# DAVID RAINES COMMUNITY HEALTH CENTER, INC.

## AUDITED FINANCIAL STATEMENTS

## FOR THE 18 MONTHS ENDED DECEMBER 31, 2021

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## INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of David Raines Community Health Center, Inc. Shreveport, Louisiana

#### Opinion

We have audited the accompanying financial statements of David Raines Community Health Center, Inc. (a nonprofit organization), which comprise the statement of financial position as of December 31, 2021, and the related statements of operations and changes in net assets, functional expenses, and cash flows for the eighteen months then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of David Raines Community Health Center, Inc. as of December 31, 2021, and the changes in its net assets and its cash flows for the eighteen months then ended in accordance with accounting principles generally accepted in the United States of America.

#### **Basis for Opinion**

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of David Raines Community Health Center, Inc. and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

#### **Responsibilities of Management for the Financial Statements**

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about David Raines Community Health Center, Inc.'s ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

#### Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with generally accepted auditing standards, we:

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

#### **Other-Matters**

#### Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying supplementary information on pages 20 - 21 is presented for purposes of additional analysis and is not a required part of the financial statements. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects, in relation to the financial statements as a whole.

#### Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated December 15, 2022, on our consideration of David Raines Community Health Center, Inc.'s internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of David Raines Community Health Center, Inc.'s internal control over financial report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering David Raines Community Health Center, Inc.'s internal control over financial reporting and compliance.

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

Brown, { Ridgeland, Mississippi

December 15, 202

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## EXHIBIT I

# DAVID RAINES COMMUNITY HEALTH CENTER, INC. Statement of Financial Position For the 18 Months Ended December 31, 2021

# ASSETS

Current Assets: Cash and cash equivalents Certificates of deposit	\$ 3,726,488 300,115
Patient care receivables, less allowance of \$157,843 for doubtful accounts Grants receivable Accounts receivable - other Inventory - pharmacy Prepaid expenses Total Current Assets	617,649 97,605 88,087 123,325 <u>76,256</u> 5,029,525
Fixed Assets: Land Building and improvements Furniture and equipment Vehicles Less: Accumulated depreciation Net Fixed Assets	88,874 5,061,712 2,349,304 <u>466,982</u> 7,966,872 (4,483,810) <u>3,483,062</u>
Other Assets: Other Assets	22,200
TOTAL ASSETS	\$ <u>8,534,787</u>

## EXHIBIT I (Continued)

## DAVID RAINES COMMUNITY HEALTH CENTER, INC. Statement of Financial Position For the 18 Months Ended December 31, 2021

## LIABILITIES AND NET ASSETS

Current Liabilities: Accounts payable Line of credit payable Payroll taxes payable Other payroll deductions payable Salaries payable Accrued annual leave Other current liabilities Refundable advances Total Current Liabilities	\$	219,467 299,764 246 39,215 99,716 272,262 156,754 <u>48,770</u> 1,136,194
Long-Term Liabilities Total Long-Term Liabilities	-	-
Total Liabilities	-	1,136,194
Net Assets without Donor Restrictions:		
Undesignated (Operating) Section 329/330(d) reserve Net Assets with Donor Restrictions Total Net Assets		7,018,593 300,000 <u>80,000</u> 7,398,593
TOTAL LIABILITIES AND NET ASSETS	\$_	8,534,787

## EXHIBIT II

# DAVID RAINES COMMUNITY HEALTH CENTER, INC. Statement of Operations and Changes In Net Assets For the 18 Months Ended December 31, 2021

SUPPORT AND REVENUES	Without Donor Restrictions	With Donor Restrictions	TOTAL
Support: Grants and contracts Net assets released from restrictions Satisfaction of program restriction Total Support	\$ 8,127,920 	80,000 (225,000) (145,000)	\$ 8,207,920  
Revenue: Health care services, net of charity, bad debts and contractual adjustments of \$(14,989,090) 340B income Interest income Gain on sale of asset Other income Total Revenue	12,242,540 145,570 37,558 17,345 <u>2,407,215</u> 14,850,228	- - - - - -	12,242,540 145,570 37,558 17,345 <u>2,407,215</u> 14,850,228
TOTAL SUPPORT AND REVENUES	23,203,148	(145,000)	23,058,148
EXPENSES			
Program Services Health care services Total Program Services	<u>    14,727,558</u> 14,727,558		<u>14,727,558</u> 14,727,558
Supporting Services Management and general Fundraising Total Supporting Services	7,014,307 700 7,015,007		7,014,307 700 7,015,007
TOTAL EXPENSES	21,742,565		21,742,565
Change in Net Assets	1,460,583	(145,000)	1,315,583
Net Assets, Beginning of Year	5,858,010	225,000	6,083,010
NET ASSETS, END OF YEAR	\$ <u>7,318,593</u>	80,000	\$ <u>7,398,593</u>

# DAVID RAINES COMMUNITY HEALTH CENTER, INC. Statement of Functional Expenses For the 18 Months Ended December 31, 2021

	PROGRAM	SERVICES	SUPPORT	ING SERVICES	
	Health Care	Total Program Services	Management and General	Fundraising	TOTAL
	Services	Services	and General	Fullulaising	TOTAL
Personnel	\$ 8,780,430	8,780,430	2,858,932	-	\$ 11,639,362
Fringe benefits	663,084	663,084	1,160,931	-	1,824,015
Travel	32,170	32,170	10,240	-	42,410
Supplies	2,689,256	2,689,256	287,575	-	2,976,831
Equipment rental	14,735	14,735	75	-	14,810
Contractual	745,895	745,895	1,282,154	-	2,028,049
Legal	-	-	-	-	
Dues and subscriptions	15,025	15,025	73,803	-	88,828
Utilities	139,465	139,465	14,258	-	153,723
Repairs and maintenance	864,634	864,634	182,133	-	1,046,767
Insurance	-		127,247	-	127,247
Staff recruitment	9,000	9,000	851	<del></del>	9,851
Public relations	1,729	1,729	38,145	-	39,874
Security	9,044	9,044	4,373	-	13,417
Training and development	-	-	2,651	-	2,651
Telephone	461,757	461,757	164,415	-	626,172
Postage	12,269	12,269	12,984	-	25,253
Printing	-		3,684	-	3,684
Space cost	52,165	52,165	32,838		85,003
Interest	10,057	10,057	18,496	· -	28,553
Bank charges	4,052	4,052	14,170	-	18,222
Food and beverage	14,627	14,627	13,104	<b></b>	27,731
Licenses	20,566	20,566	-	-	20,566
Fundraising	-	-	-	700	700
Property and other taxes	141,352	141,352	101	-	141,453
Stipends	43,688 -	43,688	11,325	-	55,013
Other	2,558	2,558	171,412	-	173,970
Total expenses before					
depreciation	14,727,558	14,727,558	6,485,897	700	21,214,155
Depreciation			528,410		528,410
Total Expenses	\$ <u>14,727,558</u>	14,727,558	7,014,307	700	\$

