

## MATERIAL CHANGE NOTICE SUBMISSION DETAILS

MCN Number	2025-09-17-1410
OHCA Review Start Date	10/9/2025
Anticipated date (unless tolled per regulation) by which OHCA could waive cost and market impact review	<del>11/24/2025</del> TOLLED
Anticipated date (unless tolled per regulation) by which OHCA could determine cost and market impact review required	<del>12/8/2025</del> TOLLED

## SUBMITTER

### HEALTH CARE ENTITY CONTACT FOR PUBLIC INQUIRY

Title	CEO
First Name	Christopher
Last Name	Bjornberg
Email Address	cbjornberg@iv-hd.org

### GENERAL

Business Name	Imperial Valley Healthcare District, a California healthcare district
Website	<a href="https://imperialvalleyhealth.com/">https://imperialvalleyhealth.com/</a>
Ownership Type	Other Ownership
Tax Status	For-profit
Federal Tax ID	99-4231206
Description of Submitting Organization	Please see attached Schedule 3.
Health Care Provider	Yes
For Providers: Desc. of Capacity or Patients served in California	Please see attached Schedule 3.

### LOCATIONS

Counties	Imperial
California licenses and numbers	Please see attached Schedule 4.
Other States Served	None
Other state(s) licenses and numbers	Submitter does not hold any health care-related licenses outside of California.
Primary Languages used when providing services	English; Spanish

## MATERIAL CHANGE

### ADDITIONAL ENTITIES

Business Name	Description of the Organization	Ownership Type	Additional MCN Submission
El Centro Regional	See attached Schedule 10.1.	Other	Yes

Medical Center			
City of El Centro	See attached Schedule 10.2.	Other	No

## CRITERIA

A health care entity with annual revenue, as defined in <a href="#">section 97435(d)</a> , of at least \$25 million or that owns or controls California assets of at least \$25 million, or;	Yes
A health care entity with annual revenue, as defined in <a href="#">section 97435(d)</a> , of at least \$10 million or that owns or controls California assets of at least \$10 million and is a party to a transaction with any health care entity satisfying subsection (b)(1), or	Yes
A health care entity located in a designated primary care health professional shortage area in California, as defined in Part 5 of Subchapter A of Chapter 1 of Title 42 of the Code of Federal Regulations (commencing with section 5.1), available at <a href="http://data.hrsa.gov">data.hrsa.gov</a> . To determine if you are located in a primary health care professional shortage area, please visit <a href="#">here</a>	Yes

## CIRCUMSTANCES FOR FILING

The proposed fair market value of the transaction is \$25 million or more and the transaction concerns the provision of health care services.	Yes
The transaction is more likely than not to increase annual California-derived revenue of any health care entity that is a party to the transaction by either \$10 million or more or 20% or more of annual California-derived revenue at normal or stabilized levels of utilization or operation.	Yes

## TRANSACTION DETAILS

Anticipated Date of Transaction Closure	12/30/2025
Description of the Transaction	Please see attached Schedule 6.
Submitted to US Department of Justice or Federal Trade Commission?	No
Submitted to Other Agency?	Yes
Date of Submission	12/30/2025
To Whom Submitted	Please see attached Schedule 7.
Description of Submission (Include Agency name(s) and State(s))	Please see attached Schedule 7.
Subject to court proceeding	No
Description of current services provided and expected post-transaction impacts on health care services	See attached Schedule 9.1.
Prior mergers or acquisitions that: (A) involved the same or related health care	Submitter has no prior mergers or acquisitions, however, pursuant to and

<p>services;  (B) involved at least one of the entities, or their parents, subsidiaries, predecessors, or successors, in the proposed transaction; and  (C) were closed in the last ten years.</p>	<p>mandated by AB 918 (2023), Submitter is the successor-in-interest by operation of law to both Heffernan Memorial Healthcare District and Pioneers Memorial Healthcare District, after their respective dissolutions. Submitter is now the licensee of Pioneers Memorial Hospital, Calexico Health Center, Pioneers Children's Health Center, Pioneers Health Center, and Pioneers Memorial Skilled Nursing Center. The dissolution and succession was completed on January 21, 2025.</p>
<p>Description of Potential Post Transaction Changes</p>	<p>See attached Schedule 9.3 to the OHCA notice.</p>
<p>Description of the nature, scope, and dates of any pending or planned material changes occurring between the Submitter and any other entity, within the 12 months following the date of the notice</p>	<p>There are no pending or planned material changes occurring between Submitter and any other entity, within the 12 months following the date of this notice.</p>

**Schedule 3**  
**To**  
**Imperial Valley Healthcare District OHCA Notice**

This Schedule 3 is submitted to the Office of Health Care Affordability with respect to the Material Change Notice filed by Imperial Valley Healthcare District, a California healthcare district (the “**Submitter**”) in response to 22 C.C.R. §§ 97438(b)(1)(A)-(E), requiring each Submitter to provide the following: (A) Business Name; (B) Business Website; (C) Business Mailing Address; (D) Description of Organization, including, but not limited to, business lines or segments, ownership type (corporation, partnership, limited liability company, etc.), governance and operational structure (including ownership or by a health care entity); and (E) Federal Tax Identification Number and tax status as for-profit or non-profit. The Submitter is a health care provider; therefore, Section (D) further summarizes the Submitter’s provider type (hospital, physician group, etc.), facilities owned or operated, service lines, number of staff, geographic service area(s), and capacity or patients served in California (e.g. number of licensed beds, number of patients per county in the last year). The Submitter is not a health care service plan, health insurer, risk-bearing organization, or fully integrated delivery system.

