

**IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT,
IN AND FOR LEON COUNTY, FLORIDA**

In Re: Receivership of
Universal Health Care.,
a Florida corporation

Case No.: 2013-CA-00375

**DEPARTMENT'S MOTION FOR ORDER APPROVING SECOND FINAL CLAIMS
REPORT, SECOND CLAIMS DISTRIBUTION REPORT, DISTRIBUTION
ACCOUNTING STATEMENT, AND AUTHORIZING DISTRIBUTION**

The Florida Department of Financial Services, Division of Rehabilitation and Liquidation (hereinafter "Department") as Receiver of Universal Health Care, Inc. ("UHC"), by and through undersigned counsel, hereby files this Motion for Order Approving Second Final Claims Report, Second Claims Distribution Report, Distribution Accounting Statement, and Authorizing Distribution, and as good grounds therefor states the following:

1. UHC was a health maintenance organization ("HMO") based in St. Petersburg, Florida.
2. On March 21, 2013, this Court entered an *Order Appointing the Florida Department of Financial Services as the Receiver of UHC for purposes of Immediate Rehabilitation and Liquidation Effective April 1, 2013, Injunction, and Notice of Automatic Stay* ("Liquidation Order").
3. Pursuant to section 631.021, Florida Statutes, this Court has original jurisdiction over the UHC delinquency proceeding, has exclusive jurisdiction over all assets and property of UHC, and may enter all necessary and/or proper orders to carry out the purpose of the Florida Insurers Rehabilitation and Liquidation Act, sections 631.001 *et seq.*, Florida Statutes.
4. On June 20, 2016, this Court entered an *Amended Order Approving Receiver's First Interim Claims Report and Recommendation on Claims*. The First Interim Claims Report reflects

the Department's evaluation and recommendations on 1 secured claim and 5,383 non-guaranty association claims in Classes 2 through 8.

5. On November 6, 2018, this Court entered an *Order Approving Department's Second Interim Claims Report and Recommendation on Claims*. The Second Interim Claims Report reflects the Department's evaluation and recommendations on 222 non-guaranty association claims in Classes 2, 6, 7, 8, 9, and 11.

6. **First Distribution:** By Motion filed on November 18, 2019, the Department made recommendations regarding the distribution of secured funds received pursuant to (a) an agreement between the Department and the Department of Elder Affairs ("DOEA") for the benefit of eligible Nursing Home Diversion ("NHD") providers and (b) a separate agreement between the Department and the Agency for Healthcare Administration ("AHCA") for the benefit of Medicaid providers.

On November 20, 2019, the Court granted the motion and authorized the Department to make a \$1,121,226.30 distribution on 153 claims from the funds secured for NHD providers and a \$4,539,656.31 distribution on 893 claims from the funds secured for Medicaid providers. The aggregate \$5,660,882.59 distribution was 100% of the amount recommended on those claims.

7. The Department has compiled a Second Final Claims Report dated November 26, 2024, which reflects the classification of all filed claims in the UHC receivership by priority in accordance with section 631.271, Florida Statutes, and the claims filing deadline.¹ This report also incorporates the resolution of all timely filed objections and claimant information updates.

8. The Second Final Claims Report reflects that 6,499 non-guaranty association claims were filed in the UHC receivership with an aggregate \$590,284,749.50 amount claimed. Of

¹ The Second Final Claims Report includes the secured NHD and Medicaid claims that were authorized for distribution in 2019.

that aggregate amount claimed, the Department has recommended \$51,764,793.59. For the Court's convenience, a summary reflecting the totals from the Report is attached hereto and incorporated by reference as "**Exhibit A.**" The entire 1085-page Report can be filed under seal at the Court's request.

9. **Second Distribution:** If the Court approves the Department's Second Final Claims Report, the Department will be in the position to make a final distribution of the receivership's assets. Distributions will be made on 2 secured claims and 2457 claims in Classes 2, 5, and 6 in accordance with section 631.271, Florida Statutes, and the Second Claims Distribution Report dated October 4, 2024. A summary reflecting the totals from the Second Claims Distribution Report is attached hereto and incorporated by reference as "**Exhibit B.**" The entire 353-page Report can be filed under seal at the Court's request.

