EISNERAMPER

WEST ASCENSION PARISH HOSPITAL SERVICE DISTRICT OF ASCENSION PARISH, LOUISIANA

DONALDSONVILLE, LOUISIANA

FINANCIAL STATEMENTS

AUGUST 31, 2023

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INDEPENDENT AUDITORS' REPORT

Board of Commissioners West Ascension Parish Hospital Service District of Ascension Parish, Louisiana Donaldsonville, Louisiana

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of the West Ascension Parish Hospital Service District of Ascension Parish, Louisiana (the District), a component unit of the Ascension Parish Government, as of and for the year ended August 31, 2023, and the related notes to the financial statements, which collectively comprise the District's basic financial statements as listed in the table of contents.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the business-type activities of the District, as of August 31, 2023, and the changes in financial position and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the District, and to meet our other ethical responsibilities, in accordance with the relevant requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Prior Period Financial Statements and Report on Supplementary Information

The financial statements of the District for the year ended August 31, 2022 were audited by another auditor who expressed an unmodified opinion on those statements on February 27, 2023. In our opinion, the comparative supplementary information presented herein as of and for the year ended August 31, 2022 is consistent, in all material respects, with the audited financial statements from which it has been derived.

Responsibilities of Management 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, 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.

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In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the District's ability to continue as a going concern for twelve months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

Auditors' Responsibilities for the Audit of the Financial Statements

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

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

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

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

Required Supplementary Information

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis on pages 4 through 6 be presented to supplement the basic financial statements. Such information is the responsibility of management and, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquires of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audits of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.



Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements that collectively comprise the District's basic financial statements as a whole. The accompanying schedules of 2023 net patient service revenues on page 23, and the schedule of compensation, benefits, and other payments to agency head or chief executive officer on page 24 are presented for the purposes of additional analysis and are not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting or other records used to prepare the basic financial statements or to the basic financial statements themselves, and other procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedules of net patient service revenues, and the schedule of compensation, benefits, and other payments to agency head are fairly stated, in all material respects, in relation to the basic financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated February 29, 2024 on our consideration of the District's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the District's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the District's internal control over financial reporting and compliance.

Eisner Amper LLP

EISNERAMPER LLP Donaldsonville, Louisiana February 29, 2024

MANAGEMENT'S DISCUSSION AND ANALYSIS AUGUST 31, 2023

This section of the West Ascension Parish Hospital's (the District) annual financial report presents our discussion and analysis of the District's financial performance during the fiscal years that ended on August 31, 2023 and 2022. Please read it in conjunction with the District's financial statements, which follow this section.

FINANCIAL HIGHLIGHTS

- The assets of the District exceeded its liabilities and deferred inflows of resources by \$35,385,299 and \$33,400,561 (net position) as of August 31, 2023 and 2022, respectively.
- The District's total assets increased by approximately \$827,000 or 2.3 percent from August 31, 2022 to August 31, 2023. Total assets as of August 31, 2022 increased by over \$38,000 or 0.1 percent from August 31, 2021.
- The District's total liabilities decreased by approximately \$1.1 million or 58.8 percent from August 31, 2022 to August 31, 2023. Total liabilities as of August 31, 2022 decreased by approximately \$31,000 or 1.7 percent from August 31, 2021.
- The increase in total assets in 2023 is primarily related to an increase in estimated cost report settlements due to the District. Additionally, in both 2023 and 2022 the District returned and utilized the Provider Relief Funds that were received in the prior year which resulted in a reduction of unearned revenues (see Note 13).

OVERVIEW OF THE FINANCIAL STATEMENTS

This annual report consists of three parts—management's discussion and analysis (this section), the basic financial statements, and other supplemental information. The basic financial statements provide information about the District's overall financial status. The financial statements also include notes that explain some of the information in the financial statements and provide more detailed data. The notes are followed by additional reports as required by *Governmental Auditing Standards*. Figure A-1 shows how the required parts of this annual report are arranged and relate to one another. Figure A-1 summarizes the major features of the District's financial statements. The remainder of this overview section of management's discussion and analysis explains the structure of contents of each of the statements.

Major Features	Figure A-1 of the District's Fund Financial Statements
	Proprietary Fund Statements
Scope	Activities the District operates are similar to private business.
Required financial statements	 Statements of net position Statements of revenues, expenses and changes in net position Statements of cash flows
Accounting basis and measurements focus	Accrual accounting and economic resources focus
Type of asset/liability information	All assets and liabilities, both financial and capital, and short-termand long-termAll revenues and expenses during years, regardless of when
Type of inflow/outflow information	cash is received or paid

MANAGEMENT'S DISCUSSION AND ANALYSIS AUGUST 31, 2023

Fund Financial Statements

Funds are accounting devices that the District uses to keep track of specific sources of funding and spending for particular purposes. A proprietary fund is used to account for the District's ongoing operations and activities.

The District has one type of fund:

• Proprietary fund—Services for which the District charges patients a fee are generally reported in a proprietary fund. Proprietary funds provide both long-term and short-term financial information.

FINANCIAL ANALYSIS OF THE DISTRICT

Net position. The District's net position increased by \$1,984,738 from August 31, 2022 to August 31, 2023 and increased by \$170,592 from August 31, 2021 to August 31, 2022 (See Table A-1).

