Exhibit “A-1”

June 2026 Financial Statements

Winnie-Stowell Hospital District
Balance Sheet
As of June 30, 2026

	Jun 30, 26
ASSETS	
Current Assets	
Checking/Savings	
100 Prosperity Bank -Checking	40,480.07
102 First Financial Bank	45,594,700.66
105 TexStar	7,321,003.16
108 Nursing Home Banks Combined	8,807,014.30
Total Checking/Savings	61,763,198.19
Other Current Assets	
110 Sales Tax Receivable	194,309.82
114 Accounts Receivable NH	101,009,980.00
115 Riceland Hospital Rec.	274,802.88
116 - A/R CHOW - LOC	327,288.10
117 NH - QIPP Prog Receivable	37,210,923.95
119 Prepaid IGT	41,890,963.90
Total Other Current Assets	180,908,268.65
Total Current Assets	242,671,466.84
Fixed Assets	3,888,705.98
Other Assets	
118.01 Prepaid NH Fees	12,806.48
Total Other Assets	12,806.48
TOTAL ASSETS	**246,572,979.30**
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
190 NH Payables Combined	8,321,983.54
201 NHP Accounts Payable	23,322,855.10
206 FFB Loan 28	31,276,800.00
206 FFB Loan 29	31,727,700.00
235 Payroll Liabilities	6,439.55
240 Accounts Payable NH Oper.	89,437,086.90
Total Other Current Liabilities	184,092,865.09
Total Current Liabilities	184,092,865.09
Total Liabilities	184,092,865.09
Equity	
300 Net Assets, Capital, net of	121,283.00
310 Net Assets-Unrestricted	11,219,913.13
315 Committed for Capital Proj	450,000.00
Retained Earnings	46,578,402.10
Net Income	4,110,515.98
Total Equity	62,480,114.21
TOTAL LIABILITIES & EQUITY	**246,572,979.30**

Winnie-Stowell Hospital District
Profit & Loss Budget vs. Actual
January through June 2026

	Jan - Jun 26	Budget	$ Over Budget	% of Budget
Ordinary Income/Expense				
Income				
400 Sales Tax Revenue	457,632.86	850,000.00	-392,367.14	53.8%
405 Investment Income	538,983.03	600,000.00	-61,016.97	89.8%
407 Rental Income	24,500.00	42,000.00	-17,500.00	58.3%
409 Tobacco Settlement	19,315.73	15,000.00	4,315.73	128.8%
411 Opiod Abatement Funds	49,550.27	49,550.00	0.27	100.0%
415 Nursing Home - QIPP Program	66,328,010.82	131,858,612.00	-65,530,601.18	50.3%
Total Income	67,417,992.71	133,415,162.00	-65,997,169.29	50.5%
Gross Profit	67,417,992.71	133,415,162.00	-65,997,169.29	50.5%
Expense				
500 Admin				
501 Admin-Administative Salary	41,462.50	101,000.00	-59,537.50	41.1%
502 Admin-Administrative Assnt	11,051.15	42,950.00	-31,898.85	25.7%
503 Admin - Staff Incentive Pay	334.59	9,500.00	-9,165.41	3.5%
504 Admin-Administrative PR Tax	6,709.38	12,000.00	-5,290.62	55.9%
505 Admin-Board Bonds	0.00	250.00	-250.00	0.0%
506 Admin - Emp. Insurance	25,951.46	65,000.00	-39,048.54	39.9%
507 Admin-Retirement	9,949.40	18,000.00	-8,050.60	55.3%
515 Admin-Bank Service Charges	900.12	2,000.00	-1,099.88	45.0%
521 Professional Fees - Accntng	27,639.50	76,800.00	-49,160.50	36.0%
522 Professional Fees - Audit	1,637.50	34,000.00	-32,362.50	4.8%
523 Professional Fees - Legal	25,553.60	100,000.00	-74,446.40	25.6%
550 Admin-D&O / Liability Ins.	17,223.21	20,000.00	-2,776.79	86.1%
560 Admin-Cont Ed, Travel	223.74	6,500.00	-6,276.26	3.4%
562 Admin-Travel&Mileage Reimb.	684.58	2,500.00	-1,815.42	27.4%
569 Admin-Meals	4,210.86	8,000.00	-3,789.14	52.6%
570 Admin-District/County Prom	876.40	5,000.00	-4,123.60	17.5%
571 Admin-Office Supp. & Exp.	13,190.89	25,000.00	-11,809.11	52.8%
572 Admin-Web Site	0.00	1,000.00	-1,000.00	0.0%
573 Admin-Copier Lease/Contract	2,647.50	5,000.00	-2,352.50	53.0%
575 Admin-Cell Phone Reimburse	900.00	1,800.00	-900.00	50.0%
576 Admin-Telephone/Internet	5,577.29	4,000.00	1,577.29	139.4%
577 - Admin Dues	1,895.00	1,895.00	0.00	100.0%
591 Admin-Notices & Fees	1,627.15	3,000.00	-1,372.85	54.2%
592 Admin Office Rent	1,700.00	4,080.00	-2,380.00	41.7%
593 Admin-Utilities	2,733.47	4,000.00	-1,266.53	68.3%
594 Admin-Casualty & Windstorm	0.00	2,800.00	-2,800.00	0.0%
597 Admin-Flood Insurance	0.00	1,800.00	-1,800.00	0.0%
598 Admin-Building Maintenance	10,098.72	20,000.00	-9,901.28	50.5%
Total 500 Admin	214,778.01	577,875.00	-363,096.99	37.2%
600 - IC Healthcare Expenses				
601 IC Provider Expenses				
601.01a IC Pmt to Hosp-Indigent	196,160.12	500,000.00	-303,839.88	39.2%
601.01b IC Pmt to Coastal (Ind)	6,019.61	25,000.00	-18,980.39	24.1%
601.01c IC Pmt to Thompson	5,624.28	18,000.00	-12,375.72	31.2%
601.02 IC Pmt to UTMB	173,085.43	525,000.00	-351,914.57	33.0%
601.03 IC Special Programs				
601.03a Dental	12,299.00	30,000.00	-17,701.00	41.0%
601.03b IC Vision	1,210.00	2,750.00	-1,540.00	44.0%
601.04 IC-Non Hosp Cost-Other	3,843.52	35,000.00	-31,156.48	11.0%
601.05 IC - Chairty Care Prog	0.00	25,000.00	-25,000.00	0.0%
Total 601.03 IC Special Programs	17,352.52	92,750.00	-75,397.48	18.7%
Total 601 IC Provider Expenses	398,241.96	1,160,750.00	-762,508.04	34.3%
602 IC-WCH 1115 Waiver Prog	272,389.79	610,000.00	-337,610.21	44.7%
603 IC-Pharmaceutical Costs	21,347.29	80,000.00	-58,652.71	26.7%
605 IC-Office Supplies/Postage	0.00	2,000.00	-2,000.00	0.0%
610 IC-Community Health Prog.	52,990.02	111,893.00	-58,902.98	47.4%
611 IC-Indigent Care Dir Salary	35,250.00	68,830.00	-33,580.00	51.2%
612 IC-Payroll Taxes -Ind Care	0.00	5,000.00	-5,000.00	0.0%
615 IC-Software	12,138.00	25,000.00	-12,862.00	48.6%
616 IC-Travel	0.00	1,000.00	-1,000.00	0.0%
617 Youth Programs				
617.01 Youth Counseling	3,910.00	25,000.00	-21,090.00	15.6%
617.02 Irlen Program	0.00	1,600.00	-1,600.00	0.0%
Total 617 Youth Programs	3,910.00	26,600.00	-22,690.00	14.7%
Total 600 - IC Healthcare Expenses	796,267.06	2,091,073.00	-1,294,805.94	38.1%

Winnie-Stowell Hospital District
Profit & Loss Budget vs. Actual
January through June 2026

	Jan - Jun 26	Budget	$ Over Budget	% of Budget
620 WSHD - Grants				
620.01 WCH/RMC	0.00	133,000.00	-133,000.00	0.0%
620.03 WSVEMS	75,463.84	157,774.00	-82,310.16	47.8%
620.05 East Chambers ISD	115,902.10	278,165.00	-162,262.90	41.7%
620.06 FQHC(Coastal)	996,271.80	1,549,185.00	-552,913.20	64.3%
620.09 Admin-Cont Ed-Med Pers.	10,809.60	22,000.00	-11,190.40	49.1%
Total 620 WSHD - Grants	1,198,447.34	2,140,124.00	-941,676.66	56.0%
630 NH Program				
630 NH Program-Mgt Fees	24,175,980.70	47,607,558.00	-23,431,577.30	50.8%
631 NH Program-IGT	31,670,080.14	63,697,923.00	-32,027,842.86	49.7%
632 NH Program-Telehealth Fees	180,904.26	400,000.00	-219,095.74	45.2%
633 NH Program-Acctg Fees	7,675.50	30,000.00	-22,324.50	25.6%
634 NH Program-Legal Fees	139,532.41	300,000.00	-160,467.59	46.5%
635 NH Program-LTC Fees	2,766,000.00	5,554,000.00	-2,788,000.00	49.8%
637 NH Program-Interest Expense	1,597,329.61	4,895,660.00	-3,298,330.39	32.6%
638 NH Program-Loan/Bank Fees	410,103.80	658,768.00	-248,664.20	62.3%
639 NH Program-Appraisal	3,640.00	96,000.00	-92,360.00	3.8%
641 NH Program-NH Manager	9,660.00	20,400.00	-10,740.00	47.4%
Total 630 NH Program	60,960,906.42	123,260,309.00	-62,299,402.58	49.5%
674 Prop Acqusition/Development				
674.01 Clinic (New Const.)	107,027.26	4,000,000.00	-3,892,972.74	2.7%
674.02 Office Bldg (New Const.)	0.00	750,000.00	-750,000.00	0.0%
Total 674 Prop Acqusition/Development	107,027.26	4,750,000.00	-4,642,972.74	2.3%
675 HWY 124 Expenses				
675.01 Tony's BBQ Bldg Expenses	0.00	26,000.00	-26,000.00	0.0%
675.02 Clinic Expenses	5,974.11	10,000.00	-4,025.89	59.7%
675.03 - Clinic Property Ins	16,887.84	17,500.00	-612.16	96.5%
675.04 Seabreeze Prop. Expenses	26,915.40	30,000.00	-3,084.60	89.7%
Total 675 HWY 124 Expenses	49,777.35	83,500.00	-33,722.65	59.6%
Total Expense	63,327,203.44	132,902,881.00	-69,575,677.56	47.6%
Net Ordinary Income	4,090,789.27	512,281.00	3,578,508.27	798.5%
Other Income/Expense				
Other Income				
416 Nursing Home Operations	280,820,910.00			
Other Income	19,726.71			
Total Other Income	280,840,636.71			
Other Expense				
640 Nursing Home Oper. Expenses	280,820,910.00			
Total Other Expense	280,820,910.00			
Net Other Income	19,726.71			
Net Income	**4,110,515.98**	**512,281.00**	**3,598,234.98**	**802.4%**

Exhibit “A-2”

July 22, 2026 Treasurer’s Report

WSHD Treasurer's Report

Reporting Date: Wednesday, July 22, 2026

Pending Expenses	For	Amount
Bayside Dental	SP Program	$990.00
Brookshire Brothers	Indigent Care	$2,112.74
Coastal Gateway Health Center	Indigent Care	$999.02
Dr. June Stansky	SP Program	$60.00
$25 Optical	SP Program	$50.00
Ben Odom (Youth Counseling)	Youth Counseling	$255.00
Thompson Outpatient Clinic, LLC	Indigent Care	$861.94
Wilcox Pharmacy	Indigent Care /Charity Care	$2,145.51
Technology Solutions	Inv # 2061	$160.70
Benckenstein & Oxford	Inv# 51787	$15,380.00
Graciela Chavez	Inv # 966000	$160.00
US Department of Education	Acct# 1778777782 - Ben Odom	$1,801.60
3Branch & More	Inv # 46211	$8,831.67
Function4	INV1301739	$135.00
Indigent Healthcare Solutions	Indigent Care Inv # 82067	$2,023.00
Vidal Accounting Services	Inv# 00148	$6,877.50
Hubert Oxford	Retainer	$1,000.00
Coastal Gateway Health Center	Grant Payment	$10,724.55
THR3E Design LLC	Inv# 2162	$67,918.70
THR3E Design LLC	Inv# 2163	$10,800.00
Curtis Scott Johnson	Inv# 202605, 202606	$2,720.00
Kahla Home & Earth Solutions	Lawn (Broadway & 124)	$1,000.00
Wright National Flood Insurance	Account number 1152621298	$1,583.00
Winnie Stowell Volunteer EMS	SP Program	$672.73
	Total Expenses:	**$139,262.66**

Funds Summary	Totals
Prosperity Operating (Unrestricted)	$570,215.39
First Financial DACA (Unrestricted)	$2,404,016.19
First Financial DACA (Restricted)	$277,803.12
First Financial Money Market	$30,890,371.71
TexStar (Restricted)	$7,321,003.16
FFB CD Balance	$0.00
Total District Funds	**$41,463,409.57**
Less First Financial (Restricted)	($277,803.12)
Less TexStar Restricted Amount	($500,000.00)
Less LOC Outstanding	$0.00
Less First Financial Money Market	$0.00
Less Committed Funds (*See Total Committement*)	($705,470.35)
Cash Position (*Less First Financial Restricted*)	**$39,980,136.10**
Pending Expenses	($139,262.66)
Ending Balance (Cash Position-*Pending Expenses*)	$39,840,873.44
*Total Funds (*Ending Balance+LOC Outstanding+QIPP Funds Outstanding+Outstanding Chow Loans*)	**$40,443,966.83**
Prior Month	
Prosperity Operating (Unrestricted)	$498,754.06
First Financial (Unrestricted)	$11,315,815.21
First Financial (Restricted)	$39,360,122.84
First Financial Money Market	$11,016,438.40
TexStar (Restricted)	$7,299,275.77
FFB CD Balance	$0.00
Total District Funds	**$69,490,406.28**
Less First Financial (Restricted)	($39,360,122.84)
Less TexStar Reserve Account	($500,000.00)
Less LOC Outstanding	$0.00
Less First Financial Money Market (Restricted)	$0.00
Less Committed Funds (*See Total Committement*)	($791,024.63)
Cash Position (*Less First Financial Restricted*)	**$28,839,258.81**
Pending Expenses	($439,565.88)
Ending Balance (Cash Position-*Pending Expenses*)	**$28,399,692.93**
Total Funds (*Ending Balance+LOC Outstanding+QIPP Funds Outstanding+Committed Funds*)	**$38,261,857.38**

First Finanical Bank Reconciliations

FFB Balance **$2,681,819.31**

	Restricted Funds	Total Scheduled Payment	Balance Received	Balance Due	Due to District
Yr. 9 Q1 Not Distributed yet					
Yr. 9 Q1 - Not distributed yet	$70,523.48	$70,523.48	$70,523.48	$0.00	$0.00
Variance Payment Totals	**$70,523.48**	**$70,523.48**	**$70,523.48**	**$0.00**	**$0.00**

Non-QIPP Funds	**$207,279.64**
Restricted	**$70,523.48**
Unrestricted	**$2,404,016.19**
Total Funds	**$2,681,819.31**

Committed Funds

Commitment	Total Initial Commitment	YTD Paid by District	Committed Balance
1. FQHC Grant Funding - 2026	**$1,549,185.00**	**$997,810.91**	**$551,374.09**
2. East Chambers ISD	**$278,165.04**	**$162,262.38**	**$115,902.66**
3. WSVEMS Grant	**$152,774.40**	**$114,580.80**	**$38,193.60**
Total Commitments	**$1,980,124.44**	**$1,274,654.09**	**$705,470.35**

Hospital - DY 8/IRS Repayment

	Amount Advanced by District	IC Repayment	Balance Owed by RMC
January 31, 2026	$0.00	$52,195.44	$419,769.97
February 28, 2026	$0.00	$22,725.87	$397,044.10
March 31, 2026	$0.00	$14,878.59	$382,165.51
April 30, 2026	$0.00	$29,192.66	$352,972.85
May 31, 2026	$0.00	$58,364.09	$294,608.76
June 30, 2026	$0.00	$18,803.47	$275,805.29
	$2,116,856.95	**$1,841,051.66**	**$275,805.29**

CHOW Interim Working Capital Loan

	Intial Advance Allowed	Total Amount Advanced	Advance Remaining	Amount Paid Back to Date	Amount Due to District
Golden Triangle (10 Months - December 31, 2025)					
RS Golden Triangle - Oak Grove	$1,360,000.00	$1,194,133.90	$165,866.10	$1,194,133.90	$0.00
Balance Owed by Oak Grove	**$1,360,000.00**	**$1,194,133.90**	**$165,866.10**	**$1,194,133.90**	**$0.00**
Total CHOW Loan Outstanding	**$1,360,000.00**	**$1,194,133.90**	**$165,866.10**	**$1,194,133.90**	**$0.00**

First Financial Bank-11 Month Outstanding Short Term Revenue Note-Loan 28 (January 5, 2026 - January 1, 2027)
2nd Half of Year 9

Annual Interest Rate:	**7.00%**	**Payments Per Year:**	**12**	**Origination Fee:**	**$319,768.00**
Years:	**1**	**Amount:**	**$31,276,800.00**		

Amoritization Table	Component Payment	Principle	Interest	Payment	Balance
February 1, 2026			($146,827.20)	*($146,827.20)*	$31,276,800.00
March 1, 2026			($169,416.00)	*($169,416.00)*	$31,276,800.00
April 1, 2026			($169,416.00)	*($169,416.00)*	$31,276,800.00
May 1, 2026			*($182,448.00)*	*($182,448.00)*	$31,276,800.00
June 1, 2026			*($182,448.00)*	*($182,448.00)*	$31,276,800.00
July 1, 2026			*($182,448.00)*	*($182,448.00)*	$31,276,800.00
August 1, 2026			*($182,448.00)*	*($182,448.00)*	$31,276,800.00
September 1, 2026			*($182,448.00)*	*($182,448.00)*	$31,276,800.00
October 1, 2026	*$15,638,400.00*	*($15,638,400.00)*	*($182,448.00)*	*($15,820,848.00)*	$15,638,400.00
November 1, 2026	*$0.00*	*$0.00*	*($91,224.00)*	*($91,224.00)*	$15,638,400.00
December 1, 2026	*$0.00*	*$0.00*	*($91,224.00)*	*($91,224.00)*	$15,638,400.00
January 1, 2027	*$15,638,400.00*	*($15,638,400.00)*	*($91,224.00)*	*($14,727,373.56)*	$0.00
Amount Paid	**$31,276,800.00**	**($31,276,800.00)**	**($1,854,019.20)**	**($32,128,568.76)**	

First Financial Bank-11 Month Outstanding Short Term Revenue Note-Loan 27 (July 31, 2025 - July 25, 2026)
1st Half of Year 9

Annual Interest Rate:	**7.00%**	**Payments Per Year:**	**12**	**Origination Fee:**	**$323,700.00**
Years:	**1**	**Amount:**	**$31,727,650.00**		

Amoritization Table	Component Payment	Principle	Interest	Payment	Balance
July 1, 2026			($185,077.96)	*($185,077.96)*	$31,727,650.00
August 1, 2026			($185,077.96)	*($185,077.96)*	$31,727,650.00
September 1, 2026			($185,077.96)	*($185,077.96)*	$31,727,650.00
October 1, 2026			($190,900.33)	*($190,900.33)*	$31,727,650.00
November 1, 2026			($185,077.96)	*($185,077.96)*	$31,727,650.00
December 1, 2026			($185,077.96)	*($185,077.96)*	$31,727,650.00
January 1, 2027			($184,050.42)	*($184,050.42)*	$31,727,650.00
February 1, 2027			($185,077.96)	*($185,077.96)*	$31,727,650.00
March 1, 2027	$15,863,825.00	($15,863,825.00)	($185,077.96)	*($16,048,902.96)*	$15,863,825.00
April 1, 2027	$0.00	$0.00	($92,538.98)	($92,538.98)	$15,863,825.00
May 1, 2027	*$0.00*	*$0.00*	($92,538.98)	*($92,538.98)*	$15,863,825.00
June 1, 2027	*$15,863,825.00*	*($15,863,825.00)*	*($92,538.98)*	*($15,956,363.98)*	$0.00
Amount Paid	**$31,727,650.00**	**($31,727,650.00)**	**($1,948,113.40)**	**($33,675,763.40)**	

District's Investments

	Balance	Interest Paid	Reporting Period	Paid this Reporting Period	Interest Paid YTD
***CD at First Financial Bank Bank UPDATE**					
Money Market-First Financial Bank	$30,890,371.71	3.144%	June 2026	$72,304.95	$338,698.58
Texstar C.D. #1110	$7,321,003.16	3.597%	June 2026	$22,233.80	$109,337.83

TO THE BEST OF MY KNOWLEDGE, THESE FIGURES IN THE WSHD

Edward Murrell,
President

Date:_____

Robert "Bobby" Way
Treasurer/Investment

_

*Italics are Estimated amounts

Exhibit “A-3”

Check Register and Supporting Invoices

Winnie-Stowell Hospital District
Bank Accounts Register
June 18, 2026 to July 22, 2026

Type	Date	Num	Name	Memo	Clr	Amount	Balance
100 Prosperity Bank -Checking							57,950.55
Check	06/22/2026			ACH, Withdrawal, Processed	X	(3,953.70)	53,996.85
Check	06/23/2026		Entergy	ACH, Withdrawal, Processed	X	(220.00)	53,776.85
Check	06/24/2026		Entergy	ACH, Withdrawal, Processed	X	(204.54)	53,572.31
Liability C...	06/29/2026		QuickBooks Payroll Service	Created by Payroll Service on 06/26/2026	X	(6,921.34)	46,650.97
Check	06/29/2026	4981	Stone Hilton PLLC			(9,932.89)	36,718.08
Paycheck	06/30/2026	DD1504	Walters, Reagan D	Direct Deposit	X		36,718.08
Paycheck	06/30/2026	DD1505	Carlo, Victoria M	Direct Deposit	X		36,718.08
Paycheck	06/30/2026	DD1506	Davis, Tina R	Direct Deposit	X		36,718.08
Check	06/30/2026	4982	J. S. Edwards and Sherlock Ins.	Policy # 4275901534S03 2626 TX 124 Property		(9,910.70)	26,807.38
Deposit	06/30/2026			Deposit, Processed	X	3,500.00	30,307.38
Deposit	06/30/2026			Deposit, Processed	X	72.69	30,380.07
Deposit	06/30/2026			Deposit, Processed	X	10,100.00	40,480.07
Check	07/13/2026	4983	Lilia Anaya	Inv# 2026-0708-01 Cleaning Hwy 124 Bldg		(150.00)	40,330.07
Liability C...	07/14/2026		QuickBooks Payroll Service	Created by Payroll Service on 07/13/2026		(6,897.66)	33,432.41
Paycheck	07/15/2026	DD1507	Walters, Reagan D	Direct Deposit	X		33,432.41
Paycheck	07/15/2026	DD1508	Carlo, Victoria M	Direct Deposit	X		33,432.41
Paycheck	07/15/2026	DD1509	Davis, Tina R	Direct Deposit	X		33,432.41
Check	07/22/2026	4985	Brookshire Brothers	Batch Date 06/04/26		(2,112.74)	31,319.67
Check	07/22/2026	4986	Coastal Gateway Health Center	Batch Date 06/11/26		(999.02)	30,320.65
Check	07/22/2026	4987	Indigent Healthcare Solutions, ...	Inv # 82308		(2,023.00)	28,297.65
Check	07/22/2026	4988	$25 Optical	Batch Date 06/08/26		(50.00)	28,247.65
Check	07/22/2026	4989	Bayside Dental	Batch Date 06/08/26		(990.00)	27,257.65
Check	07/22/2026	4990	Dr. June Stansky, Optometrist	Batch Date 06/08/26		(60.00)	27,197.65
Check	07/22/2026	4991	Thompson Outpatient Clinic, LLC	Batch Date 06/11/26		(861.94)	26,335.71
Check	07/22/2026	4992	Wilcox Pharmacy	Batch 06/03/26		(2,145.51)	24,190.20
Check	07/22/2026	4993	Winnie-Stowell Volunteer EMS	Batch Date 06/09/26		(672.73)	23,517.47
Check	07/22/2026	4994	Benjamin Odom	Batch Date 06/02/26		(255.00)	23,262.47
Check	07/22/2026	4995	3Branch & More	Inv # 46211		(8,831.67)	14,430.80
Check	07/22/2026	4996	Benckenstein & Oxford	Inv # 51787		(15,380.00)	(949.20)
Check	07/22/2026	4997	Coastal Gateway Health Center	Funding Request		(10,724.55)	(11,673.75)
Check	07/22/2026	4998	Curtis Scott Johnson	Inv #'s WSHD202605 & WSHD202606		(2,720.00)	(14,393.75)
Check	07/22/2026	4999	Ethan Kahla	Inv #'s 010326-R-0007 & 1202226-R-0007		(1,000.00)	(15,393.75)
Check	07/22/2026	5000	Function 4	3A0064		(135.00)	(15,528.75)
Check	07/22/2026	5001	Graciela Chavez	Inv# 966000		(160.00)	(15,688.75)
Check	07/22/2026	5002	Hubert Oxford			(1,000.00)	(16,688.75)
Check	07/22/2026	5003	Technology Solutions of Texas, ...	Inv # 2061		(160.70)	(16,849.45)
Check	07/22/2026	5004	Thr3e Design	Inv #'s 2162 & 2163		(78,718.70)	(95,568.15)
Check	07/22/2026	5005	US Department of Education	Acct #1778777792-1		(1,801.60)	(97,369.75)
Check	07/22/2026	5006	Vidal Accounting, PLLC	Inv# 00148		(6,877.50)	(104,247.25)
Check	07/22/2026	5007	Wright Flood Ins	Policy Number 42 1152621298 02 (NFIP Policy Number 1152621298)		(1,583.00)	(105,830.25)
Total 100 Prosperity Bank -Checking						(163,780.80)	(105,830.25)
102 First Financial Bank							73,896,986.24
102b FFB #4846 DACA							62,880,608.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225091/60617	X	(125,387.00)	62,755,221.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225069/60617	X	(146,254.00)	62,608,967.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225142/60617	X	(187,765.00)	62,421,202.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225138/60617	X	(198,762.00)	62,222,440.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225006/60617	X	(215,059.00)	62,007,381.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225139/60617	X	(223,158.00)	61,784,223.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225093/60617	X	(227,197.00)	61,557,026.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225119/60617	X	(227,220.00)	61,329,806.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225113/60617	X	(237,449.00)	61,092,357.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225022/60617	X	(237,883.00)	60,854,474.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225170/60617	X	(249,437.00)	60,605,037.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225141/60617	X	(251,963.00)	60,353,074.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225088/60617	X	(257,115.00)	60,095,959.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225017/60617	X	(263,877.00)	59,832,082.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225042/60617	X	(263,926.00)	59,568,156.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225120/60617	X	(267,381.00)	59,300,775.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225095/60617	X	(270,316.00)	59,030,459.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225020/60617	X	(273,177.00)	58,757,282.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225059/60617	X	(276,669.00)	58,480,613.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225097/60617	X	(276,722.00)	58,203,891.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225164/60617	X	(277,666.00)	57,926,225.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225098/60617	X	(279,704.00)	57,646,521.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225057/60617	X	(280,422.00)	57,366,099.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225132/60617	X	(281,189.00)	57,084,910.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225156/60617	X	(282,081.00)	56,802,829.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225026/60617	X	(289,365.00)	56,513,464.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225094/60617	X	(292,632.00)	56,220,832.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225061/60617	X	(300,762.00)	55,920,070.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225163/60617	X	(302,341.00)	55,617,729.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225172/60617	X	(304,270.00)	55,313,459.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225086/60617	X	(309,623.00)	55,003,836.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225117/60617	X	(310,861.00)	54,692,975.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225087/60617	X	(317,796.00)	54,375,179.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225165/60617	X	(320,347.00)	54,054,832.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225171/60617	X	(336,195.00)	53,718,637.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225056/60617	X	(336,471.00)	53,382,166.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225092/60617	X	(345,611.00)	53,036,555.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225047/60617	X	(351,852.00)	52,684,703.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225154/60617	X	(355,121.00)	52,329,582.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225045/60617	X	(355,939.00)	51,973,643.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225103/60617	X	(357,920.00)	51,615,723.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225012/60617	X	(370,750.00)	51,244,973.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225079/60617	X	(398,317.00)	50,846,656.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225151/60617	X	(399,629.00)	50,447,027.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225085/60617	X	(401,487.00)	50,045,540.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225071/60617	X	(412,930.00)	49,632,610.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225099/60617	X	(430,317.00)	49,202,293.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225053/60617	X	(434,943.00)	48,767,350.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225128/60617	X	(442,701.00)	48,324,649.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225077/60617	X	(444,261.00)	47,880,388.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225148/60617	X	(448,050.00)	47,432,338.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225080/60617	X	(456,793.00)	46,975,545.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225065/60617	X	(460,880.00)	46,514,665.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225015/60617	X	(467,109.00)	46,047,556.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225161/60617	X	(468,905.00)	45,578,651.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225109/60617	X	(471,711.00)	45,106,940.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225159/60617	X	(494,416.00)	44,612,524.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225004/60617	X	(497,685.00)	44,114,839.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225144/60617	X	(498,057.00)	43,616,782.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225068/60617	X	(500,311.00)	43,116,471.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225083/60617	X	(520,645.00)	42,595,826.68

