



**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY
DECEMBER 31, 2024**

TABLE OF CONTENTS

| TITLE | PAGE |
|--|-------------|
| Independent Auditor's Report | 1 |
| Prepared by Management: | |
| Basic Financial Statements: | |
| Government-wide Financial Statements: | |
| Statement of Net Position – Cash Basis | 5 |
| Statement of Activities – Cash Basis | 6 |
| Fund Financial Statements: | |
| Statement of Cash Basis Assets and Fund Balances Governmental Funds | 7 |
| Statement of Cash Receipts, Disbursements and Changes in Cash Basis Fund Balances Governmental Funds | 8 |
| Notes to the Basic Financial Statements | 9 |
| Schedules of Supplementary Information: | |
| Schedule of Receipts, Disbursements and Changes in Fund Balance – Budget and Actual – Budget Basis General Fund | 24 |
| Schedule of Receipts, Disbursements and Changes in Fund Balance – Budget and Actual – Budget Basis Public Health Clinic Fund | 25 |
| Notes to the Supplementary Information | 26 |
| Schedule of Expenditures of Federal Awards | 27 |
| Notes to the Schedule of Expenditures of Federal Awards | 29 |
| Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Required by <i>Government Auditing Standards</i> | 31 |
| Independent Auditor's Report on Compliance with Requirements Applicable to Each Major Federal Program and on Internal Control Over Compliance Required by the Uniform Guidance | 33 |
| Schedule of Findings | 37 |

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INDEPENDENT AUDITOR'S REPORT

Sandusky County Combined General Health District
Sandusky County
2000 Countryside Drive
Fremont, Ohio 43420-8560

To the Members of the Board:

Report on the Audit of the Financial Statements

Opinions

We have audited the cash-basis financial statements of the governmental activities, each major fund, and the aggregate remaining fund information of Sandusky County Combined General Health District, Sandusky County, Ohio (the District), as of and for the year ended December 31, 2024, and the related notes to the financial statements, which collectively comprise the District's basic financial statements as listed in the table of contents.

In our opinion, the accompanying financial statements referred to above present fairly, in all material respects, the respective cash-basis financial position of the governmental activities, each major fund, and the aggregate remaining fund information of the District, as of December 31, 2024, and the respective changes in cash-basis financial position thereof for the year then ended in accordance with the cash-basis of accounting described in Note 2.

Basis for Opinions

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of the District, and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

Emphasis of Matter - Accounting Basis

We draw attention to Note 2 of the financial statements, which describes the basis of accounting. The financial statements are prepared on the cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the cash basis of accounting described in Note 2, and for determining that the cash basis of accounting is an acceptable basis for preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the District's ability to continue as a going concern for twelve months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinions. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS and *Government Auditing Standards*, we

- exercise professional judgment and maintain professional skepticism throughout the audit.
- identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the District's internal control. Accordingly, no such opinion is expressed.
- evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the District's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplementary Information

Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the District's basic financial statements.


The Schedule of Receipts, Disbursements and Changes in Fund Balance – Budget and Actual – Budget Basis for the General and Public Health Clinic funds and the Schedule of Expenditures of Federal Awards as required by Title 2 U.S. Code of Federal Regulations (CFR) Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards are presented for purposes of additional analysis and is not a required part of the financial statements.

Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, these schedules are fairly stated in all material respects in relation to the basic financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated September 19, 2025, on our consideration of the District's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the District's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the District's internal control over financial reporting and compliance.

KEITH FABER
Ohio Auditor of State



Tiffany L. Ridenbaugh, CPA, CFE, CGFM
Chief Deputy Auditor

September 19, 2025

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**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**STATEMENT OF NET POSITION - CASH BASIS
DECEMBER 31, 2024**

| | Governmental Activities |
|--|------------------------------------|
| Assets | |
| Equity in pooled cash and cash equivalents | <u>\$ 6,220,986</u> |
| Net position | |
| Restricted for: | |
| Environmental health | 2,274,978 |
| Unrestricted | <u>3,946,008</u> |
| Total net position | <u><u>\$ 6,220,986</u></u> |

SEE ACCOMPANYING NOTES TO THE BASIC FINANCIAL STATEMENTS

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

STATEMENT OF ACTIVITIES - CASH BASIS
FOR THE YEAR ENDED DECEMBER 31, 2024

| | | Program Cash Receipts | | Net (Disbursements) Receipts and Changes in Net Position |
|---|----------------------|---------------------------------|---|---|
| | Disbursements | Charges for Services | Operating Grants and Contributions | Governmental Activities |
| Governmental activities: | | | | |
| Environmental health: | | | | |
| Trailer park | \$ 6,451 | \$ 11,005 | \$ - | \$ 4,554 |
| Food service | 136,458 | 190,075 | - | 53,617 |
| Water system | 28,773 | 29,101 | - | 328 |
| Swimming pool | 6,509 | 10,659 | - | 4,150 |
| Family planning | 234,809 | 66,171 | 168,636 | (2) |
| CFHS | 38,338 | - | 26,300 | (12,038) |
| WIC | 322,545 | - | 331,619 | 9,074 |
| Wellness | 99,878 | 23,000 | 122,772 | 45,894 |
| Public health emergency preparedness | 71,759 | - | 62,903 | (8,856) |
| Public health emergency response | 106,830 | - | 109,154 | 2,324 |
| Prevention partnership | 892 | - | - | (892) |
| Sewage treatment service | 51,234 | 82,340 | - | 31,106 |
| Smoke free workplace | 920 | - | - | (920) |
| Help me grow | 112,607 | - | 113,866 | 1,259 |
| Environmental and public health | 19,851 | 25,000 | - | 5,149 |
| Tobacco use prevention and cessation | 115,437 | - | 136,300 | 20,863 |
| Immunization action plan | 54,938 | - | 46,993 | (7,945) |
| Solid waste | 24,742 | 58,434 | - | 33,692 |
| Creating healthy communities | 100,673 | - | 109,627 | 8,954 |
| MHL capacity service | 123,398 | 123,276 | 148 | 26 |
| Ohio water pollution control loan | 130,200 | 45,791 | 98,073 | 13,664 |
| Public health clinic | 477,160 | 326,614 | 121,890 | (28,656) |
| Community health assessment | 32,227 | 52,750 | - | 20,523 |
| SPF-Partnership for success | 326,516 | - | 330,085 | 3,569 |
| Scrap tire | 22,991 | - | 24,982 | 1,991 |
| Drug free communities | 15,661 | - | 12,500 | (3,161) |
| PIRE | 62,024 | 65,521 | - | 3,497 |
| PHWF | 104,306 | - | 112,423 | 8,117 |
| IHR | 65,055 | - | 71,000 | 5,945 |
| Health | 554,735 | 206,221 | - | (348,514) |
| Total governmental activities | <u>\$ 3,447,917</u> | <u>\$ 1,315,958</u> | <u>\$ 1,999,271</u> | <u>(132,688)</u> |
| General Receipts: | | | | |
| Property taxes and other local taxes | | | | |
| levied for general health district purposes | | | | 598,897 |
| Grants and entitlements not restricted to specific programs | | | | 141,513 |
| Miscellaneous | | | | 939 |
| Total general receipts | | | | <u>741,349</u> |
| Change in net position | | | | 608,661 |
| Net position at beginning of year | | | | <u>5,612,325</u> |
| Net position at end of year | | | | <u>\$ 6,220,986</u> |