Di	Table A-1 strict's Net Positio	n	
	В	usiness Type Activities	3
	2023	2022	2021
Current and other assets	\$ 31,726,314	\$ 30,701,792	\$ 30,282,822
Capital assets	4,829,896	5,027,213	5,408,170
Total assets	36,556,210	35,729,005	35,690,992
Current liabilities	739,453	1,796,765	1,828,072
Total liabilities	739,453	1,796,765	1,828,072
Deferred inflows of resources	431,458	531,679	632,951
Total deferred inflows of resources	431,458	531,679	632,951
Net position			
Investment in capital assets	4,829,896	5,027,213	5,408,170
Unrestricted	30,555,403	28,373,348	27,821,799
Total net position	\$ 35,385,299	\$ 33,400,561	\$ 33,229,969

Changes in net position. The District's total revenues for the year ended August 31, 2023 increased by approximately \$3.0 million or 37.8 percent from August 31, 2022. The increase for the year ended August 31, 2023 is mainly attributed to the District recognizing approximately \$1.2 million more in rural hospital grant funds (disproportionate share) in fiscal year 2023 as compared to fiscal year 2022. Additionally, investment returns increased approximately \$1.0 million from fiscal year 2022 to fiscal year 2023, and 2023 cost report settlements are estimated to be approximately \$1.0 million more than 2022 cost report settlements. Total revenues for the year ended August 31, 2022 decreased by approximately \$2.6 million or 24.3 percent from the year ended August 31, 2021 (See Table A-2). The decrease for the year ended August 31, 2022 is mainly attributed the District recognizing approximately \$1.3 million less in Provider Relief Funds in the fiscal year 2022 as compared to fiscal year 2021. Additionally, investment returned decreased approximately \$800,000 from fiscal year 2021 to fiscal year 2022. Approximately 51.0 percent of the District's revenue comes from net patient services for fiscal year 2023 as compared to 60.4 percent for the fiscal year 2022. Operating expenses for all services for the year ended August 31, 2023 increased approximately \$1.2 million or 16.0 percent from the year ended August 31, 2022. Operating expenses for the year ended August 31, 2022.

MANAGEMENT'S DISCUSSION AND ANALYSIS AUGUST 31, 2023

Ch	Table A-2 anges in District's Net Pos	ition	
	Bus	iness Type Activ	ities
	2023	2022	2021
Revenues			
Operating	\$ 8,511,187	\$ 6,514,471	\$ 7,093,419
Non-operating	2,492,234	1,430,748	3,457,064
Total revenues	11,003,421	7,945,219	10,550,483
Expenses			
Operating expenses	9,018,683	7,774,627	7,448,278
Total expenses	9,018,683	7,774,627	7,448,278
Increase in net position	\$ 1,984,738	\$ 170,592	\$ 3,102,205

CAPITAL ASSETS

The composition of capital assets for the years ended August 31 are as follows: (See Table A-3).

ſ	Table A-3 District's Capital Assets Bus	iness Type Activi	ties
	2023	2022	2021
Land	\$ 335,520	\$ 335,520	\$ 335,520
Building and improvements	5,879,017	5,804,364	5,719,620
Equipment	4,816,406	4,848,496	5,170,905
Construction in progress	298,519	298,519	403,194
Total capital assets	11,329,462	11,286,899	11,629,239
Accumulated depreciation	(6,499,566)	(6,259,686)	(6,221,069)
Net Capital Assets	\$ 4,829,896	\$ 5,027,213	\$ 5,408,170

- As of August 31, 2023, the District had approximately \$4,830,000 invested in capital assets. Capital expenditures in 2023 were approximately \$197,000 less than depreciation expense and disposals, which caused a decrease in capital assets from 2022 to 2023.
- As of August 31, 2022, the District had approximately \$5,027,000 invested in capital assets. Capital expenditures in 2022 were approximately \$380,000 less than depreciation expense and disposals, which caused a decrease in capital assets from 2021 to 2022.

CONTACTING THE DISTRICT HOSPITAL'S FINANCIAL MANAGEMENT

This financial report is designed to provide our citizens, taxpayers, patients, and investors and creditors with a general overview of the District's finances and to demonstrate the District's accountability for the money it receives. If you have questions about this report or need additional financial information, contact Nobie Landry, CFO.

STATEMENTS OF NET POSITION AUGUST 31, 2023 AND 2022

ASSETS

	2023	2022
CURRENT ASSETS		
Cash	\$ 7,643,799	\$11,463,409
Patient accounts receivable, net of allowances for doubtful accounts and	459.007	697.969
contractual adjustments of \$2,770,476 in 2023 and \$2,372,737 in 2022 Inventory	458,997 325,584	687,862 300,058
Sales tax receivable	336,256	297,997
Lease receivable, current portion	100,933	98,936
Investments	18,899,672	14,836,886
Estimated third-party payor settlements	3,416,750	2,427,105
Other current assets	192,195	145,386
Total current assets	31,374,186	30,257,639
LEASE RECEIVABLE, NON-CURRENT PORTION	352,128	444,153
CAPITAL ASSETS		
Non-depreciable	634,039	634,039
Depreciable, net	4,195,857	4,393,174
Total capital assets	4,829,896	5,027,213
TOTAL ASSETS	\$36,556,210	\$35,729,005
LIABILITIES, DEFERRED INFLOWS, AND NET PO	OSITION	
CURRENT LIABILITIES		
Accounts payable	\$ 354,882	\$ 261,803
Estimated third-party payor settlements	15,853	-
Accrued expenses	284,401	884,880
Unearned grant revenue	84,317	255,197
Unearned Provider Relief Funds		394,885
Total liabilities	739,453	1,796,765
DEFERRED INFLOWS OF RESOURCES		
Deferred inflows on lease agreement	431,458	531,679
Total deferred inflows of resources	431,458	531,679
NET POSITION		
Investment in capital assets	4,829,896	5,027,213
Unrestricted	30,555,403	28,373,348
Total net position	35,385,299	33,400,561
TOTAL LIABILITIES, DEFERRED INFLOWS OF		
RESOURCES, AND NET POSITION	\$36,556,210	\$35,729,005

STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION YEARS ENDED AUGUST 31, 2023 AND 2022

