Financial Statements June 30, 2013 and 2012

With Independent Auditors' Report Thereon

## **JUNE 30, 2013 AND 2012**

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#### **JOHNSTON & BRYANT**

Certified Public Accountants

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American Institute of Certified Public Accountants
Oklahoma Society of Certified Public Accountants

Love County Health Center dba Mercy Health Love County Marietta, Oklahoma

The Board of Control

#### **Report on the Financial Statements**

We have audited the accompanying financial statements of Love County Health Center dba, Mercy Health Love County, which comprise the balance sheets as of June 30, 2013 and 2012, and the related statements of revenues, expenses, and changes in net assets, and cash flows for the years then ended, and the related notes to the financial statements.

#### Management's Responsibility for the Financial Statements

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

#### **Auditor's Responsibility**

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control.

Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

The Board of Control Love County Health Center dba Mercy Health Love County Page Two

#### **Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Love County Health Center dba, Mercy Health Love County, as of June 30, 2013 and 2012, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

#### Other Reporting Required by Government Auditing Standards

In accordance with Government Auditing Standards, we have also issued our report dated November 25, 2013 on our consideration of Love County Health Center dba, Mercy Health Love County'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 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 internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with Government Auditing Standards in considering Love County Health Center dba, Mercy Health Love County's internal control over financial reporting and compliance.

Johnt + Brynd

Ada, Oklahoma November 25, 2013

Balance Sheet June 30, 2013 and 2012

	2013	2012
ASSETS		
Current Assets		
Cash on Hand and in Banks, including Time Deposits	\$ 1,806,257	\$ 1,801,485
Accounts Receivable - Patients, Less Allowances	1,655,173	2,030,826
Other Receivables	84,294	86,294
Inventories	181,047	152,241
Prepaid Expenses	157,125	178,993
Due Under Cost Contracts	1,833,175	2,114,559
Total Current Assets	5,717,071	6,364,398
Property, Plant and Equipment	7,900,169	6,911,575
Less Accumulated Depreciation	(4,657,779)	(4,144,329)
2000 / too amarato a 20ptoo fation	(1,001,117)	(.,1:1,323)
Net Property, Plant and Equipment	3,242,390	2,767,246
Total Assets	\$ 8,959,461	\$ 9,131,644
LIABILITIES AND NET ASSETS		
Current Liabilities		
Accounts Payable	\$ 528,222	\$ 582,306
Accrued Payroll	167,428	145,080
Accrued PTO	576,447	562,070
Current Portion of Long-Term Debt	-	18,709
Due to Other Corporations (Note 14 and 15)	3,958,468	3,949,805
Total Current Liabilities	5,230,565	5,257,970
Long-Term Debt	<del>_</del>	5,403
Net Assets		
Unrestricted	486,506	1,125,136
Invested in Capital Assets, Net of Related Debt	3,242,390	2,743,135
Total Net Assets	3,728,896	3,868,271
Total Liabilities and Net Assets	\$ 8,959,461	\$ 9,131,644

Statement of Revenues, Expenses, and Changes in Net Assets Years Ended June 30, 2013 and 2012

	2013	2012
Net Patient Service Revenue Other Operating Revenue	\$ 11,016,901 14,191	\$ 12,856,126 48,608
Total Operating Revenue	11,031,092	12,904,734
Expenses		
Nursing Services	2,253,896	2,277,012
Other Professional Services	5,791,851	5,708,369
General Services	608,173	579,842
Administrative Services	3,300,924	3,461,871
Depreciation	513,450	612,185
Total Expenses	12,468,294	12,639,279
Net Income (Loss) from Operations	(1,437,202)	265,455
Non-Operating Income (Expenses)		
County Sales Tax	1,065,280	862,040
Donations and Grants	26,815	-
Interest Expense		(5,402)
Interest Income	1,761	2,352
E.M.S. Transfers	203,971	168,834
Total Non-Operating	1,297,827	1,027,824
Change in Net Assets Before Extraordinary Item	(139,375)	1,293,279
Adjustment of Amount Due Intercompany		633,130
Change in Net Assets	(139,375)	1,926,409
Net Assets, Beginning of Year	3,868,271	1,941,862
Net Assets, End of Year	\$ 3,728,896	\$ 3,868,271

