

Branmoor Health

PROVIDER DILIGENCE SHEET

Nakatomi Plaza Medical Center

410-bed investor-owned acute-care hospital & Level II trauma center · Century City, CA · CCN 05-0042 (illustrative)

ILLUSTRATIVE SAMPLE — READ FIRST

This is a fictional entity built to show the structure, breadth, and source discipline of a Branmoor Provider Diligence Sheet. The sheet presents the most notable, source-tagged findings; the full underlying dataset accompanies it as **branmoor-sample-provider-diligence-data.csv**. Every figure is tagged [source · as-of · confidence] and traces to a primary source — there is no subjective interpretation in the data. A left red bar marks a diligence flag.

COVERAGE: Draws on Branmoor Health plus all five supporting record sets — Markets, Earth, Tax, Supply, and Global — and the Context Layer.

Prepared by Branmoor Health · 2026-05-30 · Outside-in, primary-source · Non-attest

SAMPLE

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HOW TO READ THIS FILE

H = audited or filed primary source · M = primary source with a timing lag or partial coverage · L = single-source or preliminary. A blank means the value was not present in any primary source and was not estimated. Findings connect sourced facts; they do not assert judgments, recommendations, or opinions.

Executive findings

The most notable, source-tagged observations from the data. Full line items are in the accompanying CSV and in the sections that follow.

1. Margin has compressed while revenue grew.

Operating margin moved from 6.8% (FY22) to 4.7% (FY24) even as net patient revenue rose 10.6%; reported EBITDA fell from \$71.2M to \$58.9M. *(Branmoor: Hospital Financial Pulse, Cost Report Forensics)*

2. Leverage is high and liquidity is thin.

Funded debt of \$480M equals 8.6x adjusted EBITDA; days cash on hand declined from 41 to 29 over three years; fixed-charge coverage sits at 1.3x against a 1.10x covenant. *(Branmoor: Hospital Bond and Covenant Watch)*

3. A refinancing wall sits inside three years.

Roughly \$460M matures by 2029 (term loan 2028, notes 2029) against a current Baa corporate benchmark of 6.02%. *(Branmoor: Bond and Covenant Watch + Context Layer)*

4. Revenue is concentrated and slower to collect.

One commercial payer is 24% of net revenue; AR days are 58 against a 49 peer median; the initial denial rate is 7.4%. *(Branmoor: Payer Mix; Revenue Cycle Leakage Atlas)*

5. Related-party structure affects reported earnings.

A 2021 sale-leaseback created a sponsor-controlled PropCo with \$28.5M annual rent escalating 3%; \$4.5M of above-market rent and a \$2.5M management fee are isolated in the QoE bridge. *(Branmoor: Ownership and Related-Party Economics)*

6. Supply continuity carries named exposures.

Three single-source IV drugs match the active FDA shortage list; the imaging fleet is sole-vendor with overseas manufacturing, and that vendor is under an open UFLPA forced-labor review. *(Branmoor: RXWatch; Branmoor Supply / Global)*

7. Facility capex is deferred against a hard deadline.

Average plant age is 11.2 years and capex runs below depreciation (0.8x); an OSHPD SB-1953 seismic retrofit is due 2030, estimated at \$40–70M. *(Branmoor: Capex and Facility Investment Tracker; Branmoor Earth)*

8. Compliance screens are clear; two items stay open.

OIG exclusion and OFAC sanctions screens are clear across the entity and nine key individuals, and a 2023 DOJ 340B settlement (\$2.1M) is resolved; a UFLPA vendor review and a Prop 13 reassessment remain open. *(Branmoor: Enforcement Watch; Branmoor Global / Tax)*

SECTION 1 · BRANMOOR CONTEXT

Macro backdrop — Branmoor Context Layer

Powered by: Context Layer

Selected rails from Branmoor's 15-benchmark Context Layer, dated and source-linked. Every figure in this file is read against this backdrop.

| Benchmark | Latest | As of | Relevance |
|----------------------------------|-------------|---------|---|
| Federal funds effective rate | 3.64% | 2026-04 | Floating-rate term-loan cost base |
| 10-year Treasury yield | 4.45% | 2026-05 | Refinancing and valuation discount anchor |
| Moody's Baa corporate bond yield | 6.02% | 2026-05 | All-in cost to refinance the 2029 notes |
| High-yield OAS | 2.72% | 2026-05 | Leveraged-credit risk appetite |
| Medical care CPI | 591.2 | 2026-04 | Patient affordability and bad-debt pressure |
| Hospital services CPI | 357.4 | 2026-04 | Provider pricing power vs. payers |
| General med/surg hospitals PPI | 251.2 | 2026-04 | Input-cost pressure on operating margin |
| Pharmaceutical preparations PPI | 691.1 | 2026-04 | Drug-cost backdrop for pharmacy spend |
| Electricity, U.S. city average | \$0.194/kWh | 2026-04 | Facility energy cost (no on-site cogen) |