Winnie-Stowell Hospital District

Bank Accounts Register

June 18, 2026 to July 22, 2026

Type	Date	Num	Name	Memo	Clr	Amount	Balance
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225100/60617	X	(530,726.00)	42,065,100.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225025/60617	X	(547,957.00)	41,517,143.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225123/60617	X	(556,880.00)	40,960,263.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225114/60617	X	(563,370.00)	40,396,893.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225135/60617	X	(565,301.00)	39,831,592.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225130/60617	X	(573,178.00)	39,258,414.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225149/60617	X	(575,159.00)	38,683,255.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225124/60617	X	(600,967.00)	38,082,288.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225131/60617	X	(605,524.00)	37,476,764.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225146/60617	X	(606,441.00)	36,870,323.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225106/60617	X	(608,843.00)	36,261,480.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225121/60617	X	(621,772.00)	35,639,708.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225134/60617	X	(644,385.00)	34,995,323.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225140/60617	X	(651,543.00)	34,343,780.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225168/60617	X	(703,060.00)	33,640,720.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225162/60617	X	(771,370.00)	32,869,350.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225075/60617	X	(796,113.00)	32,073,237.68
Check	06/18/2026			TEXNET STATE COMPTRLR CCD 09225155/60617	X	(920,250.00)	31,152,987.68
Deposit	06/23/2026			Memo:Transfer to DDA Acct No. 1110214846-D Payee:Transfer to DD...	X	201,075.00	31,354,062.68
Deposit	06/24/2026			Memo:Transfer to DDA Acct No. 1110214846-D Payee:Transfer to DD...	X	175,482.83	31,529,545.51
Check	06/24/2026			Non QIPP WINNIEMONEYMRKT CCD B611500560	X	(2,061.86)	31,527,483.65
Deposit	06/26/2026			Memo:Transfer to DDA Acct No. 1110214846-D Payee:Transfer to DD...	X	565,065.11	32,092,548.76
Deposit	06/30/2026			Memo:Transfer to DDA Acct No. 1110214846-D Payee:Transfer to DD...	X	2,705,708.12	34,798,256.88
Check	06/30/2026			Y9Q1 QIPP Winnie-Stowell HCCD 1611500560	X	(60,958.11)	34,737,298.77
Check	06/30/2026			Y9Q1 QIPP WINNIEMONEYMRKT CCD B611500560	X	(202,347.92)	34,534,950.85
Total 102b FFB #4846 DACA						(28,345,657.83)	34,534,950.85
102c FFB #7190 Money Market							11,016,377.56
Deposit	06/30/2026				X	43,372.25	11,059,749.81
Total 102c FFB #7190 Money Market						43,372.25	11,059,749.81
Total 102 First Financial Bank						(28,302,285.58)	45,594,700.66
TOTAL						***(28,466,066.38)***	***45,488,870.41***

Exhibit “B”

District Administrator’s Report

WINNIE STOWELL HOSPITAL DISTRICT
WWW.WSHD-TX.ORG

Administrator's Report
July 2026

Employee Hiring Update

The Assistant to the Administrator position has been reposted on Indeed with revised qualifications and expectations to better attract candidates who align with the District's needs. The position has also been shared through social media to broaden outreach. We continue to be very selective throughout the hiring process as we build our administrative team and are reviewing applicants as they are received.

Oak Grove Update

Since the last Board meeting, the outstanding Molina payment for Oak Grove has been received. The Year 9, Quarter 2 disbursement of $144,573.55, along with the remaining $10,674.61 in previously withheld funds, was applied to the Oak Grove CHOW loan. The final transfer was completed, and the loan has now been paid in full.

We also received an updated status regarding the pending sale of the facility. The anticipated closing date remains August 1, 2026, at which time Regency is expected to assume ownership. However, the cash transition is not anticipated to occur until the end of August.

First Financial Clearing Account

Policy Development

Makayla and I plan to begin drafting the District's formal policy and procedure for the First Financial clearing account prior to the August Board meeting. Once a draft has been prepared, we will work with Hubert while also collaborating with Charice at Newlight to ensure the process is clear, efficient, and easy to administer before presenting it to the Board for consideration.

Account Reopening

We received the signature card packet from First Financial; however, it only listed Edward, Anthony, and myself as authorized signers. The bank has requested a letter from the District, signed by Board President Edward Murrell, identifying all authorized signers before updated signature cards can be prepared for execution.

Election Update

The filing period for the District's upcoming election opened on July 18, 2026, and applications for a place on the ballot will be accepted through August 17, 2026. I have coordinated with Heather Hawthorne at the Chambers County Clerk's Office by providing the documents necessary for the election contract and will continue coordinating with the Clerk's Office throughout the election process.

Banking Update

In addition to the First Financial clearing account, Prosperity Bank has requested updated signature cards following the recent changes to the Board. The bank has advised that Kay, Edward, Bobby, and I will need to appear in person with identification to complete the updated signature card process.

TICHA Conference

To reduce travel costs for the District, we plan to reserve a shared Airbnb for attendees traveling to the Texas Indigent Care Health Association (TICHA) Conference. After comparing lodging options, this approach was determined to be comparable to or less expensive than reserving individual hotel rooms.

Opioid Abatement Update

We received clarification that Winnie-Stowell Hospital District is classified as a Group 2 entity pursuant to 34 TAC §16.222(g) and remains eligible for future distributions through the Opioid Abatement Fund Council (OAFC). We also confirmed that OAFC intends to make distributions annually each spring, resolving the questions raised during the previous Board meeting.

Exhibit “C”

District Indigent Care Director Report

WINNIE STOWELL HOSPITAL DISTRICT

PO BOX 1997, WINNIE, TX 77665 PHONE: (409)296-1003 FAX: (409)400-4023

July 22, 2026

WSHD Regular Board Meeting Indigent Care Report

1. Summary:

In June, the Indigent Care Program increased by 1 client for a total of 87 active clients.

Budget and Billing Update

As of the current reporting period, the program has utilized ***31%*** of its overall budget.

Due to a postal error, billing was not received from UTMB for June. They will send June and July Billing next month for payment.

We currently have two clients that have exhausted benefits.

Efforts will continue to closely monitor and manage expenditures while maintaining a steadfast commitment to ensuring the provision of essential care to those in need.

2. Active Client Trends:

2026 Indigent Care Statistics	Jan	Feb	Mar	Apr	May	June	YTD Monthly Average
Indigent Care Clients	94	87	90	83	86	87	88
Youth Counseling	4	5	5	5	4	4	5
Irlen Services	0	0	0	0	0	0	0

3. Renewals & Approvals:

June 2026 Client Activity	Total	Approved	Denied	No Show	Withdrew	Pending
Renewals	9	3	1	3	0	2
Late Renewals/Previous Client	5	4	0	1	0	0
New Applicants	7	2	0	4	0	1

Services Usage

Youth Counseling:

- Three (3) clients used their benefit in June.

Dental:

- Seven (7) clients used their benefit in June.

Vision Services:

- One (1) client used their benefit in June.

WINNIE STOWELL HOSPITAL DISTRICT

PO BOX 1997, WINNIE, TX 77665 PHONE: (409)296-1003 FAX: (409)400-4023

4. Indigent Care Vendor Payment Trends:

Service Provider	Jan	Feb	Mar	Apr	May	June	YTD Monthly Average
Local Clinics	$ 1,818.54	$ 1,429.97	$ 2,635.82	$ 1,500.18	$ 2,521.91	$ 1,860.96	$ 1,961.23
UTMB (Includes Charity Care)	$ 40,277.51	$ 51,924.88	$ 24,639.86	$ 15,339.33	$ 15,778.86	$ -	$ 24,660.07
Riceland Medical Center	$ 52,195.44	$ 22,725.87	$ 14,878.59	$ 29,192.66	$ 58,364.09	$ 18,803.47	$ 32,693.35
Pharmacy Costs (Includes Charity Care)	$ 3,525.69	$ 2,781.44	$ 2,941.37	$ 4,371.48	$ 3,839.73	$ 4,258.25	$ 3,619.66
Indigent Special Services (Dental & Vision)	$ 5,560.00	$ 3,186.00	$ 1,643.00	$ 1,090.00	$ 500.00	$ 1,100.00	$ 2,179.83
Medical Supplies (C-PAP)	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Non Contract ER Services (Includes WSEMS)	$ 2,954.08	$ -	$ 315.75	$ -	$ -	$ 672.73	$ 657.09
Other Services							
Irlen Services	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Youth Counseling	$ 340.00	$ 595.00	$ 425.00	$ 680.00	$ 510.00	$ 255.00	$ 467.50
Total	*$ 106,671.26*	*$ 82,643.16*	*$ 47,479.39*	*$ 52,173.65*	*$ 81,514.59*	*$ 26,950.41*	$ 33,119.37

5. YTD Budget Expenditures:

Indigent Service	2026 Budget	YTD Expense	% of Budget
Pharmacy	$80,000.00	$21,111.02	26%
WCH	$500,000.00	$196,160.12	39%
UTMB	$525,000.00	$147,960.44	28%
Youth Counseling	$25,000.00	$2,805.00	11%
Irlen	$1,600.00	$0.00	0%
Dental	$30,000.00	$11,969.00	40%
Vision	$2,750.00	$1,110.00	40%
CGHC Clinic	$25,000.00	$5,419.58	22%
Thompson Clinic	$18,000.00	$6,212.83	35%
Other Non-Contract/Unspecified Services	$35,000.00	$4,077.56	12%
Charity Care	$20,000.00	$0.00	0%
Charity Care Pharmacy	$5,000.00	$606.94	12%
Adjustments & Credits			
TOTALS	**$1,267,350.00**	**$397,432.49**	**31%**

PO BOX 1997, WINNIE, TX 77665 PHONE: (409)296-1003 FAX: (409)400-4023

6. Riceland Medical Center 2026 Expenditure Breakdown:

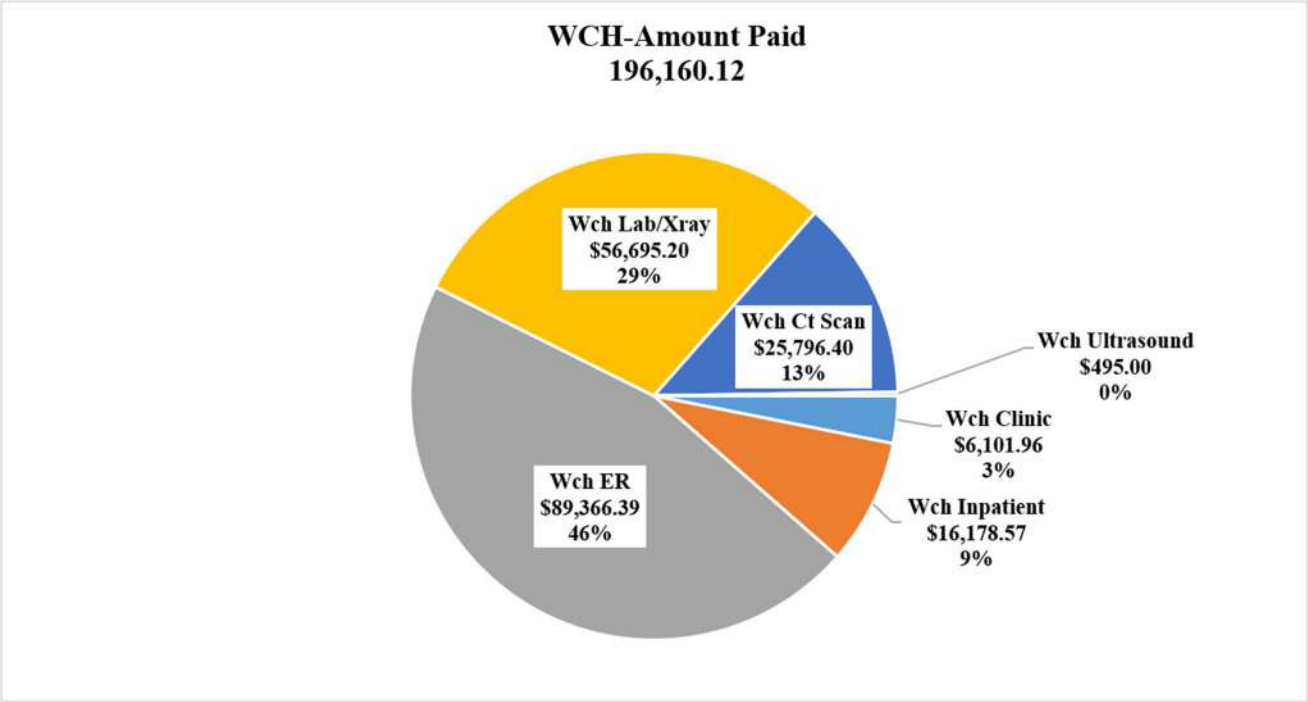

Exhibit “D”

Grant Report and Transportation/Ambulance Grant Materials

COMMISSONER JIMMY GORE
211 BROADWAY/P.O. BOX260
WINNIE, TEXAS 77665

Jun-26

VEHICLE#1 EAST SIDE VAN #1	
TOTAL MILES DRIVEN	3040
TOTAL HOURS DRIVEN	160.00
TOTAL EXPENSES FOR MONTH	$733.22
FUEL COST	$733.22
REPAIRS & MAINTENANCE COST	$0.00
MISC EXPENSES	$0.00
TOTAL RIDERS	24
TOTAL WSHD RIDERS	1
TOTAL TRIPS	64
TOTAL TRIPS FOR WSHD RIDERS	1
VEHICLE #2 EAST SIDE VAN #2	
TOTAL MILES DRIVEN	1201
TOTAL HOURS DRIVEN	64.02
TOTAL EXPENSES FOR MONTH	$1,115.38
FUEL COST	$225.32
REPAIRS & tires, labor	$890.06
MISC EXPENSES	$0.00
TOTAL RIDERS	16
TOTAL WSHD RIDERS	0
TOTAL TRIPS	18
TOTAL TRIPS FOR WSHD RIDERS	0
VEHICLE #3 EAST SIDE VAN #3	
TOTAL MILES DRIVEN	4005
TOTAL HOURS DRIVEN	177.42
TOTAL EXPENSES FOR MONTH	$1,001.72
FUEL COST	$758.70
REPAIRS & tire, labor	$243.02
MISC EXPENSES	$0.00
TOTAL RIDERS	24
TOTAL WSHD RIDERS	5
TOTAL TRIPS	72
TOTAL TRIPS FOR WSHD RIDERS	7
VEHICLE#4 RAV4	
TOTAL MILES DRIVEN	5184
TOTAL HOURS DRIVEN	172.03
TOTAL EXPENSES FOR MONTH	$781.69
FUEL COST	$688.78
REPAIRS & oil change, labor	$62.91
parking	$30.00
TOTAL RIDERS	22
TOTAL WSHD RIDERS	1
TOTAL TRIPS	36
TOTAL TRIPS FOR WSHD RIDERS	1
VEHICLE #5	
TOTAL MILES DRIVEN	1116
TOTAL HOURS DRIVEN	103.75
TOTAL EXPENSES FOR MONTH	$307.22
FUEL COST	$307.22
REPAIRS & MAINTENANCE COST	$0.00
MISC EXPENSES	$0.00
TOTAL RIDERS	13
TOTAL WSHD RIDERS	1
TOTAL TRIPS	16
TOTAL TRIPS FOR WSHD RIDERS	2
VEHICLE #6	
TOTAL MILES DRIVEN	2769
TOTAL HOURS DRIVEN	153.17
TOTAL EXPENSES FOR MONTH	$757.79
FUEL COST	$757.79
REPAIRS & MAINTENANCE COST	$0.00
MISC EXPENSES	$0.00
TOTAL RIDERS	33
TOTAL WSHD RIDERS	5
TOTAL TRIPS	47
TOTAL TRIPS FOR WSHD RIDERS	5
VEHICLI #7 2017 VAN	
TOTAL MILES DRIVEN	0
TOTAL HOURS DRIVEN	0.00
TOTAL EXPENSES FOR MONTH	$0.00
FUEL COST	$0.00
REPAIRS & MAINTENANCE COST	$0.00
MISC EXPENSES	$0.00
TOTAL RIDERS	0
TOTAL WSHD RIDERS	0
TOTAL TRIPS	0
TOTAL TRIPS FOR WSHD RIDERS	0

GRAND TOTALS	
MILES DRIVEN	17315
TOTAL HOURS DRIVEN	830.38
RIDERS	132
WSHD RIDERS	13
TRIPS	253
WSHD TRIPS	16
EXPENSES	$4,697.02

Winnie-Stowell Volunteer EMS

Vinnie-Stowell Hospital District Report

Year to Date Details for 2026	Previous Year (2025) End	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	YTD DATE
CALL SUMMARY								
CALLS/TRANSPORTS REQUESTED	100	8	4	13	10	12	9	56
CALLS/TRANSPORTS MADE								
INSURED	78	7	3	8	5	8	6	37
SELF-PAY	7	0	1	2	2	3	2	10
TOTAL CALLS MADE	85	7	4	10	7	11	8	47
CALLS/TRANSPORTS DELAYED	0	0	0	0	0	0	0	0
TRANSPORTS NOT MADE	15	1	0	3	3	1	1	9
PERCENTAGE OF CALLS MADE	**85.0%**	**87.5%**	**100.0%**	**76.9%**	**70.0%**	**91.7%**	**88.9%**	**83.9%**
INVOICED/BILLED								
Insurance Billed for Services this Month	$104,704.89	$11,066.68	$2,191.06	$12,474.42	$4,965.61	$6,105.47	$7,208.34	$44,011.58
Self-Pay Billed for Services this Month	$8,471.47	$0.00	$578.45	$2,989.41	$1,530.10	$2,470.73	$1,418.13	$8,986.82
Total	**$113,176.36**	**$11,066.68**	**$2,769.51**	**$15,463.83**	**$6,495.71**	**$8,576.20**	**$8,626.47**	**$52,998.40**
PAYMENTS RECEIVED								
Insurance Payments Rcvd for Services this Month	$43,316.25	$3,716.43	$1,447.87	$5,917.06	$2,605.55	$1,725.96	$949.11	$16,361.98
Self-Pay Billed Rcvd for Services this Month	$3,900.84	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00
Total	**$47,217.09**	**$3,716.43**	**$1,447.87**	**$5,917.06**	**$2,605.55**	**$1,725.96**	**$949.11**	**$16,361.98**
ACCOUNTS RECEIVABLE-FUNDS OWED								
Owed by Insurance for Services this Month	$62,099.48	$7,350.25	$743.19	$6,557.36	$2,360.06	$4,379.52	$6,805.23	$28,195.61
Owed by Self-Pay for Services this Month	$4,570.63	$0.00	$578.45	$2,989.41	$1,530.10	$2,470.73	$1,418.13	
Total	**$66,670.11**	**$7,350.25**	**$1,321.64**	**$9,546.77**	**$3,890.16**	**$6,850.25**	**$8,223.36**	**$28,195.61**
STAFFING EXPENSES								
	$151,396.93	$12,448.57	$11,687.66	$12,490.49	$12,392.05	$12,928.26	$12,522.49	$151,100.21

Jun-26

MONTHLY CALLS/TRANSPORTS REPORT

CALLS REQUESTED			CALL RESULTS			BILLING DETAILS
DATE	PICK UP LOCATION	DROP OFF LOCATION	MADE: M	DELAYED: D	REASSIGNED: R	WSEMS Incident#
6/2/2026	Riceland ER	Baptist Beaumont	M			26-17232
6/5/2026	Riceland ER	UTMB Gaveston	M			26-17664
6/8/2026	Riceland ER	Baytown Methodist	M			26-17993
6/9/2026	Riceland ER	St. Lukes TMC, turned down due to Paramedic requirement.			R	
6/9/2026	Riceland ER	Baytown Methodist	M			26-18178
6/10/2026	Riceland ER	Baytown Medical Center	M			26-18257
6/14/2026	Riceland ER	Baytown Methodist	M			26-18829
6/18/2026	Riceland ER	Texas Children's	M			26-19272
6/19/2026	Riceland ER	Baptist Beaumont	M			26-19317
TOTAL CALLS & RESULTS		9	8	0	1	

Jun-26

MONTHLY TRANSPORT AMBULANCE EMPLOYEE SCHEDULE & PAYROLL

DATE	EMPLOYEE NAME	SHIFT SCHEDULE	GRANT ALLOWED SALARY ($PR HR)	MAXIMUM HOURS	MAXIMUM PAY	HOURS WORKED	Not Staffed SURPLUS or (DEFICIT)	OVER-TIME HOURS	GRANT FUNDED PAYROLL AMOUNT	Maximum v. Actual SURPLUS or (DEFICIT)	ACTUAL SALARY ($PR HR)	ACTUAL PAYROLL AMOUNT	GRANT vs ACTUAL SURPLUS or (DEFICIT)
6/1/2026	Brad Eads	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$21.00	$504.00	($86.58)
6/2/2026	Lori Peine	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$18.00	$432.00	($14.58)
6/3/2026	Haley Bridges	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$22.00	$528.00	($110.58)
6/4/2026	Andrew Broussard	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$21.00	$504.00	($86.58)
6/5/2026	Kayla Callesto	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$18.00	$432.00	($14.58)
6/6/2026	Ruthann Broussard	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$20.00	$480.00	($62.58)
6/7/2026	Austin Isaacks	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$17.00	$408.00	$9.42
6/8/2026	Brad Eads	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$21.00	$504.00	($86.58)
6/9/2026	Lori Peine	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$18.00	$432.00	($14.58)
6/10/2026	Olivia Kitzmiller	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$22.00	$528.00	($110.58)
6/11/2026	Ruthann Broussard	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$20.00	$480.00	($62.58)
6/12/2026	Andrew Broussard	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$21.00	$504.00	($86.58)
6/13/2026	Haley Bridges	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$22.00	$528.00	($110.58)
6/14/2026	Jeff Gibson	7am - 7pm	$17.39	12.0	$208.71	12	0.0	0	$208.71	$0.00	$19.00	$228.00	($19.29)
6/14/2026	Austin Isaacks	7pm - 7am	$17.39	12.0	$208.71	12	0.0	0	$208.71	$0.00	$17.00	$204.00	$4.71
6/15/2026	Brad Eads	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$21.00	$504.00	($86.58)
6/16/2026	Lori Peine	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$18.00	$432.00	($14.58)
6/17/2026	Haley Bridges	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$22.00	$528.00	($110.58)
6/18/2026	Kayla Callesto	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$18.00	$432.00	($14.58)
6/19/2026	Andrew Broussard	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$21.00	$504.00	($86.58)
6/20/2026	Erika Abshire	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$17.00	$408.00	$9.42
6/21/2026	Ruthann Broussard	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$20.00	$480.00	($62.58)
6/22/2026	Brad Eads	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$21.00	$504.00	($86.58)
6/23/2026	Lori Peine	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$18.00	$432.00	($14.58)
6/24/2026	Andrew Broussard	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$21.00	$504.00	($86.58)
6/25/2026	Ruthann Broussard	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$20.00	$480.00	($62.58)
6/26/2026	Brady Kirkgard	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$22.00	$528.00	($110.58)
6/27/2026	Haley Bridges	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$22.00	$528.00	($110.58)
6/28/2026	Austin Isaacks	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$17.00	$408.00	$9.42
6/29/2026	Lori Peine	7am - 7am	$17.39	24.0	$417.42	24	0.0	0	$417.42	$0.00	$18.00	$432.00	($14.58)
6/30/2026	Ruthann Broussard	7am - 7pm	$17.39	12.0	$208.71	12	0.0	0	$208.71	$0.00	$20.00	$240.00	($31.29)
6/30/2026	Austin Isaacks	7pm - 7am	$17.39	12.0	$208.71	12	0.0	0	$208.71	$0.00	$17.00	$204.00	$4.71
TOTAL SALARY EXPENSE FOR THE MONTH:			GRANT ALLOWED SALARY ($PR HR)	MAXIMUM HOURS	MAXIMUM PAY	HOURS WORKED	Not Staffed SURPLUS or (DEFICIT)	OVER-TIME HOURS	GRANT FUNDED PAYROLL AMOUNT	Maximum v. Actual SURPLUS or (DEFICIT)	ACTUAL SALARY ($PR HR)	ACTUAL PAYROLL AMOUNT	GRANT vs ACTUAL SURPLUS or (DEFICIT)
			$17.39	**720.0**	**$12,522.49**	**720.00**	**0.0**	**0**	**$12,522.49**	**$0.00**	**$19.69**	**$14,244.00**	**($1,721.51)**

2nd Quarter Totals

QUARTERLY TRANSPORT AMBULANCE EMPLOYEE SCHEDULE & PAYROLL

TOTAL SALARY EXPENSE FOR 2ND Quarter:	GRANT ALLOWED SALARY ($PR HR)	MAXIMUM HOURS	MAXIMUM PAY	HOURS WORKED	Not Staffed SURPLUS or (DEFICIT)	OVER-TIME HOURS	GRANT FUNDED PAYROLL AMOUNT	Maximum v. Actual SURPLUS or (DEFICIT)	ACTUAL SALARY ($PR HR)	ACTUAL PAYROLL AMOUNT	GRANT vs ACTUAL SURPLUS or (DEFICIT)
	$17.39	**2184.0**	**$37,984.89**	**2175.83**	**(8.2)**	**0**	**$37,842.80**	**($142.10)**	**$20.01**	**$43,514.94**	**($5,672.14)**

WINNIE STOWELL HOSPITAL DISTRICT

Community Health Worker Program

	2025 YTD	JAN	FEB	MAR	APR	MAY	JUN	2026 YTD
CLIENTS SERVED								
ICAP	278	15	16	14	12	17	26	100
Non-ICAP	319	23	18	27	26	26	22	142
Total Clients Served	**597**	**38**	**34**	**41**	**38**	**43**	**48**	**242**
BENEFIT APPLICATION TYPE								
Indigent Care Assistance Program (ICAP)	22	3	0	2	0	0	3	8
Prescription Assistance Program (PAP)	57	1	5	3	3	1	5	18
Medicaid	98	8	5	8	9	9	5	44
Medicare	7	1	0	2	0	3	1	7
Medicare Savings Plan	30	2	2	0	2	4	2	12
Food Stamps (SNAP)	377	23	18	19	18	22	27	127
Supplemental Security Income (SSI)	56	3	5	4	6	4	6	28
Retirement, Survivor, Disability Income (RSDI)	51	1	0	0	1	0	4	6
Unemployment/Texas Workforce	10	1	0	0	0	0	0	1
Housing	18	0	0	0	1	1	1	3
Utilities	2	0	0	0	2	0	0	2
Legal Aid	2	0	0	0	0	0	0	0
OTHER	18	4	1	5	1	3	2	16
Total Applications Facilitated	**748**	**47**	**36**	**43**	**43**	**47**	**56**	**272**
EXPENSES								
Personnel	$83,153.67	$6,766.00	$6,820.00	$6,469.00	$6,820.00	$6,820.00	$6,820.00	$40,515.00
Operational	$26,528.93	$20.00	$13.40	$4.00	$4.00	$292.47	$495.42	$829.29
Total	**$109,682.60**	**$6,786.00**	**$6,833.40**	**$6,473.00**	**$6,824.00**	**$7,112.47**	**$7,315.42**	**$41,344.29**
BUDGET REMAINING	$2,210.40	$88,734.00	$81,900.60	$75,427.60	$68,603.60	$61,491.13	$54,175.71	$54,175.71

Exhibit “E”

Coastal Gateway Health Center Report

Report to Winnie-Stowell Hospital District
July 22, 2026

Report prepared by: Kaley Smith, CEO; Coastal Gateway Health Center

- We have scheduled for a remote Mobile Mammography Bus down at Crystal Beach on July 29th to specifically reach the residents of the Bolivar Peninsula.