	2023	2022
OPERATING REVENUES		
Net patient service revenues, net of provision for bad debts,		
contractual adjustments, and third-party payor settlements		
of \$921,593 in 2023 and \$1,642,971 in 2022	\$ 5,615,810	\$ 4,801,569
Intergovernmental transfers - operating grants	2,895,377	1,712,902
Total operating revenues	8,511,187	6,514,471
OPERATING EXPENSES		
Salaries and benefits	3,997,060	3,185,111
Contracted professional services	2,366,109	2,089,494
Medical supplies and drugs	916,592	838,217
Other operating	1,408,038	1,302,953
Provision for depreciation	330,884	358,852
Total operating expenses	9,018,683	7,774,627
LOSS FROM OPERATIONS	(507,496)	(1,260,156)
NON-OPERATING REVENUES (EXPENSES)		
Sales taxes	1,774,423	1,635,921
Investment gain (loss)	147,095	(845,494)
Provider Relief Funds	48,062	354,432
Grant revenue	255,197	
Other revenue	267,457	327,229
Loss on disposal of assets	201,401	(41,340)
Total non-operating revenues, net	2,492,234	1,430,748
rotar non operating revenues, not	2,102,201	1,100,710
CHANGE IN NET POSITION	1,984,738	170,592
Net position, beginning of the year	33,400,561	33,229,969
Net position, end of year	\$35,385,299	\$33,400,561

STATEMENTS OF CASH FLOWS YEARS ENDED AUGUST 31, 2023 AND 2022

	2023	2022
CASH FLOWS FROM OPERATING ACTIVITIES		
Cash received from patients and other third-party payors	\$ 7,766,260	\$ 6,098,654
Cash payments to suppliers for goods and services	(5,669,567)	(4,035,404)
Cash payments to employees for services	(3,551,158)	(2,743,502)
Net cash used in operating activities	(1,454,465)	(680,252)
CASH FLOWS FROM NON-CAPITAL FINANCING ACTIVITIES		
Sales taxes received	1,736,164	1,600,576
Provider Relief Funds returned to grantor	(262,506)	(464,535)
Grant revenues received	-	255,197
Other revenue	257,264	322,031
Net cash provided by non-capital financing activities	1,730,922	1,713,269
CASH FLOWS FROM CAPITAL AND RELATED		
FINANCING ACTIVITIES		
Acquisitions of capital assets	(133,567)	(19,235)
Net cash used in capital and related financing activities	(133,567)	(19,235)
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchases of investments	(6,703,206)	(6,884,507)
Proceeds from sale or maturity of investments	2,256,000	3,126,000
Interest on investments	484,706	336,968
Net cash used in investing activities	(3,962,500)	(3,421,539)
Net decrease in cash	(3,819,610)	(2,407,757)
Cash at beginning of year	11,463,409	13,871,166
Cash at end of year	\$ 7,643,799	\$11,463,409

STATEMENTS OF CASH FLOWS YEARS ENDED AUGUST 31, 2023 AND 2022

	2023	2022
RECONCILIATION OF LOSS FROM OPERATIONS TO NET CASH USED IN OPERATING ACTIVITIES		
Loss from operations Adjustments to reconcile loss from operations to net cash used in operating activities:	\$ (507,496)	\$(1,260,156)
Depreciation	330,884	358,852
Provision for bad debts Changes in assets and liabilities:	969,161	605,468
Increase in receivables (Increase) decrease in inventory Increase in estimated third-party payor settlements Decrease in other current assets	(740,296) (25,526) (973,792)	(599,162) 9,520 (422,123) 11,582
Increase (decrease) in accounts payable (Decrease) increase in accrued expenses	93,079 (600,479)	(190,351) 806,118
Total adjustments	(946,969)	579,904
Net cash used in operating activities	\$(1,454,465)	\$ (680,252)

NOTES TO FINANCIAL STATEMENTS

1. <u>Summary of Significant Accounting Policies</u>

The West Ascension Parish Hospital Service District of Ascension Parish, Louisiana, d/b/a Prevost Memorial Hospital (the District), was created by a resolution of the Ascension Parish Council on May 2, 1963 under provisions of Chapter 10 of Title 46 of the Louisiana Revised Statutes of 1950.

Basis of Presentation

The accompanying component unit financial statements of the District have been prepared in conformity with accounting principles generally accepted in the United States of America (GAAP) as applied to governmental units and promulgated by the Governmental Accounting Standards Board (GASB) *Codification of Governmental Accounting and Financial Reporting Standards*. The GASB is the accepted standard-setting body for establishing governmental accounting and financial reporting principles. The more significant accounting policies established in GAAP and used by the District are described below.

Reporting Entity

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

The criteria for determining which component units should be considered part of the Ascension Parish Council for financial reporting purposes is below. The basic criterion for including a potential component unit within the reporting entity is financial accountability. The GASB has set forth criteria to be considered in determining financial accountability. These criteria include:

- 1. Appointing a voting majority of an organization's governing body, and
 - a. The ability of the Council to impose its will on that organization and/or
 - b. The potential for the organization to provide specific financial benefits to or impose specific financial burdens on the Council.
- 2. Organizations for which the Council does not appoint a voting majority but are fiscally dependent on the Council and there is a potential for the organization to provide specific financial benefits to or impose specific financial burdens on the Council.
- 3. Organizations for which the reporting entity's financial statements would be misleading if data of the organization is not included because of the nature or significance of the relationship.

Because the Council appoints all members to the District's Board of Commissioners and has the ability to impose its will on the District, the District was determined to be a component unit of the Ascension Parish Council, the financial reporting entity. The accompanying financial statements present information only on the funds maintained by the District and do not present information on the Council, the general government services provided by that governmental unit, or the other governmental units that comprise the financial reporting entity.

