# Oklahoma State University Medical Authority A Component Unit of the State of Oklahoma

**Independent Auditor's Reports and Financial Statements** 

June 30, 2025 and 2024

# Oklahoma State University Medical Authority Contents June 30, 2025 and 2024

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# **Independent Auditor's Report**

Board of Trustees Oklahoma State University Medical Authority Tulsa, Oklahoma

# **Report on the Audit of the Financial Statements**

## **Opinion**

We have audited the financial statements of Oklahoma State University Medical Authority (Authority), a component unit of the State of Oklahoma, as of and for the years ended June 30, 2025 and 2024, and the related notes to the financial statements, which collectively comprise the Authority's basic financial statements, as listed in the table of contents.

In our opinion, the accompanying financial statements referred to above present fairly, in all material respects, the financial position of the Authority as of June 30, 2025 and 2024 and the changes in its financial position 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 audits in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States (*Government Auditing Standards*). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Authority 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 Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Authority's ability to continue as a going concern for 12 months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

## Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's 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 GAAS and *Government Auditing Standards* 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 may 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 financial statements.

In performing an audit in accordance with GAAS and Government Auditing Standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the 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 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 Authority's 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
  financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Authority's 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.

# Required Supplementary Information

Accounting principles generally accepted in the United States of America require that management's discussion and analysis, as listed in the table of contents, be presented to supplement the basic financial statements. Such information is the responsibility of management and, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with GAAS, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

#### Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated October 24, 2025 on our consideration of the Authority's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Authority's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Authority's internal control over financial reporting and compliance.

Forvis Mazars, LLP

Tulsa, Oklahoma October 24, 2025 Oklahoma State University Medical Authority A Component Unit of the State of Oklahoma Management's Discussion and Analysis Years Ended June 30, 2025 and 2024

#### Introduction

This management's discussion and analysis of the financial performance of Oklahoma State University Medical Authority (Authority) provides an overview of the Authority's financial activities for the years ended June 30, 2025 and 2024. It should be read in conjunction with the accompanying financial statements of the Authority. The Authority is considered a nonmajor component unit of the State of Oklahoma.

## Using This Annual Report

The Authority's financial statements consist of three statements—a balance sheet; a statement of revenues, expenses, and changes in net position; and a statement of cash flows. These statements provide information about the activities of the Authority, including resources held by the Authority but restricted for specific purposes by creditors, contributors, grantors, or enabling legislation. The Authority is accounted for as a business-type activity and presents its financial statements using the economic resources measurement focus and the accrual basis of accounting.

## The Balance Sheet and Statement of Revenues, Expenses, and Changes in Net Position

One of the most important questions asked about any authority's finances is, "Is the authority as a whole better or worse off as a result of the year's activities?" The balance sheet and the statement of revenues, expenses, and changes in net position report information about the Authority's resources and its activities in a way that helps answer this question. These statements include all restricted and unrestricted assets, all liabilities, and all deferred inflows of resources using the accrual basis of accounting. Using the accrual basis of accounting means that all of the current year's revenues and expenses are taken into account regardless of when cash is received or paid.

These two statements report the Authority's net position and changes in it. The Authority's total net position—the difference between assets, liabilities, and deferred inflows of resources—is one measure of the Authority's financial health or financial position. Over time, increases or decreases in the Authority's net position are an indicator of whether its financial health is improving or deteriorating. Other nonfinancial factors, such as changes in the Authority's patient base, changes in legislation and regulations, measures of the quantity and quality of services provided to its patients, and local economic factors, should also be considered to assess the overall financial health of the Authority.

# The Statement of Cash Flows

The statement of cash flows reports cash receipts, cash payments, and net changes in cash and cash equivalents resulting from four defined types of activities. It provides answers to such questions as where did cash come from, what was cash used for, and what was the change in cash and cash equivalents during the reporting period.

#### The Authority's Net Position

The Authority's net position is the difference between its assets, liabilities, and deferred inflows of resources reported in the balance sheet. The Authority's net position increased by \$51,389,632, or 26%, in 2025 over 2024 and by \$23,742,319, or 14%, in 2024 over 2023, as shown in Table 1.

Table 1: Assets, Liabilities, Deferred Inflows of Resources, and Net Position

	2025	2024	2023
Assets			
Cash and cash equivalents	\$ 128,265,886	\$ 120,603,245	\$ 12,851,231
Short-term investments	-	-	96,488,309
Patient accounts receivable, net	18,019,681	21,656,578	16,513,477
Other receivables	2,548,246	2,028,841	1,672,672
Other current assets	9,048,287	7,273,522	6,226,684
Capital assets, net	128,445,443	82,633,511	63,791,731
Lease assets, net	1,547,172	1,700,578	892,859
Subscription assets, net	11,564,717	5,298,742	1,786,402
Lease receivable	1,111,907	1,889,620	2,634,491
Other assets	340,176	360,942	304,765
Total Assets	\$ 300,891,515	\$ 243,445,579	\$ 203,162,621
Liabilities			
Long-term lease liabilities (including current			
portion)	\$ 1,621,056	\$ 1,750,716	1,149,363
Long-term subscription liabilities (including			
current portion)	4,238,046	4,803,424	1,574,534
Other current and noncurrent liabilities	44,689,079	37,160,024	23,704,757
Total Liabilities	50,548,181	43,714,164	26,428,654
Deferred Inflows of Resources	1,111,907	1,889,620	2,634,491
Net Position			
Net investment in capital assets	134,297,732	79,819,068	63,351,789
Restricted – specific operating activities	19,937,854	40,871,347	30,400,168
Unrestricted	94,995,841	77,151,380	80,347,519
Total Net Position	249,231,427	197,841,795	174,099,476
Total Liebilities Defermed Inflores of Deservers			
Total Liabilities, Deferred Inflows of Resources, and Net Position	\$ 300,891,515	\$ 243,445,579	\$ 203,162,621

Significant changes in the Authority's assets in 2025 are the increase in cash and cash equivalents, the decrease in patient accounts receivable, and an increase in capital and subscription assets, net. Cash and cash equivalents increased by \$7,662,641 in 2025 due to increased patient activity and improved collections on patient accounts. Likewise, the decrease in patient accounts receivable is primarily the result of improved collection efforts compared to 2024. Days net revenue in accounts receivable was 32 days at June 30, 2025 compared to 43 days at June 30, 2024. Capital assets increased related to ongoing construction projects during 2025, while subscription assets increase related to a new system implementation during 2025.

Significant changes in the Authority's assets in 2024 are the increase in cash and cash equivalents and corresponding decrease in short-term investments, the increase in patient accounts receivable, and an increase in capital assets. Cash and cash equivalents increased by \$107,752,014 in 2024 with a corresponding decrease

Oklahoma State University Medical Authority A Component Unit of the State of Oklahoma Management's Discussion and Analysis Years Ended June 30, 2025 and 2024

in short-term investments of \$96,488,309 due to the Authority moving funds out of U.S. Treasury obligations and money market mutual funds and into an Insured Cash Sweep account. The increase in patient accounts receivable is primarily the result of improved volumes and revenue as compared to 2023. Days net revenue in accounts receivable was 44 days at June 30, 2024 compared to 34 days at June 30, 2023. Capital assets increased related to ongoing construction projects in progress as of June 30, 2024.

The significant change in the Authority's liabilities in 2025 is the increase in other liabilities. The increase in other liabilities is primarily due to increased accrued payroll and expenses, subscription liabilities, and uncertainty related to new funding from the State of Oklahoma's Supplemental Hospital Offset Payment Program (SHOPP) (see Note 1).

The significant change in the Authority's liabilities in 2024 is the increase in subscription liabilities and the increase in other liabilities. The increase in subscription liabilities relates to new contracts entered during 2024 for the use of software. The increase in other liabilities is primarily due to amounts due to third-party payors, increased accounts payable related to ongoing construction projects, and uncertainty related to new funding from the State of Oklahoma's Supplemental Hospital Offset Payment Program (SHOPP) (see Note 1).

