FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 2000



88 East Broad Street Columbus, Ohio 43215

Telephone 614-466-4514

800-282-0370

Facsimile 614-728-7398 www.auditor.state.oh.us

Board of Trustees Mark Milford Hicksville Joint Township Hospital District Hicksville, OH 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, 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 Mark Milford Hicksville Joint Township Hospital District is responsible for compliance with these laws and regulations.

JIM PETRO Auditor of State

August 15, 2002



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#### FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 2000

#### TABLE OF CONTENTS

	<b>PAGE</b>
Independent Auditor's Report	1
Balance Sheets – Unrestricted Funds	2
Statements of Operations – Unrestricted Funds	3
Statements of Changes in Fund Balance	4
Statements of Cash Flows – Unrestricted Funds	5
Notes to the Financial Statements	6-15
Report on Compliance and on Internal Control Over Financial Reporting Based on an Audit of Financial Statements Performed In Accordance with Government Auditing Standards	16-17

## Rea & Associates, Inc.

#### ACCOUNTANTS AND BUSINESS CONSULTANTS

May 9, 2002

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, 2001 and 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 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 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 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 Mark Milford Hicksville Joint Township Hospital District as of December 31, 2001 and 2000, and the results of its operations, changes in fund balances, and its 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 a report dated May 9, 2002 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.

Lea & Associates, Inc.

## BALANCE SHEETS-UNRESTRICTED FUNDS AS OF DECEMBER 31, 2001 AND 2000

#### **ASSETS**

	2001	2000
CURRENT ASSETS:		
Cash and cash equivalents	\$ 1,842,627	\$ 994,151
Net patient receivables	1,432,318	1,653,855
Current portion of miscellaneous receivable	51,079	27,753
Supplies inventory	66,175	63,127
Prepaid expenses	65,647	26,923
Assets limited as to use	 155,910	 138,412
Total current assets	 3,613,756	 2,904,221
Assets limited as to use:		
Internally designated	2,411,429	2,393,085
Less amount required to meet current obligations	 (155,910)	 (138,412)
	 2,255,519	 2,254,673
Property and equipment, net of depreciation	3,947,988	3,830,698
Investment in joint venture	110,509	87,153
Miscellaneous receivables, net of current portion	 88,646	 91,231
TOTAL ASSETS	\$ 10,016,418	\$ 9,167,976
LIABILITIES AND FUND BALANCE		
CURRENT LIABILITIES:		
Current portion of long-term debt and leases	\$ 164,972	\$ 216,026
Line of credit	0	50,000
Accounts payable	500,024	462,883
Due to Medicare	802,374	0
Accrued payroll	170,512	236,578
Compensated absences	 209,758	 135,650
Total current liabilities	1,847,640	1,101,137
Long-term debt and leases, less current portion	924,771	1,030,464
FUND BALANCE:		
Unrestricted	7,244,007	 7,036,375
Total fund balance	7,244,007	7,036,375
TOTAL LIABILITIES AND FUND BALANCE	\$ 10,016,418	\$ 9,167,976

### STATEMENTS OF OPERATIONS - UNRESTRICTED FUNDS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 2000

DEVENY	2001	2000
REVENUE:  Net patient service revenue	\$ 8,083,418	\$ 7,208,512
OPERATING EXPENSES:		
Salaries and wages	3,086,885	2,644,070
Employee benefits	912,217	761,976
Physician services	547,678	553,466
Purchased services	892,681	881,144
Supply expense	510,406	480,311
Maintenance and repair	170,356	92,343
Utilities	155,139	137,304
Insurance	83,654	69,742
Lease expense	2,547	8,480
Miscellaneous	101,887	86,506
Interest	64,043	23,870
Provision for bad debts	383,240	306,539
Depreciation and amortization	530,184	471,351
Physician office	906,913	892,454
Total operating expenses	8,347,830	7,409,556
Operating loss	(264,412)	(201,044)
NON-OPERATING REVENUES (EXPENSES):		
Earnings on investments	332,760	311,256
Interest income-patients	4,300	13,641
Contributions	66,383	17,583
Revenue from investment in joint venture	38,956	29,966
Other revenue (expense)	38,045	(9,764)
Total non-operating revenues	480,444	362,682
Change in fair value of investments	(8,400)	(84,000)
Excess of revenues over expenses	\$ 207,632	\$ 77,638

