FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2000



STATE OF OHIO OFFICE OF THE AUDITOR

JIM PETRO, AUDITOR OF STATE

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To the Board of Trustees Mark Milford Hicksville Joint Township Hospital District 208 North Columbus Hicksville, Ohio 43526-1299

We have reviewed the Independent Auditor's Report of the Mark Milford Hicksville Joint Township Hospital District, Defiance County, prepared by Rea & Associates, Inc., for the audit period January 1, 2000 through December 31, 2000. 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 Mark Milford Hicksville Joint Township Hospital District is responsible for compliance with these laws and regulations.

JIM PETRO Auditor of State

July 13, 2001

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FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2000

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Rea & Associates, Inc.

ACCOUNTANTS AND BUSINESS CONSULTANTS

May 22, 2001

To The Board of Trustees Mark Milford Hicksville Joint Township Hospital District Hicksville, Ohio

# **INDEPENDENT AUDITORS' REPORT**

We have audited the accompanying financial statements of Mark Milford Hicksville Joint Township Hospital District, as of December 31, 2000. These financial statements are the responsibility of Mark Milford Hicksville Joint Township Hospital's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Mark Milford Hicksville Joint Township Hospital District as of December 31, 2000, and the results of its operations, changes in fund balances, and its cash flows for the year then ended, in conformity with generally accepted accounting principles.

In accordance with *Government Auditing Standards*, we have also issued a report dated May 22, 2001 on our consideration of Mark Milford Hicksville Joint Township Hospital District's internal control over financial reporting and our tests of its compliance with certain provisions of laws and regulations, contracts and grants.

Kea & Associates, Inc.

# BALANCE SHEET-UNRESTRICTED FUNDS AS OF DECEMBER 31, 2000

ASSETS	
	 2000
CURRENT ASSETS:	
Cash and cash equivalents	\$ 994,151
Net patient receivables	1,653,855
Current portion of miscellaneous receivable	27,753
Supplies inventory	63,127
Prepaid expenses	26,923
Assets limited as to use	 138,412
Total current assets	2,904,221
Assets limited as to use:	
Internally designated	2,393,085
Less amount required to meet current obligations	(138,412)
	 2,254,673
Property and equipment, net of depreciation	3,830,698
Investment in joint venture	87,153
Miscellaneous receivables, net of current portion	 91,231
TOTAL ASSETS	\$ 9,167,976
LIABILITIES AND FUND BALANCE	
CURRENT LIABILITIES:	
Current portion of long-term debt and leases	\$ 216,026
Line of gradit	50,000

Current portion of long-term debt and leases	Ф	210,020
Line of credit		50,000
Accounts payable		462,883
Accrued payroll		236,578
Compensated absences		135,650
Total current liabilities		1,101,137
Long-term debt and leases, less current portion		1,030,464
FUND BALANCE:		
Unrestricted		7,036,375
Total fund balance		7,036,375
TOTAL LIABILITIES AND FUND BALANCE	\$	9,167,976

# STATEMENT OF OPERATIONS - UNRESTRICTED FUNDS FOR THE YEAR ENDED DECEMBER 31, 2000

		2000
REVENUE:		
Net patient service revenue	\$	7,395,871
OPERATING EXPENSES:		
Salaries and wages		2,685,114
Employee benefits		720,932
Physician services		553,466
Purchased services		875,384
Supply expense		480,516
Maintenance and repair		92,343
Utilities		141,721
Insurance		69,742
Lease expense		8,480
Miscellaneous		115,936
Provision for bad debts		444,207
Depreciation and amortization		471,351
Physician office		888,038
Total operating expenses	_	7,547,230
Operating loss		(151,359)
NON-OPERATING REVENUES:		
Earnings on investments		251,807
Interest income-patients		13,641
Contributions		17,583
Revenue from investment in joint venture		29,966
Total non-operating revenues		312,997
Change in fair value of investments		(84,000)
Excess of revenues over expenses	<u> </u>	77,638

# STATEMENTS OF CHANGES IN FUND BALANCE FOR THE YEAR ENDED DECEMBER 31, 2000

	 2000
FUND BALANCE, January 1, 2000	\$ 6,958,737
Excess of revenues over expenses	 77,638
FUND BALANCE, December 31, 2000	\$ 7,036,375

