

Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|------------------------------|---------|-------------------------------|-----------|-----------------------------|--------|
| 141650 ACCORD HOSPICE | | | | Proprietary - Corporation | |
| 1247 LYNN TERRACE | | 12/31/2017 365 Days Submitted | | Hospice | |
| HIGHLAND PARK, IL 60035 | | | | | |
| LAKE | | | | | |
| | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.3% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 21.2 |
| | | | | Days to Collect | 41.1 |
| | | | | Avg Payment Days | 2.7 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 241.7% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 279,784 | Total Charges | 2,424,012 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 2,424,012 | 100.0% | |
| Total Assets | 279,784 | Operating Expense | 1,779,727 | 73.4% | |
| Current Liabilities | 13,223 | Operating Margin | 644,285 | 26.6% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 266,561 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 279,784 | Net Profit or Loss | 644,285 | 26.6% | |

| | | | | | |
|---|---|-------------------------|---|-----------------------------|------|
| 141507 ADVENTIST ST THOMAS HOSPICE | | | | | |
| 119 E OGDEN AVE, STE 111 | | Cost Report not filed. | | | |
| HINSDALE, IL 60521 | | | | | |
| DUPAGE | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | |
| | | | | Days to Collect | |
| | | | | Avg Payment Days | |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | |

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| 141516 ADVOCATE HOSPICE | | | | Nonprofit - Church | |
|-----------------------------|------------|-------------------------------|------------|-----------------------------|-------|
| 2000 SPRINGER DRIVE | | 12/31/2017 365 Days Submitted | | Hospice | |
| LOMBARD, IL 60148 | | | | | |
| DUPAGE | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.5% |
| | | | | Nursing | 19.6% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 1.3 |
| | | | | Days to Collect | 90.1 |
| | | | | Avg Payment Days | 51.3 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 24.8% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 6,072,000 | Total Charges | 26,765,219 | | |
| Fixed Assets | 47,000 | Contract Allowance | 1,518,952 | 5.7% | |
| Other Assets | 0 | Operating Revenue | 25,246,267 | 94.3% | |
| Total Assets | 19,953,000 | Operating Expense | 21,432,179 | 84.9% | |
| Current Liabilities | 4,593,000 | Operating Margin | 3,814,088 | 15.1% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 15,360,000 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 19,953,000 | Net Profit or Loss | 3,814,088 | 15.1% | |
| 141567 ADVOCATE HOSPICE | | | | Nonprofit - Church | |
| 303 N HERSHEY ROAD, SUITE C | | 12/31/2017 365 Days Submitted | | Hospice | |
| BLOOMINGTON, IL 61704 | | | | | |
| MCLEAN | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.2% |
| | | | | Nursing | 10.5% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 1.3 |
| | | | | Days to Collect | 775.1 |
| | | | | Avg Payment Days | 409.9 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 1.6% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 6,072,000 | Total Charges | 3,366,907 | | |
| Fixed Assets | 47,000 | Contract Allowance | 432,062 | 12.8% | |
| Other Assets | 0 | Operating Revenue | 2,934,845 | 87.2% | |
| Total Assets | 19,953,000 | Operating Expense | 2,683,131 | 91.4% | |
| Current Liabilities | 4,593,000 | Operating Margin | 251,714 | 8.6% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 15,360,000 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 19,953,000 | Net Profit or Loss | 251,714 | 8.6% | |

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| | | | | | |
|---|------------|-------------------------------|-------------|-----------------------------|----------|
| 141689 AGRACE HOSPICEARE INC | | | | Nonprofit - Private | |
| 7290 ARGUS DRIVE | | 12/31/2017 377 Days Submitted | | Hospice | |
| ROCKFORD, IL 61107 | | | | | |
| WINNEBAGO | | | | | |
| | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.2% |
| | | | | Nursing | 0.1% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 2.2 |
| | | | | Days to Collect | 2,254.3 |
| | | | | Avg Payment Days | 627.4 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -2.3% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 15,470,572 | Total Charges | 2,227,426 | | |
| Fixed Assets | 88,606 | Contract Allowance | 664,950 | 29.9% | |
| Other Assets | 70,664,062 | Operating Revenue | 1,562,476 | 70.1% | |
| Total Assets | 86,599,090 | Operating Expense | 3,396,729 | 217.4% | |
| Current Liabilities | 7,026,566 | Operating Margin | -1,834,253 | -117.4% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 79,572,524 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 86,599,090 | Net Profit or Loss | (1,834,253) | -117.4% | |
| 141668 ALC PALLIATIVE AND HOSPICE CARE INC | | | | | |
| 477 E BUTTERFIELD RD SUITE 400 | | 12/31/2017 365 Days Submitted | | Proprietary - Corporation | |
| HOSPICE | | | | | |
| LOMBARD, IL 60148 | | | | | |
| DUPAGE | | | | | |
| | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 0.7 |
| | | | | Days to Collect | 29.4 |
| | | | | Avg Payment Days | 0.0 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | - |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 84,537 | Total Charges | 1,214,347 | | |
| Fixed Assets | 25,987 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 1,214,347 | 100.0% | |
| Total Assets | 110,524 | Operating Expense | 1,008,749 | 83.1% | |
| Current Liabilities | 119,199 | Operating Margin | 205,598 | 16.9% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | -8,675 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 110,524 | Net Profit or Loss | 205,598 | 16.9% | |
| | | | | | 2,370.0% |

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141632 ALEXIAN BROTHERS HOSPICE

1515 EAST LAKE STREET, SUITE 206 Cost Report not filed.

HANOVER PARK, IL 60133

ADAMS

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

| | | | | | | |
|------------------------|---|--------------------|---|-----------------|-------------------|------|
| Current Assets | 0 | Total Charges | 0 | Home Healthcare | 0.0% | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity | 0.0% |

141644 ANGELS GRACE HOSPICE

Proprietary - Corporation

440 QUADRANGLE DRIVE SUITE G 12/31/2017 365 Days Submitted

Hospice

BOLINGBROOK, IL 60440

WILL

Key Performance Ind.

PALMETTO HHH C

Skilled Nursing 0.1%

Balance Sheet

Income Statement

Nursing 0.3%

| | | | | | | |
|------------------------|----------|--------------------|-----------|-----------------|-------------------|-------|
| Current Assets | 404,227 | Total Charges | 4,799,826 | Home Healthcare | 0.0% | |
| Fixed Assets | -100,728 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 247,355 | Operating Revenue | 4,799,826 | 100.0% | Medicare LOS | |
| Total Assets | 550,854 | Operating Expense | 4,939,731 | 102.9% | Current Ratio | 0.5 |
| Current Liabilities | 818,003 | Operating Margin | -139,905 | -2.9% | Days to Collect | 0.0 |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | 53.1 |
| Total Equity | -267,149 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 550,854 | Net Profit or Loss | (139,905) | -2.9% | Return on Equity | 52.4% |

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|---|----------|-------------------------------|-----------|---------------------------|---------|
| 141645 APEX HOSPICE AND PALLIATIVE CARE, INC | | | | Proprietary - Corporation | |
| 2607 W22ND STREET SUITE 40 | | 12/31/2017 365 Days Submitted | | Hospice | |
| OAK BROOK, IL 60523 | | | | | |
| DUPAGE | | | | | |
| Key Performance Ind. | | | | | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.6% |
| | | | | Nursing | 0.6% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 0.0 |
| | | | | Days to Collect | 0.0 |
| | | | | Avg Payment Days | 8.3 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -304.1% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 1,508 | Total Charges | 5,488,206 | | |
| Fixed Assets | 18,245 | Contract Allowance | 13,395 | 0.2% | |
| Other Assets | 0 | Operating Revenue | 5,474,811 | 99.8% | |
| Total Assets | 19,753 | Operating Expense | 4,547,683 | 83.1% | |
| Current Liabilities | 102,846 | Operating Margin | 927,128 | 16.9% | |
| Long Term Liabilities | 221,794 | Other Income | 0 | 0.0% | |
| Total Equity | -304,887 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 19,753 | Net Profit or Loss | 927,128 | 16.9% | |

| | | | | | |
|------------------------------|------------|-------------------------------|-------------|---------------------------|-------|
| 141651 AVALON HOSPICE | | | | Proprietary - Corporation | |
| 1325 REMINGTON RD SUITE L | | 12/31/2017 365 Days Submitted | | Hospice | |
| SCHAUMBURG, IL 60173 | | | | | |
| COOK | | | | | |
| Key Performance Ind. | | | | | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.3% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | (0.6) |
| | | | | Days to Collect | 0.0 |
| | | | | Avg Payment Days | (8.7) |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 75.1% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 12,194 | Total Charges | 879,294 | | |
| Fixed Assets | 120,657 | Contract Allowance | 4,038 | 0.5% | |
| Other Assets | 481,093 | Operating Revenue | 875,256 | 99.5% | |
| Total Assets | 629,694 | Operating Expense | 1,900,878 | 217.2% | |
| Current Liabilities | -20,257 | Operating Margin | -1,025,622 | -117.2% | |
| Long Term Liabilities | 2,015,956 | Other Income | 0 | 0.0% | |
| Total Equity | -1,366,005 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 629,694 | Net Profit or Loss | (1,025,622) | -117.2% | |

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|---|-----------|-------------------------------|-----------|-----------------------------|-------------------|-------|
| 141666 AVALON HOSPICE OF SPRINGFIELD | | | | Proprietary - Corporation | | |
| 2815 OLD JACKSONVILLE ROAD, SUITE 202 | | 12/31/2017 365 Days Submitted | | Hospice | | |
| SPRINGFIELD, IL 62704 | | | | | | |
| SANGAMON | | | | Key Performance Ind. | | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.3% | |
| Balance Sheet | | Income Statement | | Nursing | 0.0% | |
| Current Assets | 4,365 | Total Charges | 467,984 | Home Healthcare | 0.0% | |
| Fixed Assets | 40,472 | Contract Allowance | 2,193 | 0.5% | Length of Stay | |
| Other Assets | 648,163 | Operating Revenue | 465,791 | 99.5% | Medicare LOS | |
| Total Assets | 693,000 | Operating Expense | 970,275 | 208.3% | Current Ratio | 0.6 |
| Current Liabilities | 6,937 | Operating Margin | -504,484 | -108.3% | Days to Collect | 0.0 |
| Long Term Liabilities | 1,258,582 | Other Income | 0 | 0.0% | Avg Payment Days | (2.4) |
| Total Equity | -572,519 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 693,000 | Net Profit or Loss | (504,484) | -108.3% | Return on Equity | 88.1% |

| | | | | | | |
|--|-----------|-------------------------------|-----------|-----------------------------|-------------------|-------|
| 141663 BEACON OF HOPE HOSPICE OF ILLINOIS | | | | Proprietary - Corporation | | |
| 102 E MAIN ST A | | 12/31/2017 365 Days Submitted | | Hospice | | |
| GALESBURG, IL 61401 | | | | | | |
| KNOX | | | | Key Performance Ind. | | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.3% | |
| Balance Sheet | | Income Statement | | Nursing | 0.0% | |
| Current Assets | 3,781,956 | Total Charges | 4,120,368 | Home Healthcare | 0.0% | |
| Fixed Assets | 176,044 | Contract Allowance | 850,017 | 20.6% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 3,270,351 | 79.4% | Medicare LOS | |
| Total Assets | 3,972,271 | Operating Expense | 1,038,519 | 31.8% | Current Ratio | 4.0 |
| Current Liabilities | 934,462 | Operating Margin | 2,231,832 | 68.2% | Days to Collect | 381.8 |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | 100.8 |
| Total Equity | 3,037,809 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 3,972,271 | Net Profit or Loss | 2,231,832 | 68.2% | Return on Equity | 73.5% |

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|----------------------------------|------------|-------------------------------|-------------|-----------------------------|-------------------|
| 141637 BJC HOSPICE | | | | Nonprofit - Private | |
| ONE PROFESSIONAL DRIVE SUITE 180 | | 12/31/2017 365 Days Submitted | | Hospice | |
| ALTON, IL 62002 | | | | | |
| MADISON | | | | | |
| PALMETTO HHH C | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.1% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 15,971,486 | Total Charges | 76,524,149 | | |
| Fixed Assets | 14,595,758 | Contract Allowance | 2,118,256 | 2.8% | Length of Stay |
| Other Assets | 1,088,946 | Operating Revenue | 74,405,893 | 97.2% | Medicare LOS |
| Total Assets | 31,656,190 | Operating Expense | 80,708,696 | 108.5% | Current Ratio |
| Current Liabilities | 5,717,449 | Operating Margin | -6,302,803 | -8.5% | Days to Collect |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 25,938,741 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 31,656,190 | Net Profit or Loss | (6,302,803) | -8.5% | Return on Equity |

| | | | | | |
|--|---|-------------------------|---|-----------------------------|-------------------|
| 141501 BLESSING HOSPICE AND PALLIATIVE CARE | | | | | |
| 936 BROADWAY , PO BOX 7005 | | Cost Report not filed. | | | |
| QUINCY, IL 62305 | | | | | |
| ADAMS | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity |

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Sample Hospice reports from the Halmanac.com website.

141594 BOND COUNTY HOSPICE

1520 SOUTH FOURTH STREET

Cost Report not filed.