- **Incubator Funding**. Received submitted for our second drawdown of $225,000; continuing to work through our Workplan and timeline for this project, currently on schedule with all tasks.

- DSHS Texas Vaccine for Children (TVFC) surprise site visit a couple of weeks ago. The health center and staff did exceptionally well—passed the visit with no findings. There was only one recommendation, which was to place the thermometer more centered in the vaccine fridge.

- Discussions are underway with the Houston Food Bank and Catholic Charities (Market-to-Hope) on a partnership or collaboration related to food distribution or formal referral for food.

- **340B Program**. Went live with Brookshire Brothers on July 1st. Wilcox is expected to go-live in August.

- **Grants (in process or pending approvals)**
  - **Rural Health Transformation Funds.** Initiative #6: Infrastructure and Capital Investments. Pending announcement.
  - **MD Anderson (SAVE TX)**. Awarded. Will receive $245,000 over the next three (3) years. Year 1 = $75,000, Year 2 = $85,000, and Year 3 = $85,000.
  - **Texas Mutual Charitable Giving Program**. Not funded.
  - **Episcopal Health Foundation**. Re-submitted our Letter of Inquiry (LOI) for a second round of review in the amount of $300,000 (for population health type work), due date was July 10th.

- **Upcoming Events/Activities**
  - ***4th Annual Chambers County Back-to-School Bash*** took place at White Park in Anahuac/Wallisville on Saturday, July 18th from 10:00 am to 1:00 pm. We are a collaborative partner and committee member again this year. Coastal Gateway Health Center served as the 'school supply and donation coordinator' again this year.
  - Winnie Area Chamber of Commerce is hosting a Back-to-School bash on Saturday, August 8th at the Winnie Community Building.
  - Health Center Week is coming up on August 3 –7, 2026.
  - Programming is still ongoing with Winnie Square once a month.
  - Twice a month Home Delivery Meals ('Meals on Wheels') delivery.
  - Monthly presence at the Hardin Jefferson Hunger Initiative food distribution in China.

- Statistical report for June is attached for your review; there were **603** patient encounters.

Exhibit “F”

LTC and Nursing-Facility Operations Report

		Q2 Comp 1		Q2 Comp 2		Q2 Comp 3	Q2 Comp 4	Total Q2	Total YTD
Facility ID	Facility Name	% Metrics Attained	Payout % Earned	% Metrics Attained	Payout % Earned	% Metrics Attained	% Metrics Attained	% Metrics Attained	% Metrics Attained
4028	Avir at Coronado	60.00%	100.00%	100.00%	100.00%	66.67%	100.00%	76.92%	76.92%
5307	Avir at Giddings	75.00%	100.00%	100.00%	100.00%	66.67%	50.00%	75.00%	70.83%
4996	Avir at Overton	66.67%	100.00%	100.00%	100.00%	66.67%	100.00%	81.82%	82.61%
4586	Avir at Paris	100.00%	100.00%	66.67%	85.00%	66.67%	50.00%	72.73%	77.27%
4584	Avir at Town Creek	66.67%	100.00%	100.00%	100.00%	33.33%	50.00%	63.64%	72.73%
5281	Magnolia Place Health Care	60.00%	100.00%	100.00%	100.00%	100.00%	100.00%	84.62%	88.00%
4154	Garrison Nursing Home & Rehabilitation Center	60.00%	100.00%	100.00%	100.00%	100.00%	100.00%	84.62%	88.46%
4376	Golden Villa	100.00%	100.00%	66.67%	85.00%	100.00%	100.00%	92.31%	96.15%
5261	Gracy Woods Nursing Center	40.00%	100.00%	100.00%	100.00%	100.00%	100.00%	76.92%	84.62%
110098	Highland Park Rehabilitation & Nursing Center	80.00%	100.00%	100.00%	100.00%	100.00%	50.00%	84.62%	84.62%
4484	Marshall Manor Nursing & Rehabilitation Center	80.00%	100.00%	33.33%	60.00%	100.00%	100.00%	76.92%	76.92%
4730	Marshall Manor West	80.00%	100.00%	100.00%	100.00%	100.00%	100.00%	92.31%	88.46%
5250	Oak Brook Health Care Center	80.00%	100.00%	66.67%	85.00%	100.00%	100.00%	84.62%	88.46%
4798	Rose Haven Retreat	100.00%	100.00%	66.67%	85.00%	100.00%	100.00%	91.67%	91.67%
5182	The Villa at Texarkana	60.00%	100.00%	0.00%	0.00%	100.00%	100.00%	61.54%	73.08%
5330	Cascades at Galveston	80.00%	100.00%	0.00%	0.00%	33.33%	50.00%	46.15%	38.46%
5322	Cascades at Port Arthur	100.00%	100.00%	0.00%	0.00%	66.67%	50.00%	58.33%	65.22%
4747	Parkview Manor Nursing & Rehabilitation	80.00%	100.00%	0.00%	0.00%	100.00%	50.00%	61.54%	64.00%
5289	Winnie L Nursing & Rehabilitation	100.00%	100.00%	0.00%	0.00%	100.00%	100.00%	75.00%	75.00%
4774	Afton Oaks Nursing and Rehabilitation Center	80.00%	100.00%	100.00%	100.00%	66.67%	100.00%	84.62%	84.62%
106784	Sterling Oaks	80.00%	100.00%	100.00%	100.00%	100.00%	100.00%	92.31%	84.62%
5240	Hemphill Care Center	50.00%	90.00%	#DIV/0!	0.00%	100.00%	50.00%	66.67%	66.67%
5154	Copperas Cove Nursing & Rehabilitation	50.00%	100.00%	33.33%	60.00%	100.00%	50.00%	58.33%	66.67%
5193	Corrigan LTC Nursing & Rehabilitation	66.67%	100.00%	33.33%	60.00%	100.00%	100.00%	72.73%	63.64%
4663	Creekside Village	75.00%	100.00%	33.33%	60.00%	66.67%	50.00%	58.33%	60.00%
5369	Oak Village Healthcare	25.00%	90.00%	33.33%	60.00%	66.67%	50.00%	41.67%	50.00%
5169	Wells LTC Nursing & Rehabilitation	50.00%	100.00%	#DIV/0!	0.00%	100.00%	100.00%	77.78%	90.48%
4340	Woodlake Nursing Center	25.00%	90.00%	100.00%	100.00%	100.00%	50.00%	66.67%	62.50%
5350	Woodland Park Nursing & Rehab	50.00%	100.00%	0.00%	0.00%	100.00%	50.00%	50.00%	50.00%
106988	Accel at College Station	75.00%	100.00%	0.00%	0.00%	100.00%	50.00%	58.33%	54.17%
101157	Arbrook Plaza	75.00%	100.00%	100.00%	100.00%	100.00%	100.00%	91.67%	95.83%
102375	Cimarron Place Health & Rehabilitation	100.00%	100.00%	100.00%	100.00%	100.00%	50.00%	91.67%	91.67%
103223	Crowley Nursing and Rehabilitation	60.00%	100.00%	33.33%	60.00%	100.00%	100.00%	69.23%	76.92%
104541	Deerbrook Skilled Nursing and Rehab Center	60.00%	100.00%	0.00%	0.00%	100.00%	50.00%	53.85%	61.54%
106566	Forum Parkway Health & Rehabilitation	75.00%	100.00%	66.67%	85.00%	100.00%	100.00%	83.33%	87.50%

4286	Friendship Haven Healthcare and Rehabilitation Cent	80.00%	100.00%	100.00%	100.00%	66.67%	100.00%	84.62%	80.77%
102993	Green Oaks Nursing and Rehabilitation	75.00%	100.00%	0.00%	0.00%	100.00%	100.00%	66.67%	62.50%
100806	Gulf Pointe Plaza	75.00%	100.00%	#DIV/0!	0.00%	100.00%	100.00%	88.89%	85.71%
103435	Harbor Lakes Nursing and Rehabilitation Center	80.00%	100.00%	33.33%	60.00%	66.67%	100.00%	69.23%	73.08%
103743	Hewitt Nursing and Rehabilitation	75.00%	100.00%	0.00%	0.00%	100.00%	100.00%	66.67%	70.83%
5372	Holland Lake Rehabilitation and Wellness Center	100.00%	100.00%	66.67%	85.00%	100.00%	100.00%	91.67%	87.50%
4053	Lone Star Rehabilitation & Wellness Center	75.00%	100.00%	33.33%	60.00%	100.00%	100.00%	75.00%	83.33%
5255	Mission Nursing and Rehabilitation Center	80.00%	100.00%	66.67%	85.00%	100.00%	100.00%	84.62%	84.00%
100790	Park Manor of Conroe	100.00%	100.00%	33.33%	60.00%	100.00%	100.00%	84.62%	88.46%
4456	Park Manor of Cyfair	75.00%	100.00%	66.67%	85.00%	100.00%	100.00%	83.33%	83.33%
101489	Park Manor of Cypress Station	80.00%	100.00%	66.67%	85.00%	100.00%	100.00%	84.62%	80.77%
101633	Park Manor of Humble	80.00%	100.00%	100.00%	100.00%	100.00%	100.00%	92.31%	88.46%
102417	Park Manor of Quail Valley	50.00%	100.00%	66.67%	85.00%	100.00%	100.00%	75.00%	79.17%
5400	Park Manor of South Belt	75.00%	100.00%	66.67%	85.00%	100.00%	50.00%	75.00%	87.50%
104661	Park Manor of the Woodlands	100.00%	100.00%	33.33%	60.00%	100.00%	100.00%	83.33%	87.50%
103191	Park Manor of Tomball	80.00%	100.00%	0.00%	0.00%	100.00%	100.00%	69.23%	69.23%
102294	Park Manor of Westchase	80.00%	100.00%	100.00%	100.00%	100.00%	100.00%	92.31%	80.77%
104537	Pecan Bayou Nursing and Rehabilitation	75.00%	100.00%	100.00%	100.00%	100.00%	100.00%	91.67%	87.50%
4158	Red Oak Health and Rehabilitation Center	80.00%	100.00%	33.33%	60.00%	100.00%	100.00%	76.92%	80.77%
106050	Silver Spring	75.00%	100.00%	0.00%	0.00%	100.00%	100.00%	66.67%	62.50%
103011	Stallings Court Nursing and Rehabilitation	100.00%	100.00%	66.67%	85.00%	100.00%	100.00%	91.67%	95.83%
5387	Stonegate Nursing and Rehabilitation	100.00%	100.00%	0.00%	0.00%	66.67%	100.00%	66.67%	79.17%
105966	Treviso Transitional Care	100.00%	100.00%	33.33%	60.00%	66.67%	100.00%	76.92%	84.62%
5225	Willowbrook Nursing Center	80.00%	100.00%	33.33%	60.00%	100.00%	100.00%	76.92%	80.77%
4306	Beaumont Health Care Center	75.00%	100.00%	66.67%	85.00%	66.67%	50.00%	66.67%	58.33%
4379	Cleveland Health Care Center	100.00%	100.00%	66.67%	85.00%	100.00%	100.00%	92.31%	88.46%
4500	Conroe Health Care Center	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	100.00%	91.67%
4439	Huntsville Healthcare Center	50.00%	100.00%	0.00%	0.00%	33.33%	100.00%	41.67%	45.83%
5135	Lawrence Street Healthcare Center	60.00%	100.00%	66.67%	85.00%	66.67%	100.00%	69.23%	65.38%
5067	Liberty Health Care Center	100.00%	100.00%	33.33%	60.00%	66.67%	50.00%	66.67%	62.50%
4511	Richmond Health Care Center	100.00%	100.00%	66.67%	85.00%	100.00%	100.00%	92.31%	80.77%
5145	Sugar Land Healthcare Center	80.00%	100.00%	0.00%	0.00%	100.00%	100.00%	69.23%	53.85%
4355	West Janisch Health Care Center	50.00%	100.00%	66.67%	85.00%	66.67%	100.00%	66.67%	66.67%
5166	Flatonia Nursing Center	40.00%	100.00%	100.00%	100.00%	100.00%	100.00%	76.92%	80.77%
5096	Oak Grove Nursing Home	75.00%	100.00%	100.00%	100.00%	100.00%	50.00%	83.33%	83.33%
110342	Mont Belvieu	80.00%	100.00%	66.67%	85.00%	66.67%	100.00%	76.92%	76.00%
5297	Hallettsville Nursing and Rehabilitation Center	80.00%	100.00%	33.33%	60.00%	100.00%	100.00%	76.92%	76.92%
5234	Monument Hill Nursing and Rehabilitation Center	50.00%	100.00%	66.67%	85.00%	100.00%	50.00%	66.67%	75.00%
5256	Spindletop Hill Nursing and Rehabilitation Center	60.00%	100.00%	33.33%	60.00%	66.67%	50.00%	53.85%	52.00%
5203	The Woodlands Nursing and Rehabilitation Center	80.00%	100.00%	100.00%	100.00%	100.00%	100.00%	92.31%	84.62%
4807	Seabreeze Nursing and Rehabilitation	50.00%	100.00%	33.33%	60.00%	100.00%	100.00%	66.67%	72.00%
5379	Bayou Pines	75.00%	100.00%	0.00%	0.00%	100.00%	100.00%	66.67%	58.33%

	Q2 Comp 1 Metrics Met		Q2 Comp 2 Metrics Met		Q1 Comp 3	Q2 Comp 4	Q2 Total	YTD Total
N	% Attained	Avg Payout Ear	% Attained	Avg Payout Earned	% Attained	% Attained	% Attained	% Attained
	74.9%	99.6%	54.5%	62.8%	89.6%	85.7%	75.4%	76.0%

Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Gulf Pointe Plaza
1008 Enterprise Blvd.
Rockport, TX 78382

June 23, 2026

Facility Administrator: Michael Higgins

Gulf Pointe Plaza is licensed for 120 beds, and its current census is 68 residents including 8 skilled patients. The facility has three referrals under review for admission. There are three discharges in the coming weeks. The facility recently received its CAGE code which is required to establish a contract with the VA. The team hopes the contract can be executed soon. Discussed plans to reach out to various partners and organizations in the community as soon as the VA contract is in place.

The facility is hiring to fill one LVN position at this time. All department heads are in place and there were no other openings reported.

The state visited the facility to investigate a complaint which included five allegations from one resident. All reasons for investigation during the visit were unsubstantiated.

Gulf Pointe Plaza has a 4-star overall rating. The facility has a 4-star rating in Health Inspections, a 1-star rating in Staffing, and a 5-star rating in Quality Measures. The facility's overall and health inspections star ratings both decreased from 4-star ratings.

The facility held its monthly QAPI meeting last Wednesday. Discussed maintaining a PIP addressing falls. There have been improvements with falls with major injury, but there are still some previous incidents triggering in this metric. Discussed some residents who triggered for locomotion, but expectations for those to improve once MDS assessments are updated.

The administrator reported there are no trends or significant issues related to grievances or infection control at this time.

Discussed some recent issues with the internet and other electrical components due to a recent thunderstorm in the area. Everything is functioning properly again except for the internet which is related to issues the internet service provider is having with their service.

The facility celebrated CNA week and took the opportunity to recognize and celebrate the CNAs. Discussed the importance of showing appreciation to team members.

The termite issue has been resolved in the kitchen. Discussed addressing other issues with critters around the building due to the heavy rain.

The administrator reported the plans to update the two showers on the 200-hall have been approved.

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Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Arbrook Plaza
401 West Arbrook Blvd.
Arlington, TX 76014

June 25, 2026

Facility Administrator: Jodi Scarbro

Arbrook Plaza is licensed for 120 beds, and its current census is 91 residents including 29 skilled patients. The facility has four admissions planned today, but also three pending discharges. There are twelve referrals under review for admission over the next week. Discussed continued efforts to support admissions processes including communication with referring partners to strengthen relationships and contribute to successful outcomes for new admissions.

There has been some nurse turnover recently, but the facility has been working to manage all coverage needs with fulltime and PRN staff. Discussed recently transitioning some PRN staff to fulltime positions.

The facility had a visit by a state surveyor last week to investigate a self-report and a complaint. The complaint was unsubstantiated, and the self-report was substantiated but not cited.

Arbrook Plaza has a 4-star rating overall. The facility has a 4-star rating in Health Inspections, a 1-star rating in Staffing, and a 5-star rating in Quality Measures.

The facility held its monthly QAPI meeting and reported on clinical outcomes and QIPP Measures. Discussed successes with clinical outcomes. There are no new PIPs at this time. The team is continuing to focus on improving processes related to physician orders. Falls have been going well overall and interventions have been largely successful. Discussed working as an interdisciplinary team to support customer service efforts for residents.

Infection control and prevention systems have been effective and there are no trends or outbreaks at this time. Discussed ensuring proper precautions are utilized when new admissions enter the building from the hospital with an active infection.

There have been some minor grievances in the facility this month. Discussed ensuring all grievances are addressed and resolved according to policy.

The facility celebrated CNA week and had events planned each day for the staff. Discussed the importance of showing appreciation and recognizing the contributions of CNAs in the facility.

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Treviso Transitional Care Center
1154 East Hawkins Parkway
Longview, TX 75605

June 22, 2026

Facility Administrator: Matt Mewborn

Treviso Transitional Care Center is licensed for 140 beds, and its current census is 103 residents including 30 skilled patients. The referrals to the facility have been steady in recent weeks. There is one planned discharge today, and two new admissions today.

The facility is recruiting to fill vacancies for one nightshift nurse and one CNA. There were no other openings reported. Discussed plans of a fulltime staff member to take leave, and transitioning a PRN staff member into this fulltime position.

The facility reports there have continued to be solid communication and steady relationships with local CNA programs. Discussed continued efforts to get connected with a local LVN program and requesting to present the facility as a great place of employment to students in the LVN program.

The facility reported there was a state visit earlier this month to investigate a complaint. There's a resident who initiated a transfer to another facility. The facility did not send the discharge log to the ombudsman and therefore received a deficiency related to failure to report. The facility has updated its processes to submit all discharge and transfer logs to the ombudsman each month. The facility is expecting to receive the 2567 soon. Discussed making these corrections and providing education to the staff in the social services department.

Treviso Transitional Care Center has a 1-star overall rating. The facility has a 1-star rating in Health Inspections, a 1-star rating in Staffing and a 4-star rating in Quality Measures.

The facility's monthly QAPI meeting was held last week. The facility discussed QIPP Measures and expectations of strong achievement. Discussed reviewing assessments to ensure all documentation is up to date and reflected properly.

Infection control efforts are going well. The interdisciplinary team discussed the utilization of IVs when appropriate with the attending physicians. There have been a few cases of UTIs and sepsis. Discussed working to provide care to the affected residents.

Grievances are being managed and there are no reported trends. Discussed positive feedback from residents who report being happy and satisfied with their experience in the facility.

Discussed celebrating CNA week recently and efforts by the team to support CNAs by showing recognition and appreciation to these staff.

The facility has been working to repair the A/C in its transportation van.

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Winnie-Stowell Hospital District

Forum Parkway Health & Rehabilitation
2112 Forum Parkway
Bedford, TX 76021

June 18, 2026

Facility Administrator: Eric Johnan

Forum Parkway Health & Rehabilitation is licensed for 139 beds, and its current census is 101 residents including 27 skilled patients. Discussed working to maintain the recent census growth. The facility had some recent skilled discharges but is maintaining a strong volume of referrals to manage. The facility's average census has fluctuated between 105 to 110 residents.

The facility is seeking one MDS nurse at this time. There were no other openings reported. Discussed staff recruitment and retention best practices and strategies.

There was one recent visit by a state surveyor who investigated two complaints. Discussed feedback from the investigations and ongoing monitoring in the facility.

Forum Parkway Health & Rehabilitation has a 4-star rating overall. The facility has a 3-star rating in Health Inspections, a 2-star rating in Staffing, and a 5-star rating in Quality Measures.

The facility will hold its monthly QAPI meeting soon. The team has continued to support fall prevention efforts as a primary focus. Discussed recent changes with residents' needs and interventions.

There are no trends or outbreaks related to infection control at this time.

The facility recently fixed one of its small coolers. Discussed ensuring staff are provided with proper functioning equipment to successfully complete their duties.

The facility has been celebrating CNA week. Discussed the importance of recognizing staff members and showing appreciation for their contribution to the facility.

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Copperas Cove LTC Partners Inc
607 W. Avenue B
Copperas Cove, TX 76522

June 24, 2026

Facility Administrator: Martha Paddie

Copperas Cove LTC is licensed for 124 beds, and its current census is 81 residents. There is one resident returning from the hospital today. The facility has a handful of referrals under review for review at this time. Discussed working with residents covered by varying insurance plans and also Medicaid pending residents.

The facility is recruiting one RN supervisor. The facility promoted its admissions nurse to the ADON position, and then hired a replacement admissions nurse who started employment earlier this week. All department heads are filled at this time. The facility's activity assistant has recently become certified and is now the activity director. Discussed working with the new director to make sure there are robust offerings of activities.

There have not been any recent visits to the facility by state surveyors. The facility submitted a self-report regarding an alleged resident-to-resident incident. Discussed investigations for this incident and making sure all residents are safe. The team reviewed interventions and provided education to staff members.

Copperas Cove LTC has a 1-star rating overall. The facility has a 2-star rating in Health Inspections, a 1-star rating in Staffing, and a 2-star rating in Quality Measures.

The facility held its monthly QAPI meeting on June 19. The team is working on improving antipsychotic medication utilization and falls. Discussed ongoing fall prevention efforts and evaluation of GDRs.

Discussed continuing to work with the interim medical director and meeting with a new candidate who may take the director position. Discussed collaborating with the attending providers to direct the care of the residents.

Infection control efforts had no reported trends.

Discussed recent grievances and efforts to support the residents while addressing any issues.

The facility celebrated its CNAs last week during CNA Week. Discussed taking time to recognize and show appreciation for the staff members.

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Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Winnie L LTC Partners Inc
2104 N. Karnes Ave.
Cameron, TX 76520

June 25, 2026

Facility Administrator: Crystal Muniz

At the facility QAPI meeting on 6/25/26, the Administrator and other attendees discussed the facility's outcomes from May 2026.

Winnie L LTC is licensed for 105 beds, and its current census is 39 residents. For the month of May, the facility averaged a census of 38 residents. The facility reported there are currently five pending admissions.

The facility reported 57 total employees and a 14% turnover rate during the reporting period. There is a new administrator who is scheduled to start employment at the facility on July 6.

State surveyors are visiting the facility today to investigate outstanding complaints and intakes. Discussed recent self-reports submitted and ongoing interventions auditing narcotic counts and locking carts.

Winnie L LTC has a 1-star overall rating. The facility has a 2-star rating in Health Inspections, a 1-star rating in Staffing, and a 4-star rating in Quality Measures.

The facility is working to achieve Component 1 targets for urinary tract infections and antipsychotic medications. Discussed the residents impacted by these metrics and plans for maintaining interventions and applying GDRs during the next visit by the psych service provider.

The facility did not meet any of its staffing targets, but is near target for all three metrics under Component 2. Discussed efforts to bring on new team members and support census growth.

The facility did not meet Component 3 targets for antianxiety/hypnotic medications or new/worsened bowel/bladder incontinence. Discussed documentation changes and education which have led to some improvements.

The facility is working to improve pressure ulcers related outcomes and has seen some wounds resolve recently. There are currently three residents with pressure ulcers.

Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

The Villa at Texarkana
4920 Elizabeth St.
Texarkana, TX 75503

June 26, 2026

Facility Administrator: Lorraine Haynes

The Villa at Texarkana is licensed for 120 beds, and its current census is 95 residents including 11 skilled patients. The census has grown, and the skilled volume has also been steadily improving . The facility has several more pending admissions at this time.

One of the facility's ADONs resigned, and there are interviews ongoing for the replacement. There's a former staff member who is interviewing for the ADON position. The administrator is optimistic about this candidate for the opening.

There are a few outstanding self-reports at this time. Recent reportable incidents included a resident-to-resident incident, and an allegation of verbal abuse. The allegation occurred while an aide was providing care to a resident. Ultimately, the facility terminated the staff member involved. Discussed in-services provided to all staff members related to these incidents.

The Villa at Texarkana has a 3-star rating overall. The facility has a 4-star rating in Health Inspections, a 1-star rating in Staffing, and a 3-star rating in Quality Measures.

The facility recently held its monthly QAPI meeting and reported good achievement with QIPP Measures and clinical outcomes. There is a new performance improvement plan addressing 30-day readmission rates. There were some former residents who were frequently readmitted to the hospital, which negatively impacted this measure.

There are no current outbreaks or trends reported related to infection control.

Discussed recent celebrations for CNA Week. The administrator ensures that staff are recognized for their contributions to the facility. Discussed supporting a culture which shows appreciation to staff members.

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Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Parkview Manor Nursing & Rehabilitation
206 N. Smith St.
Weimar, TX 78962

June 22, 2026

Facility Administrator: Kristi Kelley
Facility DON: Brasia Holloway

At the facility QAPI meeting on 6/22/26, the Administrator and other attendees discussed the facility's outcomes from May 2026.