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies (continued)

Measurement Focus, Basis of Accounting

Proprietary Fund Financial Statements. The proprietary fund is used to account for the District's ongoing operations. The proprietary fund financial statements are reported using the economic resources measurement focus. The proprietary fund financial statements are reported using the accrual basis of accounting. Revenues are recorded when earned and expenses are recorded at the time incurred, regardless of when the related cash flows take place. Nonexchange transactions, in which the District gives (or receives) value without directly receiving (or giving) equal value in exchange, include grants, entitlements, and donations. On an accrual basis, revenue from grants, entitlements, and donations is recognized in the fiscal year in which all eligibility requirements have been satisfied.

Cash and Cash Equivalents

The District considers all cash accounts, money market funds, and certificates of deposits with a maturity of three months or less when purchased to be cash and cash equivalents. Cash includes petty cash and demand deposit accounts. Under state law, the District may deposit funds and invest in certificates of deposit with a fiscal agent bank organized under the laws of the State of Louisiana, the laws of any other state, or the laws of the United States.

Patient Accounts Receivable

The District provides credit in the normal course of operations to patients located primarily in Ascension Parish and surrounding areas and to insurance companies conducting operations in this area.

The District maintains allowances for contractual adjustments and doubtful accounts based on management's assessment of collectability, current economic conditions, and prior experience. The District determines if patient accounts receivable are past-due based on the discharge date; however, the District does not charge interest on past-due accounts. The District charges off patient accounts receivable if management considers the collection of the outstanding balances to be doubtful.

Allowance for Doubtful Accounts and Contractual Adjustments

The allowance for doubtful accounts is established as losses are estimated to have occurred through a provision for doubtful accounts (bad debts) charged to earnings. Losses are charged against the allowance when management believes the collectability of an account is confirmed. Subsequent recoveries, if any, are credited to the allowance. The allowance for doubtful accounts is evaluated on a regular basis by management and is based upon management's periodic review of the collectability of the accounts in light of historical experience, and the nature and volume of the accounts.

The allowance for contractual discounts on accounts receivable from third-party payors (Medicare, Medicaid and private medical benefit insurers) is based primarily on the latest discount percentages experienced with each third-party payor.

While management uses available information in estimating the District's allowance for doubtful accounts, changes in the reimbursable contract rates and the composition of the patient treatments could result in further reductions in the carrying amount of patient receivables. As such it is reasonably possible that the estimated net patient receivables may change materially in the near term. The amount of the change that is reasonably possible, however, cannot be estimated.

Inventory

Inventory is valued at the lower of cost (using the first-in, first-out method) or market.

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies (continued)

Investments

The District may invest in bonds, debentures, and other indebtedness which are fully guaranteed by the United States, issued or guaranteed by federal agencies backed by full faith and credit of the United States, issued or guaranteed by United States government instrumentalities which are federally sponsored, and others allowable by state law. Investments are stated at fair value, which are the amounts on the statements of net position, and are based on quoted market prices, if available, or estimated using quoted market prices for similar securities. Investment income includes interest earned, realized gains and losses, and unrealized gains and losses (changes in fair value).

Capital Assets (Property and Equipment)

Property and equipment acquisitions are recorded at cost. Property and equipment donated for District operations are recorded as additions at fair value at the date of receipt. Maintenance and repairs are charged to expense, and betterments are capitalized.

Depreciation is provided over the estimated useful life of each class of depreciable asset and is computed on the straight-line method. Buildings and improvements are being depreciated over 25 to 40 years, land improvements over 20 years, and equipment over 5 to 20 years. Gains and losses from sales or retirements are recognized in the period of disposition.

Unearned Revenues

The District's unearned revenues include Provider Relief Funds received and other grant revenues whereby the District has not yet met the grant requirements necessary to be eligible for the grant.

Lessor Leases

The District is a lessor for noncancellable leases for the purposes of providing office space. In accordance with GASB Statement No. 87, *Leases*, the District recognizes a lease receivable and a deferred inflow of resources in the financial statements for those lease contracts with an initial individual value of \$1,000 or more and whose terms call for a lease period greater than one year. The lease receivable is measured at the commencement of the lease at the present value of payments expected to be received during the lease term. Subsequently, the lease receivable is reduced by the principal portion of lease payments received. The deferred inflow of resources is initially measured as the initial amount of the lease receivable, adjusted for lease payments received at or before the lease commencement date. Subsequently, the deferred inflow of resources is recognized as revenue over the life of the lease term. Key estimates and judgments include (1) the discount rate used to present value the expected lease receipts, (2) lease term, and (3) lease receipts. The District uses the Standard & Poors municipal bond rate index as the discount rate for measurement of the lease receivables.

The lease term includes the noncancellable period of the lease plus any renewal periods that management has determined are reasonably certain of renewal. Management monitors changes in circumstances that would require a remeasurement of its lease and will remeasure the lease receivable and deferred inflows of resources if certain changes occur that are expected to significantly affect the amount of the lease receivable.

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies (continued)

Deferred Outflows/Inflows of Resources

The statement of financial position will at times report a separate section for deferred outflows and (or) deferred inflows of financial resources. Deferred outflows of resources represents a consumption of net assets that applies to a future period(s) and so will not be recognized as an outflow of resources (expense) until then. Deferred inflows of resources represents an acquisition of net assets that applies to a future period(s) and so will not be recognized as an outflow of resources (expense) until then. Deferred inflows of resources represents an acquisition of net assets that applies to a future period(s) and so will not be recognized as an inflow of resources (revenue) until that time. The District did not have any deferred outflows of resources at August 31, 2023 or 2022. The District has deferred inflows of resources totaling \$431,458 and \$531,679 at August 31, 2023 and 2022, respectively. These deferred inflows are related to a lease agreement.

Net Patient Service Revenue

The District has agreements with third-party payors that provide for payments to the District at amounts different from its established rates. Payment arrangements include prospectively determined rates per discharge, reimbursed cost, discounted charges, and per diem payments.