**(A) Business Name**

The business name of the Submitter is Imperial Valley Healthcare District, a California healthcare district.

**(B) Business Website**

The business website of the Submitter is <https://imperialvalleyhealth.com/>.

**(C) Business Mailing Address**

The business mailing address of the Submitter is 207 W. Legion Road, Brawley, CA 92227.

**(D) Description of Organization**

*Description of Organization:* The Submitter is a healthcare district that owns and operates a general acute care hospital, three outpatient rural health clinics, and one skilled nursing facility. The Submitter was formed by AB 918 (2023) and operates under The Local Health Care District Law (Health & Safety Code 32000 et seq.).

*Business Lines or Segments:* The Submitter owns and operates a general acute care hospital, three outpatient rural health clinics, and one skilled nursing facility.

*Ownership Type:* The Submitter is a California healthcare district.

*Governance and Operational Structure:* The Submitter is governed by a board of directors (the “**Board**”). The Board includes representation from previously existing healthcare districts as well as local and tribal governments in Imperial County. While the Board holds ultimate responsibility, it delegates authority to officers and staff to ensure efficient management. The Board is composed of seven members, each a registered voter and resident of the Imperial Valley Healthcare District. The legislation that created IVHD requires that the Board shall consist of all elected members by the conclusion of the 2028 general election. These members represent seven Districts adopted by the Board in May 2024 after a series of public meetings and community input. At the September 11, 2025 Board meeting, Director Donald Medart Jr. resigned from the Board of Directors and the Board declared a vacancy. The Board intends to fill this vacancy within 60 days in accordance with Government Code 1780. The Submitter is not owned by nor does it own any health care entities.

The current Board consists of:

- (1) Katherine Burnworth
- (2) Laura Goodsell
- (3) Arturo Proctor
- (4) Enola Berker
- (5) Rodolfo Valdez
- (6) James Garcia
- (7) [Currently Vacant as of the date of Submission]

The current officers consist of:

- (1) Katherine Burnworth (President)
- (2) Laura Goodsell (Vice President)
- (3) Christopher Bjornberg (Chief Executive Officer)
- (4) Carly Loper (Chief Financial Officer)
- (5) Carol Bojorquez (Chief Nursing Officer)
- (6) Carly Zamora (Chief of Clinic Operations)
- (7) Arturo Proctor (Secretary)
- (8) James Garcia (Treasurer)

*Provider Type:* The Submitter owns and operates a general acute care hospital, three outpatient rural health clinics, and one skilled nursing facility.

*Facilities Owned or Operated:* The Submitter owns and operates the following facilities:

- Pioneers Memorial Hospital;
- Calexico Health Center;
- Pioneers Children's Health Center;
- Pioneers Health Center; and
- Pioneers Memorial Skilled Nursing Facility.

*Service Lines:* The services lines of each facility are as follows:

Pioneers Memorial Hospital

- Basic Emergency Medical
- Physical Therapy
- Mobile Unit - Magnetic Resonance Imaging (MRI)
- Outpatient Services - PT/OT
- Outpatient Services - Oncology/Infusion
- Outpatient Services - Health Center
- Outpatient Services - Minor Procedures
- Outpatient Services - Pediatric
- Outpatient Services - Nephrology or Urology - Urology Consultation
- Mobile Unit - Other - Kitchen
- Nuclear Medicine
- Respiratory Care Services
- Outpatient Services - Primary Care/RHC
- Mobile Unit - Positron Emission Tomography
- Outpatient Services - Wound Care
- Outpatient Services - Multispecialty

- Outpatient Services - Women's Health
- Outpatient Services - Imaging - MRI/CT
- Cardiac Catheterization Laboratory Services

Calexico Health Center:

- Rural Healthcare Services.

Pioneers Children's Health Center:

- Pediatric Rural Healthcare Services.

Pioneers Health Center:

- Rural Healthcare Services.

Pioneers Memorial Skilled Nursing Facility:

- Skilled Nursing Services.

*Number of Staff:* The number of staff at each facility are approximately as follows:

- Pioneers Memorial Hospital: 927.
- Calexico Health Center: 7.
- Pioneer Children's Health Center: 8.
- Pioneers Health Center: 37.
- Pioneers Memorial Skilled Nursing Facility: 118.