SEE ACCOMPANYING NOTES TO THE BASIC FINANCIAL STATEMENTS

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

STATEMENT OF CASH BASIS ASSETS AND FUND BALANCES
GOVERNMENTAL FUNDS
DECEMBER 31, 2024

| | <u>General</u> | <u>Public Health Clinic</u> | <u>Nonmajor Governmental Funds</u> | <u>Total Governmental Funds</u> |
|--|---------------------|---------------------------------|--|---|
| Assets | | | | |
| Equity in pooled cash and cash equivalents | \$ 2,664,405 | \$ 1,022,505 | \$ 2,534,076 | \$ 6,220,986 |
| Fund Balances | | | | |
| Restricted: | | | | |
| Environmental health: | | | | |
| Trailer park | \$ - | \$ - | \$ 15,739 | \$ 15,739 |
| Food service | - | - | 296,434 | 296,434 |
| Water system | - | - | 44,548 | 44,548 |
| Swimming pool | - | - | 7,720 | 7,720 |
| Family planning | - | - | 443,614 | 443,614 |
| CFHS | - | - | 74,376 | 74,376 |
| WIC | - | - | 39,148 | 39,148 |
| Wellness | - | - | 127,340 | 127,340 |
| Public health emergency preparedness | - | - | 80,583 | 80,583 |
| Public health emergency response | - | - | 49,658 | 49,658 |
| Sewage treatment service | - | - | 98,798 | 98,798 |
| Smoke free workplace | - | - | 2,054 | 2,054 |
| Help me grow | - | - | 340,377 | 340,377 |
| Environmental and public health | - | - | 96,852 | 96,852 |
| Tobacco use prevention and cessation | - | - | 158,338 | 158,338 |
| Immunization action plan | - | - | 35,103 | 35,103 |
| Solid waste | - | - | 56,752 | 56,752 |
| Creating healthy communities | - | - | 58,856 | 58,856 |
| MHL capacity service | - | - | 93,368 | 93,368 |
| Ohio water pollution control loan | - | - | 46,012 | 46,012 |
| SPF-Partnership for success | - | - | 12,131 | 12,131 |
| Scrap tire | - | - | 11,991 | 11,991 |
| Drug free communities | - | - | 2,758 | 2,758 |
| PIRE | - | - | 33,718 | 33,718 |
| PHWF | - | - | 24,600 | 24,600 |
| IHR | - | - | 24,110 | 24,110 |
| Committed: | | | | |
| Environmental health: | | | | |
| Public health clinic | - | 1,022,505 | - | 1,022,505 |
| Community health assessment | - | - | 259,098 | 259,098 |
| Assigned: | | | | |
| Encumbrances | 15,627 | - | - | 15,627 |
| Unassigned | 2,648,778 | - | - | 2,648,778 |
| Total fund balances | <u>\$ 2,664,405</u> | <u>\$ 1,022,505</u> | <u>\$ 2,534,076</u> | <u>\$ 6,220,986</u> |

SEE ACCOMPANYING NOTES TO THE BASIC FINANCIAL STATEMENTS

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

STATEMENT OF CASH RECEIPTS, DISBURSEMENTS AND CHANGES IN CASH BASIS FUND BALANCES
GOVERNMENTAL FUNDS
FOR THE YEAR ENDED DECEMBER 31, 2024

| | <i>(Formerly Major)</i> | | | |
|---|-------------------------|---------------------------------|---|--|
| | General | Public Health Clinic | SPF- Partnership for Success | Nonmajor Governmental Funds |
| | | | | Total Governmental Funds |
| Receipts | | | | |
| Property taxes | \$ 598,897 | \$ - | | \$ 598,897 |
| Charges for services | 206,221 | 326,614 | | 1,315,958 |
| Intergovernmental | 141,513 | 118,835 | | 2,133,464 |
| Contributions and donations | - | - | | 4,100 |
| Miscellaneous | 939 | 3,055 | | 4,159 |
| Total receipts | <u>947,570</u> | <u>448,504</u> | | <u>2,660,504</u> |
| Disbursements | | | | |
| Current: | | | | |
| Environmental health: | | | | |
| Trailer park | - | - | | 6,451 |
| Food service | - | - | | 136,458 |
| Water system | - | - | | 28,773 |
| Swimming pool | - | - | | 6,509 |
| Family planning | - | - | | 234,809 |
| CFHS | - | - | | 38,338 |
| WIC | - | - | | 322,545 |
| Wellness | - | - | | 99,878 |
| Public health emergency preparedness | - | - | | 71,759 |
| Public health emergency response | - | - | | 106,830 |
| Prevention partnership | - | - | | 892 |
| Sewage treatment service | - | - | | 51,234 |
| Smoke free workplace | - | - | | 920 |
| Help me grow | - | - | | 112,607 |
| Environmental and public health | - | - | | 19,851 |
| Tobacco use prevention and cessation | - | - | | 115,437 |
| Immunization action plan | - | - | | 54,938 |
| Solid waste | - | - | | 24,742 |
| Creating healthy communities | - | - | | 100,673 |
| MHL capacity service | - | - | | 123,398 |
| Ohio water pollution control loan | - | - | | 130,200 |
| Public health clinic | - | 477,160 | | - |
| Community health assessment | - | - | | 32,227 |
| SPF-Partnership for success | - | - | | 326,516 |
| Scrap tire | - | - | | 22,991 |
| Drug free communities | - | - | | 15,661 |
| PIRE | - | - | | 62,024 |
| PHWF | - | - | | 104,306 |
| IHR | - | - | | 65,055 |
| Health | <u>554,735</u> | <u>-</u> | | <u>-</u> |
| Total disbursements | <u>554,735</u> | <u>477,160</u> | | <u>2,416,022</u> |
| Excess (deficiency) of receipts over (under) disbursements | <u>392,835</u> | <u>(28,656)</u> | | <u>244,482</u> |
| Other financing sources (uses) | | | | |
| Transfers in | 10,000 | - | | 10,000 |
| Transfers (out) | (10,000) | - | | (10,000) |
| Advances in | - | - | | 10,000 |
| Advances (out) | <u>(10,000)</u> | <u>-</u> | | <u>-</u> |
| Total other financing sources (uses) | <u>(10,000)</u> | <u>-</u> | | <u>10,000</u> |
| Net change in fund balances | 382,835 | (28,656) | | 254,482 |
| Fund balances as previously reported | 2,281,570 | 1,051,161 | \$ 8,562 | 2,271,032 |
| Adjustment - changes in major fund to nonmajor fund | <u>-</u> | <u>-</u> | <u>(8,562)</u> | <u>8,562</u> |
| Fund balances at beginning of year, as adjusted | <u>2,281,570</u> | <u>1,051,161</u> | | <u>2,279,594</u> |
| Fund balances at end of year | <u>\$ 2,664,405</u> | <u>\$ 1,022,505</u> | | <u>\$ 2,534,076</u> |
| | | | | <u>\$ 6,220,986</u> |

SEE ACCOMPANYING NOTES TO THE BASIC FINANCIAL STATEMENTS

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024**

NOTE 1 - REPORTING ENTITY

Sandusky County Combined General Health District, Sandusky County, Ohio (the District) is a body corporate and politic established to exercise the rights and privileges conveyed to it by the constitution and laws of the State of Ohio. The District is directed by an eight-member Board with one member appointed by the City of Clyde, two members appointed by the City of Fremont, four members appointed by the District Advisory Council and one member appointed by the District Licensing Advisory Council. The District is comprised of the primary government, component units and other organizations that were included to ensure the financial statements are not misleading.

A. Primary Government

The primary government consists of all funds, departments, boards and agencies that are not legally separate from the District. The District is responsible for the provisions of public health, the prevention or restriction of disease and the prevention, abatement and suppression of nuisances.

The Sandusky County Auditor acts as fiscal agent for the District and the Sandusky County Treasurer acts as custodian of all funds.

The District's management believes these financial statements present all activities for which the District is financially accountable.

B. Component Units

Component units are legally separate organizations for which the District is financially accountable. The District is financially accountable for an organization if the District appoints a voting majority of the organization's governing board and (1) the District is able to significantly influence the programs or services performed or provided by the organization; or (2) the District is legally entitled to or can otherwise access the organization's resources; or (3) the District is legally obligated or has otherwise assumed the responsibility to finance the deficits of, or provide support to, the organization, or (4) the District is obligated for the debt of the organization. Component units also include legally separate, tax-exempt entities whose resources are for the direct benefit of the District, are accessible to the District and are significant in amount to the District and organizations for which the nature and significance of their relationship with the District are such that exclusion would cause the District's basic financial statements to be misleading or incomplete. The District has no component units.

C. Risk Pools

The District participates in two public entity risk pools. These organizations are presented in Note 8 to the financial statements.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

As discussed further in Note 2.C, these financial statements are presented on a cash basis of accounting. The cash basis of accounting differs from accounting principles generally accepted in the United States of America (GAAP). GAAP includes all relevant Governmental Accounting Standards Board (GASB) pronouncements, which have been applied to the extent they are applicable to the cash basis of accounting. Following are the more significant of the District's accounting policies.

A. Basis of Presentation

The District's basic financial statements consist of government-wide financial statements, including a statement of Net Position – Cash Basis, a Statement of Activities – Cash Basis, and fund financial statements which provide a more detailed level of financial information.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

Government-Wide Financial Statements

The Statement of Net Position – Cash Basis and the Statement of Activities – Cash Basis display information about the District as a whole. These statements include the financial activities of the primary government, except for fiduciary funds. Governmental activities generally are financed through taxes, intergovernmental receipts or other nonexchange transactions.