## STATEMENT OF CASH FLOWS-UNRESTRICTED FUNDS FOR THE YEAR ENDED DECEMBER 31, 2000

	2000
CASH FLOWS FROM OPERATING ACTIVITIES:	
Cash received from patients and third-party payers	\$ 6,578,255
Cash paid to suppliers for services and goods	(3,043,055)
Cash payments to employees for services	(3,406,046)
Interest paid	(44,529)
Net cash provided by operating activities	84,625
CASH FLOWS FROM CAPITAL AND RELATED FINANCING ACTIVITIES:	
Acquisitions and construction of capital assets	(409,354)
Principal payments on capital leases	(74,261)
Interest paid on capital related debt and capital leases	(77,368)
Net cash used in capital and related financing activities	(560,983)
CASH FLOWS FROM INVESTING ACTIVITIES:	
Proceeds from line of credit	50,000
Proceeds from notes and loans	220,000
Payments on notes and loans	(56,407)
Interest on investments	265,448
Other nonoperating income	47,549
Net cash provided by investing activities	526,590
NET INCREASE IN CASH AND CASH EQUIVALENTS	50,232
CASH AND CASH EQUIVALENTS, Beginning of year	2,687,004
CASH AND CASH EQUIVALENTS, End of year	\$ 2,737,236
CASH AND CASH EQUIVALENTS INCLUDE THE FOLLOWING:	
Cash and equivalents	\$ 994,151
Assets limited as to use cash and cash equivalents:	· · · · · ·
Funds available for future construction and equipment	1,743,085
Total cash and cash equivalents	\$ 2,737,236
A reconciliation of operating loss to net cash flows	
used by operating activities is as follows:	
Operating loss	\$ (151,359)
Adjustments to reconcile operating loss to net cash used by	
operating activities:	
Depreciation and amortization	471,351
Interest expense	121,897
Changes in assets and liabilities:	
Increase in patient accounts receivable	(413,588)
Decrease in miscellaneous receivable	40,180
Decrease in inventories	6,732
Increase in prepaid items	(5,963)
Decrease in accounts payable	(17,376)
Increase in accrued expenses	32,751
Net cash provided by operating activities	\$ 84,625

# NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2000

## 1. NATURE OF BUSINESS AND SIGNIFICANT ACCOUNTING POLICIES

**Organization** – The Mark Milford Hicksville Joint Township Hospital District, Defiance County, (the Hospital) is a body politic and corporate established for the purpose of exercising the rights and privileges conveyed to it by law. The Mark Milford Hicksville Joint Township Hospital District is a Hospital District created under provisions of Section 513.07 of the Ohio Revised Code. The Hospital operates under the direction of a nine-member board consisting of the township trustees of Mark Milford and Hicksville Townships. The Hospital is responsible for establishing, constructing, and maintaining a joint township district hospital or other hospital facilities for the residents of the contiguous townships of Mark, Milford, and Hicksville.

**Basis of Presentation** - The financial statements have been presented in conformity with generally accepted accounting principles as recommended in the Audit Guide (Health Care Organizations) published by the American Institute of Certified Public Accountants. In accordance with hospital industry accounting practice, the financial statements include unrestricted funds.

The Hospital's net assets are considered to be unrestricted.

**Use of Estimates** - The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Accounting Standards - Pursuant to Governmental Accounting Standards Board (GASB) Statement No. 20, Accounting and Financial Reporting for Proprietary Funds and Other Governmental Entities That Use Proprietary Fund Accounting, the Authority has elected to apply the provisions of all relevant pronouncements of the Financial Accounting Standards Board (FASB), including those issued after November 30, 1989.

**Proprietary fund accounting -** The Hospital utilizes the proprietary fund method of accounting whereby revenue and expenses are recognized on the accrual basis. Substantially all revenues and expenses are subject to accrual.

**Cash equivalents** - Cash equivalents include all highly liquid investments purchased from original maturities of six months or less, excluding arrangements under trust agreements.

**Investments** are carried at fair value. Gains and losses on investments, both realized and unrealized, are included in income.

Interest and dividends on investments are included in nonoperating income when earned.