SECTION 2

Entity identity and ownership

Powered by: Ownership and Related-Party Economics

| Field | Value | Source | As of | Conf. |
|-----------------------|--------------------------------------|---------------------|---------|-------|
| Legal entity | Nakatomi Plaza Medical Center, Inc. | NPPES / SoS | 2026-04 | H |
| Facility type | 410-bed acute-care; Level II trauma | CMS POS | 2026-03 | H |
| CMS Certification No. | 05-0042 (illustrative) | CMS POS | 2026-03 | H |
| Organization NPI | 1nnnnnnnn (illustrative) | NPPES | 2026-03 | H |
| Ownership type | Investor-owned (for-profit) | CMS POS / SoS | 2026-03 | H |
| Parent / sponsor | Gruber Health Holdings, LLC | SoS / UCC / press | 2026-02 | M |
| Acquisition | 2021 sponsor LBO; sale-leaseback | County deed / UCC | 2021 | M |
| Real estate | PropCo / OpCo split | County deed / UCC | 2025 | M |
| Related-party leases | Affiliated REIT (sponsor-controlled) | UCC / lease notices | 2025 | M |

SECTION 3 · BRANMOOR MARKETS

Ownership, capital structure, and credit

Powered by: Hospital Bond and Covenant Watch · Branmoor Markets

| Item | Value | Source | Conf. |
|----------------------------|-------------------------------------|--------------------------|-------|
| Senior secured term loan B | \$310.0M (SOFR + 450 bps), due 2028 | UCC / lender filings | M |
| Senior unsecured notes | \$150.0M, 7.75%, due 2029 | MSRB / issuer disclosure | H |
| Revolving credit facility | \$50.0M (\$20.0M drawn) | UCC / lender filings | M |
| Total funded debt | \$480.0M | Aggregated filings | M |

| Item | Value | Source | Conf. |
|------------------------|-------------------------------|-----------------------|-------|
| Issuer rating | B3 / B- (illustrative) | Rating-agency notices | H |
| Sponsor management fee | \$2.5M/yr (added back in QoE) | Press / lender deck | L |
| Last refinancing | 2024 repricing of term loan B | Lender filings | M |

SECTION 4

Historical financials and normalization

Powered by: Hospital Financial Pulse + Rural Closure Watch · Cost Report Forensics

Three years from CMS HCRIS audited cost reports, cross-checked to bond-disclosure financials. Normalized to a 52/53-week basis.

| Metric (\$000) | FY22 | FY23 | FY24 | Source | Conf. |
|-------------------------|---------|---------|---------|-----------------|-------|
| Net patient revenue | 472,000 | 498,500 | 521,800 | HCRIS | H |
| Total operating revenue | 489,300 | 516,900 | 540,200 | HCRIS | H |
| Operating income | 33,300 | 30,500 | 25,400 | HCRIS | H |
| Operating margin | 6.8% | 5.9% | 4.7% | HCRIS | H |
| Reported EBITDA | 71,200 | 66,400 | 58,900 | HCRIS / bonds | H |
| Capital expenditure | 24,100 | 19,800 | 16,400 | HCRIS | M |
| Days cash on hand | 41 | 36 | 29 | Bond disclosure | M |

SECTION 5

Quality of earnings bridge (FY24)

Powered by: Healthcare QoE / QoR Memo

Each adjustment ties to a bond-disclosure or cost-report line; no analyst estimates are used.

| Bridge item (\$000) | Amount | Source | Conf. |
|--|---------|------------------------------|-------|
| Reported EBITDA | 58,900 | HCRIS / bonds | H |
| Less: above-market PropCo rent | (4,500) | Lease notices / market | M |
| Less: non-recurring 340B settlement gain | (3,100) | DOJ / financials | H |
| Add: one-time restructuring charge | 2,200 | Bond disclosure | M |
| Less: closed service-line run-rate | (600) | Cost report | M |
| Add: sponsor management fee | 2,500 | Lender deck | L |
| Adjusted EBITDA | 55,400 | Branmoor build on filed data | M |
| Net leverage (debt / adj. EBITDA) | 8.6x | Branmoor build on filed data | M |