## Operating Results and Changes in the Authority's Net Position

In 2025, the Authority's net position increased by \$51,389,632, or 26%, as shown in Table 2. This increase is made up of several different components and represents an increase of 116% compared with the increase in net position for 2024 of \$23,742,319. The Authority's change in net position increased from \$17,968,664 in 2023 to \$23,742,319 in 2024, an increase of 32%.

Table 2: Operating Results and Changes in Net Position

	2025	2024	2023
Operating Revenues			
Net patient service revenue	\$ 208,268,747	\$ 182,580,447	\$ 175,272,943
Other operating revenues	11,200,401	8,941,669	5,848,613
Total Operating Revenues	219,469,148	191,522,116	181,121,556
Operating Expenses			
Salaries, wages, and employee benefits	118,225,587	105,375,253	105,913,744
Purchased services and professional fees	42,617,117	36,633,050	33,182,930
Supplies and other	54,250,786	50,394,095	45,832,621
Depreciation and amortization	12,002,785	10,168,701	8,007,655
Total Operating Expenses	227,096,275	202,571,099	192,936,950
Operating Loss	(7,627,127)	(11,048,983)	(11,815,394)
Nonoperating Revenues (Expenses)			
State contract and grant revenue	136,788,235	84,510,248	79,059,559
Contribution expense	(81,386,680)	(55,499,144)	(52,165,047)
Loss on disposal of capital assets	(1,438,649)	-	-
Investment income	5,403,935	5,944,583	3,073,812
Interest expense	(350,082)	(164,385)	(184,266)
Total Nonoperating Revenues (Expenses)	59,016,759	34,791,302	29,784,058
Excess of Revenues over Expenses and			
Increase in Net Position	51,389,632	23,742,319	17,968,664
Net Position, Beginning of Year	197,841,795	174,099,476	156,130,812
Net Position, End of Year	\$ 249,231,427	\$ 197,841,795	\$ 174,099,476

## **Operating Loss**

The first component of the overall change in the Authority's net position is its operating loss. The operating loss is the difference between total operating revenue (patient-driven and other) and total operating expenses. The Authority reported an operating loss in 2025 primarily due to increased operating expenses resulting from increased salaries, wages, and employee benefits and supply expenses associated with the inflationary economic pressures and servicing patient volumes, as well as increased depreciation and amortization expense from capital, lease, and subscription assets compared to 2024.

The operating loss for 2025 of \$7,627,127 was an improvement compared to the operating loss of \$11,048,983 recognized in 2024. The operating results for 2024 were comparable to the operating loss of \$11,815,394 in 2023.

The components of the 2025 operating loss were an increase of operating revenues of \$27,947,032, or 15%, and an increase in operating expenses of \$24,525,176, or 12%. The components of the 2024 operating loss were an

Oklahoma State University Medical Authority A Component Unit of the State of Oklahoma Management's Discussion and Analysis Years Ended June 30, 2025 and 2024

increase of operating revenues of \$10,400,560, or 6%, and an increase in operating expenses of \$9,634,149, or 5%.

Net patient service revenue increased in 2025 from 2024 primarily due to higher patient volumes and improved collection efforts compared to 2024. Net patient service revenue increased in 2024 from 2023 primarily due to higher patient volumes compared to 2023.

The Authority incurred additional costs to maintain certain staffing levels in order to sustain quality care, ensure proper staffing, and sufficiently respond to the pandemic-related outbreaks in the community and maintain healthcare delivery capacity.

Operating expenses changed in 2025 due primarily to:

- An increase in salaries, wages, and employee benefits of \$12,850,334, or 12%, compared to 2024
- An increase in purchased services and professional fees of \$5,984,067, or 16%, compared to 2024
- An increase in supplies and other expense of \$3,856,691, or 8%, compared to 2024
- An increase in depreciation and amortization expense of \$1,834,084, or 18%, compared to 2024

# Nonoperating Revenues and Expenses

Nonoperating revenues and expenses consist primarily of state contract and grant revenue received by the Authority, noncapital grants and gifts, government grants, contribution expense associated with state contract and grant revenue, and interest income and expense. Nonoperating revenues and expenses increased in 2025 by \$24,225,457, or 70%, and increased in 2024 by \$5,007,244, or 17%. In 2025, state contract and grant revenue increased by \$52,277,987, or 62%, and contribution expense increased by \$25,887,536, or 47%. These changes were primarily related to changes in state funding and appropriations.

In 2024, state contract and grant revenue increased by \$5,450,689, or 7%, and contribution expense increased by \$3,334,097, or 6%. These changes were primarily related to changes in state funding and appropriations. Additionally, in 2024, investment income increased \$2,870,771, or 93%, primarily due to the Authority allocating certain funds into U.S. Treasury obligations and money market mutual funds for a portion of the year and increased returns from investment markets.

#### The Authority's Cash Flows

Changes in the Authority's cash flows are consistent with changes in operating performance and nonoperating revenues and expenses for 2025 and 2024, discussed earlier.

# Capital Assets

At June 30, 2025 and 2024, the Authority had \$128,445,443 and \$82,633,511, respectively, invested in capital assets, net of accumulated depreciation, as detailed in Note 6 to the financial statements. In 2025 and 2024, the Authority purchased new capital assets costing approximately \$56,218,000 and \$27,646,000, respectively.

## Contacting the Authority's Financial Management

This financial report is designed to provide the Authority's patients, suppliers, taxpayers, and creditors with a general overview of the Authority's finances and to show the Authority's accountability for the money it receives. Questions about this report and requests for additional financial information should be directed to the Authority's Business Administration by telephoning 918.599.5900.

# Oklahoma State University Medical Authority A Component Unit of the State of Oklahoma Balance Sheets June 30, 2025 and 2024

	2025	2024
ASSETS		
Current Assets		
Cash and cash equivalents	\$ 128,265,886	\$ 120,603,245
Patient accounts receivable, net of allowance;		
2025 - \$12,521,000, 2024 - \$12,157,000	18,019,681	21,656,578
Other receivables	2,548,246	2,028,841
Lease receivable	840,672	782,981
Supplies	5,477,531	4,697,543
Prepaid expenses and other	3,570,756	2,575,979
Total Current Assets	158,722,772	152,345,167
Capital Assets, Net	128,445,443	82,633,511
Lease Assets, Net	1,547,172	1,700,578
Subscription Assets, Net	11,564,717	5,298,742
Other Assets		
Lease receivable	271,235	1,106,639
Deposits	340,176	360,942
Total Assets	\$ 300,891,515	\$ 243,445,579

# Oklahoma State University Medical Authority A Component Unit of the State of Oklahoma Balance Sheets June 30, 2025 and 2024

(Continued)

	2025		2024
LIABILITIES, DEFERRED INFLOWS OF RESOURCES, AND			
NET POSITION Current Liabilities			
Current portion of lease liabilities	\$ 494	,289 \$	507,242
Current portion of lease liabilities  Current portion of subscription liabilities	τ 494, 1,281.		955,623
Accounts payable	32,052		24,769,535
Accounts payable Accrued expenses	11,565	•	11,137,435
Accrued expenses  Accrued interest payable	11,505	,304	71,370
Estimated amounts due to third-party payors	1,070	003	1,181,684
Estimated amounts due to third-party payors	1,070	,902	1,101,004
Total Current Liabilities	46,464	,463	38,622,889
Long-Term Lease Liabilities	1,126	,767	1,243,474
Long-Term Subscription Liabilities	2,956	,951	3,847,801
Total Liabilities	50,548	,181	43,714,164
Deferred Inflows of Resources			
Leases	1,111	,907	1,889,620
Net Position			
Net investment in capital assets	134,297	.732	79,819,068
Restricted – specific capital and operating activities	19,937		40,871,347
Unrestricted	94,995		77,151,380
Total Net Position	249,231	,427	197,841,795
Total Liabilities, Deferred Inflows of Resources, and Net Position	\$ 300,891	<u>,515</u> \$	243,445,579

# Oklahoma State University Medical Authority A Component Unit of the State of Oklahoma Statements of Revenues, Expenses, and Changes in Net Position Years Ended June 30, 2025 and 2024