### STATEMENTS OF CHANGES IN FUND BALANCE FOR THE YEARS ENDED DECEMBER 31, 2001 AND 2000

	2001	2000
FUND BALANCE, January 1	\$ 7,036,375	\$ 6,958,737
Excess of revenues over expenses	207,632	77,638
FUND BALANCE, December 31	\$ 7,244,007	\$ 7,036,375

### STATEMENTS OF CASH FLOWS-UNRESTRICTED FUNDS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 2000

	 2001		2000
CASH FLOWS FROM OPERATING ACTIVITIES:			
Cash received from patients and third-party payers	\$ 8,284,214	\$	6,578,255
Cash paid to suppliers for services and goods	(2,930,811)		(3,102,504)
Cash payments to employees for services	(3,999,102)		(3,406,046)
Interest paid	 (40,974)	-	(44,529)
Net cash provided by operating activities	1,313,327		25,176
CASH FLOWS FROM CAPITAL AND RELATED FINANCING ACTIVITIES:			
Acquisitions and construction of capital assets	(647,967)		(409,354)
Principal payments on capital leases	(50,967)		(74,261)
Interest paid on capital related debt and capital leases	 (23,069)		(77,368)
Net cash used in capital and related financing activities	(722,003)		(560,983)
CASH FLOWS FROM INVESTING ACTIVITIES:			
(Payments) proceeds from line of credit	(50,000)		50,000
Proceeds from notes and loans	0		220,000
Payments on notes and loans	(105,780)		(56,407)
Interest on investments	337,060		324,897
Other nonoperating income	 102,615		47,549
Net cash provided by investing activities	 283,895		586,039
NET INCREASE IN CASH AND CASH EQUIVALENTS	875,219		50,232
CASH AND CASH EQUIVALENTS, Beginning of year	 2,737,236		2,687,004
CASH AND CASH EQUIVALENTS, End of year	\$ 3,612,455	\$	2,737,236
CASH AND CASH EQUIVALENTS INCLUDE THE FOLLOWING:			
Cash and equivalents	\$ 1,842,627	\$	994,151
Assets limited as to use cash and cash equivalents:			
Funds available for future construction and equipment	 1,769,828		1,743,085
Total cash and cash equivalents	\$ 3,612,455	\$	2,737,236
A reconciliation of operating loss to net cash flows			
provided by operating activities is as follows:			
Operating loss	\$ (264,412)	\$	(201,044)
Adjustments to reconcile operating loss to net cash provided			
by operating activities:			
Depreciation and amortization	530,184		471,351
Interest expense	40,974		121,897
Changes in assets and liabilities:			/ <b>/ / 2 = 2</b> 00)
Decrease (Increase) in patient accounts receivable	221,537		(413,588)
(Increase) Decrease in miscellaneous receivable	(20,741)		40,180
(Increase) Decrease in inventories	(3,048)		6,732
Increase in prepaid items	(38,724)		(5,963)
Increase (Decrease) in accounts payable	839,515		(27,140)
Increase in accrued expenses	 8,042		32,751
Net cash provided by operating activities	\$ 1,313,327	\$	25,176

#### NOTES TO FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 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 practices, 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 YEARS ENDED DECEMBER 31, 2001 AND 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:

	20	001	2000			
	Cash and Cash <u>Equivalents</u>	Assets Whose Use Is Limited	Cash and Cash <u>Equivalents</u>	Assets Whose Use Is Limited		
Financial statements Investments Cash on hand	\$1,842,627 0 (1,359)	\$2,265,428 (495,600) 0	\$ 994,151 0 (790)	\$2,247,085 (504,000) <u>0</u>		
GASB Statement No. 3 deposits	<u>\$1,841,268</u>	<u>\$1,769,828</u>	<u>\$ 993,361</u>	<u>\$1,743,085</u>		