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

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EXHIBIT IV

# DAVID RAINES COMMUNITY HEALTH CENTER, INC. Statement of Cash Flows For the 18 Months Ended December 31, 2021

## CASH FLOWS USED FOR OPERATING ACTIVITIES:

Changes In Net Assets Adjustments to reconcile changes in net	\$	1,315,583
assets to net cash provided by (used in) operating activities:		
Depreciation expense		386,516
Reclassification of fixed assets		243,064
Decrease (increase) in: Patient care receivables		(62,867)
Inventory		44,802
Other receivable		44,748
Grants receivable		17,220
Prepaid expenses		(76,256)
Increase (decrease) in:		37,837
Accounts payable		246
Payroll taxes payable Other payroll deductions payable		(5,517)
Refundable advances		(1,349,827)
Other liabilities		(52,404)
Accrued annual leave		37,329
Accrued salary payable	_	(218,688)
NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES	_	361,786
CASH FLOWS FROM INVESTING ACTIVITIES Acquisition of fixed assets	_	(628,228)
NET CASH PROVIDED BY (USED IN) INVESTING ACTIVITIES	_	(628,228)
CASH FLOWS FROM FINANCING ACTIVITIES		
Principal payments on line of credit		(70,464)
Principal payments on notes payable	-	(14,372)
NET CASH PROVIDED BY (USED IN) FINANCING ACTIVITIES	_	(84,836)
NET INCREASE (DECREASE) IN CASH		(351,278)
CASH, BEGINNING OF YEAR	-	4,077,766
CASH, END OF YEAR	\$_	3,726,488
Supplemental Disclosure of Cash Flow Information:		
Cash paid during the year for:		
Interest expense	\$_	28,553

#### NOTE 1 - ABOUT THE ORGANIZATION

David Raines Community Health Center, Inc. (DRCHC), a non-profit corporation was incorporated in the State of Louisiana on May 19, 1992. DRCHC was incorporated for the purpose of delivering comprehensive primary health care services to all individuals and families in the surrounding contiguous areas.

The fiscal year of DRCHC is July 1 through June 30.

Effective January 1, 2021, the fiscal year of DRCHC will be January 1 through December 31.

## NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

- A. <u>Basis of Accounting</u> The financial statements of David Raines Community Health Center, Inc., are presented on the accrual basis of accounting.
- B. <u>Basis of Presentation</u> The Organization is required to report information regarding its financial position and operations according to two classes of net assets: net assets with donor restrictions and net assets without donor restrictions. In addition, the Organization is required to present a statement of functional expenses and cash flows.
- C. <u>Cash and Cash Equivalents</u> For purposes of the statement of cash flows, cash equivalents with original maturities of three months or less that are not restricted for specific purposes.
- D. <u>Donated Property and Equipment</u> Donations of property and equipment are recorded as support at their estimated fair value at the date of donation. Such donations are reported as net assets without donor restrictions unless the donor has restricted the donated asset to a specific purpose. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used to acquire property and equipment are reported as restricted support. Absent donor stipulations regarding how long those donated assets must be maintained, the Organization reports expirations of donor restrictions when the donated or acquired assets are placed in service as instructed by the donor. The Organization reclassifies net assets with donor restrictions to net assets without donor restrictions at that time.
- E. <u>Donated Services</u> Donated services are recognized as contributions in accordance with FASB ASC 958-605-30-4, Accounting for Contributions Received and Contributions Made, if the services (a) create or enhance nonfinancial assets or (b) require specialized skills, are performed by people with those skills, and would otherwise be purchased by the Center.
- F. <u>Expense Allocation</u> The cost of providing various programs and other activities have been summarized on a functional basis in the Statement of Operations and Changes in Net Assets and in the Statement of Functional Expenses. Certain costs attributable to more than one function have been allocated based on various methods including square footage and percent of time dedicated to each function.

## NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

- G. <u>Fund Accounting</u> The accounts of the Organization are maintained in accordance with the principles of fund accounting. Under fund accounting, resources for various purposes are classified for accounting and reporting purposes into funds established according to their nature and purpose. Separate accounts are maintained for each fund; however, in the accompanying financial statements, funds that have similar characteristics have been combined into fund groups.
- H. <u>Property and Equipment</u> Property and equipment are carried at cost or, if donated, at the approximate fair value at the date of donation. Depreciation is computed using primarily the straight-line method. Assets acquired with a unit cost of \$5,000 is capitalized and depreciated over their estimated useful lives.

The Federal Government has a reversionary interest in property purchased with federal funds. Its disposition, as well as any disposition proceeds is subject to federal regulations. The use of assets purchased with federal funds is limited to the purposes intended by the funding source.

- I. <u>Restricted and Unrestricted Revenue and Support</u> Support that is restricted by the donor is reported as an increase in net assets without donor restrictions if the restriction expires in the reporting period in which the support is recognized. All other donor-restricted support is reported as an increase in net assets with donor restrictions, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), net assets with donor restriction are reclassified to net assets without donor restrictions and reported in the Statement of Operations and Changes in Net Assets as net assets released from restrictions. Federal grant awards are classified as refundable advances until expended for the purposes of the grants since they are conditional promises to give.
- J. <u>Employees' Annual Leave</u> DRCHC charges annual leave earned by employees which has not been used by them at the end of a period to the period that the leave is earned.
- K. <u>Estimates</u> The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.
- L. <u>Patient Service Fees</u> Revenue for services rendered to patients are recorded at standard rates established by the Organization. The difference between standard rates and the amounts collected from third-party payors and patients qualifying as Poverty Patients is charged as an adjustment to gross revenues.
- M. <u>Reclassifications</u> Certain accounts in the prior year financial statements have been reclassified for comparative purposes to conform with the presentation in the current year financial statements.

# NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

- N. <u>Allowance for Doubtful Accounts</u> The Organization provides an allowance for doubtful accounts based upon a review of outstanding patient receivables, historical collection information and existing economic conditions. Accounts are considered delinquent and subsequently written off as bad debts based on individual credit evaluation and specific circumstances of the account.
- O. <u>Classification of Net Assets</u> Net Assets of DRCHC are classified based on the presence or absence of donor-imposed restrictions. Net Assets are comprised of two groups as follows:
  - a) <u>Net Assets Without Donor Restrictions</u> Amounts that are not subject to usage restrictions based on donor-imposed requirements. This class also includes assets previously restricted where restrictions have expired or been met.
  - b) <u>Net Assets With Donor Restrictions</u> Assets subject to usage limitations based on donorimposed or grantor restrictions. These restrictions may be temporary or may be based on a particular use. Restrictions may be met by the passage of time or by actions of the organization. Certain restrictions may need to be maintained in perpetuity.

## NOTE 3 - FINANCIAL INSTRUMENTS

The following methods and assumptions were used by the Organization in estimating its fair value disclosures for financial instruments:

<u>Cash and cash equivalents</u>: the carrying amounts reported in the statement of financial position approximate fair values because of the short maturities of those instruments.

The estimated fair values of the Organization's financial instruments, none of which are held for trading purposes, are as follows:

	Carrying	<b>F</b> • • • •
Financial assets:	Amount	Fair Value
Cash and cash equivalents	\$3,726,488	\$3,726,488
Certificates of deposit	\$ 300,115	\$ 300,115
Financial liabilities:	<b>*</b>	¢ 000 704
Line of credit payable	\$ 299,764	\$ 299,764

## NOTE 4 - CONCENTRATIONS OF CREDIT RISK ARISING FROM DEPOSITS IN EXCESS OF INSURED LIMITS

The Organization maintains its cash balances in four (4) financial institutions located in Shreveport, Louisiana. The balances are insured by the Federal Deposit Insurance Corporation up to \$250,000. At December 31, 2021, the Organization had an uninsured cash balance of \$3,557,801. The Organization has not experienced any losses in such accounts and management believes it is not exposed to any significant credit risk on its cash and cash equivalents.

#### NOTE 5 - LIQUIDITY AND AVAILABILITY

David Raines Community Health Centers, Inc. maintains liquid financial assets to cover one hundred fortyfour (144) days of general expenditures as of December 31, 2021. The Organization manages its liquidity and reserves following three guiding principles: to operate with financial prudence and stability; to maintain adequate liquid assets to meet short-term operating needs; and to maintain sufficient liquid assets to ensure that long-term obligations are properly met.

