u>	16,851			
	379,491	43,062	374,190	39,065		
	\$ 3,505,987	\$ 5,440,702	\$ 4,144,531	\$ 4,961,378		

(in thousands of dollars)

Investment activity included in excess (deficit) of revenues over expenses consists of the following:

	Years Ended September 30			
		2023		2022
Investment income included in operations and reported in other revenue Investment income included in nonoperating gains and reported in	\$	13,560	\$	12,802
Income from investments Investment income and realized gains on investments Unrealized change in investments Academic and research gifts, net of expenses		42,213 919,915 172,738		121,756 (2,393,256) 219,505
Total investment activity included in excess (deficit) of revenues over expenses	\$	1,148,426	\$	(2,039,193)

7. Fair Value Measurements

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (also referred to as exit price). Therefore, a fair value measurement should be determined based on the assumptions that market participants would use in pricing the asset or liability. In determining fair value, the use of various valuation approaches, including market, income and cost approaches, is permitted.

Fair Value Hierarchy

A fair value hierarchy has been established based on whether the inputs to valuation techniques are observable or unobservable. Observable inputs reflect market data obtained from independent sources, while unobservable inputs reflect the reporting entity's assumptions about the inputs market participants would use. The fair value hierarchy requires the reporting entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. In addition, for hierarchy classification purposes, the reporting entity should not look through the form of an investment to the nature of the underlying securities held by an investee.

The hierarchy is described below

- Level 1 Valuations using quoted prices in active markets for identical assets or liabilities.

 Valuations of these products do not require a significant degree of judgment. Level 1 assets and liabilities primarily include debt and equity securities that are traded in an active exchange market.
- Valuations using observable inputs other than Level 1 prices such as quoted prices in active markets for similar assets or liabilities; quoted prices for identical or similar assets or liabilities in markets that are not active; broker or dealer quotations; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities. Level 2 assets and liabilities primarily include debt securities with quoted prices that are traded less frequently than exchange-traded instruments as well as debt securities and derivative contracts whose value is determined using a pricing model with inputs that are observable in the market or can be derived principally from or corroborated by observable market data.

(in thousands of dollars)

Level 3 Valuations using unobservable inputs that are supported by little or no market activity and are significant to the fair value of the assets or liabilities. Level 3 includes assets and liabilities whose value is determined using pricing models, discounted cash flow methodologies, or similar techniques reflecting the reporting entity's assumptions about the assumptions market participants would use as well as those requiring significant management judgment.

Valuation Techniques

Pooled investments, separately invested short-term investments and debt and equity securities are classified within Level 1 or Level 2 of the fair value hierarchy as they are valued using quoted market prices, broker or dealer quotations, or other observable pricing sources. Certain types of investments are classified within Level 3 of the fair value hierarchy because they have little or no market activity and therefore have little or no observable inputs with which to measure fair value.

The valuation of interest rate swaps is determined using widely accepted valuation techniques, including discounted cash flow analysis on the expected cash flows of each derivative. This analysis reflects the contractual terms of the derivatives, including the period to maturity, and uses observable market-based inputs, including interest rate curves and implied volatilities.

The following tables summarize financial assets and liabilities measured at fair value on a recurring basis as of:

	September 30, 2023									
		Fair Value Measurements Using								
	Quoted Prices in Active Markets for Identical Items (Level 1)		Significant Other Significant Observable Unobservable Inputs Inputs (Level 2) (Level 3)		bservable Inputs	Investments Valued			Total	
Assets										
Pooled investments										
Short-term investments	\$	324,630	\$	-	\$	-	\$	-	\$	324,630
Separately managed investments		850,001		197,971		-		-		1,047,972
Mutual funds		2,985		-		-		-		2,985
Private partnerships, commingled funds and other		_		_		_	1	12,572,601		12,572,601
runus and other		1 177 616		107.071					-	
	_	1,177,616		197,971				12,572,601	_	13,948,188
Separately invested										
Short-term investments		52,846		-		-		-		52,846
Equities		25,033		-		-		-		25,033
Mutual funds		649,706		64,637		-		-		714,343
Private partnerships, commingled								407.450		407.450
funds and other Beneficial interests in		-		-		-		187,458		187,458
perpetual assets						51,876				51,876
perpetual assets		707.505		04.007				407.450		
		727,585		64,637		51,876		187,458	_	1,031,556
	\$	1,905,201	\$	262,608	\$	51,876	\$ 1	12,760,059	\$	14,979,744
Interest rate swaps										
Assets			\$	55,987					\$	55,987
Liabilities				(67,075)						(67,075)
Net interest rate swaps			\$	(11,088)					\$	(11,088)
Net interest rate swaps			\$	(11,088)					\$	

(in thousands of dollars)

	Quoted Prices	Significant		Investments	
	in Active	Other	Significant	Valued	
	Markets for	Observable	Unobservable	Using NAV as	
	Identical Items		Inputs	a Practical	
	(Level 1)	(Level 2)	(Level 3)	Expedient	Total
Assets					
Pooled investments					
Short-term investments	\$ 269,086	\$ -	\$ -	\$ -	\$ 269,086
Separately managed investments	755,478	486,044	-	-	1,241,522
Mutual funds	177,438	-	-	-	177,438
Private partnerships, commingled					
funds and other				11,503,184	11,503,184_
	1,202,002	486,044		11,503,184	13,191,230
Separately invested					
Short-term investments	55,670	_	-	-	55,670
Equities	30,340	-	-	-	30,340
Mutual funds	632,093	69,015	-	-	701,108
Beneficial interests in					
perpetual assets			51,752		51,752
	718,103	69,015	51,752		838,870
	\$ 1,920,105	\$ 555,059	\$ 51,752	\$ 11,503,184	\$ 14,030,100
Interest rate swaps					
Assets		\$ 15,224			\$ 15,224
Liabilities		(156,705)			(156,705)
Net interest rate swaps		\$ (141,481)			\$ (141,481)

(in thousands of dollars)

8. Pledges and Contributions Receivable

Pledges receivable represent unconditional promises to give and are net of allowances for uncollectible amounts. Pledges are recorded at the present value of their estimated future cash flows. Pledges collectible within one year are classified as other current assets, net of allowances, and total \$255,239 and \$113,916 as of September 30, 2023 and 2022, respectively. Pledges collectable in one year or greater are classified as other assets. Estimated cash flows due after one year are discounted using published treasury bond and note yields that are commensurate with estimated collection risks. The blended discount rate was 4.8% and 4.2% for 2023 and 2022, respectively. Pledges are expected to be collected as follows:

