



## LIMITLESS

2023 ANNUAL CONFERENCE

MAY 17-19, 2023

We-Ko-Pa Conference Center • Scottsdale, Arizona Arizona Leading Age.org



## YOUR SPEAKERS



Mary Muñoz
Senior Managing Director
Ziegler
(800) 327-3666
mmunoz@ziegler.com





Daren Bell
Director
Ziegler
(312) 596-1549
dbell@ziegler.com





## LEARNING OBJECTIVES

- Understand potential steps to take if your business model is not sustainable.
- Learn how various organizations made different choices to grow or change, and why.
- Gain insights into a bankruptcy case and what happens to buildings and resident contracts.

## Sustainable Organizations: Building Blocks







### SUSTAINABILITY HEADWINDS TODAY

Occupancy (Covid)

Labor Shortage/Cost

Healthcare (++Covid)

Higher Interest Rates (Debt)

Changing Consumer Preferences





## WHAT'S GOING YOUR WAY

Demographic Wave
Still Underserved Markets

All Kinds of Technology Solutions

Continue to Evolve

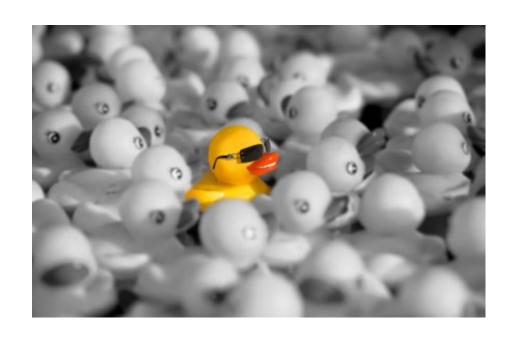
Wellness Approaches Hold Promise in Reducing Healthcare Cost

Higher Interest Rates (Investments)



## CO CHARACTERISTICS OF SUSTAINABLE LIMITLESS ORGANIZATIONS

- Profitability, measured including philanthropy
- Cash reserves, including for growth and/or redevelopment
- Located in an area demographically consistent with needed pricing, services, labor pool, etc.
- Solid competitive market position
- Ideally not land-locked
- Nimble and strategic Board and leadership team who are ALIGNED and willing to innovate and take risk
- Continual investment in physical plant

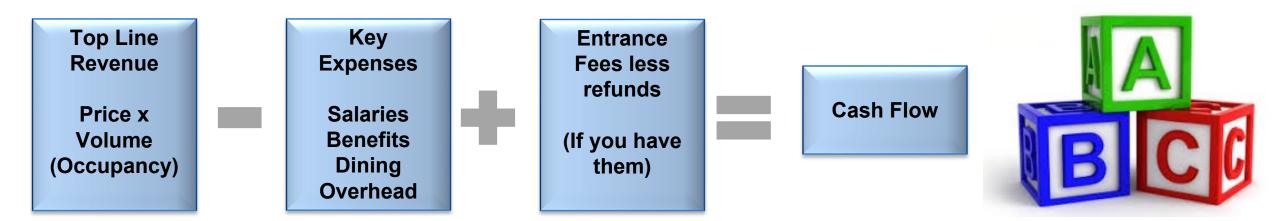


## RED FLAGS THAT COULD SIGNAL LIMITLESS TROUBLE AHEAD

- Occupancy has dropped and not showing signs of recovery
- Significant operating losses for two or more years,
- Dwindling financial resources to cover operating losses
- Struggles to provide competitive wages compared to others in your market area
- Payments to vendors are late or being extended
- Difficulty producing consistent, accurate financial statements on a timely basis
- No meaningful upgrades to physical plant in the past 10-15 years, with limited resources to invest



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Cash Flow needs to cover debt payments, capital expenditures, reserves for the future, and funding for growth initiatives.



- Three main types of revenue:
  - 1. Resident revenue
  - 2. Charitable contributions
  - 3. Investment income





### REVENUES YOU CAN'T CONTROL

- Investment income
  - Investment policy
  - Capital planning
  - "the MARKET"
- Charitable donations
  - Source?
  - Predictability?





### REVENUES YOU CAN CONTROL

#### **Resident Revenues**



#### <u>Price</u>

- Monthly fee increases
- Entry fee increases
- Refundability provisions
- Outside admits?
- Leases and ancillary

#### **Volume**

- Length of time to fill vacated units
- Unit turnover (voluntary/involuntary)
- Moving through the continuum
- Waiting list management
- Actuarial data



RESIDENT MON	THLY FEE	EINCREASES
- APRIL 2023		

Percentage Increase to Independent Living Monthly Fees					
	2023	2022	2021	2020	2019
Minimum	0.00%	0.00%	0.00%	0.00%	0.00%
1st Quartile	5.00%	3.50%	2.71%	2.90%	3.00%
Median	6.00%	4.48%	3.00%	3.00%	3.00%
3 <sup>rd</sup> Quartile	7.90%	5.50%	3.75%	3.90%	3.80%
Maximum	13.00%	15.00%	12.00%	10.00%	6.88%
Average	6.32%	4.70%	2.98%	3.26%	3.14%