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.

Operating Revenues and Expenses

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

Net position

The net position of the District is classified in components. Net investment in capital assets net of related debt consists of capital assets net of accumulated depreciation and reduced by the outstanding balances of any borrowings used to finance the purchase, improvements, or construction of those assets, if any. Because the District does not have related debt, net position related to capital assets is presented as investment in capital assets. Restricted net position is when there are limitations imposed on their use by external parties such as creditors, grantors, laws or regulations of other governments. The District had no restricted net position at August 31, 2023 or 2022. Unrestricted net position is the remaining net position that does not meet the definition of investment in capital assets or restricted.

Use of Estimates

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

Charity Care

The District provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Because the District does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue. Records of charges foregone for services and supplies furnished under the charity care policy are maintained to identify and monitor the level of charity care provided.

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies (continued)

Risk Management

The District is exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; errors and omissions; injuries to employees; and natural disasters.

The District is a member of two separate trust funds established by the Louisiana Hospital Association that encompasses self-insurance for workers' compensation and liability insurance. The management of the trust funds has complete control over the rate setting process. The District is insured for all other risks of loss.

Accounting Changes and Standards Implemented

The District has implemented GASB Statement No. 94, *Public-Private and Public-Public Partnerships and Availability Payment Arrangements*. The implementation of this statement did not result in any change in the District's financial statements. GASB Statement No. 94 establishes standards of accounting and financial reporting for those types of payment arrangements.

The District has implemented GASB Statement No. 96, *Subscription-Based Information Technology Arrangements*. The implementation of this statement did not result in any change in the District's financial statements. GASB Statement No. 96 requires these arrangements to be accounted for similar to those within the scope of GASB Statement No. 87.

2. Sales Tax

In a general election held on November 5, 1980, the voters of the District approved a one-half percent sales tax. The net proceeds from this tax are to be used for the expansion and/or operation of the District.

3. <u>Cash</u>

At August 31, the District had cash and demand deposit accounts totaling \$7,643,799 and \$11,463,409, respectively as follows:

	2023	2022
Petty cash Demand deposit accounts	\$	\$
Total cash	<u>\$ 7,643,799</u>	<u>\$ 11,463,409</u>

Under state law, these deposits (or the resulting bank balances) must be secured by federal deposit insurance or the pledge of securities owned by the fiscal agent bank. The market value of the pledged securities plus the federal deposit insurance must at all times equal the amount on deposit with the fiscal agent.

4. Custodial Credit Risk

Custodial credit risk is the risk that in the event of a bank failure, the District's deposits may not be returned to it. The District does not have a deposit policy for custodial credit risk at August 31, 2023. As of August 31, 2023, the District's bank balance was \$7,753,619. Of this amount, \$308,110 was insured by federal deposit insurance and \$7,445,509 was collateralized by pledged securities. The District's bank balances were not exposed to custodial credit risk at August 31, 2023. As of August 31, 2022, the District's bank balance was \$11,439,670. Of this amount, \$290,363 was insured by federal deposit insurance and \$11,149,307 was collateralized by pledged securities. The District's bank balances were not exposed to custodial credit risk at August 31, 2023. As of August 31, 2022, the District's bank balance was \$11,439,670. Of this amount, \$290,363 was insured by federal deposit insurance and \$11,149,307 was collateralized by pledged securities. The District's bank balances were not exposed to custodial credit risk at August 31, 2022.

NOTES TO FINANCIAL STATEMENTS

5. <u>Net Patient Service Revenues</u>

The District has agreements with third-party payors that provide for payments to the District at amounts different from its established rates. Contractual adjustments represent the differences between the District's billings at established rates for services and amounts reimbursed by third-party payors. Bad debts represent the differences between the District's billings at established rates for services and amounts reimbursed by third-party payors. Bad debts represent the differences between the District's billings at established rates for services and amounts reimbursed by self-pay payors and patient responsible portions.

While management uses available information in estimating the District's contractual adjustments and allowances for doubtful accounts, changes in the reimbursable contract rates and the composition of the patient treatments could result in further changes in the carrying amount of patient receivables. As such, it is reasonably possible that the estimated net patient accounts receivable may change materially in the near term. The amount of the change that is reasonably possible, however, cannot be estimated.

A summary of the payment arrangements with major third-party payors follows:

<u>Medicare</u> - Inpatient acute care services rendered to Medicare program beneficiaries are reimbursed under a cost reimbursement methodology. Inpatient non-acute services, other outpatient services, and defined capital and medical education costs related to Medicare beneficiaries are also paid based on a cost reimbursement methodology. The District is reimbursed for cost reimbursable items at a tentative rate with final settlement determined after submission of annual cost reports by the District and audits thereof by the Medicare fiscal intermediary. The District's classification of patients under the Medicare program and the appropriateness of their admission are subject to an independent review by a peer review organization under contract with the District. The District's Medicare cost reports have been filed with the Medicare fiscal intermediary through August 31, 2023. The District's Medicare cost reports have been audited by the Medicare fiscal intermediary through August 31, 2021.

<u>Medicaid</u> - Inpatient and outpatient services rendered to Medicaid program beneficiaries are reimbursed under a cost reimbursement methodology. The District is reimbursed at a tentative rate with final settlement determined after submission of annual cost reports by the District and audits thereof by the Medicaid fiscal intermediary. The District's Medicaid cost reports have been filed with the fiscal intermediary through August 31, 2023. The District's Medicaid cost reports have been audited by the Medicaid fiscal intermediary through August 31, 2018.