**Patient Accounts Receivable and Revenue** - Patient accounts receivable and revenue are recorded when patient services are performed. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payers and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payers. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

## NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2000

## 1. NATURE OF BUSINESS AND SIGNIFICANT ACCOUNTING POLICIES (continued)

**Inventories-** Inventories are stated at the lower of cost or market value determined by the first-in, first-out method.

Assets Limited as to Use - Assets limited as to use consist of invested funds designated by the Board of Trustees for future capital improvements, funds invested in accordance with agreements with a third-party, and funds held by trustees under indenture agreements (see Note 5).

**Property and Equipment** - Property and equipment are recorded at cost, or, if donated, at fair value on the date of receipt. Depreciation is provided over the estimated useful life of each class of depreciable assets and is computed using the straight-line method. Equipment under capital lease is amortized using the straight-line method over the shorter period of the lease term or the estimated useful life of the equipment. Such amortization is included in depreciation and amortization in the financial statements.

**Charity Care** - The Hospital maintains a policy whereby care is provided to patients who meet certain criteria without charge or at amounts less than its established rates. Because the Hospital does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue.

## 2. DEPOSITS AND INVESTMENTS

The classification of cash and cash equivalents, assets whose use is limited and investments on the financial statements differs from criteria set forth in GASB Statement No. 3 "Deposits with Financial Institutions, Investments and Reverse Repurchase Agreements". A reconciliation between the general fund classifications of cash and cash equivalents, assets whose use is limited and investments on the financial statements and the classification of deposits and investments per GASB Statement No. 3 is as follows:

	Cash and Cash <u>Equivalents</u>	Assets Whose Use Is <u>Limited</u>		
Financial statements Investments Cash on hand	\$ 994,151 0 <u>(790</u> )	\$ 2,247,085 (504,000) 0		
GASB Statement No. 3 deposits	<u>\$ 993,361</u>	<u>\$ 1,743,085</u>		

The Hospital may deposit funds not needed for immediate expenses in interest-bearing or non-interestbearing accounts or in United States government obligations.

## NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2000

## 2. DEPOSITS AND INVESTMENTS (continued)

**Deposits** - At December 31, 2000, the carrying amount of the Hospital's bank deposits were \$2,897,968 as compared to bank balances of \$2,737,235. The differences in carrying amounts and bank balances are caused by outstanding checks, deposits in-transit, and other reconciling items. Of the bank balances \$284,188 is covered by Federal insurance programs and \$2,613,780 is collateralized with securities held by the financial institution or by its trust department or agent but not in the Hospital's name.

**Investments** - The Hospital's investments are categorized below to give an indication of the level of risk assumed by the entity. Risk Category 1 includes those investments that meet any one of the following criteria: a) Insured; b) Registered; or c) Held by the Hospital or its agent in the Hospital's name. Risk Categories 2 and 3 include investments which are neither insured or registered. Category 2 includes investments which are held by the counterparty's trust department (or agent) in the Hospital's name. Category 3 includes investments held by a) the counterparty, or b) the counterparty's trust department (or agent) but not in the Hospital's name.

	2000					
	1		Category 2	3	Reported <u>Amount</u>	Fair Value
Common stock	<u>\$</u>	0	<u>\$ 504,000</u>	<u>\$0</u>	<u>\$504,000</u>	<u>\$ 504,000</u>
Total investments	<u>\$</u>	0	<u>\$ 504,000</u>	<u>\$0</u>	<u>\$504,000</u>	<u>\$ 504,000</u>

Common stock with a fair market value at its donation date of \$248,000 and market value of \$504,000 as of December 31, 2000 is traded on a quoted market; therefore, the year-end market value is determined by its quoted market price.

# **3. PATIENT ACCOUNTS RECEIVABLE**

The details of patient accounts receivable are set forth below:

1	December 31, 2000
Total patient accounts receivable Less allowances for:	\$ 2,919,011
Contractual adjustments	(918,193)
Uncollectible adjustments	(346,963)
Net patient receivables	<u>\$ 1,653,855</u>

## NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2000

# 4. NOTES AND LOANS RECEIVABLE

Notes and loans receivable represent loans to physicians under various cash flow support and loan arrangements. The physician loans are to be repaid in varying monthly installments including interest at 7.0%. A summary of the amounts outstanding is as follows:

	December 31, 2000
Gross notes and loans receivable	\$ 118,984
Less: Current Portion	(27,753)
Long term portion	<u>\$ 91,231</u>

# 5. ASSETS LIMITED AS TO USE

Assets limited as to use that are required for obligations classified as current liabilities are reported in current assets. The composition of assets limited as to use is set forth in the following table.

