

**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**SINGLE AUDIT**

**JANUARY 1, 2017 – DECEMBER 31, 2017**



**WILSON, SHANNON & SNOW  
INC.  
CPAs & ADVISORS**





# Dave Yost • Auditor of State

Members of the District  
Clark County Combined Health District  
529 East Home Road  
Springfield, Ohio 45503

We have reviewed the *Independent Auditor's Report* of the Clark County Combined Health District, Clark County, prepared by Wilson, Shannon & Snow, Inc., for the audit period January 1, 2017 through December 31, 2017. Based upon this review, we have accepted these reports in lieu of the audit required by Section 117.11, Revised Code. The Auditor of State did not audit the accompanying financial statements and, accordingly, we are unable to express, and do not express an opinion on them.

Our review was made in reference to the applicable sections of legislative criteria, as reflected by the Ohio Constitution, and the Revised Code, policies, procedures and guidelines of the Auditor of State, regulations and grant requirements. The Clark County Combined Health District is responsible for compliance with these laws and regulations.

A handwritten signature in black ink that reads "Dave Yost".

Dave Yost  
Auditor of State

May 10, 2018

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**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

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**INDEPENDENT AUDITOR'S REPORT**

Combined Health District  
Clark County  
529 East Home Road  
Springfield, Ohio 45503

To the Members of the District:

***Report on the Financial Statement***

We have audited the accompanying financial statement of the cash balances, receipts and disbursements by fund type, and related notes of the Clark County Combined Health District, Ohio (the District) as of and for the year ended December 31, 2017.

***Management's Responsibility for the Financial Statement***

Management is responsible for preparing and fairly presenting this financial statement in accordance with the financial reporting provisions Ohio Revised Code Section 117.38 and Ohio Administrative Code Section 117-2-03(D) permit; this responsibility includes designing, implementing and maintaining internal control relevant to preparing and fairly presenting financial statements free from material misstatement, whether due to fraud or error.

***Auditor's Responsibility***

Our responsibility is to opine on this financial statement based on our audit. We audited in accordance with auditing standards generally accepted in the United States of America and the financial audit standards in the Comptroller General of the United States' *Government Auditing Standards*. Those standards require us to plan and perform the audit to reasonably assure the financial statement is free from material misstatement.

An audit requires obtaining evidence about financial statement amounts and disclosures. The procedures selected depend on our judgment, including assessing the risks of material financial statement misstatement, whether due to fraud or error. In assessing those risks, we consider internal control relevant to the District's preparation and fair presentation of the financial statement in order to design audit procedures that are appropriate in the circumstances, but not to the extent needed to opine on the effectiveness of the District's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of management's accounting policies and the reasonableness of their significant accounting estimates, as well as our evaluation of the overall financial statement presentation.

We believe the audit evidence we obtained is sufficient and appropriate to support our audit opinions.

***Basis for Adverse Opinion on U.S. Generally Accepted Accounting Principles***

As described in Note 1 of the financial statement, the District prepared this financial statement using the accounting basis permitted by the financial reporting provisions of Ohio Revised Code Section 117.38 and Ohio Administrative Code Section 117-2-03(D), which is an accounting basis other than accounting principles generally accepted in the United States of America (GAAP), to satisfy these requirements.

Although the effects on the financial statement of the variances between the regulatory accounting basis and GAAP are not reasonably determinable, we presume they are material.

Combined Health District  
Clark County  
Independent Auditor's Report

Though the District does not intend this statement to conform to GAAP, auditing standards generally accepted in the United States of America require us to include an adverse opinion on GAAP. However, the adverse opinion does not imply the amounts reported are materially misstated under the accounting basis Ohio Revised Code Section 117.38 and Ohio Administrative Code Section 117-2-03(D) permit. Our opinion on this accounting basis is in the *Opinion on Regulatory Basis of Accounting* paragraph below.

***Adverse Opinion on U.S. Generally Accepted Accounting Principles***

In our opinion, because of the significance of the matter discussed in the *Basis for Adverse Opinion on U.S. Generally Accepted Accounting Principles* paragraph, the financial statement referred to above does not present fairly, in accordance with accounting principles generally accepted in the United States of America, the financial position of the District as of December 31, 2017, and the respective changes in financial position thereof for the year then ended.

***Opinion on Regulatory Basis of Accounting***

In our opinion, the financial statement referred to above present fairly, in all material respects, the cash balances, receipts and disbursements by fund type, and related notes of the Clark County Combined Health District, Ohio as of December 31, 2017, for the year then ended in accordance with the financial reporting provisions Ohio Revised Code Section 117.38 and Ohio Administrative Code Section 117-2-03(D) permit, described in Note 1.

***Other Matters***

Our audit was conducted to opine on the financial statement taken as a whole.