*Geographic Service Areas.* All of the facilities that the Submitter owns and operates serve Imperial County, California.



*Capacity:* The number of beds or patients served per county for each facility are as follows:

- Pioneers Memorial Hospital: 107 beds.
- Pioneers Memorial Skilled Nursing Facility: 99 beds.
- Calexico Health Center: approximately 11,556 patients.
- Pioneer Children's Health Center: approximately 8,926 patients.
- Pioneers Health Center: approximately 36,865 patients.

**(E) Federal Tax Identification Number and Tax Status**

The Submitter's federal tax identification number is 99-4231206.

The Submitter is a public entity and a healthcare district, which is a type of special district. While some healthcare districts partner with legally separate nonprofit organizations, the Submitter has not entered into such a partnership.

**Schedule 4**  
**To**  
**Imperial Valley Healthcare District OHCA Notice**

This Schedule 4 is submitted to the Office of Health Care Affordability with respect to the Material Change Notice filed by the Submitter in response to (i) 22CCR § 97438(b)(3)(E) requiring Submitter to provide its current counties of operation, (ii) 22CCR §§ 97438(b)(G) and 97438(b)(2) requiring Submitter to provide the primary threshold languages, as determined by the Department of Health Care Services, (iii) and § 97438(b)(1)(F) requiring the Submitter to list its current California health care licenses and registration numbers issued by regulatory agencies; state and local business licenses related to the provision of health care services for facilities, services, and professionals involved in the transaction.

**Current Counties of Operation**

The Submitter only operates in Imperial County. The Submitter does not currently serve any counties outside of California.

**Primary Threshold Languages**

The primary languages used by Submitter when providing services to the public are Spanish and English.

**California Healthcare-Related Licenses**

None of Submitter's current California health care-related licenses are associated with the facilities, services, or professions involved in this transaction; all of such licenses are associated with the facilities described in Schedule 3. The Submitter does not hold health care-related licenses in states outside of California.

**Schedule 6**  
**To**  
**Imperial Valley Healthcare District OHCA Notice**

This Schedule 6 is submitted to the Office of Health Care Affordability with respect to the Material Change Notice filed by the Submitter in response to 22 C.C.R. § 97438(b)(5), requiring Submitter to provide the following: “Description of transaction, which shall include the following: (A) The goals of the transaction; (B) A summary of terms of the transaction; (C) A statement of why the transaction is necessary or desirable; (D) General public impact or benefits of the transaction, including quality and equity measures and impacts; (E) Narrative description of the expected competitive impacts of the transaction; and (F) Description of any actions or activities to mitigate any potential adverse impacts of the transaction on the public.”

**(A) The Goals of the transaction:**

A primary goal of the transaction is to urgently stabilize and transform healthcare delivery in Imperial County by consolidating its two major hospitals under a unified, publicly governed system, thereby effectuating the legislative intent of AB 918 (2023). Submitter is the successor in interest to Pioneers Memorial Hospital, as further mandated by AB 918 (2023). The acquisition of ECRMC is the next critical step to creating a countywide healthcare district capable of delivering coordinated, efficient, and equitable care to the residents of Imperial Valley.

Previously, the Imperial Valley had multiple healthcare districts and a city-owned hospital operating independently. This fragmentation has led to a duplication of services, inefficiencies, and financial instability. As the author of AB 918 (2023) warned, “[a]ccess to healthcare in Imperial County is at serious risk.”<sup>1</sup> The Legislature recognized this crisis and enacted AB 918 (2023) as an urgency statute, declaring that “the imminent financial collapse of the El Centro Regional Medical Center is a serious threat to the public health and safety of the residents of the region,” and emphasizing the need for immediate action to “stabilize access to health care and to continue ongoing emergency medical services in one of California’s most underserved communities.”<sup>2</sup>

By establishing Submitter and authorizing it to acquire ECRMC, the Legislature sought to consolidate resources, streamline operations, and ensure continuity of care. This acquisition not only stabilizes the region’s largest acute-care hospital but also empowers local governance, mandates public engagement, honors existing staff and contracts, and prioritizes equitable service delivery.

This transaction operationalizes many of OHCA’s own objectives: to build a more integrated, efficient, and equitable healthcare system. The transfer of ECRMC to Submitter improves cost

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<sup>1</sup> California State Assembly. (2023). AB 918: Health care district: County of Imperial – According to the Author, Analysis. CalMatters Digital Democracy. [https://calmatters.digitaldemocracy.org/bills/ca\\_202320240ab918](https://calmatters.digitaldemocracy.org/bills/ca_202320240ab918).

<sup>2</sup> *Id.* at AB 918: Health care district: County of Imperial – Section 5, Bill Text.

efficiency through unified governance, shared medical staff, and integrated financial and clinical operations. It will promote high-value system performance by enabling coordinated care and strategic resource allocation across the county. Furthermore, it will advance equity by soliciting active community input and preserving continuity of care in a region where access is fragile and the population is predominantly low-income and rural. The transfer of ECRMC is not a financially driven transaction, rather it is a strategic, community-driven intervention designed to preserve essential services, improve long-term sustainability, and deliver high-value care to a vulnerable population.

