FINANCIAL STATEMENTS

**DECEMBER 31, 2001 and 2000** 



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Board of Trustees Hocking Valley Community Hospital

We have reviewed the Independent Auditor's Report of the Hocking Valley Community Hospital, Hocking County, prepared by Blue & Co., LLC for the audit period January 1, 2001 through December 31, 2001. 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 Hocking Valley Community Hospital is responsible for compliance with these laws and regulations.

JIM PETRO Auditor of State

June 11, 2002



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#### REPORT OF INDEPENDENT AUDITORS

Board of Trustees HOCKING VALLEY COMMUNITY HOSPITAL Logan, Ohio

We have audited the accompanying balance sheets of Hocking Valley Community Hospital (the Hospital) as of December 31, 2001 and 2000, and the related statements of revenues, expenses and changes in fund balance and cash flows for the years then ended. These financial statements are the responsibility of the Hospital's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America 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 audits 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 audits provide 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 Hocking Valley Community Hospital as of December 31, 2001 and 2000, and the results of its operations, changes in fund balance and cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with *Government Auditing Standards*, we have also issued, under separate cover, a report dated March 29, 2002, on our consideration of Hocking Valley Community Hospital's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grants.

Blue & Co., LLC

March 29, 2002

# BALANCE SHEETS DECEMBER 31, 2001 and 2000

### **ASSETS**

	2001	2000		
Current assets:				
Cash and cash equivalents	\$ 1,104,081	\$	1,342,271	
Short-term investments	206,091		1,162,209	
Patient accounts receivable, less allowance for doubtful				
accounts of \$618,000 in 2001 and \$558,000 in 2000	4,518,107		4,179,172	
Inventories	189,682		139,647	
Third party settlements	217,497		_	
Prepaid expenses and other assets	 18,038		10,280	
Total current assets	6,253,496		6,833,579	
Assest whose use is limited:				
Under bond indenture agreement	330,000		330,000	
Property, plant and equipment, net	 9,540,828		8,283,206	
Other assets:				
Long-term investments	214,623		255,101	
Other receivables	15,699		35,901	
Deferred financing costs, net	101,290		102,607	
Total other assets	331,612		393,609	
Total assets	\$ 16,455,936	\$	15,840,394	

# LIABILITIES AND FUND BALANCE

	2001			2000		
Current liabilities:						
Current portion of capital lease obligations	\$	359,422	\$	373,723		
Current portion of long-term debt		270,000		260,000		
Accounts payable and accrued expenses		1,362,204		1,874,300		
Accrued salaries, wages and employee benefits		1,533,585		987,796		
Third-party settlements				88,717		
Total current liabilities		3,525,211		3,584,536		
Capital lease obligations, less current portion		978,110		969,861		
Long-term debt, less current portion		3,816,427		4,082,817		
Total liabilities		8,319,748		8,637,214		
Fund balance		8,136,188		7,203,180		
Total liabilities and fund balance	\$	16,455,936	\$	15,840,394		

See accompanying notes to financial statements.

# STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN FUND BALANCE YEARS ENDED DECEMBER 31, 2001 and 2000

	2001	2000
Revenues:		
Net patient service revenue	\$ 21,594,279	\$ 20,973,644
Other operating income	111,290	118,065
Total revenues	21,705,569	21,091,709
Operating expenses:		
Salaries and wages	7,675,153	7,083,836
Employee benefits	2,083,436	1,530,490
Supplies and other	5,028,278	4,617,051
Professional fees and services	3,696,165	4,525,903
Provision for bad debts	1,156,252	1,601,682
Depreciation and amortization	1,030,070	965,276
Insurance	148,265	106,348
Interest	358,126	329,010
Total expenses	21,175,745	20,759,596
Operating gain	529,824	332,113
Nonoperating gains:		
Investment income	113,063	179,630
Other	609,222	(555)
Total nonoperating gains	722,285	179,075
Revenues and gains over expenses	1,252,109	511,188
Fund balance, beginning of year	7,203,180	6,982,135
Transfers to affiliates	(319,101)	(290, 143)
Fund balance, end of year	\$ 8,136,188	\$ 7,203,180

See accompanying notes to financial statements.