GREENVILLE, IL 62246

| | | | | | |
|-----------------------------|--|--|--|-----------------------------|------|
| BOND | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | |
| | | | | Days to Collect | |
| | | | | Avg Payment Days | |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 0.0% |

| Balance Sheet | | Income Statement | | | |
|------------------------|---|-------------------------|---|------|--|
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | |

141659 BREEZE HOSPICE LLC

Proprietary - Corporation

1909 DUBLIN BLVD SUITE A

12/31/2017 365 Days Submitted

Hospice

BELLEVILLE, IL 62221

| | | | | | |
|----------------|--|--|--|-----------------------------|-------|
| SAINT CLAIR | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.1% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 1.6 |
| | | | | Days to Collect | 129.8 |
| | | | | Avg Payment Days | 74.9 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 30.5% |

| Balance Sheet | | Income Statement | | | |
|------------------------|---------|-------------------------|-----------|-------|--|
| Current Assets | 631,680 | Total Charges | 1,779,086 | | |
| Fixed Assets | 49,590 | Contract Allowance | 29,868 | 1.7% | |
| Other Assets | 6,178 | Operating Revenue | 1,749,218 | 98.3% | |
| Total Assets | 705,710 | Operating Expense | 1,683,294 | 96.2% | |
| Current Liabilities | 403,067 | Operating Margin | 65,924 | 3.8% | |
| Long Term Liabilities | 86,287 | Other Income | 0 | 0.0% | |
| Total Equity | 216,356 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 705,710 | Net Profit or Loss | 65,924 | 3.8% | |

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| | | | | | |
|--|---------|-------------------------------|-----------|-----------------------------|-------------------------|
| 141661 CAPITAL HOSPICE & PALLIATIVE CARE LLC | | | | Proprietary - Other | |
| 900 JORIE BLVD, SUITE 20 | | 12/31/2017 365 Days Submitted | | Hospice | |
| OAK BROOK, IL 60523 | | | | | |
| DUPAGE | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing 2.7% | |
| Balance Sheet | | Income Statement | | Nursing 0.0% | |
| Current Assets | 301,109 | Total Charges | 1,064,055 | Home Healthcare 0.0% | |
| Fixed Assets | 62 | Contract Allowance | 8,143 | 0.8% | Length of Stay |
| Other Assets | 0 | Operating Revenue | 1,055,912 | 99.2% | Medicare LOS |
| Total Assets | 301,171 | Operating Expense | 679,938 | 64.4% | Current Ratio 29.2 |
| Current Liabilities | 10,314 | Operating Margin | 375,974 | 35.6% | Days to Collect 0.0 |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days 5.5 |
| Total Equity | 290,857 | Other Expense | 0 | 0.0% | Depreciation Rate 0.0% |
| Total Liab. and Equity | 301,171 | Net Profit or Loss | 375,974 | 35.6% | Return on Equity 129.3% |
| 141660 CARING HEART HOSPICE AND PALLIATIVE CARE INC | | | | | |
| 290 TOWN CENTER LANE SUITE 1 | | Cost Report not filed. | | | |
| GLENDALE HEIGHTS, IL 60139 | | | | | |
| DUPAGE | | | | | |
| PALMETTO HHH C | | | | | |
| Balance Sheet | | Income Statement | | Key Performance Ind. | |
| Current Assets | 0 | Total Charges | 0 | Skilled Nursing 0.0% | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Nursing 0.0% |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Home Healthcare 0.0% |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Length of Stay |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Medicare LOS |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Current Ratio |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Days to Collect |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Avg Payment Days |
| | | | | 0.0% | Depreciation Rate 0.0% |
| | | | | 0.0% | Return on Equity 0.0% |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141526 CARLE HOSPICE

206A WEST ANTHONY DRIVE

Cost Report not filed.

CHAMPAIGN, IL 61822

CHAMPAIGN

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

Current Assets 0

Total Charges 0

Home Healthcare 0.0%

Fixed Assets 0

Contract Allowance 0

0.0% Length of Stay

Other Assets 0

Operating Revenue 0

0.0% Medicare LOS

Total Assets 0

Operating Expense 0

0.0% Current Ratio

Current Liabilities 0

Operating Margin 0

0.0% Days to Collect

Long Term Liabilities 0

Other Income 0

0.0% Avg Payment Days

Total Equity 0

Other Expense 0

0.0% Depreciation Rate 0.0%

Total Liab. and Equity 0

Net Profit or Loss 0

0.0% Return on Equity 0.0%

141571 CASS-SCHUYLER AREA HOSPICE

331 S MAIN ST

Cost Report not filed.

VIRGINIA, IL 62691

CASS

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

Current Assets 0

Total Charges 0

Home Healthcare 0.0%

Fixed Assets 0

Contract Allowance 0

0.0% Length of Stay

Other Assets 0

Operating Revenue 0

0.0% Medicare LOS

Total Assets 0

Operating Expense 0

0.0% Current Ratio

Current Liabilities 0

Operating Margin 0

0.0% Days to Collect

Long Term Liabilities 0

Other Income 0

0.0% Avg Payment Days

Total Equity 0

Other Expense 0

0.0% Depreciation Rate 0.0%

Total Liab. and Equity 0

Net Profit or Loss 0

0.0% Return on Equity 0.0%

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|--|--------|-------------------------------|---------|-----------------------------|-------------------|
| 141667 CHICAGO HOPE & PALLIATIVE HEALTHCARE INC | | | | Proprietary - Corporation | |
| 9944 S ROBERTS ROAD SUITE 101 | | 12/31/2017 365 Days Submitted | | Hospice | |
| PALOS HILLS, IL 60465 | | | | | |
| COOK | | | | | |
| | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 29,291 | Total Charges | 601,941 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay |
| Other Assets | 0 | Operating Revenue | 601,941 | 100.0% | Medicare LOS |
| Total Assets | 29,291 | Operating Expense | 554,036 | 92.0% | Current Ratio |
| Current Liabilities | 34,480 | Operating Margin | 47,905 | 8.0% | Days to Collect |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | -5,189 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 29,291 | Net Profit or Loss | 47,905 | 8.0% | Return on Equity |
| | | | | | -923.2% |

| | | | | | |
|---|-----------|------------------------------|----------|-----------------------------|-------------------|
| 141611 CLAY COUNTY HEALTH DEPARTMENT | | | | Government - County | |
| 601 EAST 12TH STREET | | 6/30/2017 365 Days Submitted | | Hospice | |
| FLORA, IL 62839 | | | | | |
| CLAY | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 1,438,524 | Total Charges | 552,958 | | |
| Fixed Assets | 161,976 | Contract Allowance | 0 | 0.0% | Length of Stay |
| Other Assets | 0 | Operating Revenue | 552,958 | 100.0% | Medicare LOS |
| Total Assets | 1,600,500 | Operating Expense | 593,934 | 107.4% | Current Ratio |
| Current Liabilities | 269,313 | Operating Margin | -40,976 | -7.4% | Days to Collect |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 1,331,187 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 1,600,500 | Net Profit or Loss | (40,976) | -7.4% | Return on Equity |
| | | | | | -3.1% |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|---|-----------|-------------------------------|-----------|---------------------|-------|
| 141647 COMFORT HOSPICE AND PALLIATIVE CARE LLC | | | | Proprietary - Other | |
| 1S660 MIDWEST ROAD SUITE 308 | | 12/31/2017 365 Days Submitted | | Hospice | |
| OAKBROOK TER, IL 60181 | | | | | |
| DUPAGE | | | | | |
| Key Performance Ind. | | | | | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.1% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 1.5 |
| | | | | Days to Collect | 68.7 |
| | | | | Avg Payment Days | 90.4 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 95.4% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 1,637,693 | Total Charges | 6,060,411 | | |
| Fixed Assets | 111,808 | Contract Allowance | 1,094,397 | 18.1% | |
| Other Assets | 0 | Operating Revenue | 4,966,014 | 81.9% | |
| Total Assets | 1,781,960 | Operating Expense | 4,299,453 | 86.6% | |
| Current Liabilities | 1,082,911 | Operating Margin | 666,561 | 13.4% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 699,049 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 1,781,960 | Net Profit or Loss | 666,561 | 13.4% | |

| | | | | | |
|--|---------|-------------------------------|-----------|---------------------------|-------|
| 141641 COMFORT PLUS HOSPICE INC | | | | Proprietary - Corporation | |
| 612 W JACKSON STREET | | 12/31/2017 365 Days Submitted | | Hospice | |
| MORTON, IL 61550 | | | | | |
| TAZEWELL | | | | | |
| Key Performance Ind. | | | | | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | (9.9) |
| | | | | Days to Collect | 93.3 |
| | | | | Avg Payment Days | 37.4 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 79.9% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 263,677 | Total Charges | 1,013,821 | | |
| Fixed Assets | 7,852 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 74,151 | Operating Revenue | 1,013,821 | 100.0% | |
| Total Assets | 345,680 | Operating Expense | 716,137 | 70.6% | |
| Current Liabilities | -26,727 | Operating Margin | 297,684 | 29.4% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 372,407 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 345,680 | Net Profit or Loss | 297,684 | 29.4% | |

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| | | | | | |
|--|--|-------------------------------|--|-----------------------------|-------|
| 141649 COMPASSIONATE CARE HOSPICE | | | | Proprietary - Corporation | |
| 200 N HAMMES AVENUE, SUITE 3 | | 12/31/2017 365 Days Submitted | | Hospice | |
| JOLIET, IL 60435 | | | | | |
| WILL | | | | | |
| PALMETTO HHH C | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 2.5 |
| | | | | Days to Collect | 351.2 |
| | | | | Avg Payment Days | 50.8 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 15.7% |

| Balance Sheet | | Income Statement | | | |
|------------------------|------------|--------------------|-----------|--------|--|
| Current Assets | 540,547 | Total Charges | 1,097,627 | | |
| Fixed Assets | 0 | Contract Allowance | 45,335 | 4.1% | |
| Other Assets | 1,827,779 | Operating Revenue | 1,052,292 | 95.9% | |
| Total Assets | 2,378,232 | Operating Expense | 1,549,055 | 147.2% | |
| Current Liabilities | 215,449 | Operating Margin | -496,763 | -47.2% | |
| Long Term Liabilities | 5,335,332 | Other Income | 0 | 0.0% | |
| Total Equity | -3,172,549 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 2,378,232 | Net Profit or Loss | (496,763) | -47.2% | |

| | | | | | |
|------------------------------------|--|------------------------|--|-----------------------------|------|
| 141639 COVENANTCARE HOSPICE | | | | | |
| 3755 EAST MAIN STREET, SUITE 165 | | Cost Report not filed. | | | |
| SAINT CHARLES, IL 60174 | | | | | |
| KANE | | | | | |
| PALMETTO HHH C | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | |
| | | | | Days to Collect | |
| | | | | Avg Payment Days | |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 0.0% |

| Balance Sheet | | Income Statement | | | |
|------------------------|---|--------------------|---|------|--|
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | |

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Sample Hospice reports from the Halmanac.com website.

141580 DEACONESS VNA

1300 US 45 NORTH

Cost Report not filed.

ELDORADO, IL 62930

SALINE

Key Performance Ind.

Balance Sheet

Income Statement

| | | | | | |
|------------------------|---|--------------------|---|------------------------|------|
| Current Assets | 0 | Total Charges | 0 | Skilled Nursing | 0.0% |
| Fixed Assets | 0 | Contract Allowance | 0 | Nursing | 0.0% |
| Other Assets | 0 | Operating Revenue | 0 | Home Healthcare | 0.0% |
| Total Assets | 0 | Operating Expense | 0 | 0.0% Length of Stay | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% Medicare LOS | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% Current Ratio | |
| Total Equity | 0 | Other Expense | 0 | 0.0% Days to Collect | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% Avg Payment Days | |
| | | | | 0.0% Depreciation Rate | 0.0% |
| | | | | 0.0% Return on Equity | 0.0% |

141690 DELTA HOSPICE & PALLIATIVE CARE LLC

900 JORIE BLVD SUITE 58C

Cost Report not filed.

OAK BROOK, IL 60523

DUPAGE

Key Performance Ind.

PALMETTO HHH C

Balance Sheet

Income Statement

| | | | | | |
|------------------------|---|--------------------|---|------------------------|------|
| Current Assets | 0 | Total Charges | 0 | Skilled Nursing | 0.0% |
| Fixed Assets | 0 | Contract Allowance | 0 | Nursing | 0.0% |
| Other Assets | 0 | Operating Revenue | 0 | Home Healthcare | 0.0% |
| Total Assets | 0 | Operating Expense | 0 | 0.0% Length of Stay | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% Medicare LOS | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% Current Ratio | |
| Total Equity | 0 | Other Expense | 0 | 0.0% Days to Collect | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% Avg Payment Days | |
| | | | | 0.0% Depreciation Rate | 0.0% |
| | | | | 0.0% Return on Equity | 0.0% |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141517 DMH HOME HEALTH SERVICES HOSPICE

2300 N EDWARD ST GEN SERV BLDG Cost Report not filed.

DECATUR, IL 62526

MACON

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

| | | | | | | |
|------------------------|---|--------------------|---|-----------------|-------------------|------|
| Current Assets | 0 | Total Charges | 0 | Home Healthcare | 0.0% | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity | 0.0% |

141664 EVERGREEN HOSPICE CARE INC

6067 DEMPSTER STREET Cost Report not filed.

MORTON GROVE, IL 60053

COOK

Key Performance Ind.

PALMETTO HHH C

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

| | | | | | | |
|------------------------|---|--------------------|---|-----------------|-------------------|------|
| Current Assets | 0 | Total Charges | 0 | Home Healthcare | 0.0% | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity | 0.0% |

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Sample Hospice reports from the Halmanac.com website.

141622 FAMILY HOME HEALTH SERVICES, INC

2171 EXECUTIVE DRIVE Cost Report not filed.

ADDISON, IL 60101

DUPAGE

BLUE CROSS (SOUTH CAROLINA)

Key Performance Ind.

| | |
|-------------------|------|
| Skilled Nursing | 0.0% |
| Nursing | 0.0% |
| Home Healthcare | 0.0% |
| Length of Stay | |
| Medicare LOS | |
| Current Ratio | |
| Days to Collect | |
| Avg Payment Days | |
| Depreciation Rate | 0.0% |
| Return on Equity | 0.0% |

Balance Sheet

Income Statement

| | | | |
|------------------------|---|--------------------|---|
| Current Assets | 0 | Total Charges | 0 |
| Fixed Assets | 0 | Contract Allowance | 0 |
| Other Assets | 0 | Operating Revenue | 0 |
| Total Assets | 0 | Operating Expense | 0 |
| Current Liabilities | 0 | Operating Margin | 0 |
| Long Term Liabilities | 0 | Other Income | 0 |
| Total Equity | 0 | Other Expense | 0 |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 |

141544 FAMILY HOSPICE OF BELLEVILLE A

Nonprofit - Private

5110 WEST MAIN STREET 12/31/2017 365 Days Submitted

Hospice

BELLEVILLE, IL 62226

SAINT CLAIR

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

| | |
|-------------------|-------|
| Skilled Nursing | 0.3% |
| Nursing | 1.2% |
| Home Healthcare | 0.0% |
| Length of Stay | |
| Medicare LOS | |
| Current Ratio | 4.4 |
| Days to Collect | 48.9 |
| Avg Payment Days | 44.0 |
| Depreciation Rate | 0.0% |
| Return on Equity | 10.8% |

Balance Sheet

Income Statement

| | | | |
|------------------------|-----------|--------------------|-----------|
| Current Assets | 1,280,426 | Total Charges | 2,570,139 |
| Fixed Assets | 434,179 | Contract Allowance | 41,027 |
| Other Assets | 0 | Operating Revenue | 2,529,112 |
| Total Assets | 1,714,605 | Operating Expense | 2,375,430 |
| Current Liabilities | 292,536 | Operating Margin | 153,682 |
| Long Term Liabilities | 0 | Other Income | 0 |
| Total Equity | 1,422,069 | Other Expense | 0 |
| Total Liab. and Equity | 1,714,605 | Net Profit or Loss | 153,682 |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141607 FAYETTE COUNTY HEALTH DEPARTMENT HOSPICE

416 W EDWARDS STREET

Cost Report not filed.

VANDALIA, IL 62471

FAYETTE

Key Performance Ind.

PALMETTO HHH C

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

| | | | | | | |
|------------------------|---|--------------------|---|-----------------|-------------------|------|
| Current Assets | 0 | Total Charges | 0 | Home Healthcare | 0.0% | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity | 0.0% |

141560 FHN HOSPICE

773 WEST LINCOLN BLVD STE 403

Cost Report not filed.