The Organization forecasts its future cash flows on a daily basis and monitors liquidity daily and monthly. Cash reserves invested are monitored and evaluated quarterly. Financial assets in excess of daily cash requirements are invested in certificates of deposit. The Organization also maintains an open line of credit with Capital One Bank.

The following table reflects the Organization's financial assets as of December 31, 2021 reduced by amounts that are not available to meet general expenditures within one year of the statement of financial position date either because of contractual restrictions or internal board designations.

Financial assets available for general expenditures, that is, without donor or other restrictions limiting their use, within one year of the balance sheet date, comprise the following:

		2021
Cash and cash equivalents	\$	3,726,488
Certificates of Deposit		300,115
Patient receivable		600,557
Pharmacy receivable		17,092
Grants Receivable	_	97,605
Total financial assets	-	4,741,857
Financial assets available to meet cash needs for general		i co. a a estadore

expenditures within one year

\$<u>4,741,857</u>

# NOTE 6 - PATIENT AND PHARMACY RECEIVABLES AND RELATED ALLOWANCE FOR DOUBTFUL ACCOUNTS

Patient and pharmacy accounts receivable, prior to adjustment for the allowance for doubtful accounts, is summarized as follows at December 31, 2021:

Accounts receivable:	Amount		
Patients	\$	138,815	
Government		366,923	
Other		269,754	
	\$	775,492	

Allowance for doubtful accounts is summarized as follows at December 31, 2021

Allowance :	Amount		
Patients	\$ 51,803		
All Other	106,040		
	\$ 157,843		

## NOTE 7 - PATIENT SERVICE REVENUE

A summary of patient service revenue, net of contractual adjustments and discounts, is as follows at December 31, 2021:

Patient Service Revenue	Amount
Patient Service Revenue	\$ 27,231,630
Less: Contractual adjustment under third-party	
reimbursement program and discounts	(13,984,607)
Provision for bad debts	<u>(1,004,483</u> )
Net Patient Service Revenue	\$ <u>12,242,540</u>

#### NOTE 8 - FIXED ASSETS

The following is a summary schedule of fixed assets and related accumulated depreciation at December 31, 2021:

Assets		Cost
Land	\$	88,874
Buildings and Improvements		5,061,712
Furniture and Equipment	:	2,349,304
Vehicles		466,982
Total Fixed Assets		7,966,872
Less: Accumulated Depreciation	_(-	4, <u>483,810</u> )
Net Fixed Assets	\$	3,483,062

Depreciation expense for the 18 months ended December 31, 2021 amounted to \$386,516.

#### NOTE 9 - CORPORATE INCOME TAXES

The Organization is exempt from corporate Federal income taxes under Section 501(c)(3) of the Internal Revenue Code and from state income taxes. Therefore, no provision has been made for Federal or state corporate income taxes in the accompanying financial statements.

The Organization has analyzed its tax positions taken for filings with the Internal Revenue Service. It believes that its tax filing positions will be sustained upon examination and does not anticipate any adjustments that would result in a material adverse effect on its financial condition, results of operations, or cash flows. The Organization's federal and state income tax returns for 2018, 2019, and 2020 are subject to examination by the federal, state, and local taxing authorities, generally for three years after they are filed.

#### NOTE 10 - RETIREMENT PLAN

The Organization has a Section 403(b) retirement annuity plan on all eligible employees. Currently, the Organization contributes to the plan three percent (3%) of gross wages. Each employee is allowed to contribute up to six percent (6%) of gross wages. The retirement expense for the 18 months ended December 31, 2021 is \$174,658.

#### NOTE 11 - COMMITMENT AND CONTINGENCIES

#### Annual Leave

The cost of employee's unused annual leave at December 31, 2021 in the amount of \$272,262 is included in the financial statements. See Note 2.J. above.

## NOTE 12 - SUMMARY OF FUNDING AND SUPPORT

David Raines Community Health Center's operations are funded through restricted grants from the U.S. Department of Health and Human Services. Other grants and contracts are received from state and local government agencies. The grants and contracts for the current period are shown below.

Source	Grant Number	Period	 Amount .
U.S. Department of HHS (Health Center Cluster) U.S. Department of HHS - CARES Act Grant U.S. Department of HHS - Covid Testing Grant U.S. Department of HHS - Covid - 19 Grant U.S. Department of HHS - American Rescue Plan U.S. Department of HHS - Provider Relief Grant	H80CS00720 H8DCS35825 H8EC38772 H8CCS34941 C8ECS44386 N/A	7/1/20 - 12/31/21 7/1/20 - 12/31/21 7/1/20 - 12/31/21 7/1/20 - 12/31/21 7/1/20 - 12/31/21 7/1/20 - 12/31/21 7/1/20 - 12/31/21	\$ 6,235,639 631,517 124,672 32,427 225,507 355,609
U.S. Department of HHS - Health Center Infrastructure Support	H8F41274	7/1/20 - 12/31/21	4,728
Louisiana State Department of Health and Hospitals (WIC) Christus Health Other Grants TOTAL	720173 N/A N/A	7/1/20 - 12/31/21 7/1/20 - 12/31/21 7/1/20 - 12/31/21	\$ 398,805 80,000 <u>119,016</u> 8,207,920

## NOTE 13 - BANK LINE OF CREDIT PAYABLE

David Raines Community Health Center, Inc. has available a secured line-of-credit agreement with Capital One Bank in which David Raines Community Health Center, Inc. may borrow up to \$500,000. Borrowing under the line bears interest at 3.8%. As of December 31, 2021, David Raines Community Health Center, Inc.'s outstanding balance on the line-of-credit was \$299,764.

## NOTE 14 - NET ASSETS WITH DONOR RESTRICTIONS

Net assets with donor restrictions subject to expenditures for a specified purpose are as follows at December 31, 2021:

Renovation/Operations costs for school based clinics	
Christus Health	\$ 80,000
TOTALS	\$80,000

#### NOTE 15 - REFUNDABLE ADVANCES

The Organization records grant awards accounted for as exchange transactions as refundable advances until related services are performed, at which time they are recognized as revenue. The activity in the refundable advance account is reported as follows:

Grayson Foundation Grant	\$ 48,770
Refundable advances, end of year	\$ 48,770

## NOTE 16 - LITIGATION

David Raines Community Health Center, Inc. maintains general liability, property, fidelity, managed care professional liability, directors and officers and other insurance coverage in amounts the Organization believes to be adequate. The Organization requires contracting health care providers to maintain malpractice insurance coverage in amounts customary in the industry.

In the ordinary course of its business, David Raines Community Health Center, Inc. is a party to claims and legal actions by enrollees, providers, and others. After consulting with legal counsel, the Organization is of the opinion that any liability that may ultimately be incurred as a result of these claims, legal actions, audits, or investigations will not have a material adverse effect on the financial position or results of operations of David Raines Community Health Center, Inc.

## NOTE 17 - ADVERTISING

David Raines Community Health Center, Inc. uses advertising to promote its programs among the communities it serves. The production costs of advertising are expensed as incurred. During the 18 months ended December 31, 2021, advertising cost totaled \$43,449.

# NOTE 18 - CONCENTRATION OF CONTRIBUTIONS OR GRANTS

Approximately 31% of the Organization's funding is provided by direct grants from the U. S. Department of Health and Human Services.

## NOTE 19 - GRANT BALANCES AND GRANT CONDITIONS

The Organization has responsibility for expending grant funds in accordance with specified instructions from its funding sources. Any deficits resulting from over expenditures and/or questioned costs are the responsibility of the Organization.

Any unexpended grant funds at the end of the grant period may be refundable or carried over to the following period at the discretion of the funding sources. Notwithstanding the audits by independent certified public accountants, all costs included in this report remain subject to audit by the agencies providing financial support within the limits of the Uniform Guidance. The determination as to whether costs will be allowable or unallowable under the grants will be made by representatives of the funding sources having authority to make and enforce contracts.