# STATEMENTS OF CASH FLOWS YEARS ENDED DECEMBER 31, 2001 and 2000

		2001	2000		
Cash flows from operating activites and gains:					
Revenues and gains over expenses	\$	1,252,109	\$	511,188	
Adjustments to reconcile revenues and gains over expenses					
to net cash from operating activities and gains:					
Depreciation and amortization		1,030,070		965,276	
Provision for bad debts		1,156,252		1,601,682	
Changes in assets and liabilities:					
Patient accounts receivable		(1,495,187)		(2,405,025)	
Inventories, prepaid expenses and other assets		(56,476)		80,904	
Accounts payable and accrued expenses, accrued salaries,					
wages and employee benefits		33,693		560,097	
Third-party settlements		(306, 214)		252,727	
Net cash from operating activities and gains		1,614,247		1,566,849	
Cash flows from noncapital financing activities:					
Transfers to affiliates		(319,101)		(290, 143)	
Cash flows from investing activities:					
Change in investments, net		996,596		(71,873)	
Other receivables		20,202		53,775	
Net cash from investing activities		1,016,798		(18,098)	
Cash flows from capital and related financing activities:					
Repayment of long-term debt		(256, 390)		(246, 201)	
Repayment of capital lease obligations		(422, 872)		(389,036)	
Acquisition of property and equipment		(1,870,872)		(676,490)	
Net cash from financing activities		(2,550,134)		(1,311,727)	
Net change in cash and cash equivalents		(238, 190)		(53, 119)	
Cash and cash equivalents, beginning of year		1,342,271		1,395,390	
Cash and cash equivalents, end of year	\$	1,104,081	\$	1,342,271	
Supplemental disclosures of cash flow information:	•				
Cash paid for interest	_\$_	358, 126	\$	329,010	
Noncash investing and financing activities:					
Property additions under capital lease agreements	\$	416,820	\$	1,158,497	

See accompanying notes to financial statements.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

#### 1. SIGNIFICANT ACCOUNTING POLICIES

#### Organization

Hocking Valley Community Hospital (the Hospital), located in Hocking County, Logan, Ohio, is organized as a county hospital under provisions of the general statutes of the State of Ohio requiring no specific articles of incorporation. The organization is exempt from Federal income taxes. The Board of Trustees, appointed by the county commissioners and the probate and common pleas court judges, is charged with the management and operation of the Hospital, its finances and staff. The Hospital, which began operations in 1966, has a 61-bed acute care unit and a 30-bed skilled nursing unit. The Hospital is considered a component unit of Hocking County, Ohio and is included as a component unit in the general-purpose financial statements of Hocking County.

#### Basis of Presentation

The financial statements have been presented in conformity with accounting principles generally accepted in the United States of America as recommended in the Audit Guide (Health Care Organizations) published by the American Institute of Certified Public Accountants. The significant accounting policies conform to Accounting Principles Generally Accepted in the United States (GAAP) for governmental units as prescribed in the statements issued by the Governmental Accounting Standards Board (GASB) and other recognized authoritative sources. The Hospital also applies the Financial Accounting Standards Board Statements and Interpretations issued prior to November 30, 1989, to the extent that they do not contradict or conflict with GASB pronouncements.

#### **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.

#### **Proprietary Fund Accounting**

The Hospital utilizes the proprietary fund method of accounting whereby revenues and expenses are recognized on the accrual basis.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

#### 1. SIGNIFICANT ACCOUNTING POLICIES (continued)

#### Charity Care

The Hospital provides care to patients who meet certain criteria under its charity care policy 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. As a part of previous financing related to its current hospital facilities, the Hospital received grants from the Hill-Burton Agency of the Federal government. Attached to the grants are certain restrictions requiring the Hospital to provide an annual amount of 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 its charity care policy, the estimated cost of those services and supplies and equivalent service statistics. The amount of charity care not recorded as revenue was approximately \$822,668 and \$745,000 in 2001 and 2000, respectively.