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

NOTES TO FINANCIAL STATEMENTS

6. Investments

The District's investments generally are reported at fair value, as discussed in Note 1. At August 31, 2023 and 2022, the District had the following investments and maturities, all of which were held in the District's name by a custodial bank that is an agent of the District:

			Investment	Maturities (in Yea	<u>rs)</u>	
Investment Type	Fair Value	Less than 1	1 - 5	6 - 10	Мо	re than 10
August 31, 2023 U.S. Agencies Total investments	\$ 18,899,672 \$ 18,899,672	\$ 4,741,969 \$ 4,741,969	\$10,933,780 \$10,933,780	\$ 3,223,923 \$ 3,223,923	\$ \$	-
August 31, 2022 U.S. Agencies Total investments	\$ 14,836,886 \$ 14,836,886	\$ 1,428,104 \$ 1,428,104	\$ 9,915,250 \$ 9,915,250	\$ 2,806,882 \$ 2,806,882	\$	686,650 686,650

The District categorizes its fair value measurements within the fair values hierarchy established by generally accepted accounting principles. The hierarchy is described in Note 7.

<u>Interest Rate Risk</u>- The District's investment policy does not limit investment maturities as a means of managing its exposure to fair value losses arising from increasing interest rates.

<u>Credit Risk</u>- Under Louisiana R.S. 33:2955, as amended, the District may invest in obligations of the U.S. Treasury, U.S. Agencies and instrumentalities, repurchase agreements, certificates of deposits, and other investments as provided in the statute. The District's investment policy does not limit its investment choices. As of August 31, 2023 and 2022, the District's investments in U.S. Agencies were rated AAA by Moody's Investors Service and AAA by Standard & Poor's.

<u>Concentration of Credit Risk-</u> The District's investment policy does not limit the amount the District may invest in any one issuer. As of August 31, 2023, more than 5 percent of the District's investments are in securities issued by Federal Farm Credit Bank, Federal Home Loan Bank, Fannie Mae, and Federal Home Loan Mortgage Corporation. These investments are 32%, 15%, 39%, and 10%, respectively, of total investments at August 31, 2023. As of August 31, 2023, more than 5 percent of the District's investments are in securities issued by Federal Home Loan Bank, Federal Farm Credit Bank, Federal Home Loan Bank, Fannie Mae, and the Tennessee Valley Authority. These investments were 39%, 15%, 38%, and 5%, respectively, of total investments at August 31, 2022.

<u>Custodial Credit Risk-</u> For an investment, this is the risk that, in the event of the failure of the counter party, the District will not be able to recover the value of its investments or collateral securities that are in the possession of an outside party. The District's policy addresses custodial credit risk for investments by requiring that they must be held by the District's fiscal agent bank that is selected in accordance with Louisiana statutes.

NOTES TO FINANCIAL STATEMENTS

7. Fair Value of Financial Instruments

Determination of Fair Value

The District categorizes its fair value measurements within the fair value hierarchy established by generally accepted accounting principles. The hierarchy is based on the valuation inputs used to measure the fair value of the asset.

Fair Value Hierarchy

In accordance with this guidance, the District groups its financial assets and financial liabilities generally measured at fair value in three levels, based on the markets in which the assets and liabilities are traded and the reliability of the assumptions used to determine fair value.

- Level 1 Valuation is based on quoted prices in active markets for identical assets or liabilities that the reporting entity has the ability to access at the measurement date. Level 1 assets and liabilities generally include debt and equity securities that are traded in an active exchange market. Valuations are obtained from readily available pricing sources for market transactions involving identical assets or liabilities.
- Level 2 Valuation is based on inputs other than quoted prices included within level 1 that are observable for the asset or liability, either directly or indirectly. The valuation may be based on quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the asset or liability.
- Level 3 Valuation is based on unobservable inputs that are supported by little or no market activity and that
 are significant to the fair value of the assets or liabilities. Level 3 assets and liabilities include financial
 instruments whose value is determined using pricing models, discounted cash flow methodologies, or similar
 techniques, as well as instruments for which determination of fair value requires significant management
 judgment or estimation.

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

<u>Government Securities</u>: Where quoted prices are available in an active market, the District classifies the securities within level 1 of the valuation hierarchy. Securities are defined as both long and short positions. Level 1 securities include highly liquid government bonds and exchange-traded equities.

If quoted market prices are not available, the District estimates fair values using pricing models and discounted cash flows that consider standard input factors such as observable market data, benchmark yields, interest rate volatilities, broker/dealer quotes, and credit spreads. Examples of such instruments, which would generally be classified within level 2 of the valuation hierarchy, include GSE (Government sponsored enterprises) obligations, such as Federal National Mortgage Association, Federal Home Loan Mortgage Corporation, and Federal Home Loan Bank, corporate bonds, and other securities. Mortgage-backed securities are included in level 2 if observable inputs are available. In certain cases, where there is limited activity or less transparency around inputs to the valuation, the District classifies those securities in level 3.

Fair Value of Assets Measured on a Recurring Basis

The District's securities are measured on a recurring basis through a model used by its investment custodian. Prices are derived from a model which uses actively quoted rates, prepayment models and other underlying credit and collateral data.