# NOTE 20 - PAYCHECK PROTECTION PROGRAM - CONTRIBUTION REVENUE

David Raines Community Health Center, Inc. was granted a \$1,814,380 loan under the Paycheck Protection Program "PPP" administered by a Small Business Administration (SBA) approved partner. The loan is uncollateralized and is fully guaranteed by the Federal government. David Raines Community Health Center, Inc. is eligible for loan forgiveness of up to 100% of the loan, upon meeting certain requirements. David Raines Community Health Center, Inc. has initially recorded the loan as a refundable advance and will record the forgiveness in accordance with guidance for conditional contributions when there is no longer a measurable performance or other barrier and a right to return of the PPP loan or when such conditions are explicitly waived. Proceeds from the loan are eligible for forgiveness if David Raines Community Health Center, Inc. maintains employment levels during its 24-week covered period and uses the funds for certain payroll, rent, and utility expenses. Contribution revenue has been recorded for the 18-months ended December 31, 2021 in the amount of \$1,042,988.

NOTE 21 - SUBSEQUENT EVENTS

## Change in Fiscal Year

Subsequent to the current fiscal year end, the Board of Directors of David Raines Community Health Center, Inc. approved the Organization change in fiscal year from July 1 through June 30 to January 1 through December 31. This change is effective beginning January 1, 2021.

Subsequent events have been evaluated through December 15, 2022, which represents the date the financial statements were available to be issued. Subsequent events after that date have not been evaluated.

# DAVID RAINES COMMUNITY HEALTH CENTER, INC. Schedule of Expenditures of Federal Awards For the 18 Months Ended December 31, 2021

Federal Grant/ Pass-Through Grantor Program Title	Federal Assistance Listing Number	Pass-Through Grant Number	Federal Expenditures
U.S. Department of Health and Human Services			
Health Resource & Service Administration Direct Program:			
Health Centers Cluster Consolidated Health Centers	93.224	H80CS00720	\$ 1,052,919
COVID-19 Health Center Coronavirus Aid, Relief, and Economic Security (CARES) Act Funding	93.224	H8D35825	631,517
COVID-19 FY 2020 Coronavirus Supplemental Funding for Health Centers	93.224	H8C34941	32,427
COVID-19 FY 2020 Expanding Capacity for Coronavirus Testing (ECT) American Rescue Plan Act - Health Centers Affordable Care Act Grants for New and Expanded	93.224 93.224	H8E38772 H8F41274	124,672 225,507
Services Under the Health Care Program Total Health Centers Cluster	93.527	H80CS00720	<u>5,182,720</u> 7,249,762
Direct Program: Covid-19 Provider Relief Funds	93.498	N/A	<u>355,609</u> 355,609
Direct Program: American Rescue Plan - Health Center Infrastructure Support	93.526	C8ECS44386	4,728
TOTAL U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES			7,610,099
<u>U. S. Department of Agriculture</u> Pass Through State of Louisiana Department of Health and Hospitals Women, Infant & Children Grant (WIC)	10.557	720173	<u> </u>
TOTAL EXPENDITURES OF FEDERAL AWARDS			\$ <u>8,008,904</u>

## DAVID RAINES COMMUNITY HEALTH CENTER, INC. Notes to Schedule of Expenditures of Federal Awards For the 18 Months Ended December 31, 2021

#### BASIS OF PRESENTATION

The accompanying Schedule of Expenditures of Federal Awards (the "Schedule") includes the federal award activity of David Raines Community Health Center, Inc. under programs of the federal government for the 18 months ended December 31, 2021. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of David Raines Community Health Center, Inc., it is not intended to and does not present the financial position, changes in net assets, or cash flows of David Raines Community Health Center, Inc.

#### SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

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

#### INDIRECT COST RATE

David Raines Community Health Center, Inc. does not have indirect cost and has elected not to use the 10-percent *de minimis* indirect cost rate allowed under the Uniform Guidance.

# SUPPLEMENTARY INFORMATION

## DAVID RAINES COMMUNITY HEALTH CENTER, INC.

Schedule of Compensation, Benefits, Reimbursements, and Other Payments to Chief Executive Officer For the 6-Months Ended December 31, 2020

In accordance with Act 706 passed during the 2014 regular Louisiana Legislative Session, the compensation, benefits, reimbursements and other payments to the Chief Executive Officer are presented as follows:

Category	Amount	Total
Salary	\$ 101,928	
Incentive pay - (bonus)	15,901	
PTO Buy Back	8,154	
Holiday Earnings	1,631	
Scheduled PTO	2,446	
Total salary	24	\$ 130,060
Benefits:		
Health insurance	2,379	
Retirement	14,759	
Total benefits		17,138
Total Compensation, Benefits,		
Travel, and Other Expenses		\$ <u>147,198</u>

# DAVID RAINES COMMUNITY HEALTH CENTER, INC.

Schedule of Compensation, Benefits, Reimbursements, and Other Payments to Chief Executive Officer For the Year Ended December 31, 2021

In accordance with Act 706 passed during the 2014 regular Louisiana Legislative Session, the compensation, benefits, reimbursements and other payments to the Chief Executive Officer are presented as follows:

Category Salary Incentive Pay - (bonus) Holiday Earnings PTO Buy Back Retroactive Pay Scheduled PTO	Amount \$ 233,256 7,950 1,950 9,752 25,833 1,950	Total
Medical Refund Total salary	5,639	\$ 286,330
Benefits: Health insurance Retirement Total benefits	8,751 31,721	40,472
Travel: Conferences Airfare and lodging Total travel	1,482 3,227	4,709
Total Compensation, Benefits, Travel, and Other Expenses		\$ <u>331,511</u>



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

To the Board of Directors of David Raines Community Health Center, Inc. Shreveport, Louisiana

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of David Raines Community Health Center, Inc. (a nonprofit organization), which comprise the statement of financial position as of December 31, 2021, and the related statement of operations and changes in net assets, functional expenses and cash flows for the eighteen months then ended, and the related notes to the financial statements, and have issued our report thereon dated December 15, 2022.

#### Report on Internal Control Over Financial Reporting

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

Our consideration of internal control was for the limited purpose described in the preceding paragraph and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that were not identified. However, as described in the accompanying schedule of findings and questioned costs, we identified certain deficiencies in internal control that we consider to be material weaknesses and significant deficiencies.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. We consider the deficiencies described in the accompanying schedule of findings and questioned costs as items 2021-001 and 2021-002 to be material weaknesses.

A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance. We consider the deficiency described in the accompanying schedule of findings and guestioned costs as item 2021-003 to be a significant deficiency.

#### **Report on Compliance and Other Matters**

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

#### David Raines Community Health Center's Response to Findings

David Raines Community Health Center, Inc.'s response to the findings identified in our audit is described in the accompanying schedule of findings and questioned costs. David Raines Community Health Center, Inc.'s response was not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on the response.

We noted certain matters that we reported to management of David Raines Community Health Center, Inc. in a separate letter dated December 15, 2022.

#### Purpose of this Report

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

Shown

Ridgeland, Mississiopi December 15, 2022



## INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

7.

To the Board of Directors of David Raines Community Health Center, Inc. Shreveport, Louisiana

## Report on Compliance for Each Major Federal Program

#### Opinion on Each Major Federal Program

We have audited David Raines Community Health Center, Inc.'s compliance with the types of compliance requirements identified as subject to audit in the OMB *Compliance Supplement* that could have a direct and material effect on each of David Raines Community Health Center, Inc.'s major federal programs for the eighteen months ended December 31, 2021. David Raines Community Health Center, Inc.'s major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

In our opinion, David Raines Community Health Center, Inc. complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the 18 months ended December 31, 2021.