Parkview Manor Nursing & Rehabilitation is licensed for 94 beds, and its current census is 36 residents. For the month of May, the facility averaged a census of 33 residents.

There were 49 total employees and an 18% turnover rate during the reporting period. Discussed removing PRN staff who no longer pick up shifts at the building, which subsequently increased the facility's turnover rate. The facility hired an ADON recently, and it is recruiting a new DON, MDS nurse, social services director, and activity director. The new ADON has been a tremendous asset to the interdisciplinary team.

The facility submitted a self-report regarding a resident-to-resident incident in May. There are no other outstanding self-reports pending investigation at this time.

Parkview Manor Nursing & Rehabilitation has a 1-star overall rating. The facility has a 2-star rating in Health Inspections, a 1-star rating in Staffing, and a 3-star rating in Quality Measures.

The facility has missed its targets for falls with major injury and urinary tract infections under Component 1. Discussed working with physicians to improve hydration and consider IV therapy for interventions. There are ongoing PIPs addressing both of these metrics.

No workforce development metrics were achieved, but all metrics under Component 3 were met during the period.

The facility reached its target for catheters under Component 4, but it is not meeting its target for pressure ulcers. The facility reported it needs to resolve one more pressure ulcer in order to be on target. In May, there were three residents with pressure ulcers.

Discussed ongoing renovations on the facility's secure care unit which will allow this space to admit more residents.

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Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Gracy Woods Nursing Center
12021 Metric Blvd
Austin, TX 78758

June 25, 2026

Facility Administrator: Heather Devine

Gracy Woods Nursing Center is licensed for 122 beds, and its current census is 92 residents including 5 skilled patients. The facility has one planned discharge of a resident returning to a group home. This resident appealed their notice of discharge from their insurance and will be staying at Gracy Woods a little longer.

The facility is recruiting four CNAs, one CMA, and one nurse. Discussed managing coverage needs with fulltime and PRN staff.

The facility had its annual fullbook survey and reported receiving six low-level tags. There were two E-tags, three D-tags, and one C-tag. The findings were related to catheter care, peri care, and ADLs which included nail care and call lights placement. Another finding was related to the survey binder. The facility has begun addressing each of these findings and will ensure all areas are improved. The life safety team also visited, and that portion of the survey was deficiency free.

Due to the successful survey, the state is recommending Gracy Woods to graduate from its special focus designation. Once the evidence of completion of the POCs is submitted and then approved, the facility will be eligible for graduation.

Gracy Woods Nursing Center is a Special Focus Facility at this time and there is no star rating data available for this facility. The facility is submitting weekly updates to the program manager as required for the SFF designation.

The facility held its monthly QAPI meeting and is focusing on corrections from the recent investigations and surveys in May and June. Discussed ongoing monitoring and auditing of systems and processes in the POCs.

There are no concerns related to infection control, and there are no current outbreaks. The administrator reported there was one case of shingles, but the resident was on isolation until they were approved to come off those precautions yesterday. There was a separate resident with a wound infection who came off isolation precautions today.

There are occasionally some customer service-related grievances. Discussed working with staff to improve the residents' experience. Discussed language barriers and help to educate staff about their approach and communication methods.

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Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Mission Nursing and Rehabilitation Center
1013 S. Bryan Road
Mission, TX 78572

June 25, 2026

Facility Administrator: Daniel Rodriguez

Mission Nursing and Rehabilitation Center is licensed for 170 beds, and its current census is 107 residents including 17 skilled patients. The facility has three discharges planned this week, and three more planned next week. The facility has a strong list of referrals and expects there will be several admissions to replace these discharges. The census has steadily been increasing over recent weeks. The DON has gone out in the community with the marketer and has been receiving good feedback from referring partners.

The facility also has a great reputation in the community as a great place to work. There are currently openings for one nightshift CNA, and one evening shift CNA.

There have not been any recent visits to the facility by state surveyors, and there are no new self-reports.

Mission Nursing and Rehabilitation Center has a 5-star rating overall. The facility has a 4-star rating in Health Inspections, a 2-star rating in Staffing, and a 5-star rating in Quality Measures.

The facility held its monthly QAPI meeting earlier this month and reported on clinical outcomes and quality measures. The interdisciplinary team is working to improve falls, long-term antipsychotic utilization, and RTAs. The team also discussed updates with trust fund monitoring. The facility is holding weekly huddles to improve communication and provide routine education to staff members.

There are no current trends or outbreaks related to infection control. There is only one remaining case of scabies which is expected to come off precautions on July 2.

The administrator shared updates on recent grievances, but here have not been any trends. Discussed review of meal service and transportation processes to improve the resident experience in these areas.

The facility had events scheduled every day for CNA Week. The events were well received with gifts and food for the staff. Discussed strong participation by the staff and making these team members feel special.

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Scott Johnson, Nursing Facility Specialist
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Crowley Nursing and Rehabilitation
920 East FM 1187
Crowley, TX 76036

June 17, 2026

Facility Administrator: Cody Bedford

The following report is from the site visit to Crowley Nursing and Rehabilitation on June 17, 2026. A tour of the building was provided after a meeting was held with the administrator for an update on the facility.

Crowley Nursing and Rehabilitation is licensed for 120 beds, and its current census is 95 residents. The facility's census has been strong in recent weeks. There are five planned admissions today and another four admissions tomorrow. There is one planned discharge today, one discharge tomorrow, and another discharge on Friday. Discussed working with referring partners to be a strong supporter of the residents' needs while closely collaborating throughout admitting processes.

Due to the higher volume of admissions, the nurse managers are involved in supporting the charge nurses with completing new resident admissions. Discussed the importance of welcoming new residents to the facility and supporting a positive first impression of the building.

The facility is currently recruiting a social worker. A social worker had been hired and was expected to start earlier this month, but prior to their start date the social worker rescinded their acceptance of employment. Discussed reopening recruitment efforts and working to find the right person for the team.

The facility is in its annual fullbook survey window. The administrator has been reviewing prior survey activity to ensure past deficiencies continue to be in good standing according to the corrections previously implemented. There have not been any recent visits by surveyors and there are no new self-reports.

Crowley Nursing and Rehabilitation has a 5-star overall rating. The facility has a 4-star rating in Health Inspections, a 2-star rating in Staffing, and a 5-star rating in Quality Measures.

The facility held its monthly QAPI meeting on Tuesday. The team is continuing to monitor falls and fall prevention efforts. Discussed including social services to ensure related processes are completed according to policy.

There are no trends or outbreaks related to infection control. Treatments are being managed well according to each residents' needs. Discussed utilizing enhanced barrier precautions according to policy and regulations.

The facility has an active resident council which gives feedback to the building.

The facility is celebrating CNA Week and reported having several planned activities and taking opportunities to recognize staff members.

The facility was very clean, and the housekeeping department does a great job managing the needs of the building. The vinyl and carpet flooring throughout the common areas and hallways were very clean. Despite occasional stains on parts of the carpet, the carpeted areas are in good shape. There were no snagged strands or major issues seen in the carpet. Discussed on the importance of working hard to provide a homelike environment that is pleasant for the residents.

The facility's dining room was currently being used for a group activity. The space had been cleaned after lunch meal service was completed. The dining room has several windows which allow ample, natural sunlight to illuminate the space. These windows provide visibility to the courtyard with a gazebo. The courtyard has raised flower beds for activities and seating areas for the residents.

The therapy gym stays busy caring for the needs of the residents. Discussed utilization of varying equipment to target specific needs and exercises. The facility has a nice VR set that is under high utilization. The gym also has a bell that residents can ring when they complete and graduate from therapy services.

The central nurse station has good visibility down the hallways which house the residents' rooms. The nurse station monitors the residents and ensures rounding is routinely conducted along the hallways. The facility's secure unit is being well maintained and is staffed appropriately for the residents' needs.

The facility grounds were well maintained and taken care of. Discussed creating and maintaining an environment with great appeal inside and out to be a welcoming place for residents and visitors.

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Treasurer: Bobby Way
Dir. Kay Wilcox

Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Green Oaks Nursing and Rehabilitation
3033 Green Oaks Blvd.
Arlington, TX 76016

June 18, 2026

Facility Administrator: Rachel Amiri

The following report is from the site visit to Green Oaks Nursing & Rehabilitation on June 18, 2026. A tour of the building was provided after a meeting was held with the administrator for an update on the facility.

Green Oaks Nursing & Rehabilitation is licensed for 142 beds, and its current census is 112 residents including 43 skilled patients. The facility is far exceeding its total census budget of 97 residents, and it is also exceeding its skilled patient budget of 22 residents. Discussed continued efforts to be a strong partner for referring hospitals and being prompt with referral reviews. The facility has 20 referrals under review at this time. The facility's operational capacity is 120 residents before it dually occupies some of the private rooms.

There is a new social worker who started employment earlier this month on June 1. The administrator reported that staff have been very supportive of recent census growth. Discussed adding additional staff members alongside the growing census. There is only one opening for a maintenance director at this time.

The facility reports that the POC from its annual survey has been cleared. There was one recent visit by a state surveyor to investigate a self-report and three complaints. All reasons for investigation related to these issues were unsubstantiated. The facility has submitted one new self-report regarding an allegation of abuse. The resident involved stated staff were rough while providing incontinent care. Discussed training and education provided to staff members in response to this allegation.

Green Oaks Nursing & Rehabilitation has a 4-star rating overall. It has a 3-star rating in Health Inspections, a 2-star rating in Staffing, and a 5-star rating in Quality Measures.

The facility held its monthly QAPI meeting and discussed continued efforts to watch falls and fall prevention efforts. There is an ongoing performance improvement plan addressing this

metric. Falls had decreased in April, but the team is still watching to ensure outcomes continue to track down. There were some residents who experienced repeat falls during the period, and the facility is evaluating their interventions.

There are no major issues or trends related to infection control at this time. The facility has one resident on isolation precautions at this time due to an infection.

The facility reported that a sewer pipe broke under one of the shower rooms, and the pipe is in the process of being fixed.

The facility shared its efforts to celebrate CNA Week and has many opportunities to recognize and show appreciation to staff members this week.

The facility presented an active and lively environment that was very comfortable and warm. Staff were seen rounding and smiling throughout the building as they tended to the residents' needs. There were several providers rounding in the facility as well. The team has worked to build up an environment that supports staff members and ensures they are able to complete their duties successfully.

There were no odors throughout the building. The floors and furnishings were very clean. Despite having carpeted floors in the main areas and hallways of the building, the floors have been maintained well. When there are snags in the carpeted areas, the facility is able to replace small square sections of the carpet to keep the flooring in great condition and appearance.

The facility has two long-term care halls, and two halls for skilled patients. There was a leak in part of the ceiling in a hallway due to an air-conditioning drip pan. The leak is being addressed today and will be completely repaired. Discussed taking proactive action to check the other units to ensure they are working in good function with hopes to prevent any similar issues occurring on those units.

The facility has a central nurse station that has good visibility along each hallway. Discussed working as a team to take care of all the needs of the residents and following assignments. The facility has a nice lounge that precedes the dining room. The dining room was very large and clean having completed breakfast service. Much of the facility and the dining room were decorated for various activities. The facility is recognizing CNA Week and has been decorated accordingly. The building is also planning to have a casino night activity later this week in celebration of Father's Day. There's a small room adjacent to the dining room, where the activities department was busy painting the nails of residents. Discussed efforts by the team to offer a robust catalog of activities and support the residents with participation.

The facility's therapy gym is located in the skilled hall. The gym was organized and clean. The team is planning to update another space in the building as another therapy gym focusing on occupational therapy and ADLs. Discussed putting in requests to receive equipment like a washer and dryer, a dishwasher, and other furniture and appliances.

Discussed having competitions with staff members and activities for them to keep them engaged and encouraged to go the extra mile while providing care to the residents.

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Winnie-Stowell Hospital District

Hewitt Nursing and Rehabilitation
8836 Mars Drive
Hewitt, TX 76643

June 24, 2026

Facility Administrator: Chris Gallardo

Hewitt Nursing and Rehabilitation is licensed for 140 beds, and its current census is 83 residents including 25 skilled patients. The facility's census has been increasing, resulting in several admissions. Discussed working to support marketing efforts and maintain relationships with referring partners.

There are a few staff openings reported at this time. Current openings include one nightshift nurse and two CNAs. All other positions are filled at this time.

The administrator reported state surveyors entered the facility yesterday to conduct the facility's annual fullbook survey. Discussed providing documentation to the surveyors according to their requests. The survey has been going well so far, and the administrator expects the surveyors to exit tomorrow.

Hewitt Nursing and Rehabilitation has a 2-star rating overall. The facility has a 2-star rating in Health Inspections, a 2-star rating in Staffing, and a 4-star rating in Quality Measures.

The facility held its monthly QAPI meeting and is maintaining its efforts for improvement. Discussed clinical outcomes and QIPP measure attainment during the month of May. The facility reported expectations to include any feedback from the fullbook survey in its QAPI processes.

There are no trends related to infection control at this time. Discussed recently admitting a resident from the hospital who is COVID positive. The facility implemented isolation precautions and expects this resident to recover soon.

The administrator shared there are occasional grievances related to meal service and call light response times. Discussed recent compliments about the improvements made to meal service.

The team celebrated CNA week providing meals and gifts to the CNAs. Discussed ensuring these staff members are recognized and feel appreciated.

Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Holland Lake Rehabilitation and Wellness Center
1201 Holland Lake Drive
Weatherford, TX 76086

June 24, 2026

Facility Administrator: Donna Tillman

Holland Lake Rehabilitation and Wellness Center is licensed for 120 beds, and its current census is 98 residents including 32 skilled patients. The facility has one bed hold at this time for a resident expecting to return soon. The facility has three discharges pending this week, but has several referrals under review for admission. There were three new admissions yesterday.

The facility hired a new staffing coordinator who started employment, but she unfortunately left without giving notice. The facility is seeking a new replacement for this position and discussed plans to support the new coordinator once hired. The team works together to ensure all needs are met and any callouts are covered properly.

The facility was visited by the state twice this month to investigate complaints. The state reviewed some complaints about the dietary department, but there were no deficiencies in either visit.

Holland Lake Rehabilitation and Wellness Center has a 5-star overall rating. The facility has a 4-star rating in Health Inspections, a 3-star rating in Staffing, and a 5-star rating in Quality Measures. The facility's health inspections decreased from a 5-star rating, but its' quality measures star rating increased from a 5-star rating.

The facility held its monthly QAPI meeting last week and is maintaining efforts to improve fall outcomes. Discussed evaluation of interventions to ensure they are properly assigned to meet the residents' needs. The facility leans on its ambassador program to ensure team members are routinely rounding on the residents as well. Discussed collaborating to ensure all the needs of residents are met regardless of the level of their acuity.

The facility is maintaining its focus to make improvements with its medical records department. Discussed plans to bring in a part-time medical records staff member to assist getting the department in order.

Discussed recently admitting a resident who was COVID positive. The team ensures proper precautions are utilized to promote safety and infection prevention. There were no trends or other infection related issues reported.

Discussed celebrating CNA week and recognizing staff for their contributions. The administrator made accommodations to bring in meals for staff during the weekday and weekend shifts.

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Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Pecan Bayou Nursing and Rehabilitation
2700 Memorial Park Drive
Brownwood, TX 76801

June 23, 2026

Facility Administrator: Josie Pebsworth

Pecan Bayou Nursing and Rehabilitation is licensed for 90 beds, and its current census is 62 residents including 15 skilled patients. The facility is doing well maintaining its census and reports it has the highest skilled mix in the community.

The facility is only recruiting one nurse at this time. All other positions are filled, and there is no agency staffing.

The facility discussed survey preparedness efforts and recent rounding with feedback for updates and repairs to be addressed in the building. There have not been any recent visits by state surveyors, and there are no new self-reports.

Pecan Bayou Nursing and Rehabilitation has a 4-star rating overall. The facility has a 4-star rating in Health Inspections, a 4-star rating in Staffing, and a 4-star rating in Quality Measures.

The facility held its monthly QAPI meeting on June 17 and discussed the facility's outcomes observed in May. Discussed getting a par level in place for central supplies. The team discussed improving activity offerings to ensure there is adequate coverage and offerings during evenings and weekends. Discussed QIPP measures reporting strong performance in the recent month.

The facility has done well with infection control efforts and managing the needs of the residents. The facility reported there is one resident on isolation precautions with MRSA. Discussed managing residents who are admitted from the hospital with active infections.

Grievances are being managed well with no reported trends.

Discussed addressing an issue with the call light system caused by an electrical short. Discussed review of this system and efforts to resolve this issue.

The facility celebrated CNA week and had events planned to recognize the CNAs each day of the week. Discussed recently completing some team building exercises and working to improve collaboration as an interdisciplinary team. The facility also has a suggestion box to receive feedback from team members about their perspective and opportunities for improvement.

Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Stephenville Rehabilitation and Wellness Center
2601 Northwest Loop
Stephenville, TX 76401

June 25, 2026

Facility Administrator: Jana Sanders

Stephenville Rehabilitation and Wellness Center is licensed for 122 beds, and its current census is 102 residents including 21 skilled patients. The local hospital has been very busy with an influx of patients which has led to a strong increase in referrals and admissions. Discussed efforts to support new admissions as they transition into the facility. The team is working to prevent any avoidable RTAs.

The team is managing staffing needs, but is hiring additional staff in accordance with the census growth. There are currently openings for two LVN and four CNA positions. Discussed using PRN staff to support coverage needs. Discussed challenges with availability of candidates during summer months. The facility is adding sign-on bonuses as an extra incentive for new staff to come onboard.

The facility is in its annual fullbook survey window. Discussed ongoing survey preparedness efforts and review of previous survey activity. There have not been any recent visits by state surveyors and there are no new self-reports at this time.

Stephenville Rehabilitation and Wellness Center has a 4-star rating overall. The facility has a 4-star rating in Health Inspections, a 3-star rating in Staffing, and a 4-star rating in Quality Measures. The facility's quality measures star rating increased from a 3-star rating.

The facility reported on its recent QAPI meeting which reviewed clinical outcomes and QIPP measures observed in May. Discussed efforts by the interdisciplinary team to support RTA rates and fall prevention efforts. Discussed an increase in falls largely on the skilled hall of short-term stay patients who are new to the building. The team is also working to address some residents who are exhibiting behaviors.

There are no trends or outbreaks reported regarding infection control.

Discussed a slight increase in grievances due to the increase in census. Some of these grievances have been regarding call light response times. Discussed in-servicing staff and engaging department heads in rounding efforts to support answering call lights promptly.

The facility celebrated CNA week recently and reported on events and activities throughout the week to recognize the CNAs.

Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Stonegate Nursing and Rehabilitation
4201 Stonegate Blvd.
Fort Worth, TX 76109

June 17, 2026

Facility Administrator: Kelcey Parks

The following report is from the site visit to Stonegate Nursing and Rehabilitation on June 17, 2026. A tour of the building was provided after a meeting was held with the administrator to provide an update on the facility.

Kelcey Parks is the new administrator of Stonegate Nursing and Rehabilitation. Kelcey's first day as the new administrator of the facility was on June 1.

Stonegate Nursing and Rehabilitation is licensed for 134 beds, and its current census is 115 residents. The facility has two planned admissions today, and there are two pending discharges.

The facility has worked hard to hire several new team members. There were ten new hires last week, including three CNAs, two nurses, one ADON, one MDS nurse, and a weekend supervisor.

There have not been any recent visits to the facility by state surveyors. There are no new self-reports at this time.

Stonegate Nursing and Rehabilitation has a 5-star rating overall. The facility has a 4-star rating in Health Inspections, a 2-star rating in Staffing, and a 5-star rating in Quality Measures. The facility is marketing its 5-star achievement and is focusing on maintaining this status.

The team will hold its monthly QAPI meeting soon. The new administrator is reviewing facility systems and considering which opportunities for improvement to prioritize. Discussed focusing on processes and making improvements wherever needed.

There is no COVID in the facility or any other type of outbreak at this time. Discussed utilizing proper precautions when caring for residents with infections.

The facility is decorated for CNA Week. There was a food truck at the front of the building today to provide meals for staff.

The facility has maintained a clean and welcoming environment for residents and visitors. The hallways and common areas were well lit and free of any clutter or debris. There are several hallways, common areas, and courtyards throughout the building. The staff take special care of the facility to ensure a home environment is provided to the residents.

The courtyards on the interiors of the facility are being maintained and offer a lovely space outdoors for the residents to enjoy. The large dining room is also a frequently utilized common area that is often the meeting place for group activities. The facility strives to invite and encourage both long-term care residents and short-term skilled patients to participate in activities.

Needed repairs are addressed to ensure that any risks or hazards are removed in mitigated. Touchup maintenance and visual improvements are frequently made to maintain an aesthetically pleasing environment.

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Cimarron Place Health & Rehabilitation
3801 Cimarron Blvd.
Corpus Christi, TX 78414

June 23, 2026

Facility Administrator: Ernest De La Garza

Cimarron Place Health & Rehabilitation Center is licensed for 120 beds, and its current census is 82 residents including 26 skilled patients. The facility averaged a census of 82 residents and 30 skilled patients in the month of May. There are thirteen referrals under review at this time. Discussed focus on increasing the facility's long-term care census. The facility will be filming a commercial tomorrow which will support marketing efforts. Discussed taking opportunities to showcase the building and partner with local organizations.

The facility is doing well with staffing efforts. Discussed a slight increase in overtime, but this was largely during transitions terming former staff and hiring new team members. There are no current open positions at this time. The facility reported it has a new business office manager who has been doing great supporting admissions and authorizations.

The state visited the facility to investigate a complaint recently. The facility received a D-tag related to medication timeliness due to a medication being given late. The facility parted ways with the nurse involved in the incident. There were no adverse effects related to this incident. The facility is in its annual fullbook window and expects the state to come in July or August. Discussed ongoing survey preparedness efforts and completing skills checkoffs.

Cimarron Place Health & Rehabilitation Center has a 5-star rating overall. The facility has a 4-star rating in Health Inspections, a 2-star rating in Staffing, and a 5-star rating in Quality Measures.

The facility held its monthly QAPI meeting and reports it has been improving over the last three months in fall outcomes. The system is still being a focus area for further improvement. The facility reported an increase in utilization of antianxiety medications amongst long-term stay residents. Discussed working with the consultant pharmacist on alternative solutions and GDR options.

There are no trends or outbreaks under infection control. Discussed instances when the facility admits residents from the hospital with an active infection and ongoing antibiotics. The team discusses infections routinely to ensure the facility remains vigilant in controlling infections while supporting the residents' needs.

The facility recently updated some of its outdoor lighting to improve safety and security around the building. Discussed plans to purchase some new dining room chairs. The facility is working to improve some of its duct work as well. The facility's emergency preparedness plan was also recently approved by the city.

The facility celebrated CNA week and gave gifts and food to the CNA staff members. Discussed taking time to show appreciation to staff and supporting efforts to retain great team members.

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Winnie-Stowell Hospital District

Harbor Lakes Nursing and Rehabilitation Center
1300 2nd Street
Granbury, TX 76048

June 25, 2026

Facility Administrator: Calvin Crosby

Harbor Lakes Nursing and Rehabilitation Center is licensed for 142 beds, and its current census is 95 residents including 20 skilled patients. The facility has seen some census growth into the 90s. There are currently seven referrals pending admission this week. There is one discharge today, and another planned this weekend. Discussed working with the local hospital to support the continuum of care for residents.

The facility has five CNA openings, but there is an ongoing CNA class with eight students enrolled who started their orientation on the floor earlier this month. These students will be eligible for fulltime work soon. There is also an opening for a nightshift nurse.

There have not been any recent visits by state surveyors, and there are no new self-reports.

Harbor Lakes Nursing and Rehabilitation Center has a 5-star rating overall. The facility has a 5-star rating in Health Inspections, a 3-star rating in Staffing, and a 5-star rating in Quality Measures.

Discussed the facility's recent QAPI meeting and review of clinical outcomes observed in May. The facility is working to improve wounds and skins since it triggered slightly over its target. Discussed interventions for affected residents and progress healing wounds. There have been some improvements with falls, but the facility is maintaining efforts to review and evaluate the effectiveness of interventions.

There are no reported trends or outbreaks under infection control at this time.

Discussed recent grievances and working with a resident who consistently complains about breakfast. Discussed working to make adjustments to improve her experience with breakfast meal service and ensure her preferences are met.

The steam table has been repaired and is in working order.

Discussed planning several activities for CNA week. The team made sure to recognize the CNAs and show appreciation for their contributions to the building.

Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Red Oak Health and Rehabilitation Center
101 Reese Drive
Red Oak, TX 74154

June 17, 2026

Facility Administrator: Lee Richard

The following report is from the site visit to Red Oak Health and Rehabilitation Center on June 17, 2026. A tour of the building was provided after a meeting was held with the administrator for an update on the facility.

Red Oak Health and Rehabilitation Center is licensed for 144 beds, and its current census is 101 residents including 8 skilled patients. The facility has two residents in the hospital at this time. One of these residents is expected to be readmitted to the facility today, and the second is expected later this week. There are currently five referrals under review for admission. Discussed working closely as an interdisciplinary team to review referrals and promptly communicate with referring sources to increase the likelihood of receiving those admissions. The facility is budgeted for 105 residents, and it expects to be close to its budget by the end of this week.

The facility has hired a new director of nursing who will start employment on July 13. The new DON is experienced and is expected to be a hands-on team member and leader. There are current openings for five CNAs; four on the dayshift and one on the night shift. There is also an opening for one nurse.

There have not been any recent visits to the facility by state surveyors, and there are no new self-reports at this time.

Red Oak Health and Rehabilitation Center has a 3-star overall rating. The facility has a 4-star rating in Health Inspections, a 1-star rating in Staffing, and a 4-star rating in Quality Measures.

The facility reported on its recent QAPI meeting. The team reviewed clinical outcomes and quality measures. Discussed continued efforts to reduce fall rate and improve interventions. Discussed evaluating the effectiveness of fall interventions and ensuring that residents' needs are properly care planned.

There are no outbreaks at this time and no trends related to infection control.

Discussed recent grievances that have included some opportunities to improve customer service. There have also been some grievances related to dietary services, but the team has started seeing some improvements. There is a new dietary manager who started earlier this quarter and has been stabilizing outcomes in this department.

The facility has USA decorations for the World Cup and upcoming July 4 holiday. There are also decorations in the building recognizing CNA Week. Discussed the importance of recognizing the hard-working team members and showing appreciation for what they do.

Red Oak Health and Rehabilitation Center is a very clean and peaceful environment. The hallways and floors were clean and free of any clutter or debris. There were no odors throughout the visit, and the new wood flooring has been well taken care of. The hallway walls are well maintained and repainted when needed. The facility has some darker accent walls which give a lovely contrast to the environment.

The therapy gym is located near the administrative offices. The gym was clean and organized. Discussed using the space for group activities and meeting the needs of long-term and skilled patients. The two nurse stations were staffed and had visibility down the resident hallways.

There are some lounge areas near the nurse stations at either corner of the facility. These spaces have access to the interior courtyard. The courtyard in the center of the facility has been well maintained. The area provides a peaceful environment for residents to be outdoors in a safe space. There's also a large area under a gazebo in the center of the courtyard.