10. The Department has compiled a Distribution Accounting Statement—*Projected for a December 2024, Distribution* (the "*Distribution Accounting*"). As shown in the *Distribution Accounting*, the Department is prepared to make a final distribution of \$42,514,785.07 on claims in Classes 2-6. This distribution is 100% of the amount recommended on claims in Classes 2-5 and 35.87% on claims in Class 6. The final pro-rata calculation and the amount distributed may have a slight variance due to rounding at the time of check processing. The *Distribution Accounting* is attached hereto and incorporated by reference as "**Exhibit C.**"

11. The Department recommends that the Second Final Claims Report, Second Claims Distribution Report, and Distribution Accounting be approved.

12. Upon the filing of this Motion for Order Authorizing Distribution, the Department will not accept any further claim assignments.

13. In an ongoing effort to maintain accuracy and efficiency, the Department proactively works to update its records to reflect change of address information for interested parties (e.g. agents, claimants, creditors, policyholders, subscribers) before mailing notifications and distribution checks. The Department has access to databases and other publicly available information that provides updated address information. The Department requests the authority to search for change of address information when applicable and to use the change of address information for future mailings without further direction of this Court.

14. Despite its best efforts, the Department is not always able to distribute funds to every claimant when funds are ready for distribution due to either bad addresses or W-9 issues. The Department recommends that the unclaimed funds be transferred to the unclaimed property unit(s) of the state(s) reflected in the claimants' last address of record in the Department's files.

WHEREFORE, the Department moves this Honorable Court for entry of an Order:

- A. Granting this Motion;
- B. Approving and adopting the Department's Second Final Claims Report, Second Claims Distribution Report, and the Distribution Accounting Statement;
- C. Directing the Department to make the above-referenced distribution on claims as indicated in the Distribution Accounting Statement;
- D. Directing the Department not to recognize or accept further assignment of claims;
- E. Authorizing the Department to update its records to incorporate change of address information for an interested individual/entity (e.g., agent, claimant, creditor, policyholder, subscriber) if the Department finds that there has been a change of address for an interested individual/entity and authorizing the Department to use the change of address

information for future mailings; and

F. Authorizing the Department to transfer unclaimed funds to the unclaimed property unit(s) of the state(s) reflected in the claimants' last address of record in the Department's files.

Respectfully Submitted on this the 20th day of December 2024.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on December 20, 2024, a complete and accurate copy of the foregoing document was filed with the Clerk of Courts using the Florida Courts e-filing portal and was served on all email addresses listed in the portal for service in this matter.

/s/ Jamila G. Gooden

JAMILA G. GOODEN

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Exhibit A
Second Final Claims
Report Summary

FLORIDA DEPARTMENT OF FINANCIAL SERVICES -DIVISION OF REHABILITATION AND LIQUIDATION
 UNIVERSAL HEALTH CARE, INC.
 FINAL CLAIMS REPORT
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

SUMMARY TOTALS

TOTAL AMOUNT CLAIMED BY NON GUARANTY ASSOCIATION CLAIMANTS	\$590,284,749.50
TOTAL AMOUNT RECOMMENDED TO NON GUARANTY ASSOCIATION CLAIMANTS	\$51,764,793.59
TOTAL NUMBER	6,499

Secured Claims

COUNT OF SECURED CLAIMS :	1,048
AMOUNT CLAIMED FOR SECURED CLAIMS BY NON GUARANTY ASSOCIATION	\$462,211.28
AMOUNT RECMD FOR SECURED CLAIMS TO NON GUARANTY ASSOCIATION	\$5,671,226.49