	September 30,			
	2023			2022
Amounts due				
Within one year	\$	277,559	\$	136,491
In one to five years		400,728		169,846
In more than five years		118,502		68,247
Total pledges receivable		796,789		374,584
Less: Unamortized discount		69,667		29,837
		727,122		344,747
Less: Allowance for uncollectibles		33,682		28,351
Net pledges receivable		693,440		316,396
Contributions receivable from trusts		49,497		53,481
	\$	742,937	\$	369,877

9. Property and Equipment

Property and equipment consists of the following:

	September 30,				
	2023	2022			
Land and land improvements	\$ 353,988	\$ 372,508			
Buildings and building improvements	9,655,999	9,282,374			
Equipment	2,981,003	2,903,484			
Construction in progress	1,042,827	702,930			
Finance right-of-use lease assets	102,843	92,781			
	14,136,660	13,354,077			
Less: Accumulated depreciation	7,359,297	6,911,817			
Property and equipment, net	\$ 6,777,363	\$ 6,442,260			

(in thousands of dollars)

Depreciation expense for the years ended September 30, 2023 and 2022 was \$772,556 and \$767,158, respectively. Interest costs, net of interest earned, aggregating \$2,720 and \$417 were capitalized in 2023 and 2022, respectively.

For the years ended September 30, 2023 and 2022, fully depreciated assets with an original cost of \$325,076 and \$268,623, respectively, were written off.

10. Levels of Capital and Surplus

Risk-based capital (RBC) is a methodology adopted by the National Association of Insurance Commissioners for determining the minimum level of capital and surplus deemed necessary for an insurer based upon the types of assets held and business written. The Company has guaranteed to the Massachusetts Division of Insurance (DOI) (the RBC Guaranty) to maintain MGB Health Plan's capital and surplus at a specified minimum level, measured quarterly in accordance with an RBC methodology permitted by DOI. The RBC Guaranty may be enforced by the DOI. The Company provided capital to MGB Health Plan of \$75,000 and \$11,000 in 2023 and 2022, respectively. Mass General Brigham Health Plan, Inc.'s current contract with EOHHS requires it to maintain a minimum net worth and/or financial insolvency insurance in an amount equal to the Minimum Net Worth calculation as defined in Massachusetts General Law 176G, Section 25. At December 31, 2022 and 2021 (Mass General Brigham Health Plan, Inc.'s statutory year end), the minimum net worth requirement, as determined in accordance with EOHHS guidelines, was \$50,357 and \$47,718, respectively. Mass General Brigham Health Plan, Inc.'s GAAP net worth was \$124,286 and \$158,853 at December 31, 2022 and 2021, respectively, and thus exceeded the EOHHS requirements by \$73,929 and \$111,135, respectively.

11. Accrued Medical Claims and Related Expenses

Accrued medical claims and related expenses include estimates of expected trends in claims severity, frequency, and other factors, which could vary as the claims are ultimately settled and are based principally upon historical experience. For the years ended September 30, 2023 and 2022, changes in estimates resulted in a decrease of accrued medical claims and related expense of \$38,421 and \$14,564, respectively. Decreases of this nature occur as the result of claim settlements and recoveries during the current year and as additional information is received regarding individual claims, causing changes from the original estimates of the cost of these claims. Ongoing analysis of the recent loss development trends is also taken into account in evaluating the overall adequacy of the reserves.

(in thousands of dollars)

Changes in accrued medical claims and related expenses are as follows:

	2023	2022
Balance at beginning of year	\$ 119,237	\$ 87,289
Less:		
Premium deficiency reserve	(21,120)	-
Accrual for claims adjustment expenses	(1,608)	(1,602)
Accrued medical payables - other	(16,818)	(17,281)
Plus: Settlements payable, net	 91,230	 61,687
Net balance at beginning of year	 170,921	130,093
Incurred related to		
Current year	1,125,010	736,776
Prior years	(38,421)	 (14,564)
Total incurred	 1,086,589	 722,212
Paid related to		
Current year	928,975	591,660
Prior years	47,016	 89,724
Total paid	975,991	681,384
Net balance at end of year	281,519	170,921
Plus:		
Premium deficiency reserve	24,071	21,120
Accrual for claims adjustment expenses	2,962	1,608
Accrued medical payables - other	19,646	16,818
Less: Settlements payable, net	(135,763)	 (91,230)
Balance at end of year	\$ 192,435	\$ 119,237

Medical claims and related expenses in the accompanying consolidated statements of operations include other nonclaims related costs. These nonclaims related expenses were for directly delivered services and medical cost risk sharing and incentives.

(in thousands of dollars)

12. Long-Term Obligations

Mass General Brigham's long-term obligations consist of the following:

	Final	Septen	nber 30,	
	Maturity	2023		2022
Massachusetts Health and Educational Facilities Authority Revenue Bonds				
Series 1997 P*, variable interest rate of 4.03% and 2.38%	2027	\$ 120,000	\$	150,000
Series 2005 F*, variable interest rate of 3.99% and 2.48%	2040	224,250		226,150
Series 2007 G*, variable interest rate of 4.00% and 2.10%	2042	75,000		75,000
Series 2008 H*, variable interest rate of 3.43% and 1.64%	2042	156,780		159,785
Massachusetts Development Finance Agency (Agency) Revenue Bonds				
Series 2011 K*, variable interest rate of 3.90% and 2.54%	2046	100,000		100,000
Series 2014 M*, average fixed interest rate of 4.10%	2026	9,335		16,835
Series 2014 N*, variable interest rate of 4.94% and 2.60%	2044	124,250		126,150
Series 2015 O*, average fixed interest rate of 4.37%	2045	169,830		176,930
Series 2016 Q*, average fixed interest rate of 4.81%	2047	394,920		406,260
Series 2016 R*, variable interest rate of n/a and 2.29%	n/a	-		100,000
Series 2017 S*, average fixed interest rate of 4.59%,				
variable interest rate of n/a and 2.96%	2047	740,480		823,485
Series 2019 T*, variable interest rate of 4.54% and 3.01%	2049	123,250		138,250
Series 2020 A*, average fixed interest rate of 4.82%	2050	276,530		286,325
Series 2022 B*, variable interest rate of 4.74% and n/a	2052	100,230		-
New Hampshire Health and Education Facilities Authority Revenue Bonds				
Series 2017, average fixed interest rate of 5.00%	2041	87,830		90,390
MGB Taxable Debt				
Series 2007 Bonds, fixed interest rate of 6.26%	2037	100,000		100,000
2012 Senior Notes, fixed interest rate of 4.11%	2052	400,000		400,000
2014 Senior Notes, fixed interest rate of 4.73%	2044	150,000		150,000
Series 2015 Bonds, fixed interest rate of 4.12%	2055	300,000		300,000
2016 Senior Notes, fixed interest rate of 3.89%	2046	225,000		225,000
Series 2017 Bonds, fixed interest rate of 3.77%	2048	303,644		303,644
2018 Senior Notes, fixed interest rate of 4.60%	2049	400,000		400,000
Series 2020 Bonds, average fixed interest rate of 3.29%	2060	1,017,135		1,017,135
Series B-1 Commercial Paper Notes, variable interest rate of 5.40% and 2.65%	2023	119,870		50,230
Other obligations		 2,452	_	14,341
Total long-term obligations, par value		5,720,786		5,835,910
Net unamortized bond premiums		252,112		264,135
Deferred financing costs		(22,142)		(23,514)
Total long-term obligations, net		5,950,756		6,076,531
Less:				
Current portion		 481,130	_	519,354
		\$ 5,469,626	\$	5,557,177