Many residents were gathered in the dining room for lunch service. Discussed efforts to invite residents to eat in the dining room and support their social well-being. The secure unit was also having lunch service at this time, and residents were being assisted according to their needs.

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Scott Johnson, Nursing Facility Specialist
Winnie-Stowell Hospital District

Silver Spring
1690 N. Treadway Blvd.
Abilene, TX 75551

June 24, 2026

Facility Administrator: Bobby Simpkins

Silver Spring is licensed for 120 beds, and its current census is 79 residents including 18 skilled patients. The census in the region has been slow in recent summer months, but Silver Spring reportedly has one of the highest census' in town. Discussed focusing on keeping residents healthy and preventing avoidable hospital readmissions. There are five referrals under review for admission at this time. There are a few managed care discharges who will likely convert to long-term care services.

The facility has three CNA openings due to some staff departing for other opportunities. The facility has a night nurse being replaced due to a staff member retiring. There is a new medical records manager who started earlier this week.

There have not been any recent visits by state surveyors. Discussed working with the quality monitoring team who is in the facility today. The quality monitor is reviewing abuse, neglect, and exploitation processes as well as grievances.

Silver Spring has a 1-star rating overall. The facility has a 1-star rating in Health Inspections, a 2-star rating in Staffing, and a 4-star rating in Quality Measures. The facility's overall and quality measures star ratings decreased from 2-star and 5-star ratings respectively.

The facility held its monthly QAPI meeting earlier this month. The interdisciplinary team discussed clinical outcomes observed in May. There has been a reduction in the number of falls in the building, but the low census is weighing more heavily on percentages. Discussed continuing efforts to support fall prevention interventions and improve wounds.

Infection control efforts are going well and there are no reported trends.

Discussed recent grievances and working with residents to address all issues and concerns. The administrator reported on a resident who is requesting a private room. Discussed communicating with this resident clearly and ensuring expectations are set appropriately.

Silver Spring celebrated CNA week recently. Discussed providing gifts and food to staff members to show appreciation for the services they provide in the building.

Willowbrook Nursing Center-Nacogdoches
227 Russell Blvd. Nacogdoches, TX. 75965
06/19/2026

Submitted by Sue White, RN, NSGO

Administrator: Jimmy Sanders, LNFA
DON: Rhonda Benevides, RN

FACILITY INFORMATION

Willowbrook-Nacogdoches is a licensed 161- bed facility with an overall star rating of 3 and a rating of 5 stars in Quality Measures. The facility reports census of 102: 15 PP; 3 Skilled; 61 MCD + 4 pending; 7 HMO; 12 Hospice and 12 in Memory Care.

The QIPP site visit was conducted over the phone with the DON.

The facility has been able to offer more outings because they have a new van, but they are still limited with the county transportation and lately they took some residents out to eat and to Walmart and last week to a prom dance. The DON reports the facility had a party for Memorial Day and Mother's Day and they are planning something for Father's Day and July 4th. The facility is currently celebrating Juneteenth.

The Administrator reports the facility has slowed up on thankful Thursday for all staff due to not having the HR position. The facility still has the Mad Genius program (turn poker chips in for prizes). The company has a star of the month/quarter/year program, and all those names go into a drawing for a car at the end of the year. If an employee writes an accepted essay about why they want to further their education, the company will pay for their education. The DON reports the facility celebrated Nurse's Week and they are celebrating CNAs this week.

SURVEY INFORMATION

The facility had the state in the building twice in May to investigate 2 complaints that were both unsubstantiated, no citations.

REPORTABLE INCIDENTS

During **March/April/May 2026** the facility had 2 complaints that were unsubstantiated, no citations.

EDUCATION PROVIDED

- Reviewed QIPP year 9 – Qtr 4 started 06/01/2026 but the data collection started 04/01/2026 and will end 06/30/2026. The facility is currently meeting all 4 QIPP components. They do have a PIP in place for falls.
- Hurricane Preparedness - The National Oceanic and Atmospheric Administration forecasts a range of six to 10 hurricanes in the Atlantic Ocean this season. Of those, three to five are expected to be major hurricanes of Category 3 or higher. An average Atlantic hurricane season has three major hurricanes. 2026 Atlantic hurricane season begins on June 1. The Atlantic hurricane season, which affects the Texas Gulf Coast, continues through Nov. 30.

HHSC requires long-term care providers, such as nursing facilities, assisted living facilities, hospices and state-regulated group homes, to regularly prepare for natural disasters, including hurricanes and flooding. HHSC also requires childcare operations and acute health care facilities such as hospitals and dialysis centers to maintain an updated plan and ensure staff are fully trained to implement it during a crisis.

A provider's emergency plans for extreme weather should address:

- Power loss – generator in good working condition and DON knows how to start it
- Water and food needs.
- Communication to families and staff.
- Staff shortages and responsibilities.
- Continuation of care and treatment.
- Sheltering in place, evacuation and transportation, as applicable – made list of who could stay and shelter in place
- Facilities with generators should perform any maintenance or needed testing to ensure the equipment functions during a power loss.

In the event of an emergency, HHSC Disaster Services provides public health and medical support, shelters for people with medical needs, counseling services, disaster food assistance, and water and ice. The program also provides regulatory support for health care facilities, long-term care facilities and childcare operations, and special waivers for Medicaid providers and clients as needed.

CLINICAL TRENDING FOR MARCH/APRIL/MAY 2026

Incidents/Falls:
Willowbrook had 30 falls without injury (7 repeat) and 3 falls with injury. The facility also reported 2 Fractures, 10 Skin Tears, 1 Laceration, 0 Elopements, 0 Behaviors and 0 Bruises. PIP in place for falls.

Infection Control:
Willowbrook reports 105 total infections 31 UTI's; 22 Respiratory infections, 16 Wound infections, 3 Blood infections, 2 Genital infections, 6 EENT infections and 25 Other infections.

Weight loss:
Willowbrook reported Weight loss 0 residents with 5-10% and 0 residents with > 10% loss.

Pressure Ulcers:
Willowbrook had 18 residents with 20 pressure ulcer sites and 5 were acquired in house.

Restraints:
Willowbrook is a restraint free facility.

LTC GROUP

Willowbrook Nursing Center-Nacogdoches
227 Russell Blvd. Nacogdoches, TX. 75965
06/19/2026

Submitted by Sue White, RN, NSGO

Staffing:

Current Open Positions						
Shift	**RN**	**LVN**	**Nurse Aide**	**Hskp.**	**Dietary**	**Activity**
6 to 2		1	3			
2 to 10			5			
10 to 6		1	1			
Other						
# Hired this month		1	3			
# Quit/Fired		2	5			

Total number employees: 104____ Turnover rate%: _30____

CASPER REPORT

Indicator	Current %	State %	National %	Comments/PIPs
Percent of residents who used antianxiety or hypnotic medication (L)	12.0%	17.7%	19.7%	
Fall w/Major Injury (L)	5.6%	3.4%	3.4%	PIP in place
UTI (L)	0.0%	0.8%	1.7%	
High risk with pressure ulcers (L)	3.2%	4.6%	5.7%	
Loss of Bowel/Bladder Control(L)	11.6%	13.3%	20.1%	
Catheter(L)	0.0%	0.4%	1.0%	
Physical restraint(L)	0.0%	0.0%	0.1%	
Residents whose ability to walk independently worsened (L)	13.0%	15.1%	15.8%	
Excessive Weight Loss(L)	2.7%	3.2%	5.8%	
Depressive symptoms(L)	2.4%	2.5%	13.9%	
Antipsychotic medication (L)	0.0%	1.6%	1.7%	

PHARMACY Consultant reports/visit/ med destruction? No concerns, med destruction completed monthly

_____

# of GDR ATTEMPTS in the month: How many successful?
# of Anti-anxiety (attempts__4_ successful__4_failed___0_)
# of Antidepressants (attempts__5__ successful__0_failed_5_)
# of Antipsychotic (attempts_6_ successful_3_failed__3_)
# of Sedatives (attempts_2__successful_2___failed_0____)

_____

DIETICIAN Recommendation concerns/Follow Up? Comes at least monthly and work remotely weekly, no concerns

SOCIAL SERVICES NUMBER/TYPE OF GRIEVANCES (RESOLVED OR NOT)- 6, all resolved

TRAUMA INFORMED CARE IDENTIFIED: None

ACTIVITIES PIP/CONCERNS: None, keeps everyone engaged, thinks outside the box

DIETARY PIP/CONCERNS: switched contracted companies and so far good feedback

ENVIRONMENTAL SERVICES PIP/CONCERNS: New contract, going better

LTC GROUP

Willowbrook Nursing Center-Nacogdoches
227 Russell Blvd. Nacogdoches, TX. 75965
06/19/2026

Submitted by Sue White, RN, NSGO

MAINTENANCE PIP/CONCERNS: None, painting/touch ups in general areas and then resident rooms

MEDICAL RECORDS/ CENTRAL SUPPLY PIPS/CONCERNS: None

MDS PIPS/CONCERNS: None

QIPP MEASURES - MDS Measures: Relative 5% improvement from the NF baseline, increasing by 5% each quarter (5% in Q1, 10% in Q2, 15% in Q3, 20% in Q4). **HPRD Staffing Measures:** Relative 1% improvement from the NF baseline, increasing by 1% each quarter (1% in Q1, 2% in Q2, 3% in Q3, 4% in Q4)

Component 1 -Hospital Partner MDS Measures (NSGO-only). Achievement in 1 metric earns 90% of eligible funds; achievement in 2 metrics earns 100%

Indicator	State Benchmark	Baseline Target	Results	Met (5% improvement) Y/N	Comments
Metric 1: (CMS N013.02) Percent of residents experiencing one or more falls with major injury	3.4%	3.4%	5.6%	N	
Metric 2: (CMS N024.02) Percent of residents with a urinary tract infection	0.8%	1.7%	0.0%	Y	
Metric 3: (CMS N029.03) Percent of residents who lose too much weight	3.2%	5.8%	2.7%	Y	
Metric 4: (CMS N031.04) Percent of residents who received an antipsychotic medication	1.6%	1.7%	0.0%	Y	
Metric 5: (CMS N035.04) Percent of residents whose ability to walk independently worsened	15.1%	15.8%	13.0%	Y	

Component 2 -Workforce Development HPRD Measures (All Facilities). Achievement in 1 metric earns 70% of eligible funds; achievement in 2 metrics earns 100%

Indicator Payroll Based Journal (PBJ) - Staffing Measure in Hours Per Resident Day (HPRD)	National Benchmark Met Y/N	Baseline Target	Performance Target of 1% improvement	Results	Met Y/N	Comments
Metric 1: Reported Certified Nursing Assistant (CNA) HPRD 60% weighted	**Y**	**1.88%**	**1.96%**	**1.85%**	**N**	
Metric 2: Reported Licensed Nursing HPRD 85% weighted	**Y**	**1.09%**	**1.14%**	**1.28%**	**Y**	
Metric 3: Reported Total Nursing Staff HPRD 100% weighted	**Y**	**2.97%**	**3.09%**	**3.14%**	**Y**	
In case of audit:						

Did NF maintain 4 additional hours (*non-managerial*) of RN staffing coverage per day, beyond the CMS mandate?						
• Additional hours provided by direct care staff?						
Did NF maintain 8 additional hours (*non-managerial*) of RN staffing coverage per day, beyond the CMS mandate?						
• 8 additional hours non-concurrenty scheduled?						
• Additional hours provided by direct care staff?						
• Telehealth used?						
NFs provided in total 12 or 16 hours of RN coverage, respectively, on at least 90 percent of the days within the reporting period?						
• Agency usage or need d/t critical staffing levels						

QIPP Component 3 – **Texas Priority MDS Measures (All Facilities).** Equally weighted measures, each worth 33.33% of available component funds

Indicator	National Benchmark	Baseline Target	Results	Met (5% Improvement) Y/N	Comments
Metric 1: (CMS N030.03) Percent of residents who have depressive symptoms	13.9%	2.5%	2.4%	Y	
Metric 2: (CMS N036.03) Percent of residents who used antianxiety or hypnotic medication	19.7%	17.7%	12.0%	Y	
Metric 3: (CMS N046.01) Percent of residents with new or worsened bowel or bladder incontinence	20.1%	13.3%	11.6%	Y	

QIPP Component 4 – **Resident Focus MDS Measures (NSGO-only).** Equally weighted measures, each worth 50% of available component funds

Indicator	State Benchmark	Baseline Target	Results	Met (5% Improvement) Y/N	Comments

Metric 1: (CMS N045.01) Percent of residents with pressure ulcers	4.6%	5.7%	3.2%	Y	
Metric 2: (CMS N026.03) Percent of residents who have/had a catheter inserted and left in their bladder	0.4%	1.0%	0.0%	Y	

Spindletop Hill
1020 S. 23rd Beaumont, TX 77707
06/17/2026

Submitted by L. Sue White, RN, NSGO

Administrator: James Teel, LNFA
DON: Angel McSpadden, RN

FACILITY INFORMATION

Spindletop Hill is a licensed 128- bed facility with an overall star rating of 1 and a rating of 4 stars in Quality Measures. Census 82: 3 PP; 1 MC; 60 MDC; 3 HMO; & 16 Hospice 15 Memory Care.

The QIPP site visit was conducted over the phone. The Administrator and DON were available and very helpful during the visit.

The Administrator reports the facility had celebrations for Mother's Day, Nursing Home Week, Memorial Day and they are planning Juneteenth, Father's Day and Fourth of July events. The facility is now providing outings for the residents. The facility is participating in America 250.

The DON reports the facility re-start celebrating monthly birthdays and Employee of the Month and continues with a recognition program (gift cards) when anyone is seen providing above and beyond care. The facility staff participate in most of the residents' celebrations. The Administrator reports the facility celebrated Nurse's week and currently celebrating CNA week.

EDUCATION PROVIDED

- Reviewed QIPP year 9 – Qtr 4 started 06/01/2026 but the data collection started 04/01/2026 and will end 06/30/2026. The facility is currently meeting 2 of the 4 components.
- Hurricane Preparedness - The National Oceanic and Atmospheric Administration forecasts a range of six to 10 hurricanes in the Atlantic Ocean this season. Of those, three to five are expected to be major hurricanes of Category 3 or higher. An average Atlantic hurricane season has three major hurricanes. 2026 Atlantic hurricane season begins on June 1. The Atlantic hurricane season, which affects the Texas Gulf Coast, continues through Nov. 30.

  HHSC requires long-term care providers, such as nursing facilities, assisted living facilities, hospices and state-regulated group homes, to regularly prepare for natural disasters, including hurricanes and flooding. HHSC also requires childcare operations and acute health care facilities such as hospitals and dialysis centers to maintain an updated plan and ensure staff are fully trained to implement it during a crisis.

  A provider's emergency plans for extreme weather should address:

  - Power loss.
  - Water and food needs.
  - Communication to families and staff.
  - Staff shortages and responsibilities.
  - Continuation of care and treatment.
  - Sheltering in place, evacuation and transportation, as applicable.
  - Facilities with generators should perform any maintenance or needed testing to ensure the equipment functions during a power loss.

In the event of an emergency, HHSC Disaster Services provides public health and medical support, shelters for people with medical needs, counseling services, disaster food assistance, and water and ice. The program also provides regulatory support for health care facilities, long-term care facilities and childcare operations, and special waivers for Medicaid providers and clients as needed.

SURVEY INFORMATION

The facility had the state in the building in March and in May to review self-reports that were all unsubstantiated, no citations.

REPORTABLE INCIDENTS –

The facility had 4 self-reports during **March/April/May 2026** and all have been were cleared.

CLINICAL TRENDING MARCH/APRIL/MAY 2026:

Incidents/Falls:

Spindletop had 27 falls without injury (9 repeat) and 15 falls with injury. The facility also reported 5 Skin Tears, 2 Fractures, 4 Lacerations, 0 Elopements, 1 Behavior and 4 Bruises.

Infection Control:

Spindletop reports 18 total infections: 7 UTIs, 3 Respiratory infections, 0 EENT infections, 6 Wound infections, 0 GI infections, 0 Genital infections and 2 Other infections.

Weight loss:

Spindletop had 10 residents with 5-10% weight loss in 1 month and 0 with >10% weight loss in 10 months. The facility has a PIP in place for this measure.

Pressure Ulcers:

Spindletop had 12 residents with 17 pressure ulcer sites and 5 acquired in house. The facility has a PIP in place for this measure.

Restraints:

Spindletop does not use restraints.

Staffing:

Current Open Positions						
Shift	**RN**	**LVN**	**Nurse Aide**	**Hskp.**	**Dietary**	**Activity**
6 to 2	0	1 6A-6P	1	0	0	0
2 to 10	0	2 6P-6A	4	0	0	0
10 to 6	0	0	4	0	0	0
Other	0	0	0	0	0	0
# Hired this month	0	1	3	0	1	0
# Quit/Fired	0	0	8	0	1	0

Total number employees: _116____ Turnover rate %: _7.71 for QTR__

Spindletop Hill
1020 S. 23rd Beaumont, TX 77707
06/17/2026

Submitted by L. Sue White, RN, NSGO

CASPER REPORT –

Indicator	Current %	State %	National %	Comments/PIPs
Percent of residents who used antianxiety or hypnotic medication (L)	18.3%	17.7%	19.7%	Will review for PIP
Fall w/Major Injury (L)	3.8%	3.4%	3.4%	One will fall off soon
UTI (L)	1.3%	0.8%	1.7%	PIP in place
High risk with pressure ulcers (L)	4.5%	4.6%	5.7%	
Loss of Bowel/Bladder Control(L)	21.2%	13.3%	20.1%	Will review for PIP
Catheter(L)	0%	0.4%	1.0%	
Physical restraint(L)	0%	0%	0.1%	
Residents whose ability to walk independently worsened (L)	5.0%	15.1%	15.8%	
Excessive Weight Loss(L)	3.4%	3.2%	5.8%	PIP in place and has improved greatly
Depressive symptoms(L)	5.4%	2.5%	13.9%	Will review for PIP
Antipsychotic medication (L)	10.5%	9.7%	15.5%	PIP in place

PHARMACY Consultant reports/visit/ med destruction: Monitor MARS, comes monthly, med destruction completed
# of GDR ATTEMPTS in the month: How many successful? 10/5
# of Anti-anxiety (attempts_2__ successful_1_failed___1_)
# of Antidepressants (attempts__1__ successful__0__failed__1_)
# of Antipsychotic (attempts__2_ successful__1__failed__1__)
# of Sedatives (attempts__0_successful__0__failed_0____)

DIETICIAN Recommendation concerns/Follow Up – No concerns, Comes weekly

SOCIAL SERVICES NUMBER/TYPE OF GRIEVANCES (RESOLVED OR NOT)- 42 for the period; regarding; call light response, missing items and food, all have been resolved.

TRAUMA INFORMED CARE IDENTIFIED: NA

ACTIVITIES PIP/CONCERNS: No concerns

DIETARY PIP/CONCERNS: Staff did not read date labels on product; PIP was put in place and as of this date the issue has been resolved.

ENVIRONMENTAL SERVICES PIP/CONCERNS: None

MAINTENANCE PIP/CONCERNS: None

MEDICAL RECORDS/CENTRAL SUPPLY PIPS/CONCERNS: None

MDS PIPS/CONCERNS: No concerns

QIPP MEASURES - MDS Measures: Relative 5% improvement from the NF baseline, increasing by 5% each quarter (5% in Q1, 10% in Q2, 15% in Q3, 20% in Q4). **HPRD Staffing Measures:** Relative 1% improvement from the NF baseline, increasing by 1% each quarter (1% in Q1, 2% in Q2, 3% in Q3, 4% in Q4)

LTC GROUP

Spindletop Hill
1020 S. 23rd Beaumont, TX 77707
06/17/2026

Submitted by L. Sue White, RN, NSGO

Component 1 **-Hospital Partner MDS Measures (NSGO-only).** Achievement in 1 metric earns 90% of eligible funds; achievement in 2 metrics earns 100%

Indicator	State Benchmark	Baseline Target	Results	Met (5% improvement) Y/N	Comments
Metric 1: (CMS N013.02) Percent of residents experiencing one or more falls with major injury	3.4%	3.28%	3.80%	N	Will meet next Q
Metric 2: (CMS N024.02) Percent of residents with a urinary tract infection	0.8%	0.84%	1.30%	N	Will meet by the end of Q
Metric 3: (CMS N029.03) Percent of residents who lose too much weight	3.2%	7.56%	3.30%	Y	
Metric 4: (CMS N031.04) Percent of residents who received an antipsychotic medication	9.7%	8.02%	10.5%	N	
Metric 5: (CMS N035.04) Percent of residents whose ability to walk independently worsened	15.1%	9.19%	5.20%	Y	

Component 2 **-Workforce Development HPRD Measures (All Facilities).** Achievement in 1 metric earns 70% of eligible funds; achievement in 2 metrics earns 100%

Indicator Payroll Based Journal (PBJ) - Staffing Measure in Hours Per Resident Day (HPRD)	National Benchmark Met Y/N	Baseline Target	Performance Target of 1% improvement	Results	Met Y/N	Comments
Metric 1: Reported Certified Nursing Assistant (CNA) HPRD 60% weighted		**2.05%**		**1.88%**	**N**	Recruiting, offering bonus
Metric 2: Reported Licensed Nursing HPRD 85% weighted		**1.54%**		**1.35%**	**N**	
Metric 3: Reported Total Nursing Staff HPRD 100% weighted		**3.65%**		**3.22%**	**N**	
In case of audit: Did NF maintain 4 additional hours (*non-managerial*) of RN staffing coverage per day, beyond the CMS mandate?						
• Additional hours provided by direct care staff?						
Did NF maintain 8 additional hours (*non-managerial*) of RN staffing coverage per day, beyond the CMS mandate?						
• 8 additional hours non-concurrenty scheduled?						

• Additional hours provided by direct care staff?						
• Telehealth used?						
NFs provided in total 12 or 16 hours of RN coverage, respectively, on at least 90 percent of the days within the reporting period?						
• Agency usage or need d/t critical staffing levels						

QIPP Component 3 – **Texas Priority MDS Measures (All Facilities).** Equally weighted measures, each worth 33.33% of available component funds

Indicator	National Benchmark	Baseline Target	Results	Met (5% Improvement) Y/N	Comments
Metric 1: (CMS N030.03) Percent of residents who have depressive symptoms	13.9%	2.36%	5.3%	N	
Metric 2: (CMS N036.03) Percent of residents who used antianxiety or hypnotic medication	19.7%	20.43%	18.0%	Y	
Metric 3: (CMS N046.01) Percent of residents with new or worsened bowel or bladder incontinence	20.1%	19.49%	22.3%	N	Will meet by end of Q

QIPP Component 4 – **Resident Focus MDS Measures (NSGO-only).** Equally weighted measures, each worth 50% of available component funds

Indicator	State Benchmark	Baseline Target	Results	Met (5% Improvement) Y/N	Comments
Metric 1: (CMS N045.01) Percent of residents with pressure ulcers	4.6%	5.06%	4.6%	Y	
Metric 2: (CMS N026.03) Percent of residents who have/had a catheter inserted and left in their bladder	0.4%	1.08%	0%	Y	

Rose Haven Retreat
200 Live Oak Drive, Atlanta TX 75551
June 17, 2026

Submitted by: Sue White, RN, NSGO

Administrator: Dr. Kera Gored, LNFA
DON: Tara Murphy, RN

FACILITY INFORMATION

Rose Haven Retreat is a licensed 108- bed facility with an overall star rating of 4 and a rating of 5 stars in Quality Measures. The current census on the date of the call was 43 and 13 in the unit.

The Administrator was available and very helpful during the call. The facility is still focusing on Antipsychotic use reduction and resident behavior non-pharmaceutical solutions.

The Administrator reports the facility had a party for Mother's Day, Nursing Home week, Memorial Day and they are planning something for Juneteenth, Father's Day and Fourth of July. The Administrator reports the facility offers to take residents to local churches for Sunday services.

The Administrator reports the facility offers lunches every quarter and when staff go above and beyond, they get a ticket to turn in for prizes. The facility also provides regular cookouts for the staff, and they are working on a grand re-opening for July 15th. The facility celebrated Nurse's Week in May and they are currently celebrating CNAs.

EDUCATION PROVIDED

- Reviewed QIPP year 9 – Qtr 4 started 06/01/2026 but the data collection started 04/01/2026 and will end 06/30/2026. The facility is currently meeting 4 of the 4 components with PIP in place for antipsychotics.
- Hurricane Preparedness - The National Oceanic and Atmospheric Administration forecasts a range of six to 10 hurricanes in the Atlantic Ocean this season. Of those, three to five are expected to be major hurricanes of Category 3 or higher. An average Atlantic hurricane season has three major hurricanes. 2026 Atlantic hurricane season begins on June 1. The Atlantic hurricane season, which affects the Texas Gulf Coast, continues through Nov. 30.

  HHSC requires long-term care providers, such as nursing facilities, assisted living facilities, hospices and state-regulated group homes, to regularly prepare for natural disasters, including hurricanes and flooding. HHSC also requires childcare operations and acute health care facilities such as hospitals and dialysis centers to maintain an updated plan and ensure staff are fully trained to implement it during a crisis.

  A provider's emergency plans for extreme weather should address:

  - Power loss – facility had their annual drill this year
  - Water and food needs.
  - Communication to families and staff.
  - Staff shortages and responsibilities.
  - Continuation of care and treatment.

- Sheltering in place, evacuation and transportation, as applicable – facility has agreements in place with sister facilities
- Facilities with generators should perform any maintenance or needed testing to ensure the equipment functions during a power loss.

In the event of an emergency, HHSC Disaster Services provides public health and medical support, shelters for people with medical needs, counseling services, disaster food assistance, and water and ice. The program also provides regulatory support for health care facilities, long-term care facilities and childcare operations, and special waivers for Medicaid providers and clients as needed.

SURVEY INFORMATION

Administrator reports the facility had their state full book survey today, including LSC and believe they received only a few tags with no fine attached.

REPORTABLE INCIDENTS

The Administrator reports the facility has one pending SRI.

Pharmacy: No concerns, comes monthly and medication destruction completed
Nursing/MDS: No concerns
Dietary/Kitchen: Dietician comes at least every other month, no concerns, no tags during full book
Housekeeping/laundry: No concerns
Central supply/medical records: No Concerns
Maintenance: No concerns
Activities: No concerns

CLINICAL TRENDING

Incidents/Falls:
Facility information not provided

Infection Control:
Facility information not provided

Weight loss:
Facility information not provided

Pressure Ulcers:
Facility information not provided

Restraints:

Facility information not provided

Staffing:

Facility is currently fully staffed.

Marshall Manor West
207 West Merritt Street, Marshall, TX 75670
06/17/2026
Submitted by: Sue White, RN, NSGO

Administrator: Ken Kale, LNFA
DON: Lakeisha Owens, RN

FACILITY INFORMATION

Marshall Manor West is a 118-bed facility with a current overall star rating of 4 and a Quality Measures rating of 5. The census on the date of this visit was 53 (6 skill mix) with 18 in memory care.

The QIPP site visit was conducted over the phone, and the Administrator was available and very helpful.

The facility has regular outings to the store and for Bingo and they went on a casino boat trip last month. The facility had a party for Mother's Day and Memorial Day and they had their Father's Day celebration today. The Administrator reports the facility is planning a pot luck for Juneteenth and a party for July 4th.

