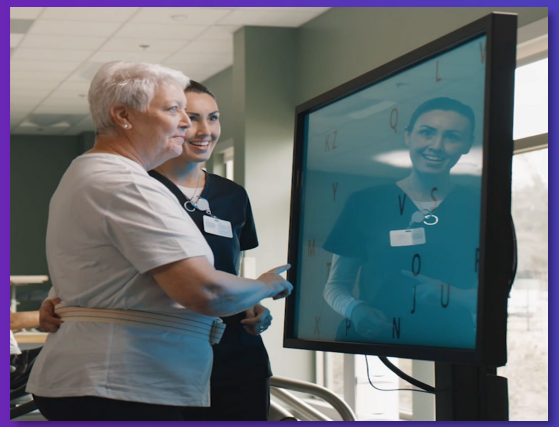






Encompass Health

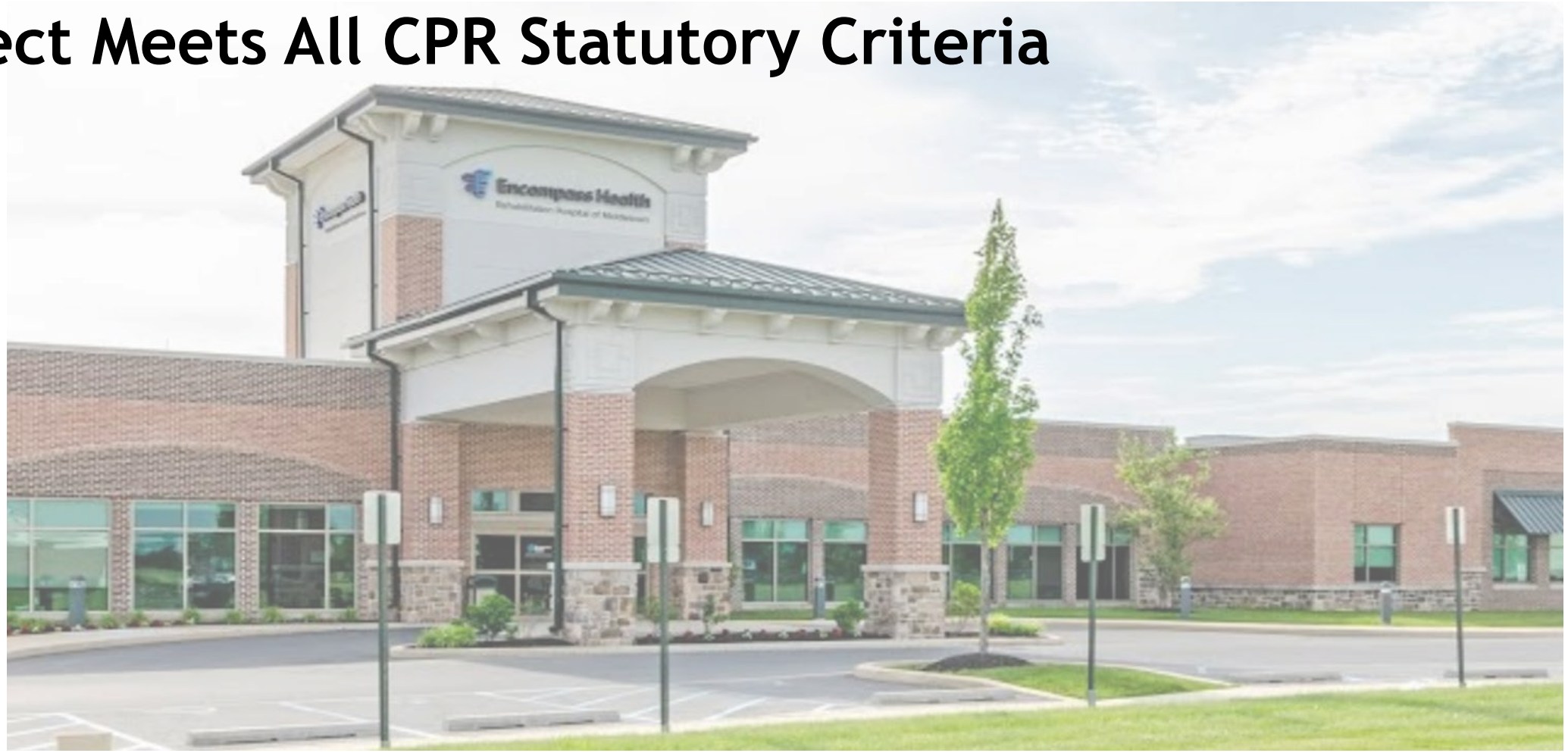


Certificate of Public Review
Encompass Health Rehabilitation Hospital of Bear, LLC

January 30, 2026

Encompass Bear: Outline of Today's Presentation

I. Project Overview
II. Encompass is a Highly-Qualified Applicant
III. Project Meets All CPR Statutory Criteria



I. Project Overview*



- 40-bed hospital with all private rooms and private baths with sufficient space for family to stay overnight
- Large indoor gym with specialized equipment and technology, ADL suite, and outdoor therapy area
- Dialysis suite for on-site care, bariatric rooms, and isolation rooms, among other features

*Please see Appendix I for additional information.

II. Encompass is a Highly-Qualified Applicant*



- Encompass Health is the nation's largest owner and operator of rehabilitation hospitals
- Encompass Health's ***sole purpose*** is to own and operate post-acute Inpatient Rehabilitation Facilities (IRFs)
- Encompass Health's experience and financial strength ensure that its patients & staff have resources they need
- Encompass Health has a history of providing high quality care in Delaware at its Middletown Rehab Hospital

*Please see Appendix II for additional information.

III. Project Meets all CPR Statutory Criteria

Meets Criterion	Certificate of Public Review Statutory Criteria
✓	1. The relationship of the proposal to the Health Resources Management Plan (HRMP).
✓	2. The need of the population for the proposed project.
✓	3. The availability of less costly and/or more effective alternatives to the proposal, including alternatives involving the use of resources located outside the state.
✓	4. The relationship of the proposal to the existing health care delivery system.
✓	5. The immediate and long-term viability of the proposal in terms of the applicant's access to financial, management, and other necessary resources.
✓	6. The anticipated effect of the proposal on the costs of and charges for health care.
✓	7. The anticipated effect of the proposal on the quality of health care.

Review Consideration 1:
Conformity with the Health Resources Management Plan (Access, Quality, Cost)



Access: Patients & families will have access to needed, high quality services close to home

Quality: Encompass Health provides high-quality services in Delaware and nationally

Cost: Encompass provides cost-effective care

Review Consideration 1: ***ACCESS***
Proposed Project Provides Needed Services Closer to Home for Service Area Population

Defined ZIP Code Service Area

Considers proximity and ease of access to the proposed IRF by patients and families in a densely populated area of New Castle County and contiguous Cecil County Maryland.



Encompass Proposed Inpatient Rehabilitation Facility

Existing or Approved Inpatient Rehabilitation Facility

Source (Map): ArcGIS.
*Note: The approved New Spring Rehabilitation Hospital is shown on the map.

Review Consideration 1: ***QUALITY***
Conformity with the Health Resources Management Plan



AMERICA'S BEST PHYSICAL REHABILITATION CENTERS 2020-2025
Newsweek
statista
AMERICA'S MOST AWARDED LEADER IN INPATIENT REHABILITATION

Patient satisfaction

4.7/5 ★★★★½

1,223 Ratings, 504 Comments

5		1063 reviews
4		96 reviews
3		39 reviews
2		7 reviews
1		18 reviews

Encompass Health Rehabilitation Hospital of Middletown

Our accreditations and certifications

THE JOINT COMMISSION · NATIONAL QUALITY APPROVAL

Our hospital is committed to meeting the rigorous standards of The Joint Commission, the nation's oldest and largest healthcare accreditor. Recognition from The Joint Commission shows our hospital's commitment to delivering safe, high-quality care.

Stroke Rehabilitation

Brain Injury Rehabilitation

Hip Fracture Rehabilitation

Spinal Cord Rehabilitation

4 Disease-specific Certifications

Notes: patient satisfaction survey data through January 12, 2026.
Encompass Middletown is one of only 42 Encompass hospitals nationally that has 4 or more Disease-specific Certifications.