^{*} Denotes series is issued in multiple subseries

Variable interest rates are presented at September 30, 2023 and 2022, respectively

(in thousands of dollars)

Scheduled maturities of long-term obligations (including the impact of net unamortized bond premiums and deferred financing costs) during the next five years and thereafter and other amounts classified as current liabilities, are as follows:

	_	Scheduled Maturities		Bonds Supported by Self Liquidity		Bonds ported by Bank acilities	Total		
2024	\$	230,705	\$	222,925	\$	27,500	\$	481,130	
2025		121,446		-		-		121,446	
2026		93,686		-		-		93,686	
2027		86,148		-		-		86,148	
2028		91,996		-		-		91,996	
Thereafter		5,076,350				-		5,076,350	
	\$	5,700,331	\$	222,925	\$	27,500	\$	5,950,756	

The scheduled maturities represent annual payments as required under debt repayment schedules. The current portion of long-term obligations includes the payments scheduled to be made in 2024, bonds supported by self-liquidity that can be tendered prior to September 30, 2024, and bonds supported by bank facilities with financial institutions (standby bond purchase agreements or letters of credit) that expire prior to September 30, 2024 or have potential principal amortization under bank facilities' term out provisions due during 2024. The bonds supported by self-liquidity provide the bondholder with an option to tender the bonds to the Company. Accordingly, these bonds are classified as a current liability. The bonds supported by bank facilities provide the bondholder with an option to tender the bonds to the liquidity provider. Generally accepted accounting principles require bonds backed by bank facilities expiring within one year of the balance sheet date as well as potential principal amortization under bank facilities' term out provisions due within one year of the balance sheet date to be classified as a current liability.

If bonds supported by bank facilities cannot be remarketed, the repayment terms of those bank facilities would result in repayments of \$57,500 in 2024, \$126,417 in 2025, \$81,417 in 2026 and \$28,917 in 2027. If the bonds supported by self-liquidity cannot be remarketed, the bonds would be tendered to the Company on their respective earliest tender dates, which differ from scheduled maturity dates, and would result in payments of \$222,925 in 2024, \$61,935 in 2025, \$80,000 in 2026, \$0 in 2027, \$0 in 2028 and \$239,515 thereafter.

(in thousands of dollars)

Scheduled payments of long-term debt (excluding the impact of net unamortized bond premiums and deferred financing costs) for each of the next five years, assuming bonds backed by bank facilities are remarketed and the standby purchase agreements are renewed and bonds supported by self-liquidity are remarketed, are as follows:

2024	\$ 110,835
2025	124,751
2026	93,686
2027	101,148
2028	99,032
Thereafter	5,191,334_
	\$ 5,720,786

Interest expense paid during the years ended September 30, 2023 and 2022 was \$244,096 and \$237,384, respectively.

In October 2022, we issued \$100,230 of Mass General Brigham Series 2022 B Revenue Bonds. The bond proceeds were used to refund Partners HealthCare System Series 2016 R-1 Revenue Bonds (\$50,000) and Taxable Commercial Paper Notes (\$50,230) that refinanced, on an interim basis, Partners HealthCare System Series 2017 S-5 Revenue Bonds.

Mass General Brigham bonds are general obligations of the Company supported by guarantees from Brigham, Inc., The Brigham and Women's Hospital, Inc., The Massachusetts General Hospital and The General Hospital Corporation (the General) which may be suspended under certain conditions.

Our debt agreements contain certain covenants, including a minimum debt service coverage ratio and limitations on additional indebtedness and asset transfers.

Lines of Credit

The Company maintains two lines of credit aggregating \$375,000 that provide access to same day funds. Advances under the lines of credit bear a variable rate of interest based on the Bloomberg Short-Term Bank Yield Index rate (BSBY) for the \$250,000 line of credit and the Secured Overnight Financing Rate (SOFR) for the \$125,000 line of credit. As of September 30, 2023 and 2022, there were no amounts outstanding under the lines of credit. The lines of credit expire in July 2025.

Taxable Commercial Paper

The Company maintains a \$500,000 Taxable Commercial Paper (CP) program. As of September 30, 2023 and 2022, there was \$119,870 and \$50,230, respectively, outstanding under the CP program.

13. Derivatives

Interest Rate Swaps

We utilize swap contracts to lock-in long-term synthetic fixed rates and manage fluctuations in cash flows resulting from interest rate risk on certain of our variable rate bonds. These bonds expose us to variability in interest payments due to changes in interest rates. Management believes that it is prudent to limit this variability. To meet this objective and to take advantage of low interest rates,

(in thousands of dollars)

we have entered into various swap contracts involving the exchange of fixed rate payments by us for variable rate payments from several counterparties. These variable rate payments are currently based on a percentage of SOFR (based on compound average of daily SOFR in arrears) plus a spread.

By using swap contracts to manage the risk of changes in interest rates, we expose ourselves to credit risk and market risk. Credit risk is the failure of the counterparty to perform under the terms of the swap contracts. When the fair value of a swap contract is positive, the counterparty has a liability to us, which creates credit risk. We minimize our credit risk by entering into swap contracts with several counterparties and requiring the counterparty to post collateral for our benefit based on the credit rating of the counterparty and the fair value of the swap contract. Conversely, when the fair value of a swap contract is negative, we have a liability to the counterparty and, therefore, we do not have credit risk. Under certain circumstances, we may be required to post collateral for the benefit of the counterparty. Market risk is the adverse 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 we may undertake.