FREEPORT, IL 61032

STEPHENSON

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

| | | | | | | |
|------------------------|---|--------------------|---|-----------------|-------------------|------|
| Current Assets | 0 | Total Charges | 0 | Home Healthcare | 0.0% | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity | 0.0% |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141638 GAFFEY HOME NURSING & HOSPICE, INC

3408 EAST 23RD STREET

Cost Report not filed.

STERLING, IL 61081

WHITESIDE

Key Performance Ind.

PALMETTO HHH C

Skilled Nursing 0.0%

Nursing 0.0%

Home Healthcare 0.0%

0.0% Length of Stay

0.0% Medicare LOS

0.0% Current Ratio

0.0% Days to Collect

0.0% Avg Payment Days

0.0% Depreciation Rate 0.0%

0.0% Return on Equity 0.0%

Balance Sheet

Income Statement

| | | | |
|------------------------|---|--------------------|---|
| Current Assets | 0 | Total Charges | 0 |
| Fixed Assets | 0 | Contract Allowance | 0 |
| Other Assets | 0 | Operating Revenue | 0 |
| Total Assets | 0 | Operating Expense | 0 |
| Current Liabilities | 0 | Operating Margin | 0 |
| Long Term Liabilities | 0 | Other Income | 0 |
| Total Equity | 0 | Other Expense | 0 |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 |

141613 GENTLE PRO HOSPICE SERVICES INC

Proprietary - Corporation

2060 E ALGONQUIN ROAD SUITE 701

12/31/2017 365 Days Submitted

Hospice

SCHAUMBURG, IL 60173

COOK

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Nursing 0.0%

Home Healthcare 0.0%

0.0% Length of Stay

100.0% Medicare LOS

609.9% Current Ratio 0.9

-509.9% Days to Collect 989.0

0.0% Avg Payment Days 191.9

0.0% Depreciation Rate 0.0%

-509.9% Return on Equity 156.4%

Balance Sheet

Income Statement

| | | | |
|------------------------|----------|--------------------|-----------|
| Current Assets | 238,802 | Total Charges | 86,422 |
| Fixed Assets | 8,020 | Contract Allowance | 0 |
| Other Assets | 0 | Operating Revenue | 86,422 |
| Total Assets | 247,923 | Operating Expense | 527,070 |
| Current Liabilities | 277,074 | Operating Margin | -440,648 |
| Long Term Liabilities | 252,630 | Other Income | 0 |
| Total Equity | -281,781 | Other Expense | 0 |
| Total Liab. and Equity | 247,923 | Net Profit or Loss | (440,648) |

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Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|--------------------------------------|-------------|-------------------------------|-------------|-----------------------------|----------|
| 141640 GOOD SAMARITAN HOSPICE | | | | Government - County | |
| 1002 COUNTRY CLUB ROAD PO BOX 516 | | 12/31/2017 365 Days Submitted | | Hospice | |
| LAWRENCEVILLE, IL 62439 | | | | | |
| LAWRENCE | | | | | |
| PALMETTO HHH C | | | | | |
| | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 3.5 |
| | | | | Days to Collect | 65,780.8 |
| | | | | Avg Payment Days | 2,034.3 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -2.7% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 131,562,004 | Total Charges | 914,630 | | |
| Fixed Assets | 204,719,836 | Contract Allowance | 546,796 | 59.8% | |
| Other Assets | 938,311 | Operating Revenue | 367,834 | 40.2% | |
| Total Assets | 337,220,151 | Operating Expense | 5,468,071 | 1,486.6% | |
| Current Liabilities | 37,796,533 | Operating Margin | -5,100,237 | - | |
| Long Term Liabilities | 113,876,659 | Other Income | 0 | 0.0% | |
| Total Equity | 185,546,959 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 337,220,151 | Net Profit or Loss | (5,100,237) | - | |
| | | | | 1,386.6% | |

| | | | | | |
|---------------------------------------|---|-------------------------|---|-----------------------------|------|
| 141558 GRAHAM HOSPITAL HOSPICE | | | | | |
| 225 W WALNUT | | Cost Report not filed. | | | |
| CANTON, IL 61520 | | | | | |
| FULTON | | | | | |
| PALMETTO HHH C | | | | | |
| | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | |
| | | | | Days to Collect | |
| | | | | Avg Payment Days | |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | |

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| | | | | | |
|--|----------|-------------------------------|-----------|-----------------------------|-------|
| 141692 GREAT LAKES CARING | | | | Proprietary - Corporation | |
| 924 CLOCKTOWER DRIVE SUITE B | | 12/31/2017 237 Days Submitted | | Hospice | |
| SPRINGFIELD, IL 62704 | | | | | |
| SANGAMON | | | | | |
| PALMETTO HHH C | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.8% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | |
| | | | | Days to Collect | 0.0 |
| | | | | Avg Payment Days | 0.0 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 89.6% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 485,891 | Total Charges | 485,891 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 485,891 | 100.0% | |
| Total Assets | 485,891 | Operating Expense | 618,458 | 127.3% | |
| Current Liabilities | 0 | Operating Margin | -132,567 | -27.3% | |
| Long Term Liabilities | 633,783 | Other Income | 0 | 0.0% | |
| Total Equity | -147,892 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 485,891 | Net Profit or Loss | (132,567) | -27.3% | |
| 141630 GUARDIAN HEALTHCARE & HOSPICE, LLC | | | | | |
| 1775 WINNETKA ROAD, STE 101 | | 12/31/2017 365 Days Submitted | | Hospice | |
| NORTHFIELD, IL 60093 | | | | | |
| COOK | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.1% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 1.5 |
| | | | | Days to Collect | 48.3 |
| | | | | Avg Payment Days | 10.9 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 83.8% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 543,499 | Total Charges | 3,899,929 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 3,899,929 | 100.0% | |
| Total Assets | 543,499 | Operating Expense | 3,739,361 | 95.9% | |
| Current Liabilities | 351,953 | Operating Margin | 160,568 | 4.1% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 191,546 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 543,499 | Net Profit or Loss | 160,568 | 4.1% | |

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| | | | | | |
|-------------------------------------|-----------|-------------------------------|------------|-------------------------------|-------|
| 141633 GUIDING LIGHT HOSPICE | | | | Proprietary - Corporation | |
| 2285 US ROUTE 52 | | 12/31/2017 365 Days Submitted | | Hospice | |
| SERENA, IL 60549 | | | | | |
| LA SALLE | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 0.4 |
| | | | | Days to Collect | 0.0 |
| | | | | Avg Payment Days | 2.4 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 93.9% |
| Balance Sheet | | | | | |
| Current Assets | 30,221 | Total Charges | 2,059,370 | | |
| Fixed Assets | 24,907 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 1,320 | Operating Revenue | 2,059,370 | 100.0% | |
| Total Assets | 56,448 | Operating Expense | 2,073,335 | 100.7% | |
| Current Liabilities | 70,389 | Operating Margin | -13,965 | -0.7% | |
| Long Term Liabilities | 927 | Other Income | 0 | 0.0% | |
| Total Equity | -14,868 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 56,448 | Net Profit or Loss | (13,965) | -0.7% | |
| Income Statement | | | | | |
| 141569 HARBOR LIGHT HOSPICE | | | | | |
| 800 ROOSEVELT ROAD BLDG C STE 206 | | | | 12/31/2017 365 Days Submitted | |
| Hospice | | | | | |
| GLEN ELLYN, IL 60137 | | | | | |
| DUPAGE | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.8% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 3.7 |
| | | | | Days to Collect | 98.2 |
| | | | | Avg Payment Days | 19.3 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 20.5% |
| Balance Sheet | | | | | |
| Current Assets | 8,049,392 | Total Charges | 29,168,197 | | |
| Fixed Assets | 285,564 | Contract Allowance | 596,251 | 2.0% | |
| Other Assets | 35,200 | Operating Revenue | 28,571,946 | 98.0% | |
| Total Assets | 9,502,084 | Operating Expense | 27,066,299 | 94.7% | |
| Current Liabilities | 2,171,602 | Operating Margin | 1,505,647 | 5.3% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 7,330,482 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 9,502,084 | Net Profit or Loss | 1,505,647 | 5.3% | |
| Income Statement | | | | | |

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| | | | | | |
|--|---------|------------------------------|-----------|-----------------------------|-------------------|
| 141586 HEARTLAND HOME HEALTH CARE AND HOSPICE | | | | Proprietary - Corporation | |
| 2100 SANDERS ROAD STE 100 | | 9/30/2017 365 Days Submitted | | Hospice | |
| NORTHBROOK, IL 60062 | | | | | |
| COOK | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.1% |
| | | | | Nursing | 0.4% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 913,477 | Total Charges | 6,133,933 | | |
| Fixed Assets | 8,544 | Contract Allowance | 450,476 | 7.3% | Length of Stay |
| Other Assets | 8,139 | Operating Revenue | 5,683,457 | 92.7% | Medicare LOS |
| Total Assets | 930,160 | Operating Expense | 4,277,693 | 75.3% | Current Ratio |
| Current Liabilities | 434,277 | Operating Margin | 1,405,764 | 24.7% | Days to Collect |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 495,883 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 930,160 | Net Profit or Loss | 1,405,764 | 24.7% | Return on Equity |

| | | | | | |
|--|-----------|-------------------------------|-----------|-----------------------------|-------------------|
| 141636 HEARTLAND HOME HEALTH CARE AND HOSPICE | | | | Proprietary - Corporation | |
| 333 SALEM PLACE, SUITE 165 | | 12/31/2017 365 Days Submitted | | Hospice | |
| FAIRVIEW HEIGHTS, IL 62208 | | | | | |
| SAINT CLAIR | | | | | |
| | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.1% |
| | | | | Nursing | 4.1% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 1,122,700 | Total Charges | 9,358,048 | | |
| Fixed Assets | 9,334 | Contract Allowance | 389,165 | 4.2% | Length of Stay |
| Other Assets | 0 | Operating Revenue | 8,968,883 | 95.8% | Medicare LOS |
| Total Assets | 1,132,034 | Operating Expense | 6,646,521 | 74.1% | Current Ratio |
| Current Liabilities | 594,581 | Operating Margin | 2,322,362 | 25.9% | Days to Collect |
| Long Term Liabilities | 5,517 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 531,936 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 1,132,034 | Net Profit or Loss | 2,322,362 | 25.9% | Return on Equity |

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| | | | | | |
|---|---------|-------------------------------|-----------------------------|--------|--|
| 141619 HEARTLAND HOSPICE | | | Proprietary - Corporation | | |
| 20960 S FRANKFORT SQUARE ROAD, UNIT C FRANKFORT, IL 60423 | | 12/31/2017 365 Days Submitted | Hospice | | |
| WILL | | | Key Performance Ind. | | |
| NATIONAL GOVERNMENT SERVICES | | | Skilled Nursing | 0.2% | |
| | | | Nursing | 0.4% | |
| | | | Home Healthcare | 0.0% | |
| | | | Length of Stay | | |
| | | | Medicare LOS | | |
| | | | Current Ratio | 2.1 | |
| | | | Days to Collect | 113.1 | |
| | | | Avg Payment Days | 22.3 | |
| | | | Depreciation Rate | 0.0% | |
| | | | Return on Equity | 299.7% | |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 605,084 | Total Charges | 3,471,220 | | |
| Fixed Assets | 62,531 | Contract Allowance | -425,020 | -12.2% | |
| Other Assets | 9,418 | Operating Revenue | 3,896,240 | 112.2% | |
| Total Assets | 677,033 | Operating Expense | 2,743,380 | 70.4% | |
| Current Liabilities | 285,221 | Operating Margin | 1,152,860 | 29.6% | |
| Long Term Liabilities | 7,097 | Other Income | 0 | 0.0% | |
| Total Equity | 384,715 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 677,033 | Net Profit or Loss | 1,152,860 | 29.6% | |

| | | | | | |
|---|---------|-------------------------------|-----------------------------|-------|--|
| 141506 HEARTLAND HOSPICE SERVICES | | | Proprietary - Corporation | | |
| 1010 EXECUTIVE DR STE 200 WESTMONT, IL 60559 | | 12/31/2017 365 Days Submitted | Hospice | | |
| DUPAGE | | | Key Performance Ind. | | |
| NATIONAL GOVERNMENT SERVICES | | | Skilled Nursing | 0.1% | |
| | | | Nursing | 0.3% | |
| | | | Home Healthcare | 0.0% | |
| | | | Length of Stay | | |
| | | | Medicare LOS | | |
| | | | Current Ratio | 2.2 | |
| | | | Days to Collect | 94.7 | |
| | | | Avg Payment Days | 20.4 | |
| | | | Depreciation Rate | 0.0% | |
| | | | Return on Equity | 35.5% | |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 462,787 | Total Charges | 3,113,842 | | |
| Fixed Assets | 15,438 | Contract Allowance | 220,389 | 7.1% | |
| Other Assets | 4,600 | Operating Revenue | 2,893,453 | 92.9% | |
| Total Assets | 482,825 | Operating Expense | 2,803,073 | 96.9% | |
| Current Liabilities | 214,996 | Operating Margin | 90,380 | 3.1% | |
| Long Term Liabilities | 12,959 | Other Income | 0 | 0.0% | |
| Total Equity | 254,870 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 482,825 | Net Profit or Loss | 90,380 | 3.1% | |

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| | | | | | |
|---|-----------|-------------------------------|------------|-----------------------------|--------|
| 141617 HEARTLAND HOSPICE SERVICES, INC | | | | Proprietary - Corporation | |
| 363 FINANCIAL COURT UNIT 300 | | 12/31/2017 365 Days Submitted | | Hospice | |
| ROCKFORD, IL 61107 | | | | | |
| WINNEBAGO | | | | Key Performance Ind. | |
| NATIONAL GOVERNMENT SERVICES | | | | Skilled Nursing | 0.1% |
| | | | | Nursing | 1.7% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 2.1 |
| | | | | Days to Collect | 87.3 |
| | | | | Avg Payment Days | 25.6 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 316.6% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 1,544,438 | Total Charges | 10,575,322 | | |
| Fixed Assets | 11,387 | Contract Allowance | 178,557 | 1.7% | |
| Other Assets | 8,097 | Operating Revenue | 10,396,765 | 98.3% | |
| Total Assets | 1,563,922 | Operating Expense | 7,816,777 | 75.2% | |
| Current Liabilities | 749,050 | Operating Margin | 2,579,988 | 24.8% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 814,872 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 1,563,922 | Net Profit or Loss | 2,579,988 | 24.8% | |

| | | | | | |
|--|---|-------------------------|---|-----------------------------|------|
| 141631 HENDERSON COUNTY HEALTH DEPARTMENT HOSPICE | | | | | |
| 208 WEST ELM STREET | | Cost Report not filed. | | | |
| GLADSTONE, IL 61437 | | | | | |
| HENDERSON | | | | Key Performance Ind. | |
| PALMETTO GBA | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | |
| | | | | Days to Collect | |
| | | | | Avg Payment Days | |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | |

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| | | | | | |
|---|--|-------------------------------|--|-----------------------------|--------|
| 141635 HOME BOUND HEALTHCARE HOSPICE LLC | | | | Proprietary - Corporation | |
| 14216 MCCARTHY RD | | 12/31/2017 365 Days Submitted | | Hospice | |
| LEMONT, IL 60439 | | | | | |
| DUPAGE | | | | | |
| | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 0.1 |
| | | | | Days to Collect | 35.2 |
| | | | | Avg Payment Days | 0.0 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -14.0% |
| <hr/> | | | | | |
| 141627 HOPE PALLIATIVE AND HOSPICE CARE | | | | Proprietary - Corporation | |
| 1274 W NORTHWEST HWY | | 12/31/2017 365 Days Submitted | | Hospice | |
| PALATINE, IL 60067 | | | | | |
| COOK | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.1% |
| | | | | Nursing | 0.6% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 1.3 |
| | | | | Days to Collect | 55.7 |
| | | | | Avg Payment Days | 89.1 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 90.6% |
| <hr/> | | | | | |

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141512 HORIZON HOSPICE & PALLIATIVE CARE

833 WEST CHICAGO AVENUE

Cost Report not filed.