#### Basis for Opinion on Each Major Federal Program

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

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

#### **Responsibilities of Management for Compliance**

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

## Auditor's Responsibilities for the Audit of Compliance

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

In performing an audit in accordance with generally accepted auditing standards, *Government Auditing Standards*, and the Uniform Guidance, we:

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

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

#### Other Matters

The results of our auditing procedures disclosed no instances of noncompliance which are required to be reported in accordance with the Uniform Guidance.

## **Report on Internal Control over Compliance**

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

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

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

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

Brown, Eng (O. Ridgeland, Mississippi

December 15, 2022

## DAVID RAINES COMMUNITY HEALTH CENTER, INC. Summary Schedule of Prior Year Audit Findings For the 18 Months Ended December 31, 2021

## Finding 2020-001

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# SPECIAL TESTS AND PROVISIONS (SLIDING FEE SCALE)

## Condition

During our test of sliding fee patients, we noted five (5) instances out of 25 patient files reviewed in which the sliding fee discount was calculated incorrectly.

Status: Corrected

# DAVID RAINES COMMUNITY HEALTH CENTER, INC. Schedule of Findings and Questioned Costs For the 18 Months Ended December 31, 2021

## Section 1: Summary of Auditor's Results

Financial Statements:

2.	Materia	al noncompliance relating to the financial statements	3.	None
3.	Interna	I control over financial reporting:		
	a. b.	Material weaknesses identified? Significant deficiencies identified that are not cons	idered	Yes
	Б.	to be material weaknesses?		None Reported
Federa	al Awards	5:		
4.	Туре о	f auditor's report issued on compliance for major fee	deral programs:	Unmodified
5.	Interna	l control over major programs:		
	a.	Material weaknesses identified? Significant deficiencies identified that are not cons	idered	None Reported
	b.	to be material weaknesses?		None
6.	Audit f	ndings that are required to be reported in accordance Section 200.516(a)?	ce with 2 CFR	None
7.	Federa	al programs identified as major programs:		
		NAME OF PROGRAM	ASSISTANCE LISTING NUMBER	

NAME OF PROGRAM	NUMBER
Health Centers Cluster:	
Consolidated Health Centers	93.224
Affordable Care Act Grants for New and	
Expanded Services Under the Health	
Centers Program	93.527

8. The dollar threshold used to distinguish between type A and type B programs: \$750,000

9. Auditee did not qualify as a low-risk Auditee.

## DAVID RAINES COMMUNITY HEALTH CENTER, INC. Schedule of Findings and Questioned Costs For the 18 Months Ended December 31, 2021

Section 2 - Findings - Financial Statements Audit

#### 2021-001

#### BANK RECONCILIATIONS

#### Material Weakness

#### Condition

Bank reconciliations for the operating account were not reconciled monthly to the general ledger.

#### Cause

Failure to follow established procedures.

#### Effect

Significant adjustments needed to correct accounting records.

#### Criteria

Organization's Financial Policies and Procedures manual states that "Bank accounts will be reconciled to the general ledger on a monthly basis."

#### Recommendation

The Organization should strengthen internal administrative controls to ensure that bank reconcilations for all accounts are completed timely and reconciled to the general ledger on a monthly basis.

### 2021-002

## ACCOUNTS PAYABLE SUBSIDIARY NOT RECONCILED TO GENERAL LEDGER

#### Material Weakness

#### Condition

The accounts payable balance in the general ledger could not be reconciled to the subsidiary ledger.

#### Cause

Monthly reconciliations between the balance in the general ledger and the subsidiary ledger were not performed.

#### Effect

Unreconciled accounts resulting in materially inaccurate accounting records.

#### Criteria

The Organization's Financial Operating Policies manual states that the accounts payable subsidiary will be reconciled to the general ledger on a monthly basis.

#### Recommendation

In order to maintain proper control over accounts payable, we strongly recommend that the accounts payable subsidiary ledger be reconciled with the balance in the general ledger at the end of every month. If any differences exist, they should be investigated and resolved promptly.

## DAVID RAINES COMMUNITY HEALTH CENTER, INC. Schedule of Findings and Questioned Costs For the 18 Months Ended December 31, 2021

## 2021-003

#### LATE SUBMISSION OF AUDIT REPORT

#### Significant Deficiency

#### Condition

The audit report for the 18 months ended December 31, 2021 was not submitted within the regular and extended time periods required by the Louisiana Legislative Auditor.

#### Cause

A significant turnover in fiscal staff resulted in the failure to comply with the Louisiana Legislative Auditor's financial reporting requirements.

#### Effect

The Organization is not in compliance with the Louisiana Legislative Auditor's financial reporting requirements.

#### Criteria

State of Louisiana Legislative Auditor's audit financial reporting requirement (R.S. 24:513 and 24:514)."

## Auditor's Recommendation

The Organization should adopt internal administrative control procedures to ensure that all future audits are completed in a timely manner that allows for the timely submission of its annual audit to the Louisiana Legislative Auditor.

Section 3 - Findings and Questioned Costs - Major Federal Award Program Audit

NONE

## DAVID RAINES COMMUNITY HEALTH CENTER, INC. 3041 Martin Luther King Jr., Drive Shreveport, LA 71107

## **Corrective Action Plan**

David Raines Community Health Center, Inc. respectfully submits the following corrective action plan for the 18 months ended December 31, 2021.

Name and address of independent public accounting firm: Brown, Ewing & Co., 308 Highland Park Cove, Ridgeland, MS 39157.

Audit period: 18 Months Ended December 31, 2021

SECTION 2 - FINDINGS - FINANCIAL STATEMENTS AUDIT

## 2021-001

BANK RECONCILIATIONS

#### Auditor's Recommendation

The Organization should adopt internal administrative control procedures to ensure that all future audits are completed in a timely manner that allows for the timely submission of its annual audit to the Louisiana Legislative Auditor.

#### Corrective Action:

Due to staff turnover in the accounting department during the audit period, bank accounts were not consistently reconciled monthly according to policy. Now that the organization has staff stability, all bank accounts are reconciled monthly. If turnover does occur, there are procedures in place that ensure continuation of the reconciliations and written instructions explaining how to reconcile the bank accounts properly including supporting documentation and oversight.

## 2021-002

# ACCOUNTS PAYABLE SUBSIDIARY NOT RECONCILED TO GENERAL LEDGER

## Auditor's Recommendation

In order to maintain proper control over accounts payable, we strongly recommend that the accounts payable subsidiary ledger be reconciled with the balance in the general ledger at the end of every month. If any differences exist, they should be investigated and resolved promptly.

#### Corrective Action:

Due to staff turnover in the accounting department during the audit period, accounts payable sub ledger was not consistently reconciled to the general ledger monthly according to policy. Now that the organization has staff stability, the accounts payable subledger is reconciled monthly to the general ledger. If turnover does occur, there are procedures in place that ensure continuation of the reconciliations and written instructions explaining how to reconcile the accounts payable subledger to the general ledger accurately including supporting documentation and oversight.

## DAVID RAINES COMMUNITY HEALTH CENTER, INC. 3041 Martin Luther King Jr., Drive Shreveport, LA 71107

## **Corrective Action Plan**

#### 2021-003

LATE SUBMISSION OF AUDIT REPORT

#### Auditor's Recommendation

The Organization should adopt internal administrative control procedures to ensure that all future audits are completed in a timely manner that allows for the timely submission of its annual audit to the Louisiana Legislative Auditor.

### Corrective Action:

The organization will have processes implemented to ensure that the audit report will be submitted by the expected due date in compliance with regulatory guidelines and requirements.

If there are any questions regarding this plan, please contact me at (318) 227-3350.