	2025	2024
Operating Revenues  Net patient service revenue, net of provision for uncollectible		
accounts; 2025 – \$20,440,096, 2024 – \$10,549,824	\$ 208,268,747	\$ 182,580,447
Other	11,200,401	8,941,669
Total Operating Revenues	219,469,148	191,522,116
Operating Expenses		
Salaries and wages	103,673,625	92,500,006
Employee benefits	14,551,962	12,875,247
Purchased services and professional fees	42,617,117	36,633,050
Supplies and other	54,250,786	50,394,095
Depreciation and amortization	12,002,785	10,168,701
Total Operating Expenses	227,096,275	202,571,099
Operating Loss	(7,627,127)	(11,048,983)
Nonoperating Revenues (Expenses)		
State contract and grant revenue	136,788,235	84,510,248
Contribution expense	(81,386,680)	(55,499,144)
Loss on disposal of capital assets	(1,438,649)	-
Investment income	5,403,935	5,944,583
Interest expense	(350,082)	(164,385)
Total Nonoperating Revenues (Expenses)	59,016,759	34,791,302
Excess of Revenues Over Expenses and Increase in Net Position	51,389,632	23,742,319
Net Position, Beginning of Year	197,841,795	174,099,476
Net Position, End of Year	\$ 249,231,427	\$ 197,841,795

# Oklahoma State University Medical Authority A Component Unit of the State of Oklahoma Statements of Cash Flows Years Ended June 30, 2025 and 2024

	2025	2024
Operating Activities Receipts from and on behalf of patients Payments to suppliers and contractors Payments to and on behalf of employees Other receipts and payments, net	\$ 212,632,282 (90,807,618) (118,661,488) 9,903,283	\$ 182,421,535 (84,392,779) (103,571,375) 5,223,155
Net Cash Provided by (Used in) Operating Activities	13,066,459	(319,464)
Noncapital Financing Activities State contract and grant revenue Contribution expense	116,850,381 (81,386,680)	43,638,901 (55,499,144)
Net Cash Provided by (Used in) Noncapital Financing Activities	35,463,701	(11,860,243)
Capital and Related Financing Activities  Principal paid on lease liabilities Interest paid on lease liabilities Principal paid on subscription liabilities Interest paid on subscription liabilities Interest paid on subscription liabilities Principal payments received on lease receivable Purchase of capital assets Purchase of subscription asset Capital grants and gifts  Net Cash Provided by (Used in) Capital and Related Financing Activities	(568,581) (87,197) (1,224,566) (334,255) 777,713 (56,767,538) (8,004,884) 19,937,854	(558,337) (91,854) (1,296,070) (7,029) 744,871 (24,791,420) - 40,871,347
Investing Activities Purchases of investments Proceeds from sale of investments Investment income	5,403,935	(54,500,000) 153,615,630 5,944,583
Net Cash Provided by Investing Activities	5,403,935	105,060,213
Increase in Cash and Cash Equivalents	7,662,641	107,752,014
Cash and Cash Equivalents, Beginning of Year	120,603,245	12,851,231
Cash and Cash Equivalents, End of Year	\$ 128,265,886	\$ 120,603,245

# Oklahoma State University Medical Authority A Component Unit of the State of Oklahoma Statements of Cash Flows Years Ended June 30, 2025 and 2024

(Continued)

	2025	2024
Reconciliation of Operating Loss to Net Cash Provided by		
(Used in) Operating Activities		
Operating loss	\$ (7,627,127)	\$ (11,048,983)
Depreciation and amortization	12,002,785	10,168,701
Net unrealized gains on investments	-	(2,627,321)
Provision for uncollectible accounts	20,440,096	10,549,824
Changes in operating assets and liabilities		
Patient accounts receivable	(16,803,199)	(15,692,925)
Other accounts receivable	(519,405)	(356, 169)
Supplies and prepaid expenses	(1,799,262)	(1,099,049)
Estimated amounts due to/from third-party payors	(110,782)	1,187,565
Deferred revenue	837,420	-
Deferred inflows from leases	(777,713)	(744,871)
Accounts payable and accrued expenses	 7,423,646	 9,343,764
Net Cash Provided by (Used in) Operating Activities	\$ 13,066,459	\$ (319,464)
Supplemental Cash Flows Information		
Capital assets in accounts payable	\$ 2,709,764	\$ 3,259,623
Lease obligation incurred for lease assets	\$ 438,921	\$ 1,159,690
Lease liability reductions for lease modifications	\$ -	\$ 441,952
Subscription obligation incurred for IT assets	\$ 659,188	\$ 4,524,960

# Note 1. Nature of Operations and Summary of Significant Accounting Policies

## Nature of Operations and Reporting Entity

## Oklahoma State University Medical Authority

The Oklahoma State University Medical Authority (Authority) is a state agency created by an act of the Oklahoma legislature in May 2006. The Authority is empowered to engage in activities to: 1) ensure a dependable source of funding for the graduate medical program associated with the Oklahoma State University Center for Health Sciences (OSU Center for Health Sciences); 2) provide for stable teaching and training facilities for students enrolled at the OSU Center for Health Sciences; 3) upon a Declaration of Necessity, serve as training and teaching facilities for students at the OSU Center for Health Sciences; 4) serve as a site for conducting medical and biomedical research by faculty members of the OSU Center for Health Sciences; and 5) provide care for the patients of OSU Center for Health Sciences' physician trainers. The Authority is a nonmajor component unit of the State of Oklahoma.

#### Oklahoma State University Medical Center Trust

In fiscal year 2009, the leadership of the executive and legislative branches of the State of Oklahoma (State); Ardent Medical Services, Inc.; Oklahoma State University (University); St. John Health System; and members of the Tulsa philanthropic community undertook an effort to pass the ownership of the Oklahoma State University Medical Center (Medical Center) to a public entity. This effort culminated in the creation of a municipal public trust, the Oklahoma State University Medical Center Trust (Trust), and the purchase of the teaching hospital by the Trust from Ardent Medical Services, Inc.

The Trust was formed in January 2009 to acquire, own, and operate the Medical Center with the general purposes of promoting and supporting the teaching and training of physicians in Tulsa and the delivery of healthcare services to medically underserved patients.

OSUMC Professional Services, LLC (OPS) employs physicians and other healthcare providers. The Trust is the sole corporate member of OPS, and OPS is included as a blended component unit of the Trust.

The Medical Center primarily earns revenues by providing inpatient, outpatient, and emergency care services to patients in the Tulsa, Oklahoma, area.

The Authority entered into an interlocal agreement with the Trust to provide funding in accordance with the enabling legislation of the Authority. The Authority entered into two related interagency agreements with the Oklahoma Health Care Authority, the State's Medicaid agency, and subsequently the Trust to provide certain state matching funds allowing the Medical Center to receive payments at the Upper Payment Limit (UPL), as defined in the State's Medicaid plan.

The Trust is the sole corporate member of OSU Medicine Ventures, LLC, which is considered a blended component unit of the Trust.

The Trust is the sole corporate member of Health Partners of Oklahoma, LLC (HPOK), which is considered a blended component unit of the Trust.

#### Oklahoma State University Medical Trust

In October 2013, the Trust entered into a Tripartite Agreement and Plan of Merger (Merger Agreement) with the Authority and the Oklahoma State University Medical Trust (OSUMT).

Under the terms of the Merger Agreement, effective December 6, 2013, the Trust agreed to the following:

- Transfer and convey substantially all assets and liabilities of the Trust to the Authority
- Amend the Trust's Declaration of Trust to designate the State as its sole beneficiary and authorize the merger of the Trust with OSUMT
- Merge OSUMT into the Trust and designate OSUMT as the surviving entity
- Enter into a lease agreement for the Medical Center's real property between the Authority and OSUMT
- Merge the operations of the Trust with OSUMT

Through December 6, 2013, operating the Medical Center was the primary operation of the Trust.

OSUMT is deemed to be a component unit of the Authority due to the common governance and the Authority's ability to impose its will on OSUMT. The Authority and OSUMT can be contacted by telephoning 918.599.5900.