UnSecured Claims

COUNT OF CLASS 1 CLAIMS :	0	COUNT OF CLASS 7 CLAIMS :	1
AMOUNT CLAIMED FOR CLASS 1 CLAIMS BY NON GUARANTY ASSOCIATION	\$0.00	AMOUNT CLAIMED FOR CLASS 7 CLAIMS BY NON GUARANTY ASSOCIATION	\$154,423.23
AMOUNT RECMD FOR CLASS 1 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS :		AMOUNT RECMD FOR CLASS 7 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	\$154,423.23
COUNT OF CLASS 2 CLAIMS :	4,593	COUNT OF CLASS 8 CLAIMS :	753
AMOUNT CLAIMED FOR CLASS 2 CLAIMS BY NON GUARANTY ASSOCIATION	\$535,756,950.59	AMOUNT CLAIMED FOR CLASS 8 CLAIMS BY NON GUARANTY ASSOCIATION	\$24,126,540.21
AMOUNT RECMD FOR CLASS 2 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	\$40,571,515.55	AMOUNT RECMD FOR CLASS 8 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	\$1,482,713.80
COUNT OF CLASS 3 CLAIMS :	0	COUNT OF CLASS 9 CLAIMS :	1
AMOUNT CLAIMED FOR CLASS 3 CLAIMS BY NON GUARANTY ASSOCIATION	\$0.00	AMOUNT CLAIMED FOR CLASS 9 CLAIMS BY NON GUARANTY ASSOCIATION	\$1,244,793.61
AMOUNT RECMD FOR CLASS 3 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:		AMOUNT RECMD FOR CLASS 9 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	
COUNT OF CLASS 4 CLAIMS :	1	CLASS 10 INTEREST CLAIMS (SEE NOTE):	
AMOUNT CLAIMED FOR CLASS 4 CLAIMS BY NON GUARANTY ASSOCIATION	\$1.00		
AMOUNT RECMD FOR CLASS 4 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:			
COUNT OF CLASS 5 CLAIMS :	7	COUNT OF CLASS 11 CLAIMS :	14
AMOUNT CLAIMED FOR CLASS 5 CLAIMS BY NON GUARANTY ASSOCIATION	\$3,371,512.54	AMOUNT CLAIMED FOR CLASS 11 CLAIMS TO NON GUARANTY ASSOCIATION	\$8,566,989.40
AMOUNT RECMD FOR CLASS 5 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	\$841,000.00	AMOUNT RECMD FOR CLASS 11 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS	
COUNT OF CLASS 6 CLAIMS :	81		
AMOUNT CLAIMED FOR CLASS 6 CLAIMS BY NON GUARANTY ASSOCIATION	\$16,601,327.64		
AMOUNT RECMD FOR CLASS 6 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS :	\$3,043,914.52		

Note: Class 10 Claims are comprised of interest per F.S. 631.271 (1) (j) on allowed claims in Classes 1 - 9.

Exhibit B
Second Claims Distribution Report
Summary

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION
 UNIVERSAL HEALTH CARE, INC.
 CLAIMS DISTRIBUTION REPORT

SUMMARY TOTALS

TOTAL AMOUNT CLAIMED	500,586,518.21
TOTAL AMOUNT RECOMMENDED	\$44,466,773.88
TOTAL NUMBER	2,459

Secured Claims

COUNT OF SECURED CLAIMS :	2
AMOUNT CLAIMED FOR SECURED CLAIMS :	\$42,616.04
AMOUNT RECOMMENDED FOR SECURED CLAIMS :	\$10,343.90

Unsecured Claims

COUNT OF CLASS 1 CLAIMS :	0	COUNT OF CLASS 7 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 1 CLAIMS :		AMOUNT CLAIMED FOR CLASS 7 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 1 CLAIMS :		AMOUNT RECOMMENDED FOR CLASS 7 CLAIMS :	
COUNT OF CLASS 2 CLAIMS :	2,433	COUNT OF CLASS 8 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 2 CLAIMS :	482,799,686.05	AMOUNT CLAIMED FOR CLASS 8 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 2 CLAIMS :	\$40,571,515.46	AMOUNT RECOMMENDED FOR CLASS 8 CLAIMS :	
COUNT OF CLASS 3 CLAIMS :	0	COUNT OF CLASS 9 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 3 CLAIMS :		AMOUNT CLAIMED FOR CLASS 9 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 3 CLAIMS :		AMOUNT RECOMMENDED FOR CLASS 9 CLAIMS :	
COUNT OF CLASS 4 CLAIMS :	0	CLASS 10 INTEREST CLAIMS (SEE NOTE):	
AMOUNT CLAIMED FOR CLASS 4 CLAIMS :			
AMOUNT RECOMMENDED FOR CLASS 4 CLAIMS :			
COUNT OF CLASS 5 CLAIMS :	2	COUNT OF CLASS 11 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 5 CLAIMS :	\$3,364,000.00	AMOUNT CLAIMED FOR CLASS 11 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 5 CLAIMS :	\$841,000.00	AMOUNT RECOMMENDED FOR CLASS 11 CLAIMS :	
COUNT OF CLASS 6 CLAIMS :	22		
AMOUNT CLAIMED FOR CLASS 6 CLAIMS :	\$14,380,216.12		
AMOUNT RECOMMENDED FOR CLASS 6 CLAIMS :	\$3,043,914.52		

Note: Class 10 Claims are comprised of interest per F.S. 631.271 (1) (j) on allowed claims in Classes 1 - 9.