The Schedule of Expenditures of Federal Awards presents additional analysis as required by Title 2 U.S. Code of Federal Regulations (CFR) Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards and is not a required part of the financial statement.

The Schedule is management's responsibility, and derives from and relates directly to the underlying accounting and other records used to prepare the financial statement. We subjected this schedule to the auditing procedures we applied to the financial statement. We also applied certain additional procedures, including comparing and reconciling the schedule directly to the underlying accounting and other records used to prepare the financial statement or to the financial statement themselves, in accordance with auditing standards generally accepted in the United States of America. In our opinion, this Schedule is fairly stated in all material respects in relation to the financial statement taken as a whole.

***Other Reporting Required by Government Auditing Standards***

In accordance with *Government Auditing Standards*, we have also issued our report dated April 19, 2018, on our consideration of the District's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. That report describes the scope of our internal control testing over financial reporting and compliance, and the results of that testing, and does not opine on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the District's internal control over financial reporting and compliance.

*Wilson, Shuman & Snow, Inc.*

April 19, 2018  
Newark, Ohio



**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**COMBINED STATEMENT OF CASH RECEIPTS, CASH DISBURSEMENTS, AND  
CHANGES IN FUND BALANCES  
ALL GOVERNMENTAL FUND TYPES  
FOR THE YEAR ENDED DECEMBER 31, 2017**

|  | <u>Governmental Fund Types</u> |                            |                    |
|--|--------------------------------|----------------------------|--------------------|
|  | <u>General</u>                 | <u>Special<br/>Revenue</u> | <u>Totals</u>      |
| <b>Cash Receipts:</b>                                      |                                |                            |                    |
| Intergovernmental Revenue                                  | \$289,759                      | \$2,197,111                | \$2,486,870        |
| Property Taxes   | 1,975,149                      | 0                          | 1,975,149          |
| Licenses, Permits, & Fees                                  | 168,658                        | 566,092                    | 734,750            |
| Contractual services                                       | 0                              | 541,982                    | 541,982            |
| Medicaid   | 45,808                         | 9,894                      | 55,702             |
| State Subsidy  | 25,943                         | 0                          | 25,943             |
| Vital Statistics   | 316,469                        | 0                          | 316,469            |
| Grant Reimbursements                                       | 194,704                        | 0                          | 194,704            |
| Other receipts   | 41,396                         | 1,416                      | 42,812             |
| Total Cash Receipts  | 3,057,886                      | 3,316,495                  | 6,374,381          |
| <b>Cash Disbursements:</b>                                 |                                |                            |                    |
| Salaries   | 1,293,655                      | 1,816,281                  | 3,109,936          |
| Benefits   | 379,271                        | 277,853                    | 657,124            |
| Insurances   | 416,470                        | 530,014                    | 946,484            |
| Workers Compensation                                       | 16,169                         | 19,018                     | 35,187             |
| Supplies   | 53,165                         | 23,532                     | 76,697             |
| State Remittance   | 189,614                        | 86,737                     | 276,351            |
| Equipment  | 105                            | 21,640                     | 21,745             |
| Contracts  | 189,592                        | 191,446                    | 381,038            |
| Travel & Training  | 19,832                         | 11,210                     | 31,042             |
| Maintenance  | 35,228                         | 409,423                    | 444,651            |
| County Auditor Fees  | 35,497                         | 0                          | 35,497             |
| Rents/Leases   | 70,061                         | 22,084                     | 92,145             |
| Grant Reimbursements                                       | 0                              | 114,047                    | 114,047            |
| Other  | 17,172                         | 6,059                      | 23,231             |
| Total Cash Disbursements                                   | 2,715,831                      | 3,529,344                  | 6,245,175          |
| Total Cash Receipts Over (Under) Cash Disbursements        | 342,055                        | (212,849)                  | 129,206            |
| <b>Other Financing Cash Receipts/(Cash Disbursements):</b> |                                |                            |                    |
| Transfers-In   | 0                              | 220,600                    | 220,600            |
| Advances-In  | 135,500                        | 165,000                    | 300,500            |
| Transfers-Out  | (220,600)                      | 0                          | (220,600)          |
| Advances-Out   | (165,000)                      | (135,500)                  | (300,500)          |
| Total Other Financing Cash Receipts/(Cash Disbursements)   | (250,100)                      | 250,100                    | 0                  |
| Net Change in Fund Balances                                | 91,955                         | 37,251                     | 129,206            |
| Fund Cash Balances, January 1, 2017                        | 1,951,664                      | 1,178,085                  | 3,129,749          |
| <b>Fund Cash Balances, December 31, 2017</b>               | <b>\$2,043,619</b>             | <b>\$1,215,336</b>         | <b>\$3,258,955</b> |
| <b>Fund Cash Balances, December 31</b>                     |                                |                            |                    |
| Restricted   | \$0                            | \$1,041,536                | \$1,041,536        |
| Committed  | 75,935                         | 173,800                    | 249,735            |
| Assigned   | 284,414                        | 0                          | 284,414            |
| Unassigned   | 1,683,270                      | 0                          | 1,683,270          |
| <b>Fund Cash Balances, December 31</b>                     | <b>\$2,043,619</b>             | <b>\$1,215,336</b>         | <b>\$3,258,955</b> |