Statement of Cash Flows Years Ended June 30, 2013 and 2012

	2013	2012
Operating Activities Receipts From and on Behalf of Patients Other Receipts and Payments Payment to Suppliers and Contractors Payments to Employees	\$ 11,392,554 295,575 (4,955,174) (7,015,304)	\$ 10,758,562 48,608 (4,490,554) (7,219,666)
Net Cash Provided By/(Used in) Operating Activities	(282,349)	(903,050)
Cash Flows from Non-Capital Financing Activities County Sales Tax Receipts E.M.S.Transfers	1,067,280 203,971	912,500 168,834
Adjustment of Amount Due Intercompany		633,130
Net Cash Provided By Non-Capital Financing Activities	1,271,251	1,714,464
Capital and Related Financing Activities Purchase of Capital Assets Donations Interest Expense Increase (decrease) in long term debt	(988,594) 26,815 - (24,111)	(592,507) - (5,402) (68,255)
Net Cash Provided (Used) in Investing Activities	(985,890)	(666,164)
INVESTING ACTIVITIES Interest Income	1,760	2,352
NET CASH PROVIDED BY INVESTING ACTIVITIES	1,760	2,352
Net Increase(Decrease) in Cash and Equivalents	4,772	147,602
Cash – Beginning of Year	1,801,455	1,653,883
Cash – End of Year	\$ 1,806,257	\$ 1,801,485

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

Statement of Cash Flows Years Ended June 30, 2013 and 2012

	2013	2012		
Cash Flows from Operating Activities Operating Income/(Loss) Adjustments to Reconcile Operating Income/(Loss) to Net Cash Provided	\$ (1,437,203)	\$	265,455	
By Operating Activities:  Depreciation	513,450		612,185	
Changes in:				
Patient and Other Accounts Receivable	375,653		16,995	
Estimated Third Party Payor Settlements	281,384		(2,114,559)	
Supplies, Prepaid Expenses and Other Assets	(6,938)		(81,841)	
Accounts Payable and Accrued Expenses	(8,695)		398,715	
Net Cash Provided By/(Used in)	·	<del></del>		
Operating Activities	\$ (282,349)	<u>\$</u>	(903,050)	

Notes to the Financial Statements June 30, 2013 and 2012

#### Note 1. Ownership

Mercy Health/Love County Hospital is a twenty-five bed, short-term, acute care, critical access Hospital owned by Love County, Oklahoma, located in Marietta, Oklahoma. Management of the hospital is composed of a five member board of control appointed by the County Commissioners. The Hospital has entered into a Management Services Agreement with Mercy Memorial Health Center, Inc. Duration of the agreement is renewable annually.

#### Note 2. Summary of Significant Accounting Policies

General Accounting Consideration - Mercy Health/Love County Hospital provides short-term inpatient and outpatient healthcare. A large part of the Hospital services are for patients whose bills are paid in whole or in part by third-party payors, e.g., Medicare, Medicaid, and private insurance carriers. Record keeping, influenced by these third-party payors, requires a higher level of accountability including more financial and statistical information.

Patient Accounts Receivable - Patient service revenue is accounted for at established rates on the accrual basis. The Hospital provides allowances for doubtful receivables equal to the estimated collection losses that will be included in collection of all receivables. The estimated losses are based on historical collection experience coupled with review of the current status of the existing receivables. Preliminary calculations of revenue adjustments relative to third-party contractual agreements are included in the accompanying financial statements. Normal variances between these estimates and final settlements upon audit by third-party payors are included in the statement of revenues and expenses in the year in which the settlement occurs.

Inventory - Inventory is generally stated at cost on the first-in, first-out method.

Property, Plant and Equipment - Property, plant and equipment are stated at cost less accumulated depreciation. Maintenance and repairs are charged to expense as incurred and betterments are capitalized. Gains and losses from sales or retirements are included in income in the period of disposition.