Sincerely, <u>W. C. White, III</u> Willie C. White, III Chief Executive Officer

# DAVID RAINES COMMUNITY HEALTH CENTER, INC.

# AGREED UPON PROCEDURES REPORT

# FOR THE YEAR ENDED DECEMBER 31, 2021



## INDEPENDENT ACCOUNTANT'S REPORT ON APPLYING AGREED-UPON PROCEDURES

To the Board of Directors of David Raines Community Health Center, Inc. Shreveport, Louisiana and the Louisiana Legislative Auditor

We have performed the procedures enumerated below on the control and compliance (C/C) areas identified in the Louisiana Legislative Auditor's (LLA's) Statewide Agreed-Upon Procedures (SAUPs) for the fiscal period January 1, 2021 through December 31, 2021 David Raines Community Health Center, Inc.'s management is responsible for those C/C areas identified in the SAUPs.

David Raines Community Health Center, Inc. has agreed to and acknowledged that the procedures performed are appropriate to meet the intended purpose of the engagement, which is to perform specified procedures on the C/C areas identified in LLA's SAUPs for the fiscal period January 1, 2021 through December 31, 2021. Additionally, LLA has agreed to and acknowledged that the procedures performed are appropriate for its purposes. This report may not be suitable for any other purpose. The procedures performed may not address all the items of interest to a user of this report and may not meet the needs of all users of this report and, as such, users are responsible for determining whether the procedures performed are appropriate for their purposes.

The procedures and associated findings are as follows:

#### Written Policies and Procedures

- 1. Obtain and inspect the entity's written policies and procedures and observe whether they address each of the following categories and subcategories if applicable to public funds and the entity's operations:
  - a) *Budgeting*, including preparing, adopting, monitoring, and amending the budget.
  - b) *Purchasing*, including (1) how purchases are initiated: (2) how vendors are added to the vendor list; (3) the preparation and approval process of purchase requisitions and purchase orders; (4) controls to ensure compliance with the Public Bid Law; and (5) documentation required to be maintained for all bids and price quotes.
  - c) *Disbursements*, including processing, reviewing, and approving.
  - d) Receipts/Collections, including receiving, recording, and preparing deposits. Also, policies and procedures should include management's actions to determine the completeness of all collections for each type of revenue or agency fund additions (e.g., periodic confirmation with outside parties, reconciliation to utility billing after cutoff procedures, reconciliation of traffic ticket number sequences, agency fund forfeiture monies confirmation).

- e) *Payroll/Personnel*, including (1) payroll processing, and (2) reviewing and approving time and attendance records, including leave and overtime worked, and (3) approval process for employee(s) rate of pay or approval and maintenance of pay rate schedules.
- f) *Contracting*, including (1) types of services requiring written contracts, (2) standard terms and conditions, (3) legal review, (4) approval process, and (5) monitoring process.
- g) Credit Cards (and debit cards, fuel cards, P-Cards, if applicable), including (1) how cards are to be controlled, (2) allowable business uses, (3) documentation requirements, (4) required approvers of statements, and (5) monitoring card usage (e.g., determining the reasonableness of fuel card purchases).
- h) *Travel and Expense Reimbursement*, including (1) allowable expenses, (2) dollar thresholds by category of expense, (3) documentation requirements, and (4) required approvers.
- i) *Ethics*, including (1) the prohibitions as defined in Louisiana Revised Statute (R.S.) 42:1111-1121,
   (2) actions to be taken if an ethics violation takes place, (3) system to monitor possible ethics violations, and (4) a requirement that documentation is maintained to demonstrate that all employees and officials were notified of any changes to the entity's ethics policy.
- j) Information Technology Disaster Recovery/Business Continuity, including (1) identification of critical data and frequency of data backups, (2) storage of backups in a separate physical location isolated from the network, (3) periodic testing/verification that backups can be restored, (4) use of antivirus software on all systems, (5) timely application of all available system and software patches/updates, and (6) identification of personnel, processes, and tools needed to recover operations after a critical event.
- k) **Sexual Harassment**, including R.S. 42:342-344 requirements for (1) agency responsibilities and prohibitions, (2) annual employee training, and (3) annual reporting.

#### No exceptions were found as a result of this procedure.

#### Board or Finance Committee

- 2. Obtain and inspect the board/finance committee minutes for the fiscal period, as well as the board's enabling legislation, charter, bylaws, or equivalent document in effect during the fiscal period, and:
  - a) Obtain and inspect the board/finance committee minutes for the fiscal period, as well as the board's enabling legislation, charter, bylaws, or equivalent document.

#### No exceptions were found as a result of this procedure.

#### Bank Reconciliations

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

c) Management has documentation reflecting it has researched reconciling items that have been outstanding for more than 12 months from the statement closing date, if applicable.

We selected the December 2021 bank reconciliations to review. We noted that all selected bank account reconciliations were prepared within 2 months of the closing date and there were no reconciling items that were outstanding more than 12 months from the statement date. The bank reconciliations also included evidence that they were reviewed by management who does not handle cash, post ledgers, or issue checks.

# Collections

4. Obtain a listing of deposit sites for the fiscal period where deposits for cash/checks/money orders (cash) are prepared and management's representation that the listing is complete. Randomly select 5 deposit sites (or all deposit sites if less than 5).

# We obtained a list of five deposit sites from management (along with management's representation that the list is complete).

5. For each deposit site selected, obtain a listing of collection locations and management's representation that the listing is complete. Randomly select one collection location for each deposit site (i.e. 5 collection locations for 5 deposit sites), obtain and inspect written policies and procedures relating to employee job duties (if no written policies or procedures, inquire of employees about their job duties) at each collection location, and observe that job duties are properly segregated at each collection location such that:

For each deposit sites, there is one collection location. We obtained a list of five collection locations from management (along with management's representation that the list is complete) and we selected the five collection locations.

a) Employees that are responsible for cash collections do not share cash drawers/registers.

# We obtained and inspected the Center's written policies and procedures and verified that the Receptionist is responsible for collecting patient fees and does not share cash drawers/registers with other employees.

 b) Each employee responsible for collecting cash is not responsible for preparing/making bank deposits, unless another employee/official is responsible for reconciling collection documentation (e.g. pre-numbered receipts) to the deposit.

We obtained and inspected the Center's written policies and procedures and verified that the Receptionist (employee responsible for collecting cash) is not the same person preparing/making bank deposits (Billing Specialist).

c) Each employee responsible for collecting cash is not responsible for posting collection entries to the general ledger or subsidiary ledgers, unless another employee/official is responsible for reconciling ledger postings to each other and to the deposit.

We obtained and inspected the Center's written policies and procedures and verified the Receptionist (employee responsible for collecting cash) is not the same person posting collection entries to the general ledger or subsidiary ledgers (Billing Specialist).

d) The employee(s) responsible for reconciling cash collections to the general ledger and/or subsidiary ledgers, by revenue source and/or agency fund additions are not responsible for collecting cash, unless another employee verifies the reconciliation.

We obtained and inspected the Center's written policies and procedures and verified that the Receptionist (employee responsible for collecting cash) is not the same employee responsible for reconciling cash collections to the general ledger and/or subsidiary ledgers (Senior Accountant).

 Obtain from management a copy of the bond or insurance policy for theft covering all employees who have access to cash. Observe the bond or insurance policy for theft was enforced during the fiscal period.

# No exceptions were found as a result of this procedure.

- 7. Randomly select two deposit dates for each of the 5 bank accounts selected for procedure #3 under "Bank Reconciliations" above (select the next deposit date chronologically if no deposits were made on the dates randomly selected and randomly select a deposit if multiple deposits are made on the same day). Alternately, the practitioner may use a source document other than bank statements when selecting the deposit dates for testing, such as a cash collection log, daily revenue report, receipt book, etc. Obtain supporting documentation for each of the 10 deposits and:
  - a) Observe that receipts are sequentially pre-numbered.