*The notes to the financial statement are an integral part of this statement.*

**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**NOTES TO THE FINANCIAL STATEMENT  
DECEMBER 31, 2017**

**1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

**A. Description of the District**

The constitution and laws of the State of Ohio establish the rights and privileges of the Combined Health District, Clark County (the District) as a body corporate and politic. An eight-member Board and a Health Commissioner govern the District. The District's services include prevention and control of diseases, sanitation, vital statistics, abatement and removal of nuisances, and air pollution control.

The District's management believes this financial statement presents all activities for which the District is financially accountable.

**B. Basis of Accounting**

This financial statement follows the accounting basis permitted by the financial reporting provisions of Ohio Revised Code Section 117.38 and Ohio Administrative Code Section 117-2-03(D). This basis is similar to the cash receipts and disbursements accounting basis. The District recognizes receipts when received in cash rather than when earned, and recognizes disbursements when paid rather than when a liability is incurred. Budgetary presentations report budgetary expenditures when a commitment is made (i.e., when an encumbrance is approved).

This statement includes adequate disclosure of material matters, as the financial reporting provisions of Ohio Revised Code Section 117.38 and Ohio Administrative Code Section 117-2-03(D) permit.

**C. Deposits and Investments**

As required by the Ohio Revised Code, the Clark County Treasurer is custodian for the District's cash. The County's cash and investment pool holds the District's cash, valued at the County Treasurer's carrying amount.

**D. Fund Accounting**

The District uses fund accounting to segregate cash that is restricted as to use. The District classifies its fund into the following type:

**1. General Fund**

The General Fund reports all financial resources except for restricted resources requiring a separate accounting. The General Fund balance is available for any purpose provided it is disbursed or transferred according to Ohio law.

**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**NOTES TO THE FINANCIAL STATEMENT  
DECEMBER 31, 2017  
(CONTINUED)**

**1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)**

**D. Fund Accounting (Continued)**

**2. Special Revenue Fund**

These funds account for proceeds from specific sources (other than from private-purpose trusts or for capital projects) that are restricted to expenditure for specific purposes. The District had the following significant Special Revenue Fund:

Women, Infants, and Children (WIC) Fund - This is a Federal grant fund accounts for the Special Supplemental Nutrition Program.

**E. Budgetary Process**

The Ohio Revised Code requires that its funds be budgeted annually.

**1. Appropriations**

Budgetary expenditures (that is, disbursements and encumbrances) may not exceed appropriations at the fund, function or object level of control, and appropriations may not exceed estimated resources. The District Board must annually approve appropriation measures and subsequent amendments. Unencumbered appropriations lapse at year end.

**2. Estimated Resources**

Estimated resources include estimates of cash to be received (budgeted receipts) plus unencumbered cash as of January 1. The County Budget Commission must approve estimated resources.

**3. Encumbrances**

The Ohio Revised Code requires the District to reserve (encumber) appropriations when individual commitments are made. Encumbrances outstanding at year end are carried over, and need not be reappropriated.

A summary of the 2017 budgetary activity appears in Note 2.

**F. Fund Balance**

Fund balance is divided into five classifications based primarily on the extent to which the District must observe constraints imposed upon the use of its governmental-fund resources. The classifications are as follows:

**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**NOTES TO THE FINANCIAL STATEMENT  
DECEMBER 31, 2017  
(CONTINUED)**

**1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)**

**F. Fund Balance (Continued)**

**1. Nonspendable**

The District classifies assets as *nonspendable* when legally or contractually required to maintain the amounts intact.

**2. Restricted**

Fund balance is *restricted* when constraints placed on the use of resources are either externally imposed by creditors (such as through debt covenants), grantors, contributors, or laws or regulations of other governments; or is imposed by law through constitutional provisions.

**3. Committed**

The Board can *commit* amounts via formal action (resolution). The District must adhere to these commitments unless the Board amends the resolution. Committed fund balance also incorporates contractual obligations to the extent that existing resources in the fund have been specifically committed to satisfy contractual requirements.

**4. Assigned**

Assigned fund balances are intended for specific purposes but do not meet the criteria to be classified as *restricted* or *committed*. Governmental funds other than the general fund report all fund balances as *assigned* unless they are restricted or committed. In the general fund, *assigned* amounts represent intended uses established by the Board or a District official delegated that authority by resolution, or by State Statute.