Exhibit C
Distribution Accounting Statement

Universal Health Care, Inc.
Distribution Accounting
Projected for December 2024 Distribution

ESTIMATED ASSETS AT November 30, 2024

	<u>Value</u>	<u>Reference</u>
Cash	42,865,277.79	Schedule A
Total Assets	\$ 42,865,277.79	

ESTIMATED FUNDS RETAINAGE

	<u>Value</u>	<u>Reference</u>
Distribution Liability	345,992.72	
Class I - Administrative Claims Retainage for Receiver Expenses (Net of interest) Estimate (December 2024 - June 2025)	500.00	Schedule B
Post Discharge Expenses Retainage for records storage, records scanning, tax return prep. & labor	4,000.00	Schedule E
Total Proposed Retainage	350,492.72	
TOTAL AVAILABLE TO DISTRIBUTE	\$ 42,514,785.07	

DISTRIBUTION RECOMMENDATION

	<u>Claims Value</u>	<u>Less Previous Claims Distributions</u>	<u>Value of Claims Outstanding</u>	<u>Apply Adv. Pmts. to Guaranty Assoc.</u>	<u>Recommended Distribution</u>	<u>% Value of Claims Outstanding</u>	<u>% Value of Gross Filed Claims</u>	<u>Total % of Claims Value Distributed</u>
Secured Claims	\$ 5,671,226.51	\$ 5,660,882.61	\$ 10,343.90	X	\$ 10,343.90	100.0000%	100.0000%	100.0000%
Class I - Administrative Claims-Guaranty Funds	\$ -	\$ -	\$ -	X	\$ -	0.0000%	0.0000%	0.0000%
Class II - Loss Claims-Guaranty Funds	-	-	-	X	-	0.0000%	0.0000%	0.0000%
Class II - Loss Claims-Other	40,571,515.55	-	40,571,515.55	X	40,571,515.55	100.0000%	100.0000%	100.0000%
Class III - Return Premium Claims-Guaranty Funds	-	-	-	X	-	0.0000%	0.0000%	0.0000%
Class III - Return Premium Claims-Other	-	-	-	X	-	0.0000%	0.0000%	0.0000%
Class IV - Federal Government Claims	-	-	-	X	-	0.0000%	0.0000%	0.0000%
Class V - Employee Claims	841,000.00	-	841,000.00	X	841,000.00	100.0000%	100.0000%	100.0000%
Class VI - General Creditors Claims GA	-	-	-	X	-	0.0000%	0.0000%	0.0000%
Class VI - General Creditors Claims Other	3,043,914.52	-	3,043,914.52	X	1,091,925.62	35.8724%	35.8724%	35.8724%
Class VII - State & Local Government Claims	154,423.23	-	154,423.23	X	-	0.0000%	0.0000%	0.0000%
Class VIII - Late Filed Claims	1,482,713.80	-	1,482,713.80	X	-	0.0000%	0.0000%	0.0000%
Class IX - Surplus/Other Claims	1,244,793.61	-	1,244,793.61	X	-	0.0000%	0.0000%	0.0000%
Class XI - Shareholder Claims	1.00	-	1.00	X	-	0.0000%	0.0000%	0.0000%
Totals	\$ 53,009,588.22	\$ 5,660,882.61	\$ 47,348,705.61	\$ -	\$ 42,514,785.07			

Index to Attached Schedules:

- Schedule A - Available Cash Projection
- Schedule B - Estimated Funds to be Retained by the Receiver for Discharge of the Estate
- Schedule C - Allocated State Funds Expensed
- Schedule D - Interest Earnings Projection - Pooled Cash
- Schedule E - Receiver Discharge Expenses
- Schedule F - Contributed Equity

Universal Health Care, Inc.
Available Cash Projection
Projected for December 2024 Distribution

	Cash Balance as of June 30, 2024	July - September 2024	Oct-24	Nov-24
Beginning Pooled Cash Balance	\$ 42,597,539.69	\$ 42,651,431.79	\$ 42,651,431.79	\$ 42,838,159.79
Direct Receiver Expenses (Actual or Estimated)				
Rent-Records, Bank Fees, Postage		3,000.00	1,000.00	1,000.00
Sub-total		3,000.00	1,000.00	1,000.00
Allocated Receiver Expenses (Estimated)				
Labor & Benefits		35,124.00	46,832.00	46,832.00
Indirect Expenses		15,600.00	5,200.00	5,200.00
Sub-total		50,724.00	52,032.00	52,032.00
Cash Balance Before Interest Earnings		42,543,815.69	42,598,399.79	42,785,127.79
Interest Earnings				
Actual SPIA Earnings for June 2024 to be credited on 07/01/2024		107,616.10		
Estimate based on assumed SPIA APR on the previous month's average Pooled Cash balance (See Schedule D)			239,760.00	80,150.00
Ending Pooled Cash Balance	\$ 42,597,539.69	\$ 42,651,431.79	\$ 42,838,159.79	\$ 42,865,277.79

Assumptions for Allocated Receiver Expenses:

¹ Labor & Benefits: This estimate is based on a four month actual average. Doubled for increased activity leading up to distribution.