The Statement of Net Position – Cash Basis presents the cash balance of the District at year end. The Statement of Activities – Cash Basis compares cash disbursements and program cash receipts for each program or function of the District's governmental activities. Cash disbursements are reported by function. A function is a group of related activities designed to accomplish a major service or regulatory program for which the District is responsible. Program cash receipts include charges paid by the recipient of the goods or services offered by the program, and grants and contributions that are restricted to meeting the operational requirements of a particular program. Cash receipts which are not classified as program cash receipts are presented as general cash receipts of the District, with certain limited exceptions. The comparison of direct cash disbursements with program cash receipts identifies the extent to which each governmental program is self-financing on a cash basis or draws from the general cash receipts of the District.

Fund Financial Statements

During the year, the District segregates transactions related to certain District functions or activities in separate funds in order to aid financial management and to demonstrate legal compliance. Fund financial statements are designed to present financial information of the District at this more detailed level. The focus of governmental fund financial statements is on major funds. Each major fund is presented in a separate column. Nonmajor funds are aggregated and presented in a single column.

B. Fund Accounting

The District uses funds to maintain its financial records during the year. A fund is defined as a fiscal and accounting entity with a self-balancing set of accounts. Funds are used to segregate resources that are restricted as to use.

Governmental Funds

Governmental funds are those through which most governmental functions of the District are financed. The following are the District's major governmental funds:

General Fund - The General fund is used to account for all financial resources, except those required to be accounted for in another fund. The General fund balance is available to the District for any purpose provided it is expended or transferred according to the general laws of Ohio.

Public Health Clinic fund - The Public Health Clinic fund is used to account charges for services and intergovernmental revenues used to provide immunization clinics to citizens.

The other governmental funds of the District are used to account for and report grants and other resources, the use of which is restricted for a particular purpose.

C. Basis of Accounting

The District's financial statements are prepared using the cash basis of accounting. Receipts are recorded in the District's financial records and reported in the financial statements when cash is received rather than when earned and disbursements are recorded when cash is paid rather than when incurred.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

As a result of the use of this cash basis of accounting, certain assets, deferred outflows of resources, liabilities, deferred inflows of resources, and the effects of these items on revenues and expenses are not recorded in these financial statements.

D. Budgetary Process

All funds are legally required to be budgeted and appropriated. The major documents prepared are the tax budget, the certificate of estimated resources, and the appropriations resolution, all of which are prepared on the budgetary basis of accounting. The tax budget demonstrates a need for existing or increased tax rates. The certificate of estimated resources establishes a limit on the amount the District may appropriate.

The appropriations resolution is the District's authorization to spend resources and sets limits on cash disbursements plus encumbrances at the level of control selected by the District. The legal level of control has been established at the object level for all funds.

ORC Section 5705.28(C)(1) requires the Health District to file an estimate of contemplated revenue and expenses with the municipalities and townships within the Health District by about June 1 (forty-five days prior to July 15). The county auditor cannot allocate property taxes from the municipalities and townships within the district if the filing has not been made.

ORC Section 3709.28 establishes budgetary requirements for the Health District, which are similar to ORC Chapter 5705 budgetary requirements. On or about the first Monday of April the Health District must adopt an itemized appropriation measure. The appropriation measure, together with an itemized estimate of revenues to be collected during the next fiscal year, shall be certified to the county budget commission. Subject to estimated resources, the Board of Health may, by resolution, transfer appropriations from one appropriation item to another, reduce or increase any item, create new items, and make additional appropriations or reduce the total appropriation. Such appropriation modifications shall be certified to the county budget commission for approval.

The certificate of estimated resources may be amended during the year if projected increases or decreases in receipts are identified by the District. The amounts reported as the original budgeted amounts on the budgetary statements reflect the amounts on the certificate of estimated resources when the original appropriations were adopted. The amounts reported as the final budgeted amounts on the budgetary statements reflect the amounts on the amended certificate of estimated resources in effect at the time final appropriations were passed by the District.

The appropriation resolution is subject to amendment throughout the year with the restriction that appropriations cannot exceed estimated resources. The amounts reported as the original budgeted amounts reflect the first appropriation resolution for the fund that covered the entire year, including amounts automatically carried forward from prior years. The amounts reported as the final budgeted amounts represent the final appropriation amounts passed by the District during the year.

E. Cash and Investments

In accordance with Ohio Revised Code, the District's cash is held and invested by the Sandusky County Treasurer, who acts as custodian for the District's monies. The District's assets are held in the County Treasurer's cash and investment pool, and are valued at the Treasurer's reported carrying amount. Individual fund integrity is maintained through District records. Interest in the pool is presented as "Equity in Pooled Cash and Cash Equivalents".

F. Restricted Assets

Cash, cash equivalents and investments are reported as restricted when limitations on their use change the nature or normal understanding of their use. Such constraints are either imposed by creditors, contributors, grantors, or laws of other governments, or imposed by law through constitutional provisions or enabling legislation.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

G. Inventory and Prepaid Items

The District reports disbursements for inventory and prepaid items when paid. These items are not reflected as assets in the accompanying financial statements.

H. Capital Assets

Acquisitions of property, plant and equipment are recorded as disbursements when paid. These items are not reflected as assets on the accompanying financial statements.

I. Interfund Receivables/Payables

The District reports advances-in and advances-out for interfund loans. These items are not reflected as assets and liabilities in the accompanying financial statements.

J. Accumulated Leave

For 2024, GASB Statement No. 101, "Compensated Absences", was effective. GASB 101 defines a compensated absence as leave for which employees may receive cash payments when the leave is used for time off or receive cash payments for unused leave upon termination of employment. These payments could occur during employment or upon termination of employment. Compensated absences generally do not have a set payment schedule. The District does not offer noncash settlements.

District employees earn sick and vacation time that can be used for time off. In certain circumstances, such as upon leaving employment or retirement, employees are entitled to cash payments for unused leave.

This GASB pronouncement had no effect on beginning net position/fund balance as unpaid leave is not reflected as a liability under the District's cash basis of accounting.

K. Employer Contributions to Cost-Sharing Pension Plans

The District recognizes the disbursement for employer contributions to cost-sharing pension plans when they are paid. As described in Note 8 and 9, the employer contribution include portions for pension benefits and for postretirement health care benefits.

L. Leases

Accruals related to leases (as defined by GASB 87) are not reflected under the District's cash basis of accounting. Lease receipts/disbursements are recognized when they are received/paid.

M. Subscription Based Information Technology Arrangements

Accruals related to Subscription Based Information Technology Arrangement (SBITA) contracts (as defined by GASB 96) are not reflected under the District's cash basis of accounting. SBITA disbursements are recognized when they are paid.

N. Net Position

Net cash position is reported as restricted when there are limitations imposed on their use either through enabling legislation or through external restrictions imposed by creditors, grantors, or laws or regulations of other governments. Net cash position restricted for environmental health includes resources restricted for grants for specific purposes.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

The District's policy is to first apply restricted resources when an obligation is incurred for purposes for which both restricted and unrestricted net position is available.

O. Fund Cash Balance

Fund cash balance is divided into five classifications based primarily on the extent to which the District is bound to observe constraints imposed upon the use of the resources in the governmental funds. The classifications are as follows:

Nonspendable - The nonspendable fund cash balance classification includes amounts that cannot be spent because they are not in spendable form or legally required to be maintained intact. The District had no nonspendable balance at December 31, 2024.

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

Committed - The committed fund cash balance classification includes amounts that can be used only for the specific purposes imposed by a formal action (resolution) of the District (the highest level of decision making authority). Those committed amounts cannot be used for any other purpose unless the District removes or changes the specified use by taking the same type of action (resolution) it employed to previously commit those amounts. Committed fund cash balance also incorporates contractual obligations to the extent that existing resources in the fund have been specifically committed for use in satisfying those contractual requirements.

Assigned - Amounts in the assigned fund cash balance classification are intended to be used by the District for specific purposes but do not meet the criteria to be classified as restricted or committed. In the General fund, assigned amounts include those approved through the District's formal purchasing procedure and those required for subsequent year appropriations.

Unassigned - Unassigned fund cash balance is the residual classification for the General fund and includes all spendable amounts not contained in the other classifications. In other governmental funds, the unassigned classification is only used to report a deficit fund balance resulting from overspending for specific purposes for which amounts had been restricted, committed, or assigned.

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

P. Interfund Transactions

Transfers between governmental funds are eliminated on the government-wide financial statements.