**5. Unassigned**

Unassigned fund balance is the residual classification for the general fund and includes amounts not included in the other classifications. In other governmental funds, the unassigned classification is used only to report a deficit balance.

The District applies restricted resources first when expenditures are incurred for purposes for which either restricted or unrestricted (committed, assigned, and unassigned) amounts are available. Similarly, within unrestricted fund balance, committed amounts are reduced first followed by assigned, and then unassigned amounts when expenditures are incurred for purposes for which amounts in any of the unrestricted fund balance classifications could be used.

**G. Property, Plant, and Equipment**

The District records cash disbursements for acquisitions of property, plant, and equipment when paid. The accompanying financial statements do not report these items as assets.

**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**NOTES TO THE FINANCIAL STATEMENT  
DECEMBER 31, 2017  
(CONTINUED)**

**1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)**

**H. Intergovernmental Revenues**

Intergovernmental revenues, such as entitlements and grants awarded on a non-reimbursable basis are recorded when received in accordance with the District's cash basis method of accounting.

**I. Accumulated Leave**

In certain circumstances, such as upon leaving employment, employees are entitled to cash payments for unused leave. The financial statements do not include a liability for unpaid leave.

**2. BUDGETARY ACTIVITY**

Budgetary activity for the year ending 2017 follows:

**2017 Budgeted vs. Actual Receipts**

| <b>Fund Type</b> | <b>Budgeted<br/>Receipts</b> | <b>Actual<br/>Receipts</b> | <b>Variance</b> |
|------------------|------------------------------|----------------------------|-----------------|
| General          | \$3,198,314                  | \$3,193,386                | (\$4,928)       |
| Special Revenue  | 4,511,033                    | 3,702,095                  | (808,938)       |
| Total            | \$7,709,347                  | \$6,895,481                | (\$813,866)     |

**2017 Budgeted vs. Budgetary Basis Expenditures**

| <b>Fund Type</b> | <b>Appropriation<br/>Authority</b> | <b>Budgetary<br/>Expenditures</b> | <b>Variance</b> |
|------------------|------------------------------------|-----------------------------------|-----------------|
| General          | \$3,697,584                        | \$3,161,371                       | \$536,213       |
| Special Revenue  | 4,203,958                          | 3,710,473                         | 493,485         |
| Total            | \$7,901,542                        | \$6,871,844                       | \$1,029,698     |

**3. PROPERTY TAX**

The County Commissioners serve as a special taxing authority to levy a special levy outside the property tax ten-mil limitation to enable the District with sufficient funds to provide health programs and maintain general operations. The County Commissioners place a countywide (excluding the City of New Carlisle) levy of 1.0 mils on the 2001 ballot and obtained voter approval by the electors of the County. The District continued to pass replacement levies since 2001 noting the most recent five year replacement levy approved was in calendar year 2016 which represents real estate collections for calendar year 2018 through 2022.

**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**NOTES TO THE FINANCIAL STATEMENT  
DECEMBER 31, 2017  
(CONTINUED)**

**3. PROPERTY TAX (Continued)**

Real property taxes become a lien on January 1 preceding the October 1 date for which the tax rates are adopted. The State District of Tax Equalization adjusts these rates for inflation. Property taxes are also reduced for applicable homestead and rollback deductions. The financial statements include homestead and rollback amounts the State pays as Intergovernmental Receipts. Payments are due to the County by December 31. If the property owner elects to pay semiannually, the first half is due December 31. The second half payment is due the following June 20.

The County is responsible for assessing property, and for billing, collecting, and distributing all property taxes on behalf of the District.

**4. RETIREMENT SYSTEMS**

The District's employees belong to the Ohio Public Employees Retirement System (OPERS). OPERS is a cost-sharing, multiple-employer plan. The Ohio Revised Code prescribes this plan's benefits, which include postretirement healthcare and survivor and disability benefits.

The Ohio Revised Code also prescribes contribution rates. For 2017, all employees with the exception of the Health Commissioner, contributed 10% of their gross salaries and the District contributed an amount equaling 14%. Regarding the Health Commissioner, the District contributes 24% of the Health Commissioner's gross salary to OPERS, which is considered the Health Commissioner's required 10% plus the District's required contribution of 14%. The District has paid all contributions required through December 31, 2017.

**5. POSTEMPLOYMENT BENEFITS**

OPERS offers a cost-sharing, multiple-employer defined benefit postemployment plan, which includes multiple health care plans including medical coverage, prescription drug coverage, deposits to a Health Reimbursement Arrangement and Medicare Part B premium reimbursements, to qualifying benefit recipients. The portion of employer contributions allocated to health care for OPERS members in the Traditional Pension Plan and Combined Plan was 1.0 percent during calendar year 2017.