**(B) A summary of the terms of the transaction:**

As set forth in more particular detail in that certain Asset Transfer Agreement (the “**Agreement**”), dated effective August 1, 2025, by and among, City of El Centro (the “**City**”), El Centro Regional Medical Center (“**ECRMC**”) (collectively, the “**Sellers**”), on the one hand, and Imperial Valley Healthcare District (“**Buyer**” or “**IVHD**”), the Submitter IVHD will acquire from Sellers all of the assets (not including certain excluded assets), including properties, rights, whether real or personal, tangible and intangible, and assuming all liabilities involved in the operation of ECRMC which includes its 161-bed general acute care hospital and outpatient centers in California.

IVHD will pay each Seller One Dollar (\$1.00) to acquire the assets and assume the liabilities and the City will make a one-time cash payment to IVHD of Five Million Dollars (\$5,000,000.00) at Closing to support healthcare needs for the City’s residents.

**(C) A statement of why the transaction is necessary or desirable:**

The transaction is necessary to prevent the imminent financial collapse of ECRMC, which would severely endanger the health and safety of Imperial County and City residents. ECRMC is the largest hospital in Imperial County and without this transaction, ECRMC cannot financially sustain its operations. Its closure would leave the county’s residents with significantly reduced access to emergency and inpatient care, destabilizing the region’s already fragile healthcare infrastructure.

The Legislature recognized this threat and enacted AB 918 (2023) as an urgency statute, stating that “the imminent financial collapse of the El Centro Regional Medical Center is a serious threat to the public health and safety of the residents of the region.”<sup>3</sup> The bill authorizes the Submitter, which has already succeeded to Pioneers Memorial Hospital, to acquire ECRMC and consolidate both hospitals under a single, publicly governed entity. This transfer is not only a lifeline for ECRMC but also a strategic intervention to improve system-wide efficiency, reduce duplication, and ensure continuity of care in one of California’s most underserved regions.

**(D) General public impact or benefits of the transaction, including quality and equity measures and impacts:**

The transaction will have positive impacts on the general public by preserving and enhancing access to high-quality, equitable healthcare services in Imperial County. ECRMC is one of only

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<sup>3</sup> *Id.*

two general acute care hospitals serving the entire county. Its financial collapse would leave thousands of residents, many of whom are low-income, medically underserved, and geographically isolated, without access to emergency and inpatient care. By acquiring ECRMC, the Submitter seeks to ensure continuity of care and protect the region's most critical healthcare infrastructure.

The consolidation of ECRMC and Pioneers Memorial Hospital under the Submitter will improve quality through unified clinical governance, an integrated medical staff, and coordinated care delivery. These structural reforms are expected to reduce duplication, streamline operations, and enable more strategic resource allocation, all of which should contribute to higher system performance and better patient outcomes. The transaction also advances equity by embedding community representation into the governance structure, requiring public meetings, and prioritizing service delivery in historically underserved areas. The Author of AB 918 (2023) emphasized, that the creation of a countywide healthcare district, including Submitter's ownership of both ECRMC and Pioneers Memorial Hospital, would result in "multi-millions of dollars in savings" and allow the hospitals to qualify as a sole community hospital across two campuses, triggering increased Medicare reimbursements that can be reinvested into patient care and infrastructure.<sup>4</sup>

Submitter believes that this transaction is not only a financial and operational necessity, it is a public health imperative. It protects access to care, improves quality, and promotes equity for a vulnerable population that would otherwise face severe health risks due to systemic instability and geographic isolation.

**(E) Narrative description of the expected competitive impacts of the transaction:**

The expected competitive impacts of the transaction are positive and stabilizing, particularly in the context of Imperial County's unique healthcare landscape. The region is served by only two general acute care hospitals—ECRMC and Pioneers Memorial Hospital—both of which have faced significant financial and operational challenges. Prior to the formation of the Submitter, these hospitals operated independently under separate governance structures, contributing to fragmentation, duplication of services, and inefficiencies that undermined the sustainability of care delivery.

Rather than reducing competition, the transaction enhances the region's ability to maintain essential services by consolidating these facilities under a single, publicly governed entity. This integration will not eliminate choice, rather it will preserve access to critical healthcare in a market where the alternative is collapse, rather than competition. Without this transaction, ECRMC is likely to be unable to financially sustain operations, and its closure would leave a large portion of the county without access to emergency and inpatient care. The Legislature recognized this risk and enacted AB 918 (2023) as an urgency statute to prevent a public health crisis.