Exchange transactions between funds are reported as receipts in the seller funds and as disbursements in the purchaser funds. Subsidies from one fund to another without a requirement for repayment are reported as interfund transfers. Interfund transfers are reported as other financing sources/uses. Repayments from funds responsible for particular disbursements to the funds that initially paid for them are not presented in the financial statements.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

NOTE 3 - ACCOUNTABILITY AND COMPLIANCE

A. Change in Accounting Principles

For 2024, the District has implemented certain paragraphs from GASB Implementation Guide No. 2021-1, certain paragraphs of GASB Statement No. 99, "Omnibus 2022", GASB Statement No. 100, "Accounting Changes and Error Corrections - an amendment of GASB Statement No. 62", Implementation Guide No. 2023-1 and GASB Statement No. 101, "Compensated Absences".

GASB Implementation Guide 2021-1 provides clarification on issues related to previously established GASB guidance. The implementation of GASB Implementation Guide 2021-1 did not have an effect on balances previously report by the District.

GASB Statement No. 99 is to enhance comparability in accounting and financial reporting and to improve the consistency of authoritative literature by addressing (1) practice issues that have been identified during implementation and application of certain GASB Statements and (2) accounting and financial reporting for financial guarantees. The implementation of GASB Statement No. 99 did not have an effect on the financial statements of the District.

GASB Statement No. 100 is to enhance accounting and financial reporting requirements for accounting changes and error corrections to provide more understandable, reliable, relevant, consistent, and comparable information for making decisions or assessing accountability. The implementation of GASB Statement No. 100 did not have an effect on the financial statements of the District.

GASB Implementation Guide 2023-1 provides clarification on issues related to previously established GASB guidance. The implementation of GASB Implementation Guide 2023-1 did not have an effect on the financial statements of the District.

GASB Statement No. 101 is to better meet the information needs of financial statement users by updating the recognition and measurement guidance for compensated absences. That objective is achieved by aligning the recognition and measurement guidance under a unified model and by amending certain previously required disclosures. The implementation of GASB Statement No. 101 did not have an effect on the financial statements of the District.

B. Change within the Financial Reporting Entity

For 2024, the District's SPF – Partnership for Success fund presentation was adjusted from major to nonmajor due to no longer meeting the qualitative threshold for a major fund. This change is separately displayed in the financial statements.

NOTE 4 - DEPOSITS AND INVESTMENTS

The Sandusky County Treasurer maintains a cash pool used by all funds, including those of the District. The Ohio Revised Code prescribes allowable deposits and investments. The District's carrying amount of cash on deposit with the County at December 31, 2024, was \$6,220,986. The Sandusky County Treasurer, as fiscal agent for the District, is responsible for maintaining adequate depository collateral for all funds in the County's pooled and deposited accounts.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

NOTE 5 - INTERFUND TRANSACTIONS

- A. Interfund transfers for the year ended December 31, 2024, consisted of the following, as reported on the fund statements:

| | |
|--|-------------------------|
| <u>Transfers to a nonmajor governmental fund from:</u> | |
| General fund | \$ 10,000 |
| <u>Transfers to the General fund from:</u> | |
| Nonmajor governmental fund | <u>10,000</u> |
| Total | <u><u>\$ 20,000</u></u> |

The transfer to the General fund from the Prevention Partnership fund (a nonmajor governmental fund) was due to the termination of the activity in the fund.

Transfers are used to (1) move revenues from the fund that statute or budget requires to collect them to the fund that statute or budget requires to expend them and (2) use unrestricted revenues collected in the General fund to finance various programs accounted for in other funds in accordance with budgetary authorizations. All transfers were made in accordance with Ohio Revised Code Sections 5705.14, 5705.15 and 5705.16.

Interfund transfers between governmental funds are eliminated on the government-wide financial statements.

- B. Interfund advances for the year ended December 31, 2024, consisted of the following, as reported on the fund statements:

| | |
|---|-------------------------|
| <u>Advances to a nonmajor governmental fund from:</u> | |
| General fund | <u><u>\$ 10,000</u></u> |

The primary purpose of the interfund advances is to cover costs in specific funds where revenues were not received by December 31.

Interfund advances between governmental funds are eliminated on the governmental-wide financial statements.

NOTE 6 - PROPERTY TAXES

Property taxes include amounts levied against all real, public utility property located in the District. Real property tax receipts received in 2024 represent the collection of 2023 taxes. Real property taxes and public utility taxes are levied after October 1 on the assessed value listed as of the prior January 1, the lien date. Assessed values are established by state law at 35% of appraised market value. Real property taxes are payable annually or semiannually. The first payment is due December 31, with the remainder payable by June 20. Under certain circumstances, State statute permits alternate payment dates to be established.

Public utility property taxes are assessed on real estate, land and improvements are assessed at 35% of appraised market value.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

The assessed value upon which 2024 taxes were collected was \$1,639,401,660. The full rate for all District operations applied to real property for fiscal year ended December 31, 2024, was \$0.50 per \$1,000 of assessed valuation. The assessed values of real and tangible personal property upon which 2024 property tax receipts were based are as follows:

| | |
|-------------------------------|--------------------------------|
| <u>Real property</u> | |
| Agricultural/Residential | \$ 1,026,872,450 |
| Commercial/Industrial/Mineral | 213,977,690 |
| <u>Public Utility</u> | |
| Real | 705,930 |
| Personal | <u>397,845,590</u> |
| Total assessed valuation | <u><u>\$ 1,639,401,660</u></u> |

The County Treasurer collects property tax on behalf of all taxing districts within the County. The County Auditor periodically remits to the taxing districts their portions of the taxes collected.

NOTE 7 - RISK MANAGEMENT

A. Risk Pool Membership

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

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

The District is a member of the Public Entities Pool of Ohio (the Pool). The Pool assumes the risk of loss up to the limits of the District's policy. The Pool covers the following risks:

- General liability and casualty
- Public official's liability
- Cyber
- Law enforcement liability
- Automobile liability
- Vehicles
- Property
- Equipment breakdown

The Pool reported the following summary of assets and actuarially-measured liability available to pay those liabilities as of December 31, 2024:

| | |
|-----------------------|---------------|
| | <u>2024</u> |
| Cash and investments | \$ 48,150,572 |
| Actuarial liabilities | 22,652,556 |

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

B. Insurance Purchasing Pool

For 2024, the County Commissioners participated in the County Commissioners Association of Ohio Workers' Compensation Group Rating Plan (Plan), as insurance purchasing pool. The Plan is intended to achieve lower workers compensation rates while establishing safer working conditions and environments for the participants. The workers compensation experience of the participating counties is calculated as one experience and a common premium rate is applied to all participants in the Plan. Each participant pays its workers' compensation premium to the State based on the rate for the Plan rather than its individual rate. In order to allocate the savings derived by formation of the Plan, and to maximize the number of participants in the Plan, the Plan's executive committee annually calculates the total savings which accrued to the Plan through its formation. This savings is then compared to the overall savings percentage of the Plan. The Plan's executive committee then collects rate contributions from or pays rate equalization rebates to the various participants.

Participation in the Plan is limited to counties that can meet the Plan's selection criteria. The firm of Comp Management, Inc. provides administrative, cost controls, and actuarial services to the Plan. Each year, the County Commissioners pays an enrollment fee to the Plan to cover the costs of administering the program.

The County Commissioners may withdraw from the Plan if written notice is provided sixty days prior to the prescribed application deadline of the Ohio Bureau of Workers' Compensation. However, the participant is not relieved of the obligation to pay any amounts owed to the Plan prior to withdrawal, and any participant leaving the Plan allows representatives of the Plan to access loss experience for three years following the last year of participation.

NOTE 8 - DEFINED BENEFIT PENSION PLAN

The Statewide retirement systems provide both pension benefits and other postemployment benefits (OPEB).

Plan Description - Ohio Public Employees Retirement System (OPERS)

Plan Description - District employees participate in the Ohio Public Employees Retirement System (OPERS). OPERS is a cost-sharing, multiple employer public employee retirement system which administers three separate pension plans. The traditional pension plan is a cost-sharing, multiple-employer defined benefit pension plan. The member-directed plan is a defined contribution plan and the combined plan is a combination cost-sharing, multiple-employer defined benefit/defined contribution pension plan. Effective January 1, 2022, new members may no longer select the Combined Plan, and current members may no longer make a plan change to this plan. Participating employers are divided into state, local, law enforcement and public safety divisions. While members in the state and local divisions may participate in all three plans, law enforcement and public safety divisions exist only within the traditional plan.