**6. CONTRACTUAL OBLIGATIONS**

The District entered into agreements for the purpose of rental space for operations of the Women, Infants and Children (WIC) and Early Childhood (EC) programs and also seven vehicles to be used for District operations.

Rental space for the WIC/EC programs is for a period of ten years with a base rent of \$4,160.42 per month. The seven vehicles are for a period of 36 months commencing August 2016 and continue to August 2019 with base rent ranging from \$227.17 to \$266.83 per month. At the time of expiration a decision will be made regarding the future of the vehicles.

**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**NOTES TO THE FINANCIAL STATEMENT  
DECEMBER 31, 2017  
(CONTINUED)**

**7. RISK MANAGEMENT**

**A. Risk Pool Membership**

The District is exposed to various risks of property and casualty losses, and injuries to employees.

The District insures against injuries to employees through the Ohio Bureau of Worker's Compensation.

The District belongs to the Public Entities Pool of Ohio (PEP), a risk-sharing pool available to Ohio local governments. PEP provides property and casualty coverage for its members. York Insurance Services Group, Inc. (York) functions as the administrator of PEP and provides underwriting, claims, loss control, risk management, and reinsurance services for PEP. PEP is a member of the American Public Entity Excess Pool (APEEP), which is also administered by York. Member governments pay annual contributions to fund PEP. PEP pays judgments, settlements and other expenses resulting from covered claims that exceed the members' deductibles.

Casualty and Property Coverage

APEEP provides PEP with an excess risk-sharing program. Under this arrangement, PEP retains insured risks up to an amount specified in the contracts. At December 31, 2016, PEP retained \$350,000 for casualty claims and \$100,000 for property claims.

The aforementioned casualty and property reinsurance agreement does not discharge PEP's primary liability for claims payments on covered losses. Claims exceeding coverage limits are the obligation of the respective government.

Financial Position

PEP's financial statements (audited by other auditor's) conform with generally accepted accounting principles, and reported the following assets, liabilities and net position at December 31, 2016 (the latest information available):

|              | <b><u>2016</u></b>  |
|--------------|---------------------|
| Assets       | \$42,182,281        |
| Liabilities  | <u>(13,396,700)</u> |
| Net Position | <u>\$28,785,581</u> |

At December 31, 2016 the liabilities above include approximately \$12.0 million of estimated incurred claims payable. The assets above also include approximately \$11.5 million of unpaid claims to be billed. The Pool's membership increased to 520 members in 2016. These amounts will be included in future contributions from members when the related claims are due for payment. As of December 31, 2017, the District's share of these unpaid claims collectible in future years is approximately \$30,847.

**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**NOTES TO THE FINANCIAL STATEMENT  
DECEMBER 31, 2017  
(CONTINUED)**

**7. RISK MANAGEMENT (Continued)**

**A. Risk Pool Membership (Continued)**

Based on discussions with PEP, the expected rates PEP charges to compute member contributions, which are used to pay claims as they become due, are not expected to change significantly from those used to determine the historical contributions detailed below. By contract, the annual liability of each member is limited to the amount of financial contributions required to be made to PEP for each year of membership.

|   |
|---|
| <b><u>2017 Contributions to PEP</u></b><br>\$48,964 |
|---|

After one year of membership, a member may withdraw on the anniversary of the date of joining PEP, if the member notifies PEP in writing 60 days prior to the anniversary date. Upon withdrawal, members are eligible for a full or partial refund of their capital contributions, minus the subsequent year's contribution. Withdrawing members have no other future obligation to PEP. Also upon withdrawal, payments for all casualty claims and claim expenses become the sole responsibility of the withdrawing member, regardless of whether a claim occurred or was reported prior to the withdrawal.

**B. County Commissioner Association of Ohio Workers' Compensation Group Rating Plan**

For 2017, through Clark County serving as the District's fiscal agent, the District participated in the County/Commissioners Association of Ohio Workers' Compensation Group Rating Plan ("the GRP"), an insurance purchasing pool. The intent of the GRP is to achieve a reduced premium for the District by virtue of its grouping with other participants in the GRP. The workers' compensation experience of the participants is calculated as one experience and a common premium rate is applied to all participants in the Plan. Each participant pays its workers' compensation premium to the State based on the rate for the Plan rather than the individual rate.

The GRP then calculates the total savings which accrued to the Plan through its formation. This savings is then compared to the overall savings percentage of the Plan. The Plan's executive committee then collects rate contributions from, or pays rate equalization rebates to the various participants. Participation in the plan is limited to counties that can meet the Plan's selection criteria.