#### Net Patient Service Revenue and Patient Accounts Receivable

Normal billing rates for patient services less contractual adjustments are included in patient service revenue. Patient accounts receivable is adjusted for contractual allowances which are recorded on the basis of preliminary estimates of the amounts to be received from third party payors. Final adjustments are recorded in the period such amounts are finally determined. In 2001 and 2000, approximately 50% of the Hospital's total patient revenue was derived from Medicare payments while 12% was derived from Medicaid. The remaining revenue was derived primarily from commercial insurance payments and individual self-payments.

#### **Investments**

The Hospital's policy is to invest available funds in obligations of the U.S. Government, certificates of deposit, mutual funds and money market funds. Marketable equity securities owned by the Hospital were received through donations. The portfolio is carried at fair value.

# NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

#### 1. SIGNIFICANT ACCOUNTING POLICIES (continued)

#### Assets Whose Use is Limited

Assets whose use is limited consist of certificates of deposit restricted by the Trustee for maintenance of a minimum operating reserve in connection with the Hospital's Refunding and Improvement Bonds. The certificates are carried at fair value which approximates cost.

#### **Inventories**

Inventories are stated at the lower of cost (first-in, first-out) or market.

#### Property, Plant and Equipment

Property, plant and equipment are reported on the basis of cost, except for donated items, which are recorded at fair value at the date of the donation. Expenditures which materially increase values, change capacities, or extend useful lives are capitalized. Depreciation is computed using the straight-line method over the expected useful lives of depreciable assets. Equipment under capital leases is amortized using the straight-line method over the lesser of the lease term or the estimated useful life of the equipment.

#### **Deferred Financing Costs**

Deferred financing costs consist primarily of underwriter fees and other costs related to the issuance of the bonds and are being amortized over the life of the bonds based on the straight-line method. Accumulated amortization as of December 31, 2001 and 2000, was \$13,222 and \$11,905, respectively.

#### Cash and Cash Equivalents

The Hospital considers all highly liquid investments purchased with an original maturity of three months or less to be cash equivalents.

# NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

#### 1. SIGNIFICANT ACCOUNTING POLICIES (continued)

#### Risk Management

The Hospital is exposed to various risks of loss from torts; theft of, damage to, and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; and employee health, dental, and accident benefits. Commercial insurance coverage is purchased for claims arising from such matters. Settled claims have not exceeded this coverage.

#### 2. NET PATIENT SERVICE REVENUE

The Hospital has agreements with third-party payors that provide for payment to the Hospital at amounts different from its established rates. Contractual adjustments under third-party reimbursement programs represent the difference between the Hospital's billings at established rates for services and amounts reimbursed by third-party payors. A summary of the basis of reimbursement with major third-party payors follows:

- Inpatient acute care services rendered to Medicare and Medicaid program beneficiaries are paid at prospectively determined rates-per-discharge. These rates vary according to a patient classification system that is based on clinical, diagnostic and other factors; and
- Certain other costs applicable to the Medicare and Medicaid programs are paid under a cost reimbursement methodology. As a result, final payment for these services will be determined after submission of the Hospital's cost reports and audits by the third-party payors.

Effective August 1, 2000, Medicare initiated the Outpatient Prospective Payment System, whereby most outpatient services will be paid on a prospective basis. There are certain provisions that allow for transitional payments through 2004 if payment under the prospective method falls below what would have been paid on the cost method. Differences between the total program billed charges and the interim payments are reflected as deductions from revenues.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

#### 2. NET PATIENT SERVICE REVENUE (continued)

Gross patient service revenue and the allowances to reconcile to net patient service revenue for the years ended December 31, 2001 and 2000, are as follows:

	2001	2000
Gross patient service revenue Less third-party allowances	\$ 33,743,246 12,148,967	\$ 32,369,128 11,395,484
Net patient service revenue	\$ 21,594,279	\$ 20,973,644

#### 3. DEPOSITS AND INVESTMENTS

The classification of cash and cash equivalents, assets whose use is limited and investments in the financial statements differ 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 in the financial statements and the classifications of deposits and investments per GASB Statement No. 3 is as follows:

	December 31, 2001					
	Assets Whose					
	Ca	sh and Cash		Use is		
	<u> </u>	Equivalents		Limited	In	vestments
Financial statements	\$	1,104,081	\$	330,000	\$	420,714
Government securities		-		-		(113,634)
Mutual funds and equities		-		-		(100,989)
Star Ohio		(27,897)		-		-
Merrill Lynch cash management account		(3,454)		-		-
Advest money market account		(716,417)		-		-
Cash on hand		(750)		_		
GASB Statement No. 3 deposits	\$	355,563	\$	330,000	\$	206,091

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

#### 3. DEPOSITS AND INVESTMENTS (continued)

	December 31, 2000						
			Ass	sets Whose			
	Cas	sh and Cash		Use is			
	E	quivalents	Limited		Investments		
Financial statements	\$	1,342,271	\$	330,000	\$	1,417,310	
Government securities		-		-		(154, 113)	
Mutual funds and equities		-		-		(958,413)	
Star Ohio		(107,661)		-		-	
Merrill Lynch cash management account		(41,626)		-		-	
Advest money market account		(884,752)		-		-	
Cash on hand		(750)					
GASB Statement No. 3 deposits	\$	307,482	\$	330,000	\$	304,784	

#### **Deposits**

At December 31, 2001 and 2000, the carrying amount of the Hospital's bank deposits for all funds is \$891,654 and \$942,266 as compared to a bank balance of \$1,187,500 and \$1,021,495, respectively. The differences in carrying amounts and bank balances are caused by outstanding checks and deposits in-transit. Of the bank balances, at December 31, 2001 and 2000, \$120,291 and \$123,375 is covered by Federal insurance programs and \$1,067,209 and \$898,120, respectively, 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 for GASB Statement 3 purposes 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.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

#### 3. DEPOSITS AND INVESTMENTS (continued)

Risk Categories 2 and 3 include investments that are neither insured nor registered. Category 2 includes investments that 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.

	December 31, 2001								
		_		Category			Carrying		
		<u>l</u>			3		Amount		
Government securities	\$	-	\$	-	\$	113,634	\$	113,634	
Certificates of deposit		-		747,768		-		747,768	
Mututal funds and equities		-				100,989		100,989	
Total	\$		\$	747,768	\$	214,623	\$	962,391	

#### 4. PROPERTY, PLANT AND EQUIPMENT

Property, plant and equipment consist of the following:

	2001	2000
Land improvements	\$ 243,665	\$ 239,180
Buildings and improvements	10,472,453	8,883,923
Equipment	7,636,488	7,105,936
Equipment under capital lease obligations	2,422,841	2,260,034
Total	20,775,447	18,489,073
Less accumulated depreciation	11,234,619	10,205,867
Property, plant and equipment, net	\$ 9,540,828	\$ 8,283,206

#### 5. MEDICARE AND MEDICAID THIRD-PARTY SETTLEMENTS

Reimbursement for Medicare and Medicaid patients is subject to audit and final settlements by the respective intermediaries. Final settlements have been reached with Medicare through 1998 and with Medicaid through 1996. The amounts reported in the financial statements represent the estimated settlements outstanding at December 31, 2001 and 2000, which Hospital management believes will approximate final settlements after audit by the respective agencies.

# NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

### 6. LONG-TERM DEBT AND LEASES

Long-term debt consists of the following:

	Decem	ber 31
	2001	2000
County Hospital Refunding and Improvement Bonds, dated July 15, 1993		
Serial bonds, rates ranging from 3.95% to 4.8%, principal each December 1 through 2003, ranging from \$150,000 to \$185,000, with interest due each June 1 and December 1.	\$ 360,000	\$ 530,000
Term bonds, 5.35% due December 1, 2008, mandatory annual redemption beginning December 1, 2004, in installments ranging from \$195,000 to \$235,000, plus interest.	1,075,000	1,075,000
Term bonds, 5.45%, due December 1, 2013, mandatory annual redemption beginning December 1, 2009, in installments ranging from \$50,000 to \$65,000, plus interest.	290,000	290,000
County Hospital Improvement Bonds, dated March 3, 1999:		
Serial bonds, rates ranging from 3.3% to 4.65%, principal due each December 1 through 2013, ranging from \$90,000 to \$145,000, with interest due each June 1 and December 1.	1,405,000	1,495,000
Term bonds, 4.75%, due December 1, 2019, mandatory annual redemption beginning December 1, 2014, in installments ranging from \$150,000 to \$185,000, plus interest.	1,025,000	1,025,000
Less bond discount	68,573	72,183
Total	 4,086,427	4,342,817
Less current portion	 270,000	260,000
Long-term debt, excluding current portion	\$ 3,816,427	\$ 4,082,817