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

#### NOTES TO FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 2000

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

**Deposits** - At December 31, 2001 and 2000, the carrying amount of the Hospital's book deposits were \$3,611,096 and \$2,897,968 as compared to bank balances of \$3,248,162 and \$2,737,235. The differences in carrying amounts and bank balances are caused by outstanding checks, deposits in-transit, and other reconciling items. As of December 31, 2001 and 2000 bank balances of \$288,269 and \$284,188, respectively were covered by Federal insurance programs and \$2,959,893 and \$2,613,780 are 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.

	2001										
		1	Category 2	3	Reported Amount	Fair Value	1	Category 2	3	Reported Amount	Fair <u>Value</u>
Common stock	\$	0 \$4	195,600 S	\$ 0	\$495,600	<u>\$495,600</u>	\$ 0	\$504,000	\$ 0	\$504,000	\$504,000
Total investments	\$	<u>0</u> \$4	<u>195,600</u> S	\$ 0	<u>\$495,600</u>	<u>\$495,600</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 \$495,600 and \$504,000, respectively as of December 31, 2001 and 2000 is not readily traded on a quoted market; therefore, the year-end market value is determined by valuation.

#### 3. PATIENT ACCOUNTS RECEIVABLE

The details of patient accounts receivable are set forth below:

	December 31, 2001	December 31, 2000		
Total patient accounts receivable Less allowances for:	\$ 2,450,104	\$ 2,919,011		
Contractual adjustments	(864,302)	(918,193)		
Uncollectible adjustments	(153,484)	(346,963)		
Net patient receivables	<u>\$ 1,432,318</u>	<b>\$ 1,653,855</b>		

#### NOTES TO FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 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, 	December 31, 2000		
Gross notes and loans receivable	\$ 139,725	\$ 118,984		
Less: Current Portion	(51,079)	(27,753)		
Long term portion	<u>\$ 88,646</u>	<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,			
	2001	2000		
Internally designated for future capital improvements:				
Cash and cash equivalents	\$ 1,769,829	\$ 1,743,085		
Investments in common stock	495,600	504,000		
Miscellaneous assets	146,000	146,000		
Total assets limited as to use	<u>\$ 2,411,429</u>	<u>\$ 2,393,085</u>		
Assets limited as to use - current portion	\$ 155,910	\$ 138,412		
Assets limited as to use - long term portion	2,255,519	2,254,673		
Total assets limited as to use	<u>\$ 2,411,429</u>	<b>\$ 2,393,085</b>		

#### 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:

		2001						
	Fair Value Fair Value							nge in
		Cost	January	<b>January 1, 2001 December 31, 2001</b>		Fair Value		
Common Stock:								
<b>Empire Banc Stock</b>	\$	248,000	\$	504,000	\$	495,600	\$	<b>(8,400</b> )

#### NOTES TO FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 2000

#### 6. INVESTMENTS (CONTINUED)

	 2000						
	Fair Value Fair Value Change					ange in	
	 Cost	Janu	ary 1, 2000	Decer	nber 31, 2000	<u>Fai</u>	r Value
Common Stock:							
<b>Empire Banc Stock</b>	\$ 248,000	\$	588,000	\$	504,000	\$	(84,000)

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

#### 7. PROPERTY AND EQUIPMENT

Property and equipment consist of the following:

	December 31, 2001	December 31, 2000	Depreciable <u>Lives-Years</u>	
Assets Held by Hospital:				
Land	\$ 17,500	\$ 17,500	0	
Land and land improvements	248,677	248,677	0 - 20	
Building and fixed equipment	3,698,735	3,685,650	5 - 20	
Furniture and fixtures	5,195,368	4,642,426	5 - 20	
Capital leases	396,473	396,473	5 - 10	
Rehabilitation center	898,169	898,169	5 - 20	
Contractual equipment	13,903	13,903	5 - 20	
Construction in progress	81,446	0		
Total cost	10,550,271	9,902,798		
Less accumulated depreciation	(6,602,283)	(6,072,100)		
Property and equipment - net	<u>\$ 3,947,988</u>	<u>\$ 3,830,698</u>		

Depreciation and amortization totaled \$530,184 in 2001 and \$471,351 in 2000.

