TRI-WARD GENERAL HOSPITAL AND CLINIC FINANCIAL STATEMENTS

AND

INDEPENDENT AUDITORS' REPORT FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

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report is a public document. A copy of the report has been submitted to the audited, or reviewed, entity and other appropriate public officials. The report is available for public inspection at the Baton Rouge office of the Legislative Auditor and, where appropriate, at the office of the parish clerk of court. Release Date 8/7/96	

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INDEPENDENT AUDITORS' REPORT

Board of Commissioners Tri-Ward General Hospital and Clinic Bernice, Louisiana

We have audited the accompanying general purpose financial statements of Tri-Ward General Hospital and Clinic as of December 31, 1995, 1994 and 1993, listed in the foregoing table of contents. These financial statements are the responsibility of the District's management. Our responsibility is to express an opinion on these financial statements based on our audits.

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

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Tri-Ward General Hospital and Clinic as of December 31, 1995, 1994 and 1993, and the results of its operations and cash flow for the years then ended, in conformity with generally accepted accounting principles.

In accordance with <u>Government Auditing Standards</u>, we have also issued a report dated April 22, 1996 on our consideration of Tri-Ward General Hospital and Clinic's internal control structure and a report dated April 22, 1996 on its compliance with laws and regulations.

Our audits were made for the purpose of forming an opinion on the general purpose financial statements, taken as a whole. The supplementary information listed in the table of contents is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements, and in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Board of Commissioners Tri-Ward General Hospital and Clinic Page Two

The accompanying financial statements have been prepared assuming Tri-Ward General Hospital and Clinic will continue as a going concern. As discussed in Note 18 to the financial statements, the District's significant operating losses raise substantial doubt about its ability to continue as a going concern. These losses sustained are due to the District's inability to recruit and retain adequate physician coverage. The financial statements do not include any adjustments that might result from the outcome of this uncertainty.

Certified Public Accountants

Casley, Lesfu = Wells

April 22, 1996

DECEMBER 31, 1995, 1994 AND 1993

ASSETS	<u>1995</u>	<u>1994</u>	<u>1993</u>
Current Assets Cash and cash equivalents Investments (Note 4) Assets whose use is limited - required	\$ 281,320 36,024	\$ 245,113 14,834	\$ 68,064 14,834
for current liabilities (Note 7) Accounts receivable less estimated	-0-	1,736	8,293
uncollectibles (Note 5) Inventory Prepaid expenses	257,534 89,986 47,357	255,508 71,710 35,332	541,054 54,661 62,868
Total Current Assets	712,221	624,233	749,774
Property, plant and equipment, less accumulated depreciation (Note 6)	471,165	421,824	422,726
Total Assets	\$ <u>1,183,386</u>	\$ <u>1,046,057</u>	\$ <u>1,172,500</u>
LIABILITIES AND FUND BALANCE			
Current Liabilities Accounts payable Accrued expenses and withholdings	\$ 41,519	\$ 71,528	\$ 120,982
payable (Note 8) Current installments of capital leases Current installments of notes and bonds	85,686 [°] -0-	79,675 -0-	86,091 3,071
payable Unearned physician's rent	1,284 5,533	1,197 -0-	32,116 - <u>0-</u>
Total Current Liabilities	134,022	<u>152,400</u>	242,260
Long-Term Debt Notes and bonds payable (Note 11)	10,189	11,473	12,670
Total Long-Term Debt	10,189	11,473	12,670
Commitments and contingencies (Note 15)			
Fund balance	1,039,175	882,184	917,570
Total Liabilities and Fund Balance	\$ <u>1,183,386</u>	\$ <u>1,046,057</u>	\$ <u>1,172,500</u>

HOSPITAL SERVICE DISTRICT WARDS 3, 4 AND 10 OF THE PARISH OF UNION, STATE OF LOUISIANA TRI-WARD GENERAL HOSPITAL AND CLINIC HOSPITAL ENTERPRISE FUND STATEMENTS OF REVENUES AND EXPENSES

FOR THE YEAR ENDED DECEMBER 31, 1995, 1994 AND 1993

	<u>1995</u>	1994	<u>1993</u>
Net patient service revenue	\$ 1,515,878	\$ 1,395,341	\$ 1,650,344
Other operating revenue	191,758	102,093	<u>8,651</u>
Total operating revenue	1,707,636	1,497,434	1,658,995
Operating expenses			
Nursing services	442,575	387,479	417,891
Other professional services	793,355	708,591	808,759
General services	132,062	114,735	137,446
Fiscal and administrative	214,610	221,770	278,822
Insurance	41,226	42,382	59,970
Employee benefits	173,612	197,120	207,175
Interest	905	1,251	3,810
Depreciation	63,450	55,214	54,703
Provision for bad debts	62,239	39,989	<u>58,010</u>
Total operating expenses	1,924,034	1,768,531	2,026,586
Loss from operations	(216,398)	(271,097)	(367,591)
Nonoperating gains (losses)			
Interest income	14,192	6,532	10,113
Grant revenue (Note 16)	200,000	75,000	100,000
Property tax revenue (Note 7)	141,167	154,179	162,347
Loss on equipment disposal	<u>(3,160</u>)	<u>-0-</u>	<u>-0-</u>
Total nonoperating gains	352,199	235,711	272,460
Excess revenues (expenses)	\$ <u>135,801</u>	\$ <u>(35,386</u>)	\$ <u>(95,131</u>)

CHANGES IN FUND BALANCE:

Balance, December 31, 1992	\$ 1,012,701
Expenses and losses in excess of revenues and gains for the year ended December 31, 1993	<u>(95,131</u>)
Balance, December 31, 1993	917,570
Expenses and losses in excess of revenues and gains for the year ended December 31, 1994	(35,386)
Balance, December 31, 1994	882,184
Revenues and gains in excess of expenses and losses for the year ended December 31, 1995	135,801
Unrealized gain on securities Balance, December 31, 1995	21,190 \$ <u>1,039,175</u>
COMPOSITION OF FUND BALANCE AT DECEMBER 31, 1995:	
Accumulated excess of revenues over expenses Total Fund Balance	\$ 1,039,175 \$ 1,039,175

FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

		<u> 1995</u>		<u>1994</u>		<u>1993</u>
Cash Flows from Operating Activities:						
Profit (loss) from operations	\$	(216,398)	\$	(271,097)	\$	(367,591)
A 1 2 Anno	·		·	, , ,	•	
Adjustments to reconcile net income to net cash provided by operations:						
Noncash items included in net income						
Depreciation		63,450		55,214		54,703
Change in current assets - (increase)						
decrease Accounts receivable (net)		(2,026)		285,546		(214,770)
Inventory		(18,276)		(17,049)		4,404
Prepaid expenses		(12,025)		27,536		(18,505)
Change in current liabilities -						•
increase (decrease) Accounts payable		(30,000)		(40 454)		E2 /70
Accrued expenses and withholdings		(30,009)		(49,454)		53,470
payable		6,011		(6,416)		7,989
Unearned physician's rent		5,533		-0-		-0-
Interest expense		905		1,251		<u>3,810</u>
Net cash provided (used) by operating						
activities		(202,835)		25,531		(476,490)
C. J. Diese form T						
Cash Flows from Investing Activities: Proceeds from short-term investment		-0-		-0-		100 000
Investment income		14,192		6,532		100,000 10,113
Cash invested in assets whose use is		•		•		_ · , _ · ·
limited		1,736		6,557		<u>2,736</u>
Net cash provided by investing						
activities		15,928		13,089		112,849
O-1 121						
Cash Flows from Non-capital Financing Activity:						
Operating grants received		200,000		75,000		100,000
Net cash provided by non-capital		000 000		75 000		100 000
financing activity		<u>200,000</u>		75,000		100,000
Cash Flows from Capital and Related						
Financing Activities:						
Acquisition of capital assets Payments on long-term debt		(115,951) (1,197)		(54,312)		(8,403)
Payments on capital lease obligations		-0-		(32,116) (3,071)		(30,041) (14,281)
Interest expenses on long-term debt		(905)		(1,251)		(3,810)
Property tax receipts		141 167		<u>154,179</u>		162,347
Net cash used by capital and related						
financing activities	\$	23,114	\$	63,429	\$	105,812
-			- —		. —	

STATEMENTS OF CASH FLOWS (Continued)
FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

	<u> 1995</u>	<u>1994</u>	<u>1993</u>
Net increase (decrease) in cash and cash equivalents	\$ 36,207	\$ 177,049	\$ (157,829)
Cash and cash equivalents at beginning of period	245,113	68,064	225,893
Cash and cash equivalents at end of period	\$ <u>281,320</u>	\$ <u>245,113</u>	\$ 68,064
Supplemental Disclosures of Cash Information:			
Cash paid during the period for: Interest	\$905	\$ <u>1,826</u>	\$4,348

Unrealized gains of \$21,190 were recorded to investments and fund balance.

NOTE 1 - ORGANIZATION AND OPERATIONS

Legal Organization

Hospital Service District Wards 3, 4 and 10 of the Parish of Union, State of Louisiana (referred to as "the District") was created by an ordinance of the Union Parish Police Jury on July 11, 1967, and is referred to as Tri-Ward General Hospital and Clinic.

As governing authority for the parish, for reporting purposes, the Union Parish Police Jury is the financial reporting entity for Union Parish. The financial reporting entity consists of (a) the primary government (police jury), (b) organizations for which the primary government is financially accountable, and (c) other organizations for which the nature and significance of their relationship with the primary government are such that exclusion would cause the reporting entity's financial statements to be misleading or incomplete.

Governmental Accounting Standards Board Statement No. 14 established criteria for determining which component units should be considered part of the Union Parish Police Jury for financial reporting purposes. The basic criterion for including a potential component unit within the reporting entity is financial accountability.

Because the police jury appoints all commissioners of the Union Parish Hospital Service District No. 1, the District has been determined to be a component unit of the Union Parish Police Jury, the financial reporting entity. The accompanying financial statements present information only on the funds maintained by the District and do not present information on the police jury, the general governmental services provided by that governmental unit or the other governmental units that comprise the financial reporting entity.

Reporting Entity

The accompanying financial statements include the accounts and transactions of Hospital Service District Wards 3, 4 and 10 of Union Parish, which includes the activities of Tri-Ward General Hospital and Clinic.

Nature of Business

The District provides outpatient, emergency, and inpatient acute hospital services.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

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 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Method of Accounting

The District uses the accrual method of accounting. Revenue is reported when earned, net of the provision for contractual adjustments based upon each payor's agreement with the District. Hospital accounting and reporting procedures conform to the requirements of Louisiana Revised Statute 24:514 and to the guide set forth in the Louisiana Governmental Audit Guide, the AICPA Audits of Providers of Health Care Services, published by the American Institute of Certified Public Accountants, and standards set by the Governmental Accounting Standards Board (GASB), which is the accepted standard-setting body for establishing governmental accounting and financial reporting principles.

Income Taxes

The entity is a political subdivision and exempt from taxation.

Credit Risk

The District provides medical care primarily to Union Parish residents and grants credit to patients, substantially all of whom are local residents.

The Hospital's estimate of collectibility is based on evaluation of historical collections compared to gross charges and an analysis of aged accounts receivable to establish an allowance for uncollectible accounts.

Significant Concentration of Economic Dependence

The District has an economic dependence on a small number of staff physicians. Two physicians admit over 90% of the Hospital's patients.

Net Patient Service Revenue

Net patient service revenue is reported at the 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.

Inventory

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

Financial Statement Presentation

Certain amounts in the 1993 and 1994 financial statements have been restated to conform to the classification adopted in 1995.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Property, Plant and Equipment

Property, plant and equipment is recorded at cost for purchased assets or, if applicable, at fair market value on the date of donation. The District uses straight-line depreciation for financial reporting and third party reimbursement. The following estimated useful lives are generally used.

Buildings			15	to	40	years
Machinery	and	Equipment	5	to	20	years
Furniture	and	Fixtures	5	to	15	years

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

The cost of assets retired or otherwise disposed of and related accumulated depreciation are eliminated from the accounts in the year of disposal. Gains or losses resulting from property disposals are credited or charged to operations currently.

NOTE 3 - CASH AND CASH EQUIVALENTS

Cash and cash equivalents consist primarily of deposits in checking, money market and certificates of deposits with original maturities of 90 days or less. The following is a summary of cash and cash equivalents:

	<u>1995</u>		<u>1994</u>	<u> 1993</u>	
Petty cash	\$ 305	\$	305	\$	305
Checking	19,533		46,988	-	6,712
Investment account	 <u> 261,482</u>	_	197,820	-	61,047
Total	\$ 281,320	\$	245,113	\$	68,064

One hundred thousand dollars of the above amount is covered by federal depository insurance. The remaining balances on December 31, 1995, 1994 and 1993, with the exception of petty cash, are covered by collateral held by the pledging financial institution's trust departments in the District's name.

NOTE 4 - INVESTMENTS

The District considers certificates of deposit with original maturities in excess of 90 days to be temporary cash investments.

Investments in marketable equity securities at December 31 were as follows:

	<u>Shares</u>		<u> 1995</u>	٠	<u> 1994</u>		1993
Consolidated Natural Gas	11	\$	499	\$	391	\$	517
Exxon Corporation	200		16,100		12,150		12,625
Warner Lambert	200		19,425		<u> 15,400</u>	•	13,500
Total Market Value			36,024		27,941		26,642
Less: Carrying Value, at Cost			(14,834)		(14,834)	·	(14,834)
Unrealized Gain		\$	21,190	\$	13,107	\$	11,808

As of January 1, 1995, the District recorded these registered securities under the provisions of the FASB Statement No. 115. These securities are classified as available for sale and are therefore recorded at fair value and unrealized gains are recognized as a component of fund equity. Fair values are based upon quoted market prices.

NOTE 5 - ACCOUNTS RECEIVABLE

A summary of accounts receivable is preser	ted 1	below: <u>1995</u>		<u>1994</u>		<u>1993</u>
Patients Estimated Medicare and Medicaid program	\$	396,648	\$	305,982	\$	263,194
settlements		8,886 405,534		87,526 393,508	_	406,384 669,578
Estimated uncollectibles		(148,000)		(138,000)	_	(128,524)
Total	\$	257,534	\$ <u></u>	255,508	\$_	541,054

The District generates a substantial portion of its charges from the Medicare and Medicaid programs at discounted rates. A summary of gross Medicare and Medicaid charges for the years ended December 31, 1995, 1994 and 1993 follows:

	<u>1995</u>	<u>1995</u> <u>1994</u>		
Medicare patients Medicaid patients	\$ 1,007,090 <u>102,225</u>	\$ 1,040,017 107,809	\$ 1,031,393 <u>98,451</u>	
Total	\$ <u>1,109,315</u>	\$ <u>1,147,826</u>	\$ <u>1,129,844</u>	
Percent of all patients	<u>60</u> %	<u>73</u> %	<u>65</u> %	

NOTE 5 - ACCOUNTS RECEIVABLE

Since the District serves such a high percentage of Medicare patients, it qualifies for special Medicare payments as a "Medicare Dependent Hospital". Effective October 1, 1994, payments under this provision of the law have been eliminated. Amounts included in income for each reporting year are as follows:

	<u>1995</u>			<u>1994</u>	<u> 1993</u>
Medicare Dependent Payments	\$ <u></u>	<u>-0-</u>	\$	98,273	\$ 212,461

NOTE 6 - PROPERTY, PLANT AND EQUIPMENT

The following is a summary of property, plant and equipment and related accumulated depreciation for the year ended December 31, 1995:

	D 1 01	ASSET	D 1 11	
	December 31, 1994	Additions	Deletions	December 31, 1995
Land Land improvements Buildings and rent	\$ 23,454 3,467	\$ -0- -0-	\$ -0- -0-	\$ 23,454 3,467
property Fixed equipment Major moveable equipment Minor equipment	395,295 244,322 539,330 1,177	21,922 -0- 94,029 -0-	-0- -0- 56,537 -0-	417,217 244,322 576,822 1,177
Total	\$ <u>1,207,045</u>	\$ <u>115,951</u>	\$ <u>56,537</u>	\$ <u>1,266,459</u>
		ACCUMULATED	DEPRECIATION	
	December 31, 1994	<u>Additions</u>	<u>Deletions</u>	December 31, 1995
Land improvements Buildings and rent	\$ 1,834	\$ 115	\$ -0-	\$ 1,949
property Fixed equipment Major moveable equipment	228,252 159,026 <u>396,109</u>	17,396 10,718 <u>35,221</u>	-0- -0- <u>53,377</u>	245,648 169,744 <u>377,953</u>
Total	\$ <u>785,221</u>	\$ <u>63,450</u>	\$ <u>53,377</u>	\$ <u>795,294</u>

NOTE 6 - PROPERTY, PLANT AND EQUIPMENT (Continued)

The following is a summary of property, plant and equipment and related accumulated depreciation for the year ended December 31, 1994:

	T. 1 0.1	n 1 01				
	December 31, 1993	Additions	Deletions	December 31, 1994		
Land Land improvements Buildings and rent	\$ 23,454 3,467	\$ -0- -0-	\$ -0- -0-	\$ 23,454 3,467		
property Fixed equipment Major moveable equipment Minor equipment	371,616 241,601 511,418 	23,679 2,721 27,912 	-0- -0- -0-	395,295 244,322 539,330 1,177		
Total	\$ <u>1,152,733</u>	\$ <u>54,312</u>	\$ <u>-0-</u>	\$ <u>1,207,045</u>		
		ACCUMULATED DEPRECIATION				
	December 31, 1993	Additions	<u>Deletions</u>	December 31, 1994		
Land improvements	\$ 1,719	\$ 115	\$ -0-	\$ 1,834		
Buildings and rent property Fixed equipment Major moveable equipment	214,209 148,178 <u>365,901</u>	14,043 10,848 30,208	-0- -0-	228,252 159,026 396,109		
Total	\$ <u>730,007</u>	\$ 55,214	\$O-	\$ 785,221		

The following is a summary of property, plant and equipment and related accumulated depreciation for the year ended December 31, 1993:

	D = =	b 21	ASSET COST				D 1 22		
	December 31, 1992		Ado	<u>ditions</u>	<u>Del</u>	etions	<u>—</u>	cember 31, 1993	
Land	\$	23,454	\$	-0-	\$	- 0 -	\$	23,454	
Land improvements Buildings and rent		3,467		-0-		- 0 -		3,467	
property		366,273		5,343		-0-		371,616	
Fixed equipment		240,741		860		- O -		241,601	
Major moveable equipment		509,218		2,200		-0-		511,418	
Minor equipment	-	1,177		-0-		-0-	•	1,177	
Total	\$	<u>1,144,330</u>	\$ <u></u>	8,403	\$	-0-	\$_	1,152,733	

NOTE 6 - PROPERTY, PLANT AND EQUIPMENT (Continued)

	December 31, 1992		ACCUMULATED DEPRECIATION				D 1 01		
			•		<u>ditions</u>	<u>Deletions</u>		December 31, 1993	
Land improvements Buildings and rent	\$	1,604	\$	115	\$	-0-	\$	1,719	
property Fixed equipment Major moveable equipment		201,048 137,398 335,254		13,161 10,780 30,647		-0- -0-		214,209 148,178 365,901	
Total	\$ <u></u>	675,304	\$ <u></u>	54,703	\$	-0-	\$	730,007	

Property, plant and equipment includes fully depreciated assets which are still in service in the amount of \$298,678 for 1995, \$346,515 for 1994 and \$337,831 for 1993.

NOTE 7 - ASSETS WHOSE USE IS LIMITED

Assets whose use is limited consist of property taxes that have been collected for (a) retirement of bonds and (b) maintenance and operation of the facility. The taxes are collected by the Union Parish Sheriff's office for an 8% collection fee. Property tax notices are mailed by November 15 each year and are due by December 31. The tax millage for the retirement of bonds is for 2.80 mills, which expires in 1994. The special maintenance and operation millage is a ten-year tax assessed on all taxable property within the District at the rate of 10.45 mills. The 5.11 mills expires December 31, 1995. The 5.34 mills, which expired in 1991, has been renewed for the period 1992 through 2001.

NOTE 8 - ACCRUED EXPENSES AND WITHHOLDINGS PAYABLE

Accrued expenses and withholdings payable at December 31, 1995, 1994 and 1993, consist of the following:

	<u> 1995</u>	<u>1994</u>		<u>1993</u>
Accrued payroll taxes State and federal income taxes payable Social security tax payable State unemployment tax payable Accrued vacation, holiday & sick Accrued payroll Accrued interest payable	\$ 1,757 8,215 6,173 1,508 45,038 22,995 -0-	\$ 1,250 6,628 5,230 4,849 43,409 18,309 -0-	\$ _	1,038 7,801 4,551 4,724 51,192 16,210 575
Total	\$ <u>85,686</u>	\$ 79,675	\$_	86,091

NOTE 9 - COMPENSATED ABSENCES

Employees of the District are entitled to paid vacation and sick days depending on job classification, length of service and other factors. It is impracticable to estimate the amount of accrued compensation for future unvested sick days and, accordingly, no liability has been recorded in the accompanying financial statements. However, vested vacation and paid days off have been recorded as a liability in the accompanying financial statements at employee earning rates in effect at the balance sheet date.

NOTE 10 - CAPITAL LEASES

The District leases equipment under capital leases expiring in various years through 1994. The assets and liabilities under capital leases are recorded at the lower of the present value of the minimum lease payments or fair value of the asset. The assets are depreciated over their estimated productive lives. Depreciation of assets under capital leases is included in depreciation expense.

The following is a summary of property held under capital leases:

	<u>1995</u>		<u>1994</u>		2	1993
Chemical analyzer	\$	-0-	\$	-0-	\$	50,150
Less: Accumulated depreciation	<u></u>	-0-		-0-		<u>(27,873</u>)
Tota1	\$	<u>-0-</u>	\$	<u>-0-</u>	\$	<u>22,277</u>

The capital leases are paid in full and therefore there are no minimum future lease payments under capital leases as of December 31, 1995.

NOTE 11 - NOTES AND BONDS PAYABLE

The following is a summary of notes and bonds payable at December 31, 1995, 1994 and 1993:

<u> 1995</u>		<u> 1994</u>		1993
\$ 11,473	\$	12,670	\$	13,786
 -0-		<u>-0-</u>		31,000
\$ 11,473 (1,284) 10,189	\$	12,670 (1,197) 11,473	\$	44,786 (32,116) 12,670
\$	\$ 11,473	\$ 11,473 \$ \\ \[\frac{-0-}{11,473} \\ \((\frac{1}{1,284}\)\)	\$ 11,473 \$ 12,670 -0- 11,473 12,670 (1,284) (1,197)	\$ 11,473 \$ 12,670 \$ \\ \[\begin{array}{c ccccccccccccccccccccccccccccccccccc

A table of total debt service requirements follows:

FISCAL YEAR	<u>Principal</u>	Interest	<u>Total</u>
1996	\$ 1,284	\$ 762	\$ 2,046
1997	1,376	670	2,046
1998	1,476	570	2,046
1999	1,582	464	2,046
2000	1,697	349	2,046
2001	1,820	226	2,046
2002	1,951	95	2,046
2003	287	2	289
	\$11,473	\$ 3,138	\$ <u>14,611</u>

NOTE 12 - NET PATIENT SERVICE REVENUE

The 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 - Inpatient acute care services rendered to Medicare program beneficiaries are paid at prospectively determined rates per discharge. These rates vary according to a patient classification system that is based on clinical, diagnostic and other factors. Certain outpatient services related to Medicare beneficiaries are paid based on a cost reimbursement methodology. The District is reimbursed for cost reimbursable items at a tentative rate with final settlement determined after submission of annual cost reports by the District and audits thereof by the Medicare fiscal intermediary. The District's classification of patients under the Medicare program and the

NOTE 12 - NET PATIENT SERVICE REVENUE (Continued)

appropriateness of their admission are subject to an independent review by a peer review organization under contract with the District. The District's Medicare cost reports have been audited by the Medicare fiscal intermediary through December 31, 1994.

Medicaid - Until July 1, 1994, inpatient services were reimbursed based upon the lesser of reasonable costs (subject to certain limits) or charges to the patient. As of July 1, 1994, the program reimbursement is based upon a prospectively determined per diem rate. Certain outpatient services rendered to Medicaid program beneficiaries are reimbursed under a cost reimbursement methodology. The District is reimbursed at a tentative rate with final settlement determined after submission of annual cost reports by the District and audits thereof by the Medicaid fiscal intermediary. The District's Medicaid cost reports have been audited by the Medicaid fiscal intermediary through December 31, 1994.

The District has entered into payment agreements with certain commercial insurance carriers and preferred provider organizations. The basis for payment under these agreements include discounts from established charges and prospectively determined daily rates.

NOTE 13 - PROFESSIONAL LIABILITY RISK

The District participates in the Louisiana Patient's Compensation Fund ("PCF") established by the State of Louisiana to provide medical professional liability coverage to health care providers. The fund provides for \$400,000 in coverage per occurrence above the first \$100,000 per occurrence for which the District is at risk. The fund places no limitation on the number of occurrences covered. In connection with the establishment of the Patient's Compensation Fund, the State of Louisiana enacted legislation limiting the amount of settlement for professional liability to \$500,000 per occurrence. The constitutionality of this legislation has not been tested by the courts, although the Louisiana Supreme Court has decided that this limit does not apply in cases of strict liability.

The District's membership in the Louisiana Hospital Association Trust Fund provides additional coverage for professional medical malpractice liability and worker's compensation. The trust fund bills members in advance, based upon an estimate of their exposure. At policy year-end, premiums are redetermined utilizing actual losses of the District. The trust fund presumes to be a "Grantor Trust" and, accordingly, income and expenses are prorated to member hospitals. The District has included these allocations of equity in the trust in its financial statements as prepaid insurance and insurance expense or a reduction thereof. Any return of equity reduces the prepaid balance.

NOTE 14 - BUSINESS AND CREDIT CONCENTRATIONS

The District grants credit to patients, substantially all of whom are local residents, under terms requiring timely repayment. The District generally does not require collateral or other security in extending credit to patients;

NOTE 14 - BUSINESS AND CREDIT CONCENTRATIONS (Continued)

however, it routinely obtains assignment of (or is otherwise entitled to receive) patients' benefits payable under their health insurance programs, plans, or policies (e.g., Medicare, Medicaid, Blue Cross, and commercial insurance policies).

The mix of gross receivables from patients and third-party payors at December 31 was as follows:

	<u>1995</u>	<u>1994</u>	<u> 1993</u>
Medicare and Medicaid	37%	33%	56%
Commercial Insurance	11%	8%	9%
Patients	35%	43%	35%
Contract	17%	16%	-

NOTE 15 - COMMITMENTS AND CONTINGENCIES

The District evaluates contingencies based upon the best available evidence. The District believes that no allowances for loss contingencies are considered necessary. To the extent that resolution of contingencies results in amounts which vary from the District's estimates, future earnings will be charged or credited.

The principal contingencies are described below:

Third Party Cost-Based Charges (Note 5) - The District is contingently liable for retroactive adjustments made by the Medicare and Medicaid programs as the result of their examinations as well as retroactive changes in interpretations applying statutes, regulations and general instructions of those programs. The amount of such adjustments cannot be determined.

Further, in order to continue receiving reimbursement from the Medicare program, the District entered into an agreement with a government agent allowing the agent access to the District's Medicare patient medical records for purposes of making medical necessity and appropriate level of care determinations. The agent has the ability to deny reimbursement for Medicare patient claims which have already been paid to the District. The amount of such adjustments cannot reasonably be determined.

Professional Liability Risk (Note 13) - The District is contingently liable for losses from professional liability not underwritten by the Louisiana Patient's Compensation Fund or the Louisiana Hospital Association Trust Fund as well as for assessments by the Louisiana Hospital Association Trust Fund.

Worker's Compensation Risk - The District carries worker's compensation insurance through the Louisiana Hospital Association Trust Fund. Should the fund's assets not be adequate to cover claims made against it, the 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.

NOTE 15 - COMMITMENTS AND CONTINGENCIES (Continued)

Accordingly, the District is contingently liable for assessments by the Louisiana Hospital Association Trust Fund. The District has included these allocations of equity in the trust in its financial statements as prepaid insurance and insurance expense or a reduction thereof. Any return of equity reduces the prepaid balance.

NOTE 16 - GRANT REVENUE

The Department of Health and Hospitals awarded the District a physician subsidy grant of \$100,000 in 1993 under the provisions of Act 394. The District was awarded emergency room operational grants of \$75,000 and \$100,000 through the Louisiana Department of Health and Hospitals during 1994 and 1993, respectively. The funds were provided for rural health care under Act 810 by the State of Louisiana and were to be used for operation of the emergency room. In 1995, the Louisiana Department of Health and Hospitals awarded the District a \$50,000 physician's grant. Additionally in 1995, the District received a \$150,000 primary care clinic grant.

NOTE 17 - FAIR VALUE OF FINANCIAL INSTRUMENTS

The following methods and assumptions were used by the District in estimating the fair value of its financial instruments:

Cash and cash equivalents: The carrying amount reported in the balance sheet for cash and cash equivalents approximates its fair value.

Assets limited as to use: These assets consist of cash and cash equivalents. The carrying amount reported in the balance sheet approximates fair value.

Long-term investments: Fair values are based on quoted market prices.

Accounts payable and accrued expenses: The carrying amount reported in the balance sheet for accounts payable and accrued expenses approximates its fair value.

Long-term debt: Fair values of the Hospital's mortgage note and bonds are approximately equal to the carrying amounts due to the nearness of maturity of the bonds and immateriality of the mortgage note.

The following is a comparison of carrying amounts and fair values of the District's financial instruments:

	1995		199	94	<u> 1993</u>	
	Carrying <u>Amount</u>	Fair <u>Value</u>	Carrying <u>Amount</u>	Fair <u>Value</u>	Carrying Amount	Fair Value
Cash and cash equivalents Assets limited as to use Long-term investments	\$281,320 -0- 14,834	- 0 -	1,736	\$245,113 1,736 27,941	,	8,293
Accounts payable and accrued expenses Long-term debt	127,205 11,473	•	,	151,203 12,670	•	207,073 47,857

NOTE 18 - GOING CONCERN ISSUE

The financial statements have been prepared on the assumption that the District is a going concern. The District has experienced six straight years where operating expenses have exceeded operating revenues. The District's significant operating losses have been due to its inability to recruit and retain physicians. To provide additional revenues and further utilize space, in August, 1994, the District began leasing a portion of the hospital (including 14 beds) to Red River Health Care for a community rehab hospital. During 1995, the district contracted with two physicians and established a rural health clinic. A \$150,000 Primary Care Clinic Grant was received in May 1995 for this purpose.



FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

	<u> 1995</u>	<u>1994</u>	<u>1993</u>
Number of Hospital Patient Days Medicare Medicaid Other	850 62 <u>58</u>	1,180 104 69	1,345 122 <u>185</u>
Total	970	<u>1,353</u>	1,652
Number of Hospital Patient Discharges Medicare Medicaid Other	167 15 16	196 25 <u>29</u>	212 25 49
Total	198	<u>250</u>	286
Average Number of Days of a Hospital Patient Stay: Medicare Medicaid Other	5.09 4.13 3.63	6.02 4.16 2.38	6.34 4.88 3.78
0veral1	4.90	<u>5.41</u>	<u>5.78</u>
Number of Emergency Room Visits	<u>979</u>	<u>883</u>	1,074

NET PATIENT SERVICE REVENUE FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

	<u>1995</u>	<u>1994</u>	<u>1993</u>
Daily Patient Services:			
Room and board	\$ 146,984	\$ 204,909	\$ 246,260
Total Daily Patient Services	146,984	204,909	246,260
Other Professional Services:			
Oxygen Inpatient Outpatient	76,808 33 <u>,917</u>	44,900 <u>6,378</u>	64,928 <u>3,497</u>
Total oxygen	110,725	<u>51,278</u>	68,425
Emergency room Inpatient Outpatient	5,506 87,094	4,099 <u>60,614</u>	2,840 <u>67,458</u>
Total emergency room	92,600	64,713	70,298
Medical Supply Inpatient Outpatient	116,948 65,848	128,721 27,901	162,990 24,345
Total medical supply	182,796	156,622	187,335
Laboratory Inpatient Outpatient	82,084 266,269	104,440 205,022	151,370 198,133
Total Laboratory	<u>348,353</u>	<u>309,462</u>	349,503
Blood Inpatient Outpatient	6,879 <u>6,722</u>	6,638 	9,923 3,615
Total blood	13,601	14,255	13,538
EKG Inpatient Outpatient	10,338 22,653	12,936 19,056	16,217 13,907
Total EKG	\$ <u>32,991</u>	\$ <u>31,992</u>	\$ 30,124

(Continued)

NET PATIENT SERVICE REVENUE (CONTINUED) FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

	<u> 1995</u>	<u>1994</u>	<u> 1993</u>
Radiology Inpatient Outpatient	\$ 30,608 <u>56,128</u>	\$ 33,670 55,245	\$ 36,837 51,790
Total radiology	<u>86,736</u>	88,915	88,627
Monitor	26,387	30 663	4.2 686
Inpatient Outpatient	7,598	39,663 7,597	42,686 <u>6,946</u>
Total monitor	33,985	47,260	49,632
IV solutions	46,109	55,850	57,349
Pharmacy Inpatient Outpatient	130,221 259,757	150,219 57,651	177,961 30,105
Total pharmacy	389,978	207,870	208,066
Clinic/Rural Health Clinic Physician services Ancillary income	335,871 20,718	313,912 23,700	357,394 14,263
Total Clinic/Rural Health Clinic	356,589	<u>337,612</u>	<u>371,657</u>
Total Other Professional Services	1,694,463	<u>1,365,829</u>	<u>1,494,554</u>
Gross Patient Service Revenue	1,841,447	1,570,738	1,740,814
Deductions from Revenue	325,569	175,397	90,470
Net Patient Service Revenue	\$ <u>1,515,878</u>	\$ <u>1,395,341</u>	\$ <u>1,650,344</u>

FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

	<u>19</u>	<u>95</u>	1994	1993
Medicare and Medicaid contractual adjustments Administrative and other adjustments Champus/Champus VA adjustments Rehab adjustments	•	12,903 1,192 71 11,403	\$ 170,059 2,842 2,264 232	\$ 94,971 (1,717) (2,784) -0-
Total Deductions from Revenue	\$ 3	325,569	\$ 175,397	\$ 90,470

OTHER OPERATING REVENUE FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

FOR THE YEAR	S ENDED DECE	MBER 31,	1995, 1994	AND 1993	
			<u>1995</u>	<u>1994</u>	<u>1993</u>
Cafeteria Rehab Dietary Vending machine Medical records Contributions Discounts taken Rental income Kid Med revenue Miscellaneous revenue		\$	-0- 834 908 279 7,468 4,066 157,738 3,264 17,201	\$ -0 11 55 51 -0 1,18 87,35 5,78 6,59	6 -0- 7 574 9 6220- 0 602 0 3,500 0 1,380
Total Other Operation	g Revenue	\$	191,758	\$ <u>102,09</u>	3 \$ <u>8,651</u>

HOSPITAL SERVICE DISTRICT WARDS 3, 4 AND 10 OF THE PARISH OF UNION, STATE OF LOUISIANA TRI-WARD GENERAL HOSPITAL AND CLINIC HOSPITAL ENTERPRISE FUND OPERATING EXPENSES - NURSING SERVICES

FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

	<u>1995</u>	<u>1994</u>	<u>1993</u>
Nursing Administration - Salaries	\$ 73,240	\$ <u>77,707</u>	\$ 84,731
Nursing Service Salaries Other Total	323,062 46,273 369,335	292,416 <u>17,356</u> <u>309,772</u>	300,032 33,128 333,160
Total Nursing Service Salaries Other	396,302 46,273	370,123 17,356	384,763 33,128
Total	\$ <u>442,575</u>	\$ <u>387,479</u>	\$ <u>417,891</u>

OPERATING EXPENSES - OTHER PROFESSIONAL SERVICES FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

	<u>1995</u>	<u>1994</u>	<u>1993</u>
Physicians Salaries Other	\$ 250,280 13,540	\$ 204,125 9,889	\$ 243,899 101,467
Total	<u>263,820</u>	214,014	<u>345,366</u>
Radiology Salaries Other	46,462 22,883	40,691 17,629	45,671 16,776
Total	69,345	<u>58,320</u>	62,447
Laboratory and Blood Salaries Other	81,408 69,994	80,275 <u>65,912</u>	80,667 <u>86,964</u>
Total	<u>151,402</u>	146,187	<u>167,631</u>
Monitor supplies	264	420	<u>155</u>
Cardiovascular services	800	1,000	300
Oxygen	7,057	10,189	10,567
EKG Salaries Other	3,231 3,278	2,927 3,310	2,840 <u>863</u>
Total	6,509	6,237	3,703
Pharmacy Salaries Other	21,084 88,381	11,933 <u>59,967</u>	10,102 85,221
Total	109,465	71,900	95,323
Medical Records Salaries Other	20,854 1,002	28,632 <u>650</u>	35,768 <u>1,446</u>
Total	\$ <u>21,856</u>	\$ 29,282	\$ 37,214

OPERATING EXPENSES - OTHER PROFESSIONAL SERVICES (continued)

FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

	<u>1995</u>	<u>1994</u>	<u>1993</u>
Emergency Room Salaries Other	\$ 20,09 142,73		\$ 23,141 62,912
Total	162,83	7 171,042	86,053
Total Other Professional Services Salaries Other	443,41 <u>349,93</u>	•	442,088 <u>366,671</u>
Total	\$ <u>793,35</u>	<u>5</u> \$ <u>708,591</u>	\$ <u>808,759</u>

OPERATING EXPENSES - GENERAL SERVICES FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

	<u> 1995</u>	<u>1994</u>	<u> 1993</u>
Dietary Salaries Other	\$ 10,198 <u>17,746</u>	\$ 10,460 <u>19,725</u>	\$ 10,491 25,129
Total	<u>27,944</u>	30,185	35,620
Housekeeping Salaries Other	13,509 11,093	13,154 3,865	19,224 6,178
Total	24,602	<u>17,019</u>	25,402
Laundry Salaries Other Total	-0- 8,131 8,131	5,539 2,721 8,260	8,637 2,024 10,661
Maintenance Salaries Other Total	16,699 54,686 71,385	14,611 <u>44,660</u> <u>59,271</u>	11,719 <u>54,044</u> <u>65,763</u>
Total General Services Salaries Other	40,406 91,656	43,764 70,971	50,071 87,375
Total	\$ <u>132,062</u>	\$ <u>114,735</u>	\$ <u>137,446</u>

	<u> 1995</u>		1994		<u> 1993</u>
Salaries	\$ 116,577	\$	111,867	\$	103,013
Physician recruitment	82	-	5,728	•	31,104
Accounting and legal	19,654		23,034		21,199
Collection fees	2,318		2,184		4,449
Consultant fees	1,314		16,303		57,000
Board member compensation	1,680		1,520		1,720
Licenses and taxes	2,584		5,603		3,830
Rental and repairs	11,055		12,078		9,981
Office supplies	11,625		8,872		8,876
Telephone	9,862		9,079		10,265
Travel	531		1,066		2,820
Dues and subscriptions	5,542		2,691		3,867
Public relations	3,884		720		3,141
Nursing scholarships	-0-		683		(3,462)
Tax assessor fees	24,207		17,234		ì 7,979
Other	 3,695		3,108		3,040
Total Fiscal and Administrative					
Expenses	\$ 214,610	\$	221,770	\$	278,822

PER DIEM AND

OTHER COMPENSATION PAID TO BOARD MEMBERS FOR THE YEARS ENDED DECEMBER 31, 1995, 1994 AND 1993

	<u>199</u>	<u>5</u> <u>1</u>	<u>994</u>	<u>1993</u>
Board Members:				
Pat Risinger Morris Henry Sammye Telford L. A. Nute W. C. Reeves Oda Rockett Isaac Payne Clifton McIntosh Melvin Stone	\$	-0- \$ -0- -0- -0- -0- 280 440 480 480	320 \$ -0- 40 -00- 440 360 280 80	440 240 440 240 -0- 160 200 -0- -0-
Totals	\$	1,680 \$	<u>1,520</u> \$	1,720

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INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL STRUCTURE RELATED MATTERS NOTED IN A FINANCIAL STATEMENT AUDIT CONDUCTED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

Board of Commissioners Hospital Service District Wards 3, 4 and 10 of the Parish of Union, State of Louisiana Tri-Ward General Hospital and Clinic Bernice, Louisiana

We have audited the financial statements of Tri-Ward General Hospital and Clinic (the District) for the years ended December 31, 1995, 1994, and 1993, and have issued our report thereon dated April 22, 1996.

We conducted our audits in accordance with generally accepted auditing standards and <u>Government Auditing Standards</u>, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

The management of the District is responsible for establishing and maintaining an internal control structure. In fulfilling this responsibility, estimates and judgments by management are required to assess the expected benefits and related costs of internal control structure policies and procedures. The objectives of an internal control structure are to provide management with reasonable, but not absolute, assurance that assets are safeguarded against loss from unauthorized use or disposition, and that transactions are executed in accordance with management's authorization and recorded properly to permit the preparation of financial statements in accordance with generally accepted accounting principles. Because of inherent limitations in any internal control structure, errors or irregularities may nevertheless occur and not be detected. Also, projection of any evaluation of the structure to future periods is subject to the risk that procedures may become inadequate because of changes in conditions or that the effectiveness of the design and operation of policies and procedures may deteriorate.

In planning and performing our audits of the financial statements of the District for the years ended December 31, 1995, 1994 and 1993, we obtained an understanding of the internal control structure. With respect to the internal control structure, we obtained an understanding of the design of relevant policies and procedures and whether they have been placed in operation, and we assessed control risk in order to determine our auditing procedures for the purpose of expressing our opinion on the financial statements and not to provide an opinion on the internal control structure. Accordingly, we do not express such an opinion.

Board of Commissioners Tri-Ward General Hospital and Clinic Page Two

We noted certain matters involving the internal control structure and its operation that we consider to be reportable conditions under standards established by the American Institute of Certified Public Accountants. Reportable conditions involve matters coming to our attention relating to significant deficiencies in the design or operation of the internal control structure that, in our judgment, could adversely affect the entity's ability to record, process, summarize and report financial data consistent with the assertions of management in the financial statements. The schedule that accompanies this letter summarizes comments and suggestions regarding these matters.

A material weakness is a reportable condition in which the design or operation of one or more of the specific internal control structure elements does not reduce to a relatively low level the risk that errors or irregularities in amounts that would be material in relation to the financial statements being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions.

Our consideration of the internal control structure would not necessarily disclose all matters in the internal control structure that might be reportable conditions and, accordingly, would not necessarily disclose all reportable conditions that are also considered to be material weaknesses as defined above. However, we believe none of the reportable conditions described on the accompanying schedule is a material weakness.

This report is intended for the information of the Board of Commissioners, management and the office of the Legislative Auditor of the State of Louisiana. This restriction is not intended to limit the distribution of this report, which is a matter of public record.

Certified Public Accountants

April 22, 1996

TRI-WARD GENERAL HOSPITAL AND CLINIC AUDITOR'S COMMENTS AND RECOMMENDATIONS FOR THE YEAR ENDED DECEMBER 31, 1995

FY 94 RECOMMENDATIONS

We are pleased to see that the charge structure has now been updated as recommended in the prior year audit.

A summary of current reportable conditions follows:

<u>Condition</u>: Due to a limited number of available employees, there is not a complete segregation of duties in all accounting, recording and custody functions.

<u>Recommendations</u>: We recommend that duties be segregated to the extent possible to prevent both intentional and unintentional errors. Segregation includes 1) separating transaction authorization from custody of related asset; 2) separating transaction recording from general ledger posting and maintenance; 3) separating operational responsibility from record-keeping. Where these segregations are not possible, we recommend close supervision and review.

<u>Response</u>: It is not practicable or cost effective to achieve the total segregation of duties with the number of available employees. However, management will segregate wherever possible and supervise and review in the other areas.

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INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE WITH LAWS AND REGULATIONS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS ISSUED BY THE GAO

Board of Commissioners Hospital Service District Wards 3, 4 and 10 of the Parish of Union, State of Louisiana (Tri-Ward General Hospital and Clinic) Bernice, Louisiana

We have audited the financial statements of Tri-Ward General Hospital and Clinic (the District) as of and for the years ended December 31, 1995, 1994 and 1993, and have issued our report thereon dated April 22, 1996.

We conducted our audits in accordance with generally accepted auditing standards and <u>Government Auditing Standards</u>, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement.

While performing our audits, we read the responses to the questions in the attached Systems Survey and Compliance Questionnaire completed by management and adopted by the Board of Commissioners and found no evidence that would indicate that the Hospital Service District had not answered the questions correctly. However, it should be noted that our audit was not directed primarily towards the answers to the questions in the questionnaire.

Compliance with laws, regulations, contracts and grants applicable to Tri-Ward General Hospital and Clinic is the responsibility of the District's management. As part of obtaining reasonable assurance about whether the financial statements are free of material misstatement, we performed tests of the District's compliance with certain provisions of laws, regulations, contracts and grants. However, the objective of our audit of the financial statements was not to provide an opinion on overall compliance with such provisions. Accordingly, we do not provide such an opinion.

The results of our test disclosed no instances of noncompliance that are required to be reported under <u>Government Auditing Standards</u>.