	December 31, 2000
Internally designated for future capital improvements:	
Cash and cash equivalents	\$ 1,743,085
Investments in common stock	504,000
Miscellaneous assets	146,000
Total assets limited as to use	<u>\$ 2,393,085</u>
Assets limited as to use - current portion	\$ 138,412
Assets limited as to use - long term portion Total assets limited as to use	<u>2,254,673</u> <u>\$ 2,393,085</u>

#### 6. INVESTMENTS

The Hospital's investments are held by the Hospital or its agent in the Hospital's name.

The cost and approximate fair value of investments are as follows:

## Assets limited as to use:

		Fair Value Fair Value		Fair Value Fair Value Cha		nge in	
	 Cost	Janu	<u>11, 2000 ary 1</u>	Dece	<u>mber 31, 2000</u>	Fair	Value
Common Stock:							
Empire Banc Stock	\$ 248,000	\$	<u>588,000</u>	<u>\$</u>	<u>504,000</u>	\$	<u>(84,000</u> )

The Empire Banc Stock collateralizes the long-term debt discussed in Note 8.

# NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2000

# 7. PROPERTY AND EQUIPMENT

Property and equipment consist of the following:

	December 31, 2000	Depreciable Lives-Years	
Assets Held by Hospital:			
Land	\$ 17,500	0	
Land and land improvements	248,677	0 - 20	
Building and fixed equipment	3,685,650	5 - 20	
Furniture and fixtures	4,642,426	5 - 20	
Capital leases	396,473	5 - 10	
Rehabilitation center	898,169	5 - 20	
Contractual equipment	13,903	5 - 20	
Total cost	9,902,798		
Less accumulated depreciation	(6,072,100)		
Property and equipment - net	<u>\$ 3,830,698</u>		

Depreciation and amortization totaled \$471,351 in 2000.

# 8. LONG-TERM DEBT AND LEASES

Note payable to the Hicksville Bank, December 14, 1999, due in monthly installments of principal plus interest at	Dee	cember 31, 2000
4.85%, collateralized by 16,800 shares of Empire Banc Stock	\$	762,974
Note payable to the Hicksville Bank, June 21, 2000, due in monthly installments of principal plus interest at 5.7%, collateralized by Hospital Equipment		200,618
Obligations under capital lease		<u>282,898</u> 1,246,490
Less: current portion Long term portion	<u>\$</u>	(216,026) <b>1,030,464</b>

## NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2000

# 8. LONG-TERM DEBT AND LEASES (continued)

The Hospital has entered into various non-cancelable lease agreements for equipment. These capital leases are due in monthly installments including interest at rates ranging from 4.0% to 5.1%. They expire at various times through 2004 and are collateralized by the equipment.

	December 31 2000	
Cost of equipment under capital lease	\$ 396,473	
Accumulated amortization	(149,021)	
Net carrying amount	<u>\$ 247,452</u>	

Minimum payments on these obligations to maturity as of December 31, 2000 are as follows:

	Long-Term Debt	Capital Leases	Total
2001	\$ 126,285	\$ 89,791	\$ 216,076
2002	126,285	89,791	216,076
2003	126,285	89,791	216,076
2004	126,285	39,285	165,570
2005	100,316	0	100,316
Thereafter	679,616	0	679,615
Subtotal	1,285,072	308,658	1,593,730
Less amount representing interest	(321,480)	(25,760)	(347,240)
Total	<u>\$ 963,592</u>	<u>\$ 282,898</u>	<u>\$ 1,246,490</u>

The Hospital's long-term debt and capital leases are stated at the historical amount which approximates the fair value at December 31, 2000. The current rates and terms offered to the Hospital are comparable to the weighted averaged interest rates and terms of the current outstanding long-term debt and capital leases.

# 9. LINE OF CREDIT

The Hospital has a line of credit with a bank in the amount of \$250,000. The line carries a 6.25% rate of interest, matures on October 1, 2001 and requires monthly interest payments. As of December 31, 2000, the Hospital owes \$50,000 against the line. The loan is secured by investments of the Hospital.