CHICAGO, IL 60622

COOK

Key Performance Ind.

PALMETTO HHH C

Skilled Nursing 0.0%

Balance Sheet

Income Statement

| Balance Sheet | | Income Statement | | Key Performance Ind. | |
|------------------------|---|--------------------|---|----------------------|-------------------|
| Current Assets | 0 | Total Charges | 0 | Home Healthcare | 0.0% |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Nursing |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Length of Stay |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Medicare LOS |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Current Ratio |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Days to Collect |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Avg Payment Days |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Depreciation Rate |
| | | | | 0.0% | Return on Equity |

141612 HOSPICE-CARE OF SANGAMON COUNTY

Nonprofit - Private

319 EAST MADISON, SUITE 2M

12/31/2017 365 Days Submitted

Hospice

SPRINGFIELD, IL 62701

SANGAMON

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

| Balance Sheet | | Income Statement | | Key Performance Ind. | |
|------------------------|---------|--------------------|---------|----------------------|-------------------|
| Current Assets | 468,562 | Total Charges | 263,365 | Home Healthcare | 0.0% |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Nursing |
| Other Assets | 0 | Operating Revenue | 263,365 | 100.0% | Length of Stay |
| Total Assets | 468,562 | Operating Expense | 223,918 | 85.0% | Medicare LOS |
| Current Liabilities | 110,006 | Operating Margin | 39,447 | 15.0% | Current Ratio |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Days to Collect |
| Total Equity | 358,556 | Other Expense | 0 | 0.0% | Avg Payment Days |
| Total Liab. and Equity | 468,562 | Net Profit or Loss | 39,447 | 15.0% | Depreciation Rate |
| | | | | | Return on Equity |
| | | | | | 11.0% |

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| | | | | | |
|-------------------------------------|-------------|-------------------------------|--------------|-----------------------------|-------------------|
| 141623 HOSPICE ADVANTAGE LLC | | | | Proprietary - Corporation | |
| 4371 VENTURE DRIVE, SUITE 4373 | | 12/31/2017 365 Days Submitted | | Hospice | |
| PERU, IL 61354 | | | | | |
| LA SALLE | | | | | |
| PALMETTO HHH C | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 104,417,619 | Total Charges | 526,438,557 | | |
| Fixed Assets | 12,486,896 | Contract Allowance | 17,562 | 0.0% | Length of Stay |
| Other Assets | 5,333,851 | Operating Revenue | 526,420,995 | 100.0% | Medicare LOS |
| Total Assets | 818,162,453 | Operating Expense | 556,658,322 | 105.7% | Current Ratio |
| Current Liabilities | 77,870,438 | Operating Margin | -30,237,327 | -5.7% | Days to Collect |
| Long Term Liabilities | 495,624,983 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 244,667,032 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 818,162,453 | Net Profit or Loss | (30,237,327) | -5.7% | Return on Equity |

| | | | | | |
|---|---------|-------------------------------|-----------|-----------------------------|-------------------|
| 141621 HOSPICE CARE OF AMERICA INC | | | | Proprietary - Corporation | |
| 3815 NORTH MULFORD | | 12/31/2017 365 Days Submitted | | Hospice | |
| ROCKFORD, IL 61114 | | | | | |
| WINNEBAGO | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 276,760 | Total Charges | 2,378,649 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay |
| Other Assets | 410,244 | Operating Revenue | 2,378,649 | 100.0% | Medicare LOS |
| Total Assets | 688,639 | Operating Expense | 2,333,670 | 98.1% | Current Ratio |
| Current Liabilities | 82,728 | Operating Margin | 44,979 | 1.9% | Days to Collect |
| Long Term Liabilities | 558,932 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 46,979 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 688,639 | Net Profit or Loss | 44,979 | 1.9% | Return on Equity |

All Providers

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141540 HOSPICE CARE OF ILLINOIS

701 NORTH FIRST STREET

Cost Report not filed.

SPRINGFIELD, IL 62702

SANGAMON

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

Current Assets

0

Total Charges

0

Home Healthcare 0.0%

Fixed Assets

0

Contract Allowance

0

0.0% Length of Stay

Other Assets

0

Operating Revenue

0

0.0% Medicare LOS

Total Assets

0

Operating Expense

0

0.0% Current Ratio

Current Liabilities

0

Operating Margin

0

0.0% Days to Collect

Long Term Liabilities

0

Other Income

0

0.0% Avg Payment Days

Total Equity

0

Other Expense

0

0.0% Depreciation Rate 0.0%

Total Liab. and Equity

0

Net Profit or Loss

0

0.0% Return on Equity 0.0%

141581 HOSPICE COMPASSUS - NORTHWEST ILLINOIS

Proprietary - Partnership

755 NORTH HENDERSON STREET

12/31/2017 365 Days Submitted

Hospice

GALESBURG, IL 61401

KNOX

Key Performance Ind.

BLUE CROSS (IOWA/SOUTH DAKOTA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

Current Assets

104,417,619

Total Charges

526,699,355

Home Healthcare 0.0%

Fixed Assets

12,486,896

Contract Allowance

278,360

0.1% Length of Stay

Other Assets

5,333,851

Operating Revenue

526,420,995

99.9% Medicare LOS

Total Assets

818,162,453

Operating Expense

556,658,322

105.7% Current Ratio

1.3

Current Liabilities

77,870,438

Operating Margin

-30,237,327

-5.7% Days to Collect

51.4

Long Term Liabilities

495,624,983

Other Income

0

0.0% Avg Payment Days

36.8

Total Equity

244,667,032

Other Expense

0

0.0% Depreciation Rate 0.0%

Total Liab. and Equity

818,162,453

Net Profit or Loss

(30,237,327)

-5.7% Return on Equity -12.4%

All Providers

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|--|------------|-------------------------------|------------|---------------------------|--------|
| 141648 HOSPICE OF GREATER CHICAGO LLC | | | | Proprietary - Partnership | |
| 1727 S INDIANA AVE SUITE G2 | | 12/31/2017 365 Days Submitted | | Hospice | |
| CHICAGO, IL 60616 | | | | | |
| COOK | | | | | |
| Key Performance Ind. | | | | | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.1% |
| | | | | Nursing | 0.6% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 0.8 |
| | | | | Days to Collect | 87.4 |
| | | | | Avg Payment Days | 63.2 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -59.7% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 4,544,523 | Total Charges | 16,018,337 | | |
| Fixed Assets | 18,931 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 228,132 | Operating Revenue | 16,018,337 | 100.0% | |
| Total Assets | 4,791,586 | Operating Expense | 15,188,754 | 94.8% | |
| Current Liabilities | 6,005,514 | Operating Margin | 829,583 | 5.2% | |
| Long Term Liabilities | 176,407 | Other Income | 0 | 0.0% | |
| Total Equity | -1,390,335 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 4,791,586 | Net Profit or Loss | 829,583 | 5.2% | |
| 141596 HOSPICE OF ILLINOIS | | | | | |
| 1400 EAST TOUHY AVENUE SUITE 160 | | 12/31/2017 365 Days Submitted | | Hospice | |
| DES PLAINES, IL 60018 | | | | | |
| COOK | | | | | |
| Key Performance Ind. | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | |
| | | | | Days to Collect | 68.5 |
| | | | | Avg Payment Days | 0.0 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 44.2% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 1,174,204 | Total Charges | 6,523,117 | | |
| Fixed Assets | 12,960 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 3,555,498 | Operating Revenue | 6,523,117 | 100.0% | |
| Total Assets | 4,742,662 | Operating Expense | 4,425,297 | 67.8% | |
| Current Liabilities | 0 | Operating Margin | 2,097,820 | 32.2% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 4,742,662 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 4,742,662 | Net Profit or Loss | 2,097,820 | 32.2% | |

All Providers

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|--|------------|-------------------------------|------------|-----------------------------|-------|
| 141556 HOSPICE OF KANKAKEE VALLEY INC | | | | Nonprofit - Private | |
| 482 MAIN STREET NW | | 12/31/2017 365 Days Submitted | | Hospice | |
| BOURBONNAIS, IL 60914 | | | | | |
| KANKAKEE | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.3% |
| | | | | Nursing | 2.8% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 6.2 |
| | | | | Days to Collect | 68.8 |
| | | | | Avg Payment Days | 36.8 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 13.2% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 5,074,171 | Total Charges | 14,286,879 | | |
| Fixed Assets | 1,696,252 | Contract Allowance | 4,335,240 | 30.3% | |
| Other Assets | 0 | Operating Revenue | 9,951,639 | 69.7% | |
| Total Assets | 14,695,177 | Operating Expense | 8,112,876 | 81.5% | |
| Current Liabilities | 817,259 | Operating Margin | 1,838,763 | 18.5% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 13,877,918 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 14,695,177 | Net Profit or Loss | 1,838,763 | 18.5% | |

| | | | | | |
|--|---|-------------------------|---|-----------------------------|------|
| 141511 HOSPICE OF LITTLE CO OF MARY H | | | | | |
| 9800 SOUTHWEST HIGHWAY | | Cost Report not filed. | | | |
| OAK LAWN, IL 60453 | | | | | |
| COOK | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | |
| | | | | Days to Collect | |
| | | | | Avg Payment Days | |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141542 HOSPICE OF SOUTHEASTERN ILLINOIS INC

800 EAST LOCUST STREET

Cost Report not filed.

OLNEY, IL 62450

RICHLAND

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

| | | | | | | |
|------------------------|---|--------------------|---|-----------------|-------------------|------|
| Current Assets | 0 | Total Charges | 0 | Home Healthcare | 0.0% | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity | 0.0% |

141504 HOSPICE OF SOUTHERN ILL, INC

Nonprofit - Private

305 S ILLINOIS ST

12/31/2017 365 Days Submitted

Hospice

BELLEVILLE, IL 62220

SAINT CLAIR

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.1%

Balance Sheet

Income Statement

Nursing 3.9%

| | | | | | | |
|------------------------|------------|--------------------|------------|-----------------|-------------------|------|
| Current Assets | 3,664,652 | Total Charges | 13,633,939 | Home Healthcare | 0.0% | |
| Fixed Assets | 1,810,624 | Contract Allowance | 65,106 | 0.5% | Length of Stay | |
| Other Assets | 113,112 | Operating Revenue | 13,568,833 | 99.5% | Medicare LOS | |
| Total Assets | 13,035,256 | Operating Expense | 12,446,017 | 91.7% | Current Ratio | 2.4 |
| Current Liabilities | 1,518,162 | Operating Margin | 1,122,816 | 8.3% | Days to Collect | 47.5 |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | 44.5 |
| Total Equity | 11,517,094 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 13,035,256 | Net Profit or Loss | 1,122,816 | 8.3% | Return on Equity | 9.7% |

All Providers

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|---|--|-------------------------------|--|-----------------------------|---------|
| 141529 HOSPICE OF THE CALUMET AREA INC | | | | Nonprofit - Private | |
| 3256 RIDGE ROAD, SUITE 207 | | 12/31/2017 365 Days Submitted | | Hospice | |
| LANSING, IL 60438 | | | | | |
| COOK | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 2.4 |
| | | | | Days to Collect | 572.0 |
| | | | | Avg Payment Days | (506.6) |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 11.4% |

| Balance Sheet | | Income Statement | | | |
|------------------------|-----------|--------------------|----------|--------|--|
| Current Assets | 1,126,473 | Total Charges | 492,465 | | |
| Fixed Assets | 1,583,032 | Contract Allowance | 92,751 | 18.8% | |
| Other Assets | 0 | Operating Revenue | 399,714 | 81.2% | |
| Total Assets | 6,846,209 | Operating Expense | -324,577 | -81.2% | |
| Current Liabilities | 478,394 | Operating Margin | 724,291 | 181.2% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 6,367,815 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 6,846,209 | Net Profit or Loss | 724,291 | 181.2% | |

| | | | | | |
|--|--|-------------------------------|--|-----------------------------|------|
| 141552 HOSPICE OF THE ROCK RIVER VALL | | | | Nonprofit - Private | |
| 2600 NORTH LOCUST STREET SUITE B | | 12/31/2017 365 Days Submitted | | Hospice | |
| STERLING, IL 61081 | | | | | |
| WHITESIDE | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 1.6% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 4.1 |
| | | | | Days to Collect | 44.5 |
| | | | | Avg Payment Days | 10.1 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 0.7% |

| Balance Sheet | | Income Statement | | | |
|------------------------|-----------|--------------------|-----------|-------|--|
| Current Assets | 734,449 | Total Charges | 2,637,257 | | |
| Fixed Assets | 1,046,377 | Contract Allowance | 73,427 | 2.8% | |
| Other Assets | 0 | Operating Revenue | 2,563,830 | 97.2% | |
| Total Assets | 1,883,844 | Operating Expense | 2,552,257 | 99.5% | |
| Current Liabilities | 178,986 | Operating Margin | 11,573 | 0.5% | |
| Long Term Liabilities | 2,135 | Other Income | 0 | 0.0% | |
| Total Equity | 1,702,723 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 1,883,844 | Net Profit or Loss | 11,573 | 0.5% | |

All Providers

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141658 HSHS HOSPICE SOUTHERN ILLINOIS

701 WEST TEMPLE AVE SUITE B Cost Report not filed.

EFFINGHAM, IL 62401

EFFINGHAM

Key Performance Ind.

PALMETTO HHH C

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

| | | | | | | |
|------------------------|---|--------------------|---|-----------------|-------------------|------|
| Current Assets | 0 | Total Charges | 0 | Home Healthcare | 0.0% | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity | 0.0% |

141533 ILLINOIS VALLEY HOSPICE

1305 6TH STREET Cost Report not filed.

PERU, IL 61354

LA SALLE

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

| | | | | | | |
|------------------------|---|--------------------|---|-----------------|-------------------|------|
| Current Assets | 0 | Total Charges | 0 | Home Healthcare | 0.0% | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity | 0.0% |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141535 INGALLS HOME HOSPICE

ONE INGALLS DRIVE, WYMAN GORDON PAV
 HARVEY, IL 60426

Cost Report not filed.

| | | | | | |
|-----------------------------|--|--|--|-----------------------------|------|
| COOK | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | |
| | | | | Days to Collect | |
| | | | | Avg Payment Days | |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 0.0% |

| Balance Sheet | | Income Statement | | | |
|------------------------|---|--------------------|---|------|--|
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | |

141653 INTEGRATED PALLIATIVE AND HOSPICE LLC

Proprietary - Partnership

900 TECHNOLOGY WAY, SUITE 280

12/31/2017 365 Days Submitted

Hospice

LIBERTYVILLE, IL 60048

| | | | | | |
|----------------|--|--|--|-----------------------------|--------|
| LAKE | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 1.7% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 99.3 |
| | | | | Days to Collect | 0.0 |
| | | | | Avg Payment Days | 0.0 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -17.1% |

| Balance Sheet | | Income Statement | | | |
|------------------------|---------|--------------------|----------|--------|--|
| Current Assets | 411,205 | Total Charges | 881,141 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 881,141 | 100.0% | |
| Total Assets | 411,205 | Operating Expense | 950,196 | 107.8% | |
| Current Liabilities | 4,140 | Operating Margin | -69,055 | -7.8% | |
| Long Term Liabilities | 3,295 | Other Income | 0 | 0.0% | |
| Total Equity | 403,770 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 411,205 | Net Profit or Loss | (69,055) | -7.8% | |

All Providers

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141616 IROQUOIS MEMORIAL HOSPICE

200 NORTH LAIRD LANE

Cost Report not filed.

WATSEKA, IL 60970

IROQUOIS

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

Current Assets

0

Total Charges

0

Home Healthcare 0.0%

Fixed Assets

0

Contract Allowance

0

0.0% Length of Stay

Other Assets

0

Operating Revenue

0

0.0% Medicare LOS

Total Assets

0

Operating Expense

0

0.0% Current Ratio

Current Liabilities

0

Operating Margin

0

0.0% Days to Collect

Long Term Liabilities

0

Other Income

0

0.0% Avg Payment Days

Total Equity

0

Other Expense

0

0.0% Depreciation Rate 0.0%

Total Liab. and Equity

0

Net Profit or Loss

0

0.0% Return on Equity 0.0%

141539 JOLIET AREA COMMUNITY HOSPICE

Nonprofit - Private

250 WATER STONE CIRCLE

12/31/2017 365 Days Submitted

Hospice

JOLIET, IL 60431

WILL

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 1.8%

Balance Sheet

Income Statement

Nursing 12.5%

Current Assets

11,005,590

Total Charges

24,731,142

Home Healthcare 0.0%

Fixed Assets

4,691,869

Contract Allowance

2,734,358

11.1% Length of Stay

Other Assets

0

Operating Revenue

21,996,784

88.9% Medicare LOS

Total Assets

28,227,738

Operating Expense

16,236,193

73.8% Current Ratio

4.8

Current Liabilities

2,308,275

Operating Margin

5,760,591

26.2% Days to Collect

158.8

Long Term Liabilities

56,231

Other Income

0

0.0% Avg Payment Days

51.9

Total Equity

25,863,232

Other Expense

0

0.0% Depreciation Rate 0.0%

Total Liab. and Equity

28,227,738

Net Profit or Loss

5,760,591

26.2% Return on Equity 22.3%

All Providers

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|-----------------------------------|------------|-------------------------------|-------------|-----------------------------|--------|
| 141525 JOURNEYCARE INC | | | | Nonprofit - Private | |
| 405 LAKE ZURICH ROAD | | 12/31/2017 365 Days Submitted | | Hospice | |
| BARRINGTON, IL 60010 | | | | | |
| LAKE | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.5% |
| | | | | Nursing | 17.2% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| Balance Sheet | | Income Statement | | Current Ratio | 1.8 |
| Current Assets | 27,554,875 | Total Charges | 128,009,346 | Days to Collect | 94.7 |
| Fixed Assets | 35,425,820 | Contract Allowance | 32,902,459 | Avg Payment Days | 28.2 |
| Other Assets | 1,049,121 | Operating Revenue | 95,106,887 | Depreciation Rate | 0.0% |
| Total Assets | 64,029,816 | Operating Expense | 92,584,411 | Return on Equity | 5.2% |
| Current Liabilities | 15,180,796 | Operating Margin | 2,522,476 | | |
| Long Term Liabilities | 404,935 | Other Income | 0 | | |
| Total Equity | 48,444,085 | Other Expense | 0 | | |
| Total Liab. and Equity | 64,029,816 | Net Profit or Loss | 2,522,476 | | |
| 141608 KINDRED HOSPICE | | | | Proprietary - Corporation | |
| 85 WEST ALGONQUIN ROAD, SUITE 100 | | 12/31/2017 365 Days Submitted | | Hospice | |
| ARLINGTON HEIGHTS, IL 60005 | | | | | |
| COOK | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.1% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| Balance Sheet | | Income Statement | | Current Ratio | 2.6 |
| Current Assets | 1,182,539 | Total Charges | 8,543,279 | Days to Collect | 49.2 |
| Fixed Assets | 64,088 | Contract Allowance | -150,994 | Avg Payment Days | 12.5 |
| Other Assets | 340,000 | Operating Revenue | 8,694,273 | Depreciation Rate | 0.0% |
| Total Assets | 1,586,627 | Operating Expense | 7,587,727 | Return on Equity | 100.9% |
| Current Liabilities | 463,676 | Operating Margin | 1,106,546 | | |
| Long Term Liabilities | 25,827 | Other Income | 0 | | |
| Total Equity | 1,097,124 | Other Expense | 0 | | |
| Total Liab. and Equity | 1,586,627 | Net Profit or Loss | 1,106,546 | | |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|---------------------------------|--|-------------------------------|--|-----------------------------|------|
| 141610 KINDRED HOSPICE | | | | Proprietary - Corporation | |
| 800 ENTERPRISE DRIVE, SUITE 111 | | 12/31/2017 365 Days Submitted | | Hospice | |
| OAK BROOK, IL 60523 | | | | | |
| DUPAGE | | | | | |
| PALMETTO HHH C | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.2% |
| | | | | Nursing | 0.4% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 1.2 |
| | | | | Days to Collect | 20.5 |
| | | | | Avg Payment Days | 11.1 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 8.0% |

| Balance Sheet | | Income Statement | | | |
|------------------------|---------|-------------------------|-----------|-------|--|
| Current Assets | 251,992 | Total Charges | 4,414,775 | | |
| Fixed Assets | 30,975 | Contract Allowance | 27,612 | 0.6% | |
| Other Assets | 340,000 | Operating Revenue | 4,387,163 | 99.4% | |
| Total Assets | 622,967 | Operating Expense | 4,355,853 | 99.3% | |
| Current Liabilities | 207,464 | Operating Margin | 31,310 | 0.7% | |
| Long Term Liabilities | 22,964 | Other Income | 0 | 0.0% | |
| Total Equity | 392,539 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 622,967 | Net Profit or Loss | 31,310 | 0.7% | |

| | | | | | |
|---|--|------------------------------|--|-----------------------------|---------|
| 141602 KISHHEALTH SYSTEM HOSPICE | | | | Nonprofit - Private | |
| 2727 SYCAMORE ROAD, SUITE 1B | | 8/31/2017 365 Days Submitted | | Hospice | |
| DEKALB, IL 60115 | | | | | |
| DEKALB | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.5% |
| | | | | Nursing | 1.8% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 2.0 |
| | | | | Days to Collect | 72.0 |
| | | | | Avg Payment Days | 19.0 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -139.6% |

| Balance Sheet | | Income Statement | | | |
|------------------------|---------|-------------------------|-----------|--------|--|
| Current Assets | 728,735 | Total Charges | 1,918,850 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 1,918,850 | 100.0% | |
| Total Assets | 728,735 | Operating Expense | 2,430,937 | 126.7% | |
| Current Liabilities | 361,963 | Operating Margin | -512,087 | -26.7% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 366,772 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 728,735 | Net Profit or Loss | (512,087) | -26.7% | |

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| | | | | | |
|---|--|-------------------------------|--|-----------------------------|-------|
| 141624 LEXINGTON HOSPICE SERVICES, LLC | | | | Proprietary - Other | |
| 1300 S MAIN STREET | | 12/31/2017 365 Days Submitted | | Hospice | |
| LOMBARD, IL 60148 | | | | | |
| DUPAGE | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.2% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 3.6 |
| | | | | Days to Collect | 170.5 |
| | | | | Avg Payment Days | 11.4 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 35.8% |

| Balance Sheet | | Income Statement | | | |
|------------------------|-----------|--------------------|------------|-------|--|
| Current Assets | 9,255,515 | Total Charges | 11,142,115 | | |
| Fixed Assets | 8,946 | Contract Allowance | 1,727,664 | 15.5% | |
| Other Assets | 0 | Operating Revenue | 9,414,451 | 84.5% | |
| Total Assets | 9,264,461 | Operating Expense | 7,732,893 | 82.1% | |
| Current Liabilities | 2,539,321 | Operating Margin | 1,681,558 | 17.9% | |
| Long Term Liabilities | 2,024,780 | Other Income | 0 | 0.0% | |
| Total Equity | 4,700,360 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 9,264,461 | Net Profit or Loss | 1,681,558 | 17.9% | |

| | | | | | |
|--|--|------------------------|--|-----------------------------|------|
| 141599 LINCOLNLAND HOSPICE OF SARAH B | | | | | |
| 1004 HEALTH CENTER DRIVE SUITE 202 | | Cost Report not filed. | | | |
| MATTOON, IL 61938 | | | | | |
| COLES | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | |
| | | | | Days to Collect | |
| | | | | Avg Payment Days | |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 0.0% |

| Balance Sheet | | Income Statement | | | |
|------------------------|---|--------------------|---|------|--|
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | |

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141548 LOURDES HOSPICE

616 MARKET ST

Cost Report not filed.

METROPOLIS, IL 62960

MASSAC

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

| | | | | | | |
|------------------------|---|--------------------|---|-----------------|-------------------|------|
| Current Assets | 0 | Total Charges | 0 | Home Healthcare | 0.0% | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity | 0.0% |

141629 LOVING HANDS HOSPICE

Proprietary - Corporation

6535 NORTH OLMSTEAD AVENUE, SUITE 150

12/31/2017 365 Days Submitted

Hospice

CHICAGO, IL 60631

COOK

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 4.6%

| | | | | | | |
|------------------------|---------|--------------------|-----------|-----------------|-------------------|-------|
| Current Assets | 840,697 | Total Charges | 3,640,605 | Home Healthcare | 0.0% | |
| Fixed Assets | 25,672 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 3,640,605 | 100.0% | Medicare LOS | |
| Total Assets | 866,369 | Operating Expense | 3,427,776 | 94.2% | Current Ratio | 21.5 |
| Current Liabilities | 39,038 | Operating Margin | 212,829 | 5.8% | Days to Collect | 0.0 |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | 3.5 |
| Total Equity | 827,331 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 866,369 | Net Profit or Loss | 212,829 | 5.8% | Return on Equity | 25.7% |

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Sample Hospice reports from the Halmanac.com website.

141566 LOYOLA MEDICINE HOSPICE

2301 W 22ND STREET

Cost Report not filed.

OAK BROOK, IL 60523

DUPAGE

Key Performance Ind.

PALMETTO HHH C

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

| | | | | | | |
|------------------------|---|--------------------|---|-----------------|-------------------|------|
| Current Assets | 0 | Total Charges | 0 | Home Healthcare | 0.0% | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity | 0.0% |

141625 MAXIMUM HOSPICE AND PALLIATIVE CARE

8327 S SOUTH CHICAGO AVENUE, STE B

Cost Report not filed.

CHICAGO, IL 60617

COOK

Key Performance Ind.

PALMETTO HHH C

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

| | | | | | | |
|------------------------|---|--------------------|---|-----------------|-------------------|------|
| Current Assets | 0 | Total Charges | 0 | Home Healthcare | 0.0% | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate | 0.0% |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity | 0.0% |

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| 141524 MDH HOSPICE,THE | | Cost Report not filed. | | | |
|--|---------|-------------------------------|---------|-----------------------------|--------|
| 525 E GRANT ST | | | | | |
| MACOMB, IL 61455 | | | | | |
| MCDONOUGH | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | 0.0% Length of Stay | |
| | | | | 0.0% Medicare LOS | |
| | | | | 0.0% Current Ratio | |
| | | | | 0.0% Days to Collect | |
| | | | | 0.0% Avg Payment Days | |
| | | | | 0.0% Depreciation Rate | 0.0% |
| | | | | 0.0% Return on Equity | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | |
| 141691 MERIDIAN PALLIATIVE & HOSPCIE CARE SERVICES LLC | | Proprietary - Partnership | | | |
| 4 N DEER POINT DRIVE SUITE 1006 | | 12/31/2017 271 Days Submitted | | Hospice | |
| HAINESVILLE, IL 60030 | | | | | |
| LAKE | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | 0.0% Length of Stay | |
| | | | | 100.0% Medicare LOS | |
| | | | | 43.5% Current Ratio | 106.9 |
| | | | | 56.5% Days to Collect | 225.6 |
| | | | | 0.0% Avg Payment Days | 5.0 |
| | | | | 0.0% Depreciation Rate | 0.0% |
| | | | | 56.5% Return on Equity | 100.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 222,045 | Total Charges | 256,766 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 256,766 | 100.0% | |
| Total Assets | 222,045 | Operating Expense | 111,593 | 43.5% | |
| Current Liabilities | 2,077 | Operating Margin | 145,173 | 56.5% | |
| Long Term Liabilities | 74,795 | Other Income | 0 | 0.0% | |
| Total Equity | 145,173 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 222,045 | Net Profit or Loss | 145,173 | 56.5% | |