Review Consideration 1: ***QUALITY***
Conformity with the Health Resources Management Plan

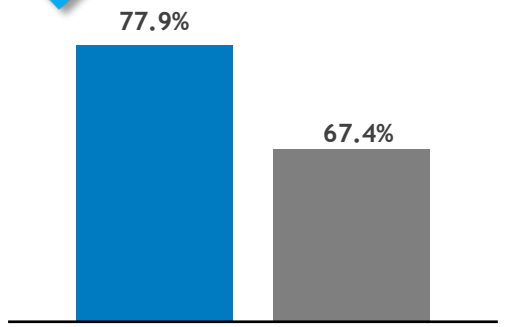


Encompass Health Rehabilitation Hospital of Middletown

CMS Medicare Compare Data

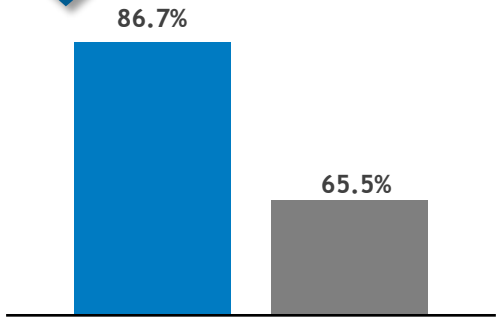
- Encompass Middletown
- National Average

Discharge to Community



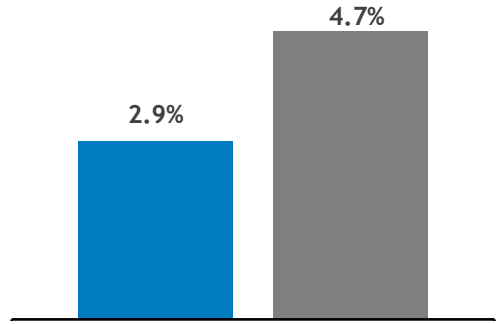
Higher is better

Functional Outcomes



Higher is better

Readmissions During IRF Stay



Lower is better

Source: Centers for Medicare & Medicaid Services (CMS) Care Compare data (most recent available as of 01/12/26); time periods of data are 10/01/22-9/30/24 for discharge to community; 4/01/24-3/31/25 for functional outcomes; and 10/01/22-9/30/24 for rate of potentially preventable hospital readmissions during the IRF stay.

Review Consideration 1: ***COST***
Conformity with the Health Resources Management Plan



- Encompass Health is a cost-effective provider
- The proposed IRF will ensure the right care in the right setting, reducing hospital readmissions & ED visits
- IRF services are more cost-effective over the long-term than less intensive rehabilitation services (*e.g.*, SNF, HHA)

Encompass Provides Cost-Effective Care

CPR Application Figure 1

Encompass Health's clinical expertise and efficiency reduce high cost outlier stipends. As such, Medicare pays Encompass Health less per discharge on average despite comparable acuity, lowering costs for the overall healthcare system.

	# of IRFs	Avg. beds per IRF	Avg. Medicare discharges per IRF[5]	Avg. est. total payment per discharge for FY 2026
Encompass Health[4] =	163	66	926	$25,357
Free-standing = (Non-Encompass Health)	226	55	586	$27,938
Hospital units =	776	25	207	$28,376
Total[6]	1,165	36	381	$27,220

- The average estimated total payment per discharge, as stated, does not reflect a 2% reduction for sequestration.[7]

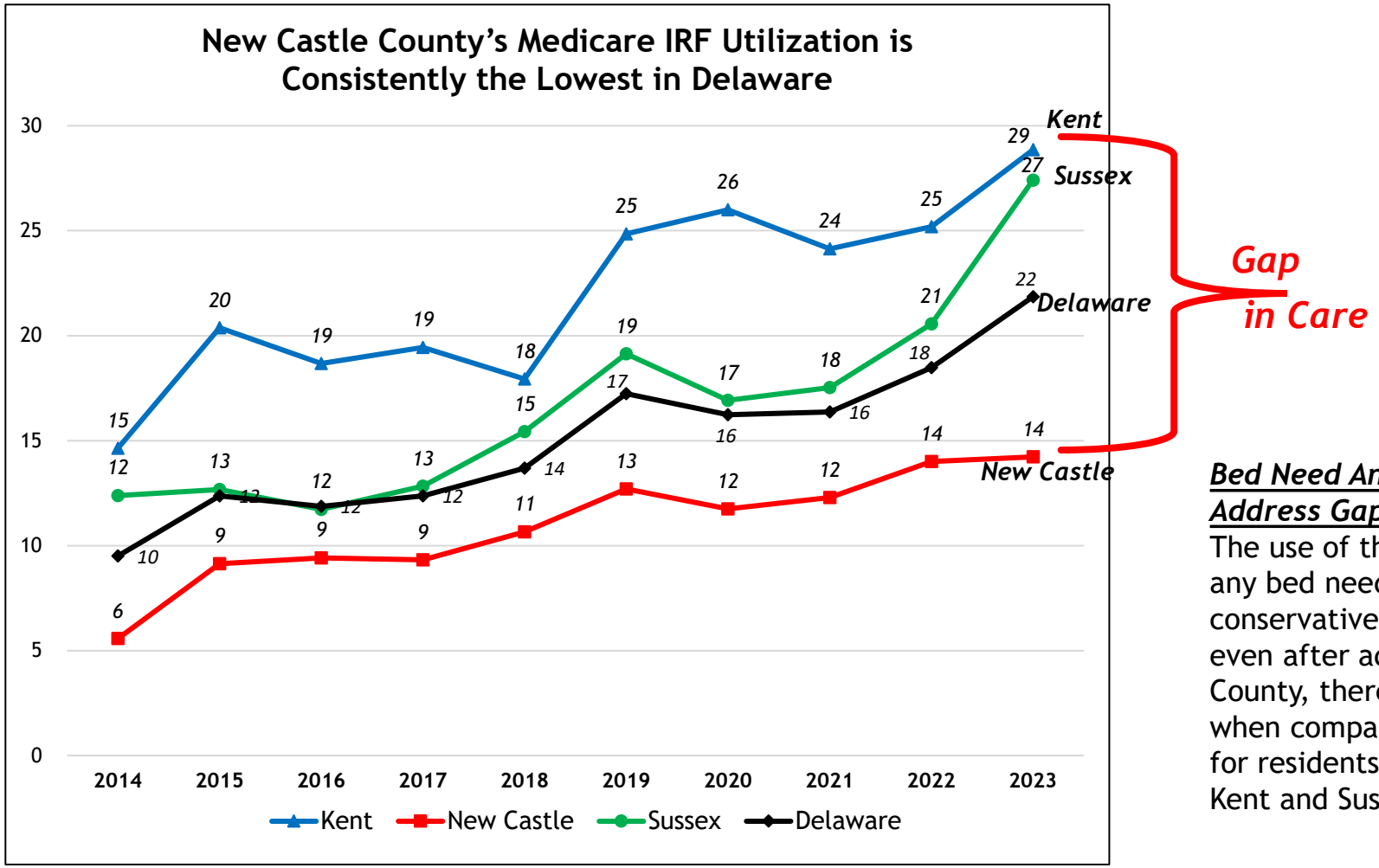
Encompass Health produces high-quality, cost-effective outcomes through:

- *"Best Practices" clinical protocols*
- *Supply chain efficiencies*
- *Sophisticated management information systems*
- *Economies of scale*

Source: Encompass Health Investor Reference Book, Published June 25, 2025, pg. 15 and 60-62 for end notes (https://investor.encompasshealth.com/company-profile/default.aspx).

Review Consideration 2:
Need of the Population for the Proposed Project

CPR Application Figure 2



Bed Need Analyses Only Partially Address Gap in Care:

The use of the statewide average in any bed need calculation is conservative because it assumes that even after adding beds in New Castle County, there will remain a gap in care when comparing access to IRF services for residents of New Castle County to Kent and Sussex Counties.

New Castle County's Medicare FFS IRF discharges per 1,000 beneficiaries is *far below* Kent and Sussex counties' discharge rates, with those counties' utilization rates nearly double that of New Castle County.

Source: CMS Public Use Files ("PUF"); utilization rates are for Medicare Fee-for-Service ("FFS") patients.

Review Consideration 2:
Need of the Population for the Proposed Project – *Using Encompass' Bed Need Calculations*

There is a quantifiable need for additional beds to address the identified gap in care

CPR Application Table 5 Encompass Bear Defined ZIP Code Service Area Projected Inpatient Rehabilitation Bed Need, 2030	
Calculations	**2030 Projections**
Projected Service Area Population Ages 65 and Over	127,097
Multiplied by the Statewide CY23 Percent of Medicare FFS Beneficiaries	69.6%
***Equals* Total Projected Medicare FFS Beneficiaries in Service Area**	**88,460**
Multiplied by Statewide Avg. IRF Disch. Rate/1,000 Medicare FFS Beneficiaries	22
Equals Projected Service Area IRF Discharges, Medicare FFS (only)	1,946
Divided by Percentage of Total IRF Discharges Nationally that are Medicare FFS	51.0%
***Equals* Projected Service Area IRF Discharges, All Payers**	**3,816**
Multiplied by Current Delaware Statewide IRF Patient Length of Stay	10.2
***Equals* Projected 2030 Service Area IRF Days**	**38,923**
Total Service Area IRF Beds Needed at 100% Occupancy	107
Divided by 'Target' IRF Occupancy Rate	85%
***Equals* Projected Gross IRF Bed Need in Service Area**	**126**
Minus Existing & Approved Licensed IRF Beds in Service Area	73
***Equals* Net IRF Bed Need in Service Area**	**53**

Sources: Claritas Population Projections; CMS Geographic Variation Public Use Files; MedPAC Report to Congress, March 2025; and American Hospital Directory.
Note: numbers may not calculate exactly as shown due to rounding.