**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**NOTES TO THE FINANCIAL STATEMENT  
DECEMBER 31, 2017  
(CONTINUED)**

**7. RISK MANAGEMENT (Continued)**

**C. Employee Medical Benefits**

The District participated in a health insurance plan through United Medical Resources in 2017 available for all full-time employees. The fully insured plan includes health, mental health, and prescription benefits. The cost of the program for 2017 was \$931,790 compared to \$1,028,930 for 2016 and \$948,487 for 2015. The District also participates in a group dental plan with Superior Dental. The total cost for the program in 2017 was \$12,135 compared to \$17,484 for 2016 and \$13,167 for 2015. This indicates a decrease between 2016 and 2017 and attributed to less employees accepting coverage and insurance rates decreasing.

**8. CONTINGENT LIABILITIES**

Amounts grantor agencies pay to the District are subject to audit and adjustment by the grantor, principally the federal government. The grantor may require refunding any disallowed costs. Management cannot presently determine amounts grantors may disallow. However, based on prior experience, management believes any refunds would be immaterial.

**9. INTERFUND TRANSACTIONS**

Interfund transfers for the year ended December 31, 2017, were as follows:

Transfers from the General Fund to Special Revenue Funds:                 \$220,600

Transfers represent the allocation of unrestricted receipts collected in the General Fund to finance various programs accounted for in other funds in accordance with budgetary authorizations.

Interfund advances for the year ended December 31, 2017 were as follows:

Advances from the General Fund to the Special Revenue Fund:                 \$165,000

Advances from the Special Revenue Fund to the General Fund :                 \$135,500

Advances represent the allocation of unrestricted receipts to finance a program that had not received the total grant funds awarded as of December 31, 2017, or return advances from those programs to the General fund.

**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS  
FOR THE YEAR ENDED DECEMBER 31, 2017**

| Federal Grantor/Pass Through Grantor<br>Program Title  | Pass Through<br>Entity Number           | CFDA<br>Number | Expenditures        |
|--|---|----------------|---------------------|
| <b>U.S. Department of Agriculture</b>  |   |                |                     |
| <i>Passed through the Ohio Department of Health:</i>   |   |                |                     |
| Special Supplemental Nutrition Program for Women, Infants, & Children  | 01210011WA0417                          | 10.557         | \$ 637,644          |
|  | 01210011WA0518                          | 10.557         | 129,538             |
| <b>Total U.S. Department of Agriculture</b>  |   |                | <u>767,182</u>      |
| <b>U.S. Department of Health and Human Services</b>  |   |                |                     |
| <i>Passed through the Ohio Department of Health:</i>   |   |                |                     |
| Immunization Cooperative Agreements  | 01210012IM0916                          | 93.268         | 16,112              |
| PPHF Capacity Building Assistance to Strengthen Public Health Immunization Infrastructure and Performance financed in part by Prevention and Public Health Funds | 01210012IM1017                          | 93.539         | 38,443              |
| Maternal and Child Health Services Block Grant to the States   | 01210011OM0117                          | 93.994         | 95,242              |
|  | 01210011OM0218                          | 93.994         | 23,572              |
|  | 01210011RH0218                          | 93.994         | 10,000              |
|  | 01210011MP0218                          | 93.994         | 5,077               |
| <b>Total Maternal and Child Health Services Block Grant</b>  |   |                | <u>133,891</u>      |
| Hospital Preparedness Program and Public Health Emergency Preparedness   | 01210012PH0817                          | 93.074         | 70,813              |
|  | 01210012PH0918                          | 93.074         | 42,166              |
| <b>Total Hospital Preparedness Program and Public Health Emergency Preparedness</b>  |   |                | <u>112,979</u>      |
| Maternal, Infant and Early Childhood Home Visiting Grant Cluster:  |   |                |                     |
| Maternal, Infant and Early Childhood Home Visiting Grant Program   | 01210011MH0117                          | 93.870         | 335,477             |
|  | 01210011MH0218                          | 93.870         | 112,811             |
| <b>Total Maternal, Infant and Early Childhood Home Visiting Grant Cluster</b>  |   |                | <u>448,288</u>      |
| Preventative Health & Health Services Block Grant  | 01210014CC0216                          | 93.758         | 35,987              |
|  | 01210014CC0317                          | 93.758         | 31,356              |
| <b>Total Preventative Health &amp; Health Services Block Grant</b>   |   |                | <u>67,343</u>       |
| National State Based Tobacco Control Programs  | 01210014CC0317                          | 93.305         | 23,750              |
| Family Planning - Services   | 01210001RH0117                          | 93.217         | 30,527              |
|  | 01210011RH0218                          | 93.217         | 48,191              |
| <b>Total Family Planning - Services</b>  |   |                | <u>78,718</u>       |
| <b>Total U.S. Department of Health and Human Services</b>  |   |                | <u>919,524</u>      |
| <b>U.S. Department of Transportation</b>   |   |                |                     |
| <i>Passed through Ohio Department of Public Safety:</i>  |   |                |                     |
| State and Community Highway Safety   | SC-2017-12-00-00-00469                  | 20.600         | 44,466              |
|  | SC-2018-Clark County Combined Hea-00030 | 20.600         | 5,765               |
| <b>Total U.S. Department of Transportation</b>   |   |                | <u>50,231</u>       |
| <b>Total Expenditures of Federal Awards</b>  |   |                | <u>\$ 1,736,937</u> |