The following is a summary of the outstanding positions under our swap contracts as of September 30, 2023:

	ı	Notional			
Effective Date		Amount	Maturity	Rate Paid	Rate Received
5/1/03	\$	144,229	7/1/45	3.36%	67% 1M SOFR + 0.0767%
10/15/03		9,480	1/1/31	3.85%	70% 1M SOFR + 0.08014%
7/1/05		150,000	7/1/50	3.09%	67% 1M SOFR + 0.0767%
7/1/05		8,300	7/1/25	5.11%	67% 6M SOFR + 0.28693%
7/1/07		50,000	7/1/52	3.00%	67% 1M SOFR + 0.0767%
7/1/07		100,000	7/1/52	2.95%	67% 1M SOFR + 0.083%
7/1/09		100,000	7/1/50	3.58%	67% 1M SOFR + 0.0767%
7/1/11		100,000	7/1/50	3.66%	67% 1M SOFR + 0.0767%
7/1/13		100,000	7/1/48	3.80%	67% 1M SOFR + 0.0767%
7/1/15		50,000	7/1/50	3.80%	67% 1M SOFR + 0.0767%
4/1/16		100,000	7/1/52	3.76%	67% 1M SOFR + 0.0767%
7/1/17		50,000	7/1/52	3.74%	67% 1M SOFR + 0.083%
7/1/19		50,000	7/1/49	1.85%	67% 1M SOFR + 0.0767%
7/1/21		50,000	7/1/51	1.84%	67% 1M SOFR + 0.0767%
7/1/23		50,000	7/1/53	1.80%	67% 1M SOFR + 0.0767%
7/1/24		100,000	7/1/54	1.81%	67% 1M SOFR + 0.0767%
7/1/25		50,000	7/1/55	1.77%	67% 1M SOFR + 0.083%
7/1/26		100,000	7/1/56	1.78%	67% 1M SOFR + 0.0767%
7/1/27		50,000	7/1/57	1.80%	67% 1M SOFR + 0.0767%
7/1/27		50,000	7/1/57	1.77%	67% 1M SOFR + 0.083%
	\$	1,462,009			

(in thousands of dollars)

Our swap contracts contain provisions that require collateral to be posted if the fair value of the swap exceeds certain thresholds. The collateral thresholds reflect the current credit ratings issued by major credit rating agencies on our and the counterparty's debt. Declines in our or the counterparty's credit ratings would result in lower collateral thresholds and, consequently, the potential for additional collateral postings by us or the counterparty. As of September 30, 2023, we held collateral of \$7,350 and as of September 30, 2022, we have posted collateral \$16,397. We have established procedures to ensure that liquidity and securities are available to meet collateral posting requirements.

Upon the occurrence of certain events of default or termination events identified in the swap contracts, either the Company or the counterparty could terminate the contracts in accordance with their respective terms. Termination results in the payment of a termination amount by one party that attempts to compensate the other party for its economic losses. If interest rates at the time of termination are lower than those specified in the swap contract, we would make a payment to the counterparty. Conversely, if interest rates at such time are higher, the counterparty would make a payment to us.

14. Leases

We lease property and equipment under both finance and operating lease agreements. We recognize leases with a term greater than twelve months on the balance sheets.

Some lease agreements require us to pay variable costs including property taxes, insurance, maintenance and repairs. Variable costs are excluded from the right-of-use asset and liability. Lease and nonlease components of agreements are not separated. Some leases contain rental escalation clauses and renewal options that are included in lease payment calculations when appropriate. The estimated incremental borrowing rate is used to discount the lease payment amounts.

The components of lease expense consist of the following:

	Year Ended September 30, 2023					
	Academic and					
		pplies and Other expenses	Gi	esearch ifts, Net Expenses		Total
		-		-		
Operating lease expense	\$	225,101	\$	3,357	\$	228,458
Short-term lease expense		14,026		1,001		15,027
Variable lease expense		87,866		1,252		89,118
Finance lease expense						
Amortization of leased assets		14,874		167		15,041
Interest on lease liabilities		3,650		22		3,672
Total lease expense	\$	345,517	\$	5,799	\$	351,316

(in thousands of dollars)

	Year Ended September 30, 2022					
	Academic and					
	Su	pplies and	R	esearch		
	Other		G	ifts, Net		
	E	xpenses	of E	Expenses		Total
Operating lease expense	\$	216,064	\$	7,639	\$	223,703
Short-term lease expense		12,964		183		13,147
Variable lease expense		77,112		2,545		79,657
Finance lease expense						
Amortization of leased assets		13,012		204		13,216
Interest on lease liabilities		3,871		36		3,907
Total lease expense	\$	323,023	\$	10,607	\$	333,630

Lease related assets and liabilities are as follows:

		September 30,			30,
	Balance Sheet Classification		2023		2022
Operating lease assets Finance lease assets	Right-of-use operating lease assets Property and equipment, net	\$	1,024,336 68,194	\$	1,135,787 72,401
Total lease assets		\$	1,092,530	\$	1,208,188
Current operating lease liability Current finance lease liability Noncurrent operating lease liability Noncurrent finance lease liability	Current portion of operating lease obligations Accounts payable and accrued expenses Operating lease obligation, less current portion Accrued other	\$	207,671 16,939 696,740 73,318	\$	206,350 15,864 801,038 77,274
Total lease liabilities		\$	994,668	\$	1,100,526

Supplemental cash flow and other information related to leases are as follows:

	Years Ended September 30,				
	2023			2022	
Cash paid for amounts included in the measurement of lease liabilities Operating cash flow for operating leases Operating cash flow for finance leases Financing cash flows for finance leases	\$	222,040 3,630 13,461	\$	216,762 3,556 9,744	
Weighted-average remaining term (years)					
Operating leases		7.0		7.4	
Finance leases		16.0		15.9	
Weighted-average discount rate					
Operating leases		4.05 %		4.00 %	
Finance leases		4.05 %		4.00 %	

(in thousands of dollars)

Commitments related to noncancelable operating and finance leases for each of the next five years and thereafter are as follows:

	C	perating Leases	Finance Leases
2024	\$	207,671	\$ 16,939
2025		190,206	14,041
2026		174,964	8,882
2027		141,599	5,178
2028		114,645	3,552
Thereafter		245,691	98,158
Total minimum future payments		1,074,776	146,750
Less: Amount representing interest		(170,365)	 (56,493)
Present value of minimum future payments		904,411	90,257
Less: Current portion		(207,671)	(16,939)
Long-term lease obligations	\$	696,740	\$ 73,318

We are also a lessor and sublessor of real estate under operating leases. Lease income for the years ended September 30, 2023 and 2022 was \$16,425 and \$15,604, respectively, and is included in other revenue in the consolidated statements of operations. Some of these leases include expenses such as utilities and maintenance costs in rent charges, however, this variable lease income is not considered material. We do not separate lease and nonlease components by class of underlying asset for all asset classes. The underlying real estate assets are included in property and equipment, net in the consolidated balance sheets.