Calculation conservatively:

(1) Holds 2030 planning horizon constant rather than maintaining a 5-year horizon to 2031.

(2) Uses statewide average IRF rate in calculations rather than average of Kent & Sussex Counties utilization rates, which is 28.

(3) Assumes no in-migration of patients from outside 29 ZIP Code area (northern New Castle County and portion of Cecil County Maryland) to the existing or approved IRFs (ChristianaCare & Onix) or the proposed EH Bear IRF.

Review Consideration 2:
Need of the Population for the Proposed Project – *As stated by ChristianaCare and Onix*

New Spring Rehab Hospital Principal Steve Silver stated in the Sept. 3, 2025 Public Hearing:

> *"We think the demand is more than we stated….there's a disparity in where beds are located. And there's no question there's demand. And there's no question that the occupancy rates are high."*

ChristianaCare Chief Strategy Officer Jennifer Swartz stated in the Jan. 7, 2026 Public Hearing:

> *"During the time that New Spring was working on its application, had filed it with the Board, we were negotiating a partnership with New Spring…."*

ChristianaCare Onix IRF CPR Application stated:

- "the IRF will serve New Castle County and surrounding communities, addressing growing demand for rehabilitation care driven by a range of acute and chronic medical conditions."
- "forecasts show that inpatient acute rehab admissions will grow 18% over the next ten years. Specifically, the top 13 Diagnostic Related Groups (DRGs) that meet IRF-eligible criteria such as stroke, traumatic brain injury, fractures (hip and femur), and spine fusion are expected to experience the greatest growth."
- "Delaware is ranked in the top three highest stroke mortality rate in the US, highlighting the importance of access to high-quality IRF services for stroke survivors and others in need of intensive rehabilitation."
- "the demand for inpatient rehabilitation services in the state is expected to continue growing."
- Volume was forecasted "based on projected growth of the aging population in the primary and secondary service area *along with the forecasted growth in IRF eligible diagnoses*". [emphasis added]

Sources: Public Hearing transcript pp. 44-45, September 3, 2025; Public Hearing transcript p. 43, January 7, 2026; ChristianaCare Onix LLC CPR Application pp. 15, 21, 27, 29, and 39, respectively.

Review Consideration 2:
Need of the Population for the Proposed Project - *"Apples to Apples Comparison"*

CPR Considerations & Recognitions by Respective IRF Applicants	Onix New Spring	ChristianaCare Onix	Encompass Health
Gap in IRF care exists in proposed service area	✓	✓	✓
Demand for IRF services is growing	✓	✓	✓
Projected population is increasing & aging	✓	✓	✓
SNF is not an appropriate substitute for IRF	✓	✓	✓
There is need for additional IRF beds	✓	✓	✓
Analysis based on 'who beds serve' not where beds sit	✗	✗	✓

The inclusion of Encompass Middletown beds in any bed need calculation must consider the significant in-migration of patients from outside New Castle County (approx. 40%) to correlate projected population served to beds available for that population.

3 Applicants agree: additional IRF beds are needed.

Disagreement on the number of beds needed is primarily due to *differences* in:

(1) Service area definition & resulting inclusion of Encompass Middletown 50 beds; and,
(2) In-migration factor needed to reflect 'who beds serve' not where they sit.

Review Consideration 2:
Need of the Population for the Proposed Project – *Using ChristianaCare Onix Calculations*

There is a quantifiable need for additional beds using ChristianaCare Onix (CCO) calculations adjusted for current 5-year planning horizon and correcting for CCO's bed need distortion*

Calculation corrections:

(1) Maintain the 5-year planning horizon (2031).

(2) Match the population projection to defined Primary Service Area.

(3) Add an in-migration factor to conservatively account for approximate 10% in-migration to CC IRF and approximately 40% in-migration to EH Middletown.

ChristianaCare Onix Bed Need Methodology	
Calculations for Proposed IRF Bed Need (Including Encompass Middletown Beds)	**2031 Projections**
Projected Primary Service Area Population Aged 65 and Over	154,639
Multiplied by Statewide CY23 Percent of Pop 65+ Who are Medicare FFS Beneficiaries	68%
Equals Total Projected Medicare FFS Beneficiaries in Service Area	105,155
Multiplied by Statewide Avg. IRF Discharge Rate/1,000 FFS Beneficiaries	22
Equals Projected Service Area Rehab Discharges, Medicare FFS Only	2,313
Divided by National % Rehab Discharges that are Medicare FFS	51%
Equals Projected Service Area Rehab Discharges, All Payer	4,537
Plus In-migration factor	10%
Equals Total Projected Rehab Admissions	4,991
Multiplied by Regional IRF ALOS	10.8
Equals Projected Service Area IRF Days	53,900
Service Area Rehab Beds Needed at 100% Occupancy (Average Daily Census)	148
Divided by Target Acute Rehab Occupancy Rate	85.0%
Equals Gross Bed Need for IRF Beds in CCO Primary Service Area	174
Minus Existing & Approved Rehab Beds in Primary Service Area	123
Equals Additional IRF Bed Need in CCO Defined Primary Service Area	51

Sources: CMS Geographic Variation Public Use Files; MedPAC Report to Congress, March 2025; American Hospital Directory; DE Population Consortium, 2024v0; Claritas; and ChristianaCare Onix IRF, LLC Certificate of Public Review.
Note: numbers may not calculate exactly as shown due to rounding.

PSA population:
New Castle County DE and Cecil County MD

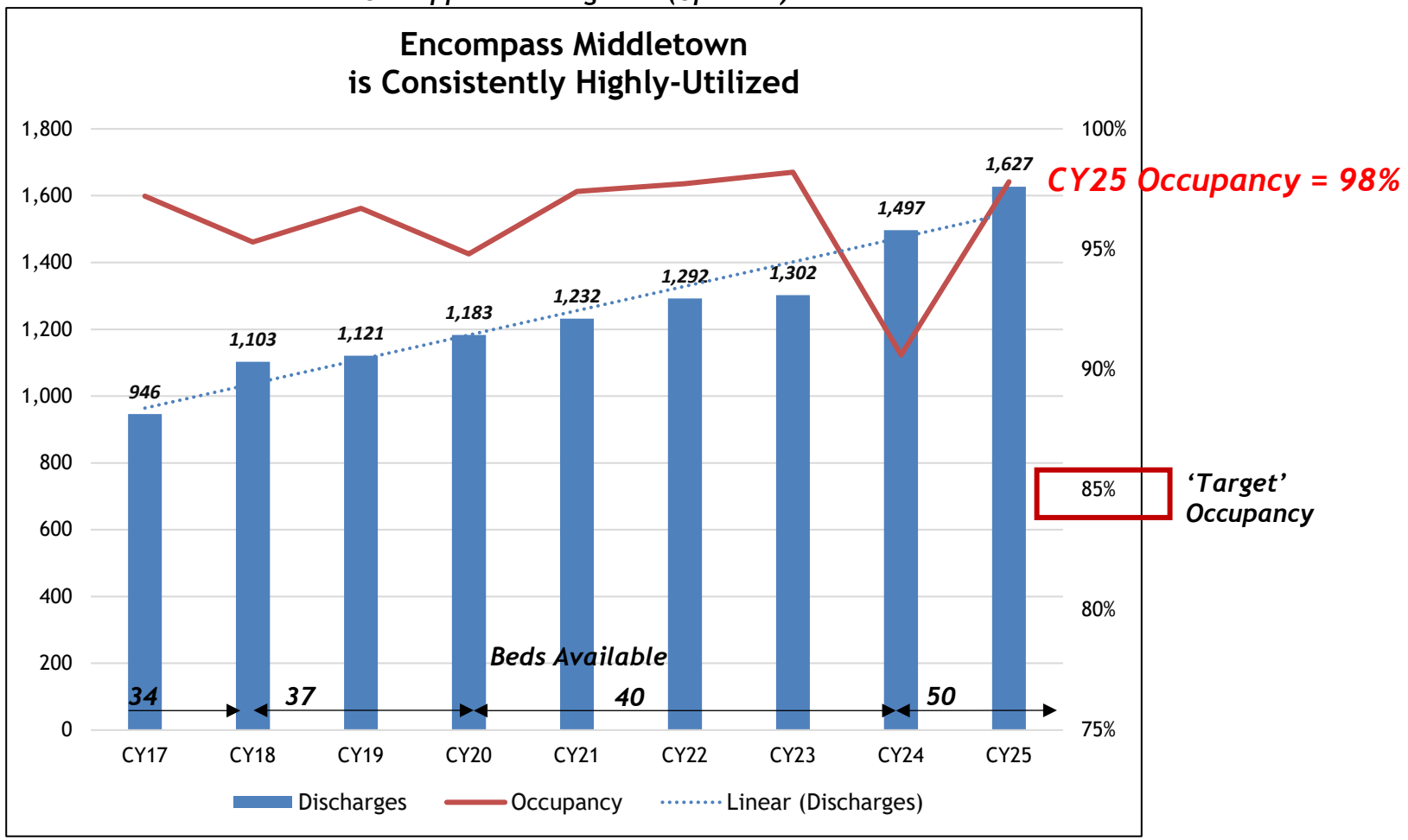
Eliminates 'bed distortion':
Conservative factor to correlate inventory of beds with population served by those beds