See accompanying notes to the Schedule of Expenditures of Federal Awards

**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS  
2 CFR 200.510(b)(6)  
FOR THE YEAR ENDED DECEMBER 31, 2017**

**NOTE A – BASIS OF PRESENTATION**

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal award activity of the Combined Health District, Clark County (the District's) under programs of the federal government for the year ended December 31, 2017. The information on this Schedule is prepared in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the District, it is not intended to and does not present the cash basis financial position or changes in fund balance of the District.

**NOTE B – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Expenditures reported on the Schedule are reported on the cash basis of accounting. Such expenditures are recognized following the cost principles contained in Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, wherein certain types of expenditures may or may not be allowable or may be limited as to reimbursement. The District has elected not to use the 10-percent de minimis indirect cost rate as allowed under the Uniform Guidance.

**NOTE C - MATCHING REQUIREMENTS**

Certain Federal programs require the District to contribute non-Federal funds (matching funds) to support the Federally-funded programs. The District has met its matching requirements. The Schedule does not include the expenditure of non-Federal matching funds.

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**INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER  
FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS  
REQUIRED BY GOVERNMENT AUDITING STANDARDS**

Combined Health District  
Clark County  
529 East Home Road  
Springfield, Ohio 45503

To the Members of the Board:

We have audited in accordance with auditing standards generally accepted in the United States and the Comptroller General of the United States' *Government Auditing Standards*, the financial statement of the cash balances, receipts, and disbursements by fund type of the Clark County Combined Health District, (the District) as of and for the year ended December 31, 2017, and the related notes to the financial statement and have issued our report thereon dated April 19, 2018 wherein we noted the District followed financial reporting provisions Ohio Revised Code Section 117.38 and Ohio Administrative Code Section 117-2-03(D) permit.

***Internal Control Over Financial Reporting***

As part of our financial statement audit, we considered the District's internal control over financial reporting (internal control) to determine the audit procedures appropriate in the circumstances to the extent necessary to support our opinions on the financial statement, but not to the extent necessary to opine on the effectiveness of the District's internal control. Accordingly, we have not opined on it.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, when performing their assigned functions, to prevent, or detect and timely correct misstatements. A *material weakness* is a deficiency, or combination of internal control deficiencies resulting in a reasonable possibility that internal control will not prevent or detect and timely correct a material misstatement of the District's financial statement. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all internal control deficiencies that might be material weaknesses or significant deficiencies. Given these limitations, we did not identify any deficiencies in internal control that we consider material weaknesses. However, unidentified material weaknesses may exist.

***Compliance and Other Matters***

As part of reasonably assuring whether the District's financial statement is free of material misstatement, we tested its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could directly and materially affect the determination of financial statement amounts. However, opining on compliance with those provisions was not an objective of our audit and accordingly, we do not express an opinion. The results of our tests disclosed no instances of noncompliance or other matters we must report under *Government Auditing Standards*.

***Purpose of this Report***

This report only describes the scope of our internal control and compliance testing and our testing results, and does not opine on the effectiveness of the District's internal control or on compliance. This report is an integral part of an audit performed under *Government Auditing Standards* in considering the District's internal control and compliance. Accordingly, this report is not suitable for any other purpose.

*Wilson, Shannon & Sons, Inc.*

April 19, 2018  
Newark, Ohio

**INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE WITH REQUIREMENTS  
APPLICABLE TO THE MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL  
OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE**

Combined Health District  
Clark County  
529 East Home Road  
Springfield, Ohio 45503

To the Members of the Board:

***Report on Compliance for the Major Federal Program***

We have audited the Clark County Combined Health District's (the District) compliance with the applicable requirements described in the U.S. Office of Management and Budget (OMB) *Compliance Supplement* that could directly and materially affect the Clark County Combined Health District's major federal program for the year ended December 31, 2017. The *Summary of Auditor's Results* in the accompanying schedule of findings identifies the District's major federal program.

***Management's Responsibility***

The District's Management is responsible for complying with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal program.

***Auditor's Responsibility***

Our responsibility is to opine on the District's compliance for the District's major federal program based on our audit of the applicable compliance requirements referred to above. Our compliance audit followed auditing standards generally accepted in the United States of America; the standards for financial audits included in the Comptroller General of the United States' *Government Auditing Standards*; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). These standards and the Uniform Guidance require us to plan and perform the audit to reasonably assure whether noncompliance with the applicable compliance requirements referred to above that could directly and materially affect a major federal program occurred. An audit includes examining, on a test basis, evidence about the District's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe our audit provides a reasonable basis for our compliance opinion on the District's major program. However, our audit does not provide a legal determination of the District's compliance.