The future undiscounted cash flows to be received from these leases for each of the next five years and thereafter is as follows:

2024	\$ 4,265
2025	3,795
2026	2,787
2027	2,840
2028	2,483
Thereafter	 159,350
	\$ 175,520

15. Construction Projects

The Ragon Institute of Massachusetts General Hospital, Massachusetts Institute of Technology and Harvard University (collectively, the Ragon Institute) is constructing a new research facility at Kendall Square in Cambridge, Massachusetts. This new 318,000 square foot building (including 120 spaces of sub-level parking) is being built to meet both the current and future needs of the Ragon Institute, facilitating the important work that lies ahead in harnessing the power of the human immune systems to prevent and cure disease. It will include three floors of state-of-the-art

(in thousands of dollars)

laboratories supporting 60-open lab modules and 60-support lab modules, a vivarium, a translational research clinic and administrative space (including colloquium and case study seminar rooms). Accumulated costs incurred related to this project were approximately \$265,953 and \$93,530 for 2023 and 2022, respectively, with approximately \$84,368 in outstanding commitments at September 30, 2023. The total cost of the project is expected to be approximately \$412,000 with occupancy scheduled in June of 2024. The General, an affiliate of the Company, serves as the administrative home of Ragon Institute, and therefore the construction costs are carried on the books of the General.

The General is constructing a new clinical building, the Phillip and Susan Ragon Building, that will occupy approximately one million square feet and will contain 482 private medical/surgical and intensive care unit beds, exam and infusion bays associated with a relocated and expanded outpatient oncology service, hybrid and conventional cardiovascular operating rooms, and associated imaging modalities as well as below-grade parking. As of September 30, 2023, accumulated costs incurred related to the new clinical building are approximately \$352,504 with approximately \$736,052 in outstanding construction project contracts. The total cost of the project is expected to be approximately \$3,311,000 with occupancy scheduled for 2027 for Phase 1 and 2030 for Phase 2.

The Brigham and Women's Faulkner Hospital, Inc. is constructing a five-story inpatient addition and a 941 space garage that will replace a garage that is at its end-of-life use. The inpatient addition will include 78 new beds and will expand patient care for observation, imaging and endoscopy services. As of September 30, 2023, accumulated cost incurred related to the construction are approximately \$82,617 with approximately \$160,458 in outstanding construction project contracts. The total cost of the project is expected to be approximately \$294,000 with occupancy scheduled for December 2024 for the garage and June 2025 for the inpatient addition.

16. Pension and Postretirement Healthcare Benefit Plans

Substantially all Mass General Brigham employees are covered under noncontributory defined benefit pension plans and various defined contribution pension plans. In addition, certain affiliates provide subsidized healthcare benefits for retired employees on a self-insured basis, with the benefit obligation being partially funded. These retiree healthcare benefits are administered through a third-party administrator and are accounted for on the accrual basis, which includes an estimate of future payments for claims incurred.

Total (income) expense for Mass General Brigham plans consists of the following:

	Years Ended September 30,					
	2023			2022		
Defined benefit plans	\$	106,708	\$	304,026		
Defined contribution plans		181,814		184,227		
Postretirement healthcare benefit plans		422		(4,038)		
	\$	288,944	\$	484,215		

(in thousands of dollars)

Information regarding benefit obligations, plan assets, funded status, expected cash flows and net periodic benefit cost is as follows:

Benefit Obligations

	Defined Benefit Pension Plans			Postretirement Healthcare Benefit Plans				
		2023 2022		2022	2023		2022	
Change in benefit obligations								
Benefit obligations at beginning of year	\$	7,391,402	\$	9,945,227	\$	202,696	\$	237,224
Service cost		338,035		503,193		2,922		4,250
Interest cost		435,026		322,521		11,295		6,541
Plan amendments loss		7,928		-		-		=
Actuarial gain		(384,256)		(2,970,410)		(5,882)		(47,457)
Benefits paid		(343,062)		(397,884)		(9,065)		(8,731)
Expenses paid		(11,494)		(11,347)		(1,115)		(683)
Employee contributions		97		102		12,192		11,552
Benefit obligations at end of year	\$	7,433,676	\$	7,391,402	\$	213,043	\$	202,696

The estimated actuarial gain in the change in benefit obligation for 2023 and 2022 is due primarily to the change in discount rate, respectively.

The accumulated benefit obligation for all defined benefit pension plans at the end of 2023 and 2022 was \$7,140,057 and \$7,096,333, respectively.

		l Benefit n Plans	Postretirement Healthcare Benefit Plans		
	2023	2022	2023	2022	
Weighted-average assumptions used to determine end of year benefit obligation					
Discount rate	6.22%	5.76%	6.07% - 6.10%	5.71% - 5.72%	
Rate of compensation increase Postretirement healthcare cost trend	3.00% - 5.00%	3.00% - 5.00%	N/A	N/A	
rate for next year	N/A	N/A	6.75%	7.00%	
Rate to which the cost trend rate is to decline	N/A	N/A	5.00%	5.00%	
Year that rate reaches the ultimate trend rate	N/A	N/A	2031	2031	
Plan Assets					
	D - C	D 614	D 1 1		
		Benefit		irement	
		Benefit n Plans 2022		irement Benefit Plans 2022	
Change in plan assets	Pensio	n Plans	Healthcare I	Benefit Plans	
	Pensio	n Plans	Healthcare I	Benefit Plans	
Change in plan assets	Pensio 2023	n Plans 2022	Healthcare I	Benefit Plans 2022	

(in thousands of dollars)

The assets of the defined benefit pension plans are aggregated in a single master trust (Master Trust) and managed as one asset pool. The investment objective for the Master Trust is to achieve the highest reasonable total return after considering (i) plan liabilities, (ii) funding status and projected cash flows, (iii) projected market returns, valuations and correlations for various asset classes and (iv) ability and willingness to incur market risk.