IRF beds include:
Encompass Middletown (50)
ChristianaCare (40)
New Spring Rehab (33)

*Sources and notes: January 7, 2026 Public Hearing Presentation by ChristianaCare (CC) stated that approximately 60% of Encompass Middletown's patients originate countywide; thus, approximately 40% of Encompass Middletown's patients reside *outside* New Castle County. ChristianaCare Onix application documented that approximately 90% of ChristianaCare's IRF patients reside in New Castle and Cecil County (Maryland) combined; thus approximately 10% of ChristianaCare's IRF patients reside *outside* its defined Primary Service Area of New Castle County Delaware and Cecil County Maryland.

Encompass Middletown's high and increasing utilization supports need for the project

CPR Application Figure 5 (Updated)



Source: Encompass Middletown internal data. Note: for much of CY23, the hospital only had 39 beds available because of the temporary closure of one (1) bed during construction to add 10 beds. Beds available are shown by calendar year.

Review Consideration 2:
Need of the Population for the Proposed Project

Existing IRF utilization further supports need for the project

CPR Application Table 6
Statewide Inpatient Rehabilitation Facilities' Utilization, 2020-2024

Hospital	City, County	Indicator	2020	2021	2022	2023	2024
Encompass Middletown	Middletown, New Castle	IRF Beds	40	40	40	40	50
		Patient Days	13,616	14,136	14,228	14,167	15,341
		Occupancy	93.0%	96.8%	97.5%	97.0%	83.8%
Christiana Care	Wilmington, New Castle	IRF Beds	39	39	39	30	30
		Patient Days	7,182	7,183	7,018	7,869	6,998
		Occupancy	50.3%	50.5%	49.3%	71.9%	63.7%
PAM Rehab Georgetown*	Milford, Sussex County	IRF Beds	--	--	--	--	34
		Patient Days	--	--	--	--	11,627
		Occupancy	--	--	--	--	93.4%
Bayhealth Sussex Campus IRF**	Milford, Sussex County	IRF Beds	40	40	40	40	40
		Patient Days	11,642	10,282	11,080	11,709	11,528
		Occupancy	79.5%	70.4%	75.9%	80.2%	78.7%
PAM Rehab Dover	Dover, Kent County	IRF Beds	34	34	34	34	34
		Patient Days	11,895	12,221	12,162	12,002	11,971
		Occupancy	95.6%	98.5%	98.0%	96.7%	96.2%
Delaware Total		IRF Beds	153	153	153	144	188
		Patient Days	44,335	43,822	44,488	45,747	57,465
		Occupancy	**79.2%**	**78.5%**	**79.7%**	**87.0%**	**83.5%**

Source: American Hospital Directory (ahd.com); most recent data available as of January 2026.
Notes: Data reflect Medicare fiscal year for each hospital shown. Encompass Middletown data shown are for 12 months ending September 30, thus will not match the CY data shown elsewhere. 2020 and 2024 Occupancy is divided by 366 days due to leap year. *PAM Rehab of Georgetown's first full FY was 2024. (Partial year 2023 data not included.) **Bayhealth Sussex Hospital's inpatient rehabilitation unit closed in 2025 following the opening of a new freestanding facility on the Sussex Campus, Pam Health Rehab Hospital Sussex, a joint venture between Bayhealth and PAM Health.

Patient Days increased 30% from 2020-2024, which is an annual increase of 6.7%.

Review Consideration 3:
Availability of Less Costly and/or More Effective Alternatives

There is no less costly and/or more effective alternative to the project



✗ ***Status Quo:*** Gap in Care will remain & residents will forego rehab altogether or choose less intensive services

✗ ***SNF Care:*** Significant differences between SNF & IRF result in differences in patients' outcomes & functionality

✓ ***Proposed Bear IRF:*** High quality care close to home for service area residents in need of intensive inpatient rehab

Post-acute SNF care is not an appropriate substitute for IRF

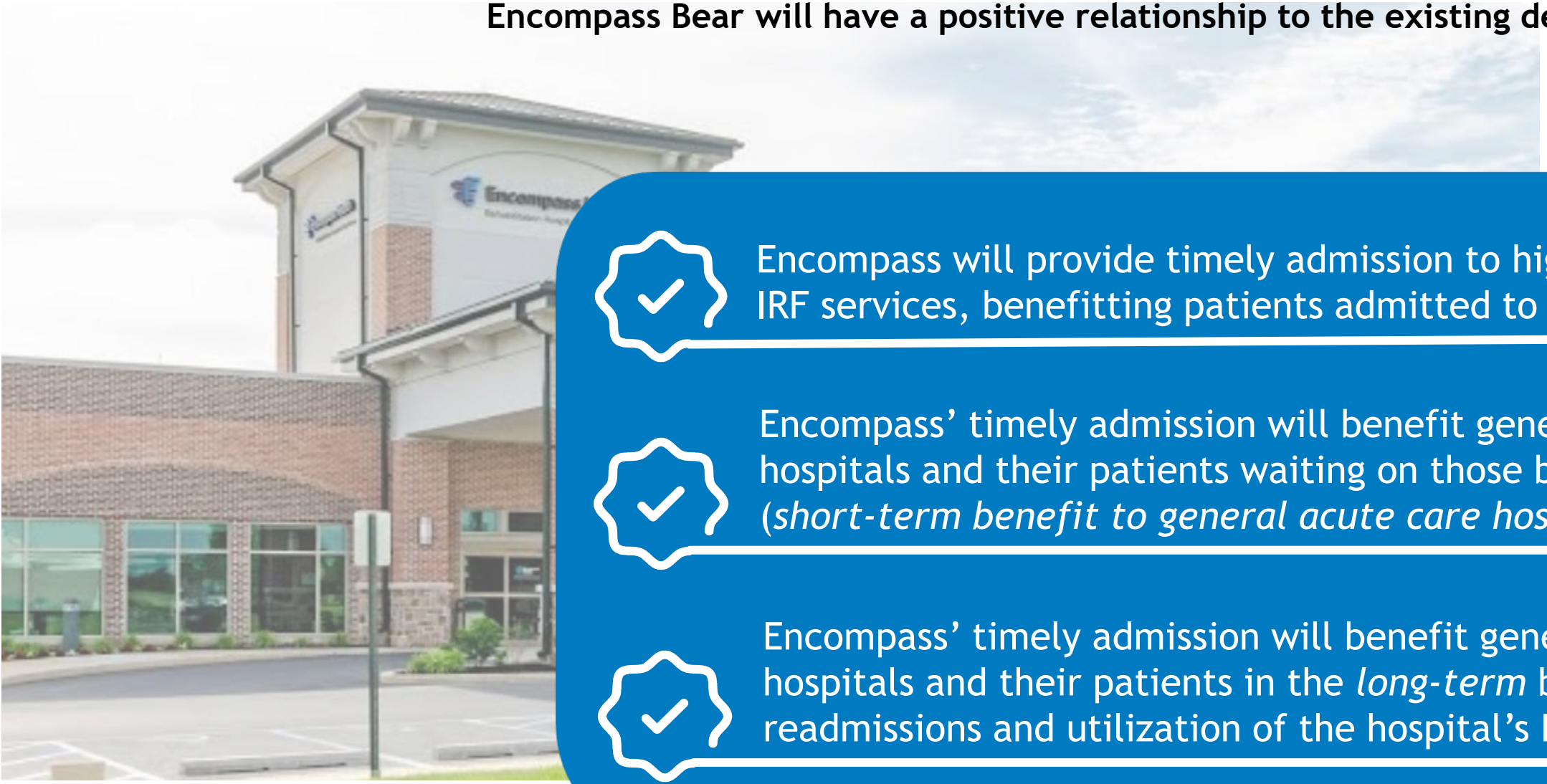
CPR Application Figure 6 (Updated)
Differences between IRFs and SNFs

Required by Medicare	Inpatient Rehabilitation Hospital	Nursing Home
Minimum Stay at the Acute	None	3 days
Physician Visits	Min. 3 times per week	Min. ~1x/month or every 30 days
Rehabilitation Program	Min. 3 hours per day, 5 days a week or 15 hours over 7 days	Not required
Multi-Disciplinary Team Approach/ Coordinated Program of Care	Required	Not required
MD or DO Rehabilitation Director	Required	Not required
RN Oversight and Availability	24 hours per day	Min. 8 consecutive hours per day
Nursing Training and Expertise	Rehabilitation Specialty Expertise	None
Discharge to Community (Industry Avg.)	**67.2%**	**50.9%**
Encompass Health	**70.3%**	

Sources: CMS regulations; CY25 data; and Report to the Congress: Medicare Payment Policy, March 2025 ("March 2025 MedPAC Report").
Notes: IRF and SNF discharges to community (industry avg.) based on most recent CMS data available, reflecting the national median risk-standardized rates of successful discharge to the community for FY22 and FY23 combined. Data exclude readmissions within 30 days.
Encompass Health's discharge data (calculated from CMS data and also excluding readmissions within 30 days) is updated to reflect CY25 data.

Review Consideration 4:
The Relationship of the Project to the Existing Health Care Delivery System

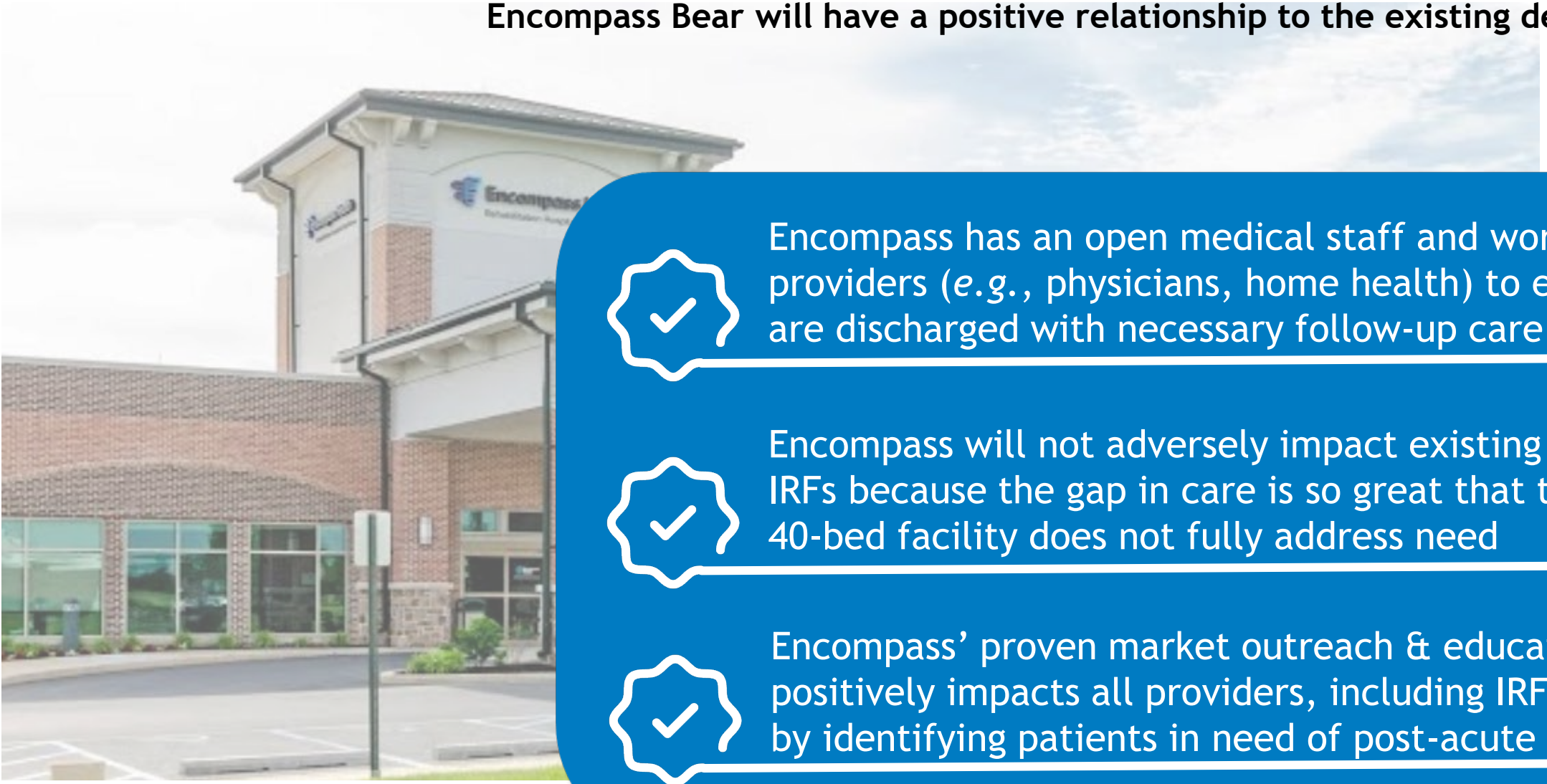
Encompass Bear will have a positive relationship to the existing delivery system



- Encompass will provide timely admission to high quality IRF services, benefitting patients admitted to its IRF
- Encompass' timely admission will benefit general acute care hospitals and their patients waiting on those beds (*short-term benefit to general acute care hospitals*)
- Encompass' timely admission will benefit general acute care hospitals and their patients in the *long-term* by reducing readmissions and utilization of the hospital's ED

Review Consideration 4:
The Relationship of the Project to the Existing Health Care Delivery System

Encompass Bear will have a positive relationship to the existing delivery system



- Encompass has an open medical staff and works with local providers (*e.g.*, physicians, home health) to ensure patients are discharged with necessary follow-up care
- Encompass will not adversely impact existing or approved IRFs because the gap in care is so great that the proposed 40-bed facility does not fully address need
- Encompass' proven market outreach & education positively impacts all providers, including IRFs and SNFs by identifying patients in need of post-acute rehab care

Encompass Bear will have a positive relationship to the existing delivery system by providing needed beds; it will not "over-bed" the region as claimed by ChristianaCare

ChristianaCare Chief Strategy Officer Jennifer Swartz stated in the Jan. 7, 2026 Public Hearing:

> *"if we are over-bedded, it can result in over-utilization of these services because of the financial pressures to push individuals who may not really need the inpatient level of rehabilitation into facilities."*

That statement ***contradicts ChristianaCare Onix statements in their CPR*** and the following reality regarding IRF services:

- "IRFs must meet strict admission and compliance standards set by the Centers for Medicare & Medicaid Services ("CMS")….IRFs undergo Medicare audits to ensure compliance with patient selection and care standards, emphasizing appropriate patient populations who benefit from intensive inpatient rehab." (*Source: ChristianaCare Onix CPR Application p. 16.)*
- One of the strict IRF admission requirements patients must meet is the ability to participate in a minimum of 3 hours of therapy per day, 5 days/week.
- Encompass Bear is a post-acute care provider that will receive referrals for admissions; it cannot self-refer patients to its facility to "push individuals" to fill its beds.

Sources: Public Hearing transcript p. 45, September 3, 2025 and ChristianaCare Onix LLC CPR Application p. 16.

Review Consideration 5:
Access to Financial, Management and Other Necessary Resources

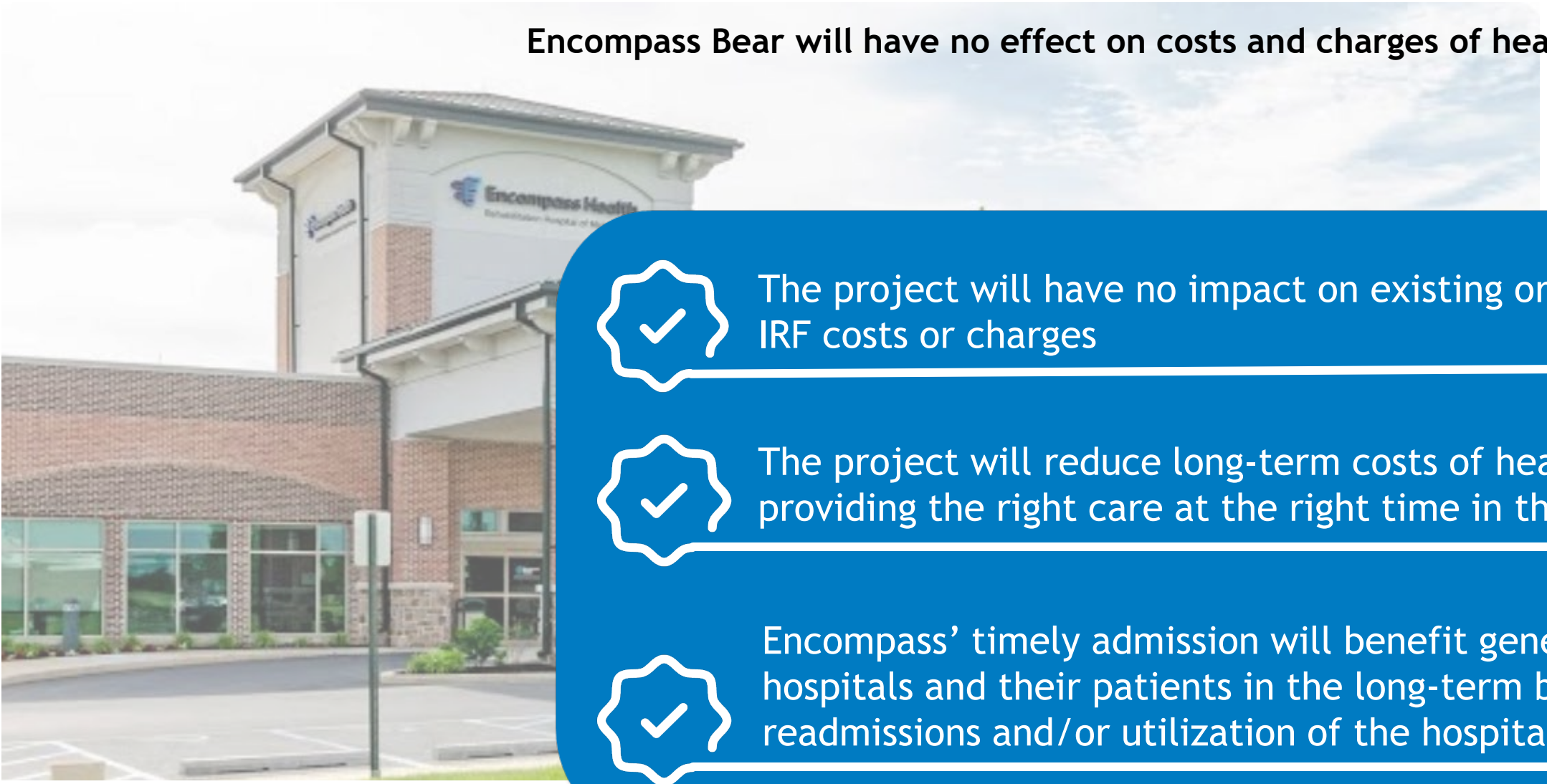
Encompass Bear will have access to financial, management and other resources



- Encompass has sufficient funds for completion of the project in addition to its other ongoing obligations
- Project is financially feasible in the short (Project Year 2) and long-term
- Encompass will utilize its national recruiting strategy and clinical teaching affiliations with universities, colleges, and technical schools throughout the US (and DE) to assist in its recruitment of staff for the project
- Bear Rehab Hospital will have access to programs, policies, technologies, & corporate support services of Encompass

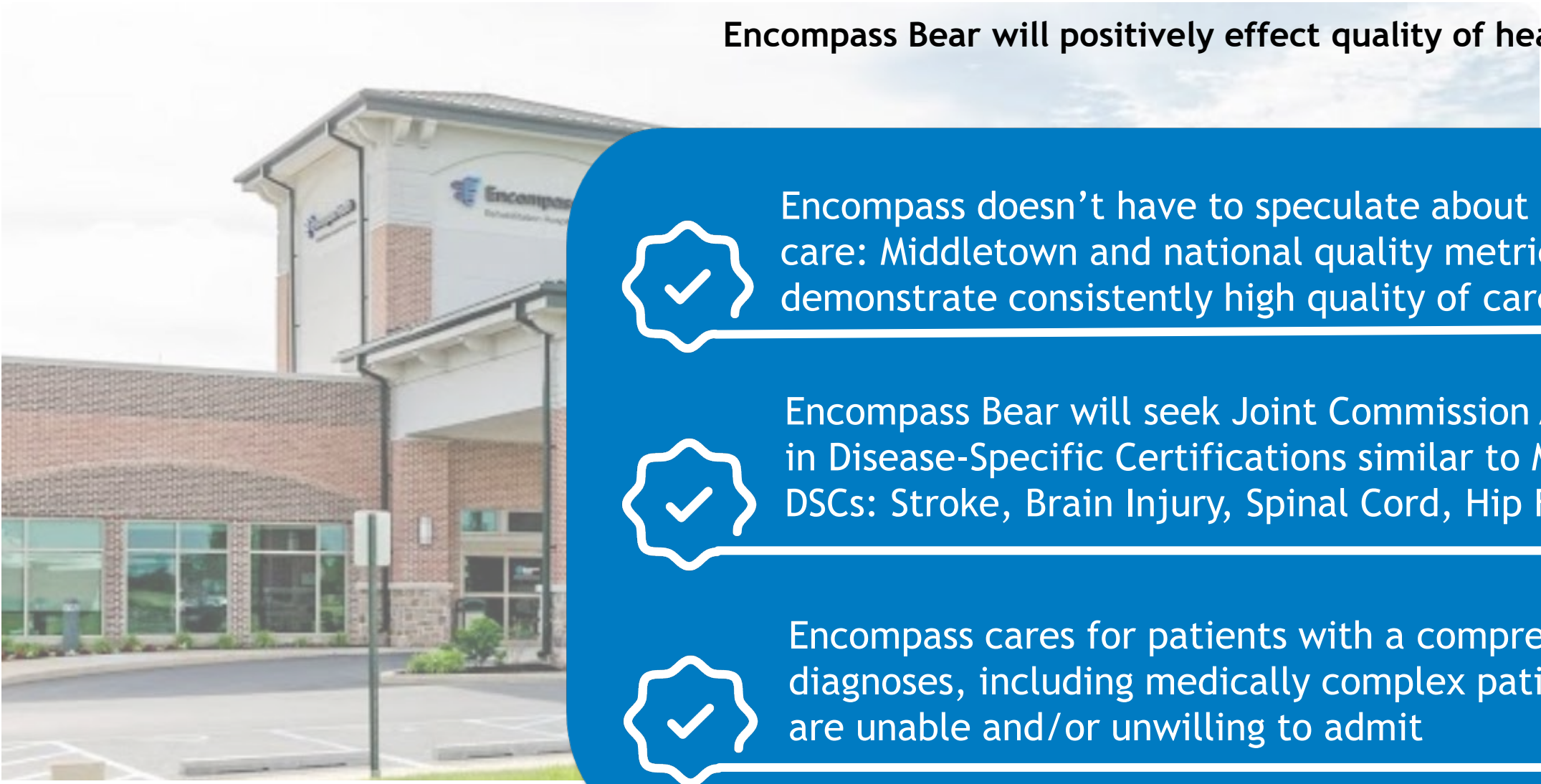
Review Consideration 6:
Effect of Project on Costs and Charges of Health Care

Encompass Bear will have no effect on costs and charges of health care



- The project will have no impact on existing or approved IRF costs or charges
- The project will reduce long-term costs of healthcare by providing the right care at the right time in the right setting
- Encompass' timely admission will benefit general acute care hospitals and their patients in the long-term by reducing readmissions and/or utilization of the hospital's ED

Review Consideration 7:
The Anticipated Effect of the Proposal on Quality of Health Care



Encompass Bear will positively effect quality of health care

- Encompass doesn't have to speculate about its quality of care: Middletown and national quality metrics demonstrate consistently high quality of care
- Encompass Bear will seek Joint Commission Accreditation in Disease-Specific Certifications similar to Middletown's 4 DSCs: Stroke, Brain Injury, Spinal Cord, Hip Fracture Rehab
- Encompass cares for patients with a comprehensive array of diagnoses, including medically complex patients other IRFs are unable and/or unwilling to admit

Summary: We ask for your approval of the proposed 40-bed IRF

Expected opening date: April 2028

- Encompass proposes to bring its proven high quality programs and services to Bear to address an identified gap in care.
- The facility design with all private rooms and baths, large therapy gym, ADL suite, outdoor therapy, and specialized equipment and technology is based on Encompass' national experience and expertise.
- Patients and families will benefit from the high quality care Encompass Bear will provide, similar to the quality of care at Middletown.
- The community supports the project as evidenced by numerous letters of support.
- Encompass Bear will positively impact patients, families, and other health care providers and provide a needed choice for consumers.

Encompass Health

Appendix I: Project Overview
Additional Information

Encompass Health

Project Overview: Care Delivery Model

Encompass Health provides advanced therapy and nursing services to patients requiring intensive inpatient rehabilitative care.







Inpatient Rehabilitation Facility ("IRF") Services Primarily Include:

- Independent physician oversight of plan of care
- 24/7 nursing care
- Intensive multi-disciplinary therapy
- Extensive clinical support services

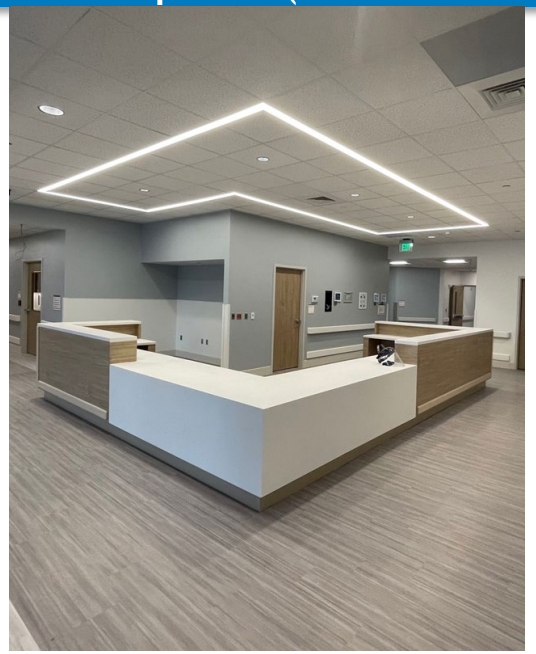
Project Overview:
Construction of a Specialized Rehabilitation Hospital (*Exterior Views*)

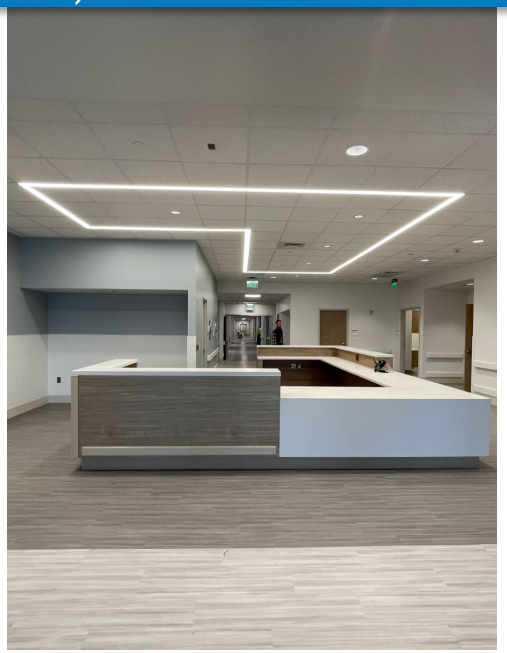




Project Overview:
Construction of a Specialized Rehabilitation Hospital (*Interior Views*)

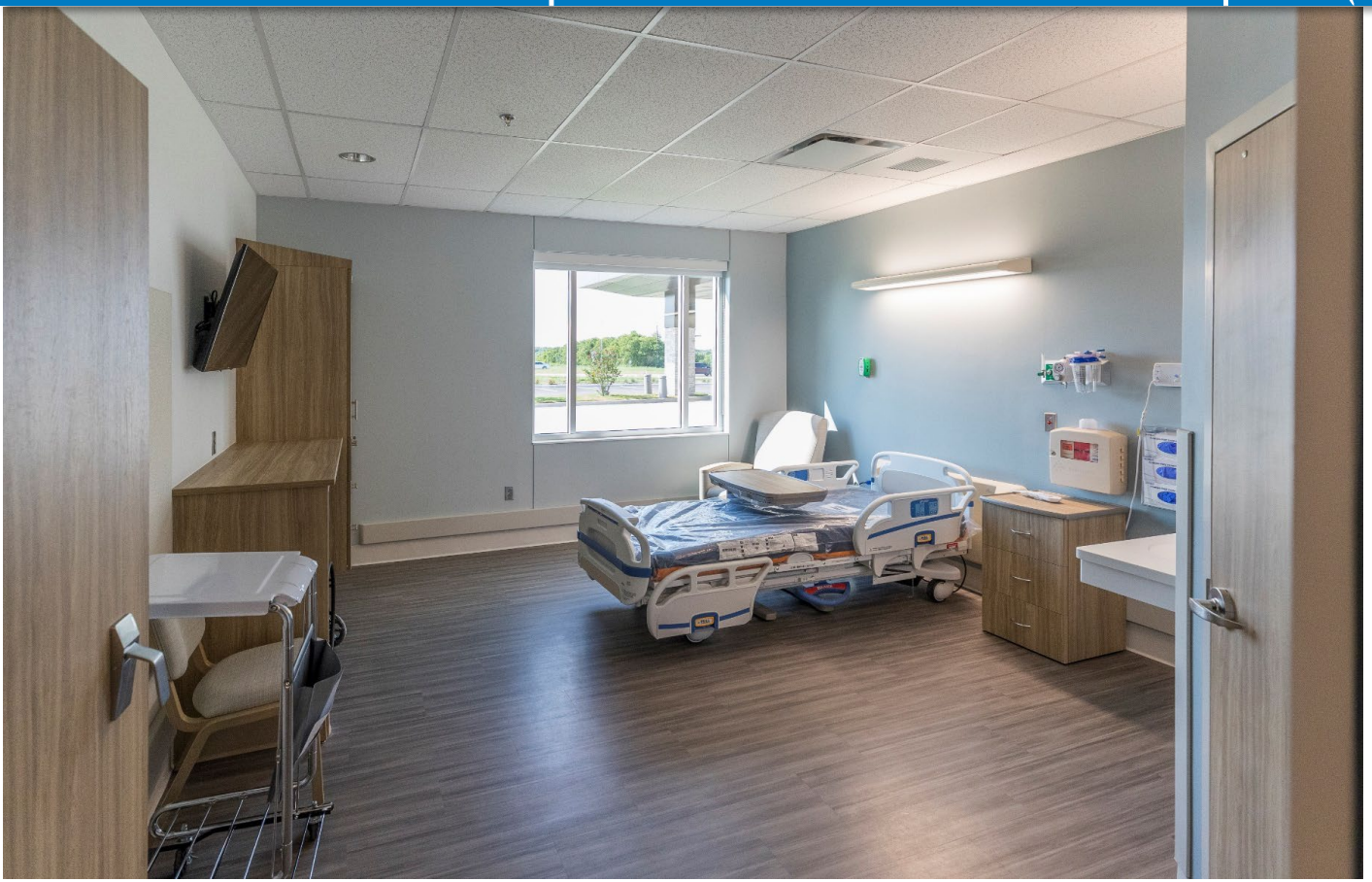


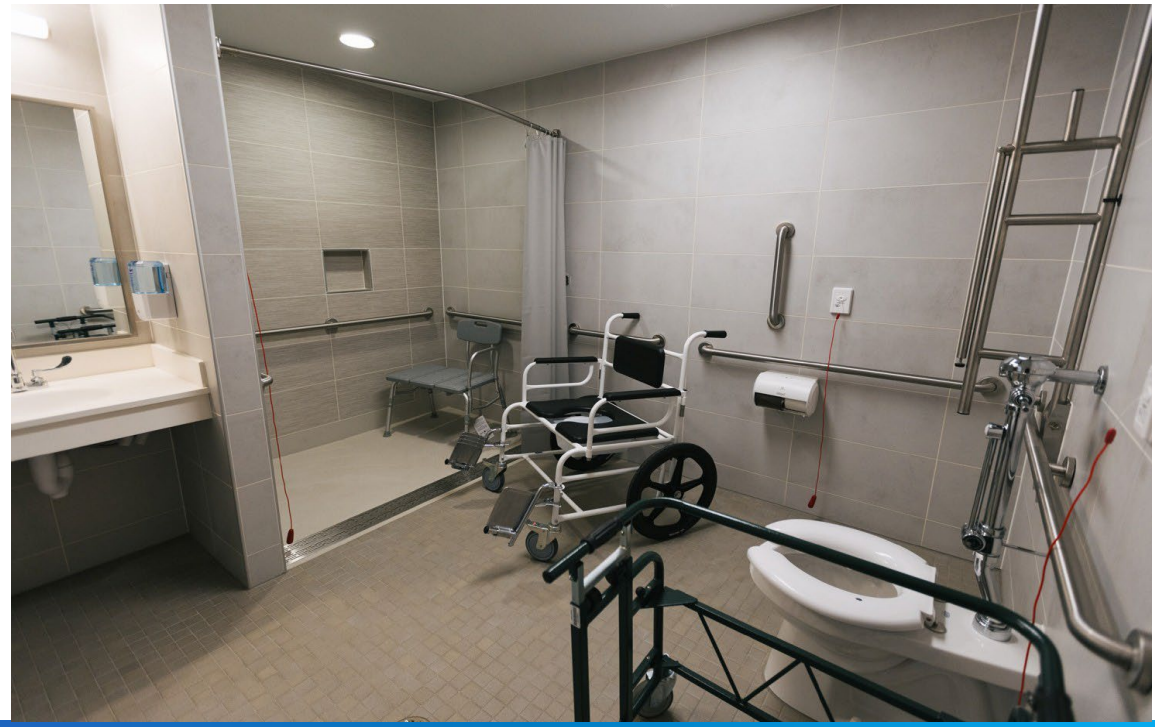






Project Overview:
Construction of a Specialized Rehabilitation Hospital *(All Private Rooms and Baths)*





Project Overview:
Construction of a Specialized Rehab Hospital *(Therapy Gym & ADL Suite)*







Project Overview:
Construction of a Specialized Rehab Hospital *(Outdoor Therapy Area)*





Project Overview:
Construction of a Specialized Rehab Hospital *(Equipment & Technology)*

Bioness Vector Overhead Track System®

Bioness Vector is an overhead track and harness system that provides a safe ambulation environment for both therapist and patient. Without the fear of falling, patients can focus more fully on their tasks of gait and balance.



B.I.T.S Bioness Integrated Therapy System®

Using a 50" touch screen monitor, BITS is designed to improve visual abilities for a wide range of patients with visually-related learning problems, strabismus, amblyopia, and traumatic brain injury. BITS offers 16 unique programs with customizable features designed to enhance outcomes for physical and occupational therapy patients.



SaeboFlex®

Stroke survivors and other neurologically impaired patients use this custom-fitted hand and arm splint to increase shoulder, elbow, wrist and hand function. During therapy exercises, the splint is used to retrain the hand's grasp and release movements.



Bioness H200®

When stroke, brain injury or spinal cord injury occur, a person's neurological abilities, like grasping, can be impaired. The innovative NESS H200 helps improve hand function and voluntary movement.



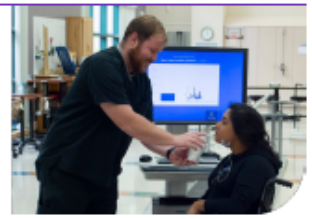
Bioness L300™

This small wireless device is worn on a patient's leg to help improve walking abilities. Through electrical stimulation, NESS L300 retrains lower leg muscles increasing motion and blood circulation enabling the return to a more normal step.



Synchrony®

Unlike any other dysphagia rehabilitation solution available, Synchrony™ enables SLPs and patients to literally "See the Swallow" using virtual reality augmented sEMG biofeedback. This important capability helps SLPs evaluate the specific dynamics of a normal, effortful or Mendelsohn swallow in real time, while guiding a series of therapeutic exercise activities that are engaging and fun for patients.



Interactive Metronome™

Interactive Metronome is a brain-based rehabilitation assessment and training program created to improve a patient's ability to plan, organize and use language.



BURT®

BURT® is a user-friendly robot that assists in improving motor control and fine motor skills in the arms and hands. This robot contains integrated gaming software to practice movement patterns and provides customizable features to tailor to patient-specific rehabilitation treatments.



VitalStim®

For those who suffer from dysphagia, a common condition among stroke and brain injury survivors, this therapy greatly improves swallowing ability with electrical stimulation.



Appendix II: Encompass is a Highly-Qualified Applicant
Additional Information

Encompass Health

Encompass Health: Recipient of Numerous Awards and Recognitions





2025 *Fortune*
World's Most Admired Companies™

2025 Forbes
Most Trusted Companies in America

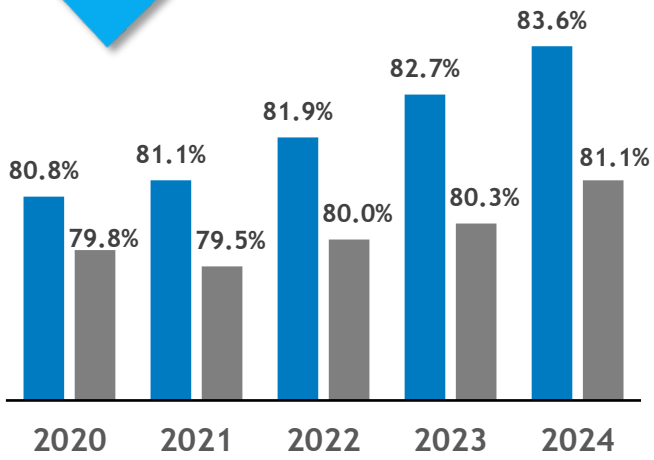
- **America's Best Physical Rehabilitation Centers** - 2020-2025, *Newsweek / Statista*
- **Excellence in Patient Experience Award** – 2025 *NRC Health*
- **Most Trusted Companies in America** - 2025 *Forbes*
- **World's Most Admired Companies™** - 2021, 2022, 2023, 2024, 2025 *Fortune*
- **150 Top Places to Work in Healthcare** – 2021, 2022, 2024 *Becker's Healthcare*
- **Best Places to Work** (Home Office) – 2021, 2022, 2023, 2024, 2025 *Birmingham Business Journal*
- **Most Admired Companies** – 2023 *Becker's Healthcare*
- **Best Places to Work** – 2021, 2022 *Modern Healthcare*

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Encompass Health:
Consistently Provides High Quality Care for its Patients

Encompass national averages compared to US averages

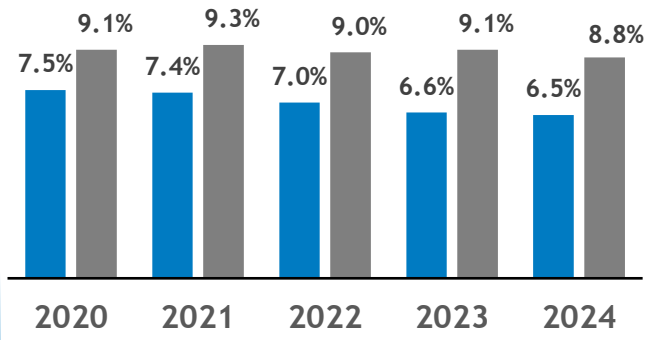
Discharge to Community



Higher is better

Percent of patients discharged to the community, including home or home with home health.

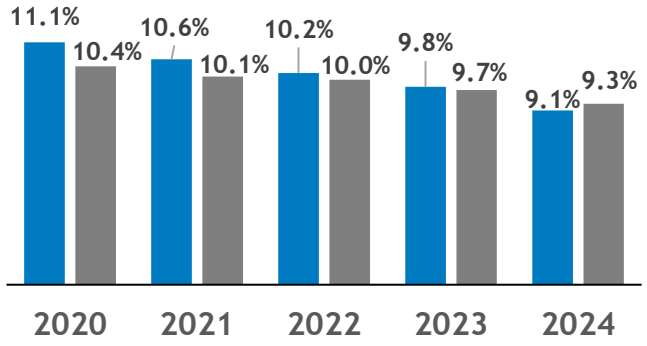
Discharge to SNF



Lower is better

Percent of patients discharged to a skilled nursing facility.

Discharge to Acute Care



Lower is better

Percent of patients discharged to an acute care hospital.

Encompass Health

UDSMR*

The above UDSMR measures include IRF units that are located within acute care hospitals.

* Data compares Encompass Health IRFs to IRFs comprising the Uniform Data System for Medical Rehabilitation ("UDSMR"), part of Netsmart, a data gathering and analysis tool for the rehabilitation industry which represents approximately 80% of the industry, including Encompass Health sites. Data is adjusted by applying Encompass Health IRF case-mix to non-Encompass Health UDS IRFs.

Encompass Health:
Clinical Expertise is Illustrated by Numerous Disease-Specific Certifications



145 Hospitals hold one or more disease-specific certifications

Clinical expertise in Joint Commission specialty accreditations

Number of EHC hospitals with accreditation and EHC's % of all such accreditations

- Stroke rehabilitation accreditations - 144 EHC hospitals (~64%)
- Hip fracture rehabilitation accreditations - 65 EHC hospitals (~96%)
- Brain injury rehabilitation accreditations - 50 EHC hospitals (~74%)
- Amputee rehabilitation accreditations - 41 EHC hospitals (~80%)

Thank you,



Encompass Health