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

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

In 1993, the Hospital received \$3,300,000 in proceeds from the issuance of Hocking County Hospital Refunding and Improvement Bonds (Refunding and Improvement Bonds) which was used to repay \$2,040,000 Hocking County Hospital Refunding Bonds (Refunding Bonds) before their scheduled maturity, repay a capital lease and construct certain Hospital improvements. The Hospital has agreed with the Hocking County Commissioners, as Trustee for the Refunding and Improvement Bonds, to maintain a minimum operating reserve of \$330,000.

The Hospital leases equipment under capital lease agreements, which generally require the Hospital to pay insurance and maintenance costs. These capital leases are due in monthly installments including interest at rates ranging from approximately 6.3% to 12.2%. They expire at various dates through March 2006 and are collateralized by the equipment leased.

	 December 31				
	2001	2000			
Cost of equipment under capital lease Accumulated amoritzation	\$ 2,422,841 1,014,492	\$	2,260,034 539,279		
Net carrying amount	\$ 1,408,349	\$	1,720,755		

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

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

Minimum payments on these obligations to maturity as of December 31, 2001 follows:

	Capital					
		Debt		Leases		Total
Year:		_				
2002	\$	270,000	\$	474,033	\$	744,033
2003		280,000		447,122		727,122
2004		100,000		413,109		513,109
2005		105,000		221,691		326,691
2006		110,000		39,026		149,026
Thereafter		3,290,000		-		3,290,000
Subtotal		4,155,000		1,594,981	- ;	5,749,981
Less interest		-		257,449		257,449
Less bond discount		68,573		-		68,573
Total		4,086,427		1,337,532	- ;	5,423,959
Less current portion		270,000		359,422		629,422
Long-term portion	\$	3,816,427	\$	978,110	\$ 4	4,794,537

#### 7. PENSION PLAN

All Hospital employees are required to participate in the Public Employees Retirement System of Ohio (PERS), a cost sharing multiple-employer public employee retirement system. PERS provides retirement and disability benefits, annual cost-of-living adjustments, healthcare benefits and death benefits to plan members and beneficiaries. PERS issues a publicly available comprehensive annual financial report, which includes financial statements and required supplementary information for PERS. That report may be obtained by writing to Public Employees Retirement System of Ohio, 277 East Town Street, Columbus, Ohio, 43215-4642 or by calling (614) 466-2085 or (800) 222-PERS (7377).

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

#### 7. PENSION PLAN (continued)

#### **Funding Policy**

The required, actuarially-determined contribution rates for the Hospital and for employee are 13.55% and 8.5%, respectively. The Hospital's contributions, representing 100% of employer contributions, for the last three years follows:

Year	Contribution
2001	\$ 1,043,601
2000	781,737
1999	881.636

PERS also provides post-retirement healthcare coverage to age and service retireants with 10 or more years of qualifying Ohio service credit. Healthcare coverage for disability recipients and primary survivor recipients is available. The healthcare coverage provided by the retirement system is considered an Other Post-employment Benefit (OPEB). A portion of each employer's contribution to PERS is set aside for the funding of post-retirement healthcare. The Ohio Revised Code provides statutory authority for employer contributions. The portion of the 2001 and 2000 employer contribution rates of 13.55% and 10.84% used to fund healthcare was 4.3%. The Ohio Revised Code provides the statutory authority requiring public employers to fund post-retirement healthcare through their contributions to PERS.

OPEB are financed through employer contributions and investment earnings there on. The contributions allocated to retiree healthcare, along with investment income on allocated assets and periodic adjustments in healthcare provisions are expected to be sufficient to sustain the program indefinitely. The number of benefit recipients eligible for OPEB at December 31, 2001 and 2000, was 411,076 and 401,339, respectively.