Depreciation expense is computed using the straight-line method over the estimated useful lives of related assets. The ranges of such useful lives are as follows:

Land Improvements	8-30 Years
Building	10-40 Years
Building Improvements	10-20 Years
Fixed Equipment	5-25 Years
Major Moveable Equipment	5-20 Years

Notes to the Financial Statements June 30, 2013 and 2012

#### Note 2. Summary of Significant Accounting Policies (continued)

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

Accounting Standards – Pursuant to Governmental Accounting Standards Board (GASB) Statement No. 20, Accounting and Financial Reporting for Proprietary Funds and Other Governmental Entities That Use Proprietary Fund Accounting, the Hospital has elected to apply the provisions of all relevant pronouncements of the Financial Accounting Standards Board (FASB), including those issued after November 30, 1989, that do not conflict with or contradict GASB pronouncements.

The Hospital's financial statements are presented in accordance with the requirements of GASB Statement No. 34, *Basic Financial Statements and Management Discussion and Analysis for State and Local Governments*. Under GASB Statement No. 34, the Hospital is required to present a statement of net assets classified between current and non-current assets and liabilities, a statement of revenues, expenses and changes in net assets, with separate presentation for operating and non-operating revenue and expenses and statement of cash flows using the direct methods.

Risk Management - The Hospital is exposed to various risk of loss from torts; theft of, damage to, destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; and employee health, dental, and accident benefits. Commercial insurance coverage is purchased for claims arising from such matters except certain natural disasters.

Income Taxes – The Hospital is exempt as a political subdivision of the state of Oklahoma.

Cash Equivalents – The Hospital considers all liquid investments which have original maturities of six months or less to be cash equivalents.

Medical Malpractice Coverage and Claims - The Hospital pays fixed premiums for annual medical malpractice coverage under occurrence-basis policies. In general, the Hospital bears risks for any individual claims with costs exceeding \$1,000,000 and the excess, if any, over aggregate cost of \$3,000,000 for claims occurring during the policy year. The Hospital accrues the expense of its share of malpractice claim costs, if any, of any reported and unreported incidents of potential improper professional service occurring during the year by estimating the probable ultimate cost of any incident. Such estimates are based on the Hospital's own claims experience. No accrual for medical malpractice claims has been made in the accompanying financial statements.

Notes to the Financial Statements June 30, 2013 and 2012

#### Note 2. Summary of Significant Accounting Policies (continued)

Proprietary Fund Accounting – The Hospital utilizes the proprietary fund method of accounting whereby revenue and expenses are recognized on the accrual basis. Substantially all revenues and expenses are subject to accrual.

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.

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.

## Note 3. Amounts Payable on Cost Reimbursement Programs

The Hospital renders services to patients under contractual arrangements with the Medicare program. The program's administrative procedures preclude final determination of amounts due the Hospital for services to program patients until after the Hospital's cost reports are audited or otherwise reviewed and settled upon by the respective administrative agencies.

#### Note 4. Compensated Absences

The Hospital's employees earn vacation days at varying rates depending on years of service. Employees may accumulate vacation days up to a specified maximum. Compensated absence liabilities are computed using regular pay in effect at the balance sheet date plus an additional amount for compensation related payments such as social security and Medicare taxes computed using rates in effect at that date

Notes to the Financial Statements June 30, 2013 and 2012

## Note 5. Capital Assets

Capital asset activity for the years ended June 30, 2013 and 2012 is as follows:

					:	2013				
		Beginning Balance		Additions		Transfers		Adjustments/ Retirements		Ending Balance
Land and Improvements Building Equipment (Fixed and	\$	73,126 2,249,920	\$	- 803,976	\$	-	\$	-	\$	73,126 3,053,896
Moveable) Total Capital Assets		4,588,529 6,911,575		184,618 988,594		-				4,773,147 7,900,169
Less Accumulated Depreciation	_	(4,144,329)		(513,450)		-	_	<u></u>		(4,657,779)
Capital Assets - Net	<u>\$</u>	2,767,246	\$	475,144	\$	-	<u>\$</u>	-	<u>\$</u>	3,242,390
						2012				
		Beginning Balance		Additions		Transfers		Adjustments/ Retirements		Ending Balance
Land Building Equipment (Fixed and	\$	50,443 2,211,730	\$	22,683 38,190	\$	-	\$	-	\$	73,126 2,249,920
Moveable)  Total Capital Assets		4,061,442 6,323,615		527,087 587,960		<u>-</u>	_	-		4,588,529 6,911,575
Less Accumulated Depreciation	·	(3,536,693)		(612,185)		_	_	4,549	_	(4,144,329)
Capital Assets - Net	\$	2,786,923	<u>\$</u>	(24,225)	\$	-	<u>\$</u>	4,549	<u>\$</u>	2,767,246

Notes to the Financial Statements June 30, 2013 and 2012

#### Note 6. Accounts Receivable - Patients

	2013	
Gross Accounts Receivable Less Allowances for Bad Debts	\$ 4,281,794 (2,626,621)	\$ 4,064,483 2,033,657
Net Accounts Receivable	\$ 1,655,173	\$ 2,030,826

The allowance for uncollectible accounts is based upon managements estimate.

## Note 7. Long-Term Debt

A summary of long-term debt, including capital lease obligations as of June 30, 2013 and 2012 is as follows:

				2013			
	Interest	Maturity	Beginning			Ending	Current
	Rate	Date	Balance	Additions	Deductions	Balance	Portion
Leases Payable							
TLC Healthcare Finance	8.77%	2012	\$ 24,112	\$ -	\$ 24,112	<u>\$</u>	\$ -
			\$ 24,112	\$ -	\$ 24,112	<u>\$</u>	<u>\$</u>
				2012			
<del></del>	Interest	Maturity	Beginning			Ending	Current
	Rate	Date	Balance	Additions	<u>Deductions</u>	Balance	Portion
Leases Payable							
TLC Healthcare Finance	8.77%	2012	\$ 68,256	<u>\$ -</u>	\$ 44,144	\$ 24,112	\$ 24,112
			\$ 68,256	\$	\$ 44,144	\$ 24,112	\$ 24,112

Scheduled principal and interest payment on long-term debt and payments on capital lease obligations are as follows:

	Principal		Ir	nterest	Total Payments
2013	\$		\$		\$ 
	\$	<u>-</u>	\$	-	\$ <u>-</u>

Notes to the Financial Statements June 30, 2013 and 2012

#### Note 8. Cash and Deposits

At June 30, 2013 bank balances were as follows:

with the state of the sta	2013
Insured (FDIC) Collateralized by securities held by the pledging financial institution's trust department in the Hospital's name Uninsured, uncollateralized or collateralized by securities held its trust department or agent in other than the Hospital's name	\$ 500,000 1,470,804
Total	\$ 1,970,804
Carrying Value	\$ 1,806,257

Custodial Credit Risk – Exposure to custodial credit related to deposits exists when the Hospital holds deposits that are uninsured and un collateralized; uncollateralized with securities held by the pledging financial institution, or by its trust department or agent but not in the Hospital's name; or collateralized without a written or approved collateral agreement. Exposure to custodial credit risk related to investments exist when the Hospital holds investments that are uninsured and unregistered, with securities held by the counterparty or by its trust department or agent but not in the Hospital's name.

The Hospital secures cash deposits in excess of \$250,000 with U.S. Government or federal agency securities. State law requires all deposits of public funds to be collateralized.

#### Note 9. 403(b) Thrift Plan

The Hospital adopted a Thrift Plan under Internal Revenue Code Section 403(b) for the benefit of its employees. The plan year end is June 30. The minimum employee contribution accepted in one percent of salary and the maximum is twenty-five percent of the employee's compensation for the limitation year. Employer contributions are made on behalf of each participant who has attained age 21 and completed one year of eligible service. The employer maximum contribution to the plan is five percent of total participants' compensation, with a cap on eligible compensation of \$120,000. Participants become fully vested in the plan after five years of service.