SECTION 6

Payer mix and reimbursement exposure

Powered by: Payer Mix and Reimbursement Exposure

| Payer class | % net rev. | Denial rate | Source | Conf. |
|--------------------------|------------|-------------|---------------|-------|
| Medicare | 38% | 6.9% | HCRIS / CMS | H |
| Medicaid (incl. managed) | 18% | 9.6% | HCRIS / state | M |

| Payer class | % net rev. | Denial rate | Source | Conf. |
|----------------------------|------------|-------------|--------|-------|
| Commercial — largest payer | 24% | 5.1% | HCRIS | M |
| Commercial — all other | 15% | 5.6% | HCRIS | M |
| Self-pay / other | 5% | n/a | HCRIS | M |

SECTION 7

Revenue-cycle leakage and denials

Powered by: Revenue Cycle Leakage Atlas · Denial Reason Atlas

| Metric | Value | Peer median | Source | Conf. |
|--------------------------------|--------------------|-------------|--------------|-------|
| AR days | 58 | 49 | HCRIS / RCM | M |
| Initial denial rate | 7.4% | 6.0% | Denial feeds | M |
| Final write-off rate | 2.9% | 2.1% | Cost report | M |
| Bad-debt expense (3-yr change) | +210 bps | — | HCRIS | H |
| Top denial reason | Eligibility / auth | — | Denial feeds | M |

SECTION 8

Price transparency and chargemaster

Powered by: ClearRate for Employers · ClearRate for Patients

From the hospital's machine-readable transparency file, parsed and compared by ClearRate.

| Item | Value | Source | Conf. |
|-------------------------------|------------------------------|--------------------|-------|
| Transparency file | Posted; passes CMS schema | Hospital MRF / CMS | H |
| Shoppable services posted | 312 of 300 required | Hospital MRF | H |
| Median commercial-to-Medicare | 3.1x | ClearRate parse | M |
| Widest payer rate spread | 2.4x across payers, same DRG | ClearRate parse | M |
| Gross-to-net realization | 31% of charges | HCRIS / MRF | M |

SECTION 9 · BRANMOOR MARKETS

Debt, covenants, leases, and refinancing

Powered by: Hospital Bond and Covenant Watch · Branmoor Markets

| Item | Value | Source | Conf. |
|----------------------------|---|------------------------------|-------|
| Total funded debt | \$480.0M | Aggregated filings | M |
| Net leverage (adj. EBITDA) | 8.6x | Branmoor build on filed data | M |
| Fixed-charge coverage | 1.3x (covenant \geq 1.10x) | Bond disclosure | H |
| Covenant headroom | Thin — 18% above minimum | Bond disclosure | M |
| Nearest maturities | Term loan 2028; notes 2029 | MSRB / UCC | H |
| PropCo lease (annual rent) | \$28.5M, 3% annual escalator | Lease notices | M |
| Refinancing exposure | \$460M inside 36 months at Baa \approx 6% | MSRB + Context Layer | M |

SECTION 10 · BRANMOOR SUPPLY

Labor, staffing, and input cost

Powered by: Labor Cost and Staffing Pressure · Branmoor Supply

| Metric | Value | Source | Conf. |
|------------------------------|----------------------------|-----------------|-------|
| Total FTEs | 2,950 | CMS Cost Report | H |
| Contract-labor % of salaries | 11% (peak 17% FY22) | HCRIS S-3 | M |
| CMS area wage index | 1.32 (high-cost CA market) | CMS wage index | H |
| Salaries % of net revenue | 54% | HCRIS | H |
| RN vacancy (county proxy) | 12% | BLS / state | L |
| Premium / overtime pay trend | Elevated vs. pre-2022 | HCRIS S-3 | M |

SECTION 11 · BRANMOOR SUPPLY

Drug and device supply continuity

Powered by: RXWatch: Drug Shortage Tracker · Recall Watch · Branmoor Supply

| Item | Value | Source | Conf. |
|---------------------------------|--------------------------------|--------------------------|-------|
| Single-source drugs on shortage | 3 IV agents (active list) | FDA / openFDA (RXWatch) | M |
| Formulary items under recall | 2 (Class II) | FDA (Recall Watch) | H |
| Imaging fleet supply | Sole-vendor; overseas mfg | Customs / vendor filings | M |
| Implant/device failure signals | 1 product on surveillance list | FDA MAUDE | M |
| GPO concentration | Single primary GPO | Vendor filings | L |

SECTION 12

Service-line economics

Powered by: Service-Line Economics Map

Margins derived only from reported cost-center allocations in the audited cost report; not re-estimated.