#### 8. PROFESSIONAL LIABILITY INSURANCE

The Hospital has professional liability insurance with a commercial carrier. Coverage is \$1,000,000 per occurrence and \$3,000,000 in the aggregate. In addition, the Hospital has umbrella coverage of \$1,000,000 per occurrence and \$1,000,000 in the aggregate. The policy also requires that certain members of the medical staff carry professional liability coverage of no less than \$1,000,000 per occurrence and \$1,000,000 in the aggregate. The Hospital's coverage is on a claims made basis.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

#### 9. DEFERRED COMPENSATION

Employees of the Hospital may elect to participate in the Ohio Public Employees Deferred Compensation Program (Program), a deferred compensation plan under Internal Revenue Code Section 457. Under the Program, employees may elect to defer a portion of their pay until a later date, usually after retirement. The deferred pay and any income earned thereon are not subject to federal and state income taxes until actually received by the employee.

#### 10. RELATED PARTIES

The Hocking Valley Community Hospital Memorial Fund, Inc. (Foundation) was organized as a separate not-for-profit membership corporation. The purpose of the Foundation is to solicit gifts for the benefit of the Hospital. The Board of Directors of the Foundation is elected by the Foundation's members. The accompanying financial statements do not include the assets, obligations, revenues or expenses of the Foundation.

Hocking Valley Health Services (HVHS) is a not-for-profit membership corporation located in Logan, Ohio. The purpose of HVHS is to provide healthcare and physician services and to own, lease, operate and/or provide healthcare facilities for the promotion of health in the area served by the Hospital. Additionally, HVHS is to conduct strategic healthcare planning and otherwise operate exclusively for the benefit and support of the Board of Governors of the Hospital. The Board of Trustees of HVHS are elected by HVHS's members of whom fifty percent of the voting rights are controlled by the Board of Governors of the Hospital.

Hocking Valley Medical Group, Inc. (HVMG) was organized as a separate not-for-profit stock professional corporation. The purpose of HVMG is to engage in the practice and to render the professional services, of medicine and to further the charitable purposes of the Foundation and the Hospital. At December 31, 2001 and 2000, the sole shareholder of HVMG has entered into an agreement with the Foundation and HVMG that states the shares of HVMG will be voted as directed by the Foundation. The accompanying financial statements do not include the assets, obligations, revenues or expenses of HVMG. During 2001 and 2000, the Hospital transferred \$319,101 and \$290,143 to HVMG. These transfers are reflected in the changes in fund balance.

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2001 and 2000

# 11. RELATED PARTIES (continued)

The Hospital entered into a 10 year non-cancelable lease with the Foundation for the Medical Arts Building. The Hospital is responsible for utilities, taxes, maintenance and insurance in addition to the rental payments of \$6,256 per month. Future minimum rental payments for the years ending December 31 follows:

2002	\$ 75,075
2003	75,075
2004	75,075
2005	75,075
2006	75,075
Thereafter	 206,456
Total minimum lease payments	\$ 581,831

#### 12. COMMITMENTS AND CONTINGENCIES

At December 31, 2001 the Hospital is committed to construction contracts to construct and renovate certain surgery and laboratory projects totaling approximately \$2.7 million.

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

March 29, 2002

Board of Trustees HOCKING VALLEY COMMUNITY HOSPITAL Logan, Ohio

We have audited the financial statements of Hocking Valley Community Hospital (the Hospital), as of and for the year ended December 31, 2001, and have issued our report thereon dated March 29, 2002. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the 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 the Hospital'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 do 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.

### Internal Control Over Financial Reporting

In planning and performing our audit, we considered the Hospital'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. Board of Trustees March 29, 2002 Page Two

Our consideration of the internal control over financial reporting would not necessarily disclose all matters in the internal control 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 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.

This report is intended solely for the information of the Board of Trustees, management, and the Auditor of State of the State of Ohio and is not intended to be and should not be used by anyone other than these specified parties.

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# HOCKING VALLEY COMMUNITY HOSPITAL HOCKING 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.

**CLERK OF THE BUREAU** 

Susan Babbitt

CERTIFIED JUNE 25, 2002