The Administrator reports the facility continues birthdays, weekly meal provisions and they also have an employee of the month program and each month a different department. The facility celebrated Nurse's week last month and they are currently celebrating CNA week.

EDUCATION PROVIDED

- Reviewed QIPP year 9 – Qtr 4 started 06/01/2026 but the data collection started 04/01/2026 and will end 06/30/2026. The facility is currently meeting 4 of the 4 components with PIPs in place for census.
- Hurricane Preparedness - The National Oceanic and Atmospheric Administration forecasts a range of six to 10 hurricanes in the Atlantic Ocean this season. Of those, three to five are expected to be major hurricanes of Category 3 or higher. An average Atlantic hurricane season has three major hurricanes. 2026 Atlantic hurricane season begins on June 1. The Atlantic hurricane season, which affects the Texas Gulf Coast, continues through Nov. 30.

  HHSC requires long-term care providers, such as nursing facilities, assisted living facilities, hospices and state-regulated group homes, to regularly prepare for natural disasters, including hurricanes and flooding. HHSC also requires childcare operations and acute health care facilities such as hospitals and dialysis centers to maintain an updated plan and ensure staff are fully trained to implement it during a crisis.

  A provider's emergency plans for extreme weather should address:

  - Power loss- generator checks done regulary
  - Water and food needs.
  - Communication to families and staff.
  - Staff shortages and responsibilities.
  - Continuation of care and treatment.

- Sheltering in place, evacuation and transportation, as applicable – transfer agreements in place
- Facilities with generators should perform any maintenance or needed testing to ensure the equipment functions during a power loss.

In the event of an emergency, HHSC Disaster Services provides public health and medical support, shelters for people with medical needs, counseling services, disaster food assistance, and water and ice. The program also provides regulatory support for health care facilities, long-term care facilities and childcare operations, and special waivers for Medicaid providers and clients as needed.

QIPP SCORECARD:

The facility is currently meeting all 4 QIPP components for quarter four, year 9.

SURVEY INFORMATION

Administrator reports the state came to their facility to review a self-report that was unsubstantiated.

REPORTABLE INCIDENTS

The facility has 0 pending self-reports.

PHARMACY: No concerns, comes monthly and med destruction completed
NURSING/MDS: None
DIETARY/KITCHEN: Dietician comes monthly, no concerns
HOUSEKEEPING/LAUNDRY: None
CENTRAL SUPPLY/MEDICAL RECORDS: None
MAINTENANCE: None
ACTIVITIES: None

CLINICAL TRENDING

Incidents/Falls:
Information not provided

Infection Control:
Information not provided

Weight loss:
Information not provided

Pressure Ulcers:
Information not provided

Restraints:

Information not provided

Staffing:

Administrator reports ability to staff facility without use of Agency, low overtime but they do have 1 FT and 1 PT nurse and 3 CNA open positions.

Marshall Manor Nursing and Rehab Center
1007 South Washington Avenue, Marshall TX 75670
June 17, 2026
Submitted by: Sue White, RN, NSGO

Administrator: Brian Willis, LNFA
DON: Robin Sharp, RN

FACILITY INFORMATION

Marshall Manor Nursing and Rehab is a 169-bed facility with a current overall star rating of 4 and a Quality Measures rating of 4. The census on the date of this call was 104 with a skill mix of 21.

The QIPP site visit was conducted over the phone. The Administrator was available and very helpful during the call.

The facility has regular outings. The facility had parties for Mother's Day and Memorial Day. The facility is planning something for Father's Day and to participate in the 4th of July parade downtown.

The Administrator reports the facility continues anniversary recognitions, giveaways at staff meetings, and they also have an employee of the month program. The facility is currently celebrating CNA week and they celebrated Nurse's week in May.

QIPP SCORECARD:

The Administrator reports the facility is meeting all 4 QIPP components in quarter four of year 9.

SURVEY INFORMATION

The state came to facility on 4/22/26 for 6 complaints and 2 self-reports and all were unsubstantiated, no citations. The facility is in their full book survey window.

REPORTABLE INCIDENTS

The facility has 1 pending self-report.

EDUCATION PROVIDED

- Reviewed QIPP year 9 – Qtr 4 started 06/01/2026 but the data collection started 04/01/2026 and will end 06/30/2026. The facility is currently meeting 4 of the 4 components.
- Hurricane Preparedness - The National Oceanic and Atmospheric Administration forecasts a range of six to 10 hurricanes in the Atlantic Ocean this season. Of those, three to five are expected to be major hurricanes of Category 3 or higher. An average Atlantic hurricane season has three major hurricanes. 2026 Atlantic hurricane season begins on June 1. The Atlantic hurricane season, which affects the Texas Gulf Coast, continues through Nov. 30.

  HHSC requires long-term care providers, such as nursing facilities, assisted living facilities, hospices and state-regulated group homes, to regularly prepare for natural disasters, including hurricanes and flooding. HHSC also requires childcare operations and acute health care facilities such as hospitals and dialysis centers to maintain an updated plan and ensure staff are fully trained to implement it during a crisis.

A provider's emergency plans for extreme weather should address:

- Power loss- just did a tabletop drill for severe weather last week and in May the city just had an emergency of loss of water for entire city
- Water and food needs.
- Communication to families and staff.
- Staff shortages and responsibilities.
- Continuation of care and treatment.
- Sheltering in place, evacuation and transportation, as applicable.
- Facilities with generators should perform any maintenance or needed testing to ensure the equipment functions during a power loss – generator checked regularly

In the event of an emergency, HHSC Disaster Services provides public health and medical support, shelters for people with medical needs, counseling services, disaster food assistance, and water and ice. The program also provides regulatory support for health care facilities, long-term care facilities and childcare operations, and special waivers for Medicaid providers and clients as needed.

PHARMACY: No concerns, Red River comes once per month and med destruction completed
NURSING/MDS: None
DIETARY/KITCHEN: None, Dietician comes 2x month
HOUSEKEEPING/LAUNDRY: None
CENTRAL SUPPLY/MEDICAL RECORDS: None
MAINTENANCE: None
ACTIVITIES: None

CLINICAL TRENDING

Incidents/Falls:
Facility information not provided

Infection Control:
Facility information not provided

Weight loss:
Facility information not provided

Pressure Ulcers:
Facility information not provided

Restraints:
Facility information not provided

Staffing:

The Administrator reports they have open positions for nursing and CNAs.

Highland Park Rehabilitation and Nursing Center
8861 Fulton St., Houston, TX 77022
06/17/2026
Submitted by L. Sue White, RN, NSGO

Administrator: Devon Crowe, LNFA
DON: Chelsea Oduro, RN
MDS: Monique Horton

FACILITY INFORMATION

Highland Park is a 120-bed facility with a current Overall Star Rating of 2 due to the facility receiving 2 IJs and a Quality Measures star rating of 5. The census given on the date of this report was 97.

The QIPP site visit was conducted over the phone. The Administrator was on the call and very helpful.

The Administrator believes the facility met 3 of the 4 QIPP measures for QTR 4, year nine with a PIP in place for pressure ulcers.

The facility continues with outings, and they continue with Bingo and regular holiday celebrations, including a Mother's Day brunch and a Memorial Day party. The Administrator reports the facility is planning a Men's Father's Day field trip and they are planning something for July 4th. The Administrator reports the facility does provide outings for the residents and this month they went to a museum butterfly exhibit and to the movies.

The Administrator reports the facility tries to do something for the staff every month and they have an Employee of the Month and they are currently celebrating CNA week and celebrated Nurses Week in May.

SURVEY INFORMATION

The state is in the facility today to investigate 2 complaints, and they are currently in their full book window.

REPORTABLE INCIDENTS

The facility has no pending self-reports.

EDUCATION PROVIDED

- QIPP year 9 - Qtr 4 started 06/01/2026 but the data collection started 04/01/2026 and will end 06/30/2026. The facility is currently meeting 3 of the 4 components with PIPs in place for pressure ulcers.
- Hurricane Preparedness - The National Oceanic and Atmospheric Administration forecasts a range of six to 10 hurricanes in the Atlantic Ocean this season. Of those, three to five are expected to be major hurricanes of Category 3 or higher. An average Atlantic hurricane season has three major hurricanes. 2026 Atlantic hurricane season begins on June 1. The Atlantic hurricane season, which affects the Texas Gulf Coast, continues through Nov. 30.

HHSC requires long-term care providers, such as nursing facilities, assisted living facilities, hospices and state-regulated group homes, to regularly prepare for natural disasters, including hurricanes and flooding. HHSC also requires childcare operations and acute health care facilities such as hospitals and dialysis centers to maintain an updated plan and ensure staff are fully trained to implement it during a crisis.

A provider's emergency plans for extreme weather should address:

- Power loss.
- Water and food needs.
- Communication to families and staff.
- Staff shortages and responsibilities.
- Continuation of care and treatment.
- Sheltering in place, evacuation and transportation, as applicable.
- Facilities with generators should perform any maintenance or needed testing to ensure the equipment functions during a power loss.

In the event of an emergency, HHSC Disaster Services provides public health and medical support, shelters for people with medical needs, counseling services, disaster food assistance, and water and ice. The program also provides regulatory support for health care facilities, long-term care facilities and childcare operations, and special waivers for Medicaid providers and clients as needed.

CLINICAL TRENDING

Incidents/Falls:
Information was not provided.

Infection Control:
Information was not provided.

Weight loss:
Information was not provided.

Pressure Ulcers:
Information was not provided.

Restraints:
Highland Park does not use restraints.

Staffing:
Staffing needs – need CNAs.

LTC GROUP

Highland Park Rehabilitation and Nursing Center
8861 Fulton St., Houston, TX 77022
06/17/2026
Submitted by L. Sue White, RN, NSGO

PHARMACY: No concerns, comes monthly, med destruction completed
NURSING/MDS: None
DIETARY/KITCHEN: No concerns, Dietician comes weekly
HOUSEKEEPING/LAUNDRY: No concerns
CENTRAL SUPPLY/MEDICAL RECORDS: No concerns
MAINTENANCE: No concerns
ACTIVITIES: No concerns

Golden Villa
1104 South William Street, Atlanta TX 75551
June 17, 2026

Submitted by: Sue White, RN, NSGO

Administrator: Michael Herring, LNFA
DON: Jerold Hindsman, RN

FACILITY INFORMATION

Golden Villa is a 110 Medicaid/Medicare & 10 Medicare-bed facility with a current overall star rating of 1 (due to full book survey results) and a Quality Measures star rating of 4. The census on the date of this call was 90 with a skill mix of 27.

The QIPP site visit was conducted over the phone with the Administrator, who was very helpful. The facility is a certified CNA facility but due to IJ they received they are not able to run a class. Their sister facility is still running classes. The Administrator reports the facility still has a full-time NP in-house.

The Administrator reports they had a Mother's Day celebration, and they are planning an antique car show for Father's Day and a big 4th of July party.

The Administrator reports the facility continues to celebrate employee of the month and each department's week throughout the year. If an employee goes above and beyond, they get handwritten notes and gift cards and meals are offered at a discounted rate. The facility also has a covered patio with a fan for staff to enjoy on their breaks, weather permitting. The facility celebrated nurse's week, and they are currently celebrating CNAs.

QIPP SCORECARD:

The Administrator reports they are meeting all 4 QIPP components for quarter four of year 9.

SURVEY INFORMATION

The Administrator reports the state came last week to clear out self-reports that were unsubstantiated, no citations.

REPORTABLE INCIDENTS

The Administrator reports the facility has 0 pending self-reports.

EDUCATION PROVIDED

- Reviewed QIPP year 9 – Qtr 4 started 06/01/2026 but the data collection started 04/01/2026 and will end 06/30/2026. The facility is currently meeting 4 of the 4 components with PIPs in place for MDROs.
- Hurricane Preparedness - The National Oceanic and Atmospheric Administration forecasts a range of six to 10 hurricanes in the Atlantic Ocean this season. Of those, three to five are expected to be major hurricanes of Category 3 or higher. An average Atlantic hurricane season has three major hurricanes. 2026 Atlantic hurricane season begins on June 1. The Atlantic hurricane season, which affects the Texas Gulf Coast, continues through Nov. 30.

HHSC requires long-term care providers, such as nursing facilities, assisted living facilities, hospices and state-regulated group homes, to regularly prepare for natural disasters, including hurricanes and flooding. HHSC also requires childcare operations and acute health care facilities such as hospitals and dialysis centers to maintain an updated plan and ensure staff are fully trained to implement it during a crisis.

A provider's emergency plans for extreme weather should address:

- Power loss.
- Water and food needs.
- Communication to families and staff.
- Staff shortages and responsibilities.
- Continuation of care and treatment.
- Sheltering in place, evacuation and transportation, as applicable.
- Facilities with generators should perform any maintenance or needed testing to ensure the equipment functions during a power loss.

In the event of an emergency, HHSC Disaster Services provides public health and medical support, shelters for people with medical needs, counseling services, disaster food assistance, and water and ice. The program also provides regulatory support for health care facilities, long-term care facilities and childcare operations, and special waivers for Medicaid providers and clients as needed.

PHARMACY: No concerns, comes monthly, med destruction completed
NURSING/MDS: None
DIETARY/KITCHEN: No concerns, Dietician comes monthly
HOUSEKEEPING/LAUNDRY: No concerns
CENTRAL SUPPLY/MEDICAL RECORDS: No concerns
MAINTENANCE: put new floors and paint on most of the resident rooms with new curtains and bedding
ACTIVITIES: No concerns

CLINICAL TRENDING

Incidents/Falls:
Facility information not provided

Infection Control:
Facility information not provided

Weight loss:
Facility information not provided

Golden Villa

1104 South William Street, Atlanta TX 75551

June 17, 2026

Submitted by: Sue White, RN, NSGO

Pressure Ulcers:

Facility information not provided

Restraints:

Facility information not provided

Staffing:

Facility currently has 3-4 CNA open positions

Garrison Nursing and Rehabilitation
333 N. FM 95, Garrison, TX 75946
June 17, 2026
Submitted by Sue White, RN, NSGO

Administrator: Julie Johnson, LNFA
DON: Amber Manning, RN

FACILITY INFORMATION

Garrison Nursing and Rehabilitation is a 93 bed SNF in a rural area. The census is at 79 residents with a skill mix of 18 and 1 in the hospital. The facility has an overall star rating of 5 and a star rating in Quality Measures of 5.

The QIPP site visit call was conducted over the phone with the Administrator.

The Administrator reports the facility had a Mother's Day steak lunch and will be doing the same for Father's Day and had a small service for Memorial Day. The facility is having a large cookout and announcement that they got best of NAHC party in July. The facility continues to provide outings to Walmart, and to Nacogdoches to the senior citizen center.

The Administrator reports the facility has an employee of the month celebration, random drawings for gifts and treats weekly and they try to feed the staff at least monthly (Pizza today). The Administrator reports the facility is currently celebrating CNA week and they also celebrated Nurse's week in May.

QIPP SCORECARD:

The Administrator reports the facility is meeting all 4 QIPP components in quarter 4 year 9.

SURVEY INFORMATION

The facility had state in the building in May to clear 2 self-reports that were unsubstantiated, no citations.

REPORTABLE INCIDENTS

Administrator reports the facility has 1 pending self-report.

EDUCATION PROVIDED

- Reviewed QIPP year 9 – Qtr 4 started 06/01/2026 but the data collection started 04/01/2026 and will end 06/30/2026. The facility is currently meeting 4 of the 4 components with PIPs in place for weight loss and antipsychotic medications.
- Hurricane Preparedness - The National Oceanic and Atmospheric Administration forecasts a range of six to 10 hurricanes in the Atlantic Ocean this season. Of those, three to five are expected to be major hurricanes of Category 3 or higher. An average Atlantic hurricane season has three major hurricanes. 2026 Atlantic hurricane season begins on June 1. The Atlantic hurricane season, which affects the Texas Gulf Coast, continues through Nov. 30.

  HHSC requires long-term care providers, such as nursing facilities, assisted living facilities, hospices and state-regulated group homes, to regularly prepare for natural disasters, including

hurricanes and flooding. HHSC also requires childcare operations and acute health care facilities such as hospitals and dialysis centers to maintain an updated plan and ensure staff are fully trained to implement it during a crisis.

A provider's emergency plans for extreme weather should address:

- Power loss -natural gas generator in place
- Water and food needs.
- Communication to families and staff.
- Staff shortages and responsibilities.
- Continuation of care and treatment.
- Sheltering in place, evacuation and transportation, as applicable – agreements in place for sister facilities if they need to evacuate
- Facilities with generators should perform any maintenance or needed testing to ensure the equipment functions during a power loss.

In the event of an emergency, HHSC Disaster Services provides public health and medical support, shelters for people with medical needs, counseling services, disaster food assistance, and water and ice. The program also provides regulatory support for health care facilities, long-term care facilities and childcare operations, and special waivers for Medicaid providers and clients as needed.

CLINICAL TRENDING

Incidents/Falls:
Information was not provided.

Infection Control:
Information was not provided.

Weight loss:
Information was not provided.

Pressure Ulcers:
Information was not provided.

Restraints:
Information was not provided.

Staffing:
Administrator reports the facility is currently fully staffed.

LTC GROUP

Garrison Nursing and Rehabilitation
333 N. FM 95, Garrison, TX 75946
June 17, 2026

Submitted by Sue White, RN, NSGO

PHARMACY: comes monthly and med destruction completed, no concerns
NURSING/MDS: None
DIETARY/KITCHEN: None, Dietician comes monthly
HOUSEKEEPING/LAUNDRY: None
CENTRAL SUPPLY/MEDICAL RECORDS: None
MAINTENANCE: None
ACTIVITIES: None

Deerbrook Nursing and Rehab
9250 Humble-Westfield Rd., Humble, TX 77338
06/30/26

Submitted by L. Sue White, RN, NSGO

Interim Administrator: Fahreen Dhanji, LNFA
DON: Dr. Ramona Cain DNP, MSN, MS Ed., RN

FACILITY INFORMATION

Deerbrook Nursing and Rehab is a licensed 124- bed facility with an overall star rating of 1 and a rating of 4 stars in Quality Measures. Current census is 88: 2 PP; 1 MCR; 71 MCD; 9 HMO; 4 Hospice.

The QIPP site visit was conducted over the phone. The DON was available and very helpful.

The Facility had a Mother's Day, Memorial Day, Juneteenth, Father's Day and Flag Day celebrations for the residents and they are planning a 4th of July party with ice cream, watermelon and entertainment. The facility did a well-attended resident outing to Cheddars last week.

The Administrator reports the facility continues with the MAD Genius program and continually check their competencies and conducts regular training. The facility continues with their tuition reimbursement program for medication aides. They partner with Lonestar College & local community college for CMA to LVN, LVN to RN and pay for books, materials, etc. The Administrator reports they continue to honor each department/position throughout the year. The facility also does appreciation lunches for staff when they can. The facility celebrated Nurse's Week, CNA Week and Nursing Home Week.

EDUCATION PROVIDED

- Reviewed QIPP year 9 – Qtr 4 started 06/01/2026 but the data collection started 04/01/2026 and will end 06/30/2026. The facility is currently meeting 2 of the 4 components with PIPs in place for staffing, weight loss and pressure ulcers.
- Hurricane Preparedness - The National Oceanic and Atmospheric Administration forecasts a range of six to 10 hurricanes in the Atlantic Ocean this season. Of those, three to five are expected to be major hurricanes of Category 3 or higher. An average Atlantic hurricane season has three major hurricanes. 2026 Atlantic hurricane season begins on June 1. The Atlantic hurricane season, which affects the Texas Gulf Coast, continues through Nov. 30.

  HHSC requires long-term care providers, such as nursing facilities, assisted living facilities, hospices and state-regulated group homes, to regularly prepare for natural disasters, including hurricanes and flooding. HHSC also requires childcare operations and acute health care facilities such as hospitals and dialysis centers to maintain an updated plan and ensure staff are fully trained to implement it during a crisis.

  A provider's emergency plans for extreme weather should address:

  - Power loss.
  - Water and food needs.
  - Communication to families and staff.

- Staff shortages and responsibilities.
- Continuation of care and treatment.
- Sheltering in place, evacuation and transportation, as applicable.
- Facilities with generators should perform any maintenance or needed testing to ensure the equipment functions during a power loss.

In the event of an emergency, HHSC Disaster Services provides public health and medical support, shelters for people with medical needs, counseling services, disaster food assistance, and water and ice. The program also provides regulatory support for health care facilities, long-term care facilities and childcare operations, and special waivers for Medicaid providers and clients as needed.

SURVEY INFORMATION

Annual Full Book State Survey Summary (Include only if within last 2 months)				
Deficiency Summary	**Facility**	**Texas Average**	**U.S. Average**	**Comments:**
Number of Health Deficiencies	5	0	0	2 IJ's (from reopened case 1 month before survey) 4 regular tags
Number of Fire Safety Code Deficiencies	3	0	0	

Annual Full Book State Survey Characteristics (include only if within last 2 months)			
Deficiency Area	**Scope & Severity**	**Explanation**	**Plan of Correction**
Abuse & Neglect	IJ	F 600, F686	Initiated/Completed
Quality of Care			
Resident Assessment	D	F677, F690	Initiated/Completed
Resident Rights			
Dietary			
Pharmacy	D	F755	Initiated/Completed
Environment			
Infection Control			
Administration			

The state came today to investigate 4 self-reports, and they will return to continue review.

REPORTABLE INCIDENTS

March/April/May 2026 the facility had 4 pending self-reports, but they are being reviewed with today's state visit.

CLINICAL TRENDING MARCH/APRIL/MAY 2026

Incidents/Falls:

LTC GROUP

Deerbrook Nursing and Rehab
9250 Humble-Westfield Rd., Humble, TX 77338
06/30/26

Submitted by L. Sue White, RN, NSGO

Deerbrook had 81 falls without injury (10 repeat) and 0 falls with injury. The facility also reported 0 Fractures, 10 Skin Tears, 0 Laceration, 0 Elopements, 1 Behavior and 0 Bruises. PIP in place for falls.

Infection Control:
Deerbrook reports 86 total infections 45 UTI's; 4 Respiratory infections, 0 EENT infections, 4 Wound infections, 1 Blood infection, 0 GI infections, 7 Genital infections and 25 Other infections.

Weight loss:
Deebrook reported Weight loss 8 residents with 5-10% and 2 residents with > 10% loss.

Pressure Ulcers:
Deerbrook had 35 residents with 56 pressure ulcer sites and 5 were acquired in house.

Restraints:
Deerbook is a restraint free facility.

Staffing: **Information not provided**

Current Open Positions						
Shift	**RN**	**LVN**	**Nurse Aide**	**Hskp.**	**Dietary**	**Activity**
6 to 2			1			
2 to 10			1			
10 to 6						
Other	1	1				
# Hired this month						
# Quit/Fired						

Total number employees:112 Turnover rate%:

Casper Report: Information not Provided

Indicator	Current %	State %	National %	Comments/PIPs
Percent of residents who used antianxiety or hypnotic medication (L)	8.1%	17.7%	19.7%	
Fall w/Major Injury (L)	0%	3.4%	3.4%	
UTI (L)	0%	0.8%	1.7%	
High risk with pressure ulcers (L)	3%	2.3%	2.6%	PIP in place
Loss of Bowel/Bladder Control(L)	7.7%	13.3%	20.1%	
Catheter(L)	0.0%	0.4%	1.0%	
Physical restraint(L)	0.0%	0%	0.1%	
Residents whose ability to walk independently worsened (L)	8.1%	15.1%	15.8%	
Excessive Weight Loss(L)	6.2%	3.2%	5.8%	PIP in place
Depressive symptoms(L)	0%	2.5%	13.9%	
Antipsychotic medication (L)	14.5%	9.7%	15.5%	PIP in place

Deerbrook Nursing and Rehab
9250 Humble-Westfield Rd., Humble, TX 77338
06/30/26
Submitted by L. Sue White, RN, NSGO

PHARMACY Consultant reports/visit/ med destruction? Comes monthly. No concerns

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# of GDR ATTEMPTS in the month: How many successful?
# of Anti-anxiety (attempts_4_ successful_4_ failed_0_)
# of Antidepressants (attempts_9_ successful__ failed_9__)
# of Antipsychotic (attempts10__ successful__ failed10__)
# of Sedatives (attempts0__ successful__ failed__)

DIETICIAN Recommendation concerns/Follow Up? Comes monthly. No concerns

SOCIAL SERVICES NUMBER/TYPE OF GRIEVANCES (RESOLVED OR NOT) – 37 -all resolved

TRAUMA INFORMED CARE IDENTIFIED: NA

ACTIVITIES PIP/CONCERNS: None

DIETARY PIP/CONCERNS: None

ENVIRONMENTAL SERVICES PIP/CONCERNS: None

MAINTENANCE PIP/CONCERNS: None

MEDICAL RECORDS/ CENTRAL SUPPLY PIPS/CONCERNS: None

MDS PIPS/CONCERNS: None

QIPP MEASURES - **MDS Measures:** Relative 5% improvement from the NF baseline, increasing by 5% each quarter (5% in Q1, 10% in Q2, 15% in Q3, 20% in Q4). **HPRD Staffing Measures:** Relative 1% improvement from the NF baseline, increasing by 1% each quarter (1% in Q1, 2% in Q2, 3% in Q3, 4% in Q4)

Component 1 **-Hospital Partner MDS Measures (NSGO-only).** Achievement in 1 metric earns 90% of eligible funds; achievement in 2 metrics earns 100%

Indicator	State Benchmark	Baseline Target	Results	Met (5% improvement) Y/N	Comments
Metric 1: (CMS N013.02) Percent of residents experiencing one or more falls with major injury	3.28%	3.09%	0%	Y	
Metric 2: (CMS N024.02) Percent of residents with a urinary tract infection	.84%	0%	0%	Y	
Metric 3: (CMS N029.03) Percent of residents who lose too much weight	4.11%	11.16%	6.15%	N/Y	
Metric 4: (CMS N031.04) Percent of residents who received an antipsychotic medication	8.02%	5.02%	4.29%	Y	

Metric 5: (CMS N035.04) Percent of residents whose ability to walk independently worsened	17.48%	12.39%	8.57%	Y	

Component 2 -Workforce Development HPRD Measures (All Facilities). Achievement in 1 metric earns 70% of eligible funds; achievement in 2 metrics earns 100%

Indicator Payroll Based Journal (PBJ) - Staffing Measure in Hours Per Resident Day (HPRD)	**National Benchmark Met Y/N**	**Baseline Target**	**Performance Target of 1% improvement**	**Results**	**Met Y/N**	**Comments**
Metric 1: Reported Certified Nursing Assistant (CNA) HPRD 60% weighted	**N**	**2.32%**	**2.12%**		**N**	PIP in place
Metric 2: Reported Licensed Nursing HPRD 85% weighted	**Y**	**1.26%**	**1.32%**		**Y**	
Metric 3: Reported Total Nursing Staff HPRD 100% weighted	**N**	**3.86%**	**3.43%**		**N**	PIP in place
In case of audit: Did NF maintain 4 additional hours (*non-managerial*) of RN staffing coverage per day, beyond the CMS mandate?						
• Additional hours provided by direct care staff?						
Did NF maintain 8 additional hours (*non-managerial*) of RN staffing coverage per day, beyond the CMS mandate?						
• 8 additional hours non-concurrenty scheduled?						
• Additional hours provided by direct care staff?						
• Telehealth used?				yes		
NFs provided in total 12 or 16 hours of RN coverage, respectively, on at least 90 percent of the days within the reporting period?						
• Agency usage or need d/t critical staffing levels				0		

QIPP Component 3 – Texas Priority MDS Measures (All Facilities). Equally weighted measures, each worth 33.33% of available component funds

Indicator	**National Benchmark**	**Baseline Target**	**Results**	**Met (5% Improvement) Y/N**	**Comments**

Metric 1: (CMS N030.03) Percent of residents who have depressive symptoms	5.21	2.57%	0%	Y	
Metric 2: (CMS N036.03) Percent of residents who used antianxiety or hypnotic medication	18.74%	13.40%	5.9%	Y	
Metric 3: (CMS N046.01) Percent of residents with new or worsened bowel or bladder incontinence	8.77%	5.42%	8.12%	Y/N	

QIPP Component 4 – **Resident Focus MDS Measures (NSGO-only).** Equally weighted measures, each worth 50% of available component funds

Indicator	State Benchmark	Baseline Target	Results	Met (5% Improvement) Y/N	Comments
Metric 1: (CMS N045.01) Percent of residents with pressure ulcers	4.89%	8.35%	14.12%	N	PIP in place
Metric 2: (CMS N026.03) Percent of residents who have/had a catheter 4.89inserted and left in their bladder	.89%	0%	0%	Y	

Exhibit “G-1”

HMG Change of Control and Related Lease-Transition Documents

RESOLUTION BY THE WINNIE STOWELL HOSPITAL DISTRICT CONSENTING TO CHANGE OF CONTROL HMG HEALTHCARE, LLC AFFILIATES

Winnie Stowell Hospital District ("District"), being the Operator of the skilled nursing facilities and the affiliates of HMG Healthcare, LLC ("HMG") (collectively, the "Managers"), pursuant to its Management Agreements with the Managers all more specifically identified on Schedule A and the laws of the State of Texas do hereby take the following actions by written consent without a meeting:

WHEREAS, individual owners of affiliates of HMG intend to sell substantially all of their membership interests to CCG TX Holdings, LLC ("CCG") pursuant to a membership interest purchase agreement ("MIPA"). On the effective of the MIPA, each manager entity will become a subsidiary of CCG, resulting in a change of control for purposes of the Management Agreement ("Change of Control"); and

WHEREAS, in conjunction with the MIPA transaction, CCG will be acquiring the real estate for a portion of the facilities identified on Schedule A, which will result in the termination of the existing sub-subleases and require WSHD to enter into new sub-subleases ("Existing Leases Transition"); and

WHEREAS, during the July 22, 2026 Regular Meeting, the District's Board convened in a duly noticed meetings pursuant to the Chapter 551 of the Texas Government Code and considered the request by Managers to Consent to the Change of Control to CCG pursuant to the MIPA, termination of a portion of the Sub-subleases, and execution of new Sub-subleases under the Existing Leases Transition.; and

WHEREAS, in connection with the Change of Contral and Existing Leases Transition, District will be required to execute certain documents; and

WHEREAS, after due deliberation, these requests were considered in the best interests of the District and are hereby approved.