# Basis of Accounting and Presentation

The accompanying financial statements of the Authority have been prepared on the accrual basis of accounting using the economic resources measurement focus. Revenues, expenses, gains, losses, assets, and liabilities and deferred inflows of resources from exchange and exchange-like transactions are recognized when the exchange transaction takes place, while those from government-mandated nonexchange transactions (principally, federal and state grants) are recognized when all applicable eligibility requirements are met. Operating revenues and expenses include exchange transactions and program-specific, government-mandated or voluntary nonexchange transactions. Government-mandated or voluntary nonexchange transactions that are not program-specific, investment income, and interest on capital assets-related debt are included in nonoperating revenues and expenses. The Authority first applies restricted net position when an expense or outlay is incurred for purposes for which both restricted and unrestricted net position are available.

## 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, liabilities, and deferred inflows of resources 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.

#### Cash Equivalents

The Authority considers all liquid investments with original maturities of three months or less to be cash equivalents. At June 30, 2025, cash equivalents consisted primarily of an insured cash sweep account.

#### Patient Accounts Receivable

The Authority reports patient accounts receivable for services rendered at net realizable amounts from third-party payors, patients, and others. The Authority provides an allowance for uncollectible accounts based upon a review of outstanding receivables, historical collection information, and existing economic conditions.

## **Supplies**

Supply inventories consist of medical supplies and pharmaceuticals and are stated at the lower of cost, determined using the first-in, first-out method, or market.

#### Investments and Investment Income

Investments in U.S. Treasury obligations with a remaining maturity of one year or less at time of acquisition are carried at amortized cost. All other investments are carried at fair value. Fair value is determined using quoted market prices.

Investment income includes dividend and interest income, realized gains and losses on investments carried at other than fair value, and the net change for the year in the fair value of investments carried at fair value.

# Capital Assets

When the Trust acquired the Medical Center on May 1, 2009, the land, building, and equipment acquired were recorded at \$100. Capital assets subsequently acquired are recorded at cost at the date of acquisition or fair value at the date of donation if acquired by gift. Depreciation is computed using the straight-line method over the estimated useful life of each asset. Assets under capital lease obligations and leasehold improvements are depreciated over the shorter of the lease term or their respective estimated useful lives.

The following estimated useful lives are being used by the Authority:

Land improvements 4–10 years
Buildings and leasehold improvements 4–40 years
Equipment 4–10 years

#### Lease Assets

Lease assets are initially recorded at the initial measurement of the lease liability, plus lease payments made at or before the commencement of the lease term, less any lease incentives received from the lessor at or before the commencement of the lease, plus initial direct costs that are ancillary to place the asset into service. Lease assets are amortized on a straight-line basis over the shorter of the lease term or the useful life of the underlying asset.

## Subscription Assets

Subscription assets are initially recorded at the initial measurement of the subscription liability, plus subscription payments made at or before the commencement of the subscription-based information technology arrangement (SBITA) term, less any SBITA vendor incentives received from the SBITA vendor at or before the commencement of the SBITA term, plus capitalizable initial implementation costs. Subscription assets are amortized on a straight-line basis over the shorter of the SBITA term or the useful life of the underlying IT asset.

#### Capital, Lease, and Subscription Asset Impairment

The Authority evaluates capital, lease, and subscription assets for impairment whenever events or circumstances indicate a significant, unexpected decline in the service utility of a capital or lease asset has occurred. If a capital, lease, or subscription asset is tested for impairment and the magnitude of the decline in service utility is significant and unexpected, the capital, lease, or subscription asset historical cost and related accumulated depreciation or amortization are decreased proportionately such that the net decrease equals the impairment loss. No material asset impairment was recognized during the years ended June 30, 2025 and 2024.

#### Compensated Absences

Authority policies permit most employees to accumulate paid time off benefits that may be realized as paid time off or, in limited circumstances, as a cash payment. A liability is accrued for compensated absences as the benefits are earned if the leave is more likely than not to be used for time off or settled in cash. Compensated absence liabilities are computed using the regular pay and termination pay rates, as applicable, in effect at the

balance sheet date plus an additional amount for compensation-related payments, such as Social Security and Medicare taxes, computed using rates in effect at that date.

## Risk Management

The Authority is exposed to various risks of loss from torts; theft of, damage to, and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; medical malpractice; and employee health, dental, and accident benefits. Commercial insurance coverage is purchased for claims arising from such matters. Settled claims have not exceeded this commercial coverage in any of the three preceding years.

#### Deferred Inflows of Resources

The Authority reports an acquisition of net assets that is applicable to a future reporting period as deferred inflows of resources in a separate section of its balance sheets.

#### **Net Position**

Net position of the Authority is classified in three components on its balance sheets:

- Net investment in capital assets consists of capital, lease, and subscription assets net of accumulated depreciation and amortization and reduced by the outstanding balances of borrowings used to finance the purchase, use, or construction of those assets.
- Restricted expendable net position is made up of noncapital assets that must be used for a particular purpose, as specified by creditors, grantors, or donors external to the Authority.
- Unrestricted net position is the remaining net position that does not meet the definition of net investment in capital assets or restricted net position.

#### Net Patient Service Revenue

The Authority has agreements with third-party payors that provide for payments to the Authority at amounts different from its established rates. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered and includes estimated retroactive revenue adjustments and a provision for uncollectible accounts. Retroactive adjustments are considered in the recognition of revenue on an estimated basis in the period the related services are rendered, and such estimated amounts are revised in future periods as adjustments become known.

# **Charity Care**

The Authority provides care without charge or at amounts less than its established rates to patients meeting certain criteria under its charity care policy. Because the Authority does not pursue collection of amounts determined to qualify as charity care, these amounts are not reported as net patient service revenue.

# State Contract and Grant Revenue and Matching Funds

The Authority receives state contract revenue for the support of the teaching mission at the Medical Center, funding for the OSU Center for Health Sciences, and various other health-related programs. In an effort to multiply the appropriated contract dollars, the Authority may send funds to the Oklahoma Health Care Authority or University Hospitals Authority to be matched, with the majority of the funds being paid to OSUMT and a portion being paid to the Authority. Below is a recap of the state contract and grant revenue and the related contribution expenses for the years ended June 30:

	2025	2024
State contract and grant revenue	\$ 136,788,235	\$ 84,510,248
Payments to OSU Center for Health Sciences Dean's GME Program and other Payment to Oklahoma Health Care Authority Other	\$ 54,762,126 6,725,692 19,898,862	\$ 40,762,126 6,061,229 8,675,789
	\$ 81,386,680	\$ 55,499,144

Additionally, certain of the state contract and grant revenue funds above are being used by the Authority to construct a medical facility for the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS). During the years ended June 30, 2025 and 2024, \$25,598,952 and \$4,515,633 were expended related to this project and are recorded as construction in progress on the accompanying balance sheets. The Authority has contracted for up to approximately \$82,950,000 for the construction of this facility. ODMHSAS will lease the medical facility from the Authority upon completion of the project.

Laws and regulations governing the programs that support residency programs with federal matching funds are complex and subject to interpretation and change. As a result, it is reasonably possible that revenue received under these programs will change materially in the near term.

As discussed previously in Note 1, in relation to the Medical Center being acquired by the Trust effective May 1, 2009 from Ardent Medical Services, Inc., the Trust (now OSUMT) entered into an interlocal agreement with the Authority. The Authority has appropriated approximately \$10,934,000 and \$11,599,000 to OSUMT in accordance with the interlocal agreement for the years ended June 30, 2025 and 2024, respectively.

During the years ended June 30, 2025 and 2024, the Authority received \$13,300,000 in funding from the State to directly support initiatives contained in the strategic plans for OSUMT and the OSU Center for Health Sciences. During the years ended June 30, 2025 and 2024, the Authority paid approximately \$11,805,000 to OSUMT and approximately \$1,495,000 to the OSU Center for Health Sciences under the terms of this appropriation. These transactions are recorded as state contract and grant revenue, contribution expense, and support to OSUMT in the accompanying statements of revenues, expenses, and changes in net position and combining information presented in Note 18.