| Service line | Share of CMI-wtd vol. | Trend | Source | Conf. |
|-----------------|-----------------------|-----------|--------|-------|
| Cardiology | 23% | Stable | HCRIS | M |
| Orthopedics | 19% | Growing | HCRIS | M |
| Neurosurgery | 12% | Stable | HCRIS | M |
| Level II trauma | 11% | Growing | HCRIS | M |
| Obstetrics | 8% | Declining | HCRIS | M |

SECTION 13

Capex and facility investment

Powered by: Capex and Facility Investment Tracker

| Item | Value | Source | Conf. |
|----------------------|----------------------|--------|-------|
| Average age of plant | 11.2 years | HCRIS | M |
| Trailing 3-yr capex | \$20.1M / yr average | HCRIS | M |

| Item | Value | Source | Conf. |
|----------------------------|-----------------------|-----------------------|-------|
| Capex-to-depreciation | 0.8x (below 1.0x) | HCRIS | M |
| Seismic retrofit (SB-1953) | Est. \$40–70M by 2030 | Cal HCAI / contractor | L |

SECTION 14 · BRANMOOR EARTH

Facility and environmental risk

Powered by: *Branmoor Earth*

| Item | Value | Source | Conf. |
|--------------------------|--------------------------------------|------------------|-------|
| Seismic compliance | OSHPD SB-1953 retrofit due 2030 | Cal OSHPD / HCAI | H |
| Air quality | South Coast AQMD ozone nonattainment | EPA AQS / ECHO | H |
| Flood exposure | FEMA Zone X (minimal) | FEMA NFHL | H |
| Underground storage tank | 1 active (backup-gen fuel) | EPA FRS / state | M |
| Environmental violations | None major, 3-yr lookback | EPA ECHO | H |
| Nearest Superfund (NPL) | None within 3 miles | EPA SEMS | H |

SECTION 15 · BRANMOOR TAX

Tax posture and incentives

Powered by: *Healthcare Tax Diligence Review · Branmoor Tax*

| Item | Value | Source | Conf. |
|--------------------|---|-----------------------|-------|
| Entity tax status | For-profit; CA franchise + federal | IRS BMF / SoS | H |
| Property tax | Prop 13 reassessment pending (2021 CoC) | County assessor | M |
| NOL carryforwards | \$42M (LBO interest-driven) | Public filings / est. | L |
| Sales/use exposure | Med-device & supply use tax open | State DOR notices | M |
| Local incentives | Enterprise-zone credits expired 2023 | City / state records | M |

SECTION 16 · BRANMOOR GLOBAL

Cross-border and counterparty exposure

Powered by: *Branmoor Global*

| Item | Value | Source | Conf. |
|----------------------------|--|------------------------------|-------|
| Imported device exposure | ~\$3.1M/yr imaging & consumables | CBP / Customs import records | M |
| Forced-labor screen | Key vendor flagged — UFLPA review open | CBP UFLPA entity list | M |
| Sanctions screen (vendors) | OFAC SDN — no match, 22 counterparties | OFAC SDN list | H |
| Tariff exposure | Sec. 301 risk on imaging components | USTR / HTS schedule | L |
| GPO counterparty parent | Foreign-parented; disclosed | SEC / corporate registry | M |

SECTION 17

Enforcement, quality, and compliance screen

Powered by: *Enforcement Watch · Hospital-Acquired Infection Live Map*

| Item | Value | Source | Conf. |
|------------------------------|--|------------------|-------|
| OIG exclusion screen | Entity + 9 key individuals — clear | HHS-OIG LEIE | H |
| CMS overall star rating | 3 of 5 | CMS Care Compare | H |
| Hospital-acquired infections | CLABSI above national median | CMS / CDC NHSN | M |
| Readmission penalty | -0.7% HRRP adjustment | CMS HRRP | H |
| Recent enforcement | 2023 DOJ 340B settlement \$2.1M — resolved | DOJ / OIG press | H |

SECTION 18 - BRANMOOR MARKETS

Valuation and transaction context

Powered by: Healthcare Transaction Comps and Multiple Monitor

Illustrative only. Branmoor cites comparable transactions; it does not issue a valuation opinion.

| Item | Value | Source | Conf. |
|-----------------------------|-----------------------------|---------------------|-------|
| Comparable EV / adj. EBITDA | 7.5x – 9.5x | Public deal filings | M |
| Applied adjusted EBITDA | \$55.4M | Branmoor build | M |
| Implied enterprise value | \$415M – \$526M | Branmoor build | M |
| Less: net funded debt | ≈ \$476M | Aggregated filings | M |
| Implied equity range | Thin to negative at low end | Branmoor build | M |