# **10. CHARITY CARE**

The Hospital provides uncompensated care to indigent patients. The Hospital maintains records to identify and monitor the level of charity care it provides. These records include the amount of charges foregone for services and supplies furnished under it charity care policy. Charges foregone for services rendered under the Hospital's charity care policy amount to approximately \$63,497 in 2000.

## NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2000

#### **11. PENSION PLANS**

#### Public Employees Retirement System

The Hospital contributes to the Public Employees Retirement System of Ohio (PERS), a cost-sharing multiple employer public employee retirement system administered by the Public Employees Retirement Board. PERS provides basic retirement and disability benefits, annual cost of living adjustments, and death benefits to Plan members and beneficiaries. Benefits are established by Chapter 145 of the Ohio Revised Code. PERS issues a publicly available financial report that includes financial statements and required supplementary information for PERS. That report may be obtained by writing to the Public Employees Retirement System, 277 East Town Street, Columbus, Ohio 43251-4642.

Plan members are required to contribute 8.5% of their annual covered salary to fund pension obligations and the Hospital is required to contribute 13.55%. Contributions are authorized by state statute. The contribution rates are determined actuarially. The Hospital's contributions to PERS for the years ended December 31, 2000, 1999, and 1998 were approximately \$361,219 \$433,965 and \$414,246.

# **12. POST EMPLOYMENT HEALTH CARE BENEFITS**

#### Public Employees Retirement System

In addition to providing pension benefits through Public Employees Retirement System of Ohio ("System"), the System provides postretirement health care coverage to age and service retirees with ten or more years of qualifying Ohio Service Credit. Health care coverage for disability recipients and primary service recipients is also available. The Ohio Revised Code provides statutory authority for employee and employer contributions to the System. As described in Note 11 – Retirement Commitments, the employer contribution rate to the System was 13.55% of covered payroll. Of covered payroll, 4.3% was the portion that was used to fund health care in 2000, the latest information available.

The Other Post-Employment Benefits (OPEB) is a standardized disclosure measure of the present value of OPEB adjusted for the effects of payroll increases and health care premium increases. The measure, which is an actuarial present value of credited projected benefits, is intended to help users assess the System's funding status on a going-concern basis, assess progress made in accumulating sufficient assets to pay benefits when due. The System does not make separate measurements of assets and OPEB for individual employers.

As of December 31, 1999, the unaudited estimated net assets available for future OPEB payments were \$10,805,500. The actuarially accrued liability and the unfunded actuarial accrued liability, based on the actuarial cost method used, were \$12,473,600 and \$1,668,100, respectively.

## NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2000

# **13. SELF-INSURED HEALTH BENEFITS**

The Hospital is self-insured, subject to certain stop-loss coverage, for its employees' health benefits. The Hospital accrues the estimated costs of reported and incurred-but-not-reported claims based on its actual claims history. At December 31, 2000, the estimated amount of these liabilities, included in the Hospital's other accrued expenses, was \$73,850. This liability is the Hospital's best estimate based on available data. Changes in the reported balances of claims liabilities for 2000 resulted from the following:

 January 1, 2000	nuary 1,Changes in2000Estimates		Claim Payments		December 31, 2000	
\$ 60,850	\$	250,104	\$ 237,104	\$	73,850	

## **14. ADVERTISING**

The Hospital expenses advertising costs as they are incurred. Advertising expense was \$25,530 for, 2000. Advertising expenses are included as operating expenses in the financial statements.

## **15. MEDICAL MALPRACTICE CLAIMS**

The Hospital has purchased occurrence-based insurance to protect itself against losses from medical malpractice claims. The policy covers claims resulting from incidents that occur during the policy term, regardless of when the claims are reported to the insurance carrier. The Hospital is not aware of any medical malpractice claims, either asserted or unasserted, that would exceed the policy limits of \$3,000,000 per individual claims and \$5,000,000 in the annual aggregate.

## **16. RELATED ORGANIZATIONS**

**Community Memorial Hospital** – The operations of the Community Memorial Hospital (component unit) are controlled by the Board of Hospital Governors under the authority of Section 513.16. The oversight authority of the Hospital consists of six members, one elector from each township and three electors-at-large from the Hospital District, one of whom is required to be a doctor of medicine, two are appointed by the Hospital District. The Hospital District serves as the appropriating authority and can also levy taxes for the Board of Hospital Governors. The operations of the Community Memorial Hospital are accounted for as a blended component unit.