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Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|---|------------|-------------------------------|-----------|-----------------------------|---------|
| 141527 MIDWEST PALLIATIVE & HOSPICE CARECENTER | | | | Nonprofit - Private | |
| 2050 CLAIRE COURT | | 12/31/2017 365 Days Submitted | | Hospice | |
| GLENVIEW, IL 60025 | | | | | |
| COOK | | | | | |
| | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.5% |
| | | | | Nursing | 1.3% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 1.8 |
| | | | | Days to Collect | 1,334.0 |
| | | | | Avg Payment Days | 616.3 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 5.2% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 27,554,875 | Total Charges | 8,408,073 | | |
| Fixed Assets | 35,425,820 | Contract Allowance | 1,655,253 | 19.7% | |
| Other Assets | 1,049,121 | Operating Revenue | 6,752,820 | 80.3% | |
| Total Assets | 64,029,816 | Operating Expense | 4,230,344 | 62.6% | |
| Current Liabilities | 15,180,796 | Operating Margin | 2,522,476 | 37.4% | |
| Long Term Liabilities | 404,935 | Other Income | 0 | 0.0% | |
| Total Equity | 48,444,085 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 64,029,816 | Net Profit or Loss | 2,522,476 | 37.4% | |
| 141618 MONARCH HOSPICE & PALLIATIVE CARE, INC | | | | | |
| 7444 W WILSON AVE, SUITE 102 | | 12/31/2017 365 Days Submitted | | Proprietary - Corporation | |
| HARWOOD HEIGHTS, IL 60706 | | | | | |
| COOK | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 2.9 |
| | | | | Days to Collect | 327.5 |
| | | | | Avg Payment Days | 124.7 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -0.2% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 1,719,926 | Total Charges | 1,795,161 | | |
| Fixed Assets | 0 | Contract Allowance | 44,441 | 2.5% | |
| Other Assets | 0 | Operating Revenue | 1,750,720 | 97.5% | |
| Total Assets | 1,719,926 | Operating Expense | 1,752,684 | 100.1% | |
| Current Liabilities | 598,738 | Operating Margin | -1,964 | -0.1% | |
| Long Term Liabilities | 90,433 | Other Income | 0 | 0.0% | |
| Total Equity | 1,030,755 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 1,719,926 | Net Profit or Loss | (1,964) | -0.1% | |

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| | | | | | |
|---|-----------|-------------------------------|------------|-----------------------------|-------|
| 141520 NORTHERN ILLINOIS HOSPICE | | | | Nonprofit - Private | |
| 4215 NEWBURG ROAD | | 12/31/2017 365 Days Submitted | | Hospice | |
| ROCKFORD, IL 61108 | | | | | |
| WINNEBAGO | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.2% |
| | | | | Nursing | 0.1% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 5.0 |
| | | | | Days to Collect | 92.8 |
| | | | | Avg Payment Days | 60.9 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 24.8% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 5,422,574 | Total Charges | 12,479,311 | | |
| Fixed Assets | 468,320 | Contract Allowance | 4,533,542 | 36.3% | |
| Other Assets | 0 | Operating Revenue | 7,945,769 | 63.7% | |
| Total Assets | 7,025,193 | Operating Expense | 6,483,765 | 81.6% | |
| Current Liabilities | 1,083,156 | Operating Margin | 1,462,004 | 18.4% | |
| Long Term Liabilities | 41,499 | Other Income | 0 | 0.0% | |
| Total Equity | 5,900,538 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 7,025,193 | Net Profit or Loss | 1,462,004 | 18.4% | |

| | | | | | |
|--|---|-------------------------|---|-----------------------------|------|
| 141522 NORTSHORE UNIVERSITY HEALTHSYSTEM HOME & HOSPICE | | | | | |
| 4901 SEARLE PARKWAY, SUITE 160 | | Cost Report not filed. | | | |
| SKOKIE, IL 60077 | | | | | |
| COOK | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | |
| | | | | Days to Collect | |
| | | | | Avg Payment Days | |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 0 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | |

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Sample Hospice reports from the Halmanac.com website.

141518 NORTHWESTERN MEDICINE HOME HEALTH AND HOSPICE

690 E NORTH AVENUE

Cost Report not filed.

CAROL STREAM, IL 60188

DUPAGE

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Nursing 0.0%

Home Healthcare 0.0%

0.0% Length of Stay

0.0% Medicare LOS

0.0% Current Ratio

0.0% Days to Collect

0.0% Avg Payment Days

0.0% Depreciation Rate 0.0%

0.0% Return on Equity 0.0%

Balance Sheet

Income Statement

| | | | |
|------------------------|---|--------------------|---|
| Current Assets | 0 | Total Charges | 0 |
| Fixed Assets | 0 | Contract Allowance | 0 |
| Other Assets | 0 | Operating Revenue | 0 |
| Total Assets | 0 | Operating Expense | 0 |
| Current Liabilities | 0 | Operating Margin | 0 |
| Long Term Liabilities | 0 | Other Income | 0 |
| Total Equity | 0 | Other Expense | 0 |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 |

141662 OASIS HOSPICE & PALLIATIVE CARE INC

Proprietary - Corporation

11700 S WESTERN AVENUE SUITE 13-14

12/31/2017 365 Days Submitted

Hospice

CHICAGO, IL 60643

COOK

Key Performance Ind.

PALMETTO HHH C

Skilled Nursing 0.1%

Nursing 0.1%

Home Healthcare 0.0%

0.0% Length of Stay

100.0% Medicare LOS

88.8% Current Ratio 0.7

11.2% Days to Collect 71.5

0.0% Avg Payment Days 142.6

0.0% Depreciation Rate 0.0%

11.2% Return on Equity -20.4%

Balance Sheet

Income Statement

| | | | |
|------------------------|----------|--------------------|---------|
| Current Assets | 184,399 | Total Charges | 711,176 |
| Fixed Assets | 5,016 | Contract Allowance | 0 |
| Other Assets | 2,215 | Operating Revenue | 711,176 |
| Total Assets | 191,630 | Operating Expense | 631,311 |
| Current Liabilities | 246,679 | Operating Margin | 79,865 |
| Long Term Liabilities | 335,704 | Other Income | 0 |
| Total Equity | -390,753 | Other Expense | 0 |
| Total Liab. and Equity | 191,630 | Net Profit or Loss | 79,865 |

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Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|------------------------------|--|------------------------------|--|-----------------------------|---------|
| 141546 OSF HOSPICE | | | | Nonprofit - Church | |
| 2265 WEST ALTORFER DRIVE | | 9/30/2017 365 Days Submitted | | Hospice | |
| PEORIA, IL 61615 | | | | | |
| PEORIA | | | | | |
| WISCONSIN PHYSICIANS SERVICE | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.2% |
| | | | | Nursing | 12.3% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 0.4 |
| | | | | Days to Collect | 430.8 |
| | | | | Avg Payment Days | 143.8 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 31.4% |
| <hr/> | | | | | |
| 141605 OSF HOSPICE | | | | Nonprofit - Church | |
| 5501 E STATE STREET | | 9/30/2017 365 Days Submitted | | Hospice | |
| ROCKFORD, IL 61108 | | | | | |
| WINNEBAGO | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.4% |
| | | | | Nursing | 3.4% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 0.4 |
| | | | | Days to Collect | 1,113.7 |
| | | | | Avg Payment Days | 252.3 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 31.4% |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| 141601 OSF HOSPICE - EASTERN REGION | | | | Nonprofit - Church | |
|-------------------------------------|-------------|------------------------------|-------------|-----------------------------|---------|
| 211 LANDMARK DR, SUITE D3 | | 9/30/2017 365 Days Submitted | | Hospice | |
| NORMAL, IL 61761 | | | | | |
| MCLEAN | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.1% |
| | | | | Nursing | 2.8% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 0.4 |
| | | | | Days to Collect | 1,196.5 |
| | | | | Avg Payment Days | 260.9 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 31.4% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 14,642,745 | Total Charges | 4,696,468 | | |
| Fixed Assets | 7,244,521 | Contract Allowance | 402,036 | 8.6% | |
| Other Assets | 2,374,837 | Operating Revenue | 4,294,432 | 91.4% | |
| Total Assets | 24,662,096 | Operating Expense | 9,381,004 | 218.4% | |
| Current Liabilities | 40,022,764 | Operating Margin | -5,086,572 | -118.4% | |
| Long Term Liabilities | 833,000 | Other Income | 0 | 0.0% | |
| Total Equity | -16,193,668 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 24,662,096 | Net Profit or Loss | (5,086,572) | -118.4% | |

| 141573 OSF SAINT ANTHONY'S HOSPICE | | | | Nonprofit - Church | |
|------------------------------------|-------------|------------------------------|-----------|-----------------------------|---------|
| 915 E FIFTH ST | | 9/30/2017 365 Days Submitted | | Hospice | |
| ALTON, IL 62002 | | | | | |
| MADISON | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.5% |
| | | | | Nursing | 0.2% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 0.4 |
| | | | | Days to Collect | 3,526.6 |
| | | | | Avg Payment Days | 1,995.4 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -1.4% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 14,642,745 | Total Charges | 2,187,648 | | |
| Fixed Assets | 7,244,521 | Contract Allowance | 730,692 | 33.4% | |
| Other Assets | 2,374,837 | Operating Revenue | 1,456,956 | 66.6% | |
| Total Assets | 24,662,096 | Operating Expense | 1,226,490 | 84.2% | |
| Current Liabilities | 40,022,764 | Operating Margin | 230,466 | 15.8% | |
| Long Term Liabilities | 833,000 | Other Income | 0 | 0.0% | |
| Total Equity | -16,193,668 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 24,662,096 | Net Profit or Loss | 230,466 | 15.8% | |

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Sample Hospice reports from the Halmanac.com website.

141591 PALOS COMMUNITY HOSPITAL HOSPI

15295 E 127TH STREET Cost Report not filed.

LEMONT, IL 60439

DUPAGE

BLUE CROSS (SOUTH CAROLINA)

Key Performace Ind.

| | |
|-------------------|------|
| Skilled Nursing | 0.0% |
| Nursing | 0.0% |
| Home Healthcare | 0.0% |
| Length of Stay | |
| Medicare LOS | |
| Current Ratio | |
| Days to Collect | |
| Avg Payment Days | |
| Depreciation Rate | 0.0% |
| Return on Equity | 0.0% |

Balance Sheet

Income Statement

| | | | |
|------------------------|---|--------------------|---|
| Current Assets | 0 | Total Charges | 0 |
| Fixed Assets | 0 | Contract Allowance | 0 |
| Other Assets | 0 | Operating Revenue | 0 |
| Total Assets | 0 | Operating Expense | 0 |
| Current Liabilities | 0 | Operating Margin | 0 |
| Long Term Liabilities | 0 | Other Income | 0 |
| Total Equity | 0 | Other Expense | 0 |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 |

141628 PEACE HOSPICE AND PALLIATIVE CARE, INC

Proprietary - Corporation

1717 N NAPER BLVD SUITE 301 12/31/2017 365 Days Submitted

Hospice

NAPERVILLE, IL 60563

DUPAGE

BLUE CROSS (SOUTH CAROLINA)

Key Performace Ind.

| | |
|-------------------|-------|
| Skilled Nursing | 0.1% |
| Nursing | 0.2% |
| Home Healthcare | 0.0% |
| Length of Stay | |
| Medicare LOS | |
| Current Ratio | 294.5 |
| Days to Collect | 50.5 |
| Avg Payment Days | 0.3 |
| Depreciation Rate | 0.0% |
| Return on Equity | 43.2% |

Balance Sheet

Income Statement

| | | | |
|------------------------|-----------|--------------------|-----------|
| Current Assets | 1,082,205 | Total Charges | 5,279,337 |
| Fixed Assets | 28,456 | Contract Allowance | 0 |
| Other Assets | 569,897 | Operating Revenue | 5,279,337 |
| Total Assets | 1,680,558 | Operating Expense | 4,638,486 |
| Current Liabilities | 3,675 | Operating Margin | 640,851 |
| Long Term Liabilities | 195,000 | Other Income | 0 |
| Total Equity | 1,481,883 | Other Expense | 0 |
| Total Liab. and Equity | 1,680,558 | Net Profit or Loss | 640,851 |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | |
|--|-----------|-------------------------------|-----------|-------------------------------|
| 141646 PREFERRED HOME HEALTH CARE MIDWEST | | | | Proprietary - Corporation |
| 945 SE 2ND STREET | | 12/31/2017 365 Days Submitted | | Hospice |
| GALVA, IL 61434 | | | | |
| HENRY | | | | Key Performace Ind. |
| PALMETTO HHH C | | | | Skilled Nursing 0.2% |
| Balance Sheet | | Income Statement | | Nursing 0.0% |
| Current Assets | 187,629 | Total Charges | 1,752,816 | Home Healthcare 0.0% |
| Fixed Assets | 0 | Contract Allowance | 492,866 | 28.1% Length of Stay |
| Other Assets | 0 | Operating Revenue | 1,259,950 | 71.9% Medicare LOS |
| Total Assets | 187,629 | Operating Expense | 1,072,321 | 85.1% Current Ratio |
| Current Liabilities | 0 | Operating Margin | 187,629 | 14.9% Days to Collect 0.0 |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% Avg Payment Days 0.0 |
| Total Equity | 187,629 | Other Expense | 0 | 0.0% Depreciation Rate 0.0% |
| Total Liab. and Equity | 187,629 | Net Profit or Loss | 187,629 | 14.9% Return on Equity 100.0% |
| 141609 PROVIDENCE HOSPICE | | | | Proprietary - Corporation |
| 18601 N CREEK DRIVE SUITE A | | 12/31/2017 365 Days Submitted | | Hospice |
| TINLEY PARK, IL 60477 | | | | |
| COOK | | | | Key Performace Ind. |
| NATIONAL GOVERNMENT SERVICES | | | | Skilled Nursing 0.2% |
| Balance Sheet | | Income Statement | | Nursing 0.1% |
| Current Assets | 5,631,491 | Total Charges | 3,255,263 | Home Healthcare 0.0% |
| Fixed Assets | 11,771 | Contract Allowance | 0 | 0.0% Length of Stay |
| Other Assets | 0 | Operating Revenue | 3,255,263 | 100.0% Medicare LOS |
| Total Assets | 5,643,262 | Operating Expense | 2,474,747 | 76.0% Current Ratio 261.8 |
| Current Liabilities | 21,512 | Operating Margin | 780,516 | 24.0% Days to Collect 98.1 |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% Avg Payment Days 3.2 |
| Total Equity | 5,621,750 | Other Expense | 0 | 0.0% Depreciation Rate 0.0% |
| Total Liab. and Equity | 5,643,262 | Net Profit or Loss | 780,516 | 24.0% Return on Equity 13.9% |

Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141575 QUAD COUNTY HOSPICE

8 HUBER STREET
PANA, IL 62557

Cost Report not filed.

CHRISTIAN

Key Performance Ind.