NOTES TO FINANCIAL STATEMENTS

7. Fair Value of Financial Instruments (continued)

The following tables present for each of the fair-value hierarchy level the District's financial assets and liabilities that are measured at fair value on a recurring basis at:

August 31, 2023	Level 2
U.S. Agency securities	\$ 18,899,672
Total	\$ 18,899,672
August 31, 2022	Level 2
<i>August 31, 2022</i> U.S. Agency securities	<i>Level 2</i> \$ 14,836,886

8. Capital Assets

Capital Assets and depreciation activity as of and for the year ended August 31, 2023, are as follows:

	Land	CIP	Buildings and Improvements	Equipment	Total
Cost of Capital Assets, 8/31/22 Additions	\$ 335,520	\$ 298,519 -	\$ 5,804,364 81,526	\$ 4,848,496 52.041	\$ 11,286,899 133,567
Deletions	-	-	(6,873)	(84,131)	(91,004)
Cost of Capital Assets,					
8/31/23	335,520	298,519	5,879,017	4,816,406	11,329,462
Accumulated					
Depreciation, 8/31/22	-	-	2,427,471	3,832,215	6,259,686
Additions	-	-	113,203	217,681	330,884
Deletions	-	-	(6,873)	(84,131)	(91,004)
Accumulated			<u>. </u>	<u>.</u>	. <u>.</u>
Depreciation, 8/31/23		-	2,533,801	3,965,765	6,499,566
Capital Assets, Net of Accumulated					
Depreciation at 8/31/23	\$ 335,520	\$ 298,519	\$ 3,345,216	\$ 850,641	\$ 4,829,896

NOTES TO FINANCIAL STATEMENTS

8. <u>Capital Assets</u> (continued)

Capital Assets and depreciation activity as of and for the year ended August 31, 2022, are as follows:

			Buildings and		
	Land	CIP	Improvements	Equipment	Total
Cost of Capital Assets,					
8/31/21	\$ 335,520	\$ 403,194	\$ 5,719,620	\$ 5,170,905	\$ 11,629,239
Additions	-	7,894	-	11,341	19,235
Deletions	-	-	(27,825)	(333,750)	(361,575)
Transfers	-	(112,569)	112,569	-	-
Cost of Capital Assets,					
8/31/22	335,520	298,519	5,804,364	4,848,496	11,286,899
Accumulated Depreciation,					
8/31/21	-	-	2,343,538	3,877,531	6,221,069
Additions	-	-	111,758	247,094	358,852
Deletions			(27,825)	(292,410)	(320,235)
Accumulated Depreciation,					
8/31/22			2,427,471	3,832,215	6,259,686
Capital Assets, Net of					
Accumulated					
Depreciation at 8/31/22	\$ 335,520	\$ 298,519	\$ 3,376,893	\$ 1,016,281	\$ 5,027,213

For the years ended August 31, 2023 and 2022, depreciation expense was \$330,884 and \$358,852, respectively.

9. <u>Concentrations of Credit Risk</u>

The District is located in Donaldsonville, Louisiana. The District grants credit without collateral to its patients, most of whom are local residents. Revenue from patients and third-party payors were as follows:

	2023	2022
Medicare and Medicaid	74.3 %	70.6 %
Blue Cross	8.7 %	10.0 %
Commercial	10.9 %	12.8 %
Private Pay	6.1 %	6.6 %
	100.0 %	100.0 %

Patient accounts receivable consist of the following at August 31:

	 2023	 2022
Receivable from patients and their insurance carriers	\$ 663,809	\$ 623,483
Receivable from private pay patients	1,357,759	1,250,103
Receivable from Medicare	802,798	823,312
Receivable from Medicaid	 405,107	 363,701
Total patient accounts receivable	3,229,473	 3,060,599
Less allowances for doubtful accounts and contractual		
adjustments	 (2,770,476)	 (2,372,737)
Patient accounts receivable, net	\$ 458,997	\$ 687,862

NOTES TO FINANCIAL STATEMENTS

10. Charity Care (unaudited)

The District is an active and caring member of the community. Its mission of providing and improving medical care in the area as well as its participation in community activities is a long standing tradition of service provided to benefit the community. Total charity care for the indigent during the years ended August 31, 2023 and 2022 was \$111,676 and \$31,522, respectively.

The amount reported as care for the indigent represents billings for services provided based on the District's charge rates to persons who cannot afford health care because of unavailable resources or who are uninsured. Total cost of charity care for the years ended August 31, 2023 and 2022 was \$149,509 and \$35,655, respectively.

11. Rural Hospital Grant

Since the District serves a disproportionate share of low-income patients, it qualifies for additional reimbursements from the State of Louisiana Department of Health and Hospitals rural hospital grant program. The rural hospital grant program was developed by the Rural Hospital Coalition, Inc., to assist rural hospitals in receiving adequate reimbursement for uninsured and indigent patients under the State of Louisiana Rural Hospital Preservation Act. The grant funds totaled \$2,895,377 and \$1,712,902 for the years ended August 31, 2023 and 2022, respectively.

12. Commitments and Contingent Liabilities

The healthcare industry is subject to numerous laws and regulations which include, among other things, matters such as government healthcare participation requirements, various licensure and accreditations, reimbursement for patient services, and Medicare and Medicaid fraud and abuse. Government action has increased with respect to investigations and/or allegations concerning possible violations of fraud and abuse and false claims statutes and/or regulations by healthcare providers. Providers that are found to have violated these laws and regulations might be excluded from participating in government healthcare programs, subjected to fines or penalties, or required to repay amounts received from the government for previously billed patient services. While management of the District believes that its policies, procedures, and practices comply with governmental regulations, no assurance can be given that the District will not be subjected to governmental inquiries or actions. Like other healthcare providers, in the ordinary course of business, the District is also subject to claims made by employees and other disputes and litigation arising from the conduct of its business.

13. COVID-19 Pandemic and CARES Act Funding

In 2020, the COVID-19 pandemic impacted the District as well as its patients, community and employees. The spread of COVID-19 and the ensuing response of federal, state and local authorities beginning in March 2020 resulted in a reduction in patient volumes and also adversely affected the District's net operating revenues for the years ended August 31, 2021 and 2020. Federal, state and local authorities have taken several actions designed to assist healthcare providers in providing care to COVID-19 and other patients and to mitigate the adverse economic impact of the COVID-19 pandemic.