Moreover, the transaction introduces competitive benefits in terms of system performance and accountability. By unifying governance, medical staff, and administrative functions, the Submitter

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<sup>4</sup> *Id.* at AB 918: Health care district: County of Imperial – According to the Author, Analysis.

can more effectively coordinate care, reduce waste, and reinvest savings into quality improvement and expanded services. The district's public structure ensures transparency, community oversight, and responsiveness to local needs, which are factors that enhance service quality and equity in ways that traditional market competition cannot achieve in rural and underserved areas.

The transaction does not diminish meaningful competition; it preserves and strengthens the healthcare system in a region where market failure is otherwise imminent. It ensures continuity of care, improves operational efficiency, and enhances public accountability, delivering long-term benefits to patients, providers, and the broader community.

**(F) Description of any actions or activities to mitigate any potential adverse impacts of the transaction on the public:**

There are no anticipated adverse impacts on the public resulting from this transaction.

**Schedule 7**  
**To**  
**Imperial Valley Healthcare District OHCA Notice**

This Schedule 7 is submitted to the Office of Health Care Affordability with respect to the Material Change Notice filed by the Submitter in response to 22CCR § 97438(b)(6) requiring the Submitter to disclose the submission date and nature of any applications, forms, notices, or other materials submitted or required regarding the proposed transaction to any other state or federal agency, such as, but not limited to, the Federal Trade Commission or the United States Department of Justice).

1. Prior to Closing, Submitter will file a Change of Ownership application with respect to General Acute Care Hospital License for El Centro Regional Medical Center with the California Department of Public Health.
2. Prior to Closing, Submitter will file applications with respect to El Centro Regional Medical Center's Hospital Inpatient Pharmacy Permit and Sterile Compounding Pharmacy License with the California Board of Pharmacy.
3. At Closing, Submitter will file a registration application with respect to the Controlled Substance Registration held by El Centro Regional Medical Center to the Drug Enforcement Agency Division Office.
4. Prior to Closing, Submitter will file a Food Facility Health Permit Application with Imperial County Department of Public Health for a new Food High Risk and Full Prep. Health Care Facility Permit.
5. After Closing, Submitter will file Lab 193, Notice of Laboratory Information, Lab 183, Director Attestation, Lab 182, Owner's Attestation, and CMS-116 applications with the California Department of Public Health, Division of Laboratory Science, Laboratory Field Services with respect to the Clinical and Public Health Laboratory Licenses and Registrations issued to El Centro Regional Medical Center.
6. After Closing, Submitter will file a CMS-116 Change of Information forms with the Department of Health and Human Services, and the California Department of Public Health, Division of Laboratory Science, Laboratory Field Services, with respect to El Centro Regional Medical Center's CLIA Certificate of Accreditation and Certificate of Waiver.
7. After Closing, Submitter will file ownership changes through the Online Radiation Machine Registration Portal with the California Department of Public Health, Radiologic Health Branch, with respect to El Centro Regional Medical Center's Facility Certificates of Registration
8. Prior to Closing, Submitter will file a transfer of Ownership Request to be filed with the California Department of Public Health, Radiologic Health Branch, with respect to El Centro Regional Medical Center's Radioactive Material License.
9. Prior to Closing, Submitter will file Form CMS-855A, CMS0-855B and CMS-20134 (or PECOS equivalent) for each Medicare enrollment currently held by El Centro Regional Medical Center with the Centers for Medicare & Medicaid Services.

10. Prior to Closing, Submitter will file an application with respect to El Centro Regional Medical Center's Medical Waste Acute Care Facility Permit to the California Department of Public Health, Medical Waste Management Program.
11. Prior to Closing, Submitter will file a New Seller's Permit Application with the California Department of Tax and Fee Administration to obtain a Sellers's Permit.
12. Prior to Closing, Submitter will file a Transfer Application with the California Department of Alcohol and Beverage Control with respect to El Centro Regional Medical Center's Alcoholic Beverage License.
13. Prior to Closing, Submitter will file a New Owner Registration Application with the California Department of Public Health with respect to El Centro Regional Medical Center's Mammography X-Ray Equipment and Facility Accreditation Certificates.



**Schedule 9.1**  
**To**  
**Imperial Valley Healthcare District OHCA Notice**

This Schedule 9.1 is submitted to the Office of Health Care Affordability with respect to the Material Change Notice filed by the Submitter in response to 22 CCR § 97438(b)(8) requiring the Submitter to provide a description of current services provided by the health care entity and expected post-transaction impacts on health care services, which shall include, if applicable: (A) Counties where services are currently performed and any post-transaction changes thereto; (B) Levels and type of health care services currently offered, such as the full range of reproductive health care and sexual health care services, specialized services for LGBTQ+ populations, labor and delivery services, pediatric services, behavioral health services, cardiac services, and emergency services, and any post-transaction changes thereto; (C) Summary that includes the number and type of patients currently served, including, but not limited to, age, gender, race, ethnicity, preferred language spoken, disability status, and payer category, and any post-transaction changes thereto; (D) Current community needs assessments, charity care, and community benefit programs, and any post-transaction changes thereto; and (E) Whether Medi-Cal and Medicare patients are currently accepted and any post-transaction changes thereto.