OPERS provides retirement, disability, survivor and death benefits, and annual cost of living adjustments to members of the traditional and combined plans. Authority to establish and amend benefits is provided by Chapter 145 of the Ohio Revised Code. OPERS issues a stand-alone financial report that includes financial statements, required supplementary information and detailed information about OPERS' fiduciary net position that may be obtained by visiting <https://www.opers.org/financial/reports.shtml>, by writing to the Ohio Public Employees Retirement System, 277 East Town Street, Columbus, Ohio 43215-4642, or by calling 800-222-7377.

Senate Bill (SB) 343 was enacted into law with an effective date of January 7, 2013. In the legislation, members in the traditional and combined plans were categorized into three groups with varying provisions of the law applicable to each group.

The following table provides age and service requirements for retirement and the retirement formula applied to final average salary (FAS) for the three member groups under the traditional and combined plans as per the reduced benefits adopted by SB 343 (see OPERS Annual Comprehensive Financial Report referenced above for additional information, including requirements for reduced and unreduced benefits):

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

| Group A Eligible to retire prior to January 7, 2013 or five years after January 7, 2013 | Group B 20 years of service credit prior to January 7, 2013 or eligible to retire ten years after January 7, 2013 | Group C Members not in other Groups and members hired on or after January 7, 2013 |
|--|--|--|
| State and Local | State and Local | State and Local |
| Age and Service Requirements: Age 60 with 60 months of service credit or Age 55 with 25 years of service credit | Age and Service Requirements: Age 60 with 60 months of service credit or Age 55 with 25 years of service credit | Age and Service Requirements: Age 57 with 25 years of service credit or Age 62 with 5 years of service credit |
| Traditional Plan Formula: 2.2% of FAS multiplied by years of service for the first 30 years and 2.5% for service years in excess of 30 | Traditional Plan Formula: 2.2% of FAS multiplied by years of service for the first 30 years and 2.5% for service years in excess of 30 | Traditional Plan Formula: 2.2% of FAS multiplied by years of service for the first 35 years and 2.5% for service years in excess of 35 |
| Combined Plan Formula: 1% of FAS multiplied by years of service for the first 30 years and 1.25% for service years in excess of 30 | Combined Plan Formula: 1% of FAS multiplied by years of service for the first 30 years and 1.25% for service years in excess of 30 | Combined Plan Formula: 1% of FAS multiplied by years of service for the first 35 years and 1.25% for service years in excess of 35 |

Traditional plan state and local members who retire before meeting the age-and-years of service credit requirement for unreduced benefits receive a percentage reduction in the benefit amount. The amount of a member's pension benefit vests at retirement.

Final average Salary (FAS) represents the average of the three highest years of earnings over a member's career for Groups A and B. Group C is based on the average of the five highest years of earnings over a member's career.

When a traditional plan benefit recipient has received benefits for 12 months, the member is eligible for an annual cost of living adjustment (COLA). This COLA is calculated on the member's original base retirement benefit at the date of retirement and is not compounded. Members retiring under the combined plan receive a cost-of-living adjustment on the defined benefit portion of their pension benefit. For those who retired prior to January 7, 2013, the cost-of-living adjustment is 3.00%. For those retiring on or after January 7, 2013, beginning in calendar year 2019, the adjustment is based on the average percentage increase in the Consumer Price Index, capped at 3.00%.

Defined contribution plan benefits are established in the plan documents, which may be amended by the Board. Member-directed plan and combined plan members who have met the retirement eligibility requirements may apply for retirement benefits. The amount available for defined contribution benefits in the combined plan consists of the member's contributions plus or minus the investment gains or losses resulting from the member's investment selections. Combined plan members wishing to receive benefits must meet the requirements for both the defined benefit and defined contribution plans. Member-directed participants must have attained the age of 55, have money on deposit in the defined contribution plan and have terminated public service to apply for retirement benefits. The amount available for defined contribution benefits in the member-directed plan consists of the members' contributions, vested employer contributions and investment gains or losses resulting from the members' investment selections. Employer contributions and associated investment earnings vest over a five-year period, at a rate of 20.00% each year. At retirement, members may select one of several distribution options for payment of the vested balance in their individual OPERS accounts. Options include the annuitization of the benefit (which includes joint and survivor options and will continue to be administered by OPERS), partial lump-sum payments (subject to limitations), a rollover of the vested account balance to another financial institution, receipt of entire account balance, net of taxes withheld, or a combination of these options. When members choose to annuitize their defined contribution benefit, the annuitized portion of the benefit is reclassified to a defined benefit.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

Funding Policy - The Ohio Revised Code (ORC) provides statutory authority for member and employer contributions as follows:

| | <u>State and Local</u> <u>Traditional</u> |
|--|--|
| 2024 Statutory Maximum Contribution Rates | |
| Employer | 14.0 % |
| Employee * | 10.0 % |
| 2024 Actual Contribution Rates | |
| Employer: | |
| Pension ** | 14.0 % |
| Post-employment Health Care Benefits ** | <u>0.0</u> |
| Total Employer | <u>14.0 %</u> |
| Employee | <u>10.0 %</u> |

* Member contributions within the combined plan are not used to fund the defined benefit retirement allowance.

** These pension and employer health care rates are for the traditional and combined plans. The employer contributions rate for the member-directed plan is allocated 4 percent for health care with the remainder going to pension; however, effective July 1, 2022, a portion of the health care rate is funded with reserves.

Employer contribution rates are actuarially determined within the constraints of statutory limits for each division and expressed as a percentage of covered payroll.

The District's contractually required contribution was \$224,611 for 2024.

NOTE 9 - POSTEMPLOYMENT BENEFITS

Plan Description - Ohio Public Employees Retirement System (OPERS)

Plan Description - The Ohio Public Employees Retirement System (OPERS) administers three separate pension plans: the traditional pension plan, a cost-sharing, multiple-employer defined benefit pension plan; the member-directed plan, a defined contribution plan; and the combined plan, a cost-sharing, multiple-employer defined benefit pension plan that has elements of both a defined benefit and defined contribution plan.

OPERS maintains a cost-sharing, multiple-employer defined benefit post-employment health care trust. The 115 Health Care Trust (115 Trust or Health Care Trust) was established in 2014, under Section 115 of the Internal Revenue Code (IRC). The purpose of the 115 Trust is to fund health care for the Traditional Pension, Combined and Member-Directed plans. The Ohio Revised Code permits, but does not require, OPERS to provide health care to its eligible benefit recipients. Authority to establish and amend health care coverage is provided to the Board in Chapter 145 of the Ohio Revised Code. Retirees in the Traditional Pension and Combined plans may have an allowance deposited into a health reimbursement arrangement (HRA) account to be used toward the health care program of their choice and other eligible expenses. An OPERS vendor is available to assist with the selection of a health care program.

With one exception, OPERS-provided health care coverage is neither guaranteed nor statutorily required. Ohio law currently requires Medicare Part A equivalent coverage or Medicare Part A premium reimbursement for eligible retirees and their eligible dependents.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

OPERS offers a health reimbursement arrangement (HRA) allowance to benefit recipients meeting certain age and service credit requirements. The HRA is an account funded by OPERS that provides tax free reimbursement for qualified medical expenses such as monthly post-tax insurance premiums, deductibles, co-insurance, and co-pays incurred by eligible benefit recipients and their dependents.

OPERS members enrolled in the Traditional Pension Plan or Combined Plan retiring with an effective date of January 1, 2022, or after must meet the following health care eligibility requirements to receive an HRA allowance:

Age 65 or older Retirees Minimum of 20 years of qualifying service credit

Age 60 to 64 Retirees Based on the following age-and-service criteria:

Group A 30 years of total service with at least 20 years of qualified health care service credit;

Group B 31 years of total service credit with at least 20 years of qualified health care service credit;

Group C 32 years of total service credit with at least 20 years of qualified health care service credit.

Age 59 or younger Based on the following age-and-service criteria:

Group A 30 years of qualified health care service credit;

Group B 32 years of qualified health care service credit at any age or 31 years of qualified health care service credit and at least age 52;

Group C 32 years of qualified health care service credit and at least age 55.

Retirees who do not meet the requirement for coverage as a non-Medicare participant can become eligible for coverage at age 65 if they have at least 20 years of qualifying service.