NGS (IL)

Skilled Nursing 0.0%

Nursing 0.0%

Home Healthcare 0.0%

0.0% Length of Stay

0.0% Medicare LOS

0.0% Current Ratio

0.0% Days to Collect

0.0% Avg Payment Days

0.0% Depreciation Rate 0.0%

0.0% Return on Equity 0.0%

Balance Sheet

| | |
|-------------------------------|----------|
| Current Assets | 0 |
| Fixed Assets | 0 |
| Other Assets | 0 |
| Total Assets | 0 |
| Current Liabilities | 0 |
| Long Term Liabilities | 0 |
| Total Equity | 0 |
| Total Liab. and Equity | 0 |

Income Statement

| | |
|---------------------------|----------|
| Total Charges | 0 |
| Contract Allowance | 0 |
| Operating Revenue | 0 |
| Operating Expense | 0 |
| Operating Margin | 0 |
| Other Income | 0 |
| Other Expense | 0 |
| Net Profit or Loss | 0 |

141513 RAINBOW HOSPICE AND PALLIATIVE CARE

Nonprofit - Private

1550 BISHOP COURT
MOUNT PROSPECT, IL 60056

12/31/2017 365 Days Submitted

Hospice

COOK

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.4%

Nursing 22.0%

Home Healthcare 0.0%

35.0% Length of Stay

65.0% Medicare LOS

97.6% Current Ratio 4.3

2.4% Days to Collect 198.7

0.0% Avg Payment Days 38.9

0.0% Depreciation Rate 0.0%

2.4% Return on Equity 5.5%

Balance Sheet

| | |
|-------------------------------|-------------------|
| Current Assets | 12,633,052 |
| Fixed Assets | 2,347,870 |
| Other Assets | 0 |
| Total Assets | 14,980,922 |
| Current Liabilities | 2,907,357 |
| Long Term Liabilities | 0 |
| Total Equity | 12,073,565 |
| Total Liab. and Equity | 14,980,922 |

Income Statement

| | |
|---------------------------|----------------|
| Total Charges | 42,952,282 |
| Contract Allowance | 15,029,714 |
| Operating Revenue | 27,922,568 |
| Operating Expense | 27,258,215 |
| Operating Margin | 664,353 |
| Other Income | 0 |
| Other Expense | 0 |
| Net Profit or Loss | 664,353 |

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Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|---------------------------------------|-----------|-------------------------------|-----------|-----------------------------|-------------------|
| 141655 RESIDENTIAL HOSPICE LLC | | | | Proprietary - Partnership | |
| 1431 OPUS PLACE SUITE 310 | | 12/31/2017 365 Days Submitted | | Hospice | |
| DOWNS GROVE, IL 60515 | | | | | |
| DUPAGE | | | | | |
| PALMETTO HHH C | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.6% |
| | | | | Nursing | 15.9% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 2,056,267 | Total Charges | 6,632,024 | | |
| Fixed Assets | 6,385 | Contract Allowance | 45,955 | 0.7% | Length of Stay |
| Other Assets | 2,773,000 | Operating Revenue | 6,586,069 | 99.3% | Medicare LOS |
| Total Assets | 4,835,652 | Operating Expense | 5,564,826 | 84.5% | Current Ratio |
| Current Liabilities | 703,151 | Operating Margin | 1,021,243 | 15.5% | Days to Collect |
| Long Term Liabilities | 800,000 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 3,332,501 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 4,835,652 | Net Profit or Loss | 1,021,243 | 15.5% | Return on Equity |

| | | | | | |
|--------------------------------------|---|-------------------------|---|-----------------------------|-------------------|
| 141521 ROCKFORD V N A HOSPICE | | | | | |
| 4223 E STATE ST | | Cost Report not filed. | | | |
| ROCKFORD, IL 61108 | | | | | |
| WINNEBAGO | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity |

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Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|---|------------|-------------------------------|------------|-----------------------------|-------|
| 141643 SAFE HAVEN HOSPICE LLC | | | | Nonprofit - Church | |
| 200 N POSTVILLE DR | | 6/30/2017 365 Days Submitted | | Hospice | |
| LINCOLN, IL 62656 | | | | | |
| LOGAN | | | | | |
| | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.2% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 2.0 |
| | | | | Days to Collect | 96.9 |
| | | | | Avg Payment Days | 7.8 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -7.3% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 479,541 | Total Charges | 2,648,503 | | |
| Fixed Assets | 25,245 | Contract Allowance | 236,430 | 8.9% | |
| Other Assets | 0 | Operating Revenue | 2,412,073 | 91.1% | |
| Total Assets | 504,786 | Operating Expense | 2,279,225 | 94.5% | |
| Current Liabilities | 238,793 | Operating Margin | 132,848 | 5.5% | |
| Long Term Liabilities | 2,092,681 | Other Income | 0 | 0.0% | |
| Total Equity | -1,826,688 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 504,786 | Net Profit or Loss | 132,848 | 5.5% | |
| 141582 SEASONS HOSPICE & PALLIATIVE CARE | | | | | |
| | | | | Proprietary - Corporation | |
| 606 POTTER ROAD, 6TH FLOOR | | 12/31/2017 365 Days Submitted | | Hospice | |
| DES PLAINES, IL 60016 | | | | | |
| COOK | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 20.1% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 1.8 |
| | | | | Days to Collect | 93.5 |
| | | | | Avg Payment Days | 51.4 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 24.3% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 12,895,263 | Total Charges | 48,041,674 | | |
| Fixed Assets | 2,192,385 | Contract Allowance | -27,973 | -0.1% | |
| Other Assets | 84,033 | Operating Revenue | 48,069,647 | 100.1% | |
| Total Assets | 15,895,893 | Operating Expense | 46,624,201 | 97.0% | |
| Current Liabilities | 6,976,803 | Operating Margin | 1,445,446 | 3.0% | |
| Long Term Liabilities | 2,962,387 | Other Income | 0 | 0.0% | |
| Total Equity | 5,956,703 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 15,895,893 | Net Profit or Loss | 1,445,446 | 3.0% | |

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Sample Hospice reports from the Halmanac.com website.

| 141579 SERENITY HOSPICE AND HOME | | | | Nonprofit - Private | |
|--|-----------|-------------------------------|-----------|-----------------------------|---------|
| 1658 S ILLINOIS ROUTE 2 | | 12/31/2017 365 Days Submitted | | Hospice | |
| OREGON, IL 61061 | | | | | |
| OGLE | | | | | |
| | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.9% |
| | | | | Nursing | 9.4% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 16.7 |
| | | | | Days to Collect | 38.1 |
| | | | | Avg Payment Days | 12.5 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 12.8% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 2,452,713 | Total Charges | 6,814,224 | | |
| Fixed Assets | 22,299 | Contract Allowance | 2,225,817 | 32.7% | |
| Other Assets | 0 | Operating Revenue | 4,588,407 | 67.3% | |
| Total Assets | 2,475,012 | Operating Expense | 4,289,649 | 93.5% | |
| Current Liabilities | 146,543 | Operating Margin | 298,758 | 6.5% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 2,328,469 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 2,475,012 | Net Profit or Loss | 298,758 | 6.5% | |
| 141652 SOLACE HOSPICE & PALLIATIVE CARE INC | | | | Proprietary - Corporation | |
| 650 EAST DEVON AVENUE SUITE 188 | | 12/31/2017 365 Days Submitted | | Hospice | |
| ITASCA, IL 60143 | | | | | |
| DUPAGE | | | | | |
| | | | | Key Performance Ind. | |
| PALMETTO HHH C | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 1.0 |
| | | | | Days to Collect | 0.0 |
| | | | | Avg Payment Days | 0.0 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -165.5% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 80,485 | Total Charges | 872,891 | | |
| Fixed Assets | 1,898 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 872,891 | 100.0% | |
| Total Assets | 82,383 | Operating Expense | 879,336 | 100.7% | |
| Current Liabilities | 78,488 | Operating Margin | -6,445 | -0.7% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 3,895 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 82,383 | Net Profit or Loss | (6,445) | -0.7% | |

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Sample Hospice reports from the Halmanac.com website.

| | | | |
|---|-------------------------------|-----------------------------|--------|
| 141530 SSM HEALTH AT HOME HOSPICE-ILLINOIS | | Nonprofit - Private | |
| #2 GOOD SAMARITAN WAY, SUITE 325 | 12/31/2017 365 Days Submitted | Hospice | |
| MOUNT VERNON, IL 62864 | | | |
| JEFFERSON | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | Skilled Nursing | 0.2% |
| | | Nursing | 0.1% |
| | | Home Healthcare | 0.0% |
| | | Length of Stay | |
| | | Medicare LOS | |
| | | Current Ratio | 0.0 |
| | | Days to Collect | 0.0 |
| | | Avg Payment Days | 0.0 |
| | | Depreciation Rate | 0.0% |
| | | Return on Equity | -27.8% |

| Balance Sheet | | Income Statement | |
|------------------------|----------|--------------------|-----------|
| Current Assets | 0 | Total Charges | 3,215,004 |
| Fixed Assets | 0 | Contract Allowance | 302,695 |
| Other Assets | 0 | Operating Revenue | 2,912,309 |
| Total Assets | 0 | Operating Expense | 2,727,098 |
| Current Liabilities | 666,556 | Operating Margin | 185,211 |
| Long Term Liabilities | 0 | Other Income | 0 |
| Total Equity | -666,556 | Other Expense | 0 |
| Total Liab. and Equity | 0 | Net Profit or Loss | 185,211 |

| | | | |
|--|--|-----------------------------|------|
| 141503 ST JOHN'S HOSPITAL HOSPICE PRO | | Cost Report not filed. | |
| 2667 FARRAGUT DRIVE | | SPRINGFIELD, IL 62704 | |
| SANGAMON | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | Skilled Nursing | 0.0% |
| | | Nursing | 0.0% |
| | | Home Healthcare | 0.0% |
| | | Length of Stay | |
| | | Medicare LOS | |
| | | Current Ratio | |
| | | Days to Collect | |
| | | Avg Payment Days | |
| | | Depreciation Rate | 0.0% |
| | | Return on Equity | 0.0% |

| Balance Sheet | | Income Statement | |
|------------------------|---|--------------------|---|
| Current Assets | 0 | Total Charges | 0 |
| Fixed Assets | 0 | Contract Allowance | 0 |
| Other Assets | 0 | Operating Revenue | 0 |
| Total Assets | 0 | Operating Expense | 0 |
| Current Liabilities | 0 | Operating Margin | 0 |
| Long Term Liabilities | 0 | Other Income | 0 |
| Total Equity | 0 | Other Expense | 0 |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141595 ST MARGARETS HOSPICE

600 E 1ST STREET Cost Report not filed.

SPRING VALLEY, IL 61362

BUREAU

BLUE CROSS (SOUTH CAROLINA)

Key Performance Ind.

| | |
|-------------------|------|
| Skilled Nursing | 0.0% |
| Nursing | 0.0% |
| Home Healthcare | 0.0% |
| Length of Stay | |
| Medicare LOS | |
| Current Ratio | |
| Days to Collect | |
| Avg Payment Days | |
| Depreciation Rate | 0.0% |
| Return on Equity | 0.0% |

Balance Sheet

| | |
|-------------------------------|----------|
| Current Assets | 0 |
| Fixed Assets | 0 |
| Other Assets | 0 |
| Total Assets | 0 |
| Current Liabilities | 0 |
| Long Term Liabilities | 0 |
| Total Equity | 0 |
| Total Liab. and Equity | 0 |

Income Statement

| | |
|---------------------------|----------|
| Total Charges | 0 |
| Contract Allowance | 0 |
| Operating Revenue | 0 |
| Operating Expense | 0 |
| Operating Margin | 0 |
| Other Income | 0 |
| Other Expense | 0 |
| Net Profit or Loss | 0 |

141665 TENDER LOVE & CARE HOSPICE INC

Proprietary - Corporation

29 W 641 VALE ROAD 12/31/2017 193 Days Submitted

Hospice

WEST CHICAGO, IL 60185

DUPAGE

PALMETTO HHH C

Key Performance Ind.

| | |
|-------------------|--------|
| Skilled Nursing | 0.0% |
| Nursing | 0.0% |
| Home Healthcare | 0.0% |
| Length of Stay | |
| Medicare LOS | |
| Current Ratio | 2.9 |
| Days to Collect | 71.2 |
| Avg Payment Days | 7.7 |
| Depreciation Rate | 0.0% |
| Return on Equity | 100.0% |

Balance Sheet

| | |
|-------------------------------|-----------------|
| Current Assets | 140,170 |
| Fixed Assets | 0 |
| Other Assets | 0 |
| Total Assets | 140,170 |
| Current Liabilities | 48,364 |
| Long Term Liabilities | 482,739 |
| Total Equity | -390,933 |
| Total Liab. and Equity | 140,170 |

Income Statement

| | |
|---------------------------|------------------|
| Total Charges | 387,368 |
| Contract Allowance | 9,931 |
| Operating Revenue | 377,437 |
| Operating Expense | 768,370 |
| Operating Margin | -390,933 |
| Other Income | 0 |
| Other Expense | 0 |
| Net Profit or Loss | (390,933) |

All Providers

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141576 TIP HOSPICE

1901 FRANK SCOTT PARKWAY E SUITE 2 Cost Report not filed.

SHILOH, IL 62269

SAINT CLAIR

PALMETTO HHH C

Key Performance Ind.

| Balance Sheet | | Income Statement | | | |
|------------------------|---|--------------------|---|-------------------|------|
| Current Assets | 0 | Total Charges | 0 | Skilled Nursing | 0.0% |
| Fixed Assets | 0 | Contract Allowance | 0 | Nursing | 0.0% |
| Other Assets | 0 | Operating Revenue | 0 | Home Healthcare | 0.0% |
| Total Assets | 0 | Operating Expense | 0 | Length of Stay | |
| Current Liabilities | 0 | Operating Margin | 0 | Medicare LOS | |
| Long Term Liabilities | 0 | Other Income | 0 | Current Ratio | |
| Total Equity | 0 | Other Expense | 0 | Days to Collect | |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | Avg Payment Days | |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 0.0% |

141626 TRANSITIONS HOSPICE

Proprietary - Corporation

12040 RAYMOND COURT

12/31/2017 365 Days Submitted

Hospice

HUNTLEY, IL 60142

MCHENRY

Key Performance Ind.