- The 6.00% median increase in 2023 is the highest percentage increase since Ziegler began collecting data more than a decade ago
- The projected 2023 median increase (from Fall 2022) was 5.00%

Source: Ziegler CFO Hotline<sup>SM</sup>, April 2023



### OPERATING EXPENSES



#### **Resident-Related**

- Health center staffing and Agency usage/length of stay
- Dining and hospitality
- Robots?
- Housekeeping and maintenance
- Watch for "scope creep"

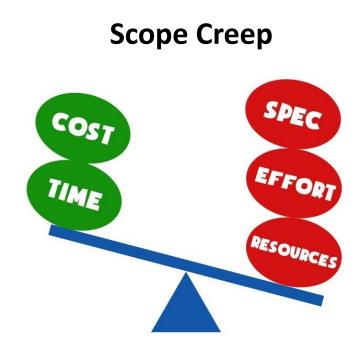
#### Corporate

- Labor Cost huge factor
- Marketing Cost building waitlist
- General and administrative
- Be wary of "Benefit Creep"
- Reducing staff turnover



## MONTHLY SERVICE FEE ALTERNATIVES

- Unbundle services
- Flexible spending amount "Resort credit"
  - Meal services
  - Spa
  - Salon
  - Excursions
  - Transportation
- Discounted monthly fee while in independent living (only) in exchange for lower entrance fee refund





### BENCHMARKS MAY BE HELPFUL

- Numerous resources are provided at the end of this slide deck
- Broadly speaking, labor comprises
  - 30-45% of revenue for CCRCs
  - 25-30% for pure independent living, and
  - 40-50% for more health-care centric models such as assisted living and memory care. Skilled nursing labor is more nuanced (see added slides).
- Net operating income margins (excluding COVID stimulus funds):

Type of Community	NOI Margin
Independent living	25-35%
Independent + Assisted Lvg	17-32%
Independent +Asstd+Memory	17-31%
Assisted Living Only	5-28%
Assisted+Memory	6-23%
CCRCs	23-45%

Source: The State of Seniors Housing 2022

# On a downward path? What can you do?







### FOR THOSE WHO CANNOT SUSTAIN...

- Intervention leading to major change in business model and/or location - RARE
- Change in leadership (can be third-party manager)
- Change in Board
- Change in ownership altogether affiliation, or sponsorship transition, or outright sale
- Joint ventures/partnerships to change revenue mix/cost structure
- Last resort: Bankruptcy or Closure



## SPONSORSHIP TRANSITION/ LIMITLESS AFFILIATION VS. MERGER/SALE

#### AFFILIATION OR SPONSORSHIP TRANSITION

- Affiliation describes a relationship between two or more parties; usually the two parties remain separate corporate entities, although one generally "controls" both
- Control is usually in the form of restructured Articles of Incorporation & Bylaws and a management contract; often the affiliator becomes the sole corporate member of the affiliatee
- Typically all assets and liabilities are included in the transaction
- Capital may or may not change hands; sometimes the affiliator commits to \$x of capital support invested immediately or over time
- The affiliatee may or may not join an existing obligated group for financing/refinancing purposes
- This structure is for two not-for-profits

## SPONSORSHIP TRANSITION/ LIMITLESS AFFILIATION VS. MERGER/SALE

#### MERGER, ACQUISITION, SALE

- A merger is a combination of two entities into a single entity
- In an acquisition, one entity generally acquires the assets of another entity and either combines everything in the acquirer, or acquirer creates a new entity which assumes ownership of the acquired assets
- Assets and liabilities may be acquired in whole or in part
- Capital typically changes hands based on third-party valuations/appraisals of the assets and liabilities being purchased
- May involve a for-profit and a not-for-profit, 2 for-profits or 2 not-forprofits

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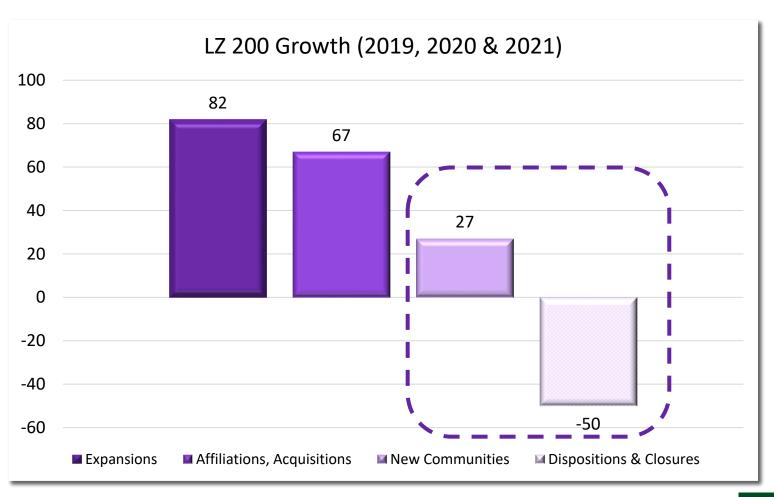
## PRIMARY DRIVERS OF NOT-FOR-LIMITLESS PROFIT CONSOLIDATION