#### Note 10. Contingencies

During the normal course of business, the Hospital is involved in various claims and lawsuits. In the opinion of management, the potential loss on any claim and lawsuit, net of insurance proceeds, will not be significant to the Hospital's financial position or results of operations.

Notes to the Financial Statements June 30, 2013 and 2012

#### Note 11. Concentration of Credit Risk

The Hospital operates in South Central Oklahoma, and grants credit without collateral to their patients, most of whom are local residents and are uninsured or under insured.

#### Note 12. Fair Value of Financial Instruments

The following methods and assumptions were used by the Hospital in estimating the fair value of its financial instruments at June 30, 2013 and 2012.

The carrying amounts reported in the balance sheet for cash, assets limited as to use, accounts payable and accrued expenses, and estimated amount due to/from Medicare approximate their fair value.

#### Note 13. Net Patient Service Revenues

Net Patient Service Revenues for the year ended June 30, 2013 is computed as follows:

	 2013	 2012
Gross Patient Service Revenues	\$ 16,704,459	\$ 17,007,749
Less:		
Bad Debt	1,150,479	1,200,706
Charity	419,688	264,889
Administration and Other	2,103,873	1,949,399
Medicare and Medicaid	 2,013,517	 (384,976)
Net Patient Service Revenue	\$ 11,016,902	\$ 12,856,126

Notes to the Financial Statements June 30, 2013 and 2012

## Note 14. Management Agreement

The Hospital is currently managed by Mercy Memorial Health Center, Inc., an Oklahoma not-for profit corporation. The management agreement is renewed annually on July 1 for the succeeding 12 month period. The management agreement was renewed July 1, 2013 through June 30, 2014. See Note 16.

## Note 15. Due to Other Corporations

This full amount (\$3,958,468) is payable to Mercy Memorial Health Center, Inc., the same corporation that currently manages the hospital. See also Note 14.

### Note 16. Subsequent Events

Management has evaluated subsequent events through November 25, 2013 which is the date the financial statements were available to be issued and have determined that no additional information needs to be added to the financial statements.

Net Patient Service Revenue Years Ended June 30, 2013 and 2012

	2013		2012
Medical and Surgical	\$ 2,350,570	\$	2,398,699
Observation Room	2,405		27,032
Central Service and Supply	366,922		585,436
Emergency Room	1,726,540		1,391,651
Laboratory	2,839,118		3,052,972
Radiology and E.K.G.	2,261,160		2,209,745
Pharmacy and I.V.'s	1,525,835		1,754,875
Inhalation Therapy	538,283		552,222
Physical Therapy	351,026		291,681
Speech Therapy	1,833		6,321
Occupational Therapy	147,048		145,101
Rural Health Clinic	2,123,770		1,945,738
Brigade Service	1,076,556		1,147,953
Emergency Medical Service	1,393,393		1,498,323
Total Patient Service Revenue	16,704,459		17,007,749
Less Contractual Adjustments and Bad Debts			
Charity	419,688		264,889
Medicare and Medicaid	2,013,517		736,629
Bad Debts	1,150,479	1,200,706	
Other Adjustments	2,103,873		1,949,399
Net Patient Service Revenue	\$ 11,016,902	<u>\$</u>	12,856,126

Other Revenue Years Ended June 30, 2013 and 2012

	 2013	 2012
Miscellaneous	\$ 14,191	\$ 48,608
Total Other Operating Revenue	\$ 14,191	\$ 48,608