NOW THEREFORE, BE IT RESOLVED, that the form, terms and provisions of, and transactions contemplated by the Change of Contral and Existing Leases Transition documents (the "Documents") and any and all other instruments, agreements and documents required to be delivered under or pursuant to the Change of Contral and Existing Leases Transition to which the District is a party including, substantially in the form reviewed by the Authorized Officer (as defined below) signing such Documents on behalf of the District, with such changes therein and additions thereto (substantial or otherwise) as may be approved or deemed necessary, appropriate or advisable by the Authorized Officer executing the same on behalf of the District, in such form and upon such terms and conditions as such Authorized Officer may deem necessary, appropriate or advisable, shall be, and they hereby are, approved and adopted in all respects; and

FURTHER RESOLVED, that the Authorized Officer shall be, authorized to execute and deliver in the name and on behalf of the District, each of the Documents in such form and upon such terms and conditions, and with any changes and additions, as the Authorized Officer may

deem necessary, appropriate or advisable, the execution thereof the Authorized Officer to be conclusive evidence of the approval by him of such changes and additions; and

FURTHER RESOLVED, that the Authorized Officer shall be authorized and empowered in the name and on behalf of the District, to execute and deliver to the Lender any and all amendments, supplements, extensions, renewals, restatements and modifications to any or all of the loan documents, relating to accounts receivable loans; loans made in anticipation of financing insured or approved by the United States Department of Housing and Urban Development ("HUD"); HUD-insured loans, HUD-approved loans, and any amendments, supplements, extensions, renewals, restatements, or modifications thereof from time to time, all as may be approved by such Authorized Officer, the authorization and approval of the District to be conclusively evidenced by the execution of the Authorized Officer thereto, and to do and perform, or cause to be done and performed, all acts, deeds, and things, in the name and on behalf of the District, or otherwise as any such Authorized Officer may deem necessary or appropriate for the foregoing purposes, if and as applicable; and

FURTHER RESOLVED, for purposes of this Consent, the term "Authorized Officer" shall mean Mr. Edward Murrell, as President of the Winnie Stowell Hospital District's Board of Directors, or if President Murrell is inaccessible, Mr. Anthony Stramecki, Vice President of the Winnie Stowell Hospital District's Board of Directors ("Authorized Person").

FURTHER RESOLVED, that all actions of any kind heretofore taken by any officer of the District in connection with the transactions and matters contemplated by the foregoing resolutions are hereby adopted, confirmed, ratified and approved in all respects as the acts and deeds of the District; and

FURTHER RESOLVED, that this Consent may be sent or delivered by facsimile or other electronic transmission and in any number of counterparts, each of which shall be an original, and such counterparts, when taken together, shall constitute one and the same instrument, and shall be legally effective for all purposes.

PASSED AND APPROVED this ___ day of July, 2026.

WINNIE STOWELL HOSPITAL DISTRICT

_____
Edward Murrell, President

ATTEST:

_____,
Secretary, Jeff Rollo

QIPP Year	Current Manager	Incoming Manager	Nursing Facility	Incoming Manager Contact	Incoming Manager Contact Information
1	HMG	Cascade Capital Group, LLC	Park Manor of CyFair	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
2	HMG	Cascade Capital Group, LLC	Park Manor of Cypress Station	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
3	HMG	Cascade Capital Group, LLC	Park Manor of Humble	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
4	HMG	Cascade Capital Group, LLC	Park Manor of Quail Valley	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
5	HMG	Cascade Capital Group, LLC	Park Manor of Westchase	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
6	HMG	Cascade Capital Group, LLC	Deerbrook Skilled Nursing and Rehab Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
7	HMG	Cascade Capital Group, LLC	Friendship Haven Healthcare and Nursing Rehabilitation Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
8	HMG	Cascade Capital Group, LLC	Park Manor of Southbelt	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
9	HMG	Cascade Capital Group, LLC	Park Manor of The Woodlands	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
10	HMG	Cascade Capital Group, LLC	Park Manor of Tomball	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
11	HMG	Cascade Capital Group, LLC	Willowbrook Nursing Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
12	HMG	Cascade Capital Group, LLC	ACCEL at College Station	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
13	HMG	Cascade Capital Group, LLC	Cimarron Place Health & Rehabilitation	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com

14	HMG	Cascade Capital Group, LLC	Silver Springs Health & Rehabilitation Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
15	HMG	Cascade Capital Group, LLC	Crowley Nursing and Rehabilitation	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
16	HMG	Cascade Capital Group, LLC	Green Oaks Nursing and Rehabilitation	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
17	HMG	Cascade Capital Group, LLC	Harbor Lakes Nursing and Rehabilitation Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
18	HMG	Cascade Capital Group, LLC	Hewitt Nursing and Rehabilitation	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
19	HMG	Cascade Capital Group, LLC	Holland Lake Rehabilitation and Wellness Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel	mkaplan@cascadellc.com
20	HMG	Cascade Capital Group, LLC	Mission Nursing and Rehabilitation	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
21	HMG	Cascade Capital Group, LLC	Pecan Bayou Nursing and Rehabilitation	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
22	HMG	Cascade Capital Group, LLC	Red Oak Health and Rehabilitation Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
23	HMG	Cascade Capital Group, LLC	Stallings Court Nursing and Rehabilitaiton	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel	mkaplan@cascadellc.com
24	HMG	Cascade Capital Group, LLC	Stephenville Rehabilitation and Wellness Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel	mkaplan@cascadellc.com
25	HMG	Cascade Capital Group, LLC	Stonegate Nursing and Rehabilitation	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
26	HMG	Cascade Capital Group, LLC	Arbrook Plaza	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel	mkaplan@cascadellc.com
27	HMG	Cascade Capital Group, LLC	Forum Parkway Health & Rehabilitation	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
28	HMG	Cascade Capital Group, LLC	Gulf Pointe Plaza	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
29	HMG	Cascade Capital Group, LLC	Treviso Transitional Care	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com

30	HSM	Cascade Capital Group, LLC	Beaumont Health Care Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
31	HSM	Cascade Capital Group, LLC	Cleveland Health Care Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
32	HSM	Cascade Capital Group, LLC	Conroe Health Care Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
33	HSM	Cascade Capital Group, LLC	Huntsville Healthcare Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
34	HSM	Cascade Capital Group, LLC	Lawrence Street Healthcare Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
35	HSM	Cascade Capital Group, LLC	Liberty Health Care Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
36	HSM	Cascade Capital Group, LLC	Richmond Health Care Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel	mkaplan@cascadellc.com
37	HSM	Cascade Capital Group, LLC	Sugar Land Healthcare Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com
38	HSM	Cascade Capital Group, LLC	West Janisch Health Care Center	Cascade Capital Group, LLC Attention: Mordy Kaplan, EVP & General Counsel 3450 Oakton St. Skokie, IL 60076	mkaplan@cascadellc.com

Exhibit “G-2”

Oak Grove Sale/Transition and Related Financing Documents

CONSENT AND ASSIGNMENT OF MANAGEMENT AGREEMENT

THIS CONSENT AND ASSIGNMENT OF MANAGEMENT AGREEMENT (this "***Assignment***") is entered into as of the 1st day of August, 2026 by and among RS GOLDEN TRIANGLE, LLC, a Texas limited liability company ("***Assignor***"), WELLSENTIAL OF OAK GROVE, LLC, a Delaware limited liability company ("***Assignee***"), and WINNIE-STOWELL HOSPITAL DISTRICT, a governmental entity and body politic established pursuant to the laws of the state of Texas ("***Governmental Entity"***), to be effective upon the closing anticipated under the Transfer Agreement (defined below) (the "***Effective Date***").

Background/Recitals:

WHEREAS, OG Realty, LLC, a Texas limited liability company ("***Seller***"), is the owner of the licensed health facility known as Oak Grove Nursing Home, located at 6230 Warren Street, Groves, Texas 77619 (the "***Facility***"); and

WHEREAS, Seller leased the Facility to Assignor under that certain Lease Agreement dated as of December 30, 2024 (the "***Lease***"); and

WHEREAS, Assignor subleased the Facility to Governmental Entity under that certain Sublease Agreement dated as of December 30, 2024 (the "***Sublease***"); and

WHEREAS, Governmental Entity and Assignor are parties to that certain Management Agreement dated December 30, 2024 (as amended, the "***Management Agreement***"), under which Assignor is engaged in the management of the Facility for the Governmental Entity; and

WHEREAS, in connection with the Management Agreement, Assignor and Governmental Entity are parties to a Business Associate Agreement dated as of December 30, 2024 (the "***Business Associate Agreement***"); and

WHEREAS, 6230 Warren Street, LLC, a Delaware limited liability company (the "***New Owner***"), is under contract to purchase the Facility from Seller pursuant to that certain Amended and Restated Purchase and Sale Agreement dated June 1, 2026. In connection with such purchase and simultaneously with the closing thereof, (i) the Lease and Sublease will be terminated, (ii) Assignee will enter into a new lease of the Facility with New Owner, and (iii) Assignee will enter into a new sublease of the Facility with Governmental Entity; and

WHEREAS, under the terms of the Management Agreement, Assignor may not assign its interest in the Management Agreement without the prior written consent of Governmental Entity;

WHEREAS, (i) Assignor has agreed to assign to Assignee all right, title and interest of Assignor in the Management Agreement and Business Associate Agreement, (collectively, the "***Assigned Agreements***"); (ii) Assignee has agreed to assume the obligations, liabilities and duties of Manager under the Assigned Agreements arising on and after the Effective Date; (iii) Assignor has further agreed to transition the management of the Facility to Assignee in accordance with the terms of a Management Transfer Agreement dated June 1, 2026 (the "***Transfer Agreement***"); and (iv) Governmental Entity has agreed to consent to such assignment and assumptions by Assignor and Assignee, subject to the terms provided in this Assignment; and

WHEREAS, the Board of Directors of the Winnie-Stowell Hospital District reviewed the request for consent to the assignment of the Management Agreement at its July 22, 2026 Regular Meeting and approved the District's consent to the assignment, subject to the terms and conditions set forth in the Consent and Assignment of Management Agreement.

Agreement:

NOW, THEREFORE, in consideration of the mutual covenants and agreements contained herein, and other good and valuable consideration, the receipt, adequacy and sufficiency of which are hereby acknowledged, the undersigned covenant, consent and agree as follows:

Section 1.1 Incorporation of Recitals. The foregoing Recitals are hereby incorporated into and made a part of this Assignment by this reference.

Section 1.2 Certain Definitions. Except as otherwise defined in this Assignment, each capitalized term shall have the meaning ascribed to such term in the Management Agreement.

Section 1.3 Assignment Effective as of Effective Date/Termination. Effective as of the Effective Date, the parties agree as set forth herein.

Section 1.4 Assignment. Assignor has granted, bargained, sold, transferred, assigned and set over to Assignee, and by these presents does hereby grant, bargain, sell, transfer, assign and set over unto Assignee, to the extent they relate to the period beginning on the Effective Date: (i) all of Assignor's rights, title and interest in and to the Assigned Agreements and all rights inuring to the benefit of Assignor under the Assigned Agreements with Assignee to have all rights of Assignor under the Assigned Agreements.

Section 1.5 Assumption. In consideration of the assignment of the Assigned Agreements by Assignor to Assignee, Assignee hereby expressly assumes and agrees to fulfill and carry out and discharge all of Assignor's liabilities, duties and obligations under the Assigned Agreements, but only to the extent such liabilities, duties, and obligations relate to the period beginning on and following the Effective Date and provided that Assignee will not be responsible for any Losses and/or Claims (as each such term is defined in the Management Agreement), duties or obligations of Assignor arising from or in any way relating to Assignor's management of the Facility prior to the Effective Date. Assignee agrees to comply with the terms of the Management Agreement with respect to the duties of the "*Manager*" thereunder relating to the period following the Effective Date, it being the intention of Assignee that it shall be the exclusive holder of the Management Agreement.

Section 1.6 Agreements in Full Force and Effect. All provisions of the Management Agreement shall remain in full force and effect and unmodified, except as modified or amended by this Assignment.

Section 1.7 Continuing Obligations of Assignor. This Assignment shall not release or discharge Assignor whatsoever from its obligations under the Assigned Agreements related to the period prior to the Effective Date.

Section 1.8 Representations of Assignor. Assignor hereby represents, warrants and certifies to Assignee the following:

(i) That each of the Assigned Agreements is in full force and effect;

(ii) Exhibit A attached hereto is a complete and accurate copy of the Management Agreement, including all exhibits and amendments thereto, and there have been no further amendments thereto;

(iii) Exhibit B attached hereto is a complete and accurate copy of the Business Associate Agreement, including all amendments thereto, and there have been no further amendments thereto; and

(iv) Neither Assignor nor Governmental Entity is in default under the Assigned Agreements.

Section 1.9 Consent of Governmental Entity. For all purposes as may be required under the Management Agreement, Governmental Entity hereby consents to the assignment of the Assigned Agreements under the terms of this Assignment.

Section 1.10 Accounting, Reconciliation and Payment. The respective obligations of Assignor and Governmental Entity to complete accounting, reconciliation and payment obligations as provided in the Management Agreement shall survive assignment of the Management Agreement. For the avoidance of doubt, all fees whether variable, fixed, or supplemental that have accrued to Assignor under the terms of the Management Agreement shall be the property of Assignor, even if such fees are not collected or received prior to the Effective Date. Subject to the foregoing, and without waiving the same, all fees whether variable, fixed, or supplemental that are due, or accrue under the terms of the Management Agreement on and after the Effective Date shall be the property of Assignee. The allocation of fees between Assignor and Assignee under this Section is solely for purposes of allocating economic rights between Assignor and Assignee and shall not amend or modify the accounting, reconciliation, payment, or other obligations of Governmental Entity under the Management Agreement. Notwithstanding the foregoing and for the avoidance of doubt, Assignor, Assignee, and Governmental Entity acknowledge and agree that pursuant to the Quality Incentive Payment Program and/or similar programs in Texas, there may be certain true-ups and/or supplemental payments for prior and current fiscal years, with Assignor entitled to or responsible for the portions related to the period prior to the Effective Date, whenever paid and consistent with the historical practice of the parties, and Assignee entitled to or responsible for the portions related to the period from and after the Effective Date, including but not limited to incentives, supplemental payments, and bonuses, that relate to Year 5, Year 6, Year 7, and/or Year 8 that shall be the property of Assignor, and fees whether variable, fixed, or supplemental, including but not limited to incentives, supplemental payments, and bonuses, that relate to the full program year for Year 9 or Q4 of Year 9 shall be prorated between Assignor and Assignee.

Section 1.11 Reimbursement of Fees & Costs. Assignor and Assignee shall be responsible for its own fees and costs in connection with the review and execution of this Assignment and any sublease, including without limitation, each party's reasonable attorneys' fees. Assignor will reimburse Governmental Entity, within fifteen (15) days of the Governmental Entity's written demand thereof, for all reasonable third-party costs incurred by Governmental Entity in connection with the review and execution of this Assignment and any sublease, including without limitation, Governmental Entity's reasonable attorneys' fees.

Section 1.12 Binding Effect; Assignment. This Assignment shall be binding upon and inure to the benefit of Assignor and Assignee and their respective permitted successors and assigns.

Section 1.13 Counterparts. This Assignment may be executed in two (2) or more counterpart copies, all of which counterparts shall have the same force and effect as if the parties hereto had executed a single copy of this Assignment.

Section 1.14 Further Assurance Actions. Each party agrees that it will take all necessary actions reasonably requested by the other party to effectuate the purposes of this Assignment.

Section 1.15 Governing Law. This Assignment shall be governed by and construed in accordance with the substantive laws of the State of Texas, without reference to its conflicts-of-laws principles.

Section 1.16 Headings. The section headings of this Assignment are for reference purposes only and are to be given no effect in the construction or interpretation of this Assignment.

Section 1.17 Severability. Any provision of this Assignment that is prohibited or unenforceable in any jurisdiction shall, as to such jurisdiction, be ineffective to the extent of such prohibition or unenforceability without invalidating the remaining provisions of this Assignment or such provision, and any such prohibition or unenforceability in any jurisdiction shall not invalidate or render unenforceable such provision in any other jurisdiction.

Section 1.18 Authority. Assignor and Assignee each represent and warrant to the other party: (a) the execution, delivery and performance of this Assignment have been duly approved by such party and no further action is required on the part of such party to execute, deliver and perform this Assignment; (b) the person(s) executing this Assignment on behalf of such party have all requisite authority to execute and deliver this Assignment; and (c) this Assignment, as executed and delivered by such person(s), is valid, legal and binding on such party, and is enforceable against such party in accordance with its terms, subject to bankruptcy, insolvency, reorganization, moratorium and similar laws affecting the rights of creditors generally and by general principles of equity (regardless of whether such enforceability is considered in a proceeding in equity or at law).

Section 1.19 Amendments. This Assignment may not be amended orally, but only by an agreement in writing signed by the party against whom enforcement of any amendment is sought.

Section 1.20 Venue. Each party agrees that if any action is necessary to interpret, construe or enforce this Assignment, including any action for injunctive relief, the action must be filed in the District Courts of Jefferson County, Texas. Each party waives any objection to venue in Jefferson County.

Section 1.21 Representations and Warranties by Assignee. Assignee additionally represents and warrants and Assignee certifies as follows:

(i) Assignee is a sophisticated operator of skilled nursing facilities in the State of Texas with experience comparable to that of Assignor;

(ii) Assignee, or an affiliate of Assignee, has not received notice of any revocation, suspension or intent to revoke or suspend any license, permit, certification, registration, accreditation, provider agreement, certificate of need, certificate of exemption, approval, waiver, variance or other authorization issued by a governmental authority necessary or advisable for the use of any senior-housing or skilled-nursing facility owned, operated or managed by it;

(iii) no skilled-nursing facility owned, operated or managed by Assignee, or an affiliate of Assignee, appears on the Special Focus Facility List and has been on such list for one hundred eighty (180) days;

(iv) within the five (5) year period prior to the proposed transfer date, no senior-housing or skilled-nursing facility owned, operated or managed by Assignee, or an affiliate of the Assignee, has had imposed on it any restriction from admitting residents or patients or from receiving reimbursement under any third-party or governmental payor program which restriction has remained in place for more than thirty (30) days;

(v) Assignee, nor any affiliate of or any senior-level management or owner of Assignee, has been convicted of or plead no contest or nolo contendere with respect to any felony or any misdemeanor that involves any act of fraud, embezzlement, theft or misappropriation;

(vi) that neither Assignee nor any affiliate of it (i) has had a receiver, trustee or liquidator appointed for it or any of its property, (ii) filed a voluntary petition under any federal bankruptcy or state legal requirements to be adjudicated as bankrupt or for any arrangement or other debtor's relief, or (iii) has had filed against it by a third-party an involuntary petition under any federal bankruptcy or state legal requirements to be adjudicated as bankrupt or for any arrangement or other debtor's relief;

(vii) the consummation of the transfer has, to the extent applicable, been approved by all necessary governmental authorities, including, without limitation, with respect to the continued operation of the Facility; and

(viii) following the consummation of the transfer, Assignee shall lawfully hold all authorizations required by law and the efficacy and enforceability of such authorizations shall in no way be jeopardized on account of the consummation of the transfer.

IN WITNESS WHEREOF, the parties have executed this Assignment with the intent to be bound as of the Effective Date.

ASSIGNOR:

RS GOLDEN TRIANGLE, LLC,
a Texas limited liability company

By: _____
Name: Daniel Duplechin
Title: Administrator

ASSIGNEE:

WELLSENTIAL OF OAK GROVE, LLC,
a Delaware limited liability company

By: _____
Name: Barbara Clapp
Title: Authorized Signatory

GOVERNMENTAL ENTITY:

WINNIE-STOWELL HOSPITAL DISTRICT,
a Texas hospital district

By: _____
Name: Edward Murrell
Title: President, Board of Directors

IN WITNESS WHEREOF, the parties have executed this Assignment with the intent to be bound as of the Effective Date.

ASSIGNOR:

RS GOLDEN TRIANGLE, LLC,
a Texas limited liability company

By: _____
Name: Daniel Duplechin
Title: Administrator

ASSIGNEE:

WELLSENTIAL OF OAK GROVE, LLC,
a Delaware limited liability company

By: Barbara Clapp
Name: Barbara Clapp
Title: Authorized Signatory

GOVERNMENTAL ENTITY:

WINNIE-STOWELL HOSPITAL DISTRICT,
a Texas hospital district

By: _____
Name: Edward Murrell
Title: President, Board of Directors

IN WITNESS WHEREOF, the parties have executed this Assignment with the intent to be bound as of the Effective Date.

ASSIGNOR:

RS GOLDEN TRIANGLE, LLC,
a Texas limited liability company

By: _____
Name: Daniel Duplechin
Title: Administrator

ASSIGNEE:

WELLSENTIAL OF OAK GROVE, LLC,
a Delaware limited liability company

By: _____
Name: Barbara Clapp
Title: Authorized Signatory

GOVERNMENTAL ENTITY:

WINNIE-STOWELL HOSPITAL DISTRICT,
a Texas hospital district

By: Edward Murrell
Name: Edward Murrell
Title: Board President

Exhibit “G-3”

Bayou Pines/Merchants Bank Financing Documents

CONSENT AND ASSIGNMENT OF MANAGEMENT AGREEMENT

THIS CONSENT AND ASSIGNMENT OF MANAGEMENT AGREEMENT (this "***Assignment***") is entered into as of the __ day of _____, 2026 by and among RS GOLDEN TRIANGLE, LLC, a Texas limited liability company ("***Assignor***"), WELLSENTIAL OF OAK GROVE, LLC, a Delaware limited liability company ("***Assignee***"), and WINNIE-STOWELL HOSPITAL DISTRICT, a governmental entity and body politic established pursuant to the laws of the state of Texas ("***Governmental Entity"***), to be effective upon the closing anticipated under the Transfer Agreement (defined below) (the "***Effective Date***").

Background/Recitals:

WHEREAS, OG Realty, LLC, a Texas limited liability company ("***Seller***"), is the owner of the licensed health facility known as Oak Grove Nursing Home, located at 6230 Warren Street, Groves, Texas 77619 (the "***Facility***"); and

WHEREAS, Seller leased the Facility to Assignor under that certain Lease Agreement dated as of December 30, 2024 (the "***Lease***"); and

WHEREAS, Assignor subleased the Facility to Governmental Entity under that certain Sublease Agreement dated as of December 30, 2024 (the "***Sublease***"); and

WHEREAS, Governmental Entity and Assignor are parties to that certain Management Agreement dated December 30, 2024 (as amended, the "***Management Agreement***"), under which Assignor is engaged in the management of the Facility for the Governmental Entity; and

WHEREAS, in connection with the Management Agreement, Assignor and Governmental Entity are parties to a Business Associate Agreement dated as of December 30, 2024 (the "***Business Associate Agreement***"); and

WHEREAS, 6230 Warren Street, LLC, a Delaware limited liability company (the "***New Owner***"), is under contract to purchase the Facility from Seller pursuant to that certain Amended and Restated Purchase and Sale Agreement dated June 1, 2026. In connection with such purchase and simultaneously with the closing thereof, (i) the Lease and Sublease will be terminated, (ii) Assignee will enter into a new lease of the Facility with New Owner, and (iii) Assignee will enter into a new sublease of the Facility with Governmental Entity; and

WHEREAS, under the terms of the Management Agreement, Assignor may not assign its interest in the Management Agreement without the prior written consent of Governmental Entity; and

WHEREAS, (i) Assignor has agreed to assign to Assignee all right, title and interest of Assignor in the Management Agreement and Business Associate Agreement, (collectively, the "***Assigned Agreements***"); (ii) Assignee has agreed to assume the obligations, liabilities and duties of Manager under the Assigned Agreements arising on and after the Effective Date; (iii) Assignor has further agreed to transition the management of the Facility to Assignee in accordance with the terms of a Management Transfer Agreement dated June 1, 2026 (the "***Transfer Agreement***"); and (iv) Governmental Entity has agreed to consent to such assignment and assumptions by Assignor and Assignee, subject to the terms provided in this Assignment.

Agreement:

NOW, THEREFORE, in consideration of the mutual covenants and agreements contained herein, and other good and valuable consideration, the receipt, adequacy and sufficiency of which are hereby acknowledged, the undersigned covenant, consent and agree as follows:

Section 1.1 Incorporation of Recitals. The foregoing Recitals are hereby incorporated into and made a part of this Assignment by this reference.

Section 1.2 Certain Definitions. Except as otherwise defined in this Assignment, each capitalized term shall have the meaning ascribed to such term in the Management Agreement.