SECTION 19

Transaction-readiness summary

Powered by: Provider Transaction Readiness Review

| Readiness item | Status | Source | Conf. |
|-----------------------|------------------------------------|------------------|-------|
| Audited financials | Available (bond-grade) | MSRB / auditor | H |
| Related-party cleanup | Required — PropCo & mgmt fee | UCC / lease | M |
| Covenant headroom | Thin — refinance dependency | Bond disclosure | M |
| Regulatory / CON | State CON review likely | State agency | M |
| Open compliance flags | UFLPA vendor; Prop 13 reassessment | Branmoor screens | M |

SECTION 20

Branmoor products engaged in this file

A single Provider Diligence Sheet is assembled from Branmoor's product catalog. The modules below each contributed source-tagged findings above.

| Branmoor product | Contribution to this file |
|--|--|
| Context Layer | 15-benchmark macro backdrop the file is read against |
| Hospital Financial Pulse + Rural Closure Watch | Operating margin, distress, and financial trend |
| Cost Report Forensics | HCRIS normalization and cost-center detail |
| Healthcare QoE / QoR Memo | Adjusted-EBITDA bridge and revenue quality |
| Payer Mix and Reimbursement Exposure | Payer concentration and reimbursement risk |

| Branmoor product | Contribution to this file |
|---|---|
| Revenue Cycle Leakage Atlas / Denial Reason Atlas | AR, denials, and write-off leakage |
| ClearRate for Employers / Patients | Price-transparency and chargemaster parse |
| Hospital Bond and Covenant Watch | Debt, covenants, ratings, and refinancing wall |
| Ownership and Related-Party Economics | Sponsor, PropCo, and related-party structure |
| Labor Cost and Staffing Pressure | FTEs, contract labor, and wage-index exposure |
| RXWatch / Recall Watch | Drug-shortage and recall continuity exposure |
| Service-Line Economics Map | Service-line mix and trend |
| Capex and Facility Investment Tracker | Plant age, capex, and seismic retrofit |
| Healthcare Transaction Comps and Multiple Monitor | Comparable multiples and implied value |
| Healthcare Tax Diligence Review | Property, franchise, and use-tax posture |
| Enforcement Watch / HAI Live Map | OIG, sanctions, and quality screens |
| Provider Transaction Readiness Review | Readiness, CON, and open-flag summary |
| Branmoor Earth / Markets / Tax / Supply / Global | Facility, credit, tax, continuity, and counterparty context |
| Diligence Workpaper Evidence Pack | Source-to-claim workpaper appendix below |

SECTION 21

Workpaper index, source appendix, and confidence flags

Powered by: Diligence Workpaper Evidence Pack

| Primary source | Used for | As of |
|---|---|---------|
| CMS HCRIS cost reports | Financials, payer mix, labor, CMI, age of plant | FY24 |
| MSRB EMMA + rating notices | Notes, covenants, ratings, refinancing | 2026-Q1 |
| Secretary of State / UCC / county deeds | Ownership, sponsor, liens, PropCo split | 2026 |
| Hospital machine-readable file (MRF) | Price transparency and chargemaster | 2026 |
| HHS-OIG LEIE | Exclusion screen (entity + individuals) | 2026-05 |
| CMS Care Compare / CDC NHSN / HRRP | Star rating, HAI, readmission penalty | 2026 |
| FDA openFDA / MAUDE | Drug shortage, recall, device-failure signals | 2026-05 |
| EPA ECHO / FRS / AQS / SEMS, FEMA NFHL | Environmental, air, flood, Superfund (Earth) | 2026 |
| Cal OSHPD / HCAI | Seismic compliance and retrofit (Earth/Capex) | 2026 |
| County assessor / state DOR | Property and use tax (Tax) | 2026 |
| EIA / utility filings | Facility energy and continuity (Supply) | 2026 |
| CBP import records / UFLPA / OFAC SDN | Cross-border, forced-labor, sanctions (Global) | 2026 |
| FRED (Context Layer) | 15-benchmark macro backdrop | 2026-05 |
| DOJ / OIG enforcement releases | Settlement and enforcement history | 2026 |

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This is an illustrative sample built on a fictional entity to show the structure, breadth, and source discipline of a Branmoor Provider Diligence Sheet — across Branmoor Health and all five supporting record sets plus the Context Layer. It is not a real provider and contains no real financial data. Branmoor diligence is outside-in, primary-source data work — not an audit, review, compilation, valuation opinion, tax opinion, or CPA-firm service. Licensed engagements carry separate scope, confidentiality, and limitation terms. Request access: hello@branmoor.com.

SAMPLE