| Balance Sheet | | Income Statement | | | |
|------------------------|------------|--------------------|------------|-------------------|-------|
| Current Assets | 4,884,163 | Total Charges | 15,684,818 | Skilled Nursing | 0.0% |
| Fixed Assets | 164,673 | Contract Allowance | 0 | Nursing | 0.0% |
| Other Assets | 5,689,046 | Operating Revenue | 15,684,818 | Home Healthcare | 0.0% |
| Total Assets | 10,737,882 | Operating Expense | 14,796,101 | Length of Stay | |
| Current Liabilities | 6,721,199 | Operating Margin | 888,717 | Medicare LOS | |
| Long Term Liabilities | 2,877,522 | Other Income | 0 | Current Ratio | 0.7 |
| Total Equity | 1,139,161 | Other Expense | 0 | Days to Collect | 109.1 |
| Total Liab. and Equity | 10,737,882 | Net Profit or Loss | 888,717 | Avg Payment Days | 114.3 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 78.0% |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|---|--|-------------------------------|--|-----------------------------|-------|
| 141551 UNITY HOSPICE OF CHICAGOLAND, LLC | | | | Proprietary - Partnership | |
| 600 W CERMAK RD SUITE 3D | | 12/31/2017 365 Days Submitted | | Hospice | |
| CHICAGO, IL 60616 | | | | | |
| COOK | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.3% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 74.2 |
| | | | | Days to Collect | 188.9 |
| | | | | Avg Payment Days | 3.0 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 20.0% |

| Balance Sheet | | Income Statement | | | |
|------------------------|-----------|-------------------------|------------|--------|--|
| Current Assets | 5,668,071 | Total Charges | 10,251,172 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 0 | Operating Revenue | 10,251,172 | 100.0% | |
| Total Assets | 5,668,071 | Operating Expense | 9,270,093 | 90.4% | |
| Current Liabilities | 76,345 | Operating Margin | 981,079 | 9.6% | |
| Long Term Liabilities | 678,713 | Other Income | 0 | 0.0% | |
| Total Equity | 4,913,013 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 5,668,071 | Net Profit or Loss | 981,079 | 9.6% | |

| | | | | | |
|---|--|-------------------------------|--|-----------------------------|--------|
| 141597 UNITY HOSPICE OF GREATER ST LOUIS | | | | Proprietary - Partnership | |
| 1604 EASTPORT PLAZA DR STE 102 | | 12/31/2017 365 Days Submitted | | Hospice | |
| COLLINSVILLE, IL 62234 | | | | | |
| MADISON | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.2% |
| | | | | Nursing | 0.4% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 34.0 |
| | | | | Days to Collect | 91.6 |
| | | | | Avg Payment Days | 3.3 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -10.7% |

| Balance Sheet | | Income Statement | | | |
|------------------------|-----------|-------------------------|-----------|--------|--|
| Current Assets | 841,226 | Total Charges | 2,601,925 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | |
| Other Assets | 556,737 | Operating Revenue | 2,601,925 | 100.0% | |
| Total Assets | 1,397,963 | Operating Expense | 2,748,955 | 105.7% | |
| Current Liabilities | 24,737 | Operating Margin | -147,030 | -5.7% | |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | |
| Total Equity | 1,373,226 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 1,397,963 | Net Profit or Loss | (147,030) | -5.7% | |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|---|-----------|-------------------------------|-----------|-----------------------------|-------------------|
| 141614 UNITY HOSPICE OF WESTERN ILLINOIS | | | | Proprietary - Partnership | |
| 1201 SOUTH 7TH STREET #101 | | 12/31/2017 365 Days Submitted | | Hospice | |
| ROCHELLE, IL 61068 | | | | | |
| OGLE | | | | Key Performance Ind. | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 1,033,601 | Total Charges | 3,312,876 | | |
| Fixed Assets | 34,506 | Contract Allowance | 0 | 0.0% | Length of Stay |
| Other Assets | 1,377,517 | Operating Revenue | 3,312,876 | 100.0% | Medicare LOS |
| Total Assets | 2,445,624 | Operating Expense | 3,260,206 | 98.4% | Current Ratio |
| Current Liabilities | 13,474 | Operating Margin | 52,670 | 1.6% | Days to Collect |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 2,432,150 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 2,445,624 | Net Profit or Loss | 52,670 | 1.6% | Return on Equity |

| | | | | | |
|----------------------------------|---|-------------------------|---|-----------------------------|-------------------|
| 141583 UNITYPOINT HOSPICE | | | | | |
| 106 19TH AVENUE, SUITE 101 | | Cost Report not filed. | | | |
| MOLINE, IL 61265 | | | | | |
| ROCK ISLAND | | | | Key Performance Ind. | |
| CAHABA | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141537 UNITYPOINT HOSPICE - PEORIA

120 NE GLEN OAK

Cost Report not filed.

PEORIA, IL 61636

PEORIA

Key Performance Ind.

BLUE CROSS (SOUTH CAROLINA)

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

Current Assets

0

Total Charges

0

Home Healthcare 0.0%

Fixed Assets

0

Contract Allowance

0

0.0%

Length of Stay

Other Assets

0

Operating Revenue

0

0.0%

Medicare LOS

Total Assets

0

Operating Expense

0

0.0%

Current Ratio

Current Liabilities

0

Operating Margin

0

0.0%

Days to Collect

Long Term Liabilities

0

Other Income

0

0.0%

Avg Payment Days

Total Equity

0

Other Expense

0

0.0%

Depreciation Rate 0.0%

Total Liab. and Equity

0

Net Profit or Loss

0

0.0%

Return on Equity 0.0%

141654 V CARE HOSPICE SERVICES OF ILLINOIS

Proprietary - Other

3100 DUNDEE ROAD, SUITE 303

12/31/2017 365 Days Submitted

Hospice

NORTHBROOK, IL 60062

COOK

Key Performance Ind.

PALMETTO HHH C

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

Current Assets

417,918

Total Charges

2,534,414

Home Healthcare 0.0%

Fixed Assets

0

Contract Allowance

0

0.0%

Length of Stay

Other Assets

0

Operating Revenue

2,534,414

100.0%

Medicare LOS

Total Assets

417,918

Operating Expense

2,263,643

89.3%

Current Ratio

6.9

Current Liabilities

60,267

Operating Margin

270,771

10.7%

Days to Collect

57.3

Long Term Liabilities

0

Other Income

0

0.0%

Avg Payment Days

9.1

Total Equity

357,651

Other Expense

0

0.0%

Depreciation Rate 0.0%

Total Liab. and Equity

417,918

Net Profit or Loss

270,771

10.7%

Return on Equity 75.7%

All Providers

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141693 VIP HOME HEALTH AND HOSPCIE INC

167 W BOUGHTON RD Cost Report not filed.

BOLINGBROOK, IL 60440

WILL

PALMETTO HHH C

Key Performance Ind.

| Balance Sheet | | Income Statement | | | |
|------------------------|---|--------------------|---|------|------------------------|
| Current Assets | 0 | Total Charges | 0 | | Skilled Nursing 0.0% |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Nursing 0.0% |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Home Healthcare 0.0% |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Length of Stay |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Medicare LOS |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Current Ratio |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Days to Collect |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Avg Payment Days |
| | | | | | Depreciation Rate 0.0% |
| | | | | | Return on Equity 0.0% |

141543 VISTA HOSPICE

Proprietary - Corporation

1790 NATIONS DRIVE SUITE 205 11/30/2017 365 Days Submitted Hospice

GURNEE, IL 60031

LAKE

BLUE CROSS (SOUTH CAROLINA)

Key Performance Ind.

| Balance Sheet | | Income Statement | | | |
|------------------------|-----------|--------------------|-----------|--------|------------------------|
| Current Assets | 3,124,255 | Total Charges | 1,586,352 | | Skilled Nursing 0.6% |
| Fixed Assets | -16,779 | Contract Allowance | 202,920 | 12.8% | Nursing 11.7% |
| Other Assets | 0 | Operating Revenue | 1,383,432 | 87.2% | Home Healthcare 0.0% |
| Total Assets | 3,107,476 | Operating Expense | 1,424,923 | 103.0% | Length of Stay |
| Current Liabilities | 1,042,367 | Operating Margin | -41,491 | -3.0% | Medicare LOS |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Current Ratio 3.0 |
| Total Equity | 2,065,109 | Other Expense | 0 | 0.0% | Days to Collect 918.3 |
| Total Liab. and Equity | 3,107,476 | Net Profit or Loss | (41,491) | -3.0% | Avg Payment Days 107.6 |
| | | | | | Depreciation Rate 0.0% |
| | | | | | Return on Equity -2.0% |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|---------------------------------|-----------|-------------------------------|------------|-----------------------------|-------------------|
| 141531 VITAS CORPORATION | | | | Proprietary - Corporation | |
| 105 MARQUETTE STREET, SUITE A | | 12/31/2017 365 Days Submitted | | Hospice | |
| LA SALLE, IL 61301 | | | | | |
| LA SALLE | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.1% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 965,961 | Total Charges | 10,805,354 | | |
| Fixed Assets | 34,890 | Contract Allowance | 172,728 | 1.6% | Length of Stay |
| Other Assets | 0 | Operating Revenue | 10,632,626 | 98.4% | Medicare LOS |
| Total Assets | 1,000,851 | Operating Expense | 9,384,181 | 88.3% | Current Ratio |
| Current Liabilities | 775,707 | Operating Margin | 1,248,445 | 11.7% | Days to Collect |
| Long Term Liabilities | 864 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 224,280 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 1,000,851 | Net Profit or Loss | 1,248,445 | 11.7% | Return on Equity |
| | | | | | 556.6% |

| | | | | | |
|---------------------------------|-------------|-------------------------------|------------|-----------------------------|-------------------|
| 141541 VITAS CORPORATION | | | | Proprietary - Corporation | |
| 8525 W 183RD STREET, STE M | | 12/31/2017 365 Days Submitted | | Hospice | |
| TINLEY PARK, IL 60487 | | | | | |
| COOK | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.2% |
| | | | | Nursing | 14.3% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 1,418,112 | Total Charges | 19,907,442 | | |
| Fixed Assets | 105,525 | Contract Allowance | 398,113 | 2.0% | Length of Stay |
| Other Assets | 0 | Operating Revenue | 19,509,329 | 98.0% | Medicare LOS |
| Total Assets | 1,523,637 | Operating Expense | 17,755,914 | 91.0% | Current Ratio |
| Current Liabilities | -43,380,604 | Operating Margin | 1,753,415 | 9.0% | Days to Collect |
| Long Term Liabilities | 19,399 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 44,884,842 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 1,523,637 | Net Profit or Loss | 1,753,415 | 9.0% | Return on Equity |
| | | | | | 3.9% |

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Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|--|-------------|-------------------------------|------------|-----------------------------|--------|
| 141574 VITAS CORPORATION | | | | Proprietary - Corporation | |
| 1340 SOUTH DAMEN AVENUE, STE 200 | | 12/31/2017 365 Days Submitted | | Hospice | |
| CHICAGO, IL 60608 | | | | | |
| COOK | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.2% |
| | | | | Nursing | 23.3% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | (0.1) |
| | | | | Days to Collect | 90.8 |
| | | | | Avg Payment Days | 23.7 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | -6.3% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 1,294,550 | Total Charges | 9,959,226 | | |
| Fixed Assets | 210,972 | Contract Allowance | 375,114 | 3.8% | |
| Other Assets | 8,400 | Operating Revenue | 9,584,112 | 96.2% | |
| Total Assets | 1,513,922 | Operating Expense | 10,332,522 | 107.8% | |
| Current Liabilities | -10,515,721 | Operating Margin | -748,410 | -7.8% | |
| Long Term Liabilities | 128,859 | Other Income | 0 | 0.0% | |
| Total Equity | 11,900,784 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 1,513,922 | Net Profit or Loss | (748,410) | -7.8% | |
| 141634 VITAS HEALTHCARE CORPORATION MIDWEST | | | | | |
| 8 EXECUTIVE DRIVE, SUITE 150 | | 12/31/2017 365 Days Submitted | | Hospice | |
| FAIRVIEW HEIGHTS, IL 62208 | | | | | |
| SAINT CLAIR | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 5.3% |
| | | | | Home Healthcare | 0.0% |
| | | | | Length of Stay | |
| | | | | Medicare LOS | |
| | | | | Current Ratio | 7.8 |
| | | | | Days to Collect | 72.0 |
| | | | | Avg Payment Days | 12.6 |
| | | | | Depreciation Rate | 0.0% |
| | | | | Return on Equity | 115.5% |
| Balance Sheet | | | | | |
| Income Statement | | | | | |
| Current Assets | 856,825 | Total Charges | 8,350,681 | | |
| Fixed Assets | 76,892 | Contract Allowance | 160,473 | 1.9% | |
| Other Assets | 0 | Operating Revenue | 8,190,208 | 98.1% | |
| Total Assets | 933,717 | Operating Expense | 7,256,400 | 88.6% | |
| Current Liabilities | 110,020 | Operating Margin | 933,808 | 11.4% | |
| Long Term Liabilities | 14,946 | Other Income | 0 | 0.0% | |
| Total Equity | 808,751 | Other Expense | 0 | 0.0% | |
| Total Liab. and Equity | 933,717 | Net Profit or Loss | 933,808 | 11.4% | |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

| | | | | | |
|--|-------------|-------------------------------|------------|-----------------------------|-------------------|
| 141514 VITAS HEALTHCARE CORPORATION OF ILLINOIS | | | | Proprietary - Corporation | |
| 580 WATERS EDGE, SUITE 100 | | 12/31/2017 365 Days Submitted | | Hospice | |
| LOMBARD, IL 60148 | | | | | |
| DUPAGE | | | | | |
| BLUE SHIELD (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 1.0% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 1,011,355 | Total Charges | 15,667,336 | | |
| Fixed Assets | 169,916 | Contract Allowance | 283,632 | 1.8% | Length of Stay |
| Other Assets | 3,206 | Operating Revenue | 15,383,704 | 98.2% | Medicare LOS |
| Total Assets | 1,184,477 | Operating Expense | 14,222,223 | 92.4% | Current Ratio |
| Current Liabilities | -36,047,605 | Operating Margin | 1,161,481 | 7.6% | Days to Collect |
| Long Term Liabilities | 192,962 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 37,039,120 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 1,184,477 | Net Profit or Loss | 1,161,481 | 7.6% | Return on Equity |

| | | | | | |
|---|---|-------------------------|---|-----------------------------|-------------------|
| 141553 VNA HEALTH CARE AN ILLINOIS NOT FOR PROFIT CORP | | | | | |
| 400 NORTH HIGHLAND AVENUE | | Cost Report not filed. | | | |
| AURORA, IL 60506 | | | | | |
| KANE | | | | | |
| BLUE CROSS (SOUTH CAROLINA) | | | | Key Performance Ind. | |
| | | | | Skilled Nursing | 0.0% |
| | | | | Nursing | 0.0% |
| | | | | Home Healthcare | 0.0% |
| Balance Sheet | | Income Statement | | | |
| Current Assets | 0 | Total Charges | 0 | | |
| Fixed Assets | 0 | Contract Allowance | 0 | 0.0% | Length of Stay |
| Other Assets | 0 | Operating Revenue | 0 | 0.0% | Medicare LOS |
| Total Assets | 0 | Operating Expense | 0 | 0.0% | Current Ratio |
| Current Liabilities | 0 | Operating Margin | 0 | 0.0% | Days to Collect |
| Long Term Liabilities | 0 | Other Income | 0 | 0.0% | Avg Payment Days |
| Total Equity | 0 | Other Expense | 0 | 0.0% | Depreciation Rate |
| Total Liab. and Equity | 0 | Net Profit or Loss | 0 | 0.0% | Return on Equity |

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Hospice Profile Report - 2017

Sample Hospice reports from the Halmanac.com website.

141657 WILLOW HOSPICE AND PALLIATIVE CARE LLC

13250 SOUTH ROUTE 59 SUITE 110 Cost Report not filed.

PLAINFIELD, IL 60585

WILL

Key Performance Ind.

PALMETTO HHH C

Skilled Nursing 0.0%

Balance Sheet

Income Statement

Nursing 0.0%

Current Assets 0 Total Charges 0

Home Healthcare 0.0%

Fixed Assets 0 Contract Allowance 0

0.0% Length of Stay

Other Assets 0 Operating Revenue 0

0.0% Medicare LOS

Total Assets 0 Operating Expense 0

0.0% Current Ratio

Current Liabilities 0 Operating Margin 0

0.0% Days to Collect

Long Term Liabilities 0 Other Income 0

0.0% Avg Payment Days

Total Equity 0 Other Expense 0

0.0% Depreciation Rate 0.0%

Total Liab. and Equity 0 Net Profit or Loss 0

0.0% Return on Equity 0.0%