	1990	2000	2010	2022
Ability to Attract & Retain Taler	nt	•	•	
Complexities of Healthcare		•		
S Financial Pressures	COVID-19 ACCELERATED		•	<b>②</b>
(2) Leadership Turnover		•		
Competition	•			
Board Strength				
Technology Demands		•	•	<b>②</b>
Access to Capital	•			•
Reinvestment Requirements				
Health System Consolidation		<b>⊘</b>	•	<b>②</b>
Diversify Service Lines				•



### NOT-FOR-PROFIT SENIOR LIVING LIMITLESS GROWTH OVER THE PAST THREE YRS

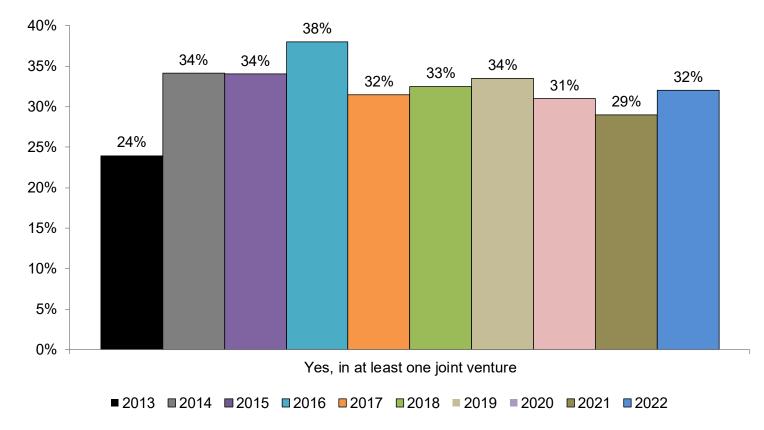
- Nearly all not-for-profit growth is coming from existing providers
- Number of closures and dispositions outpacing the number of new campus developments
- Increasingly, new developments without skilled nursing component



#### Most common

- Home health
- Home care
- Hospice
- PACE

#### PERCENTAGE ENGAGED IN A FORMAL JOINT VENTURE



Increase to LZ 150 with 2014 report; and increase to LZ 200 with 2018 report

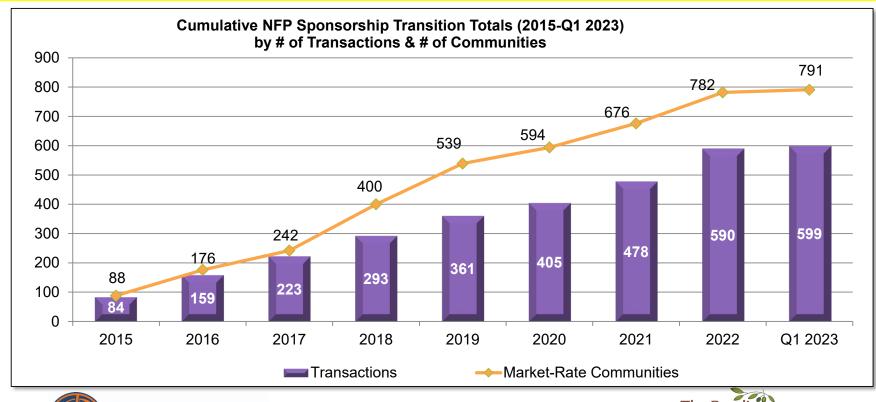
## 2022 LEADINGAGE ZIEGLER 200 LIMITLESS JOINT VENTURE PARTNERS

Type of JV/With Whom	
Most Mentions	# of Mentions
Another NFP Senior Living Provider	56
Home Health/Home Care	27
Hospital/Health System/Mobile Medical	25
Physican's Group	19
Rehabilitation/Therapy	19
HUD/Affordable Housing	17
Hospice	17
Case Management	9
PACE	6
Church/University	5

64 responses, but multiple mentions

## SECTOR CONSOLIDATION LIMITLESS (2015 - 2023 Q1)

- Since 2015, 50% have been dispositions to the FP sector (SNFs; distressed communities)
- LPCs are the most likely to stay NFP if up for ownership transition
- Increase in NFP closures the past two years