## NOTES TO FINANCIAL STATEMENTS FOR THE YEAR ENDED DECEMBER 31, 2000

#### 16. RELATED ORGANIZATIONS (continued)

#### Community Memorial Hospital (continued)-

**InSight Health Services Corporation** – Pursuant to an agreement authorized by state statutes, the Community Memorial Hospital joined Community Hospitals of Williams County, Inc. and Wood County Hospital, Inc. to establish and provide diagnostic imaging services to hospitals on a mobile shared service basis. The chief executive officer of each partner, or his designee, serves as a member of the Governing Board of the joint venture. All the assets, property, income, revenue, and earnings of the joint venture shall be held, used, managed, devoted, expended, and applied at the discretion and judgement of the Governing Board. The Board of Hospital Governors' share of equity in the joint venture is disclosed as an investment in the component unit's financial statements. Financial information for the joint venture is presented in Note 17.

Management believes the financial statements included in this report represent all of the funds of the Hospital District over which the Board has the ability to exercise direct operating control.

# **17. JOINT VENTURE**

On April 20, 1994, the Hospital entered into a general partnership with a 7.7% interest in four county MRI services. The joint venture is accounted for using the equity method and is shown as an *Investment in joint venture* on the balance sheet.

In 2000, the Hospital District made payments for services rendered of \$64,840, to InSight Health Services Corporation. A copy of the financial report may be obtained from the InSight Health Services Corporation, 4400 MacArthur Boulevard, Suite 800, Newport Beach, California 92660.

## **18. COMMITMENTS**

The Hospital is involved in various pending claims and lawsuits. In the opinion of the Hospital's management, after consultation with legal counsel, the potential for loss on the claims and lawsuits will not materially effect the Hospital's financial position.

Rea & Associates, Inc.

ACCOUNTANTS AND BUSINESS CONSULTANTS

May 22, 2001

To The Board of Trustees Mark Milford Hicksville Joint Township Hospital District Hicksville, Ohio

## REPORT ON COMPLIANCE AND ON INTERNAL CONTROL OVER FINANCIAL REPORTING BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

We have audited the financial statements of Mark Milford Hicksville Joint Township Hospital District, as of and for the year ended December 31, 2000, and have issued our report thereon dated May 22, 2001. We have conducted our audit in accordance with generally accepted auditing standards and standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States.

# Compliance

As part of obtaining reasonable assurance about whether Mark Milford Hicksville Joint Township Hospital District's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grants, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we not express such an opinion. The results of our tests disclosed no instances of noncompliance that are required to be reported under *Government Auditing Standards*. However, we noted certain immaterial instances of noncompliance that we have reported to management of Mark Milford Hicksville Joint Township Hospital District in a separate letter dated May 22, 2001.

# **Internal Control Over Financial Reporting**

In planning and performing our audit, we considered Mark Milford Hicksville Joint Township Hospital District's internal control over financial reporting in order to determine our auditing procedures for the purpose of expressing our opinion on the financial statements and not to provide assurance on the internal control over financial reporting. Our consideration of the internal control over financial reporting would not necessarily disclose all matters in the internal control over financial reporting that might be material weaknesses. A material weakness is a condition in which the design or operation of one or more of the internal control components does not reduce to a relatively low level the risk that misstatements in amounts

Mark Milford Hicksville Joint Township Hospital District Page 2

that would be material in relation to the financial statements being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions. We noted no matters involving the internal control over financial reporting and its operation that we consider to be material weaknesses. However, we noted other matters involving the internal control over financial reporting which we have reported to management of Mark Milford Hicksville Joint Township Hospital District in a separate letter dated May 22, 2001.

This report is intended solely for the information and use of the Board of Trustees, management, and federal awarding agencies and pass-through entities and is not intended to be and should not be used by anyone other than these specified parties.

Rea & Associates, Inc.



STATE OF OHIO OFFICE OF THE AUDITOR

JIM PETRO, AUDITOR OF STATE

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Facsimile 614-466-4490

# MARK MILFORD HICKSVILLE JOINT TOWNSHIP HOSPITAL DISTRICT

# DEFIANCE 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 JULY 31, 2001