Section 1.3 Assignment Effective as of Effective Date/Termination. Effective as of the Effective Date, the parties agree as set forth herein.

Section 1.4 Assignment. Assignor has granted, bargained, sold, transferred, assigned and set over to Assignee, and by these presents does hereby grant, bargain, sell, transfer, assign and set over unto Assignee, to the extent they relate to the period beginning on the Effective Date: (i) all of Assignor's rights, title and interest in and to the Assigned Agreements and all rights inuring to the benefit of Assignor under the Assigned Agreements with Assignee to have all rights of Assignor under the Assigned Agreements.

Section 1.5 Assumption. In consideration of the assignment of the Assigned Agreements by Assignor to Assignee, Assignee hereby expressly assumes and agrees to fulfill and carry out and discharge all of Assignor's liabilities, duties and obligations under the Assigned Agreements, but only to the extent such liabilities, duties, and obligations relate to the period beginning on and following the Effective Date and provided that Assignee will not be responsible for any Losses and/or Claims (as each such term is defined in the Management Agreement), duties or obligations of Assignor arising from or in any way relating to Assignor's management of the Facility prior to the Effective Date. Assignee agrees to comply with the terms of the Management Agreement with respect to the duties of the "*Manager*" thereunder relating to the period following the Effective Date, it being the intention of Assignee that it shall be the exclusive holder of the Management Agreement.

Section 1.6 Agreements in Full Force and Effect. All provisions of the Management Agreement shall remain in full force and effect and unmodified, except as modified or amended by this Assignment.

Section 1.7 Continuing Obligations of Assignor. This Assignment shall not release or discharge Assignor whatsoever from its obligations under the Assigned Agreements related to the period prior to the Effective Date.

Section 1.8 Representations of Assignor. Assignor hereby represents, warrants and certifies to Assignee the following:

(i) That each of the Assigned Agreements is in full force and effect;

(ii) Exhibit A attached hereto is a complete and accurate copy of the Management Agreement, including all exhibits and amendments thereto, and there have been no further amendments thereto;

(iii) Exhibit B attached hereto is a complete and accurate copy of the Business Associate Agreement, including all amendments thereto, and there have been no further amendments thereto; and

(iv) Neither Assignor nor Governmental Entity is in default under the Assigned Agreements.

Section 1.9 Consent of Governmental Entity. For all purposes as may be required under the Management Agreement, Governmental Entity hereby consents to the assignment of the Assigned Agreements under the terms of this Assignment.

Section 1.10 Accounting, Reconciliation and Payment. The respective obligations of Assignor and Governmental Entity to complete accounting, reconciliation and payment obligations as provided in the Management Agreement shall survive assignment of the Management Agreement. For the avoidance of doubt, all fees whether variable, fixed, or supplemental that have accrued to Assignor under the terms of the Management Agreement shall be the property of Assignor, even if such fees are not collected or received prior to the Effective Date. Subject to the foregoing, and without waiving the same, all fees whether variable, fixed, or supplemental that are due, or accrue under the terms of the Management Agreement on and after the Effective Date shall be the property of Assignee. Notwithstanding the foregoing and for the avoidance of doubt, Assignor, Assignee, and Governmental Entity acknowledge and agree that pursuant to the Quality Incentive Payment Program and/or similar programs in Texas, there may be certain true-ups and/or supplemental payments for prior and current fiscal years, with Assignor entitled to or responsible for the portions related to the period prior to the Effective Date, whenever paid and consistent with the historical practice of the parties, and Assignee entitled to or responsible for the portions related to the period from and after the Effective Date, including but not limited to incentives, supplemental payments, and bonuses, that relate to Year 5, Year 6, Year 7, and/or Q1 Year 8 that shall be the property of Assignor, and fees whether variable, fixed, or supplemental, including but not limited to incentives, supplemental payments, and bonuses, that relate to the full program year for Year 8 or Q2 of Year 8 shall be prorated between Assignor and Assignee.

Section 1.11 Reimbursement of Fees & Costs. Assignor and Assignee shall be responsible for its own fees and costs in connection with the review and execution of this Assignment and any sublease, including without limitation, each party's reasonable attorneys' fees. Assignor will reimburse Governmental Entity, within fifteen (15) days of the Governmental Entity's written demand thereof, for all reasonable third-party costs incurred by Governmental Entity in connection with the review and execution of this Assignment and any sublease, including without limitation, Governmental Entity's reasonable attorneys' fees.

Section 1.12 Binding Effect; Assignment. This Assignment shall be binding upon and inure to the benefit of Assignor and Assignee and their respective permitted successors and assigns.

Section 1.13 Counterparts. This Assignment may be executed in two (2) or more counterpart copies, all of which counterparts shall have the same force and effect as if the parties hereto had executed a single copy of this Assignment.

Section 1.14 Further Assurance Actions. Each party agrees that it will take all necessary actions reasonably requested by the other party to effectuate the purposes of this Assignment.

Section 1.15 Governing Law. This Assignment shall be governed by and construed in accordance with the substantive laws of the State of Texas, without reference to its conflicts-of-laws principles.

Section 1.16 Headings. The section headings of this Assignment are for reference purposes only and are to be given no effect in the construction or interpretation of this Assignment.

Section 1.17 Severability. Any provision of this Assignment that is prohibited or unenforceable in any jurisdiction shall, as to such jurisdiction, be ineffective to the extent of such prohibition or unenforceability without invalidating the remaining provisions of this Assignment or such provision, and any such prohibition or unenforceability in any jurisdiction shall not invalidate or render unenforceable such provision in any other jurisdiction.

Section 1.18 Authority. Assignor and Assignee each represent and warrant to the other party: (a) the execution, delivery and performance of this Assignment have been duly approved by such party and no further action is required on the part of such party to execute, deliver and perform this Assignment; (b) the person(s) executing this Assignment on behalf of such party have all requisite authority to execute and deliver this Assignment; and (c) this Assignment, as executed and delivered by such person(s), is valid, legal and binding on such party, and is enforceable against such party in accordance with its terms, subject to bankruptcy, insolvency, reorganization, moratorium and similar laws affecting the rights of creditors generally and by general principles of equity (regardless of whether such enforceability is considered in a proceeding in equity or at law).

Section 1.19 Amendments. This Assignment may not be amended orally, but only by an agreement in writing signed by the party against whom enforcement of any amendment is sought.

Section 1.20 Venue. Each party agrees that if any action is necessary to interpret, construe or enforce this Assignment, including any action for injunctive relief, the action must be filed in the District Courts of Jefferson County, Texas. Each party waives any objection to venue in Jefferson County.

Section 1.21 Representations and Warranties by Assignee. Assignee additionally represents and warrants and Assignee certifies as follows:

(i) Assignee is a sophisticated operator of skilled nursing facilities in the State of Texas with experience comparable to that of Assignor;

(ii) Assignee, or an affiliate of Assignee, has not received notice of any revocation, suspension or intent to revoke or suspend any license, permit, certification, registration, accreditation, provider agreement, certificate of need, certificate of exemption, approval, waiver, variance or other authorization issued by a governmental authority necessary or advisable for the use of any senior-housing or skilled-nursing facility owned, operated or managed by it;

(iii) no skilled-nursing facility owned, operated or managed by Assignee, or an affiliate of Assignee, appears on the Special Focus Facility List and has been on such list for one hundred eighty (180) days;

(iv) within the five (5) year period prior to the proposed transfer date, no senior-housing or skilled-nursing facility owned, operated or managed by Assignee, or an affiliate of the Assignee, has had imposed on it any restriction from admitting residents or patients or from receiving reimbursement under any third-party or governmental payor program which restriction has remained in place for more than thirty (30) days;

(v) Assignee, nor any affiliate of or any senior-level management or owner of Assignee, has been convicted of or plead no contest or nolo contendere with respect to any felony or any misdemeanor that involves any act of fraud, embezzlement, theft or misappropriation;

(vi) that neither Assignee nor any affiliate of it (i) has had a receiver, trustee or liquidator appointed for it or any of its property, (ii) filed a voluntary petition under any federal bankruptcy or state legal requirements to be adjudicated as bankrupt or for any arrangement or other debtor's relief, or (iii) has had filed against it by a third-party an involuntary petition under any federal bankruptcy or state legal requirements to be adjudicated as bankrupt or for any arrangement or other debtor's relief;

(vii) the consummation of the transfer has, to the extent applicable, been approved by all necessary governmental authorities, including, without limitation, with respect to the continued operation of the Facility; and

(viii) following the consummation of the transfer, Assignee shall lawfully hold all authorizations required by law and the efficacy and enforceability of such authorizations shall in no way be jeopardized on account of the consummation of the transfer.

IN WITNESS WHEREOF, the parties have executed this Assignment with the intent to be bound as of the Effective Date.

ASSIGNOR:

RS GOLDEN TRIANGLE, LLC,
a Texas limited liability company

By: _____
Name: _____
Title: _____

ASSIGNEE:

WELLSENTIAL OF OAK GROVE, LLC,
a Delaware limited liability company

By: _____
Name: _____
Title: _____

GOVERNMENTAL ENTITY:

WINNIE-STOWELL HOSPITAL DISTRICT,
a Texas hospital district

By: _____
Name: _____
Title: _____

Exhibit “G-4”

Hallettsville HUD and Accounts-Receivable Financing Documents

CONSENT AND ASSIGNMENT OF MANAGEMENT AGREEMENT

THIS CONSENT AND ASSIGNMENT OF MANAGEMENT AGREEMENT (this "***Assignment***") is entered into as of the 1st day of July, 2025, by and among Diversicare Afton Oaks, LLC a Delaware limited liability company ("**Assignor**) Houston II Enterprises, L.L.C., a Texas limited liability company ("***Assignee***"), and Winnie Stowell Hospital District, a a governmental entity and body politic established pursuant to the laws of the state of Texas ("***Hospital District***"), to be effective upon the closing anticipated under the Management Transfer Agreement (defined below) (the date of such closing, the "***Effective Date***") which is expected to occur no later than July 1, 2025.

Background/Recitals:

WHEREAS, Assignor is the owner of the licensed health facility known as Afton Oaks Nursing and Rehabilitation Center and located at 7514 Kingsley Street, Houston Texas 77087 (the "***Facility***");

WHEREAS, Assignor subleases the Facility to Hospital District under that certain Lease Agreement effective July 1, 2025 (the "***Lease***");

WHEREAS, Hospital District and Assignor entered into that certain Management Agreement and Business Associate Agreement effective September 1, 2024 (collectively, as amended, restated, supplemented or otherwise modified from time to time, the "***Management Agreement***"), under which Hospital District has engaged Assignor in the management of the Facility;

WHEREAS, in connection with the Management Agreement, Hospital District applied for a Texas nursing facility license, as a result of which Hospital District became the licensed operator of the Facility;

WHEREAS, Assignor and Assignee have entered into a Management Transfer Agreement dated May 2, 2025 (as amended, restated, supplemented or otherwise modified from time to time, the "***Management Transfer Agreement***"), pursuant to which Assignor agrees, among other matters, to assign its rights and obligations arising on and after the Effective Date under the Management Agreement to Assignee, who will become the new "Manager" of the Facility and is expected to employ or otherwise retain the services of substantially all of the Facility's employees and the key management personnel who currently manage the Facility on behalf of Assignor (the "***Management Personnel***");

WHEREAS, under the terms of the Management Agreement, Assignor as "*Manager*" may not assign the Management Agreement without mutual agreement between it and Hospital District as "*Hospital District*;" and

WHEREAS, the Lease shall be considered terminated as of the Effective Date;

WHEREAS, (i) Assignor has agreed to assign to Assignee all right, title and interest of Assignor in the Management Agreement arising on and after the Effective Date; (ii) Assignee has agreed to assume the obligations, liabilities and duties of Manager under the Management Agreement arising on and after the Effective Date; and (iii) Hospital District has agreed to consent to such assignment and assumptions by Assignor and Assignee, subject to the terms provided in this Assignment.

NOW, THEREFORE, in consideration of the mutual covenants and agreements contained herein, and other good and valuable consideration, the receipt, adequacy and sufficiency of which are hereby acknowledged, the undersigned covenant, consent and agree as follows:

Agreement:

Section 1.1 Incorporation of Recitals. The foregoing Recitals are hereby incorporated into and made a part of this Assignment by this reference.

Section 1.2 Certain Definitions. Except as otherwise defined in this Assignment, each capitalized term shall have the meaning ascribed to such term in the Management Agreement.

Section 1.3 Assignment Effective as of Effective Date/Termination. Effective as of the Effective Date, the parties agree as set forth herein. However, upon a termination of the Purchase Agreement prior to the Effective Date, this Assignment shall automatically terminate and have no further force or effect.

Section 1.4 Assignment. Assignor has granted, bargained, sold, transferred, assigned and set over to Assignee, and by these presents does hereby grant, bargain, sell, transfer, assign and set over unto Assignee, effective as of the Effective Date, and solely to the extent first arising during or relating to the period beginning on the Effective Date, all of Assignor's rights, title and interest in, to and under the Management Agreement. The parties to this Assignment hereby acknowledge and agree that Assignor does not grant, bargain, sell, transfer or assign to Assignee, but rather Assignor shall retain, all of its rights, title and interest in, to and under the Management Agreement to the extent arising from or in any way relating to Assignor's management of the Facility prior to the Effective Date.

Section 1.5 Assumption. In consideration of the assignment contemplated in Section 1.4 above, Assignee hereby expressly assumes and agrees, effective as of the Effective Date, to fulfill and carry out and discharge all of Assignor's liabilities, duties and obligations under the Management Agreement, solely to the extent such liabilities, duties, and obligations relate to the period beginning on and following the Effective Date, and provided that Assignee will not be responsible for any Losses (as defined in the Management Agreement), duties or obligations of Assignor arising from or in any way relating to Assignor's management of the Facility prior to the Effective Date. Assignee agrees to comply with the terms of the Management Agreement with respect to the duties of the "*Manager*" thereunder relating to the period following the Effective Date.

Section 1.6 Agreements in Full Force and Effect. All provisions of the Management Agreement shall remain in full force and effect and unmodified, except as modified or amended by this Assignment.

Section 1.7 Continuing Rights and Obligations of Assignor. This Assignment shall not release or discharge Assignor or Hospital District whatsoever from their obligations, or be deemed to waive any of their rights, under the Management Agreement relating to the period prior to the Effective Date. For the avoidance of doubt, and without limiting the foregoing, each of Assignor and Hospital District shall retain their rights and obligations with respect to the other, and such other party's associated Indemnitees, regarding indemnification under Article 15 of the Management Agreement.

Section 1.8 Representations, Warranties and Covenants Regarding Management Agreement.

(i) Each of Assignor and Hospital District hereby represents and warrants to Assignee that (A) the Management Agreement is in full force and effect; (B) Exhibit A attached hereto is a complete and accurate copy of the Management Agreement, including all exhibits and amendments thereto, and there have been no further amendments thereto; and (C) neither it nor, to the best of its knowledge, the other such party is in default under the Management Agreement.

(ii) Assignee and Hospital District hereby covenant and agree that they shall not amend, terminate, allow to lapse, or waive any provision of the Management Agreement, in each case, in any manner that would contravene or would reasonably expected to have a material adverse effect on (A) Assignor's right to receive compensation under the Management Agreement for periods through the date prior to the Effective Date or (B) the rights and obligations of the parties set forth in this Assignment. In the event of any conflict between the Management Agreement and this Assignment, this Assignment shall control.

Section 1.9 Consent of Hospital District. For all purposes as may be required under the Management Agreement, Hospital District hereby consents to the assignment of the Management Agreement as and to the extent set forth in, and subject to the terms of, this Assignment.

Section 1.10 Accounting, Reconciliation and Payment.

(i) The respective obligations of Assignor and Hospital District to complete accounting, reconciliation and payment obligations as provided in the Management Agreement with respect to periods through the date immediately prior to the Effective Date shall survive assignment of the Management Agreement. For the avoidance of doubt, all compensation and fees whether variable, fixed, or supplemental that have accrued or shall accrue to Assignor under the terms of the Management Agreement with respect to periods through the date immediately prior to the Effective Date shall be the property of Assignor, even if such fees are not collected or received prior to the Effective Date. Assignor, Assignee, and Hospital District acknowledge and agree that pursuant to the Quality Incentive Payment Program and/or similar programs in Texas, there may be certain true-ups and/or supplemental payments for the prior and current fiscal years, with Assignor entitled to or responsible for the portions related to the period prior to the Effective Date, whenever paid and consistent with the historical practice of the parties, and Assignee entitled to or responsible for the portions related to the period from and after the Effective Date.

(ii) Assignor shall, within ninety (90) days after the Effective Date, prepare and deliver to Hospital District a final accounting statement dated as of the Effective Date with respect to Assignor's operation of the Facility prior to the Effective Date, in the format and containing the information as prescribed for the Annual Report in the Management Agreement, along with a statement of any sums due from Assignor to Hospital District or vice versa pursuant to the Management Agreement (the "***Final Accounting Statement***"). The cost of preparing the Final Accounting Statement, shall be an Operating Expense and will be deemed to have occurred prior to the Effective Date. If Hospital District does not notify Assignor in writing of exceptions to the Final Accounting Statement within thirty (30) days after receipt, then Hospital District shall be deemed to have approved the Final Accounting Statement. Within thirty (30) days after the approval by Hospital District of the Final Accounting Statement, the Parties will reconcile any amounts in controversy and make whatever cash adjustments are reasonably necessary pursuant to such final statement. If Assignor and Hospital District are unable to reconcile any amounts in controversy, Assignor or Hospital District may request a third-party audit. The cost of any such third-party audit, and any mediation of amounts in controversy, shall be paid by Assignor. Assignor and Hospital District acknowledge that there may be certain adjustments for which the information or funding is not available at the time of the Final Accounting Statement and the Parties agree to readjust such amounts and make the necessary cash adjustments when such information becomes available; provided, however, that (except for ongoing disputes of which each Party has received notice or legal claims for which the statute of limitations has not expired) all accounts shall be deemed final upon the earlier of (i) the conclusion of QIPP or (ii) three (3) years after the Effective Date. Assignor and Hospital District shall also reconcile Incentive Payments in accordance with the Management Agreement. Notwithstanding anything to the contrary contained herein, for so long as funds with respect to periods through the date immediately prior to the Effective Date are deposited into Hospital District's Facility depository account, Assignor shall continue to timely provide Hospital District with all Interim Reports and Annual Reports (as defined in the Old

Management Agreement). The aged schedule of accounts receivable prepared by Assignor shall only apply to period prior to the Effective Date.

(iii) Without limiting the foregoing, Hospital District agrees that during the period beginning on the Effective Date and continuing through August 31, 2025 all payments received by Hospital District relating to the operation and management of the Facility from the Medicare Program, the Medicaid Program, the Veterans' Administrator, insurance companies, and residents or legal representatives, including any QIPP supplemental payments, shall continue to be transferred over to the Facility Operating Account (as defined in the Management Agreement) controlled by Transferor, and that Transferor shall remit and reconcile such collections in accordance with the terms of Section 1.5 of the Management Transfer Agreement. Notwithstanding the foregoing, payments from or on behalf of private pay residents that designate Assignee's dates of service shall be forwarded by Hospital to New Manager beginning August 1, 2025. Beginning September 1, 2025, all payments that are received by Hospital District relating to the operation and management of the Facility shall be paid by Hospital District to Assignee, with the understanding that Assignee shall retain the portion of such funds that are owed to it and forward to Assignor the portion of such funds owed to it as determined in accordance with the terms of that certain Reconciliation and Reporting Agreement that has been entered into between Assignor and Assignee as of the Effective Date. Hospital District, Assignor and Assignee will cooperate jointly for payments made by non-Medicaid insurance payors to assure that the payments are made to the correct party. Assignor and Assignee shall reconcile and resolve any recoupments and overpayments.

(iv) PRF Reporting. To the extent applicable, Assignor shall timely provide to Hospital District such information and data as shall be necessary to prepare and file, and Hospital District shall timely prepare and file, such reports as may be required by applicable law with respect to any provider relief funds received by Hospital District pursuant to the Public Health and Social Services Emergency Fund described in the Coronavirus Aid, Relief, and Economic Security Act (Pub. L. No. 116-136)(H.R. 748), as amended from time to time, and all rules, requirements, regulations, and administrative guidance related to the same, in each case, to the extent related to its operation of the Facility for the period up to the Effective Date. Such provider relief funds received by Hospital District on behalf of the Facility shall be subject to a single audit of Hospital District. Upon request, Hospital District shall promptly provide Assignor with copies of such reports and supporting documentation. Hospital District shall fully participate in and cooperate with any and all governmental or other applicable audits related to its operation of the Facility for the period up to the Effective Date, and any amounts either owed or received by Hospital District (in respect of the operation of the Facility for the period up to the Effective Date) as a result of any such audits shall be included in the calculation of Total Net Revenue (as defined in the Management Agreement) for such period in accordance with the terms and conditions of the Management Agreement. If necessary, in the event of any recoupment related to such provider relief funds related to the Facility, Assignor shall remit the funds to Hospital District within ten (10) days.

Section 1.11 Expenses. Each of Assignor and Assignee shall be responsible for its own fees and costs in connection with the review and execution of this Assignment and any sublease and business associate agreement, including without limitation, each party's reasonable attorneys' fees. Assignor will reimburse Hospital District, within fifteen (15) days of Hospital District's written demand thereof, for all reasonable third-party costs incurred by Hospital District in connection with the review and execution of this Assignment and any sublease and business associate agreement, including without limitation, Hospital District's reasonable attorneys' fees.

Section 1.12 Assignment; Binding Effect; Third Party Beneficiaries. This Agreement shall not be assignable by any party hereto without the prior written consent of the other parties hereto. This Assignment shall be binding upon and inure to the benefit of Hospital District, Assignor and Assignee and their respective permitted successors and assigns. For the avoidance of doubt, this Agreement shall not

terminate in the event the Management Agreement is terminated or Assignee subsequently assigns its rights and obligations under the Management Agreement, and the provisions hereof that are applicable to and bind the Assignee shall automatically be applicable to (i) any assignee of the Assignee's rights and obligations under the Management Agreement and (ii) Assignee and its affiliates in the event that New Operator or any such affiliate becomes the licensed operator of the Facility in the event the Management Agreement is terminated. In addition, Assignee agrees to use commercially reasonable efforts to cause any such licensed operator or manager to sign a joinder to this Agreement acknowledging and agreeing to the foregoing and assuming all other rights and obligations of Assignee under this Agreement concurrently with any such termination or assignment; provided that Assignee shall not, in any event, be released from its indemnification obligations hereunder without the prior written consent of Assignor.

Section 1.13 Indemnification. Assignor and Assignee agree that the terms of any and all indemnification requirements of the Hospital District shall survive the execution of this Assignment and Management Agreement and Assignor shall be responsible for all the obligations and demands for indemnity that may occur from prior to the execution date of the Management Transfer Agreement.

Section 1.14 Counterparts. This Assignment may be executed in two (2) or more counterpart copies, all of which counterparts shall have the same force and effect as if the parties hereto had executed a single copy of this Assignment.

Section 1.15 Further Assurance Actions. Each party agrees that it will take all necessary actions reasonably requested by the other party to effectuate the purposes of this Assignment.

Section 1.16 Governing Law. This Assignment shall be governed by and construed in accordance with the substantive laws of the State of Texas, without reference to its conflicts-of-laws principles.

Section 1.17 Headings. The section headings of this Assignment are for reference purposes only and are to be given no effect in the construction or interpretation of this Assignment.

Section 1.18 Severability. Any provision of this Assignment that is prohibited or unenforceable in any jurisdiction shall, as to such jurisdiction, be ineffective to the extent of such prohibition or unenforceability without invalidating the remaining provisions of this Assignment or such provision, and any such prohibition or unenforceability in any jurisdiction shall not invalidate or render unenforceable such provision in any other jurisdiction.

Section 1.19 Amendments. This Assignment may not be amended orally, but only by an agreement in writing signed by the party against whom enforcement of any amendment is sought.

Section 1.20 Venue. Each party agrees that if any action is necessary to interpret, construe or enforce this Assignment, including any action for injunctive relief, the action must be filed in the District Courts of Childress County, Texas. Each party waives any objection to venue in Childress County.

Section 1.21 Representations and Warranties by Assignee. Assignee additionally represents and warrants, and Assignee certifies as follows:

(i) Assignee (together with the Management Personnel) is a sophisticated operator of skilled nursing facilities in the State of Texas with experience substantially comparable to that of Assignor, and Assignee and its affiliates collectively have a financial condition substantially similar to, or better than, Assignor (taken as a whole);

(i) Assignee, or an affiliate of Assignee, has not received notice of any revocation, suspension or intent to revoke or suspend any license, permit, certification, registration, accreditation, provider agreement, certificate of need, certificate of exemption, approval, waiver, variance or other authorization issued by a governmental authority necessary or advisable for the use of any senior-housing or skilled-nursing facility owned, operated or managed by it;

(ii) no skilled-nursing facility owned, operated or managed by Assignee, or an affiliate of Assignee, appears on the Special Focus Facility List and has been on such list for one hundred eighty (180) days;

(iii) within the five (5) year period prior to the Effective Date, no senior-housing or skilled-nursing facility owned, operated or managed by Assignee, or an affiliate of the Assignee, has had imposed on it any restriction from admitting residents or patients or from receiving reimbursement under any third-party or governmental payor program which restriction has remained in place for more than thirty (30) days;

(iv) neither Assignee, nor any affiliate of or any senior-level management or owner of Assignee, has been convicted of or plead no contest or nolo contendere with respect to any felony or any misdemeanor that involves any act of fraud, embezzlement, theft or misappropriation;

(v) neither Assignee nor any affiliate of it (A) has had a receiver, trustee or liquidator appointed for it or any of its property, (B) filed a voluntary petition under any federal bankruptcy or state legal requirements to be adjudicated as bankrupt or for any arrangement or other debtor's relief, or (C) has had filed against it by a third-party an involuntary petition under any federal bankruptcy or state legal requirements to be adjudicated as bankrupt or for any arrangement or other debtor's relief;

(vi) the consummation of the transfer has, to the extent applicable, been approved by all necessary governmental authorities, including, without limitation, with respect to the continued operation of the Facility; and

(vii) following the consummation of the transfer, Assignee shall lawfully hold all authorizations required by law and the efficacy and enforceability of such authorizations shall in no way be jeopardized on account of the consummation of the transfer.

IN WITNESS WHEREOF, the parties have executed this Assignment with the intent to be bound as of the 1st day of July, 2025.

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[*SIGNATURE PAGE TO CONSENT AND ASSIGNMENT OF MANAGEMENT AGREEMENT – ASSIGNOR*]

ASSIGNOR:

Diversicare Afton Oaks, LLC

By: _____
Name: Steve Nee
Its: CEO

[*SIGNATURE PAGE TO CONSENT AND ASSIGNMENT OF MANAGEMENT AGREEMENT – ASSIGNEE*]

ASSIGNEE:

Houston II Enterprises, L.L.C.

By: _____
Name: Gary Blake
Its: Manager

[*SIGNATURE PAGE TO CONSENT AND ASSIGNMENT OF MANAGEMENT AGREEMENT – HOSPITAL DISTRICT*]

HOSPITAL DISTRICT:

Winnie Stowell Hospital District,
a Texas Hospital District

By: _____
Name:
Title: