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JACKSON PARISH HOSPITAL SERVICE DISTRICT NO. 1 D/B/A JACKSON PARISH HOSPITAL September 30, 1999

Under provisions of state law, this report is a public document. A copy of the report has been submitted to the entity and of our appropriate public officials. The report is available for dental importion at a p Baton Rouge office of the Legislative Ancitor and, where appropriate, at the office of the parish clerk of court.

Release Date APR 2 6 2000

Audits of Financial Statements

September 30, 1999 and September 30, 1998

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CONTENTS

Independent Auditor's Report	1-2
Balance Sheets	3
Statements of Revenues and Expenses	4
Statements of Changes in Fund Balance	5
Statements of Cash Flows	6-7
Notes to Financial Statements	8-18
SUPPLEMENTARY FINANCIAL INFORMATION	
Schedule of Net Patient Service Revenues	20
Schedule of Salaries and Benefits	21
Schedule of Medical Supplies	22
Schedule of Professional Fees	23
Independent Auditor's Report On Compliance And On Internal Control Over Financial Reporting Based On An Audit Of Financial Statements Performed	
In Accordance With Government Auditing Standards	24-25
Reportable Conditions	26
Status of Prior Year Audit Findings	27 - 28



To the Board of Commissioners

Jackson Parish Hospital Service District No. 1

Jackson Parish, Louisiana

Independent Auditor's Report

We have audited the accompanying general purpose financial statements of JACKSON PARISH HOSPITAL SERVICE DISTRICT NO. 1, d/b/a JACKSON PARISH HOSPITAL (Hospital), a component unit of the Jackson Parish Police Jury, as of and for the year ended September 30, 1999, as listed in the table of contents. These general purpose financial statements are the responsibility of the Hospital's management. Our responsibility is to express an opinion on these financial statements based on our audit. The financial statements of the Hospital, as of September 30, 1998, were audited by other auditors whose report dated February 17, 1999, on those statements included an explanatory paragraph that described the uncertainty of the Hospital to continue as a going concern due to the Hospital's significant operating losses, reduced cash flow, and the amount of current debt.

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

In our opinion, the general-purpose financial statements referred to above present fairly, in all material respects, the financial position of the **Hospital** as of September 30, 1999, and the results of its operations and its cash flows of its proprietary fund for the year then ended, in conformity with generally accepted accounting principles.

In accordance with Government Auditing Standards, we have also issued our report dated January 27, 2000, on our consideration of the Hospital's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grants.

Our audit was 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 financial statements of the Hospital. Such information has been subjected to the auditing procedures applied in the audit of the general purpose financial statements, and in our opinion, is fairly stated in all material respects in relation to the financial statements taken as a whole.

The accompanying financial statements have been prepared assuming that the Hospital will continue as a going concern. As discussed in the Note Q to the financial statements, the Hospital's significant operating losses together with the amount of current debt raise substantial doubt about its ability as a going concern. The financial statements do not include any adjustments relating to the recoverability and classification of reported asset amounts or the amounts and classification of liabilities that might result from the outcome of this uncertainty.

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A Professional Accounting Corporation

January 27, 2000

JACKSON PARISH HOSPITAL SERVICE DISTRICT NO. 1 d/b/a JACKSON PARISH HOSPITAL BALANCE SHEETS

ASSETS

	September 30,			0,
		1999		1998
CURRENT ASSETS				·
Cash and Cash Equivalents	\$	968,427	\$	322,093
Assets Whose Use is Limited		3,756		7,394
Patient Accounts Receivable, Net of				
Estimated Uncollectibles of \$369,580				
for 1999, and \$457,113 for 1998		486,603		819,574
Inventory Supplies - at Cost		261,791		215,062
Investments		-		1,521
Prepaid Expenses		83,522		92,896
Other Receivables		19,467		<u>-</u>
Total Current Assets	-	1,823,566		1,458,540
ASSETS WHOSE USE IS LIMITED				
By Agreements with Third-Party Payors				
for Funded Depreciation		-		3,608
Under Indenture Agreement		3,756		3,786
Total Assets Whose Use is Limited		3,756		7,394
Less: Amounts Required to Meet Current				
Obligations		3,756	-	7,394
Noncurrent Assets Whose Use is Limited			-	-
PROPERTY, PLANT AND EQUIPMENT, NET		2,273,596		2,507,823
Total Assets	\$	4,097,162	\$	3,966,363

The accompanying notes are an integral part of these financial statements.

LIABILITIES AND FUND BALANCE

	September 30,		0,	
		1999		1998
CURRENT LIABILITIES			-	
Accounts Payable - Trade	\$	1,280,083	\$	1,806,102
Estimated Third Party Settlements		699,228		903,079
Current Maturities of Bonds Payable		176,000		192,000
Current Maturities of Note Payable		-		140,277
Current Obligations of Capital Leases		41,691		45,332
Accrued Salaries and Employee Benefits		304,079		423,250
Accrued Interest on Long-Term Debt		2,739		5,411
Payroll Taxes Payable		10,045	<u>-</u>	43,941
Total Current Liabilities		2,513,865	=	3,559,392
LONG-TERM LIABILITIES, NET OF CURRENT MATURITIES				
Bonds Payable		2,204,000		-
Long-Term Obligations of Capital Leases		46,901		26,383
Other Liabilities		-		1,755
Total Long-Term Liabilities		2,250,901	•—	28,138
COMMITMENTS AND CONTINGENCIES		-		-
FUND BALANCE				
Fund Balance		(667,604)		378,833
Total Liabilities and Fund Balance	\$	4,097,162	¢	3,966,363
Total Lindontines and I und Dalance	<u>——</u>	1,007,102		2,700,202

d/b/a

JACKSON PARISH HOSPITAL STATEMENTS OF REVENUES AND EXPENSES

	For The Years Ended September 30,		
	1999	1998	
NET PATIENT SERVICE REVENUE	\$ 5,426,616	\$ 6,197,072	
OTHER OPERATING REVENUE	1,085,876	845,132	
Total Revenue	6,512,492	7,042,204	
OPERATING EXPENSES			
Salaries and Benefits	4,000,686	4,887,998	
Medical Supplies	695,044	686,729	
Professional Fees	422,408	265,255	
Other Operating Expenses	1,592,189	1,254,388	
Insurance	189,324	254,607	
Leases and Rentals	112,580	146,894	
Interest	32,112	47,851	
Depreciation	284,895	344,154	
Provision for Bad Debts	675,638	442,071	
Total Expenses	8,004,876	8,329,947	
Loss from Operations	(1,492,384)	(1,287,743)	
NON-OPERATING GAINS (LOSSES)			
Ad Valorem Taxes	310,663	433,502	
Office Rent	62,354	33,543	
Interest Income	4,387	19,700	
Other Income	11,086	-	
(Loss) on Sale of Ambulance Assets	(67,704)	-	
Non-Operating Gains, Net	320,786	486,745	
EXPENSES AND LOSSES IN EXCESS			
OF REVENUES AND GAINS, BEFORE			
EXTRAORDINARY ITEM	(1,171,598)	(800,998)	
EXTRAORDINARY ITEM - SETTLEMENTS ON			
PRIOR YEAR OUTSTANDING DEBT	125,161		
EXPENSES AND LOSSES IN EXCESS			
OF REVENUES AND GAINS	\$ (1,046,437)	\$ (800,998)	

The accompanying notes are an integral part of these financial statements.

d/b/a

JACKSON PARISH HOSPITAL STATEMENTS OF CHANGES IN FUND BALANCE

	For The Years Ended September 30,			
		1999		1998
BALANCE, Beginning of Year	\$	378,833	\$	1,179,831
Expenses and Losses in Excess of Revenues and Gains		(1,046,437)	<u> </u>	(800,998)
BALANCE, End of Year	<u>\$</u>	(667,604)	\$	378,833

JACKSON PARISH HOSPITAL STATEMENTS OF CASH FLOWS

	For The Years Ended September 30,			
		1999		1998
CASH FLOWS FROM OPERATING ACTIVITIES				···
AND GAINS AND LOSSES				
Expenses and Losses in Excess of Revenues and Gains	\$	(1,046,437)	\$	(800,998)
Adjustments to Reconcile Revenues and Gains in Excess				
of Expenses and Losses to Net Cash Provided				
by (Used in) Operating Activities and Gains and Losses:				
Loss on Disposal of Ambulance Assets		67,704		-
Depreciation and Amortization		284,895		344,154
Provision for Bad Debts		675,638		442,071
(Increase) in Accounts Receivable		(342,667)		(226,241)
(Decrease) Increase in Estimated Third-Party				
Payor Settlements		(203,851)		660,892
Decrease (Increase) in Investments		1,521		(71)
(Increase) Decrease in Inventories		(46,729)		13,417
Decrease in Prepaid Expenses		9,374		28,997
(Increase) in Other Receivables		(19,467)		-
(Decrease) Increase in Accounts Payable		(526,019)		222,447
(Decrease) in Accrued Expenses				
and Employee Benefits		(119,173)		(17,345)
(Decrease) in Accrued Interest on Long-Term Debt		(2,672)		-
(Decrease) in Payroll Taxes Payable		(33,896)		-
(Decrease) in Other Liabilities		(1,755)		-
Net Cash Provided by (Used in) Operating				
Activities and Gains and Losses		(1,303,534)		667,323
CASH FLOWS FROM INVESTING ACTIVITIES				
Cash Withdrawn From (Invested in) Assets Whose				
Use is Limited		3,638		(1,179)
Purchases of Property and Equipment		(68,041)		(118,941)
Net Cash (Used in) Investing Activities		(64,403)		(120,120)

d/b/a

JACKSON PARISH HOSPITAL STATEMENTS OF CASH FLOWS (Continued)

	For The Years Ended September 30,			
		1999		1998
CASH FLOWS FROM FINANCING ACTIVITIES				
Proceeds from Bond Issuance		2,380,000		_
Repayment of Bonds and Certificates of Indebtedness		(192,000)		(178,000)
Payments Made on Capital Leases		(33,452)		(35,149)
Proceeds of Notes Payable		-		48,638
Payments on Note Payable	=	(140,277)	<u></u>	(181,983)
Net Cash Provided by (Used in) Financing				
Activities		2,014,271		(346,494)
NET INCREASE IN CASH AND CASH EQUIVALENTS		646,334		200,709
CASH AND CASH EQUIVALENTS - BEGINNING OF YEAR		322,093		121,384
CASH AND CASH EQUIVALENTS - END OF YEAR	\$	968,427	\$	322,093
SUPPLEMENTAL DISCLOSURES:				
Cash Paid During the Year For Interest	\$	36,784	\$	47,851
SUPPLEMENTAL DISCLOSURES OF NON-CASH FINANCING AND INVESTING ACTIVITIES				
Assets Acquired Through Capital Leases	\$	50,330	\$	19,997
Capital Lease Obligations	\$	50,330	\$	19,997
Construction in Progress Capitalized During the Year	\$	36,980	\$	-

The accompanying notes are an integral part of these financial statements.

NOTE A

ORGANIZATION AND OPERATIONS

LEGAL ORGANIZATION

The Jackson Parish Hospital Service District No. 1 ("Hospital") was organized under the Louisiana Revised Statutes of 1950. The Hospital's area includes all of Jackson Parish, Louisiana.

The Hospital is a political subdivision of the Jackson Parish Police Jury, whose jurors are elected officials. The Hospital's commissioners are appointed by the Jackson Parish Police Jury. As the governing authority of the Parish, for reporting purposes, the Jackson Parish Police Jury is the financial reporting entity for the Hospital. Accordingly, the Hospital was determined to be a component unit of the Jackson Parish Police Jury based on Statement No. 14 of the National Committee on Governmental Accounting. The accompanying general purpose financial statements present information only on the funds maintained by the Hospital and do not present information on the police jury, the governmental services provided by the governmental unit or the governmental units that comprise the financial reporting entity.

NATURE OF BUSINESS

The Hospital operates a 25-acute-care hospital and a 24-bed psychiatric unit. Additionally, the Hospital provides home health, emergency, outpatient, and clinic services. During the year ended September 30, 1999, the Hospital discontinued its operation of a parish ambulance service.

CHANGES IN REPORTING CLASSIFICATION

The classification of certain prior year amounts has been changed to reflect consistent reporting when compared to current year balances.

NOTE B

SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The accounting policies of the Hospital conform to generally accepted accounting principles as applicable to governments. The following is a summary of the more significant policies:

FINANCIAL REPORTING ENTITY

The accompanying general purpose financial statements of the Hospital present the financial position and changes in fund balance for the enterprise fund. The results of operations and cash flow are also presented for the enterprise fund.

ACCOUNTING FOR PROPRIETARY FUND TYPE

The operating accounts of the Hospital are organized into one proprietary fund type. The operation of the proprietary fund is accounted for by providing a set of self-balancing accounts, which are comprised of assets, liabilities, fund balance, revenues and expenses.

NOTE B

SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

ACCOUNTING FOR PROPRIETARY FUND TYPE (Continued)

Enterprise funds are used to account for operations (a) 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, or (b) where the governing body has decided that periodic determination of revenues earned, expenses incurred, and/or net income is appropriate for capital maintenance, public policy, management control, accountability or other purposes.

METHOD OF ACCOUNTING

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 Audit and Accounting Guide – Health Care Organizations, 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.

CHARITY CARE

The Hospital provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Because the Hospital does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue.

INCOME TAXES

The entity is a political subdivision and is therefore exempt from taxation.

CREDIT RISK

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

The Hospital's estimate of collectibility is based on an evaluation of historical collections compared to gross revenues to establish an allowance for uncollectible accounts.

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.

INVENTORIES

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

NOTE B

SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

STATEMENT OF REVENUE AND EXPENSES

For purposes of presentation, transactions deemed by management to be ongoing, major or central to the provision of health care services are reported as revenues and expenses. Peripheral or incidental transactions are reported as non-operating.

ASSETS WHOSE USE IS LIMITED

Assets whose use is limited include funds set aside by the Board of Commissioners to satisfy deposit requirements of the Hospital's debt agreements.

PROPERTY, PLANT AND EQUIPMENT

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

Buildings	25 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 C

CASH AND CASH EQUIVALENTS

Cash and cash equivalents consist primarily of deposits in checking accounts and money market accounts. The market value of all cash and money market accounts are not materially different from their carrying values.

All deposits are covered by Federal deposit insurance or collateral held by the pledging financial institution's trust departments in the Hospital's name.

NOTE D

INVESTMENTS

The Hospital considers all financial instruments with original maturities in excess of 90 days to be temporary cash investments.

d/b/a

JACKSON PARISH HOSPITAL NOTES TO FINANCIAL STATEMENTS

NOTE E

PATIENT SERVICE REVENUES

The Hospital 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 year ended September 30, 1999 and 1998 follows:

	1999	1998
Medicare Patients	\$ 4,614,726	\$ 5,109,872
Medicaid Patients	<u>1,910,813</u>	1,874,448
Total	<u>\$ 6,525,539</u>	<u>\$ 6,984,320</u>
Percent of All Patients	<u>64</u> %	<u>66</u> %

Since the Hospital serves a disproportionate share of low-income patients, it qualifies for Medicaid Disproportionate Share reimbursements. Medicaid Disproportionate Share reimbursements of \$941,348 and \$646,609 are included in Other Operating Revenue for 1999 and 1998, respectively.

NOTE F

PROPERTY, PLANT AND EQUIPMENT

Major classifications of property, plant and equipment are summarized below.

	September 30,		
	1999	1998	
Buildings and Fixed Equipment	\$ 4,553,707	\$ 4,499,738	
Major Movable Equipment	2,825,241	3,180,125	
Land Improvements	<u>181,047</u>	174,685	
	7,559,995	7,854,548	
Less: Accumulated Depreciation	5,308,799	5,369,125	
Total Buildings and Equipment	2,251,196	2,485,423	
Land	22,400	22,400	
Total Property, Plant and Equipment,			
Net of Depreciation	<u>\$ 2,273,596</u>	<u>\$ 2,507,823</u>	

Depreciation and amortization expense for the years ended June 30, 1999 and 1998 totaled \$284,895 and \$344,154, respectively.

NOTE F (Continued)

PROPERTY, PLANT AND EQUIPMENT

Property, plant and equipment include fully depreciated assets, which are still in service in the approximate amount of \$3,500,000.

These assets were obtained in part with funds from a Hill-Burton program grant of \$907,482. The Hill-Burton program has the ability to recapture a portion of that grant should the facility be taken out of service or if used by an unqualified recipient.

NOTE G

COMPENSATED ABSENCES

Employees of the Hospital are entitled to paid vacation and holiday days. Sick days are not vested and, accordingly, no liability has been recorded in the accompanying general purpose financial statements. However, vested vacation and holiday days off have been recorded as a liability in the accompanying general purpose financial statements at employee earnings rates in effect at the balance sheets date.

NOTE H

PENSION PLAN

Variable Life Insurance Company (VALIC) Prototype Combined Profit Sharing/Money Purchase Plan Basic Document and Adoption Agreement #001 named "Jackson Parish Hospital Retirement Plan" (the "Plan"). The Plan Administrator is the Human Resource Director. Eligibility requirements are one year of employment and attained age of 21. Vesting is 25% per year for years of service 2-5. The Plan's coverage includes death, disability and retirement benefits. The Hospital may amend the Plan at any time at its sole discretion. However, no amendment may result in any participant's vested interest or any portion of the Plan's assets to revert back to the Hospital. The Hospital contributes 1% for all eligible employees. It will match up to 3% of employee salaries, if the employee also contributes 3%. The Hospital contributed \$59,246 and \$63,333 for the years ended September 30, 1999 and 1998, respectively.

NOTE I

CAPITAL LEASES

The Hospital leases various equipment under capital leases that expire in various years through 2004. 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. These assets are included within property, plant and equipment on the Balance Sheets. The assets are depreciated over their estimated productive lives. Depreciation of assets under capital leases is included in depreciation expense.

d/b/a

JACKSON PARISH HOSPITAL NOTES TO FINANCIAL STATEMENTS

NOTE I

CAPITAL LEASES (Continued)

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

	1999	<u>1998</u>
Total Equipment Under Capital Lease Less: Accumulated Depreciation	\$ 247,877 183,131	\$ 197,547 <u>166,416</u>
Net Assets Under Capital Leases	<u>\$ 64,746</u>	\$ 31,131

Minimum future lease payments under capital leases as of September 30, 1999 for each of the next four years and in aggregate are:

<u>Year</u>	Amount		
2000	\$ 41,691		
2001	17,499		
2002	10,175		
2003	10,757		
2004	8,470		
Total Minimum Lease Payments	88,592		
Less: Current Maturities	41,691		
Long-Term Maturities	<u>\$ 46,901</u>		

Interest rates on capital leases vary from 5% to 17% and are imputed on the lessor's implicit rates of return. Total interest incurred on these capital leases totaled \$25,488 for the year ended September 30, 1999.

NOTE J

OPERATING LEASES

The Hospital leases various equipment and a building under operating leases expiring in various years through 2001. Lease expense charged to operations totaled \$112,580 and \$146,894 for the years ended September 30, 1999 and 1998, respectively.

Certain operating leases provide for renewal options for an indefinite period at their fair rental value at the time of renewal. In the normal course of business, operating leases are generally renewed or replaced by other leases.

d/b/a

JACKSON PARISH HOSPITAL NOTES TO FINANCIAL STATEMENTS

NOTE K

BONDS PAYABLE

On September 23, 1999, the Hospital issued certificates of indebtedness in the amount of \$2,380,000 with a 5.875% rate of interest, payable semi-annually on March 1st and September 1st. These Series 1999 bonds call for principal payments on March 1st with the final payment due March 1, 2009. The bonds are secured by a pledge of Ad Valorem taxes set at 8.2 mills to be levied on taxable property from 1999 through 2008.

Scheduled principal repayments on these bonds are as follows:

2000	\$ 176,00	10
	174,00	
2001		
2002	189,00	
2003	204,00	
2004	221,00	0
Thereafter	1,416,00	<u>0</u>
	\$ 2,380,00	0

As of September 30, 1998, the Hospital had an outstanding balance of \$192,000 payable on a 1992 Series Bond. This liability was settled on March 1, 1999. Interest incurred on this debt totaled \$6,624 for the year ended September 30, 1999.

NOTE L

NET PATIENT SERVICE REVENUE

The Hospital has agreements with third-party payors that provide for payments to the Hospital 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 Hospital is reimbursed for cost reimbursable items at a tentative rate with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicare fiscal intermediary. Home health is reimbursed based upon a cost reimbursement methodology, which is subject to limits on a cost per visit or beneficiary basis. The Hospital's Medicare cost reports have been audited by the Medicare fiscal intermediary through September 30, 1997.

<u>Medicaid</u> - Medicaid inpatient services are reimbursed based on a prospectively determined per diem rate. Medicaid outpatient services are reimbursed under a cost reimbursement methodology. The Hospital is reimbursed at a tentative rate for cost based services with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicaid fiscal intermediary. The Hospital's Medicaid cost reports have been audited by the Medicaid fiscal intermediary through September 30, 1994.

NOTE L

NET PATIENT SERVICE REVENUE (Continued)

<u>Blue Cross</u> – Inpatient services rendered to Blue Cross subscribers are reimbursed at prospectively determined rates per day of hospitalization. The prospectively determined per-diem rates are not subject to retroactive adjustment.

The Hospital has also entered into payment agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. The basis for payments to the Hospital under these agreements include prospectively determined rates per discharge, discounts from established charges, and prospectively determined daily rates.

NOTE M

PROFESSIONAL LIABILITY RISK

The Hospital 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 Hospital 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 Hospital's membership in the Louisiana Hospital Association Trust Fund provides additional coverage for professional medical malpractice liability. 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 Hospital.

The Trust fund presumes to be a "Grantor Trust" and, accordingly, income and expenses are prorated to member hospitals. The Hospital has included these allocations of equity in the trust in its financial statements. Equity reported by the Fund in the amounts of \$22,257 and \$22,257 were reported by the Hospital for the years ended September 30, 1999 and 1998, respectively. These amounts are included within prepaid insurance on the balance sheets.

NOTE N

BUSINESS AND CREDIT CONCENTRATIONS

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

JACKSON PARISH HOSPITAL NOTES TO FINANCIAL STATEMENTS

NOTE N

BUSINESS AND CREDIT CONCENTRATIONS (Continued)

The mix of gross receivables from patients and third-party payors at September 30 was follows:

	<u>1999</u>	<u>1998</u>
Medicare and Medicaid	53%	70%
Commercial Insurance	28%	17%
Patients	19%	13%

NOTE O

COMMITMENTS

The Hospital has employment/independent contractor contracts with three physicians that expire at various terms through January 2002. As of September 30, 1999, the Hospital's commitment for the next fiscal year totals \$250,000. These physicians work in hospital clinics and the emergency room. As of September 30, 1998, total annual salaries under these contracts were approximately \$794,000.

The Hospital has contracted with outside parties for management services that include providing for the Hospital's administrator, CFO, and Director of Patient Care Services. Subsequent to year-end, the Hospital extended this contract through November 2002. The annual commitment totals \$250,000, plus benefits not to exceed 30% of the \$250,000.

Also, subsequent to year-end, the Hospital has entered into a Facilities Management Agreement for an initial term of three years. This obligation calls for payments of \$76,296, \$77,632, and \$78,991, for the years ended September 2000, 2001, and 2002, respectively.

NOTE P

CONTINGENCIES

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

The principal contingencies are described below:

<u>Third Party Cost-Based Charges</u> — The Hospital 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.

NOTE P

CONTINGENCIES (Continued)

Further, in order to continue receiving reimbursement from the Medicare program, the Hospital entered into an agreement with a government agent allowing the agent access to the Hospital's Medicare patient medical reports 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 Hospital. The amount of such adjustments cannot reasonably be determined.

<u>Professional Liability Risk (Note M)</u> — The Hospital 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.

Workmen's Compensation Risk – The Hospital participated in the Louisiana Hospital Association Self-Insurance Workmen's Compensation Trust Fund in 1997 and 1996. Should the fund's assets not be adequate to cover claims made against it, the Hospital 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 is contingently liable for assessments by the Louisiana Hospital Association Trust Fund. The trust fund presumes to be a "Grantor Trust" and, accordingly, income and expenses are prorated to member hospitals. The Hospital has included these allocations of equity in the trust in its financial statements. Equity reported by the Fund in the amount of \$18,715 was reported by the Hospital for both years ended September 30, 1999 and 1998. These amounts are included within prepaid insurance on the September 30, 1999 and 1998 balance sheets.

Hill-Burton Uncompensated Service and Community Service Obligations — As a result of the Police Jury receiving a Federal Hill-Burton program grant, the Hospital is required to provide a reasonable volume of uncompensated services to patients who are unable to pay for their medical care. As of September 30, 1998, the Hospital had a deficit in the level of free care provided. This deficit must be reduced through providing uncompensated services to indigent patients in fiscal year 1999 and subsequent years. Additionally, the grant requires the Hospital to provide certain community services. During the year ended September 30, 1999, the Hospital received notification that it had fulfilled all the uncompensated care requirements.

Medical Benefits Trust – The Hospital maintains a medical benefits trust. The Hospital contributes \$99 per employee per month and the employee contributes the balance of any premium required to cover the health benefits cost of the employees. All full time employees are eligible to participate. The trust pays all claims from funds provided from the Hospital. The trust agreement provides that should it not have sufficient funds to cover its obligations, the Hospital is obligated to fund the shortfall. The Hospital purchases "excess" insurance coverage that provides for payment of individual claims in excess of \$15,000 or aggregate annual claims in excess of \$162,680. The Hospital had a liability for incurred but not reported claims of \$90,587 and \$18,027 at September 30, 1999 and 1998, respectively. This liability is included within Accounts Payable on the balance sheets.

NOTE P

CONTINGENCIES (Continued)

<u>Litigation and Other Matters</u> - Various claims in the ordinary course of business are pending against the Hospital. In the opinion of management and counsel, insurance is sufficient to cover adverse legal determinations in those cases where a liability can be measured.

<u>Year 2000 Computer Conversion</u> - The Hospital's management is aware that many older computer systems are unable to handle dates on or after January 1, 2000, causing existing equipment and software to be obsolete. The Hospital's management is addressing the need and cost for upgrades and/or replacements with department heads and vendors. The cost of upgrades and/or replacements for all other computer hardware or software can not be reasonably estimated at this time.

<u>Environmental Liability</u> — The Hospital's management has determined, that as a potentially responsible party, it is likely that it has incurred a liability for environmental remediation costs resulting from an underground fuel tank. Although no claim against the Hospital has yet been asserted, it is believed that such a claim will be brought against the Hospital in the future.

NOTE Q

GOING CONCERN ISSUE

The financial statements have been prepared on the assumption that the Hospital is a going concern. The Hospital has experienced substantial operating losses for the last three years. The Hospital's significant operating losses during the last three years and its continued high level of current debt flow have contributed to the present going concern issue. The Hospital was successful in floating bonds in the amount of \$2,380,000 to assist in restructuring its debt. Management has also significantly reduced operating expenses during the year ended September 30, 1999. Management is also negotiating with vendors to accept a reduced amount in settlement of its trade payables. During the year ended September 30, 1999, Management successfully negotiated discounts totaling \$125,161, which is presented in the statements of revenues and expenses as an extraordinary item.

NOTE R

YEAR 2000 COMPLIANCE (UNAUDITED)

Time and space saving programming decisions made in prior years resulted in two-digit codes that may not correctly recognize "00" as the year 2000. Serious processing errors or system failure could result. To prevent this error, computer systems and equipment must be reprogrammed or replaced to make them year 2000 compliant.

The Hospital is significantly dependent on computerized systems for essential operations and to provide services to its patients. As a continuing process, the Hospital is actively engaged in making necessary changes to its systems and equipment to achieve year 2000 compliance. These changes include system upgrades and equipment replacements.

The Hospital has tested its systems and is in the process of upgrading its system. The completion of testing is not a guarantee, unto itself, that the systems will be year 2000 compliant.

SUPPLEMENTARY FINANCIAL INFORMATION

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JACKSON PARISH HOSPITAL SCHEDULE OF NET PATIENT SERVICE REVENUES

For The Years Ended September 30.

	September 30,		
	1999	1998	
DAILY PATIENT SERVICE REVENUES		 	
Adult and Pediatric	\$ 693,888	\$ 619,731	
PCAU Room Revenue	1,843,474	1,764,699	
Total Daily Patient Services	2,537,362	2,384,430	
OTHER PROFESSIONAL SERVICES			
Operating Room	143,668	130,314	
Recovery Room	6,695	4,223	
Anesthesia	44,352	45,534	
Radiology	832,249	778,877	
Laboratory	681,322	706,658	
Blood	26,776	41,658	
1V Therapy	632,555	679,861	
Respiratory Care	602,348	576,805	
EKG and EEG	119,298	127,252	
Medical Supply	432,543	506,526	
Pharmacy	1,666,777	1,515,506	
PCAU	81,677	70,307	
Brain and Wellness Center	-	327,230	
Emergency Room	527,955	652,382	
Ambulance	173,234	644,863	
Home Health	354,325	840,019	
Clinics	322,650	507,167	
Total Other Professional Services	6,648,424	8,155,182	
Gross Patient Service Revenue	9,185,786	10,539,612	
Less: Contractual Adjustments	3,759,170	4,342,540	
Net Patient Service Revenue	\$ 5,426,616	\$ 6,197,072	

See independent auditor's report.

d/b/a

JACKSON PARISH HOSPITAL SCHEDULE OF SALARIES AND BENEFITS

For The Years Ended September 30.

	September 30,			•
	1999		1998	
PCAU	\$	896,518	\$	724,470
Nursing Services and Administration		451,337		434,302
Clinics		359,133		554,149
Emergency Room		351,471		530,015
Home Health		201,340		350,162
Laboratory		178,317		175,947
Radiology		134,082		122,167
General and Administrative		116,199		303,131
Anesthesiology		100,744		101,245
Housekeeping		98,971		106,422
Dietary and Cafeteria		92,233		86,446
Operating Room		82,688		78,520
Ambulance		80,722		280,732
Pharmacy		75,643		76,381
Respiratory Therapy		71,906		70,795
Medical Records		63,021		73,438
Central Supply		31,003		30,261
Plant Operations and Maintenance		24,516		19,022
Brain and Wellness Center		***		<u>85,835</u>
Total Salaries	 -	3,409,844	.	4,203,440
FICA		248,270		308,208
Hospital Insurance		298,942		152,538
Workers' Compensation Insurance		37,828		92,410
Retirement		59,246		46,506
Unemployment Taxes		28,119		22,593
Vacation and Holidays		(81,563)		62,303
Total Benefits		590,842	<u>.</u>	684,558
Total Salaries and Benefits	\$	4,000,686	\$	4,887,998

JACKSON PARISH HOSPITAL SERVICE DISTRICT NO. 1 d/b/a JACKSON PARISH HOSPITAL SCHEDULE OF MEDICAL SUPPLIES

For The Years Ended September 30.

	September 30,			,
	199	99	1998	
Pharmacy	\$ 3	43,107	\$	308,424
Laboratory and Blood	1	19,722		150,922
Nursing Services		69,158		55,154
Radiology		47,227		40,250
Respiratory Therapy		24,586		20,882
Emergency Room		19,491		16,299
Operating Room		17,216		12,042
Central Supply		14,831		17,829
Clinics		14,430		23,177
Ambulance		11,870		19,458
PCAU		8,978		8,685
Home Health		4,428		12,517
Brain and Wellness Center				1,090
Total Medical Supplies	\$ 6	95,044	<u>\$</u>	686,729

d/b/a

JACKSON PARISH HOSPITAL SCHEDULE OF PROFESSIONAL FEES

For The Years Ended

	September 30,		
	 1999		1998
Emergency Room	\$ 164,067	\$	68,574
Radiology	132,257		67,245
Laboratory	50,500		68,053
PCAU	30,353		1,449
EKG and EEG	25,571		24,843
Anesthesiology	13,572		25,254
Respiratory	3,865		9,837
Pharmacy	 2,223		
Total Professional Fees	\$ 422,408	<u>\$</u>	265,255



INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE AND ON INTERNAL CONTROL OVER FINANCIAL REPORTING BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITNG STANDARDS

Board of Commissioners Jackson Parish Hospital Service Hospital No. 1 Jonesboro, Louisiana

We have audited the general purpose financial statements of JACKSON PARISH HOSPITAL SERVICE DISTRICT No. 1 (Hospital) for the year ended September 30, 1999, and have issued our report thereon dated January 27, 2000. We conducted our audit in accordance with generally accepted auditing standards and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States.

Compliance

As part of obtaining reasonable assurance about whether the **Hospital**'s financial statements are free of material misstatements, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grants, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance that would be required to be reported herein under *Government Auditing Standards*.

Internal Control Over Financial Reporting

In planning and performing our audit, we considered the Hospital's internal control over financial reporting in order to determine our auditing procedures for the purpose of expressing our opinion on the general purpose financial statements and not to provide assurance on internal control. However, we noted certain matters involving internal control over financial reporting and its operation that we consider to be reportable conditions. Reportable conditions involve matters coming to our attention relating to significant deficiencies in the design or operation of the internal control over financial reporting that, in our judgment, could adversely affect the Hospital's ability to record, process, summarize and report financial data consistent with the assertions of management in the general purpose financial statements. Reportable conditions are described in the accompanying schedule of findings.

A material weakness is a condition in which the design or operation of one or more of the internal control components does not reduce to a relatively low level the risk that misstatements in amounts that would be material in relation to the general purpose 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 over financial reporting would not necessarily disclose all matters in the internal control 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, the reportable condition described is not considered to be a material weakness.

This report is intended for the information of the Board of Commissioners, management and the Legislative Auditor of the State of Louisiana, and is not intended to be and should not be used by anyone other than those specified parties.

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A Professional Accounting Corporation

January 27, 2000

JACKSON PARISH HOSPITAL SERVICE DISTRICT NO. 1 d/b/a JACKSON PARISH HOSPITAL REPORTABLE CONDITIONS For the Year Ended September 30, 1999

Maintenance of Payroll Files/Verifying Payroll Registers

In testing the internal controls over the payroll function, we noted instances where the personnel files were not consistently updated so that the file contained the current wage rate. We also noted that there were slight discrepancies between the time card and the actual pay per the pay register. Examples include paying an individual for 80 hours when their time card indicated 76.43 hours, with no time allocated to vacation and a time card for 77.87 hours with the pay register at 77.67 hours. The cause of the discrepancies is the lack of someone having the availability to check the register to the time cards prior to the release of the payroll.

We recommend that the Hospital consider having an individual assigned to the review of time cards against the payroll register prior to the release of the payroll to the employees.

The Hospital's management has concurred with this finding and has appointed one individual to organize and update all payroll files. Also, an individual, independent of the payroll function, will review time cards and the payroll register for accuracy.

d/b/a

JACKSON PARISH HOSPITAL STATUS OF PRIOR YEAR AUDIT FINDINGS For the Year Ended September 30, 1998

1. Clinic Accounts Receivable

Condition: Clinic revenues were not fully recorded on the general ledger.

Resolution: Has been resolved.

2. Physician Performance Controls

Condition: The Hospital employed several new physicians during 1996 and 1997. These physicians were guaranteed certain salaries which were not contingent on meeting any performance standards.

Resolution: Has been resolved.

3. Medical Denials

Condition: The Medicaid Program denied a large number of psychiatric unit claims during fiscal year 1997. At year-end, the Medicare/Medicaid allowance for contractual adjustments included approximately \$830,000 for uncollectible Medicaid psychiatric receivables. These accounts were written off subsequent to September 30, 1997.

Resolution: Has been resolved.

4. Home Health Receivable

Condition: Home Health accounts receivable are recorded at a net value on the balance sheet without detailing the allowances which reduced these receivables to net value.

Resolution: Has been resolved.

5. Routine Revenues

Condition: Routine revenue was not reconciled to medical record days.

Resolution: Has been resolved.

6. Capital Asset System

Condition: A lotus spreadsheet is being utilized to record and depreciate assets. With personnel turnover, the assets were not being depreciated consistently each year.

Resolution: The spreadsheet is still being utilized; however, the continuity of staff has ensured that all assets are depreciated on a consistent. Matter is considered resolved.

7. Segregation of Duties

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

Resolution: Management recognizes that it is not practicable or cost effective to achieve total segregation of duties with the total number of available employees. To minimize its risk, management supervises and reviews activities on a regular basis. Matter is considered resolved.

d/b/a

JACKSON PARISH HOSPITAL STATUS OF PRIOR YEAR AUDIT FINDINGS

For the Year Ended September 30, 1998

8. Consistency in Recording

Condition: Numerous reclassification entries were needed to correct the general ledger. Medical supply charges were not being consistently recorded.

Resolution: This matter has been resolved.

9. Medicare and Medicaid Logs

Condition: Medicare and Medicaid logs were not maintained.

Resolution: This matter has been resolved.

10. Accounting Policies and Procedures Manual

Condition: An Accounting Policies and Procedures manual did not exist.

Recommendation: A complete and current accounting policies and procedures manual and chart of accounts needs to be established and maintained.

Response: The Hospital has established the chart of accounts and is updating it regularly. The Hospital is still in the process of completing its policies and procedures manual.

11. Capital Leases

Condition: In 1995, the Hospital had five capital leases which had no documentation in the board minutes of approval by the state bond commission. During 1996, the Hospital entered into two new capital leases. The Louisiana Revised Statutes require that any incurrence of debt over 90 days must be approved by the commission if certain non-appropriation clauses are not met.

Resolution: All new leases include the appropriate non-appropriation clauses.

12. Corporate Compliance Plan

Condition: In an open letter to Medicare and Medicaid providers in numerous public statements, the U.S. Health and Human Services Inspector General and others in her office have made it clear that such providers should (but are not required to) establish corporate compliance programs.

Resolution: The Hospital has developed and implemented its compliance plan.



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January 24, 2000

Board of Directors

Jackson Parish Hospital Service District No. 1

d/b/a Jackson Parish Hospital

In planning and performing our audit of the financial statements of JACKSON PARISH HOSPITAL SERVICE DISTRICT NO. 1, D/B/A JACKSON PARISH HOSPITAL for the year ended September 30, 1999, we considered its internal control structure to determine our auditing procedures for the purpose of expressing an opinion on the financial statements and not to provide assurance on the internal control structure. However, as we noted in the prior year, there were 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 Hospital's ability to record, process, summarize, and report financial data consistent with the assertions of management in the financial statements.

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Maintenance of Payroll Files/Verifying Time Cards to Payroll Registers

In testing the internal controls over the payroll function, we noted instances where the personnel files were not consistently updated so that the file contained the current wage rate. We also noted that there were slight discrepancies between the time card and the actual pay per the pay register. Examples include paying an individual for 80 hours when their time card indicated 76.43 hours, with no time allocated to vacation and a time card for 77.87 hours with the pay register at 77.67 hours. The cause of the discrepancies is the lack of someone having the availability to check the register to the time cards prior to the release of the payroll.

We recommend that the Hospital consider having an individual assigned to the review of time cards against the payroll register prior to the release of the payroll to the employees.

The Hospital's management has concurred with this finding and has appointed one individual to organize and update all payroll files. Also, an individual, independent of the payroll function, will review time cards and the payroll register for accuracy.

Board of Directors
Jackson Parish Hospital
Page 2

A material weakness is a reportable condition in which the design or operation of one or more of the 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, the reportable condition described above is not believed to be a material weakness.

This report is intended solely for the information and use of the audit committee, management, and others within the organization.

We appreciate the confidence you have placed in us by allowing us to serve JACKSON PARISH HOSPITAL SERVICE DISTRICT NO. 1, D/B/A JAKSON PARISH HOSPITAL. If we can assist you in any way with the above, please do not hesitate to contact us.

Very truly yours,

LaPORTE, SEHRT, ROMIG & HAND

Donald U. Frutiger, Jr.

Certified Public Accountant

Donald U. Futy &