#### NOTES TO FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 2000

#### 8. LONG-TERM DEBT AND LEASES

	December 31, 2001	December 31, 2000	
Note payable to the Hicksville Bank, December 14, 1999, due in monthly installments of principal plus interest at 4.85%, collateralized by 16,800 shares of Empire Banc Stock	\$ 724,145	\$ 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	160,223	200,618	
Obligations under capital lease	205,375 1,089,743	282,898 1,246,490	
Less: current portion	(164,972)	(216,026)	
Long term portion	<u>\$ 924,771</u>	<u>\$ 1,030,464</u>	

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, 2001	December 31, 2000	
Cost of equipment under capital lease Accumulated amortization	\$ 396,473 (243,139)	\$ 396,473 (149,021)	
Net carrying amount	\$ 153,334	<b>\$</b> 247,452	

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

	Long-Term Debt	Capital <u>Leases</u>	Total	
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	
2006	75,513	0	75,513	
Thereafter	604,115	0	604,115	
Subtotal	1,158,799	218,867	1,377,666	
Less amount representing interest	(274,431)	(13,492)	(287,923)	
Total	<u>\$ 884,368</u>	<u>\$ 205,375</u>	<u>\$ 1,089,743</u>	

#### NOTES TO FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 2000

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

The Hospital's long-term debt and capital leases are stated at the historical amount which approximates the fair value at December 31, 2001 and 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 \$350,000. The line carries a 4.90% rate of interest, matures on February 1, 2005 and requires monthly interest payments. As of December 31, 2000 the Hospital had \$50,000 borrowed against the line and during 2001 the line of credit was paid in full. 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 \$51,544 and \$63,497 in 2001 and 2000, respectively.

#### 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 or by calling 614-466-2085 or 1-800-222-7377.

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, 2001, 2000, and 1999 were approximately \$523,509, \$361,219 and \$433,965.

#### NOTES TO FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 2000

#### 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 2001, 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, 2000, the unaudited estimated net assets available for future OPEB payments were \$11,735.9 million. The actuarially accrued liability and the unfunded actuarial accrued liability, based on the actuarial cost method used, were \$14,364.6 million and \$2,628.7 million, respectively.

#### 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 2001 and 2000 resulted from the following:

Year January		nuary 1,	Changes in Estimates		Claim Payments		December 31,	
2000	\$	60,850	\$	250,104	\$	237,104	\$	73,850
2001	\$	73,850	\$	169,730	\$	203,580	\$	40,000

#### 14. ADVERTISING

The Hospital expenses advertising costs as they are incurred. Advertising expense was \$27,524 for 2001 and \$25,530 for 2000. Advertising expenses are included as operating expenses in the financial statements.

#### NOTES TO FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 2000

#### 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.

**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 2001 and 2000, the Hospital District made payments for services rendered of \$75,362 and \$64,840, respectively 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.

#### NOTES TO FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2001 AND 2000

#### 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.

#### 19. RECLASSIFICATIONS

Certain items in the December 31, 2000 financial statements have been reclassified to facilitate a comparison to the December 31, 2001 financial statements. These reclassifications did not impact changes in net assets or total assets.

## Rea & Associates, Inc.

#### ACCOUNTANTS AND BUSINESS CONSULTANTS

May 9, 2002

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 years ended December 31, 2001 and 2000, and have issued our report thereon dated May 9, 2002. We have 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 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 9, 2002.

#### **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 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 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.

Lea & Associates, Inc.



88 East Broad Street P.O. Box 1140 Columbus, Ohio 43216-1140

Telephone 614-466-4514

800-282-0370

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.

**CLERK OF THE BUREAU** 

Susan Babbitt

CERTIFIED SEPTEMBER 3, 2002