Within the Master Trust, assets are allocated to managers with investment mandates that may range from a single sub-asset class to very broad mandates; with restrictions that range from long-only to unconstrained; and with management structures ranging from separately managed funds to mutual/commingled funds to private partnerships. Less market sensitive managers employ long/short equity and diversified strategies. Investment risks (concentration, correlation, valuation, liquidity, leverage, mandate compliance, etc.) are monitored at the manager level as well as the pool level.

The following table presents the capital allocations and reported exposures by manager mandate within the Master Trust. Some managers, particularly less market sensitive managers, invest capital among multiple asset classes. The Long-Term Policy Benchmark is 70% Morgan Stanley Capital International All Country World Index and 30% Barclays Global Aggregate Bond.

	September 30, 2023				September 30, 2022		
	·		Reported		-	Reported	
		Dollars	Exposures		Dollars	Exposures	
Global equity	\$	1,171,312	12.9 %	\$	1,132,182	13.2 %	
Traditional U.S. equity		1,124,628	12.4 %		929,068	10.8 %	
Traditional foreign developed equity		313,409	3.4 %		310,468	3.6 %	
Traditional emerging markets equity		449,983	5.0 %		560,912	6.5 %	
Private equity		2,313,451	25.4 %		2,158,992	25.2 %	
Real assets		558,524	6.2 %		609,123	7.1 %	
Less Market Sensitive managers		2,783,007	30.7 %		2,564,880	29.9 %	
Fixed income managers		361,006	4.0 %		304,960	3.7 %	
	\$	9,075,320	100.0 %	\$	8,570,585	100.0 %	

The postretirement healthcare benefit plans' assets are invested in commingled funds with the objective of achieving returns to satisfy plan obligations and with a level of volatility commensurate with our overall financial profile.

(in thousands of dollars)

Total plan assets

The following tables summarize plan assets measured at fair value on a recurring basis (using the fair value hierarchy defined in Note 7) as of:

	September 30, 2023 Fair Value Measurements Using					
	Quoted Prices in Active Markets for Identical Items (Level 1)	S Significant Investments Other Valued Observable Using NAV as	 Total			
Defined benefit pension plans Short-term investments	\$ 175,053	\$ - \$ -	\$ 175,053			
Separately managed investments Private partnerships	370,293	155,452 -	525,745			
and commingled funds	545,346	- 8,374,522 155,452 8,374,522	8,374,522 9,075,320			
Postretirement healthcare benefit plans Commingled funds	49,615	- 128,475	178,090			
Total plan assets	\$ 594,961	\$ 155,452 \$ 8,502,997	\$ 9,253,410			
		September 30, 2022	_			
	Quoted Prices in Active Markets for Identical Items (Level 1)	Other Valued Observable Using NAV as	Total			
Defined benefit pension plans			•			
Short-term investments Separately managed investments	\$ 143,631 336,538	\$ - \$ - 144,062 -	\$ 143,631 480,600			
Private partnerships and commingled funds		- 7,946,354	7,946,354			
	480,169	144,062 7,946,354	8,570,585			
Postretirement healthcare benefit plans Commingled funds	42,540	- 108,884	151,424			
-	•	•				

In evaluating the Level at which private partnerships have been classified within the fair value hierarchy, management has assessed factors including but not limited to price transparency, the ability to redeem these investments at net asset value at the measurement date and the existence or absence of certain restrictions at the measurement date. Investments in private partnerships generally have limited redemption options for investors and, subsequent to final closing, may or may not permit subscriptions by new or existing investors. These entities may also have the ability to impose gates, lockups and other restrictions on an investor's ability to readily redeem out of their investment interest in the fund. As of September 30, 2023 and 2022, we have excluded all assets from the fair value hierarchy for which fair value is measured using net asset value per share as a practical expedient.

522,709 \$

144,062

8,055,238

8,722,009

(in thousands of dollars)

Funded Status

The funded status of the plans recognized in the balance sheet and the amounts recognized in net assets without donor restrictions is as follows:

	Defined Benefit Pension Plans			Postretirement Healthcare Benefit Plans				
		2023		2022		2023		2022
End of year								
Fair value of plan assets at measurement date Benefit obligations at measurement date	\$	9,075,320 (7,433,676)	\$	8,570,585 (7,391,402)	\$	178,090 (213,043)	\$	151,424 (202,696)
Funded status	\$	1,641,644	\$	1,179,183	\$	(34,953)	\$	(51,272)
Amounts recognized in the balance sheet consist of								
Noncurrent asset Current liabilities Long-term liabilities	\$	1,663,197 (1,620) (19,933)	\$	1,202,435 (1,705) (21,547)	\$	319 (1,248) (34,024)	\$	408 (1,470) (50,210)
	\$	1,641,644	\$	1,179,183	\$	(34,953)	\$	(51,272)
Amounts not yet recognized in net periodic benefit cost and included in net assets without donor restrictions consist of								
Actuarial net loss (gain) Prior service credit	\$	(615,642) (60,127)	\$	(117,642) (95,953)	\$	(9,901)	\$	7,199 (3,064)
	\$	(675,769)	\$	(213,595)	\$	(9,901)	\$	4,135
Amounts recognized in net assets without donor restrictions consist of								
Current year actuarial loss Amortization of actuarial loss (gain) Current year prior service cost	\$	(498,000) - 7,928	\$	(871,080) (114,122)	\$	(19,070) 1,969	\$	(12,960) (470)
Amortization of prior service credit		27,899	_	27,899		3,064		5,289
	\$	(462,173)	\$	(957,303)	\$	(14,037)	\$	(8,141)

As of September 30, 2023 and 2022, the projected benefit obligation, accumulated benefit obligation and fair value of plan assets for pension plans with an accumulated benefit obligation in excess of plan assets were as follows:

	September 30,				
	2023			2022	
Accumulated benefit obligation in excess of, or below plan assets					
Projected benefit obligation	\$	7,433,676	\$	7,391,402	
Accumulated benefit obligation		7,140,057		7,096,333	
Fair value of plan assets		9,075,320		8,570,585	

(in thousands of dollars)

Expected Cash Flows

Information about the expected cash flows for the defined benefit and postretirement healthcare benefit plans is as follows:

		Defined Benefit Pension Plans	He	retirement althcare Benefit Plans	
Expected employer contributions 2024	\$	98,9	69 \$	4,660	
	~	00,0	Ψ	1,000	Medicare Subsidy
Expected benefit payments (receipts)					
2024		368,7	34	17,906	(15)
2025		400,8		17,943	(13)
2026		426,2		18,138	(11)
2027		449,4		18,391	(9)
2028		477,5	62	18,576	(7)
2029-2032		2,757,1	16	90,319	(21)
Net Periodic Benefit Cost	Defined Benefit Pension Plans			tirement Benefit Plans	
	2023		2022	2023	2022
Service cost	\$ 338	,035 \$	503,193	\$ 2,922	\$ 4,250
Interest cost	435	,026	322,521	11,295	6,541
Expected return on plan assets Amortization of	(638	,454)	(607,911)	(8,762)	(10,010)
Prior service credit	(27	,899)	(27,899)	(3,064)	(5,289)
Actuarial net loss (gain)			114,122	(1,969)	470
Nonservice related pension income	(231	,327)	(199,167)	(2,500)	(8,288)
Net periodic benefit cost	\$ 106	,708 \$	304,026	\$ 422	\$ (4,038)
	F	efined Ber ension Pla	ans	Benef	ent Healthcare fit Plans
	2023		2022	2023	2022
Weighted-average assumptions used to determine net periodic pension and postretirement cost					
Discount rate	5.76 %		3.15 %	5.71% - 5.72%	2.75% - 3.00%
Expected return on plan assets	7.00 %		7.00 %	6.00 %	6.00 %
Rate of compensation increase Healthcare cost trend rate for this year	3.00% - 5 N/A	.00% 3.0	00% - 5.00% N/A	N/A 7.00 %	N/A 6.25 %
Rate to which the cost trend rate is to decline	N/A		N/A	5.00 %	5.00 %
Year that rate reaches the ultimate trend rate			N/A	2031	2027

(in thousands of dollars)

We use a long-term return assumption which is validated annually by obtaining long-term asset return, volatility and correlation projections for relevant asset class indexes; modifying volatility and correlations to reflect the actual historical experience of the active managers; calculating the expected return using benchmark weights and indexes; and comparing the return assumption to the sum of the expected return and the historical outperformance of the actual return versus the benchmark. We regularly monitor the active risk of the Master Trust by a statistical regression of the return series of the actual portfolio to that of the policy benchmark.

17. Professional Liability Insurance

We insure substantially all of our professional and general liability risk on a claims-made basis in cooperation with other healthcare organizations in the Greater Boston area through a captive insurance company, Controlled Risk Insurance Company Ltd. (CRICO). The Company owns 11% of CRICO. The policies cover claims made during their respective terms, but not those occurrences for which claims may be made after expiration of the policy. Management intends to renew its coverage on a claims-made basis and has no reason to believe that it will be prevented from such renewal. During 2022, CRICO announced and paid a dividend to member organizations. As a result, we recorded dividend income of \$58,453 in other nonoperating (expenses) income.

We follow the accounting policy of establishing reserves to cover the ultimate costs of medical malpractice claims, which include costs associated with litigating or settling claims. The liability also includes an estimated tail liability, established to cover all malpractice claims incurred but not reported to the insurance company as of the end of the year. The total malpractice liability of \$576,038 and \$570,862 as of September 30, 2023 and 2022, respectively, is presented as an accrued professional liability in the consolidated balance sheets. These reserves have been recorded on a discounted basis using an interest rate of 6.04% and 5.6% as of September 30, 2023 and 2022, respectively.

We also recognize an insurance receivable from CRICO at the same time that it recognizes the liability, measured on the same basis as the liability, subject to the need for a valuation allowance for uncollectible amounts. The insurance receivable of \$441,834 and \$432,704 as of September 30, 2023 and 2022, respectively, is reported as a component of other assets in the consolidated balance sheets.

Management is not aware of any claims against us or factors affecting CRICO that would cause the expense for professional liability risks to vary materially from the amount provided.

18. Concentration of Credit Risk

Financial instruments that potentially subject us to concentration of credit risk consist of patient accounts receivable, research grants receivable, pledges receivable, premiums receivable, certain investments and interest rate swaps.

Mass General Brigham provider organizations receive a significant portion of payments for services rendered from a limited number of government and commercial third-party payers, including Medicare, Medicaid, Blue Cross and Blue Shield of Massachusetts, Harvard Pilgrim Health Care and Tufts Health Plan. Research funding is provided through many government and private sponsors. MGB Health Plan receives a portion of premium revenue from the Commonwealth.

(in thousands of dollars)

Pledges receivable are due from multiple donors. We assess the credit risk for pledges based on history and the financial wherewithal of donors, most of which are individuals or organizations well known to us.

Investments, which include government and agency securities, stocks and corporate bonds, private partnerships and other investments, are not concentrated in any corporation or industry or with any single counterparty. Alternative investments are less liquid than other investments. The reported values of the alternative investments may differ significantly from the values that would have been used had a ready market for those securities existed. These instruments may contain elements of both credit and market risk. Such risks include, but are not limited to, limited liquidity, absence of oversight, dependence upon key individuals, emphasis on speculative investments and nondisclosure of portfolio composition.

We minimize our credit risk exposure under interest rate swap agreements by utilizing several counterparties and requiring the counterparties to post collateral for our benefit when the fair value of the swap is positive. We minimize our counterparty risk by contracting with nine counterparties, none of which accounts for more than 20% of the aggregate notional amount of the swap contracts.

19. Net Assets

Net assets with donor restrictions are available for the following purposes:

	September 30,				
			2022		
Net assets with donor restrictions					
Charity care	\$	193,671	\$	183,758	
Buildings and equipment		851,037		470,888	
Clinical care, research and academic		2,694,448		2,392,829	
	\$	3,739,156	\$	3,047,475	

Endowment

Our endowment consists of numerous individual funds established for a variety of purposes and includes both endowment funds with donor restrictions and funds designated by boards to function as endowment. We have interpreted UPMIFA as requiring the preservation of the value of the original contribution of the endowment funds with donor restrictions absent explicit donor stipulations to the contrary. As a result of this interpretation, we classify net assets with donor restrictions, the original value of all contributions with donor stipulations to maintain in perpetuity, accumulated gains required to be maintained in perpetuity by explicit donor stipulation or accumulated gains which have been appropriated for expenditure in a manner consistent with the standard of prudence prescribed by UPMIFA. In accordance with UPMIFA, we consider several factors in making a determination to appropriate or accumulate endowment funds with donor restrictions. These factors include: the duration and preservation of the fund; the purposes of the organization and the endowment fund with donor restrictions; general economic conditions; the possible effect of inflation and deflation; the expected total return from income and the appreciation of investments; other resources of the organization; and the investment policies of the organization.