***Opinion on the Major Federal Program***

In our opinion, Clark County Combined Health District complied, in all material respects with the compliance requirements referred to above that could directly and materially affect its major federal program for the year ended December 31, 2017.

***Report on Internal Control Over Compliance***

The District's management is responsible for establishing and maintaining effective internal control over compliance with the applicable compliance requirements referred to above. In planning and performing our compliance audit, we considered the District's internal control over compliance with the applicable requirements that could directly and materially affect a major federal program, to determine our auditing procedures appropriate for opining on each major federal program's compliance and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not to the extent needed to opine on the effectiveness of internal control over compliance. Accordingly, we have not opined on the effectiveness of the District's internal control over compliance.

*A deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, when performing their assigned functions, to prevent, or to timely detect and correct, noncompliance with a federal program's applicable compliance requirement. A *material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a federal program compliance requirement will not be prevented, or timely detected and corrected. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with federal program's applicable compliance requirement that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and would not necessarily identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

This report only describes the scope of our internal control over compliance tests and the results of this testing based on Uniform Guidance requirements. Accordingly, this report is not suitable for any other purpose.

*Wilson, Sherman & Snow, Inc.*

April 19, 2018  
Newark, Ohio



**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**SCHEDULE OF FINDINGS  
2 CFR § 200.515  
DECEMBER 31, 2017**

**1. SUMMARY OF AUDITOR'S RESULTS**

|                     |   |   |
|---------------------|---|---|
| <i>(d)(1)(i)</i>    | <b>Type of Financial Statement Opinion</b>  | GAAP – Adverse<br>Regulatory – Unmodified   |
| <i>(d)(1)(ii)</i>   | <b>Were there any material weaknesses in internal control reported at the financial statement level (GAGAS)?</b>      | No  |
| <i>(d)(1)(ii)</i>   | <b>Were there any significant deficiencies in internal control reported at the financial statement level (GAGAS)?</b> | No  |
| <i>(d)(1)(iii)</i>  | <b>Was there any reported material noncompliance at the financial statement level (GAGAS)?</b>                        | No  |
| <i>(d)(1)(iv)</i>   | <b>Were there any material weaknesses in internal control reported for major federal programs?</b>                    | No  |
| <i>(d)(1)(iv)</i>   | <b>Were there any significant deficiencies in internal control reported for major federal programs?</b>               | No  |
| <i>(d)(1)(v)</i>    | <b>Type of Major Programs' Compliance Opinion</b>   | Unmodified  |
| <i>(d)(1)(vi)</i>   | <b>Are there any reportable findings under 2 CFR § 200.516(a)?</b>  | No  |
| <i>(d)(1)(vii)</i>  | <b>Major Programs (list):</b>   | <b>Maternal, Infant &amp; Early Childhood Home Visiting Grant Cluster:</b><br><br>Maternal, Infant and Early Childhood Home Visiting Grant Program/ C.F.D.A. 93.870 |
| <i>(d)(1)(viii)</i> | <b>Dollar Threshold: Type A\B Programs</b>  | Type A: > \$750,000<br>Type B: all others   |
| <i>(d)(1)(ix)</i>   | <b>Low Risk Auditee under 2 CFR §200.520?</b>   | Yes   |

**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**SCHEDULE OF FINDINGS  
2 CFR § 200.515  
DECEMBER 31, 2017**

**2. FINDINGS RELATED TO THE FINANCIAL STATEMENTS  
REQUIRED TO BE REPORTED IN ACCORDANCE WITH GAGAS**

None.

**3. FINDINGS FOR FEDERAL AWARDS**

None.

**COMBINED HEALTH DISTRICT  
CLARK COUNTY**

**SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS  
2 CFR 200.511(b)  
DECEMBER 31, 2017**

| <b>Finding Number</b> | <b>Finding Summary</b> | <b>Status</b> | <b>Additional Information</b>  |
|-----------------------|------------------------|---------------|--------------------------------|
| 2016-001              | Financial Reporting.   | Partially     | Reported in Management Letter. |

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# Dave Yost • Auditor of State

**CLARK COUNTY COMBINED HEALTH DISTRICT**

**CLARK COUNTY**

**CLERK'S CERTIFICATION**

This is a true and correct copy of the report which is required to be filed in the Office of the Auditor of State pursuant to Section 117.26, Revised Code, and which is filed in Columbus, Ohio.

*Susan Babbitt*

**CLERK OF THE BUREAU**

**CERTIFIED  
MAY 22, 2018**