March Actual	\$ 1,827.31
April Actual	9,158.76
May Actual	9,230.43
June Actual	3,197.55
Sub-total	23,414.05
4 mth. actual average (rounded)	5,854.00
Doubled for increased activity level	<u>\$ 11,708.00</u>

² Indirect Expenses: This estimate is UHC's estimated pro rata share of the Receiver's estimated total indirect expenses. The pro rata share calculation is based on UHC's estimated total assets divided by the Receiver's estimated total assets for all receiverships.

Estimated Total Asset %	4.00%
Estimated Total for the Receiver	\$ 130,000.00
Estimated Expense (rounded)	<u>\$ 5,200.00</u>

Universal Health Care, Inc.
Estimated Funds to be Retained by the Receiver for Discharge of the Estate
Estimated from November 2024 through the Projected Discharge Date of June 2025

	November 30, 2024	December 24	January - February 2025	March - April 2025	May - June 2025	Retainage Calculation
Beginning Cash Balance		\$ 42,865,277.79	\$ 373,810.72	\$ 382,128.72	\$ 366,060.72	
Direct Receiver Expenses						
Records Storage, Bank Fees, Postage		5,000.00	5,000.00	2,500.00	2,500.00	
Sub-total		5,000.00	5,000.00	2,500.00	2,500.00	\$ 15,000.00
Allocated Receiver Expenses						
Labor & Benefits		46,832.00	17,562.00	11,708.00	11,708.00	
Indirect Expenses		5,200.00	10,400.00	2,600.00	2,600.00	
Sub-total		52,032.00	27,962.00	14,308.00	14,308.00	\$ 108,610.00
Claims Distribution (Approx.)		42,514,785.07				
Cash Balance Before Interest Earnings		293,460.72	340,848.72	365,320.72	349,252.72	
Interest Earnings						
Estimate based on assumed SPIA APR on the previous month's average Pooled Cash balance (See Schedule D).		80,350.00	41,280.00	740.00	740.00	\$ 123,110.00
Projected Ending Cash Balance	\$ 42,865,277.79	\$ 373,810.72	\$ 382,128.72	\$ 366,060.72	\$ 349,992.72	
Retainage for Receiver's Expenses						\$ 500.00

Assumptions for Allocated Receiver Expenses:

¹ Labor & Benefits: This estimate is based on a four month actual average. Doubled for increased activity through the 2nd month of distribution. Then the monthly average is used.

March Actual	\$ 1,827.31
April Actual	\$ 9,158.76
May Actual	\$ 9,230.43
June Actual	\$ 3,197.55
Sub-total	23,414.05
4 mth. actual average (rounded)	5,854.00
	<u>\$ 11,708.00</u>

² Indirect Expenses: This estimate is UHC's estimated pro rata share of the Receiver's estimated total indirect expenses. The pro rata share calculation is based on UHC's estimated total assets divided by the Receiver's estimated total assets for all receiverships. Total assets drop significantly post distribution so a reduced % is used after the 2nd month of distribution.

	Before Distribution	After Distribution
Estimated Total Asset %	4.00%	1.00%
Estimated Total for the Receiver	\$ 130,000.00	\$ 130,000.00
Estimated Expense (rounded)	\$ 5,200.00	\$ 1,300.00

Universal Health Care, Inc.
Allocated State Funds Expensed
Estimated from July 2024 through the Projected Discharge Date of June 2025
THIS STATEMENT INCLUDED FOR INFORMATION PURPOSES ONLY - AMOUNTS NOT PART OF DISTRIBUTION CALCULATION

	July - Dec 2024	Jan - Feb 2025	March - April 2025	May - June 2025	Totals
Accrued Allocated State of Florida Expenses (Estimated)					
Labor & Benefits	\$ 2,904.00	\$ 1,936.00	\$ 968.00	\$ 484.00	\$ 6,292.00 ¹
Indirect Expenses	11,520.00	3,840.00	2,400.00	480.00	\$ 18,240.00 ²
Total	\$ 14,424.00	\$ 5,776.00	\$ 3,368.00	\$ 964.00	\$ 24,532.00 ³

Assumptions for Allocated State of Florida Expenses:

¹ Labor & Benefits: This estimate is based on a four month actual average. Doubled for increased activity through the 2nd month of distribution. Then the monthly average is used.