The Authority has contracted with the Office of Management and Enterprise Services (OMES) division of Agency Business Services to act as its fiscal agent for the purposes of providing fiscal, purchasing, and accounting services.

#### Income Taxes

As a state agency created by an act of the State's legislature, the Authority is generally exempt from federal and state income taxes under Section 115 of the Internal Revenue Code and a similar provision of state law.

# Supplemental Hospital Offset Payment Program

On January 17, 2012, the Centers for Medicare & Medicaid Services approved the State of Oklahoma's Supplemental Hospital Offset Payment Program (SHOPP). The SHOPP is designed to assess Oklahoma hospitals a supplemental hospital offset fee that will be placed in pools after receiving federal matching funds. The total fees and matching funds will then be allocated to hospitals as directed by legislation.

Activity under SHOPP is summarized below for the years ended June 30:

	2025	2024
SHOPP funds received SHOPP assessment fees recorded and paid	\$ 31,695,932 (5,795,782)	\$ 21,806,294 (5,128,827)
Net SHOPP benefit	\$ 25,900,150	\$ 16,677,467

Effective April 1, 2024, the Oklahoma Health Care Authority implemented Sooner Select, a Medicaid Managed Care program, covering the majority of Medicaid-eligible individuals. A component of the implementation of Sooner Select was the segregation of historical SHOPP funding into two separate categories—Directed Payments associated with Sooner Select enrollees and traditional SHOPP payments associated with enrollees not included in the Medicaid Managed Care program. Due to the uncertainties surrounding the new program and any potential true-up in future years, the Authority has reserved a portion of the benefit received from April 1 to June 30, 2025, which is included as deferred revenue on the accompanying balance sheets for the years ended June 30, 2025 and 2024 of approximately \$4,600,000 and \$3,800,000, respectively. SHOPP revenue is recorded as part of net patient service revenue, and SHOPP assessment fees are recorded as part of other expenses on the accompanying statements of revenues, expenses, and changes in net position.

The annual amounts to be received and paid by the Authority over the remaining term of the SHOPP are subject to several factors, including the Federal Medical Assistance Percentages (FMAP) and state funding.

#### Revisions

Certain immaterial revisions have been made to the 2024 financial statements to:

- Reflect various corrections in other operating revenue and expense categories.
- Correct deferred revenue in Note 10 previously shown with amounts payable to employees
- Increase capital assets related to capital purchases by the Authority of \$4,515,633 that were previously shown as contribution expense.

These revisions, and their corresponding impacts on the statement of cash flows, did not have a significant impact on the financial statement line items impacted, nor the related disclosures in Notes 6 and 18.

#### Note 2. Net Patient Service Revenue

The Authority has agreements with third-party payors that provide for payments to the Authority at amounts different from its established rates. These payment arrangements include:

Medicare. Inpatient acute care services and substantially all outpatient services rendered to Medicare program beneficiaries are paid at prospectively determined rates. These rates vary according to a patient classification system that is based on clinical, diagnostic, and other factors. Defined medical education costs are paid based on a cost reimbursement methodology. The Authority is reimbursed for medical education, eligible Medicare bad debts, and disproportionate share at tentative rates with final settlement determined after submission of annual cost reports by the Authority and audits thereof by the Medicare administrative contractor.

Medicaid. Inpatient services provided to the State's Medicaid program beneficiaries are reimbursed on a prospective per discharge method with no retroactive adjustments. Outpatient services are reimbursed on a prospective fee schedule basis with no retroactive adjustments. These payment rates vary according to a patient classification system that is based on clinical, diagnostic, and other factors.

Approximately 31% and 27% of net patient service revenue is from participation in the Medicare program for the years ended June 30, 2025 and 2024, respectively. Approximately 27% and 36% of net patient service revenue is from participation in the state-sponsored Medicaid program for the years ended June 30, 2025 and 2024, respectively.

Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation and change. Claims filed with both the Medicare and Medicaid programs are subject to audit. As a result, it is reasonably possible that recorded estimates will change materially in the near term.

The Authority's 2025 and 2024 net patient service revenue increased approximately \$2,133,000 and \$338,000, respectively, due to removal of previously estimated amounts that are no longer necessary as a result of administrative contractor audits or final settlements.

The Authority has also entered into payment agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. The basis for payment to the Authority under these agreements includes prospectively determined rates per discharge, discounts from established charges, and prospectively determined daily rates.

## Note 3. Deposits and Investments

Custodial credit risk is the risk that in the event of a bank failure an organization's deposits may not be returned to it. The state treasurer requires that all state funds are either insured by the Federal Deposit Insurance Corporation (FDIC), collateralized by securities held by the cognizant Federal Reserve Bank, or invested in U.S. government obligations.

At June 30, 2025 and 2024, none of the Authority's bank balances of approximately \$18,527,000 and \$12,574,000, respectively, were exposed to custodial credit risk as uninsured and uncollateralized. These amounts include approximately \$18,435,000 and \$12,526,000 at June 30, 2025 and 2024, respectively, of funds that are pooled with funds of other state agencies.

In the event of future cash deposits, the Authority's deposits with the state treasurer will be pooled with funds of other state agencies and then, in accordance with statutory limitations, placed in financial institutions or invested as the state treasurer may determine in the State's name.

# **Summary of Carrying Values**

The carrying values of deposits are included as cash and cash equivalents in the accompanying balance sheets as follows:

Commingravely	2025	2024
Carrying value		
Deposits	\$ 128,261,336	\$ 120,598,895
Cash on hand	4,550	4,350
	\$ 128,265,886	\$ 120,603,245
Included in the following balance sheet captions		
Cash and cash equivalents	\$ 128,265,886	\$ 120,603,245
	\$ 128,265,886	\$ 120,603,245

## Note 4. Patient Accounts Receivable

The Authority grants credit without collateral to its patients, many of whom are area residents and are insured under third-party payor agreements. Patient accounts receivable consisted of the following at June 30:

	2025	2024
Medicare	\$ 6,494,646	\$ 7,603,972
Medicaid	3,064,572	3,653,750
Other third-party payors and patients	20,981,463	22,555,856
The state of the s	30,540,681	33,813,578
Less allowance for uncollectible accounts	12,521,000	12,157,000
	\$ 18,019,681	\$ 21,656,578

#### Note 5. Leases Receivable

The Authority leases a portion of its office and clinical space to a third party, the terms of which expire through 2027. Payments increase annually based on upon the Consumer Price Index (Index). The lease was measured based upon the Index at lease commencement. Revenue recognized under lease contracts during the years ended June 30, 2025 and 2024 was approximately \$1,014,000, which includes both lease revenue and interest. The lease revenue is recorded in other operating revenue in the accompanying statements of revenues, expenses, and changes in net position.

# Note 6. Capital, Lease, and Subscription Assets

Capital assets activity was as follows for the years ended June 30:

	Beginning Balance	Additions	Disposals	Transfers	Ending Balance
2025					
Land	\$ 100	\$ -	\$ -	\$ 1,520,426	\$ 1,520,526
Land improvements	3,579,955	-	(2,458,388)	27,900,469	29,022,036
Buildings and leasehold					
improvements	63,421,820	-	(1,064,233)	2,749,940	65,107,527
Equipment	78,385,044	-	(136,978)	8,611,481	86,859,547
Construction in progress	21,181,390	56,217,679		(40,782,316)	36,616,753
	166,568,309	56,217,679	(3,659,599)		219,126,389
Less accumulated depreciation					
Land improvements	1,493,505	338,293	(1,262,537)	-	569,261
Buildings and leasehold			,		
improvements	24,766,319	3,667,529	(904,826)	-	27,529,022
Equipment	57,674,974	5,006,539	(98,850)		62,582,663
	22 22 4 722	0.040.004	(0.000.040)		00 000 040
	83,934,798	9,012,361	(2,266,213)		90,680,946
Capital assets, net	\$ 82,633,511	\$ 47,205,318	\$ (1,393,386)	\$ -	\$ 128,445,443
2024					
Land	\$ 100	\$ -	\$ -	\$ -	\$ 100
Land improvements	3,161,671	-	-	418,284	3,579,955
Buildings and leasehold					
improvements	49,447,268	53,210	-	13,921,342	63,421,820
Equipment	72,213,096	-	-	6,171,948	78,385,044
Construction in progress	14,100,284	27,592,680		(20,511,574)	21,181,390
	138,922,419	27,645,890			166,568,309
Less accumulated depreciation					
Land improvements	1,297,554	195,951	_	_	1,493,505
Buildings and leasehold	1,207,004	100,001			1,400,000
improvements	20,700,817	4,065,502	_	_	24,766,319
Equipment	53,132,317	4,542,657	_	_	57,674,974
_qa.p.mom	00,102,011	1,012,007			01,011,011
	75,130,688	8,804,110			83,934,798
Capital assets, net	\$ 63,791,731	\$ 18,841,780	\$ -	\$ -	\$ 82,633,511