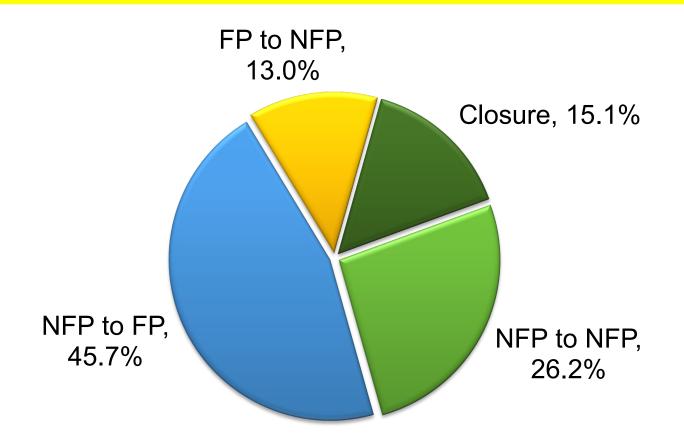






## NFP CHANGE OF OWNER LIMITLESS TRANSACTIONS; 2015-2023 Q1

**FP** = for-profit NFP = not-for-profit

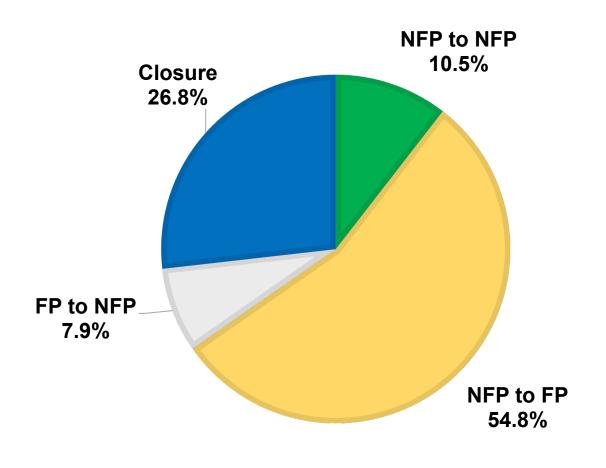


Source: Ziegler Investment Banking (3/31/2023)

## NOT-FOR-PROFIT FREESTANDING LIMITLESS NURSING HOMES 2015 TO 2023 Q1

 Nearly 250 not-for-profit nursing homes have changed owner/sponsor or have closed since 2015

 Excludes CCRCs/life plan communities that have fully exited skilled nursing

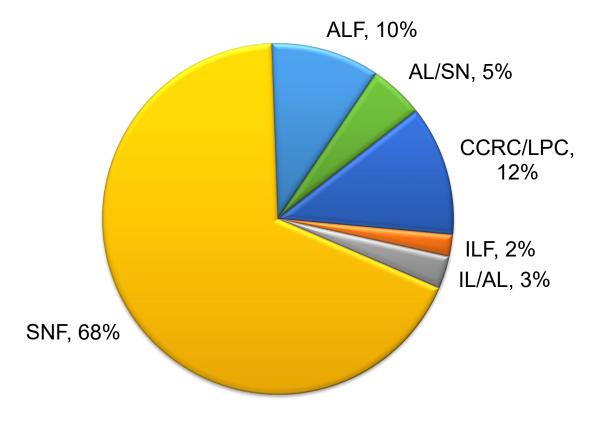


Source: Ziegler Investment Banking (3/31/2023)



- Nearly 120 since 2010
- More than 40% of these closures have occurred since the onset of the pandemic in the year 2020
  - Financially challenged
  - Dated communities
  - Rural markets
  - Heavy healthcare pressures

#### **NFP Closures (2010 – Q1 2023)**



Source: Ziegler Investment Banking (3/31/2023)



## LAST RESORT: BANKRUPTCY

#### CALIFORNIA-NEVADA METHODIST HOMES









## **Benchmarking Sources**

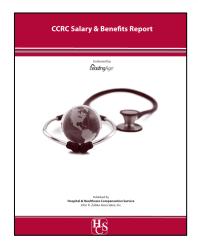






## COMPENSATION

Report	Source	Cost?	Notes
LeadingAge CEMO Leadership Compensation Survey (CLA)	CliftonLarsonAllen	Yes	Only reflects multi-site organizations and C-Suite positions Based on survey respondents
CCRC Salary & Benefits Report	Hospital & Healthcare Compensation Service	Yes	Highest level is Exec. Director; Covers director-level as well as hourly positions; breaks down data by region and size Based on survey respondents
An Analysis of NFP Senior Living Executive Compensation	LW Consulting	No	Two reports: (1) Single-sites and (2) Multi-sites; Reflects C-Suite positions Obtained from 990s
State association surveys	State Associations in partnership	Varies	Surveys conducted among members







## COMPENSATION

#### Multi-Sites

CE	0	Data	Base	Bonus	Other	Deferred	Non-Tax	Total
	ata	Average	359,092	107,111	71,996	43,040	20,703	506,802
	All Data	Median	322,817	61,811	19,000	16,887	18,321	411,400
Cohort	- 25	Average	437,451	126,385	71,693	48,022	20,219	638,013
CoA	171	Median	454,623	95,469	29,886	18,037	17,360	600,812
	LZ 175-200	Average	249,922	48,825	19,743	17,311	20,024	298,740
	LZ 17	Median	265,424	42,105	16,595	9,526	17,144	302,269

#### Single-Sites

CE	0	Data	Base	Bonus	Other	Deferred	Non-Tax	Total
	All SS Data	Average	251,298	46,857	23,050	18,210	16,351	314,656
	Allss	Median	243,951	2,773	0	9,753	11,101	281,345
	- 25	Average	272.958	87,350	37,335	23,964	14,005	355,610
넕	S 1	Median	229,061	0	0	13,470	13,282	249,348
Cohort	- 150	Average	244,860	40,049	12,009	22,775	13,786	302,928
	SS 125	Median	229,756	1,750	0	11,651	12,251	267,019
	000	Average	359,092	107,111	71,996	43,040	20,703	506,802
	LZ 200	Median	322,817	61,811	19,000	16,887	18,321	411,400
	LZ 200 data provided for comparison purposes only.							

Source: LW Consulting; February & April 2022

### COMPENSATION: NURSING STAFF

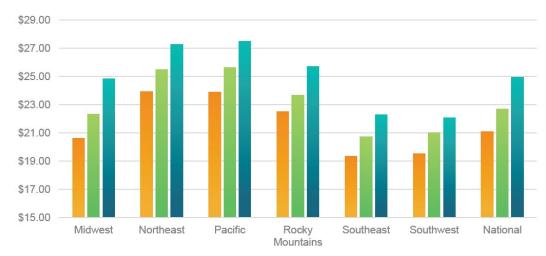
2021 Hourly Compensation Averages:

RN: \$38.98

LPN: \$29.62

CNA: \$17.94

#### **Nursing Hourly Wage**



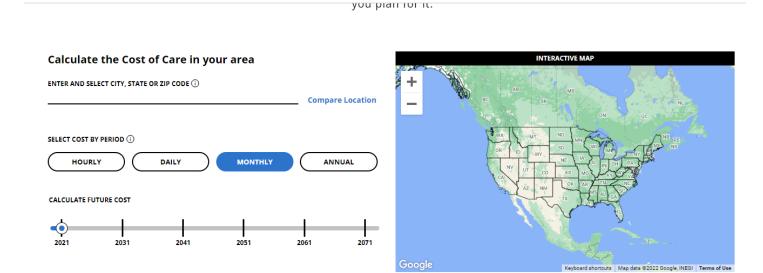
2019	■2020	2021
2010		202

	2019	2020	2021
Midwest	20.62	22.34	24.83
Northeast	23.94	25.49	27.27
Pacific	23.91	25.64	27.50
Rocky Mountains	22.50	23.69	25.73
Southeast	19.37	20.74	22.31
Southwest	19.52	21.02	22.07
National	21.09	22.70	24.94



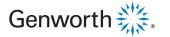
Genworth \*\*\*

## COST OF CARE



**Customer Service** 

Claims



- It's free!
- Interactive website
- Can drill down into metro market
- Current and projected

#### Monthly Median Costs: National (2021)

Aging & You

Products

In-Home Care	<b>①</b>
Homemaker Services <sup>1</sup>	\$4,957
Home Health Aide <sup>1</sup>	\$5,148

Community and Assisted Living	<b>(i)</b>
Adult Day Health Care <sup>2</sup>	\$1,690
Assisted Living Facility <sup>3</sup>	\$4,500

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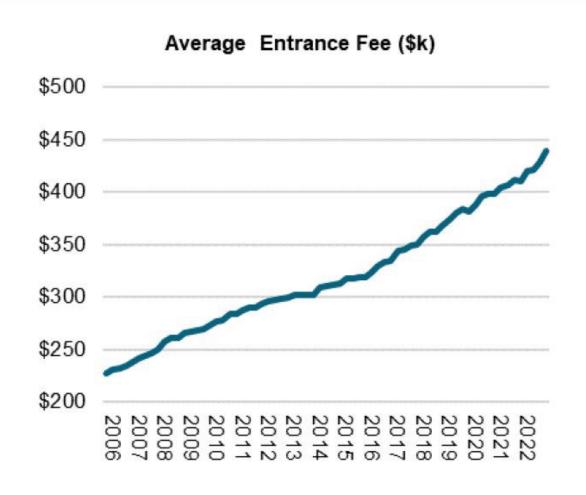
Print to PDF

https://www.genworth.com/aging-andyou/finances/cost-of-care.html

• Change weekly In-Home Care hours (Only available with Daily, Monthly, or Annual Cost by Period)



## CCRC ENTRANCE-FEE DATA

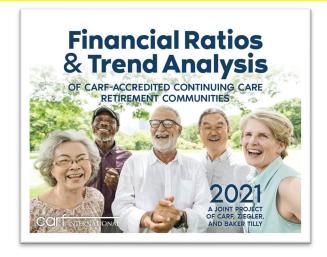


- Average Entry Fee increase accelerated in Q4 2022; yearover-year increase of 7.0% to \$439,606
- Highest annual increase in the last decade
- Entry Fee increase outpaced monthly fee year-over-year increase (4.4%)

Source: NIC MAP Data Service, Q4 2022



### FINANCIAL RATIOS



CARF Accredited organizations

- Single-site vs. Multisite Medians
- By Contract type

Exclusively for the use of Cathy Owen at Ziegler Capital Markets. Downloaded: 06-Sep-2022



Public Finance
Healthcare

#### 2022 Median Ratios

Not-for-Profit Life Plan Communities Showing Recovery, but Challenges Lie Ahead

"Fiscal 2021 was a recovery year for LPCs, but challenges lie ahead for the sector."  $\,$ 

Margaret Johnson, Fitch Ratings



#### Portfolio Overview

Fitch Ratings maintains public ratings on 158 life plan communities (LPCs) as of Aug. 5, 2022. The 2022 investment grade (IG) medians comprise 114 providers, while below investment grade (BIG) medians include 44 communities. The number of ratings has grown steadily over the past five years, as there were 99 and 28 IG and BIG ratings, respectively, in 2016.

The median rating is 'BBB', while the number of ratings in the 'BBB' rating category remains the largest at 81 (or about 51%), versus 31 (20%) in the 'A' rating category. The number of BIG ratings has steadily increased in recent years; this is mostly the result of new borrowers being added to Fitch's rated portfolio, rather than ratings being downgraded.

Within Fitch's median portfolio, Type A contract providers remain the plurality with 57 (about 36% of the portfolio), followed by Type C providers at 56 (35%) and Type B providers at 41 (26%). Median data by contract type exclude providers offering rental or month-to-month residency agreements.

#### **Fitch-Rated Credits**

- By Rating Category
- Single-site vs. Multi-site Medians
- By contract type





#### COVID-19 IMPACT ANALYSIS FOR NFP CCRCS

Mike Vitiello | Vice President | Credit Surveillance and Analytics | mvitiello@ziegler.com

Dated: January 25, 2022

#### EXECUTIVE SUMMARY

In our recent median report (dated November 15, 2021), we promised an in depth, COVID-related analysis of our ratio data. In this companion report, we attempt to examine the actient to which COVID-19 affected senior living providers, using our median ratio sample group as a proxy. We will focus on determining the financial impact on core operations, as well as sifting out the accounting impact of the various governmental aid programs.

As always, we encourage feedback regarding this report from the investing community. While we consider the raw data to be proprietary information, we can perform additional analysis/summarization upon request. Please contact the author with any comments or requests for additional information.

#### Summary of Pertinent Median Report Data

This seport is a supplement to our FY 2020 CCRC Median Report, dated Novembre 15, 2021. We highly recommend that the eader has that report, available on Ziegler-Credifsurveillance.com, open as well for reference and context. To keep this report as concise as possible, we assume the rander has reviewed and generally understands the material in that report, possesses a baseline of knowledge regarding CCRCs and has extirely monitored the impact of COVID-19 on the senior long industry since March 2020. We follow all conventions and definitions lad out in that report. We intend to ordere an update to this report next year along with our FY 2021 CCRC Median Report, as COVID-aid funding will continue to materially impact financial statement.

There are some statistics from the 2020 median report that we want to neitreate for the reader in the context of this report. Staty-six boronwers (7% of the 16 borrower sample group) received a PPP loan during their FYE 2020, with the median amount received expanting to 3.25 DeCh1 Teuerly-durke boronwers (20% of entire sample, 3.3% of those that received PPP) amountized at least a portion of their PPP loan during their FYE 2020, with the median amount amounted equating to 0.45 times coverage.

#### **Ziegler Credit Surveillance**

- Ziegler underwritten borrowers
- Investment grade vs. nonrated
- -Multi vs. Single

Source: CARF, Fitch, and Ziegler Investment Banking



# HOME & COMMUNITY-BASED

### LIMITLESS SERVICES: HOME HEALTH MARGINS

TABLE 8-7

#### Historically high Medicare margins for freestanding home health agencies in 2021

	Prepandemic	Pand	lemic	Share of	18081119999	
	2019	2020	2021	home health agencies, 2021	Share of periods, 2021	
All	15.4%	20.2%	24.9%	100%	100%	
Geography						
Majority urban	16.1	20.0	24.8	85.0	85.1	
Majority rural	14.2	21.6	25.2	15.0	14.9	
Type of ownership						
For profit	17.4	22.7	26.1	88.2	82	
Nonprofit	11.4	12.4	20.2	11.8	18	
Volume quintile						
First (smallest)	9.7	11.6	14.0	20	2.5	
Second	11.4	14.0	15.9	20	5.8	
Third	13.3	17.0	19.3	20	10.4	
Fourth	14.1	18.8	22.8	20	18.6	
Fifth (largest)	17.5	22.4	28.3	20	62.6	

Note: Home health agencies were classified as majority urban if they provided more than 50 percent of 30-day periods to beneficiaries in urban counties and were classified as majority rural if they provided more than 50 percent of episodes to beneficiaries in rural counties. These data do not include federal provider relief funds that HHAs received due to the public health emergency.

# HOME & COMMUNITY-BASED LIMITLESS SERVICES: HOSPICE MARGINS

#### TABLE 10-11

#### Hospice Medicare aggregate margins by selected characteristics, 2016 to 2020

Category	Share of hospices 2020	2016	2017	2018	2019	2020
All	100%	10.9%	12.5%	12.4%	13.4%	14.2%
Freestanding	83	14.0	15.3	15.1	16.2	16.7
Home health based	9	6.2	8.1	8.4	9.6	11.2
Hospital based	8	-16.7	-13.8	-16.5	-18.4	-18.2
For profit	73	17.9	20.0	19.0	19.2	20.5
Nonprofit	24	2.2	2.5	3.8	6.0	5.8
Urban	83	11.4	12.9	12.6	13.6	14.3
Rural	17	6.3	8.9	10.3	11.5	13.5
Patient volume (quintile)						
Lowest	20	-3.1	-1.1	-3.1	-4.5	-2.1
Second	20	6.2	6.7	5.6	6.2	4.9
Third	20	11.2	13.8	13.8	13.5	14.2
Fourth	20	13.1	15.2	14.0	15.8	17.9
Highest	20	11.1	12.5	12.7	13.9	14.4
Below cap	81	10.7	12.6	12.5	13.8	14.8
Above cap (excluding cap overpayments)	19	12.6	12.1	10.1	10.0	7.7
Above cap (including cap overpayments)	19	20.2	21.9	21.8	22.5	22.8
Share of stays > 180 days						
Lowest quintile	20	-5.4	-4.5	-3.0	-2.5	-0.4
Second quintile	20	5.8	7.0	8.5	10.3	11.8
Third quintile	20	14.8	17.1	16.8	19.9	20.0
Fourth quintile	20	20.0	22.1	20.8	22.8	24.1
Highest quintile	20	15.0	17.8	17.6	13.4	13.4
Share of patients in nursing facilities and assisted living facilities						
Lowest half	50	4.8	6.3	6.1	6.6	7.5
Highest half	50	16.2	18.1	17.3	18.7	18.9

Note: Margins for all provider categories exclude overpayments to above-cap hospices, except where specifically indicated. Medicare aggregate margins are calculated based on Medicare-allowable, reimbursable costs. Margin by hospice ownership status is based on hospices' ownership designation from the Medicare cost report. The rural and urban definitions used in this chart are based on updated definitions of the corebased statistical areas (which rely on data from the 2010 census).

Source: MedPAC analysis of Medicare hospice cost reports, Medicare hospice claims data, and Medicare Provider of Services file from CMS.

### SPENDING ON TECHNOLOGY

### Percentage of Total Capital Budget Devoted to Technologies

	2022	2020	2018	2016	2014
Average % (Total)	8.3%	8.0%	10.0%	11.8%	12.2%
Median % (Total)	5.0%	5.0%	7.0%	7.0%	9.5%
Average % (Single-sites)	9.1%	7.2%	10.4%	11.7%	12.1%
Median % (Single-sites)	5.0%	5.0%	7.0%	7.0%	10.0%
Average % (Multi-sites)	7.1%	9.3%	9.7%	11.8%	12.2%
Median % (Multi-sites)	5.0%	5.0%	5.0%	7.0%	8.0%

Source: Ziegler CFO Hotline<sup>SM</sup>, January 2023



# MULTI-SITE MANAGEMENT FEES

How is your organization's corporate allocation/management fee calculated?	All Respondents
% of Revenue	63.0%
Fixed Dollar Amount	7.4%
Both	4.9%
Neither	1.2%
Other	23.5%

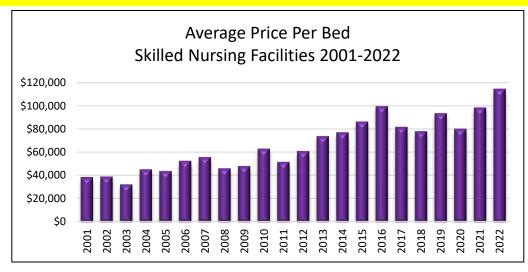
If a % of revenue, what is that current percentage	All Respondents
Minimum	4.0%
Median	6.0%
Maximum	17.0%
Average	6.4%

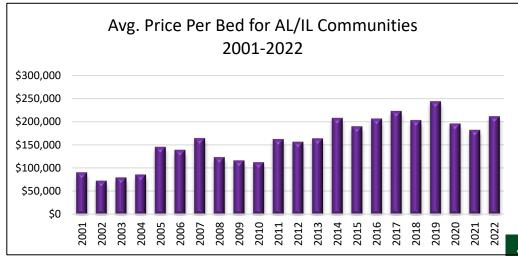


# M&A: VALUATIONS, CAP RATES



- Full report for purchase
  - Multiple crosstabulations of sale data
  - Full listing of public sales transactions



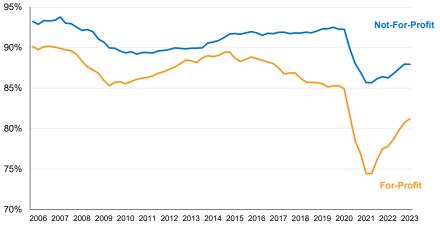




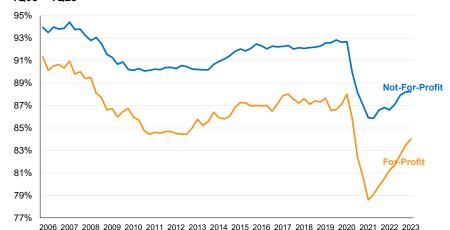
### OCCUPANCY

- NIC is the primary aggregator and reporter of occupancy data
- Full access requires subscription
- Ziegler includes CCRC occupancy data every quarter in Z-News