(in thousands of dollars)

Endowment Funds with Deficits

From time to time, the value of assets associated with individual endowment funds with donor restrictions may fall below the value of the initial and subsequent donor contribution amounts. These deficits generally result from unfavorable market fluctuations that occurred after the investment of new contributions with donor restrictions or subsequent endowment additions. When such endowment deficits exist, they are classified as a reduction to net assets with donor restrictions.

The following presents the endowment net asset composition by type of fund as of September 30, 2023 and 2022 and the changes in endowment assets for the years ended September 30, 2023 and 2022:

	Without Donor Restrictions	With Donor Restrictions	Total
Endowment net asset composition by type of fund as of September 30, 2023			
Endowment funds with donor restrictions Endowment funds with board designations	\$ - 1,368,005	\$ 2,441,991 	\$ 2,441,991 1,368,005
Total funds	\$ 1,368,005	\$ 2,441,991	\$ 3,809,996
	Without Donor Restrictions	With Donor Restrictions	Total
Changes in endowment net assets Endowment net assets at September 30, 2022	\$ 1,285,916	\$ 2,167,346	\$ 3,453,262
Investment return Investment loss Net realized and unrealized appreciation	(296) 129,862	(498) 216,938	(794) 346,800
Total investment return	129,566	216,440	346,006
Contributions Appropriation of endowment assets	9,396	151,356	160,752
for expenditure Other changes	(59,336) 2,463	(101,597) 8,446	(160,933) 10,909
Total changes	82,089	274,645	356,734
Endowment net assets at September 30, 2023	\$ 1,368,005	\$ 2,441,991	\$ 3,809,996

(in thousands of dollars)

	Without Donor Restrictions	With Donor Restrictions	Total
Endowment net asset composition by type of fund as of September 30, 2022			
Endowment funds with donor restrictions Endowment funds with board designations	\$ - 1,285,916	\$ 2,167,346 	\$ 2,167,346 1,285,916
Total funds	\$ 1,285,916	\$ 2,167,346	\$ 3,453,262
	Without Donor Restrictions	With Donor Restrictions	Total
Changes in endowment net assets Endowment net assets at September 30, 2021	\$ 1,582,262	\$ 2,543,776	\$ 4,126,038
Investment return Investment income Net realized and unrealized	902	1,484	2,386
appreciation	(262,195)	(428,389)	(690,584)
Total investment return	(261,293)	(426,905)	(688,198)
Contributions Appropriation of endowment assets	7,855	141,343	149,198
for expenditure	(54,754)	(90,550)	(145,304)
Other changes	11,846	(318)	11,528
Total changes	(296,346)	(376,430)	(672,776)
Endowment net assets at September 30, 2022	\$ 1,285,916	\$ 2,167,346	\$ 3,453,262

20. Functional Expenses

Expenses by functional classification are allocated based on management's judgement, the nature of the expense and historical experience. Such classifications and allocations are as follows:

	Healthcare Services	Research and Academic	Insurance	General and Administrative	Year Ended September 30, 2023
Operating expenses					
Employee compensation and benefit expense	\$ 8,296,219	\$ -	\$ 72,326	\$ 1,290,735	\$ 9,659,280
Supplies and other expenses	4,644,283	-	80,980	250,893	4,976,156
Medical claims and related expenses	-	-	1,086,589	-	1,086,589
Direct academic and research expenses	-	2,066,518	-	-	2,066,518
Depreciation and amortization expenses	687,592	-	-	86,971	774,563
Interest expense	104,199			64,566	168,765
Total operating expenses	\$ 13,732,293	\$ 2,066,518	\$ 1,239,895	\$ 1,693,165	\$ 18,731,871

(in thousands of dollars)

Direct academic and research expenses include \$1,228,043 of employee compensation and benefit expense and \$838,475 of supplies and other expenses for the year ended September 30, 2023.

	Healthcare Services		Research and Academic		Insurance		General and Administrative		Year Ended September 30, 2023	
Nonoperating expenses Employee compensation and benefit expense Supplies and other expenses Interest expense Pension related interest costs	\$	- - - 341,062	\$	- - - 49,229	\$	- - - -	\$	78,209 37,363 63,720 56,030	\$	78,209 37,363 63,720 446,321
Total nonoperating expenses	\$	341,062	\$	49,229	\$		\$	235,322	\$	625,613
	Healthcare Services		Research and Academic		Insurance		General and Administrative			
	ı				lr	nsurance	_		-	ear Ended ptember 30, 2022
Operating expenses Employee compensation and benefit expense Supplies and other expenses Medical claims and related expenses Direct academic and research expenses Depreciation and amortization expenses Interest expense	\$				Ir	60,507 66,741 722,212	_		-	ptember 30,

Direct academic and research expenses include \$1,147,460 of employee compensation and benefit expense and \$790,278 of supplies and other expenses for the year ended September 30, 2022.

	Healthcare Services		Research and Academic		Insurance		General and Administrative		Year Ended September 30, 2022	
Nonoperating expenses										
Employee compensation										
and benefit expense	\$	-	\$	-	\$	-	\$	76,262	\$	76,262
Supplies and other expenses		-		-		-		44,607		44,607
Interest expense		-		-		-		63,599		63,599
Pension related interest cost		239,690		37,184				52,188		329,062
Total nonoperating expenses	\$	239,690	\$	37,184	\$		\$	236,656	\$	513,530

21. Contingencies

We are subject to complaints, claims and litigation which arise in the normal course of business. In addition, we are subject to reviews and investigations by various federal and state government agencies to assure compliance with applicable laws, some of which are subject to different interpretations. Governmental review of compliance by healthcare organizations has increased.

(in thousands of dollars)

22. Subsequent Events

We have assessed the impact of subsequent events through December 8, 2023, the date the audited financial statements were issued. During this period, there were no subsequent events that require adjustment to the audited financial statements. On November 2, 2023, the Centers for Medicare & Medicaid Services (CMS) published a final rule to remedy underpayments associated with 340B-acquired pharmaceuticals in 2018-2022. CMS will be making a one-time payment to impacted hospitals in 2024 and has estimated Mass General Brigham's payment to be \$97,500. Other than this contract, there were no other events that require disclosure in the notes to the audited financials.