March Actual	75.95
April Actual	383.56
May Actual	377.22
June Actual	131.48
Sub-total	<u>968.21</u>
4 mth. actual average (rounded)	<u>242.00</u>
Doubled for increased activity level	<u>\$ 484.00</u>

² Indirect Expenses: This estimate is UHC's estimated pro rata share of the Receiver's estimated total indirect expenses. The pro rata share calculation is based on UHC's estimated total assets divided by the Receiver's estimated total assets for all receiverships. Total assets drop significantly post distribution so a reduced % is used after the 2nd month of distribution.

	<u>Before Distribution</u>	After Distribution
Estimated Total Asset %	4.00%	1.00%
Estimated Total for the State	\$ 48,000.00	\$ 48,000.00
Estimated Expense (rounded)	<u>\$ 1,920.00</u>	<u>\$ 480.00</u>

³ **Per current Receiver policies and procedures, these accumulated amounts are recorded directly against estate equity as opposed to a liability account.**

Universal Health Care, Inc.
Interest Earnings Projection - Pooled Cash
Projected for December 2024 Distribution

Interest accrued for July 2024 - September 2024

Beginning cash balance	42,597,539.69
Ending cash balance	42,651,431.79
Average cash balance	42,624,485.74
Assumed SPIA interest rate (Annualized)	2.25%
Subtotal (Annualized)	959,050.93

Accrual for July 2024 - September 2024 **\$ 239,760.00**

Interest accrued October 2024

Beginning cash balance	42,651,431.79
Ending cash balance	42,838,159.79
Average cash balance	42,744,795.79
Assumed SPIA interest rate (Annualized)	2.25%
Subtotal (Annualized)	961,757.91

Accrual for October 2024 **\$ 80,150.00**

Interest accrued for November 2024

Beginning cash balance	42,838,159.79
Ending cash balance	42,865,277.79
Average cash balance	42,851,718.79
Assumed SPIA interest rate (Annualized)	2.25%
Subtotal (Annualized)	964,163.67

Accrual for November 2024 **\$ 80,350.00**

Interest accrued for December 2024

Beginning cash balance	42,865,277.79
Ending cash balance	373,810.72
Average cash balance	21,619,544.26
Assumed SPIA interest rate (Annualized)	2.25%
Subtotal (Annualized)	486,439.75

Accrual for December 2024 **\$ 40,540.00**

Interest accrued for January - February 2025

Beginning cash balance	373,810.72
Ending cash balance	382,128.72
Average cash balance	377,969.72
Assumed SPIA interest rate (Annualized)	2.25%
Subtotal (Annualized)	8,504.32

Accrual for January - February 2025 **\$ 1,420.00**

Interest accrued for March - April 2025

Beginning cash balance	382,128.72
Ending cash balance	366,060.72
Average cash balance	374,094.72
Assumed SPIA interest rate (Annualized)	2.25%
Subtotal (Annualized)	4,454.32

Accrual for March - April 2025 **\$ 740.00**

Interest accrued for May - June 2025

Beginning cash balance	366,060.72
Ending cash balance	349,992.72
Average cash balance	358,026.72
Assumed SPIA interest rate (Annualized)	2.25%
Subtotal (Annualized)	4,454.32

Accrual for May - June 2025 **\$ 740.00**

Universal Health Care, Inc.
Receiver Discharge Expenses
Projected for December 2024 Distribution

Discharge Expenses (Projected for Post 6/30/2025)

Records Storage, Labor, Scanning Permanent Records,
Unclaimed Property Scanning and Filing Holders Reports,
2023,2024 & 2025 Tax Return Preparation

4,000.00

Total

\$ 4,000.00

Universal Health Care, Inc.
Statement of Contributed Equity from Regulatory Trust Fund Estimated Balances
Projected for Discharge by 6/30/2025

Contributed Equity Balance as of 6/30/2024		\$ 606,347.41
	Accrual for July 2024 - June 2025 (Estimate from Schedule C)	<u>\$ 24,532.00</u>
Total		<u>\$ 24,532.00</u>
Projected Contributed Equity Balance as of 6/30/2025		<u><u>\$ 630,879.41</u></u>