**(A) Counties where services are currently performed and any post-transaction changes thereto.**

The El Centro Regional Medical Center hospital and outpatient facilities (“**ECRMC**”), currently perform services in Imperial County. AB 918 (2023) formed Submitter for the explicit purpose of providing direct health care services to individuals in Imperial County.

Following the closing of this transaction, Submitter will own ECRMC, but there are no other anticipated post-transaction changes and Submitter will continue to operate and provide services in Imperial County.

**(B) Levels and type of health care services currently offered, such as the full range of reproductive health care and sexual health care services, specialized services for LGBTQ+ populations, labor and delivery services, pediatric services, behavioral health services, cardiac services, and emergency services, and any post-transaction changes thereto.**

**El Centro Regional Medical Center - Hospital**

The Hospital provides a range of medical services, including: cardiopulmonary services; emergency services; gastroenterology services; hepatology services; hematology; intensive care unit; laboratory services; medical surgical services; monoclonal antibody infusion services; mental health services; nutrition services; oncology; outpatient services; pediatrics; primary care services; radiology/imaging services; rehabilitation services, surgical; telehealth services; women’s services; and, wound care.

### **El Centro Regional Medical Center – Outpatient Facilities**

The Outpatient Facilities provide a range of medical services including: cardiology; counseling; gastroenterology; general surgery; geriatric; gynecology; infectious disease; internal medicine; interventional radiology; laboratory services; mental health services; neonatology; nephrology; neurology (pediatric); obstetrics; ophthalmology; orthopedics; pediatrics; podiatry; prenatal care; primary care; pulmonology; radiology services; sleep medicine; telehealth; and, vascular surgery.

Following the closing of this transaction, Submitter will own ECRMC, but there are no other anticipated post-transaction changes and ECRMC will continue to operate and provide the same services currently offered.

#### **(C) Summary that includes the number and type of patients currently served, including, but not limited to, age, gender, race, ethnicity, preferred language spoken, disability status, and payer category, and any post-transaction changes thereto.**

See Exhibit 9.1(C) to the OHCA notice.

There are no expected post-transaction changes hereto for the facilities under Submitter, other than resident turnover in the ordinary course.

#### **(D) Current community needs assessments, charity care, and community benefit programs, and any post-transaction changes thereto.**

El Centro Regional Medical Center participates in a separate Imperial County wide community needs assessment that is conducted by the Imperial County Community Health Improvement Partnership which includes Pioneer Memorial Hospital and all other healthcare constituents in the county. El Centro Regional Medical Center maintains charity care and financial assistance policies that allow patients to receive care for free or reduced prices depending on the patient's insurance coverage and income level. El Centro Regional Medical Center also has an enhanced care management program, which is a no-cost program for eligible managed health plan members with complex health issues or social needs, that provides services for physical health, substance use treatment, behavioral health, and social services.

See Exhibit 9.1 (D) attached Imperial County Community Health Improvement Partnership - 2024 Imperial County Community Health Needs Assessment.

There are no expected post-transaction changes thereto.

#### **(E) Whether Medi-Cal and Medicare patients are currently accepted and any post-transaction changes thereto.**

Medi-Cal and Medicare patients are currently accepted.

There are no expected post transaction changes thereto.

**Schedule 9.3**  
**To**  
**Imperial Valley Healthcare District OHCA Notice**

This Schedule 9.3 is submitted to the Office of Health Care Affordability with respect to the Material Change Notice filed by the Submitter in response to 22 CCR § 97438(b)(10) requiring Submitter to provide a description of potential post-transaction changes to:(A) Ownership, governance, or operational structure of the Submitter and parties to the transaction, (B) the Submitter's employee staffing levels, job security, retraining policies, wages, benefits, working conditions, and/or employment protections, (C) city or county contracts regarding the provision of health care services between the parties to the transaction and cities or counties, and (D) if the Submitter is a provider or a fully integrated delivery system, comparable health care services currently offered by other health care entities within 20 miles of any location where the Submitter offers health care services.

**(A) Description of any potential post-transaction changes to the ownership, governance, or operational structure of the Submitter and parties to the transaction.**

Following the closing of this transaction, Submitter will own and operate ECRMC. Except for the foregoing, there are no other expected post-transaction changes that Submitter is aware of at the time of this submission.

**(B) Description of any potential post-transaction changes to Submitter's employee staffing levels, job security, retraining policies, wages, benefits, working conditions, and/or employment protections.**

Following the closing of this transaction and pursuant to the terms of the Asset Transfer Agreement, ECRMC's business employees shall be offered employment with Submitter. Such hired employees will be offered benefits under Submitter's benefit plans. Generally, hired employees that receive wages and benefits will continue to receive equal or greater wages and benefits under Submitter. There are no other expected post-transaction changes that Submitter is aware of at the time of this submission.

**(C) Description of any potential post-transaction changes to City or county contracts regarding the provision of health care services between the parties to the transaction and cities or counties.**

Except for the assignment of such contracts to Submitter, there are no expected post-transaction changes that Submitter is aware of at the time of this submission.

**(D) Description of any potential post-transaction changes to comparable health care services currently offered by other health care entities within 20 miles of any location where the Submitter offers health care services.**

There are no expected post-transaction changes that Submitter is aware of at the time of this submission.

**Schedule 10.1**  
**To**  
**Imperial Valley Healthcare District OHCA Notice**

This Schedule 10.1 is submitted to the Office of Health Care Affordability with respect to the Material Change Notice filed by the Submitter in response to 22 CCR § 97438(b)(3), requiring Submitter to provide the following information and description of the other entities that are a party to the transaction, including: (A) The entity’s business (including business lines or segments);(B) Ownership type (corporation, partnership, limited liability company, etc.), including any affiliates, subsidiaries, or other entities that control, govern, or are financially responsible for the health care entity or that are subject to the control, governance, or financial control of the health care entity;(C) Governance and operational structure (including ownership of or by a health care entity);(D) Annual revenue for the three most recent fiscal years used in calculating revenue in accordance with section 97435(d); (E) Current county or counties of operation; (F) If a health care provider or a fully integrated delivery system is a party to, or the subject of, the transaction, include a summary of provider type (hospital, physician group, etc.), facilities owned or operated, service lines, number of staff, geographic service area(s), and capacity (e.g., number of licensed beds) or patients served (e.g., number of patients per county) in California in the last year; (G) Primary and threshold languages, as determined by the Department of Health Care Services, used; (H) If a payer or a fully integrated delivery system is a party to, or the subject of, the transaction, include a list of all counties where coverage is sold, counties in which they are licensed to operate by the Department of Managed Health Care and/or the Department of Insurance, and the number of enrollees residing in each listed county in the year preceding the transaction; and (I) Include the business addresses, if known, of all new entities that will be formed as a result of the transaction.

**Preamble Description**

The party’s name is El Centro Regional Medical Center (“**ECRMC**”). The business website of ECRMC is <https://www.ecrmc.org>. ECRMC’s business mailing address is 1415 Ross Avenue El Centro, CA 92243.

**(A) The entity’s business (including business lines or segments);**

El Centro Community Hospital, doing business as, El Centro Regional Medical Center is a separate public agency and enterprise operation of the City of El Centro organized and operated under the provisions of Articles 7 and 8, Chapter 5, Part 2, Division 3, Title 4 of the California Government Code, commencing with Section 37600, dealing with municipal hospitals (hereafter referred to as “Municipal Hospital Law”) and Article III, Chapter 13 of the El Centro City Code (hereafter referred to as the “Hospital Ordinance”). El Centro Regional Medical Center operates a 161 bed general acute care hospital (“Hospital”), along with two specialized departments, and provides various outpatient services in outpatient centers, including two rural health clinic centers, (“Outpatient Facilities”) in surrounding locations that provide healthcare services to the Imperial Valley in California. The services provided by the Hospital and Outpatient Facilities are described below.

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### El Centro Regional Medical Center - Hospital

The Hospital provides a range of medical services, including: cardiopulmonary services; emergency services; gastroenterology services; hepatology services; hematology; intensive care unit; laboratory services; medical surgical services; monoclonal antibody infusion services; mental health services; nutrition services; oncology; outpatient services; pediatrics; primary care services; radiology/imaging services; rehabilitation services, surgical; telehealth services; women's services; and, wound care.

### El Centro Regional Medical Center – Outpatient Facilities

The Outpatient Facilities provide a range of medical services including: cardiology; counseling; gastroenterology; general surgery; geriatric; gynecology; infectious disease; internal medicine; interventional radiology; laboratory services; mental health services; neonatology; nephrology; neurology (pediatric); obstetrics; ophthalmology; orthopedics; pediatrics; podiatry; prenatal care; primary care; pulmonology; radiology services; sleep medicine; telehealth; and, vascular surgery.

**(B) Ownership type (corporation, partnership, limited liability company, etc.), including any affiliates, subsidiaries, or other entities that control, govern, or are financially responsible for the health care entity or that are subject to the control, governance, or financial control of the health care entity;**

Other Ownership

**(C) Governance and operational structure (including ownership of or by a health care entity);**

Although the City of El Centro holds the California Department of Public Health, general acute care hospital license for El Centro Regional Medical Center, El Centro Regional Medical Center is a separate public agency and enterprise operation of the City of El Centro organized and operated under Articles 7 and 8, Chapter 5, Part 2, Division 3, Title 4 of the California Government Code, commencing with Section 37600, dealing with Municipal Hospital Law and Hospital Ordinance.

**(D) Annual revenue for the three most recent fiscal years used in calculating revenue in accordance with section 97435(d);**

2022: \$168,771,020.

2023: \$146,442,682.

2024: \$151,052,650.