Lease assets activity was as follows for the years ended June 30:

	Beginning Balance	Α	dditions	D	isposals	Tra	nsfers		Ending Balance
2025						•			
Buildings and leasehold									
improvements	\$ 2,565,092	\$	411,577	\$	-	\$	-	\$	2,976,669
Equipment	 552,080		27,344						579,424
	3,117,172		438,921						3,556,093
Less accumulated depreciation Buildings and leasehold									
improvements	1,323,530		475,847		_		_		1,799,377
Equipment	93,064		116,480		-		-		209,544
	1,416,594		592,327						2,008,921
	 1,410,594		392,321				<del>-</del>	_	2,000,921
Lease assets, net	\$ 1,700,578	\$	(153,406)	\$		\$	_	\$	1,547,172
<b>2024</b> Buildings and leasehold									
improvements	\$ 2,149,883	\$	582,468	\$	(167,259)	\$	_	\$	2,565,092
Equipment	249,551		577,222		(274,693)				552,080
	2,399,434		1,159,690		(441,952)				3,117,172
Less accumulated depreciation Buildings and leasehold									
improvements	1,218,632		300,011		(195,113)		-		1,323,530
Equipment	287,943		51,960		(246,839)				93,064
	1,506,575		351,971		(441,952)		<u>-</u>		1,416,594
Lease assets, net	\$ 892,859	\$	807,719	\$		\$		\$	1,700,578

Subscription assets activity was as follows for the years ended June 30:

	E	Beginning Balance	Additions	Dis	posals	Tra	ansfers	Ending Balance
2025								
Subscription asset	\$	6,831,644	\$ 8,664,072	\$	-	\$	-	\$ 15,495,716
Less accumulated amortization								
Subscription asset		1,532,902	2,398,097		-		-	 3,930,999
Subscription assets, net	\$	5,298,742	\$ 6,265,975	\$		\$	-	\$ 11,564,717
2024 Subscription asset	\$	2,306,684	\$ 4,524,960	\$	-	\$	-	\$ 6,831,644
Less accumulated amortization Subscription asset		520,282	 1,012,620					 1,532,902
Subscription assets, net	\$	1,786,402	\$ 3,512,340	\$	<u> </u>	\$		\$ 5,298,742

# Note 7. Long-Term Obligations

The following is a summary of long-term obligation transactions for the Authority for the years ended June 30:

	Beginning Balance	Additions	Deductions	Ending Balance	Current Portion
2025					
Lease liability	\$ 1,750,716	\$ 438,921	\$ (568,581)	\$ 1,621,056	\$ 494,289
Subscription liability	4,803,424	659,188	(1,224,566)	4,238,046	1,281,095
Total long-term obligations	\$ 6,554,140	\$ 1,098,109	\$ (1,793,147)	\$ 5,859,102	\$ 1,775,384
2024					
Lease liability	\$ 1,149,363	\$ 1,159,690	\$ (558,337)	\$ 1,750,716	\$ 507,242
Subscription liability	1,574,534	4,524,960	(1,296,070)	4,803,424	955,623
Total long-term obligations	\$ 2,723,897	\$ 5,684,650	\$ (1,854,407)	\$ 6,554,140	\$ 1,462,865

#### Note 8. Lease Liabilities

The Authority leases equipment and office space, the terms of which expire in various years through 2030. Variable payments of certain leases are based upon the Consumer Price Index (Index). The leases were measured based upon the Index at lease commencement. Variable payments based upon the use of the underlying asset are not included in the lease liability because they are not fixed in substance.

During the years ended June 30, 2025 and 2024, the Hospital recognized approximately \$2,925,000 and \$2,774,000, respectively, of rental expense for variable payments, residual value guarantees, or termination penalties not previously included in the measurement of the lease liability.

The following is a schedule by year of payments under the leases as of June 30, 2025:

Year Ending June 30,		Total to be Paid	!	Principal	Interest		
2026	\$	562,171	\$	494,289	\$	67,882	
2027		396,352		348,459		47,893	
2028		293,977		259,814		34,163	
2029		237,999		216,526		21,473	
2030		177,735		165,695		12,040	
Thereafter		154,595		136,273		18,322	
	\$	1,822,829	\$	1,621,056	\$	201,773	

# Note 9. Subscription Liabilities

The Authority has various SBITAs, the terms of which expire in various years through 2030. Variable payments based upon the use of the underlying asset are not included in the subscription liability because they are not fixed in substance.

During the years ended June 30, 2025 and 2024, the Authority recognized no subscription expense for variable payments not previously included in the measurement of the subscription liability.

The following is a schedule by year of payments under the SBITAs as of June 30, 2025:

Year Ending June 30,	 Total to be Paid	 Principal	Interest	
2026	\$ 1,489,334	\$ 1,281,095	\$ 208,239	
2027	994,189	839,156	155,033	
2028	851,005	737,238	113,767	
2029	747,125	676,041	71,084	
2030	647,126	619,136	27,990	
Thereafter	 85,446	 85,380	 66	
	\$ 4,814,225	\$ 4,238,046	\$ 576,179	

# Note 10. Accounts Payable and Accrued Expenses

Accounts payable and accrued expenses included in current liabilities consisted of the following at June 30:

	2025	2024
Payable to suppliers and contractors	\$ 30,773,003	\$ 23,652,977
Payable to employees (including payroll taxes and benefits)	6,775,270	7,215,811
Deferred revenue	4,634,044	3,796,624
Estimated malpractice liability accrual	156,250	125,000
Payable to patients (including third-party payors)	1,279,610	1,116,558
	\$ 43,618,177	\$ 35,906,970

# **Note 11. Medical Malpractice Claims**

The Authority purchases medical malpractice insurance under a claims-made policy on a fixed premium basis. Accounting principles generally accepted in the United States of America require a healthcare provider to accrue the expense of its share of malpractice claim costs, if any, for any reported and unreported incidents of potential improper professional service occurring during the year by estimating the probable ultimate costs of the incidents. The Authority has accrued an estimated liability at June 30, 2025 and 2024 for incurred but not reported claims, which is included in accrued expenses in the accompanying balance sheets. It is reasonably possible that this estimate could change materially in the near term.

# Note 12. Services to the Community

In support of its mission, the Authority voluntarily provides free care to patients who lack financial resources and are deemed to be medically indigent. Because the Authority does not pursue collection of amounts determined to qualify as charity care, they are not reported in net patient service revenue. In addition, the Authority provides services to other medically indigent patients under certain government-reimbursed public aid programs. Such programs pay providers amounts that are less than established charges for the services provided to the recipients and many times the payments are less than the cost of rendering the services provided.

The Authority provides a discount to uninsured patients. This discount is considered charity care under the Authority's policy.

The Authority has estimated the cost associated with uncompensated care to uninsured and charity care patients for the years ended June 30, 2025 and 2024 to be approximately \$4,014,000 and \$3,969,000, respectively.