Members with a retirement date prior to January 1, 2022, who were eligible to participate in the OPERS health care program will continue to be eligible after January 1, 2022, as summarized in the following table:

| Group A | Group B | Group C |
|--|---|---|
| Age and Service Requirements <i>December 1, 2014 or Prior</i> | Age and Service Requirements <i>December 1, 2014 or Prior</i> | Age and Service Requirements <i>December 1, 2014 or Prior</i> |
| Any Age with 10 years of service credit | Any Age with 10 years of service credit | Any Age with 10 years of service credit |
| <i>January 1, 2015 through December 31, 2021</i> | <i>January 1, 2015 through December 31, 2021</i> | <i>January 1, 2015 through December 31, 2021</i> |
| Age 60 with 20 years of service credit or Any Age with 30 years of service credit | Age 52 with 31 years of service credit or Age 60 with 20 years of service credit or Any Age with 32 years of service credit | Age 55 with 32 years of service credit or Age 60 with 20 years of service credit |

See the Age and Service Retirement section of the OPERS ACFR for a description of Groups A, B and C.

Eligible retirees may receive a monthly HRA allowance for reimbursement of health care coverage premiums and other qualified medical expenses. Monthly allowances, based on years of service and the age at which the retiree first enrolled in OPERS coverage, are provided to eligible retirees, and are deposited into their HRA account.

The base allowance is determined by OPERS and is currently \$1,200 per month for non-Medicare retirees and \$350 per month for Medicare retirees. The retiree receives a percentage of the base allowance, calculated based on years of qualifying service credit and age when the retiree first enrolled in OPERS health care. Monthly allowances range between 51.00% and 90.00% of the base allowance for both non-Medicare and Medicare retirees.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

Retirees will have access to the OPERS Connector, which is a relationship with a vendor selected by OPERS to assist retirees participating in the health care program. The OPERS Connector may assist retirees in selecting and enrolling in the appropriate health care plan.

When members become Medicare-eligible, recipients enrolled in OPERS health care programs must enroll in Medicare Part A (hospitalization) and Medicare Part B (medical).

OPERS reimburses retirees who are not eligible for premium-free Medicare Part A (hospitalization) for their Part A premiums as well as any applicable surcharges (late-enrollment fees). Retirees within this group must enroll in Medicare Part A and select medical coverage, and may select prescription coverage, through the OPERS Connector. OPERS also will reimburse 50.00% of the Medicare Part A premium and any applicable surcharges for eligible spouses. Proof of enrollment in Medicare Part A and confirmation that the retiree is not receiving reimbursement or payment from another source must be submitted. The premium reimbursement is added to the monthly pension benefit.

Participants in the Member-Directed Plan have access to the Connector and have a separate health care funding mechanism. A portion of employer contributions for these participants is allocated to a retiree medical account (RMA). Members who elect the Member-Directed Plan after July 1, 2015, will vest in the RMA over 15 years at a rate of 10.00% each year starting with the sixth year of participation. Members who elected the Member-Directed Plan prior to July 1, 2015, vest in the RMA over a five-year period at a rate of 20.00% per year. Upon separation or retirement, participants may use vested RMA funds for reimbursement of qualified medical expenses.

Disclosures for the health care plan are presented separately in the OPERS financial report. Interested parties may obtain a copy by visiting <https://www.opers.org/financial/reports.shtml>, by writing to OPERS, 277 East Town Street, Columbus, Ohio 43215-4642, or by calling (614) 222-5601 or 800-222-7377.

Funding Policy - The Ohio Revised Code provides the statutory authority allowing public employers to fund postemployment health care through their contributions to OPERS. When funding is approved by OPERS Board of Trustees, a portion of each employer's contribution to OPERS is set aside to fund OPERS health care plans. Beginning in 2018, OPERS no longer allocated a portion of its employer contributions to health care for the traditional plan.

Employer contribution rates are expressed as a percentage of the earnable salary of active members. In 2024, state and local employers contributed at a rate of 14.00% of earnable salary. These are the maximum employer contribution rates permitted by the Ohio Revised Code. Active member contributions do not fund health care.

Each year, the OPERS Board determines the portion of the employer contribution rate that will be set aside to fund health care plans. For 2024, OPERS did not allocate any employer contribution to health care for members in the Traditional Pension Plan. Beginning July 1, 2022, there was a 2.00% allocation to health care for the Combined Plan which has continued through 2024. The OPERS Board is also authorized to establish rules for the retiree or their surviving beneficiaries to pay a portion of the health care provided. Payment amounts vary depending on the number of covered dependents and the coverage selected. The employer contribution as a percentage of covered payroll deposited into the RMA for participants in the member-directed plan for 2024 was 4.00%. Effective July 1, 2022, a portion of the health care rate was funded with reserves which has continued through 2024.

Employer contribution rates are actuarially determined and are expressed as a percentage of covered payroll.

The District's contractually required contribution was zero for 2024.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

NOTE 10 - CONTINGENT GRANTS

The District receives significant financial assistance from numerous federal, state, and local agencies in the form of grants. The disbursement of funds received under these programs generally requires compliance with terms and conditions specified in the grant agreements and are subject to audit by the grantor agencies. Any disallowed claims resulting from such audits could become a liability of the District; however, in the opinion of management, any such disallowed claims will not have a material effect on the financial position of the District.

NOTE 11 - INTERGOVERNMENTAL FUNDING

The County apportions the excess of the District's appropriations over other estimated receipts for the subdivision composing the District, based on their taxable property valuations. The County withholds the apportioned excess from property tax settlements and distributes it to the District. The financial statements present these amounts as intergovernmental receipts.

NOTE 12 - COMMITMENTS

The District utilizes encumbrance accounting as part of its budgetary controls. Encumbrances outstanding at year-end are reservations of fund balance for subsequent-year expenditures and may be reported as part of restricted, committed, or assigned classifications of fund balance. At year end, the District's commitments for encumbrances in the governmental funds were as follows:

| Fund: | Year-End Encumbrances |
|-----------------------------------|--------------------------|
| General fund | \$ 15,627 |
| Public health clinic fund | 910 |
| Other nonmajor governmental funds | 50,175 |
| Total | <u>\$ 66,712</u> |

NOTE 13 - TAX ABATEMENT AGREEMENTS ENTERED INTO BY OTHER GOVERNMENTS

Other governments entered into property tax abatement agreements with property owners under two programs - Community Reinvestment Area (CRA) and Enterprise Zone (Ezone). These programs relate to the abatement of property taxes.

CRA - Under the authority of Ohio Revised Code (ORC) Section 3735.67, the CRA program is an economic development tool administered by municipal and county governments that provides real property tax exemptions for property owners who renovate existing or construct new buildings. CRA's are areas of land in which property owners can receive tax incentives for investing in real property improvements. Under the CRA program, local governments petition to the Ohio Development Services Agency (ODSA) for confirmation of a geographical area in which investment in housing is desired. Once an area is confirmed by the ODSA, local governments may offer real property tax exemptions to taxpayers that invest in that area. Property owners in the CRA can receive temporary tax abatements for renovation of existing structures and new construction in these areas. Property owners apply to the local legislative authority for approval to renovate or construct in the CRA. Upon approval and certification of completion, the amount of the abatement is deducted from the individual or entity's property tax bill.

Ezone - Under the authority of ORC Sections 5709.62 and 5709.63, the Ezone program is an economic development tool administered by municipal and county governments that provides real and personal property tax exemptions to businesses making investments in Ohio. An Ezone is a designated area of land in which businesses can receive tax incentives in the form of tax exemptions on qualifying new investment.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

An Ezone's geographic area is identified by the local government involved in the creation of the zone. Once the zone is defined, the local legislative authority participating in the creation must petition the OSDA. The OSDA must then certify the area for it to become an active Enterprise Zone. The local legislative authority negotiates the terms of the Enterprise Zone Agreement (the Agreement) with the business, which may include tax sharing with the Board of Education. Legislation must then be passed to approve the Agreement. All Agreements must be finalized before the project begins and may contain provisions for the recoupment of taxes should the individual or entity fail to perform. The amount of the abatement is deducted from the business's property tax bill.

Sandusky County has entered into the following tax abatement agreements for the abatement of real property taxes:

- Ezone agreement between the County and Ballville Township
- Ezone agreements entered into by Vanguard Career Center and Fremont City School District
- Ezone agreements between the County, the Sandusky Township, Fremont CSD and Vanguard Career Center
- Ezone agreements between the County, Madison Township, the Village of Gibsonburg and Gibsonburg EVSD
- Ezone agreements between the County, the City of Clyde, and Clyde EVSD
- CRA agreements entered into by the City of Fremont and Fremont City School District
- CRA agreements entered into by the County, the City of Clyde, and Clyde EVSD

Under these agreements, the District's property taxes were reduced by \$7,676. The District is not receiving any amounts from these other governments in association with the forgone property tax revenue.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

SCHEDULE OF RECEIPTS, DISBURSEMENTS AND CHANGES IN
FUND BALANCE - BUDGET AND ACTUAL - BUDGET BASIS
GENERAL FUND
FOR THE YEAR ENDED DECEMBER 31, 2024

| | Budgeted Amounts | | | Variance with Final Budget Positive (Negative) |
|---|-------------------------|---------------------|---------------------|---|
| | Original | Final | Actual | |
| Receipts: | | | | |
| Property taxes | \$ 597,171 | \$ 563,173 | \$ 598,897 | \$ 35,724 |
| Charges for services | 155,000 | 155,000 | 206,221 | 51,221 |
| Intergovernmental | 100,025 | 100,025 | 141,513 | 41,488 |
| Miscellaneous | 5,000 | 5,000 | 939 | (4,061) |
| Total receipts | <u>857,196</u> | <u>823,198</u> | <u>947,570</u> | <u>124,372</u> |
| Disbursements: | | | | |
| Current: | | | | |
| Health | <u>697,734</u> | <u>747,734</u> | <u>570,362</u> | <u>(177,372)</u> |
| Excess of receipts over disbursements | <u>159,462</u> | <u>75,464</u> | <u>377,208</u> | <u>301,744</u> |
| Other financing sources (uses): | | | | |
| Transfers in | - | - | 10,000 | 10,000 |
| Transfers (out) | (15,000) | (15,000) | (10,000) | 5,000 |
| Advances (out) | (70,000) | (70,000) | (10,000) | 60,000 |
| Total other financing sources (uses) | <u>(85,000)</u> | <u>(85,000)</u> | <u>(10,000)</u> | <u>75,000</u> |
| Net change in fund balance | 74,462 | (9,536) | 367,208 | 376,744 |
| Fund balance at beginning of year | 2,266,836 | 2,266,836 | 2,266,836 | - |
| Prior year encumbrances appropriated | 14,734 | 14,734 | 14,734 | - |
| Fund balance at end of year | <u>\$ 2,356,032</u> | <u>\$ 2,272,034</u> | <u>\$ 2,648,778</u> | <u>\$ 376,744</u> |

SEE ACCOMPANYING NOTES TO THE SUPPLEMENTARY INFORMATION

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

SCHEDULE OF RECEIPTS, DISBURSEMENTS AND CHANGES IN
FUND BALANCE - BUDGET AND ACTUAL - BUDGET BASIS
PUBLIC HEALTH CLINIC FUND
FOR THE YEAR ENDED DECEMBER 31, 2024

| | Budgeted Amounts | | | Variance with Final Budget Positive (Negative) |
|---|-------------------------|-------------------|---------------------|---|
| | Original | Final | Actual | |
| Receipts: | | | | |
| Charges for services | \$ 240,000 | \$ 240,000 | \$ 326,614 | \$ 86,614 |
| Intergovernmental | 260,000 | 260,000 | 118,835 | (141,165) |
| Miscellaneous | - | - | 3,055 | 3,055 |
| Total receipts | <u>500,000</u> | <u>500,000</u> | <u>448,504</u> | <u>(51,496)</u> |
| Disbursements: | | | | |
| Current: | | | | |
| Environmental health | <u>564,033</u> | <u>564,033</u> | <u>478,070</u> | <u>(85,963)</u> |
| Net change in fund balance | (64,033) | (64,033) | (29,566) | 34,467 |
| Fund balance at beginning of year | 1,050,362 | 1,050,362 | 1,050,362 | - |
| Prior year encumbrances appropriated | <u>799</u> | <u>799</u> | <u>799</u> | <u>-</u> |
| Fund balance at end of year | <u>\$ 987,128</u> | <u>\$ 987,128</u> | <u>\$ 1,021,595</u> | <u>\$ 34,467</u> |

SEE ACCOMPANYING NOTES TO THE SUPPLEMENTARY INFORMATION

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE SUPPLEMENTARY INFORMATION
FOR THE YEAR ENDED DECEMBER 31, 2024**

NOTE 1 - BUDGETARY BASIS OF ACCOUNTING

The budgetary basis as provided by law is based upon accounting for certain transactions on the basis of cash receipts, disbursements, and encumbrances. The Schedule of Receipts, Disbursements and Changes in Fund Balance - Budget and Actual - Budget Basis presented for the General fund and Public Health Clinic fund are prepared on the budgetary basis to provide a meaningful comparison of actual results with the budget. The difference between the budgetary basis and the cash basis is outstanding year end encumbrances are treated as disbursements (budgetary basis) rather than assigned, committed or restricted fund balance (cash basis).

Adjustments necessary to convert the results of operations at the end of the year on the budgetary basis to the cash basis are as follows:

| | Fund Cash Balance | |
|-----------------|--------------------------|---------------------------------|
| | <u>General</u> | <u>Public Health Clinic</u> |
| Budgetary basis | \$ 2,648,778 | \$ 1,021,595 |
| Encumbrances | <u>15,627</u> | <u>910</u> |
| Cash basis | <u>\$ 2,664,405</u> | <u>\$ 1,022,505</u> |

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED DECEMBER 31, 2024**

| FEDERAL GRANTOR Pass Through Grantor Program / Cluster Title | Federal AL Number | Pass Through Entity Identifying Number | Total Federal Expenditures |
|--|----------------------------------|---|---------------------------------------|
| U.S. DEPARTMENT OF AGRICULTURE | | | |
| Passed Through Ohio Department of Health | | | |
| WIC Special Supplemental Nutrition Program for Women, Infants, and Children | 10.557 | 07210011WA1724 | \$ 251,974 |
| WIC Special Supplemental Nutrition Program for Women, Infants, and Children | 10.557 | 07210011WA1825 | 70,571 |
| Total U.S. Department of Agriculture | | | 322,545 |
| U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES | | | |
| Passed Through Ohio Department of Health | | | |
| Public Health Emergency Preparedness | 93.069 | 07210012PH1524 | 35,719 |
| Public Health Emergency Preparedness | 93.069 | 07210012PH0125 | 36,040 |
| Total AL #93.069 | | | 71,759 |
| Family Planning Services | 93.217 | 07210011RH1324 | 34,484 |
| Family Planning Services | 93.217 | 07210011RH1425 | 97,488 |
| Total AL #93.217 | | | 131,972 |
| Immunization Cooperative Agreements | 93.268 | 07210012GV0624 | 33,061 |
| Immunization Cooperative Agreements | 93.268 | 07210012GV0725 | 21,876 |
| Total AL #93.268 | | | 54,937 |
| Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) | 93.323 | 07210012EO0323 | 106,831 |
| National and State Tobacco Control Program | 93.387 | 07210014TU1024 | 10,997 |
| National and State Tobacco Control Program | 93.387 | 07210014TU1125 | 28,730 |
| Total AL #93.387 | | | 39,727 |
| Opioid STR | 93.788 | 07210014IH0324 | 65,055 |
| Centers for Disease Control and Prevention Collaboration with Academia to Strengthen Public Health | 93.967 | 07210012WF0223 | 104,306 |
| Preventive Health and Health Services Block Grant | 93.991 | 07210014CC1023 | 4,311 |
| Preventive Health and Health Services Block Grant | 93.991 | 07210014CC1124 | 78,952 |
| Preventive Health and Health Services Block Grant | 93.991 | 07210014CC1225 | 17,410 |
| Total AL #93.991 | | | 100,673 |
| Maternal and Child Health Services Block Grant to the States | 93.994 | 07210011RH1324 | 13,033 |
| Maternal and Child Health Services Block Grant to the States | 93.994 | 07210011CK0624 | 7,833 |

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED DECEMBER 31, 2024
(Continued)**

| FEDERAL GRANTOR Pass Through Grantor Program / Cluster Title | Federal AL Number | Pass Through Entity Identifying Number | Total Federal Expenditures |
|--|----------------------------------|---|---------------------------------------|
| Direct Program | | | |
| Substance Abuse and Mental Health Services Projects of Regional and National Significance | 93.243 | 5H79SP081382-05 | 183,823 |
| Substance Abuse and Mental Health Services Projects of Regional and National Significance | 93.243 | 1H79SP084243-01 | 142,694 |
| Substance Abuse and Mental Health Services Projects of Regional and National Significance | 93.243 | 5H79SP081060-04 | 15,661 |
| Total AL #93.243 | | | <u>342,178</u> |
| Passed Through Ohio Department of Children and Youth | | | |
| Maternal and Child Health Services Block Grant to the States | 93.994 | 07210011CK0624 | 10,749 |
| Total AL #93.994 | | | <u>31,615</u> |
| Passed Through Mental Health and Recovery Services Board of Seneca, Ottawa, Sandusky and Wyandot Counties | | | |
| Opioid STR | 93.788 | 2400575 | 55,000 |
| Opioid STR | 93.788 | 2500331 | 3,250 |
| Opioid STR | 93.788 | 2500709 | 2,627 |
| Total AL #93.788 | | | <u>125,932</u> |
| Block Grants for Community Mental Health Services | 93.958 | 401230 | 5,000 |
| Block Grants for Prevention and Treatment of Substance Abuse | 93.959 | DMHF23SAPT | 85,564 |
| Passed Through Sandusky County Department of Jobs and Family Services | | | |
| Temporary Assistance for Needy Families | 93.558 | Resolution 2023-59 | 6,876 |
| Temporary Assistance for Needy Families | 93.558 | Resolution 2024-87 | 54,716 |
| Total AL #93.558 | | | <u>61,592</u> |
| Passed Through Lucas County Regional Health District | | | |
| Injury Prevention and Control Research and State and Community Based Programs | 93.136 | 04810011RL0124 | 5,989 |
| Passed Through Ohio University | | | |
| Rural Health Care Services Outreach, Rural Health Network Development and Small Health Care Provider Quality Improvement | 93.912 | HRSA-22-061-24 | 15,490 |
| Rural Health Care Services Outreach, Rural Health Network Development and Small Health Care Provider Quality Improvement | 93.912 | HRSA-22-061-25 | 5,468 |
| Rural Health Care Services Outreach, Rural Health Network Development and Small Health Care Provider Quality Improvement | 93.912 | HRSA-21-091-24 | 41,067 |
| Total AL #93.912 | | | <u>62,025</u> |
| Total U.S. Department of Health and Human Services | | | <u>1,330,100</u> |
| Total Expenditures of Federal Awards | | | <u><u>\$ 1,652,645</u></u> |

The accompanying notes are an integral part of this schedule.

**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
2 CFR 200.510(b)(6)
FOR THE YEAR ENDED DECEMBER 31, 2024**

NOTE A – BASIS OF PRESENTATION

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal award activity of Sandusky County Combined General Health District, Sandusky County, Ohio (the District) under programs of the federal government for the year ended December 31, 2024. The information on this Schedule is prepared in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the District, it is not intended to and does not present the financial position or changes in net position of the District.

NOTE B – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Expenditures reported on the Schedule are reported on the cash basis of accounting. Such expenditures are recognized following the cost principles contained in Uniform Guidance wherein certain types of expenditures may or may not be allowable or may be limited as to reimbursement.

NOTE C – INDIRECT COST RATE

The District has elected not to use the 15-percent de minimis indirect cost rate as allowed under the Uniform Guidance.

NOTE D – MATCHING REQUIREMENTS

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

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Columbus, Ohio 43215
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**INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER
FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS
REQUIRED BY GOVERNMENT AUDITING STANDARDS**

Sandusky County Combined General Health District
Sandusky County
2000 Countryside Drive
Fremont, Ohio 43420-8560

To the Members of the Board:

We have audited, in accordance with the 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 (*Government Auditing Standards*), the cash-basis financial statements of the governmental activities, each major fund, and the aggregate remaining fund information of Sandusky County Combined General Health District, Sandusky County, Ohio (the District) as of and for the year ended December 31, 2024, and the related notes to the financial statements, which collectively comprise the District's basic financial statements and have issued our report thereon dated September 19, 2025, wherein we noted the District uses a special purpose framework other than generally accepted accounting principles.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the District's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the District's internal control. Accordingly, we do not express an opinion on the effectiveness of the District's internal control.

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

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

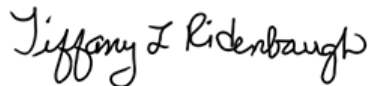
Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the District's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. 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 or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of This Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the District's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the District's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

KEITH FABER
Ohio Auditor of State



Tiffany L. Ridenbaugh, CPA, CFE, CGFM
Chief Deputy Auditor

September 19, 2025

OHIO AUDITOR OF STATE KEITH FABER

65 East State Street
Columbus, Ohio 43215
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800-282-0370

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

Sandusky County Combined General Health District
Sandusky County
2000 Countryside Drive
Fremont, Ohio 43420-8560

To the Members of the Board:

Report on Compliance for Each Major Federal Program

Opinion on Each Major Federal Program

We have audited Sandusky County Combined General Health District, Sandusky County, Ohio's (the District) compliance with the types of compliance requirements identified as subject to audit in the U.S. Office of Management and Budget (OMB) *Compliance Supplement* that could have a direct and material effect on each of Sandusky County Combined General Health District's major federal programs for the year ended December 31, 2024. Sandusky County Combined General Health District's major federal programs are identified in the *Summary of Auditor's Results* section of the accompanying schedule of findings.

In our opinion, Sandusky County Combined General Health District complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended December 31, 2024.

Basis for Opinion on Each Major Federal Program

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States (*Government Auditing Standards*); and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the *Auditor's Responsibilities for the Audit of Compliance* section of our report.

We are required to be independent of the District and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for each major federal program. Our audit does not provide a legal determination of the District's compliance with the compliance requirements referred to above.

Responsibilities of Management for Compliance

The District's Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to the District's federal programs.

Auditor's Responsibilities for the Audit of Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the District's compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material, if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the District's compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance, we:

- exercise professional judgment and maintain professional skepticism throughout the audit.
- identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the District's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- obtain an understanding of the District's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of the District's internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Report on Internal Control Over Compliance

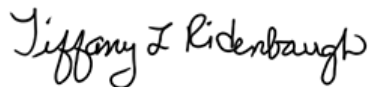
A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement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

Our consideration of internal control over compliance was for the limited purpose described in the *Auditor's Responsibilities for the Audit of Compliance* section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance. Given these limitations, during our audit we did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses, as defined above. However, material weaknesses or significant deficiencies in internal control over compliance may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of this testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

KEITH FABER
Ohio Auditor of State



Tiffany L. Ridenbaugh, CPA, CFE, CGFM
Chief Deputy Auditor

September 19, 2025

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**SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT
SANDUSKY COUNTY**

**SCHEDULE OF FINDINGS
2 CFR § 200.515
DECEMBER 31, 2024**

1. SUMMARY OF AUDITOR'S RESULTS

| | | |
|---------------------|---|--|
| (d)(1)(i) | Type of Financial Statement Opinion | Unmodified |
| (d)(1)(ii) | Were there any material weaknesses in internal control reported at the financial statement level (GAGAS)? | No |
| (d)(1)(ii) | Were there any significant deficiencies in internal control reported at the financial statement level (GAGAS)? | No |
| (d)(1)(iii) | Was there any reported material noncompliance at the financial statement level (GAGAS)? | No |
| (d)(1)(iv) | Were there any material weaknesses in internal control reported for major federal programs? | No |
| (d)(1)(iv) | Were there any significant deficiencies in internal control reported for major federal programs? | No |
| (d)(1)(v) | Type of Major Programs' Compliance Opinion | Unmodified |
| (d)(1)(vi) | Are there any reportable findings under 2 CFR § 200.516(a)? | No |
| (d)(1)(vii) | Major Programs (list): | WIC Special Supplemental Nutrition Program for Women, Infants, and Children – AL #10.557 Substance Abuse and Mental Health Services Projects of Regional and National Significance – AL #93.243 |
| (d)(1)(viii) | Dollar Threshold: Type A/B Programs | Type A: > \$ 750,000 Type B: all others |
| (d)(1)(ix) | Low Risk Auditee under 2 CFR § 200.520? | No |

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

None

3. FINDINGS FOR FEDERAL AWARDS

None

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OHIO AUDITOR OF STATE KEITH FABER



SANDUSKY COUNTY COMBINED GENERAL HEALTH DISTRICT

SANDUSKY COUNTY

AUDITOR OF STATE OF OHIO CERTIFICATION

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



Certified for Release 9/25/2025

65 East State Street, Columbus, Ohio 43215
Phone: 614-466-4514 or 800-282-0370

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