#### CCRC Occupancy by Profit Status; MAP31 4Q05 - 1Q23



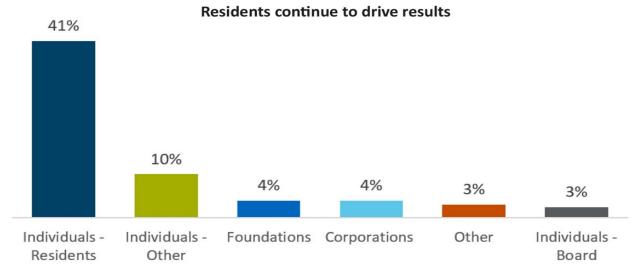


### PHILANTHROPY IN SENIOR LIVING

Net Revenue Per Independent Living Unit				
All Single-Site Multi-Site				
Minimum	\$233	\$276	\$233	
Median	\$2,551	\$3,599	\$2,225	
Maximum	\$61,015	\$61,015	\$77,083	

### Marts&Lundy

Balancing Revenu	e and Expenses	3	
	All	Foundation	Departmental
Median Revenue	\$1.9M	\$2.4M	\$1.7M
Median Costs	\$426,618	\$600,000	\$200,000

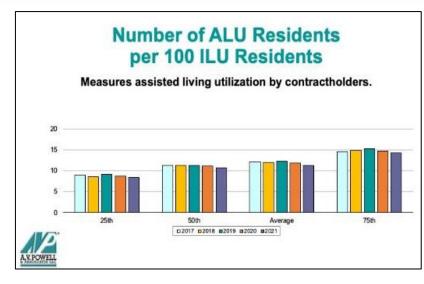


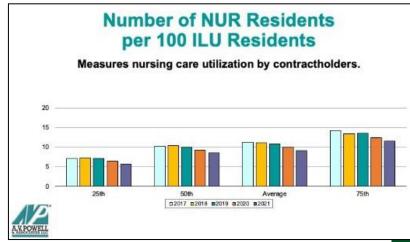
Medians were calculated independently for each donor category and therefore do not total 100%



### RATIO OF HEALTHCARE BEDS

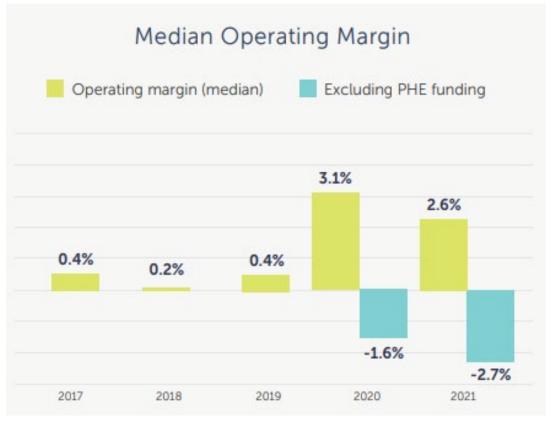
- The ratio of healthcare beds to Independent Living units/residents has been declining
- The pandemic accelerated this trend
- Residents increasingly agnostic regarding the setting for services





Several reports released annually

 Accounting firms, other consulting firms; Aggregate CMS data from annual cost reports



Source: <u>37<sup>th</sup> SNF Cost Comparison and Industry Trends Report</u>



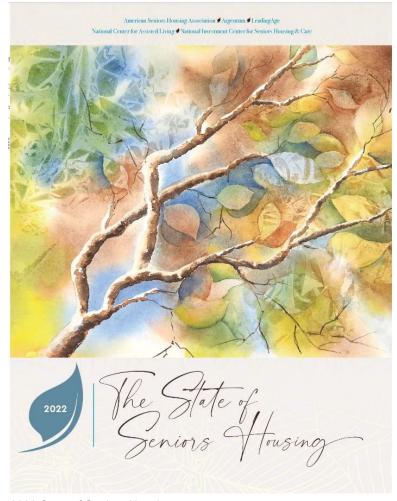
### SKILLED NURSING LENGTH OF STAY

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## STAFFING-RELATED STATISTICS



### AVERAGE FTEs: CCRCs

Department	Minimum	Average		
Administrative	2.0	9.6		
Dietary	8.0	52.5		
Housekeeping	2.0	19.8		
Maintenance	2.0	12.4		
Marketing	1.0	4.1		
Assisted Living	1.0	27.8		
Nursing	9.0	47.6		
Activities	1.0	6.2		
Weighted Average FTE per AL/MC Resident: .55				
Weighted Average FTE per SN Resident: 1.55				

Source: 2022 State of Seniors Housing



### ABOUT ZIEGLER

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