The cost of charity care is estimated based on the overall cost to charge ratios from the most recently filed Medicare cost report. In addition to uncompensated costs, the Authority also commits significant time and resources to endeavors and critical services that meet otherwise unfilled community needs. Many of these activities are sponsored with the knowledge that they will not be self-supporting or financially viable. Such programs include health screenings and assessments, prenatal education and care, community educational services, and various support groups.

## Note 13. Pension Plans

The Authority has two defined contribution pension plans, a 401(a) plan and a 457(b) plan, covering substantially all employees. Pension expense is recorded for the amount of the Authority's required contributions, determined in accordance with the terms of the plans. The plans are administered by the Board of Trustees. The plans provide retirement and death benefits to plan members and their beneficiaries. Benefit provisions are contained in the plan documents and were established and can be amended by action of the Authority's governing body. No employer contributions are made by the Authority to the 457(b) plan. Contribution rates for plan members to the 457(b) plan and the Authority to the 401(a) plan expressed as a percentage of covered payroll were 5.2% and 2.4% for 2025 and 5.3% and 2.2% for 2024, respectively. Contributions actually made by plan members and the Authority to both plans aggregated approximately \$1,674,000 and \$757,000 during 2025 and \$1,616,000 and \$677,000 during 2024, respectively.

Employees are immediately vested in their own contributions and earnings on those contributions and become vested in Authority contributions after completion of three years of creditable service with the Authority. Nonvested Authority contributions are forfeited upon termination of employment. Such forfeitures are used to cover a portion of the pension plans' administrative expenses.

# Note 14. Contingencies

## Litigation

The Authority is subject to claims and lawsuits that arise primarily in the ordinary course of its activities. Some of these allegations are in areas not covered by commercial insurance, for example, allegations regarding employment practices or performance of contracts. The Authority evaluates such allegations by conducting investigations to determine the validity of each potential claim. It is the opinion of management that the disposition or ultimate resolution of such claims and lawsuits will not have a material adverse effect on the balance sheets or the statements of revenues, expenses, and changes in net position and cash flows of the Authority. Events could occur that would change this estimate materially in the near term.

# **Note 15. Contract Management Services**

Effective October 1, 2016, OSUMT began to be operated by Saint Francis Health System, Inc. (SFHS) under a management contract. The contract is for a period of 10 years unless terminated by either party with at least 12 months of notice prior to termination. As part of the management contract, SFHS provides three executives serving the Authority on a dedicated, full-time basis who are responsible for operations, finance, and nursing. The Authority reimburses SFHS for these three executives' salaries as well as any costs associated with any supplemental personnel and their expenses associated with the management contract. The management contract also includes a revenue-sharing calculation as part of the management fees to SFHS. Certain charitable donations to OSUMT (or the Medical Center) and contributions for capital needs are excluded from the revenue-sharing calculation, as defined by the agreement.

Fees earned by SFHS for management services, including reimbursement of executive salaries, were approximately \$12,996,000 and \$8,872,000 for the years ended June 30, 2025 and 2024, respectively. At June 30, 2025 and 2024, the Authority owed SFHS approximately \$9,862,000 and \$8,149,000, respectively, for management services, including reimbursement of executive salaries, which is included in accounts payable on the accompanying balance sheets.

OSUMT has also entered into a SBITA with SFHS for the utilization of its primary electronic medical records software. Approximately \$1,016,000 and \$1,185,000 is included in subscription liabilities and \$956,000 and

\$1,138,000 in subscription assets recorded on the accompanying balance sheets at June 30, 2025 and 2024, respectively.

# **Note 16. Community Support**

In connection with the creation of the Trust (now OSUMT), various entities made commitments to the Trust to assist in providing support and funds for the Trust to keep operating the Medical Center. These commitments ranged from direct financial support to indirect community support. Below is a recap of community support received by the Authority in fiscal years 2025 and 2024.

#### State of Oklahoma

The State provided the Authority with approximately \$136,788,000 and \$84,510,000 in funds during the years ended June 30, 2025 and 2024, respectively, related to funding for the OSU Center for Health Sciences and other programs (see Note 1). These state-operated programs include direct allocation of funds to the Authority in addition to statewide fund allocations.

The Oklahoma legislature enacted legislation that directs OMES to award \$110 million from the American Rescue Plan Act of 2021 Statewide Recovery Fund to the Authority in fiscal year 2023. During the years ended June 30, 2025 and 2024, approximately \$14,828,000 and \$3,675,000, respectively, was expended under this award.

#### Note 17. Transactions With OSU Center for Health Sciences

The Authority has contracted with the OMES division of Agency Business Services to perform accounting functions, including the receipt, deposit, and recording of revenues and the payment and recording of expenses approved by the Authority. Additionally, purchasing actions are also performed by the OMES division of Agency Business Services on behalf of the Authority. Legal counsel for the Authority is contracted out to independent legal counsel authorized by the Oklahoma Attorney General as a part of the administrative services agreement and has the right to receive payment for these services based upon the allocation of time spent by its employees for these functions.

During the years ended June 30, 2025 and 2024, the Authority made contributions to the University (including the OSU Center for Health Sciences) of approximately \$54,762,000 and \$40,762,000, respectively, which was funded by the State, as discussed in Notes 1 and 16.

# Note 18. Combining Unit Information

The following tables include combining balance sheet information for the Authority and its component unit, OSUMT, as of June 30:

	Authority	OSUMT	Eliminations	Combined Balance
ASSETS				
Current Assets				
Cash and cash equivalents	\$ 18,435,331	\$ 109,830,555	\$ -	\$ 128,265,886
Patient accounts receivable, net				
of allowance	-	18,019,681	-	18,019,681
Other receivables	-	2,548,246	-	2,548,246
Lease receivable	-	840,672	-	840,672
Supplies	-	5,477,531	-	5,477,531
Prepaid expenses and other		3,570,756		3,570,756
Total Current Assets	18,435,331	140,287,441	-	158,722,772
Capital Assets, Net	30,114,585	98,330,858	-	128,445,443
Lease Assets, Net	-	1,547,172	-	1,547,172
Subscription Assets, Net	-	11,564,717	-	11,564,717
Other Assets				
Lease receivable	-	271,235	-	271,235
Deposits		340,176		340,176
Total Assets	\$ 48,549,916	\$ 252,341,599	\$ -	\$ 300,891,515

		20				
	A the e with a	OCUMT	Eliminations	Combined		
LIADILITIES DEFERRED INFLOWS OF	Authority	OSUMT	Eliminations	Balance		
LIABILITIES, DEFERRED INFLOWS OF RESOURCES, AND NET POSITION						
Current Liabilities						
Current portion of lease liabilities	\$ -	\$ 494,289	\$ -	\$ 494,289		
Current portion of subscription	Ψ -	ψ +3+,203	Ψ -	Ψ +3+,203		
liabilities	_	1,281,095	_	1,281,095		
Accounts payable	3,678,380	28,374,233	_	32,052,613		
Accrued expenses	-	6,931,520	-	6,931,520		
Accrued interest payable	-	-	-	-		
Deferred revenue	-	4,634,044	-	4,634,044		
Estimated amounts due to third-party		, ,				
payors		1,070,902		1,070,902		
Total Current Liabilities	3,678,380	42,786,083	-	46,464,463		
Long-Term Lease Liabilities	-	1,126,767	-	1,126,767		
Long-Term Subscription Liabilities		2,956,951		2,956,951		
Total Liabilities	3,678,380	46,869,801		50,548,181		
Deferred Inflows of Resources						
Leases	<u> </u>	1,111,907		1,111,907		
Net Position						
Net investment in capital assets	30,114,585	104,183,147		134,297,732		
Restricted – specific operating	30,114,303	104, 103, 147	-	134,291,132		
activities	14,756,951	5,180,903	_	19,937,854		
Unrestricted	14,700,001	94,995,841	_	94,995,841		
2.7.23		01,000,071		01,000,041		
Total Net Position	44,871,536	204,359,891		249,231,427		
Total Liabilities, Deferred Inflows of						
Resources, and Net Position	\$ 48,549,916	\$ 252,341,599	\$ -	\$ 300,891,515		