**(E) Current county or counties of operation;**

Imperial County.

**(F) If a health care provider or a fully integrated delivery system is a party to, or the subject of, the transaction, include a summary of provider type (hospital, physician group, etc.), facilities owned or operated, service lines, number of staff, geographic service area(s),**

**and capacity (e.g., number of licensed beds) or patients served (e.g., number of patients per county) in California in the last year;**

**El Centro Regional Medical Center**

- Provider type: General Acute Care Hospital
- Facility owned or operated: El Centro Regional Medical Center and various outpatient centers.
- Service lines: See Section (A) above.
- Number of staff: 929
- Geographic service area(s): Imperial County
- Capacity/licensed beds: 161 General Acute Care Beds

**(G) Primary and threshold languages, as determined by the Department of Health Care Services, used.**

English and Spanish.

**(H) If a payer or a fully integrated delivery system is a party to, or the subject of, the transaction, include a list of all counties where coverage is sold, counties in which they are licensed to operate by the Department of Managed Health Care and/or the Department of Insurance, and the number of enrollees residing in each listed county in the year preceding the transaction.**

Not applicable. ECMRC is not a payer or a fully integrated delivery system.

**(I) Include the business addresses, if known, of all new entities that will be formed as a result of the transaction.**

Not applicable.

**Schedule 10.2**  
**To**  
**Imperial Valley Healthcare District OHCA Notice**

This Schedule 10.1 is submitted to the Office of Health Care Affordability with respect to the Material Change Notice filed by the Submitters in response to 22 CCR § 97438(b)(3), requiring Submitter to provide the following information and description of the other entities that are a party to the transaction, including: (A) The entity’s business (including business lines or segments);(B) Ownership type (corporation, partnership, limited liability company, etc.), including any affiliates, subsidiaries, or other entities that control, govern, or are financially responsible for the health care entity or that are subject to the control, governance, or financial control of the health care entity;(C) Governance and operational structure (including ownership of or by a health care entity);(D) Annual revenue for the three most recent fiscal years used in calculating revenue in accordance with section 97435(d); (E) Current county or counties of operation; (F) If a health care provider or a fully integrated delivery system is a party to, or the subject of, the transaction, include a summary of provider type (hospital, physician group, etc.), facilities owned or operated, service lines, number of staff, geographic service area(s), and capacity (e.g., number of licensed beds) or patients served (e.g., number of patients per county) in California in the last year; (G) Primary and threshold languages, as determined by the Department of Health Care Services, used; (H) If a payer or a fully integrated delivery system is a party to, or the subject of, the transaction, include a list of all counties where coverage is sold, counties in which they are licensed to operate by the Department of Managed Health Care and/or the Department of Insurance, and the number of enrollees residing in each listed county in the year preceding the transaction; and (I) Include the business addresses, if known, of all new entities that will be formed as a result of the transaction.

**Preamble Description**

The party’s name is the City of El Centro (the “**City**”). The business website of the City is <https://www.cityofelcentro.org/>. ECRMC’s business mailing address is 1415 Ross Avenue, El Centro, CA 92243.

**(A) The entity’s business (including business lines or segments);**

The City is a municipal corporation and charter city duly organized, validly existing and in good standing under the laws of the State of California.

**(B) Ownership type (corporation, partnership, limited liability company, etc.), including any affiliates, subsidiaries, or other entities that control, govern, or are financially responsible for the health care entity or that are subject to the control, governance, or financial control of the health care entity;**

Other.

**(C) Governance and operational structure (including ownership of or by a health care entity);**

The City is a municipal corporation and charter city that is operated by a Council/Manager form of government. Specifically, the City Council is composed of five elected members who set policy, and the City Manager ensures that the City's services are performed to the highest standard in accordance with the City Council's policies.

**(D) Annual revenue for the three most recent fiscal years used in calculating revenue in accordance with section 97435(d);**

2022: \$34,256,142

2023: \$41,327,951

2024: \$44,208,751

**(E) Current county or counties of operation;**

Imperial County.

**(F) If a health care provider or a fully integrated delivery system is a party to, or the subject of, the transaction, include a summary of provider type (hospital, physician group, etc.), facilities owned or operated, service lines, number of staff, geographic service area(s), and capacity (e.g., number of licensed beds) or patients served (e.g., number of patients per county) in California in the last year;**

Not applicable. The City is not a health care provider.

**(G) Primary and threshold languages, as determined by the Department of Health Care Services, used.**

Not applicable. The City is not a health care provider.

**(H) If a payer or a fully integrated delivery system is a party to, or the subject of, the transaction, include a list of all counties where coverage is sold, counties in which they are licensed to operate by the Department of Managed Health Care and/or the Department of Insurance, and the number of enrollees residing in each listed county in the year preceding the transaction.**

Not applicable. The City is not a payer or a fully integrated delivery system.

**(I) Include the business addresses, if known, of all new entities that will be formed as a result of the transaction.**

Not applicable.