# <u>Receipts were printed electronically from the billing system (Nexgen). We haphazardly</u> selected two deposit dates for the five selected bank accounts.

b) Trace sequentially pre-numbered receipts, system reports, and other related collection documentation to the deposit slip.

# No exceptions were found as a result of this procedure.

c) Trace the deposit slip total to the actual deposit per the bank statement.

# No exceptions were found as a result of this procedure.

d) Observe that the deposit was made within one business day of receipt at the collection location (within one week if the depository is more than 10 miles from the collection location or the deposit is less than \$100 and the cash is stored securely in a locked safe or drawer).

# For the ten tested collections, there were two instances in which the deposits were made more than one day after the day of collection with having the depository less than 10 miles away.

# **MANAGEMENT'S RESPONSE:**

Due to staff turnover at various sites, there were gaps in the process and procedures for bank deposits. The organization has filled vacant positions, completed staff training and will monitor the process for completing bank deposits in accordance with policy and procedure.

e) Trace the actual deposit per the bank statement to the general ledger.

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

8. Obtain a listing of locations that process payments for the fiscal period and management's representation that the listing is complete. Randomly select 5 locations (or all locations if less than 5).

# <u>Management provided the requested information, along with management's representation</u> that the listing is complete. There was only one location.

- 9. For each location selected under #8 above, obtain a listing of those employees involved with nonpayroll purchasing and payment functions. Obtain written policies and procedures relating to employee job duties (if the agency has no written policies and procedures, inquire of employees about their job duties), and observe that job duties are properly segregated such that:
  - a) At least two employees are involved in initiating a purchase request, approving a purchase, and placing an order/making the purchase.

# During observation, there are at least two employees are involved in initiating a purchase request (Requestor), approving a purchase (Procurement Officer), and placing an order/making the purchase (Procurement Officer).

b) At least two employees are involved in processing and approving payments to vendors.

# During observation, there are at least two employees are involved in processing (Accounting Manager) and approving payments to vendors (CFO/CEO).

c) The employee responsible for processing payments is prohibited from adding/modifying vendor files, unless another employee is responsible for periodically reviewing changes to vendor files.

# During observation, the employee responsible for processing payments (Accounting Manager) is not the same employee adding/modifying vendor files (CFO).

d) Either the employee/official responsible for signing checks mails the payment or gives the signed checks to an employee to mail who is not responsible for processing payments.

### <u>During observation, the employee/official responsible for signing checks (CEO/Board</u> <u>Member) gives the payment to an employee to mail the payment (Accounts Payable</u> <u>Clerk) is not responsible for processing payments (Accounting Manager).</u>

- 10. For each location selected under #8 above, obtain the entity's non-payroll disbursement transaction population (excluding cards and travel reimbursements) and obtain management's representation that the population is complete. Randomly select 5 disbursements for each location, obtain supporting documentation for each transaction, and:
  - a) Observe whether the disbursement matched the related original itemized invoice and supporting documentation indicates deliverables included on the invoice were received by the entity.

# No exceptions were found as a result of this procedure.

b) Observe whether the disbursement documentation included evidence (e.g., initial/date, electronic logging) of segregation of duties tested under #9, as applicable.

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

11. Obtain from management a listing of all active credit cards, bank debit cards, fuel cards, and P-cards (cards) for the fiscal period, including the card numbers and the names of the persons who maintained possession of the cards. Obtain management's representation that the listing is complete.

<u>Management provided a listing of all active credit/debit/fuel cards for FY21, including the card</u> <u>numbers and the names of the persons who maintained possession of the cards.</u> <u>Management also represented that the listing was complete.</u>

- 12. Using the listing prepared by management, randomly select 5 cards (or all cards if less than 5) that were used during the fiscal period. Randomly select one monthly statement or combined statement for each card (for a debit card, randomly select one monthly bank statement), obtain supporting documentation, and:
  - a) Observe whether there is evidence that the monthly statement or combined statement and supporting documentation (e.g., original receipts for credit/debit card purchases, exception reports for excessive fuel card usage) was reviewed and approved, in writing (or electronically approved), by someone other than the authorized card holder. [Note: Requiring such approval may constrain the legal authority of certain public officials (e.g., mayor of a Lawrason Act municipality); these instances should not be reported.]

During our testing of the selected monthly statements/combined statements, we noted that none of the monthly statements were reviewed and approved, in writing, by someone other than the authorized card holder.

# MANAGEMENT RESPONSE:

Due to staff turnover in the accounting department during the audit period, there were laps of the review/approval of monthly credit card statements by someone other than the authorized card holders. The vacancies in the accounting department have been filled. Statements are reviewed/approved by the Controller (not an authorized cardholder). In the event of future vacancies, there are written procedures in place that ensure continuation of the review/approval of statements by someone other than an authorized cardholder.

b) Observe that finance charges and late fees were not assessed on the selected statements.

# <u>Per review of the monthly statements, there were no finance charges or late fees assessed</u> on the cards selected for testing.

13. Using the monthly statements or combined statements selected under #12 above, <u>excluding fuel</u> <u>cards</u>, randomly select 10 transactions (or all transactions if less than 10) from each statement, and obtain supporting documentation for the transactions (i.e. each card should have 10 transactions subject to testing). For each transaction, observe it is supported by (1) an original itemized receipt that identifies precisely what was purchased, (2) written documentation of the business/public purpose, and (3) documentation of the individuals participating in meals (for meal charges only). For missing receipts, the practitioner should describe the nature of the transaction and note whether management had a compensating control to address missing receipts, such as a "missing receipt statement" that is subject to increased scrutiny.

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

14. Obtain from management a listing of all travel and travel-related expense reimbursements during the fiscal period and management's representation that the listing or general ledger is complete. Randomly select 5 reimbursements, obtain the related expense reimbursement forms/prepaid expense documentation of each selected reimbursement, as well as the supporting documentation. For each of the 5 reimbursements selected:

# Management provided a listing of all travel and travel-related expense reimbursements for FY21. Management also represented that the listing was complete.

 a) If reimbursed using a per diem, observe the approved reimbursement rate is no more than those rates established either by the State of Louisiana or the U.S. General Services Administration (www.gsa.gov).

#### No exceptions were found as a result of this procedure.

b) If reimbursed using actual costs, observe that the reimbursement is supported by an original itemized receipt that identifies precisely what was purchased.

#### No exceptions were found as a result of this procedure.

c) Observe each reimbursement is supported by documentation of the business/public purpose (for meal charges, observe that the documentation includes the names of those individuals participating) and other documentation required by written policy (procedure #1h).

#### No exceptions were found as a result of this procedure.

d) Observe each reimbursement was reviewed and approved, in writing, by someone other than the person receiving reimbursement.

#### No exceptions were found as a result of this procedure.

#### Contracts

15. Obtain from management a listing of all agreements/contracts for professional services, materials and supplies, leases, and construction activities that were initiated or renewed during the fiscal period. *Alternately, the practitioner may use an equivalent selection source, such as an active vendor list.* Obtain management's representation that the listing is complete. Randomly select 5 contracts (or all contracts if less than 5) from the listing, <u>excluding the practitioner's contract</u>, and:

<u>Management provided a listing of all agreements/contracts for professional services, materials</u> and supplies, leases, and construction activities that were initiated or renewed during the fiscal period. Management also represented that the listing was complete.

a) Observe whether the contract was bid in accordance with the Louisiana Public Bid Law (e.g., solicited quotes or bids, advertised), if required by law.

#### <u>Management did not adopt neither the LA Public Bid Law nor the LA Procurement Code.</u> <u>Therefore, not required by law to follow.</u>

b) Observe whether the contract was approved by the governing body/board, if required by policy or law (e.g. Lawrason Act, Home Rule Charter).

# Management provided documentation that contracts were approved by the governing board.

c) If the contract was amended (e.g. change order), observe that the original contract terms provided for such an amendment and that amendments were made in compliance with the contract terms (e.g., if approval is required for any amendment, was approval documented)..

# During our review of contracts, we noted there were no contracts that were amended.

d) Randomly select one payment from the fiscal period for each of the 5 contracts, obtain the supporting invoice, agree the invoice to the contract terms, and observe the invoice and related payment agreed to the terms and conditions of the contract.

# No exceptions were found as a result of this procedure.

# Payroll and Personnel

16. Obtain a listing of employees and officials employed during the fiscal period and management's representation that the listing is complete. Randomly select 5 employees or officials, obtain related paid salaries and personnel files, and agree paid salaries to authorized salaries/pay rates in the personnel files.

# <u>Management provided a listing of all employees and officials employed</u> <u>during the fiscal</u> <u>period. Management also represented that the listing was complete.</u>

- 17. Randomly select one pay period during the fiscal period. For the 5 employees or officials selected under #16 above, obtain attendance records and leave documentation for the pay period, and:
  - a) Observe all selected employees or officials documented their daily attendance and leave (e.g., vacation, sick, compensatory). (Note: Generally, officials are not eligible to earn leave and do not document their attendance and leave. However, if the official is earning leave according to a policy and/or contract, the official should document his/her daily attendance and leave.)

# No exceptions were found as a result of this procedure.

b) Observe whether supervisors approved the attendance and leave of the selected employees or officials.

# No exceptions were found as a result of this procedure.

c) Observe any leave accrued or taken during the pay period is reflected in the entity's cumulative leave records.

# No exceptions were found as a result of this procedure.

d) Observe the rate paid to the employees or officials agree to the authorized salary/pay rate found within the personnel file.

18. Obtain a listing of those employees or officials that received termination payments during the fiscal period and management's representation that the list is complete. Randomly select two employees or officials, obtain related documentation of the hours and pay rates used in management's termination payment calculations and the entity's policy on termination payments. Agree the hours to the employee or officials' cumulative leave records, agree the pay rates to the employee or officials' authorized pay rates in the employee or officials' personnel files, and agree the termination payment to entity policy.

# No exceptions were found as a result of this procedure.

19. Obtain management's representation that employer and employee portions of third-party payroll related amounts (e.g., payroll taxes, retirement contributions, health insurance premiums, garnishments, workers' compensation premiums, etc.) have been paid, and any associated forms have been filed, by required deadlines.

The CEO confirmed that the employer and employee portions of third-party payroll related amounts (e.g., payroll taxes, retirement contributions, health insurance premiums, garnishments, workers' compensation premiums, etc.) have been paid, and any associated forms have been filed, by required deadlines.

# Fraud Notice

20. Obtain a listing of misappropriations of public funds and assets during the fiscal period and management's representation that the listing is complete. Select all misappropriations on the listing, obtain supporting documentation, and observe that the entity reported the misappropriation(s) to the legislative auditor and the district attorney of the parish in which the entity is domiciled.

# During inquiry, management is not aware of any misappropriations of public funds and assets during the fiscal period.

21. Observe the entity has posted on its premises and website, the notice required by R.S. 24:523.1 concerning the reporting of misappropriation, fraud, waste, or abuse of public funds.

We observed the entity had posted on its premises that were visited, and on their website, the notice required by R.S. 24:523.1 concerning the reporting of misappropriation, fraud, waste, or abuse of public funds.

# Information Technology Disaster Recovery/Business Continuity

- 22. Perform the following procedures, verbally discuss the results with management, and report "We performed the procedure and discussed the results with management."
  - a) Obtain and inspect the entity's most recent documentation that it has backed up its critical data (if no written documentation, inquire of personnel responsible for backing up critical data) and observe that such backup occurred within the past week. If backups are stored on a physical medium (e.g., tapes, CDs), observe evidence that backups are encrypted before being transported.

# We performed the procedure and discussed the results with management. No exceptions were found as a result of this procedure.

b) Obtain and inspect the entity's most recent documentation that it has tested/verified that its backups can be restored (if no written documentation, inquire of personnel responsible for testing/verifying backup restoration) and observe evidence that the test/verification was successfully performed within the past 3 months.

# We performed the procedure and discussed the results with management. No exceptions were found as a result of this procedure.

c) Obtain a listing of the entity's computers currently in use and their related locations, and management's representation that the listing is complete. Randomly select 5 computers and observe while management demonstrates that the selected computers have current and active antivirus software and that the operating system and accounting system software in use are currently supported by the vendor.

### We performed the procedure and discussed the results with management. No exceptions were found as a result of this procedure.

We were engaged by David Raines Community Health Center, Inc.to perform this agreed-upon procedures engagement and conducted our engagement in accordance with attestation standards established by the American Institute of Certified Public Accountants and applicable standards of Government Auditing Standards. We were not engaged to and did not conduct an examination or review. the objective of which would be the expression of an opinion or conclusion, respectively, on those C/C areas identified in the SAUPs. Accordingly, we do not express such an opinion or conclusion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

We are required to be independent of David Raines Community Health Center, Inc. and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements related to our agreed-upon procedures engagement.

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

BRown, Ees à Co, Ridgeland, Mississippi

December 15, 202

# DAVID RAINES COMMUNITY HEALTH CENTER, INC.

# MANAGEMENT LETTER

FOR THE 18-MONTHS ENDED DECEMBER 31, 2021



To the Board of Directors of David Raines Community Health Center, Inc. Shreveport, Louisiana

In planning and performing our audit of the financial statements of David Raines Community Health Center, Inc., as of and for the eighteen months ended December 31, 2021, in accordance with auditing standards generally accepted in the United States of America, we considered the entity's internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we do not express an opinion on the effectiveness of the entity's internal control.

However, during our audit we became aware of deficiencies in internal control other than significant deficiencies and material weaknesses and other matters that are opportunities to strengthen your internal control and improve the efficiency of your operations. This letter does not affect our report dated December 15, 2022 on the financial statements of David Raines Community Health Center, Inc.

We will review the status of these comments during our next audit engagement. We have already discussed many of these comments and suggestions with various Organization personnel, and we will be pleased to discuss them in further detail at your convenience, to perform any additional study of these matters, or to assist you in implementing the recommendations. Our comments are summarized as follows:

# SUPERVISORY REVIEW OF ACCOUNTING TRANSACTIONS

While conducting our audit, we noted that there is not a sufficient supervisory review of accounting transactions and month end reconciliations performed. This situation has allowed errors to exist within the books of account and will continue to grow in magnitude without subsequent correction. This accounting function inefficiency will cause the financial records and financial statements to be misrepresentative as well as allow for possible irregularities including fraud to exist and continue without notice.

# **Recommendation**

We suggest that this situation should be corrected as soon as possible with the establishment of a regular supervisory review of accounting transactions and reconciliations.

#### Management's Plan of Corrective Action

Due to staff turnover in the accounting department during the audit period, there was no sufficient supervisory review of accounting transactions and month end reconciliations. Now that the organization has staff stability, accounts/transactions are reconciled monthly and reviewed by management for accuracy. If turnover does occur, there are procedures in place to ensure continuation of the reconciliations and written instructions explaining how to reconcile accounts properly including supporting documentation and supervisory oversight.

This report is intended solely for the information and use of the Board of Directors, management, and others within the organization and is not intended to be and should not be used by anyone other than these specified parties.

Brown, Eury Co. December 15, 2022