		20	24	
				Combined
	Authority	OSUMT	Eliminations	Balance
ASSETS				
Current Assets				
Cash and cash equivalents	\$ 12,526,029	\$ 108,077,216	\$ -	\$ 120,603,245
Patient accounts receivable, net				
of allowance	-	21,656,578	-	21,656,578
Other receivables	-	2,028,841	-	2,028,841
Lease receivable	-	782,981	-	782,981
Supplies	-	4,697,543	-	4,697,543
Prepaid expenses and other		2,575,979		2,575,979
Total Current Assets	12,526,029	139,819,138	-	152,345,167
Capital Assets, Net	4,515,633	78,117,878	-	82,633,511
Lease Assets, Net	-	1,700,578	-	1,700,578
Subscription Assets, Net	-	5,298,742	-	5,298,742
Other Assets				
Lease receivable	-	1,106,639	-	1,106,639
Deposits		360,942		360,942
Total Assets	\$ 17,041,662	\$ 226,403,917	\$ -	\$ 243,445,579

	2024				
				Combined	
	Authority	OSUMT	Eliminations	Balance	
LIABILITIES, DEFERRED INFLOWS OF RESOURCES, AND NET POSITION					
Current Liabilities					
Current portion of lease liabilities	\$ -	\$ 507,242	\$ -	\$ 507,242	
Current portion of subscription liabilities	-	955,623	_	955,623	
Accounts payable	2,341,527	22,428,008	_	24,769,535	
Accrued expenses	-	11,137,435	_	11,137,435	
Accrued interest payable	_	71,370	_	71,370	
Estimated amounts due to third-party		,-		,-	
payors		1,181,684		1,181,684	
Total Current Liabilities	2,341,527	36,281,362	-	38,622,889	
Long-Term Lease Liabilities	-	1,243,474	-	1,243,474	
Long-Term Subscription Liabilities		3,847,801		3,847,801	
Total Liabilities	2,341,527	41,372,637		43,714,164	
Deferred Inflows of Resources					
Leases		1,889,620		1,889,620	
Net Position					
Net investment in capital assets	4,515,633	75,303,435	_	79,819,068	
Restricted – specific operating	, ,	-,,		-,,-	
activities	5,500,552	35,370,795	-	40,871,347	
Unrestricted	4,683,950	72,467,430		77,151,380	
Total Net Position	14,700,135	183,141,660		197,841,795	
Total Liabilities, Deferred Inflows of					
Resources, and Net Position	\$ 17,041,662	\$ 226,403,917	\$ -	\$ 243,445,579	

The following tables include combining statements of revenues, expenses, and changes in net position information for the Authority and its component unit, OSUMT, for the years ended June 30:

		20	25	
	Authority	OSUMT	Eliminations	Combined Balance
Operating Revenues				
Net patient service revenue, net of				
provision for uncollectible accounts	\$ -	\$ 208,268,747	\$ -	\$ 208,268,747
Other		11,200,401		11,200,401
Total Operating Revenues		219,469,148		219,469,148
Operating Expenses				
Salaries and wages	-	103,673,625	-	103,673,625
Employee benefits	-	14,551,962	-	14,551,962
Purchased services and professional				
fees	-	42,617,117	-	42,617,117
Supplies and other	619,783	53,631,003	-	54,250,786
Depreciation		12,002,785		12,002,785
Total Operating Expenses	619,783	226,476,492		227,096,275
Operating Loss	(619,783)	(7,007,344)		(7,627,127)
Nonoperating Revenues (Expenses)				
Government grants	-	24,610,371	(24,610,371)	_
State contract and grant revenue	136,788,235	-	· -	136,788,235
Contribution expense	(81,386,680)	-	-	(81,386,680)
Support to OSUMT	(24,610,371)	-	24,610,371	-
Loss on disposal of capital assets	-	(1,438,649)	-	(1,438,649)
Investment income	-	5,403,935	-	5,403,935
Interest expense		(350,082)		(350,082)
Total Nonoperating Revenues (Expenses)	30,791,184	28,225,575		59,016,759
Increase in Net Position	\$ 30,171,401	\$ 21,218,231	\$ -	\$ 51,389,632

	2024						
	Authority	OSUMT	Eliminations	Combined Balance			
Operating Revenues	7 100110110						
Net patient service revenue, net of							
provision for uncollectible accounts	\$ -	\$ 182,580,447	\$ -	\$ 182,580,447			
Other		8,941,669		8,941,669			
Total Operating Revenues		191,522,116		191,522,116			
Operating Expenses							
Salaries and wages	-	92,500,006	-	92,500,006			
Employee benefits	-	12,875,247	-	12,875,247			
Purchased services and professional							
fees	-	36,633,050	-	36,633,050			
Supplies and other	55,515	50,338,580	-	50,394,095			
Depreciation and amortization		10,168,701		10,168,701			
Total Operating Expenses	55,515	202,515,584		202,571,099			
Operating Loss	(55,515)	(10,993,468)		(11,048,983)			
Nonoperating Revenues (Expenses)							
Government grants	_	25,274,834	(25,274,834)	-			
State contract and grant revenue	84,510,248	<u>-</u>	-	84,510,248			
Contribution expense	(55,499,144)	-	-	(55,499,144)			
Support to OSUMT	(25,274,834)	-	25,274,834	-			
Investment income	-	5,944,583	-	5,944,583			
Interest expense		(164,385)		(164,385)			
Total Nonoperating Revenues (Expenses)	3,736,270	31,055,032		34,791,302			
Increase in Net Position	\$ 3,680,755	\$ 20,061,564	\$ -	\$ 23,742,319			

The following tables include condensed combining statements of cash flows information for the Authority and its component unit, OSUMT, for the years ended June 30:

	2025								
		Authority		OSUMT		Eliminations		Combined Balance	
Net Cash Provided by Operating Activities	\$	5,909,302	\$	7,157,157	\$	-	\$	13,066,459	
Net Cash Provided by Noncapital Financing Activities		-		35,463,701		-		35,463,701	
Net Cash Used in Capital and Related Financing Activities		-		(46,271,454)		-		(46,271,454)	
Net Cash Provided by Investing Activities				5,403,935				5,403,935	
Increase in Cash and Cash Equivalents		5,909,302		1,753,339		-		7,662,641	
Cash and Cash Equivalents, Beginning of Year		12,526,029		108,077,216				120,603,245	
Cash and Cash Equivalents, End of Year	\$	18,435,331	\$	109,830,555	\$		\$	128,265,886	

	2024							
	Authority		OSUMT		Eliminations		Combined Balance	
Net Cash Provided by (Used in) Operating Activities	\$	1,506,649	\$	(1,826,113)	\$	-	\$	(319,464)
Net Cash Used in Noncapital Financing Activities		-		(11,860,243)		-		(11,860,243)
Net Cash Provided by Capital and Related Financing Activities		-		14,871,508		-		14,871,508
Net Cash Provided by Investing Activities				105,060,213				105,060,213
Increase in Cash and Cash Equivalents		1,506,649		106,245,365		-		107,752,014
Cash and Cash Equivalents, Beginning of Year		11,019,380		1,831,851		<u>-</u>		12,851,231
Cash and Cash Equivalents, End of Year	\$	12,526,029	\$	108,077,216	\$		\$	120,603,245

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Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance With Government Auditing Standards

# **Independent Auditor's Report**

Board of Trustees Oklahoma State University Medical Authority Tulsa, Oklahoma

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States (*Government Auditing Standards*), the financial statements of Oklahoma State University Medical Authority (Authority), a component unit of the State of Oklahoma, which comprise the Authority's balance sheet as of June 30, 2025 and the related statements of revenues, expenses, and changes in net position and cash flows for the year then ended and the related notes to the financial statements, and have issued our report thereon dated October 24, 2025.

# Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Authority's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Authority's internal control. Accordingly, we do not express an opinion on the effectiveness of the Authority's internal control.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the Authority's financial statements will not be prevented or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

## Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Authority's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material

effect on the financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

## **Purpose of This Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Forvis Mazars, LLP

Tulsa, Oklahoma October 24, 2025