HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME

FINANCIAL STATEMENTS
AND
INDEPENDENT AUDITORS' REPORT

FOR THE YEARS ENDED MARCH 31, 2022 AND 2021

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LESTER, MILLER & WELLS

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INDEPENDENT AUDITORS' REPORT

To the Board of Commissioners Hospital Service District No. 3 Parish of Vermilion, State of Louisiana d/b/a Gueydan Memorial Guest Home Gueydan, Louisiana

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of Hospital Service District No. 3 of the Parish of Vermilion, State of Louisiana, d/b/a Gueydan Memorial Guest Home (the "Hospital District"), a component unit of the Vermilion Parish Police Jury, as of and for the years ended March 31, 2022 and 2021, and the related notes to the financial statements, which collectively comprise Hospital Service District No. 3 of the Parish of Vermilion, State of Louisiana, d/b/a Gueydan Memorial Guest Home's basic financial statements as listed in the table of contents.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the District, as of March 31, 2022 and 2021, and the changes in financial position and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Hospital 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 opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and 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.

Board of Commissioners Hospital Service District No. 3 Parish of Vermilion, State of Louisiana d/b/a Gueydan Memorial Guest Home Gueydan, Louisiana Page Two

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 Hospital 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.

Auditors' 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 auditors' report that includes our opinion. 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 generally accepted auditing standards 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 generally accepted auditing standards 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 Hospital 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 Hospital 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.

Emphasis of Matter

As discussed in Note 1, the financial statements present only the financial information of Hospital Service District No. 3 of the Parish of Vermilion, State of Louisiana, d/b/a Gueydan Memorial Guest Home and do not purport to, and do not, present fairly the financial position of the Vermilion Parish Police Jury as of March 31, 2022 and 2021, the changes in its financial position, or its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Board of Commissioners Hospital Service District No. 3 Parish of Vermilion, State of Louisiana d/b/a Gueydan Memorial Guest Home Gueydan, Louisiana Page Three

Required Supplementary Information

The Hospital Service District No. 3 of the Parish of Vermilion, State of Louisiana, d/b/a Gueydan Memorial Guest Home has omitted management's discussion and analysis that accounting principles generally accepted in the United States of America require to be presented to supplement the basic financial statements. Such missing information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. Our opinion on the basic financial statements is not affected by this missing information.

Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedules of net patient service revenues, schedules of operating expenses and schedule of compensation, benefits, and other payments to agency head or chief executive officer are presented for the purposes of additional analysis and are not a required part of the basic 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, the Hospital District is 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 December 30, 2022 on our consideration of the Hospital District's internal control over financial reporting and on 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 Hospital 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 Hospital District's internal control over financial reporting and compliance.

Certified Public Accountants

Lester, Miller & Wells

Lafayette, Louisiana

December 30, 2022

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME STATEMENTS OF NET POSITION MARCH 31,

ASSETS		2022		<u>2021</u>
CURRENT ASSETS				
Cash and cash equivalents	\$	1,532,631	\$	857,534
Certificates of deposit	Ψ	476,680	Ψ	473,020
Patient accounts receivable, net of allowance for doubtful		170,000		470,020
accounts of \$137,915 in 2022 and \$132,961 in 2021 (Note 4)		357,841		600,627
Accrued interest receivable		788		1,890
Other receivables		11,306		1,937
Inventory		18,006		26,649
Prepaid expenses		104,180		96,168
Total current assets		2,527,867		2,057,825
RESTRICTED ASSETS (Note 1)				
Cash and cash equivalents		334,607		246,004
Certificates of deposit		502,956		825,000
Ad valorem tax receivable		10,198		5,913
Total restricted assets		847,761		1,076,917
CAPITAL ASSETS				
Nondepreciable assets (Note 9)		73,080		53,748
Depreciable assets, at cost, less accumulated depreciation				
of \$5,352,301 in 2022 and \$4,319,618 in 2021 (Note 9)		945,870		1,032,683
Total capital assets		1,018,950		1,086,431
TOTAL ASSETS	\$	4,394,578	\$	4,221,173

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME STATEMENTS OF NET POSITION (CONTINUED) MARCH 31,

LIABILITIES AND NET POSITION		2022	<u>2021</u>
CURRENT LIABILITIES			
Accounts payable	\$	183,822	\$ 144,521
Estimated third-party payor settlements		-0-	25,415
Accrued salaries and wages		127,969	125,673
Other payable	_	31,690	19,687
Total current liabilities	-	343,481	315,296
NET POSITION			
Net investment in capital assets, net of related debt		1,018,950	1,086,431
Restricted for debt services and capital facilities		847,761	1,076,917
Unrestricted	-	2,184,386	1,742,529
Total net position	-	4,051,097	3,905,877
TOTAL LIABILITIES AND NET POSITION	\$ _	4,394,578	\$ 4,221,173

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION YEARS ENDED MARCH 31,

Operating revenues.		2022	2021
Operating revenues:			
Net patient service revenues (net of provision for bad debts	Φ	4.050.050 #	4 404 574
of \$193,769 and \$137,955 for 2022 and 2021, respectively) UPL supplemental payments	\$	4,056,852 \$ 778,452	4,464,574 572,034
Total operating revenues		4,835,304	5,036,608
rotal operating reventage		4,000,004	
Operating expenses:			
General and administrative		1,338,001	1,293,180
Nursing services		1,659,330	2,083,445
Housekeeping		143,761	149,365
Dietary		435,745	418,419
Plant operations		256,563	231,112
Laundry		129,844	125,818
Patient activity		37,965	37,800
Consultants		48,723	47,325
Clinic		21,338	122,188
Medicare SNF and outpatient		453,902	590,881
Intergovernmental transfer - public nursing home UPL		307,567	230,267
Depreciation		130,298	192,490
Total operating expenses		4,963,037	5,522,290
Operating income (loss)		(127,733)	(485,682)
Non-operating revenues (expenses):			
Ad valorem tax		225,068	227,614
Interest revenue		6,249	12,802
Provider relief funds		21,370	651,754
Gain on forgiveness of debt		-0-	504,487
Miscellaneous income		20,549	21,908
Gain (loss) on disposal of fixed assets		(283)	-0-
Total non-operating revenues, net		272,953	1,418,565
Changes in net position		145,220	932,883
Net position, beginning of year		3,905,877	2,972,994
Net position, end of year	\$	4,051,097 \$	3,905,877

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME STATEMENTS OF CASH FLOWS YEARS ENDED MARCH 31,

		2022	<u>2021</u>
CASH FLOWS FROM OPERATING ACTIVITIES Receipts from and on behalf of patients Payments to employees Payments to suppliers and contractors Other receipts and payments, net	\$	4,247,788 (2,268,500) (2,510,008) 769,083	\$ 4,269,131 (2,520,539) (2,823,537) 572,597
Net cash provided by (used in) operating activities		238,363	(502,348)
CASH FLOWS FROM NON-CAPITAL FINANCING ACTIVITIES Ad valorem taxes Non-capital grants and donations Other		220,783 21,370 20,549	232,011 1,156,241 21,908
Net cash provided by (used in) non-capital financing activities		262,702	1,410,160
CASH FLOWS FROM CAPITAL AND RELATED FINANCING ACTIVITI Purchase of capital assets	ES	(63,100)	(68,349)
Net cash provided by (used in) capital and related financing activities		(63,100)	(68,349)
CASH FLOWS FROM INVESTING ACTIVITIES Interest income Purchase (redemption) of certificates of deposit, net of renewals		7,351 <u>318,384</u>	13,525 (506,538)
Net cash provided by (used in) investing activities		325,735	(493,013)
Net increase (decrease) in cash and cash equivalents		763,700	346,450
Cash and cash equivalents, beginning		1,103,538	757,088
Cash and cash equivalents, ending	\$	1,867,238	\$ 1,103,538
			(continued)

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME STATEMENTS OF CASH FLOWS (CONTINUED) YEARS ENDED MARCH 31,

		2022		<u>2021</u>
RECONCILIATION OF OPERATING INCOME TO NET CASH PROVIDE BY (USED IN) OPERATING ACTIVITIES	ED			
Operating income (loss) Adjustment to reconcile operating income to net cash flows provided	\$	(127,733)	\$	(485,682)
by (used in) operating activities:				
Depreciation		130,298		192,490
Provision for bad debts		193,769		137,955
(Increase) decrease in assets -				
Patient accounts receivable		49,017		(302,804)
Prepaid expense		(8,012)		(42,219)
Inventories		8,643		(2,755)
Other receivables		(9,369)		563
Increase (decrease) in liabilities -				
Accounts payable		39,301	,	24,852
Third-party payor settlements		(51,850)		(30,594)
Accrued expenses		2,296		11,375
Other payable		12,003		(5,529)
Net cash provided by (used in) operating activities	\$	238,363	\$	(502,348)
RECONCILIATION OF CASH AND CASH EQUIVALENTS TO THE STATEMENTS OF NET POSITION				
Cash and cash equivalents	\$	1,532,631	\$	857,534
Cash and cash equivalents in restricted assets	-	334,607	·	246,004
Total cash and cash equivalents	\$	1,867,238	\$	1,103,538

Note 1. Description of Organization and Summary of Significant Accounting Policies

Organization

The Hospital Service District No. 3, Parish of Vermilion, State of Louisiana (the "Hospital District") is a political subdivision of the state created by an ordinance adopted by the Vermilion Parish Police Jury on November 19, 1988. The geographical limits of the Hospital District coincide with those of Ward No. 8 of Vermilion Parish. Members of the Board of Commissioners are appointed by the Vermilion Parish Police Jury. The Hospital District is operating under the name Gueydan Memorial Guest Home. It operates a 66-bed nursing home that cares mainly for the elderly located in Southwest Louisiana and it operated a rural health clinic until August 3, 2020. Both of which are located in Gueydan, Louisiana.

On August 3, 2020, the Hospital District entered into a multi-year lease agreement to lease the rural health clinic facilities and equipment to Ochsner Abrom Kaplan Memorial Hospital (OAKMH), a subsidiary of Ochsner Lafayette General. OAKMH has assumed management and operations of the rural health clinic.

The financial statements of the Hospital District have been prepared in accordance with generally accepted accounting principles ("GAAP") in the United States of America applicable to state and local governments. The Governmental Accounting Standards Board ("GASB") is the accepted standard-setting body for establishing governmental accounting and financial reporting principles. The significant accounting and reporting policies and practices used by the Hospital District are described below.

Reporting Entity

As the governing authority of the Parish, for reporting purposes, the Vermilion Parish Police Jury is the reporting entity for the Hospital District. Accordingly, the Hospital District was determined to be a component unit of Vermilion Parish Police Jury. The accompanying financial statements present only the Hospital District.

Method of Accounting

The Hospital District's financial statements are reported using the economic resources measurement focus and the accrual basis of accounting. Revenues are recorded when earned and expenses are recorded when a liability is incurred, regardless of the time of related cash flows. Property taxes are recognized as revenues in the year they are levied. Grants are recognized as revenue as soon as eligibility requirements imposed by the provider have been met. The Hospital District's accounting and reporting procedures also conform to the requirements of Louisiana Revised Statute 24:514 and to the guide set forth in the *Louisiana Governmental Audit Guide*, and the *Audit and Accounting Guide* – *Health Care Organizations*, published by the American Institute of Certified Public Accountants, and standards established by the GASB.

Enterprise Fund

Enterprise funds are used to account for operations that are financed and operated in a manner similar to private business enterprises – where the intent of the governing body is that the costs (expenses, including depreciation) of providing goods or services to the general public on a continuing basis be financed or recovered primarily through user charges.

Note 1. Description of Organization and Summary of Significant Accounting Policies (Continued)

Inventory

Inventories are stated at the lower of cost determined by the first-in, first-out, (FIFO) method, or net realizable value.

Use of Estimates

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

Cash and Cash Equivalents

For purposes of the statements of cash flows, the Hospital District considers all highly liquid investments with an original maturity of three months or less when purchased to be cash equivalents. Under state law, the Hospital District may deposit funds in demand deposits, interest-bearing demand deposits, or time deposits with state banks organized under Louisiana law or any other state of the United States, or under the laws of the United States.

Patient Accounts Receivable and Allowance for Uncollectible Accounts

Patient accounts receivable are carried at the original billed amount less an estimate made for uncollectible accounts based on a review of all outstanding amounts on a monthly basis. Management determines the allowance for uncollectible accounts by identifying troubled accounts and by using historical experience applied to an aging of accounts. Patient accounts receivable are written off when deemed uncollectible. Recoveries of trade receivables previously written off are recorded when received.

Capital Assets

The Hospital District's capital assets are stated at historical cost. Contributed capital assets are reported at their estimated fair value at the time of donation. All capital assets other than land are depreciated or amortized (in the case of capital leases) using the straight-line method of depreciation using these assets lives:

Building	20 - 30 years
Furniture and fixtures	3 – 20 years
Building improvements	10 – 15 years
Capitalized interest	30 years

Expenditures for additions, major renewals and betterments are capitalized and expenditures for maintenance and repairs are charged to operations as incurred.

Note 1. Description of Organization and Summary of Significant Accounting Policies (Continued)

Net Patient Service Revenues

The Hospital District has agreements with a third-party payor, which includes government programs under which the Hospital District is paid based upon established charges, the cost of providing services, predetermined diagnosis rates, fixed per diem rates and discounts from established charges. Revenues are recorded at estimated amounts due from patients and third-party payors for services provided.

Net patient service revenues are reported at estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

The Hospital District provides care to patients even though they are covered by contractual payment arrangements that do not pay full charges or may lack adequate insurance. As a result, the Hospital District is exposed to credit risks. The Hospital District manages such risks by providing appropriate allowances. The allowances are evaluated on a regular basis and are based upon management's periodic review of the collectability of accounts considering historical experience, the nature and volume of the accounts and the agreement with the prospective third-party payor.

Grants and Donations

Revenues from grants and donations (including capital contributions of assets) are recognized when all eligibility requirements, including time requirements, are met. Grants and donations may be restricted for either specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as non-operating revenues. Amounts restricted to capital acquisitions are reported after non-operating revenues and expenses.

Net Position Flow Assumption

Sometimes a government will fund outlays for a particular purpose from both restricted and unrestricted resources. In order to calculate the amounts to report as restricted net position and unrestricted net position in the financial statements, a flow assumption must be made about the order in which the resources are considered to be applied. It is the Hospital District's policy to consider restricted net position to have been depleted before unrestricted net position is applied.

Operating Revenues and Expenses

The Hospital District's statements of revenues, expenses and changes in net position distinguishes between operating and non-operating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services, the Hospital District's principal activity. Non-exchange revenues, including taxes, grants and contributions received for purposes other than capital asset acquisition, are reported as non-operating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs.

Note 1. Description of Organization and Summary of Significant Accounting Policies (Continued)

Advertisement

The Hospital District expenses advertising cost as incurred. Advertising expense for the years ended March 31, 2022 and 2021 totaled \$725 and \$539, respectively.

Deferred Outflows/Inflows of Resources

In addition to assets, the statements of net position will sometimes report a separate section for deferred outflows of resources. This separate financial statement element, deferred outflows of resources, represents a consumption of net position that applies to a future period(s) and will not be recognized as an outflow of resources (expenditure) until then. The Hospital District does not currently have any items that qualify for reporting in this category.

In addition to liabilities, the statements of net position will sometimes report a separate section for deferred inflows of resources. This separate financial statement element, deferred inflows of resources, represents an acquisition of net position that applies to a future period(s) and so will not be recognized as an inflow of resources (revenue) until that time. The Hospital District does not currently have any items that qualify for reporting in this category.

Risk Management

The Hospital District is exposed to various risks of loss from tort; theft of, damage to, and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; and employee health. Commercial insurance coverage is purchased for claims arising from such matters.

Environmental Matters

The Hospital District is subject to laws and regulations relating to the protection of the environment. The Hospital District's policy is to accrue environmental and cleanup related costs of a non-capital nature when it is both probable that a liability has been incurred and when the amount can be reasonably estimated. Although it is not possible to quantify with any degree of certainty, the potential financial impact of the Hospital District's continuing compliance efforts, management believes any future remediation or other compliance related costs will not have a material adverse effect on the financial condition or reported results of operations of the Hospital District. At March 31, 2022 and 2021, management is not aware of any liability resulting from environmental matters.

Reclassifications

To be consistent with current year classifications, some items from the previous year have been reclassified with no effect on net position.

Compensated Absences

All full-time employees with one full year of continuous employment with the Hospital District earn up to a maximum of 10 days of paid time off. A maximum of 20 days may be carried forward to the succeeding fiscal year.

Note 1. Description of Organization and Summary of Significant Accounting Policies (Continued)

Income Taxes

The Hospital District is a political subdivision and exempt from taxes.

Restricted Assets

In 2006, a ten-year tax, 7 mill property tax was passed by the District of the Hospital for improving and maintaining the building and capital facilities of the District and also acquiring furnishings and equipment. The tax was renewed at 8.29 mills in 2016 for the same purpose. The statement of net position shows cash and cash equivalents, certificates of deposits and ad valorem tax receivables as restricted because they were monies collected from the tax.

Recently Issued Accounting Principles

In June 2018, the GASB issued Statement No. 87 (GASB 87). The objective of GASB Statement No. 87, Leases, is to better meet the information needs of the financial statement users by improving accounting and financial reporting for leases by governments. This Statement increased the usefulness of governments' financial statements by requiring recognition of certain lease assets and liabilities for leases that were previously classified as operating leases and recognized as inflows of resources or outflows of resources based on the payment provisions of the contract. It establishes a single model for lease accounting based on the foundational principle that leases are financings of the right to use an underlying asset. Management is still evaluating the potential impact of adoption on the Hospital's financial statements. The requirements of this Statement are effective for financial statements for periods beginning after June 15, 2021.

The GASB issued Statement No. 84, Fiduciary Activities. The objective of GASB 84 is to improve guidance regarding the identification of fiduciary activities for accounting and financial reporting purposes and how those activities should be reported. The requirements of this Statement are effective for financial statements for periods beginning after December 15, 2019.

Note 2. Bank Deposits and Certificates of Deposit

The Hospital District's investing is performed in accordance with investment policies complying with state statutes. Funds may be invested in time deposits, money market investment accounts, or certificates of deposit with financial institutions insured by Federal Depository Insurance Coverage (FDIC); direct obligations of the United States Government and its agencies; commercial paper issued by United States Corporations with a rating of A-1 (Moody's) and P-1 (Standard and Poor's) or higher; and government backed mutual trust funds. At March 31, 2022 and 2021, the Hospital District's funds consisted solely of demand deposits and certificates of deposit. These deposits are stated at cost, which approximates market.

Note 2. Bank Deposits and Certificates of Deposit (Continued)

Custodial Credit Risk – Deposits. Custodial credit risk is the risk that in the event of a bank failure, the Hospital District's deposits may not be returned to it. State law requires collateralization of all deposits with federal depository insurance and other acceptable collateral in specific amounts. The Hospital District's policy requires that all bank balances be insured or collateralized by the financial institution to pledge their own securities to cover any amount in excess of FDIC. These securities must be pledged in the Hospital District's name. As of March 31, 2022, \$750,000 of the Hospital District's deposits were secured from risk by FDIC coverage, \$2,106,692 were collateralized by securities pledged by the financial institutions and deposits of \$18,979 were unsecured. As of March 31, 2021, \$735,500 of the Hospital District's deposits were secured from risk by FDIC coverage and \$1,734,101 were collateralized by securities pledged by the financial institutions.

Note 3. Net Patient Service Revenues

The Hospital District has agreements with third-party payors that provide for payments to the District at amounts different from its established rates. A summary of the payment arrangements with major third-party payors follows:

- Medicare Covered skilled nursing services are paid based on the patient driven payment model (PDPM), a fee schedule amount for outpatient services and a per visit basis for rural health clinic services.
- •Medicaid Covered nursing home services are paid based on a per diem rate per day and a per visit basis for rural health clinic services.

During the years ended March 31, 2022 and 2021, approximately 83% and 79%, respectively, of the Hospital District's gross patient services were furnished to Medicare and Medicaid beneficiaries. Laws and regulations governing Medicare and Medicaid programs are complex and subject to interpretation. The Hospital District believes that it is in compliance with all applicable laws and regulations and is not aware of any pending or threatened investigations involving allegations of potential wrongdoing. While no such regulatory inquiries have been made, compliance with such laws and regulations are subject to future government review and interpretation, as well as significant regulatory action including fines, penalties, and exclusion from the Medicare and Medicaid programs.

Note 4. Accounts Receivable

Patient accounts receivable reported as current assets by the Hospital District at March 31, 2022 and 2021 consisted of these amounts:

	<u>2022</u>		<u>2021</u>
Receivables from patients and insurance carriers Receivables from Medicare Receivables from Medicaid	\$ 288,305 55,386 152,065	\$	407,762 193,066 132,760
Total patient accounts receivable Allowance for doubtful accounts Patient accounts receivable, net	\$ 495,756 (137,915) 357,841	\$ _	733,588 (132,961) 600,627

Note 5. Concentration of Credit Risk

The Hospital District grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of receivables from patients and third-party payors at March 31, 2022 and 2021 was as follows:

	<u>2022</u>	<u>2021</u>
Medicare	11%	26%
Medicaid	31%	18%
Other third-party payors	58%	56%
	100%	100%

Note 6. Commitments and Contingencies

Operating Leases - The Hospital has two copiers under operating lease expiring on December 31, 2026. Total rental expense for the years ended March 31, 2022 and 2021 for all operating leases was \$3,494 and \$2,100, respectively.

The following is a schedule by year of the future minimum lease payments under the operating lease described above as of March 31, 2022.

Year Ending March 31,	Amount
2023	\$ 4,380
2024	4,380
2025	4,380
2026	4,380
2027	2,920
	\$ 20,440

Note 7. Ad Valorem Taxes

Ad valorem taxes are attached as an enforceable lien on property as of January 1 of each year. Taxes are levied on November 15 and are actually billed to the taxpayers in December. Billed taxes due by December 31 become delinquent on January 1 of the following year.

Tax revenues are recognized in the year billed.

The Hospital District received approximately 3.41% and 3.53% in 2022 and 2021, respectively, of its financial support from ad valorem taxes. These funds are restricted for the retirement of bonds and maintaining the building and capital facilities of the Hospital District and acquiring furnishings and equipment.

The taxes are based on assessed values determined by the Tax Assessor of Vermilion Parish and are collected by the Sheriff. The taxes are remitted to the Hospital District net of deductions for the pension fund contributions. For the years ended March 31 2022 and 2021, taxes of 8.29 mills were levied amounting to total taxes of \$225,068 and \$227,614, respectively.

Note 8. Custodial Asset and Liability

The Hospital District maintains a bank account for their residents as a service to them. The related asset and liability of \$32,003 at March 31, 2022 and \$36,647 at March 31, 2021 is not included in this report due to its custodial nature.

Note 9. Capital Assets

Capital assets additions, retirements, and balances for the years ended March 31, 2022 and 2021 were as follows:

		Balance								Balance
	<u>N</u>	March 31, 2021	<u>_</u>	<u>Additions</u>		<u>Retirements</u>		<u>Transfers</u>	1	<u> March 31, 2022</u>
Nondepreciable capital assets										
Land	\$	35,000	\$	-0-	\$	-0-	\$	-0-	\$	35,000
Construction in progress	•	18,748	*	19,332	*	-0-	Ψ	-0-	Ψ	38,080
Total nondepreciable assets	\$	53,748	\$	19,332	\$	-0-	\$	-0-	\$	73,080
Depreciable capital assets										
Building	\$	2,464,324	\$	-0-	\$	-0-	\$	-0-	\$	2,464,324
Furniture and equipment		1,418,329		26,091		(16,487)		-0-		1,427,933
Capitalized interest		73,839		-0-		-0-		-0-		73,839
Land and building improvements		1,395,809		17,678		0-		-0-		1,413,487
Total historic cost		5,352,301		43,769		(16,487)		-0-		5,379,583
Less accumulated depreciation for:										
Building		(2,325,457)		(13,445)	1	-0-		-0-		(2,338,902)
Furniture and equipment		(1,168,845)		(57,505)		16,203		-0-		(1,210,147)
Capitalized interest		(69,530)		-0-		-0-		-0-		(69,530)
Land and building improvements		(755,786)		(59,348)				0-		(815,134)
Total accumulated depreciation		(4,319,618)		(130,298)		16,203		0-		(4,433,713)
Capital assets, net	\$	1,032,683	\$	(86,529)	\$	(284)	\$	0-	\$	945,870

Note 9. Capital Assets (Continued)

	ļ	Balance <u>Warch 31, 2020</u>	Additions	Retirements		<u>Transfers</u>		Balance March 31, 2021
Nondepreciable capital assets								
Land	\$	35,000 \$	-0- \$	\$ -0-	\$	-0-	\$	35,000
Construction in progress		18,748	-0-	-0-		-0-	-	18,748
Total nondepreciable assets	\$	53,748 \$	-0- 9	\$ -0-	\$	-0-	\$	53,748
Depreciable capital assets								
Building	\$	2,464,324 \$	-0- \$	\$ -0-	\$	-0-	\$	2,464,324
Furniture and equipment		1,384,253	62,578	(28,502)	Ì	-0-		1,418,329
Capitalized interest		73,839	-0-	` -0-		-0-		73,839
Land and building improvements		1,390,038	5,771	-0-		-0-		1,395,809
Total historic cost		5,312,454	68,349	(28,502)		-0-		5,352,301
Less accumulated depreciation for								
Building		(2,257,764)	(67,693)	-0-		-0-		(2,325,457)
Furniture and equipment		(1,131,507)	(65,840)	28,502		-0-		(1,168,845)
Capitalized interest		(69,530)	-0-	-0-		-0-		(69,530)
Land and building improvements		(696,829)	(58,957)	-0-		-0-		(755,786)
Total accumulated depreciation		(4,155,630)	(192,490)	28,502		-0-		(4,319,618)
Capital assets, net	\$	1,156,824 \$	(124,141) \$	\$ -0-	\$	0-	\$	1,032,683

Depreciation expense for the years ended March 31, 2022 and 2021 amounted to \$130,298 and \$192,490, respectively.

Note 10. Compensated Absences

All full-time employees with one full year of continuous employment with the Hospital District earn up to a maximum of 10 days of paid time off. A maximum of 20 days may be carried forward to the succeeding fiscal year. Accrued compensated absences at March 31, 2022 and 2021 totaled \$43,934 and \$45,781, respectively, which is included in accrued liabilities on the statements of net position.

Note 11. Retirement

The Hospital District has a simple plan under Section 408(p) of the Internal Revenue Code. The plan became effective March 1, 2001 and provides for employees of the Hospital District to make salary reduction contributions in each calendar year to the simple IRA established by each employee who meets eligibility requirements. All employees of the Hospital District are eligible to participate under the plan except employees who are not reasonably expected to earn \$5,000 during the plan year for which the contribution is to be made. The Hospital District has agreed to provide matching contributions for the 2022 and 2021 plan years in the amount of the participant's elective deferrals not in excess of 3% of such participant's compensation and not to exceed \$6,500. The Hospital District made contributions of \$29,184 for the year ended March 31, 2022 and \$34,526 for the year ended March 31, 2021.

Note 12. Compensation Paid to Board of Commissioners

In August 2018, House Bill 434 adjusted compensation paid to board members of the Hospital District. The change allowed the Hospital District to pay board members no more than \$125 for attendance at meetings of the commission, not to exceed 12 meetings per year and 4 special meetings. Prior to August 2018, the compensation paid to Board of Commissioners was presented in compliance with House Concurrent Resolution No. 54 of the 1979 Session of the Louisiana Legislature. Each member of the board received \$40 for each day of attendance at meetings of the commission. The compensation paid to Board of Commissioners at March 31, 2022 and 2021 is as follows:

	<u>2022</u>	<u>2021</u>		
Flora Thompson Jamie Lounsberry Ronnie LeMaire George Gardiner Mona Simon	\$ 1,375 \$ 1,250 1,375 1,500 1,500	1,725 1,725 1,725 1,725 1,725		
Total	\$ 7,000 \$			

Note 13. Supplemental Medicaid Payments (UPL)

Effective March 2016, the Hospital District entered into a Participation Agreement in order to receive Medicaid supplemental payments for qualifying nursing facilities owned or operated by non-state governmental organizations that have entered into an agreement with the Louisiana Department of Health (LDH). The Hospital District agreed to transfer funds to LDH to be used as Medicaid matching funds within the Medicaid program.

As permitted by State and Federal laws, LDH agrees to use such funds to make Medicaid payments within the Medicaid program which shall include both the "non-federal share" and the "federal funds" generated by the "non-federal share." The Medicaid supplemental payments made to Public Nursing Facility shall not exceed Public Nursing Facility's upper payment limit.

The Hospital District made payments to LDH in conjunction with this agreement totaling \$307,567 in 2022 and \$230,267 in 2021. These payments are recognized as operating expense in the statement of revenues, expenses and changes in net position. LDH made Medicaid supplemental payments to the Hospital District totaling \$778,452 in 2022 and \$572,034 in 2021. These payments are recognized as operating revenues in the statement of revenues, expenses and changes in net position.

Note 14. Professional/Commercial Liability Risk

The Hospital District participates in the Louisiana Patient's Compensation Fund established by the State of Louisiana to provide medical professional liability coverage to healthcare providers. The fund provides for \$400,000 in coverage per occurrence above the first \$100,000, for which the Hospital District is at risk. In connection with the establishment of the Patient's Compensation Fund, the State of Louisiana enacted legislation limiting the amount of healthcare provider settlements for professional liability to \$100,000 per occurrence and limiting the Patient's Compensation Fund's exposure to \$400,000 per occurrence.

The Hospital District participates in Louisiana Nursing Home Association Malpractice and General Liability Fund. The Fund provides for professional liability coverage of \$100,000, plus interest per claim and a \$15,000 per occurrence deductible. The Fund also covers Commercial and General Liability with a deductible of \$15,000 per occurrence.

Each participant in the Trust is jointly and severally liable for the obligations of the Trust.

Note 15. Contingencies

The principal contingencies are described below:

The Hospital District is contingently liable for losses from professional and general liability not underwritten by the Louisiana Patient's Compensation Fund or the Louisiana Nursing Home Association Malpractice and General Liability Fund.

Note 15. Contingencies (Continued)

The Hospital District participates in the Louisiana Nursing Home Association Self-Insurance Fund for Worker's Compensation. Should the fund's assets not be adequate to cover claims made against it, the Hospital District may be assessed its pro-rata share of the resulting deficit. It is not possible to estimate the amount of additional assessments, if any. Accordingly, the Hospital District is contingently liable for assessments by the Louisiana Nursing Home Association Self-Insurance Fund for Worker's Compensation.

Note 16. COVID-19 Funding

The District received \$602,292 in Provider Relief Funds (the funds) via the Coronavirus Aid Relief and Economic Security (CARES) Act during the fiscal year ending March 31, 2022. The funds were issued by the U.S. Department of Health & Human Services (HHS) in response to the coronavirus pandemic to be utilized for healthcare related expenses and lost revenues attributable to coronavirus. The District recognized \$602,292 as nonoperating revenue in the fiscal year ending March 31, 2022, based on the information available as of March 31, 2022. The District submitted a report of healthcare related expenses and lost revenues attributable to coronavirus. Funds received in excess of the reported expenses and lost revenues, if any, will be owed to HHS. As a result, the amount recorded in the financial statements compared to the District's Provider Relief Fund reporting could differ. This difference could be materially different from current estimates.

Note 16. COVID-19 Funding (Continued)

The District received \$49,461 from the Rural Health Clinic Testing & Mitigation Program via the American Rescue Plan (ARP) Act during the fiscal year ending March 31, 2022. The funds were issued by HHS to provide COVID-19 testing and expand access to testing in rural communities. The Hospital District recognized \$49,461 as nonoperating revenue in the fiscal year ending March 31, 2022.

The Hospital District applied for, and received, approximately \$504,000 under an SBA loan as part of the Paycheck Protection Plan (PPP Loan) in May of 2020. Stipulations of the PPP Loan's forgiveness provision require loan proceeds to be used for payroll and other operating expenses. The loan and related interested were forgiven by the SBA on March 31, 2021 and has been recognized as nonoperating revenue in the fiscal year ending March 31, 2022.

Note 17. Subsequent Events

Management has evaluated subsequent events through the date the financial statements were available to be issued, December 30, 2022, and determined no material events occurred that require disclosure. No subsequent events occurring after that date have been evaluated for inclusion in these financial statements.

OTHER SUPPLEMENTARY INFORMATION

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME SCHEDULES OF NET PATIENT SERVICE REVENUES YEARS ENDED MARCH 31,

		<u>2022</u>	<u>2021</u>
Gross patient service revenue:			
Medicaid	\$	2,222,034 \$	1,953,030
Private		781,519	1,073,206
Managed Care		50,552	-0-
Medicare SNF		1,423,644	1,965,608
Medicare outpatient		281,210	311,808
Clinic		-0-	51,855
Total gross patient service revenue		4,758,959	5,355,507
Contractual allowances - nursing home		(508,338)	(732,619)
Contractual allowances - clinic		-0-	(20,359)
Provisions for bad debt		(193,769)	(137,955)
Net patient service revenues	\$ _	4,056,852 \$	4,464,574

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME SCHEDULES OF OPERATING EXPENSES YEARS ENDED MARCH 31,

	2022	<u>2021</u>
General and administrative:		
Salaries -		
Administrator and director	\$ 98,990	\$ 99,903
Office and clerical	148,653	151,069
Transportation	40,925	37,894
Advertising	725	539
Auto expense	6,699	5,943
Bank charges	-0-	61
Board fees	7,000	8,625
Computer expenses	50,774	38,160
Dues and subscriptions	4,614	4,374
Employee benefits	183,375	144,127
Employer retirement matching	29,184	34,526
Insurance	208,466	176,428
Legal and accounting	81,933	78,635
Licenses	1,440	1,841
Medicare consultants	42,648	36,257
Miscellaneous	5,959	12,344
Office supplies	6,318	9,350
Outside services	13,904	13,437
Payroll taxes	165,805	186,434
Pension expense	6,959	7,024
Postage and freight	2,441	2,163
Provider fee	211,847	225,207
Telephone	12,532	13,659
Travel and seminar	 6,810	5,180
Total general and administrative	 1,338,001	1,293,180
Nursing services:		
Salaries -		
Director of nursing	113,349	134,828
Other	1,307,205	1,497,591
Nursing supplies	134,379	199,433
Contract nursing services	 104,397	251,593
Total nursing services	\$ 1,659,330	\$ 2,083,445

(Continued)

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME SCHEDULES OF OPERATING EXPENSES (CONTINUED) YEARS ENDED MARCH 31,

		2022		<u>2021</u>
Housekeeping:				
Salaries	\$	140,216	\$	141,487
Supplies		3,545		7,878
Total housekeeping		143,761		149,365
Dietary:				
Salaries		228,166		224,191
Food		162,259		154,368
Food supplement		15,523		13,822
Supplies		29,797		26,038
Total dietary		435,745		418,419
Plant operations:				
Salaries		54,719		53,011
Contract services		5,943		29,580
Other		7,714		7,183
Small equipment		12,733		17,775
Repairs and maintenance		71,271		41,879
Utilities		104,183		81,684
Total plant operations		256,563		231,112
Laundry:				
Salaries		102,415		96,339
Supplies		27,429		29,479
Total laundry		129,844		125,818
Patient activity and social service:				
Salaries		36,158		25.060
Supplies		1,807		35,960 1,840
Total patient activity and social service	\$.	37,965	\$.	37,800

(Continued)

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME SCHEDULES OF OPERATING EXPENSES (CONTINUED) YEARS ENDED MARCH 31,

Consultants:		2022		<u>2021</u>
Pharmacy	\$	17,863	\$	17,307
Dietary	•	4,700	•	4,938
Medical records		1,200		1,100
Medicare		24,000		23,500
Medical records		960		480
Total consultants		48,723		47,325
Clinic:				
Salaries		-0-		59,641
Advertisement		-0-		24
Computer expense		-0-		1,723
Freight and postage		-0-		92
Insurance		18,529		19,398
Lab		-0-		28,025
Licenses and fees		-0-		825
Outside services		-0-		2,552
Repairs and maintenance		553		1,407
Supplies		630		4,732
Telephone		-0-		1,201
Utilities		1,626		2,384
Vaccines		-0-		184
Total clinic	\$	21,338	\$	122,188

(Continued)

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME SCHEDULES OF OPERATING EXPENSES (CONTINUED) YEARS ENDED MARCH 31,

	2022	2021
Medicare SNF and outpatient:		
Lab	\$ 5,289	\$ 10,836
Medical supplies and drugs charged to patients	46,578	63,929
Medical supplies non chargeable	1,588	974
Occupational therapy	123,094	165,332
Physical therapy	134,049	186,765
Radiology	6,850	11,420
Speech therapy	136,454	151,625
Total Medicare SNF and outpatient	453,902	590,881
Intergovernmental transfer - public nursing home UPL	307,567	230,267
Depreciation	130,298	192,490
Total operating expenses	\$ 4,963,037	\$ 5,522,290

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME SCHEDULE OF COMPENSATION, BENEFITS AND OTHER PAYMENTS TO AGENCY HEAD OR CHIEF EXECUTIVE OFFICER YEAR ENDED MARCH 31, 2022

Agency Head Name: Trevor Hair

Position: Administrator

Time Period: April 1, 2021 to March 31, 2022

Purpose	_	Amount
Salary	\$	98,719
Benefits - insurance		-0-
Benefits - retirement		2,962
Benefits - other		7,291
Car allowance		43
Vehicle provided by government		-0-
Per diem		-0-
Reimbursements		-0-
Travel		442
Registration fees		495
Conference travel		433
Continuing professional education fees		-0-
Housing		-0-
Unvouchered expenses		-0-
Special meals		-0-
	\$	110,385



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Retired 2015

INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER FINANCIAL Lester, CPA REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the Board of Commissioners Hospital Service District No. 3 Parish of Vermilion, State of Louisiana d/b/a Gueydan Memorial Guest Home Gueydan, Louisiana

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, the financial statements of the Hospital Service District No. 3 of the Parish of Vermilion, State of Louisiana, d/b/a Gueydan Memorial Guest Home (the "Hospital Service District") as of and for the years ended March 31, 2022 and 2021, and the related notes to the financial statements, which collectively comprise the Hospital Service District's basic financial statements as listed in the table of contents, and have issued our report thereon dated December 30, 2022.

Report on Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Hospital Service 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 opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Hospital Service District's internal control. Accordingly, we do not express an opinion on the effectiveness of the Hospital Service 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 entity'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 and therefore, material weaknesses or significant deficiencies may exist that were not identified. We identified certain deficiencies in internal control, described in the accompanying schedule of findings and responses as item 2022-001 that we consider to be a material weakness.

Board of Commissioners Hospital Service District No. 3 Parish of Vermilion, State of Louisiana d/b/a Gueydan Memorial Guest Home Page 2

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Hospital Service 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 instances of noncompliance or other matters that are required to be reported *under Government Auditing Standards* and which are described in the accompanying schedule of findings and responses as item 2022-002.

Hospital Service District's Response to Findings

Government Auditing Standards requires the auditor to perform limited procedures on the Hospital Service District's response to the findings identified in our audit and described in the accompanying schedule of findings and responses. The Hospital Service District's response was not subjected to the other auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on the response.

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 entity'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 entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Certified Public Accountants

Lester Miller à Wells

Lafayette, Louisiana

December 30, 2022

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME SCHEDULE OF FINDINGS AND RESPONSES YEAR ENDED MARCH 31, 2022

Section I. Summary of Auditors' Results

Report on Internal Control and Compliance Material to the Financial Statements

Type of auditors' opinion issued: unmodified	
Internal Control over financial reporting:	
Material weakness(es) identified?	⊠Yes □ No
 Control deficiency(ies) identified that we do not consider to be material weaknesses 	☐ Yes ⊠ None reported
Noncompliance material to financial statements noted	⊠ Yes □ No
Section II. Financial Statement Fine	<u>dings</u>
2022-001 - Segregation of Duties	
Condition: The Hospital Service District does not have adequate segregate receivable. During the course of our audit, we noted that the person in the responsibility to post cash receipts, issue credit memos, write-off a statements and has access to incoming checks for customers. A syst contemplates a segregation of duties so that no one individual handles completion. While we recognize the Hospital Service District may not procedures, it is important that the Hospital Service District be aware also included in the 2021 audit as item 2021-001.	n charge of accounts receivable has ccount balances, reconcile bank em of internal control procedures a transaction from its inception to its be large enough to permit such
Criteria: An effective system of internal control requires a proper segregation handles a transaction from its inception to its completion.	ation of duties so that no one individual
Cause: The Hospital Service District has a limited number of employees	within the accounting department.
Effect: Ineffective system of internal controls within the accounting function	on.
Recommendation: Keeping in mind the limited number of personnel to a Hospital Service District should continue to monitor assignment of dution duties and responsibility as possible, and management and the board financial information on a timely basis.	es to assure as much segregation of

Response: The Hospital Service District is aware of and evaluated this problem and concluded that it would not be cost beneficial or possible with the limited resources available to create a segregated accounts receivable environment. However, the Hospital Service District will continue to monitor this issue and the

board will review accounts receivable financial information on a timely basis.

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME SCHEDULE OF FINDINGS AND RESPONSES YEAR ENDED MARCH 31, 2022

Section II. Financial Statement Findings (Continued)

2022-002 - Securities Pledged

Condition: During the course of the audit, it was discovered that collateral pledged by the Hospital Service District's Fiscal Agent did not follow R.S. 39:1225. This statue provides that the depositing authority maintain ".....security.....at all times....equal to one hundred percent (100%) of the amount on deposit. ..." At March 31, 2022, the Fiscal Agent's pledged securities were inadequate by approximately \$18,000.

Criteria: Louisiana Revised Statute 33:1225 (C) requires that at all times, securities shall be pledged by designated depositories (banks) equal to one hundred percent of the amounts on deposit by the public entity. A depositing authority (District) may grant any bank a period not to exceed ten days from the date of any deposit in which to post the security required under LA R.S. 2929 (C).

Cause: Oversight.

Effect: Securities required for deposits did not comply with State law under LA R.S. 33:1225.

Recommendation: The Hospital Service District should periodically ensure that adequate collateral is pledged by the Fiscal Agent on deposited monies.

Response: The Hospital Service District will periodically check to ensure that the Hospital Service District's Fiscal Agent is adequately collateralizing amounts held for deposit.

Section III. Federal Award Findings and Questioned Costs

Not applicable.

Section IV. Management Letter

Not applicable.

HOSPITAL SERVICE DISTRICT NO. 3 PARISH OF VERMILION, STATE OF LOUISIANA D/B/A GUEYDAN MEMORIAL GUEST HOME SCHEDULE OF PRIOR YEAR FINDINGS YEAR ENDED MARCH 31, 2022

Section I. Internal Control and Compliance Material to the Financial Statements

2021-001 - Segregation of Duties

Recommendation: Keeping in mind the limited number of personnel to which duties can be assigned, the Hospital Service District should continue to monitor assignment of duties to assure as much segregation of duties and responsibility as possible, and the board should review accounts receivable financial information on a timely basis.

Current Status: This finding is repeated at 2022-001.

<u>2021-002</u> – <u>Overpayment to Board of Commissioners</u>

Recommendation: The Hospital Service District should approve a per diem in accordance with LA R.S. 46:1053, in which board members are paid no more than \$125 per board meeting. The Hospital District should also recover any amounts paid in excess of the allowable amount provided by LA R.S. 46:1053.

Current Status: Resolved.

2021-003 - Lack of Written Covid Pay Policy

Recommendation: Having written policies and procedures strengthen and provide a framework for present and future Hospital Service District employees to perform business operations necessary to provide accurate accountability of Hospital Service District assets and help prevent fraud. Sample best practice documents are available for reference on the Louisiana Legislative Auditor's website.

Current Status: Resolved.

2021-004 - Lack of Detailed Minutes

Recommendation: Having enough information in minutes to support matters decided, helps any reader of the minutes to determine the actions taken by the Board of Commissioners and if management properly followed through on Board decisions.

Current Status: Resolved.

Section II. Internal Control and Compliance Material to the Federal Awards

Not applicable.

Section III. Management Letter

Not applicable



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Independent Accountant's Report on Applying Agreed-Upon Procedures

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To the Board of Commissioners
Hospital Service District No. 3
of Parish of Vermilion, State of Louisiana
D/B/A Gueydan Memorial Guest Home
and the Louisiana Legislative Auditor

We have performed the procedures enumerated below, which were agreed to by the Board of Commissioners of Hospital Service District No. 3, Parish of Vermilion, State of Louisiana and the Louisiana Legislative Auditor (LLA) on the control and compliance (C/C) areas identified in the LLA's Statewide Agreed-Upon Procedures (SAUPs) for the fiscal period April 1, 2021 through March 31, 2022. The Hospital's management is responsible for those C/C areas identified in the SAUPs.

Hospital Service District No. 3, Parish of Vermilion, State of Louisiana has agreed to and acknowledged that the procedures performed are appropriate to meet the intended purpose of the engagement, which is to perform specified procedures on the C/C areas identified in LLA's SAUPs for the fiscal period April 1, 2021 through March 31, 2022. Additionally, LLA has agreed to and acknowledged that the procedures performed are appropriate for its purposes. This report may not be suitable for any other purpose. The procedures performed may not address all the items of interest to a user of this report and may not meet the needs of all users of this report and, as such, users are responsible for determining whether the procedures performed are appropriate for their purposes.

The procedures and associated findings are as follows:

Written Policies and Procedures

- Obtain and inspect the entity's written policies and procedures and observe that they address each of the following categories and subcategories (if applicable to public funds and the entity's operations):
 - a) Budgeting, including preparing, adopting, monitoring, and amending the budget
 - b) **Purchasing**, including (1) how purchases are initiated; (2) how vendors are added to the vendor list; (3) the preparation and approval process of purchase requisitions and purchase orders; (4) controls to ensure compliance with the public bid law; and (5) documentation required to be maintained for all bids and price quotes.
 - c) Disbursements, including processing, reviewing, and approving.

- d) Receipts/Collections, including receiving, recording, and preparing deposits. Also, policies and procedures should include management's actions to determine the completeness of all collections for each type of revenue or agency fund additions (e.g., periodic confirmation with outside parties, reconciliation to utility billing after cutoff procedures, reconciliation of traffic ticket number sequences, agency fund forfeiture monies confirmation).
- e) **Payroll/Personnel**, including (1) payroll processing, and (2) reviewing and approving time and attendance records, including leave and overtime worked, and (3) approval process for employee(s) rate of pay or approval and maintenance of rate schedules.
- f) **Contracting**, including (1) types of services requiring written contracts, (2) standard terms and conditions, (3) legal review, (4) approval process, and (5) monitoring process.
- g) Credit Cards (and debit cards, fuel cards, P-Cards, if applicable), including (1) how cards are to be controlled, (2) allowable business uses, (3) documentation requirements, (4) required approvers of statements, and (5) monitoring card usage (e.g., determining the reasonableness of fuel card purchases).
- h) *Travel and expense reimbursement*, including (1) allowable expenses, (2) dollar thresholds by category of expense, (3) documentation requirements, and (4) required approvers.
- i) *Ethics*, including (1) the prohibitions as defined in Louisiana Revised Statute 42:1111-1121, (2) actions to be taken if an ethics violation takes place, (3) system to monitor possible ethics violations, (4) requirement that all employees, including elected officials, annually attest through signature verification that they have read the entity's ethics policy.
- j) **Debt Service**, including (1) debt issuance approval, (2) continuing disclosure/EMMA reporting requirements, (3) debt reserve requirements, and (4) debt service requirements.
- k) Information Technology Disaster Recovery/Business Continuity, including (1) identification of critical data and frequency of data backups, (2) storage of backups in a separate physical location isolated from the network, (3) periodic testing/verification that backups can be restored, (4) use of antivirus software on all systems, (5) timely application of all available system and software patches/updates, and (6) identification of personnel, processes, and tools needed to recover operations after a critical event.
- l) **Sexual Harassment**, including R.S. 42:342-344 requirements for (1) agency responsibilities and prohibitions, (2) annual employee training, and (3) annual reporting.

Exceptions: The District's Sexual Harassment policy does not address the annual training and reporting requirements. The District did not have an adequate Informational Technology Disaster Recovery/Business Community policy.

Management's Response: Management is aware of the deficiency in the sexual harassment policy and is updating the policy to include the training and reporting requirements. Management is in the process of developing an appropriate Informational Technology Disaster Recovery and Business Continuity policy. Board or Finance Committee

- 2. Obtain and inspect the board/finance committee minutes for the fiscal period, as well as the board's enabling legislation, charter, bylaws, or equivalent document in effect during the fiscal period, and:
 - a) Observe that the board/finance committee met with a quorum at least monthly, or on a frequency in accordance with the board's enabling legislation, charter, bylaws, or other equivalent document.
 - b) For those entities reporting on the governmental accounting model, observe that the minutes referenced or included monthly budget-to-actual comparisons on the general fund, quarterly budget-to-actual, at a minimum, on proprietary funds, and semi-annual budget-to-actual, at a minimum, on all special revenue funds. Alternately, for those entities reporting on the non-profit accounting model, observe that the minutes referenced or included financial activity relating to public funds if those public funds comprised more than 10% of the entity's collections during the fiscal period.
 - c) For governmental entities, obtain the prior year audit report and observe the unassigned fund balance in the general fund. If the general fund had a negative ending unassigned fund balance in the prior year audit report, observe that the minutes for at least one meeting during the fiscal period referenced or included a formal plan to eliminate the negative unassigned fund balance in the general fund.

Exceptions: No exceptions were found as a result of these procedures.

Bank Reconciliations

- 3. Obtain a listing of entity bank accounts for the fiscal period from management and management's representation that the listing is complete. Ask management to identify the entity's main operating account. Select the entity's main operating account and randomly select 4 additional accounts (or all accounts if less than 5). Randomly select one month from the fiscal period, obtain and inspect the corresponding bank statement and reconciliation for each selected account, and observe that:
 - a) Bank reconciliations include evidence that they were prepared within 2 months of the related statement closing date (e.g., initialed and dated, electronically logged);
 - b) Bank reconciliations include evidence that a member of management/board member who does not handle cash, post ledgers, or issue checks has reviewed each bank reconciliation (e.g., initialed and dated, electronically logged); and
 - c) Management has documentation reflecting that it has researched reconciling items that have been outstanding for more than 12 months from the statement closing date, if applicable.

Exceptions: No exceptions were found as a result of these procedures.

Collections (excluding electronic funds transfers)

- 4. Obtain a listing of deposit sites for the fiscal period where deposits for cash/checks/money orders (cash) are prepared and management's representation that the listing is complete. Randomly select 5 deposit sites (or all deposit sites if less than 5).
- 5. For each deposit site selected, obtain a listing of collection locations and management's representation that the listing is complete. Randomly select one collection location for each deposit site (i.e., 5 collection locations for 5 deposit sites), obtain and inspect written policies and procedures relating to employee job duties (if no written policies or procedures, inquire of employees about their job duties) at each collection location, and observe that job duties are properly segregated at each collection location such that:
 - a) Employees that are responsible for cash collections do not share cash drawers/registers.
 - b) Each employee responsible for collecting cash is not responsible for preparing/making bank deposits, unless another employee/official is responsible for reconciling collection documentation (e.g., prenumbered receipts) to the deposit.
 - c) Each employee responsible for collecting cash is not responsible for posting collection entries to the general ledger or subsidiary ledgers, unless another employee/official is responsible for reconciling ledger postings to each other and to the deposit.
 - d) The employee(s) responsible for reconciling cash collections to the general ledger and/or subsidiary ledgers, by revenue source and/or agency fund additions are not responsible for collecting cash, unless another employee verifies the reconciliation.
- 6. Obtain from management a copy of the bond or insurance policy for theft covering all employees who have access to cash. Observe the bond or insurance policy for theft was enforced during the fiscal period.
- 7. Randomly select two deposit dates for each of the 5 bank accounts selected for procedure #3 under "Bank Reconciliations" above (select the next deposit date chronologically if no deposits were made on the dates randomly selected and randomly select a deposit if multiple deposits are made on the same day). Alternately, the practitioner may use a source document other than bank statements when selecting the deposit dates for testing, such as a cash collection log, daily revenue report, receipt book, etc. Obtain supporting documentation for each of the 10 deposits and:
 - a) Observe that receipts are sequentially pre-numbered.
 - b) Trace sequentially pre-numbered receipts, system reports, and other related collection documentation to the deposit slip.
 - c) Trace the deposit slip total to the actual deposit per the bank statement.
 - d) Observe that the deposit was made within one business day of receipt at the collection location (within one week if the depository is more than 10 miles from the collection location or the deposit is less than \$100 and the cash is stored securely in a locked safe or drawer).
 - e) Trace the actual deposit per the bank statement to the general ledger.

Exceptions: No exceptions were found as a result of these procedures.

Non-Payroll Disbursements (excluding card purchases/payments, travel reimbursements, and petty cash purchases)

- 8. Obtain a listing of locations that process payments for the fiscal period and management's representation that the listing is complete. Randomly select 5 locations (or all locations if less than 5).
- 9. For each location selected under #8 above, obtain a listing of those employees involved with non-payroll purchasing and payment functions. Obtain written policies and procedures relating to employee job duties (if the agency has no written policies and procedures, inquire of employees about their job duties), and observe that job duties are properly segregated such that:
 - a) At least two employees are involved in initiating a purchase request, approving a purchase, and placing an order/making the purchase.
 - b) At least two employees are involved in processing and approving payments to vendors.
 - c) The employee responsible for processing payments is prohibited from adding/modifying vendor files, unless another employee is responsible for periodically reviewing changes to vendor files.
 - d) Either the employee/official responsible for signing checks mails the payment or gives the signed checks to an employee to mail who is not responsible for processing payments.
- 10. For each location selected under #8 above, obtain the entity's non-payroll disbursement transaction population (excluding cards and travel reimbursements) and obtain management's representation that the population is complete. Randomly select 5 disbursements for each location, obtain supporting documentation for each transaction and:
 - a) Observe whether the disbursement matched the related original itemized invoice and supporting documentation indicates deliverables included on the invoice were received by the entity.
 - b) Observe that the disbursement documentation included evidence (e.g., initial/date, electronic logging) of segregation of duties tested under #9, as applicable.

Exceptions: The Accounts Payable Clerk is responsible for processing the payments and mails the checks after they are signed. The Accounts Payable Clerk is responsible for adding vendors and processing payments.

Management's Response: Management is aware of the segregation of duties deficiency due to limited staff. Dual signatures by the Administrator and a Board member are required on all payments. The Board of Commissioners also reviews all disbursements on a monthly basis.

Credit Cards/Debit Cards/Fuel Cards/P-Cards

- 11. Obtain from management a listing of all active credit cards, bank debit cards, fuel cards, and P-cards (cards) for the fiscal period, including the card numbers and the names of the persons who maintained possession of the cards. Obtain management's representation that the listing is complete.
- 12. Using the listing prepared by management, randomly select 5 cards (or all cards if less than 5) that were used during the fiscal period. Randomly select one monthly statement or combined statement for each card (for a debit card, randomly select one monthly bank statement), obtain supporting documentation, and:
 - a) Observe whether there is evidence that the monthly statement or combined statement and supporting documentation (e.g., original receipts for credit/debit card purchases, exception reports for excessive fuel card usage) was reviewed and approved, in writing (or electronically approved), by someone other than the authorized card holder. [Note: Requiring such approval may constrain the legal authority of certain public officials (e.g., mayor of a Lawrason Act municipality); these instances should not be reported.]
 - b) Observe that finance charges and late fees were not assessed on the selected statements.
- 13. Using the monthly statements or combined statements selected under #12 above, excluding fuel cards, randomly select 10 transactions (or all transactions if less than 10) from each statement, and obtain supporting documentation for the transactions (i.e., each card should have 10 transactions subject to testing). For each transaction, observe that it is supported by (1) an original itemized receipt that identifies precisely what was purchased, (2) written documentation of the business/public purpose, and (3) documentation of the individuals participating in meals (for meal charges only). For missing receipts, the practitioner should describe the nature of the transaction and note whether management had a compensating control to address missing receipts, such as a "missing receipt statement" that is subject to increased scrutiny.

Exceptions: No exceptions were found as a result of these procedures.

Travel and Travel-Related Expense Reimbursements (excluding card transactions)

- 14. Obtain from management a listing of all travel and travel-related expense reimbursements during the fiscal period and management's representation that the listing or general ledger is complete. Randomly select 5 reimbursements, obtain the related expense reimbursement forms/prepaid expense documentation of each selected reimbursement, as well as the supporting documentation. For each of the 5 reimbursements selected:
 - a) If reimbursed using a per diem, observe the approved reimbursement rate is no more than those rates established either by the State of Louisiana or the U.S. General Services Administration (<u>www.gsa.gov</u>).

- b) If reimbursed using actual costs, observe that the reimbursement is supported by an original itemized receipt that identifies precisely what was purchased.
- c) Observe that each reimbursement is supported by documentation of the business/public purpose (for meal charges, observe that the documentation includes the names of those individuals participating) and other documentation required by written policy (procedure #1h).
- d) Observe that each reimbursement was reviewed and approved, in writing, by someone other than the person receiving reimbursement.

Exceptions: No exceptions were found as a result of these procedures.

Contracts

- 15. Obtain from management a listing of all agreements/contracts for professional services, materials and supplies, leases, and construction activities that were initiated or renewed during the fiscal period. Alternately, the practitioner may use an equivalent selection source, such as an active vendor list. Obtain management's representation that the listing is complete. Randomly select 5 contracts (or all contracts if less than 5) from the listing, excluding the practitioner's contract, and:
 - a) Observe that the contract was bid in accordance with the Louisiana Public Bid Law (e.g., solicited quotes or bids, advertised), if required by law.
 - b) Observe that the contract was approved by the governing body/board, if required by policy or law (e.g., Lawrason Act, Home Rule Charter).
 - c) If the contract was amended (e.g., change order), observe that the original contract terms provided for such an amendment and that amendments were made in compliance with the contract terms (e.g., if approval is required for any amendment, was approval documented).
 - d) Randomly select one payment from the fiscal period for each of the 5 contracts, obtain the supporting invoice, agree the invoice to the contract terms, and observe that the invoice and related payment agreed to the terms and conditions of the contract.

Exceptions: No exceptions were found as a result of these procedures.

Payroll and Personnel

- 16. Obtain a listing of employees/elected officials employed during the fiscal period and management's representation that the listing is complete. Randomly select 5 employees/officials, obtain related paid salaries and personnel files, and agree paid salaries to authorized salaries/pay rates in the personnel files.
- 17. Randomly select one pay period during the fiscal period. For the 5 employees/officials selected under #16 above, obtain attendance records and leave documentation for the pay period, and:

- a) Observe that all selected employees/officials documented their daily attendance and leave (e.g., vacation, sick, compensatory). (Note: Generally, an elected official is not eligible to earn leave and does not document his/her attendance and leave. However, if the elected official is earning leave according to policy and/or contract, the official should document his/her daily attendance and leave.)
- b) Observe that supervisors approved the attendance and leave of the selected employees/officials.
- c) Observe that any leave accrued or taken during the pay period is reflected in the entity's cumulative leave records.
- d) Observe the rate paid to the employees or officials agree to the authorized salary/pay rate found within the personnel file.
- 18. Obtain a listing of those employees/officials that received termination payments during the fiscal period and management's representation that the list is complete. Randomly select two employees/officials, obtain related documentation of the hours and pay rates used in management's termination payment calculations, agree the hours to the employee/officials' cumulative leave records, and agree the pay rates to the employee/officials authorized pay rates in the employee/officials' personnel files.
- 19. Obtain management's representation that employer and employee portions of payroll taxes, retirement contributions, health insurance premiums, and workers' compensation premiums have been paid, and associated forms have been filed, by required deadlines.

Exceptions: No exceptions were found as a result of these procedures.

Ethics

- 20. Using the 5 randomly selected employees/officials from procedure #16 under "Payroll and Personnel" above, obtain ethics documentation from management, and:
 - a) Observe that the documentation demonstrates each employee/official completed one hour of ethics training during the fiscal period.
 - b) Observe whether the entity maintains documentation which demonstrates each employee and official were notified of any changes to the entity's ethics policy during the fiscal period, as applicable.

Exceptions: No exceptions were found as a result of these procedures.

Debt Service

21. Obtain a listing of bonds/notes and other debt instruments issued during the fiscal period and management's representation that the listing is complete. Select all debt instruments on the listing, obtain

supporting documentation, and observe that State Bond Commission approval was obtained for each debt instrument issued.

22. Obtain a listing of bonds/notes outstanding at the end of the fiscal period and management's representation that the listing is complete. Randomly select one bond/note, inspect debt covenants, obtain supporting documentation for the reserve balance and payments, and agree actual reserve balances and payments to those required by debt covenants (including contingency funds, short-lived asset funds, or other funds required by the debt covenants).

Exceptions: No exceptions were found as a result of these procedures.

Fraud Notice

- 23. Obtain a listing of misappropriations of public funds and assets during the fiscal period and management's representation that the listing is complete. Select all misappropriations on the listing, obtain supporting documentation, and observe that the entity reported the misappropriation(s) to the legislative auditor and the district attorney of the parish in which the entity is domiciled.
- 24. Observe that the entity has posted on its premises and website, the notice required by R.S. 24:523.1 concerning the reporting of misappropriation, fraud, waste, or abuse of public funds

Exceptions: No exceptions were found as a result of these procedures.

Information Technology Disaster Recovery/Business Continuity

- 25. Perform the following procedures, verbally discuss the results with management, and report "We performed the procedure and discussed the results with management."
 - a) Obtain and inspect the entity's most recent documentation that it has backed up its critical data (if no written documentation, inquire of personnel responsible for backing up critical data) and observe that such backup occurred within the past week. If backups are stored on a physical medium (e.g., tapes, CDs), observe evidence that backups are encrypted before being transported.
 - b) Obtain and inspect the entity's most recent documentation that it has tested/verified that its backups can be restored (if no written documentation, inquire of personnel responsible for testing/verifying backup restoration) and observe evidence that the test/verification was successfully performed within the past 3 months.
 - c) Obtain a listing of the entity's computers currently in use and their related locations, and management's representation that the listing is complete. Randomly select 5 computers and observe while management demonstrates that the selected computers have current and active antivirus software and

that the operating system and accounting system software in use are currently supported by the vendor.

Exceptions: We performed the procedure and discussed the results with management.

Sexual Harassment

26. Using the 5 randomly selected employees/officials from procedure #16 under "Payroll and Personnel" above, obtain sexual harassment training documentation from management, and observe the documentation demonstrates each employee/official completed at least one hour of sexual harassment training during the calendar year.

Exceptions: Employees did not complete the required one hour of sexual harassment training.

Management's Response: Management is aware of the deficiency and is now requiring all employees complete the required one-hour sexual harassment training.

- 27. Observe the entity has posted its sexual harassment policy and complaint procedure on its website (or in a conspicuous location on the entity's premises if the entity does not have a website).
- 28. Obtain the entity's annual sexual harassment report for the current fiscal period, observe that the report was dated on or before February 1, and observe it includes the applicable requirements of R.S. 42:344:
 - a) Number and percentage of public servants in the agency who have completed the training requirements;
 - b) Number of sexual harassment complaints received by the agency;
 - c) Number of complaints which resulted in a finding that sexual harassment occurred;
 - d) Number of complaints in which the finding of sexual harassment resulted in discipline or corrective action; and
 - e) Amount of time it took to resolve each complaint.

Exceptions: Management did not have a report on the annual sexual harassment information. Management will ensure that proper reporting is done in the future.

We were engaged by Hospital Service District No. 3, Parish of Vermilion, State of Louisiana to perform this agreed-upon procedures engagement and conducted our engagement in accordance with attestation standards established by the American Institute of Certified Public Accountants and applicable standards of Government Auditing Standards. We were not engaged to and did not conduct an examination or review engagement, the objective of which would be the expression of an opinion or conclusion, respectively, on those C/C areas

identified in the SAUPs. Accordingly, we do not express such an opinion or conclusion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

We are required to be independent of Hospital Service District No. 3, Parish of Vermilion, State of Louisiana and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements related to our agreed-upon procedures engagement.

This report is intended solely to describe the scope of testing performed on those C/C areas identified in the SAUPs, and the result of that testing, and not to provide an opinion on control or compliance. Accordingly, this report is not suitable for any other purpose. Under Louisiana Revised Statute 24:513, this report is distributed by the LLA as a public document.

Lester, Miller, and Wells

Certified Public Accountants

Lester, Miller = Wells

Lafayette, Louisiana

December 30, 2022