Expenses Years Ended June 30, 2013 and 2012

2013					
	Wages	<u>_</u> _	expenses	****	Total
\$	1,426,898	\$	182,896	\$	1,609,794
•	539,732		104,370		644,102
\$	1,966,630	_\$_	287,266	\$	2,253,896
\$	326,621	\$	267,163	\$	593,784
	,	·	•	7	339,385
	30,284		•		238,556
	29,227		,		157,982
	•		•		235,839
	· -		-		314,627
	1,442,851				1,657,870
			•		1,440,785
	866,890		70,843		937,733
\$	4,367,074	\$	1,549,487	\$	5,916,561
\$	1,343	\$	241.014	\$	242,357
•	•	•		Ψ	105,798
	•				134,595
	83,261		42,162		125,423
\$	256,947	\$	351,226	_\$_	608,173
\$	461.378	\$	1.052.499	\$	1,513,877
	-		1,787,672	<u> </u>	1,787,672
\$	461,378	\$	2,840,171	\$	3,301,549
	\$ \$ \$ \$	\$ 1,966,630 \$ 326,621 203,536 30,284 29,227 214,159 1,442,851 1,253,506 866,890 \$ 4,367,074 \$ 1,343 101,851 70,492 83,261 \$ 256,947 \$ 461,378	\$ 1,426,898 \$ 539,732 \$ 1,966,630 \$ \$ 326,621 \$ 203,536 \$ 30,284 \$ 29,227 \$ 214,159 \$ 1,442,851 \$ 1,253,506 \$ 866,890 \$ \$ 4,367,074 \$ \$ \$ 1,343 \$ 101,851 \$ 70,492 \$ 83,261 \$ \$ 256,947 \$ \$	Salaries and Wages       Supplies and Other Expenses         \$ 1,426,898	Salaries and Wages       Supplies and Other Expenses         \$ 1,426,898

_	_		_
つ	n	1	7

			2012			
			Supplies			
Salaries and		a	and Other			
	Wages	]	Expenses			Total
\$	1,441,636	\$	229,230		\$	1,670,866
	506,964		99,182		•	606,146
				•		
	1,948,600	\$	328,412		\$	2,277,012
\$	329,183	\$	299,365			628,548
	205,732		107,635			313,367
	25,966		224,313			250,279
	29,576		37,280			66,856
	214,881		25,167			240,048
	-		280,975			280,975
	1,550,361		205,023			1,755,384
	1,421,342		130,646			1,551,988
	533,276		87,648		\$	620,924
\$	4,310,317	\$	1,398,052		\$	5,708,369
		<del> </del>		•		
\$	-	\$	212,734	\$		212,734
	102,858		14,302			117,160
	63,164		56,840			120,004
	85,995		43,949			129,944
\$	252,017	\$	327,825	\$		579,842
		<del></del>				
\$	571,426	\$	1,224,439		\$	1,795,865
	<u> </u>		1,666,006	_		1,666,006
				-		
	571,426	\$	2,890,445	. \$		3,461,871

# INDEPENDENT AUDITORS' 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

The Board of Control Love County Health Center dba Mercy Health Love County Marietta, Oklahoma

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 Love County Health Center dba, Mercy Health Love County which comprise the statement of financial position as of June 30, 2013, and the related statements of activities, and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated November 25, 2013.

## **Internal Control over Financial Reporting**

In planning and performing our audit of the financial statements, we considered Love County Health Center dba, Mercy Health Love County's internal control over financial reporting (internal control) to determine the 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 Love County Health Center dba, Mercy Health Love County's internal control. Accordingly, we do not express an opinion on the effectiveness of Love County Health Center dba, Mercy Health Love County's internal control.

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

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

The Board of Control Love County Health Center dba Mercy Health Love County Marietta, Oklahoma Page 2

## **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether Love County Health Center dba, Mercy Health Love County'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*.

# Love County Health Center dba Mercy Health Love County's Response to Findings

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

## 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.

Ada, Oklahoma

November 25, 2013

Johnstor & Bryso

Schedule of Findings Year Ended June 30, 2013

#### 2013-1

Criteria: In order to present materially correct financial statements for use by management for decision making, the general ledger accounts should be properly reconciled on a monthly basis.

**Condition:** The main checking account was not reconciled to the supporting bank statements on a monthly basis.

Effect or Potential Effect: Once reconciled after year end, the general ledger balance differed by \$171,831.95 to the reconciled bank statement.

**Recommendation:** Monthly reconciliations of all bank accounts should be provided to hospital management and adjustments should be authorized and made on a timely basis.

Responsible Official's Response: Hospital and management personnel are working on the reconciliation problem and are taking proper steps to insure all bank accounts to be reconciled monthly to the general ledger. Hospital personnel are to agree to the reconciliations.