Legislative actions taken by the federal government include the Coronavirus Aid, Relief, and Economic Security Act (the "CARES Act"), which was signed into law on March 27, 2020, the Paycheck Protection Program and Health Care Enhancement Act (the "PPP Act"), which was signed into law on April 24, 2020, the Continuing Appropriations Act, 2021 and Other Extensions Act (the "Continuing Appropriations Act"), which was signed into law October 1, 2020, and the Consolidated Appropriations Act, 2021 (the "Consolidated Appropriations Act (CAA)" and, collectively, with the CARES Act, the PPP Act, and the Continuing Appropriations Act, the "COVID Acts"), which was signed into law on December 27, 2020. Through the COVID Acts, the federal government has authorized \$178 billion in payments to be distributed through the Public Health and Social Services Emergency Fund ("Provider Relief Fund" or "PRF").

NOTES TO FINANCIAL STATEMENTS

13. <u>COVID-19 Pandemic and CARES Act Funding</u> (continued)

During the year ended August 31, 2020, the District received \$3,786,619 in cash payments from the Provider Relief Fund. These payments are not loans and, therefore, they are not subject to repayment. However, as a condition to receiving distributions, the District had to agree to certain terms and conditions, including, among other things, that the funds are being used for lost revenues and unreimbursed COVID-related costs as defined by the U.S. Department of Health and Human Services ("HHS"), and that it will not seek collection of out-of-pocket payments from a COVID-19 patient that are greater than what the patient would have otherwise been required to pay if the care had been provided by an in-network provider. On December 13, 2021, the District returned \$464,535 in unused Provider Relief Funds to the United States Department of Health and Human Services/Health Resources and Services Administration in accordance with the terms of the award. On June 29, 2023, the District returned an additional \$262,506 in unused Provider Relief Funds.

The District is required to comply with the reporting requirements described in the terms and conditions and as determined by HHS. The District recognizes grant payments as income when there is reasonable assurance that it has complied with the conditions associated with the grant. Initial estimates could change materially in the future based on our operating performance or COVID-19 activities, as well as the government's evolving grant compliance guidance. During the years ended August 31, 2023 and 2022, the District recognized Provider Relief Fund revenues of \$48,062 and \$354,432, respectively.

14. Lease Agreement

The District is a lessor for a noncancellable lease of a medical office building to a physician group. The term of this lease is 87 months at equal monthly installments of \$9,073. In accordance with GASB Statement No. 87, *Leases*, a receivable has been recorded for the present value of lease payments to be received over the lease term of the agreement. As of August 31, 2023, the value of the lease receivable was \$453,061. Also, deferred inflows associated with this lease have been recorded and will be recognized as revenue over the lease term. The balance of the deferred inflows at August 31, 2023 and 2022 was \$431,458 and \$531,679, respectively. Inflows recognized during the year ended August 31, 2023 consisted of lease revenue of \$101,519 and interest income of \$9,775. Inflows recognized during the year ended August 31, 2022 consisted of lease revenue of \$101,273 and interest income of \$11,898. Since the lease agreement includes scheduled payments over multiple years, the receivable balances include amounts not expected to be collected within the next year. Future minimum payments to be received under this lease are:

Fiscal Year	Amount		
2024	\$	100,933	
2025		102,970	
2026		105,048	
2027		107,169	
2028		36,941	
	\$	453,061	

WEST ASCENSION PARISH HOSPITAL SERVICE DISTRICT OF ASCENSION PARISH, LOUISIANA

SUPPLEMENTAL INFORMATION

SCHEDULES OF NET PATIENT SERVICE REVENUES YEARS ENDED AUGUST 31, 2023 AND 2022

	2023	2022
Patient services:		
Emergency room	\$ 3,763,381	\$ 3,534,762
Therapy	7,754	15,699
Central services and supply	1,640	1,812
Laboratory	1,218,665	1,437,106
Pharmacy	9,195	9,044
Radiology	190,715	178,498
Medical transcription fees	5,082	22,349
EKG	32,135	27,215
Wound Care	954,061	923,965
Ultrasound	122,700	79,740
Mammography	232,075	214,350
Gross patient service revenues	6,537,403	6,444,540
Contractual adjustments	(1,936,304)	(2,410,534)
Provision for bad debts	(969,161)	(605,468)
Third-party payor settlements	1,983,872	1,373,031
	(921,593)	(1,642,971)
Net patient service revenue	\$ 5,615,810	\$ 4,801,569

See the accompanying notes and independent auditors' report.

SCHEDULE OF COMPENSATION, BENEFITS & OTHER PAYMENTS TO AGENCY HEAD OR CHIEF EXECUTIVE OFFICER YEAR ENDED AUGUST 31, 2023

Agency Head Name/Title: Vince Cataldo, Administrator

Purpose	ļ	Amount		
Salary	\$	155,556		
Benefits - Health Insurance		10,343		
Reimbursements		204		
Travel		255		
	\$	166,358		

See the accompanying notes and independent auditors' report.



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

Board of Commissioners West Ascension Parish Hospital Service District of Ascension Parish, Louisiana Donaldsonville, Louisiana

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the West Ascension Parish Hospital Service District of Ascension Parish, Louisiana (the District), a component unit of the Ascension Parish Council, as of and for the year ended August 31, 2023, and the related notes to the financial statements, which collectively comprise of the District's basic financial statements, and have issued our report thereon dated February 29, 2024.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the District's internal control over financial reporting (internal control) as a basis for designing 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 the District's internal control. Accordingly, we do not express an opinion on the effectiveness of the District's internal control.

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

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that were not identified. We identified a certain deficiency in internal control, described in the accompanying schedule of findings and questioned costs as item 2023-001 that we consider to be a material weakness.

Report on Compliance and Other Matters

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

[&]quot;EisnerAmper" is the brand name under which EisnerAmper LLP and Eisner Advisory Group LLC and its subsidiary entities provide professional services. EisnerAmper LLP and Eisner Advisory Group LLC are independently owned firms that practice in an alternative practice structure in accordance with the AICPA Code of Professional Conduct and applicable law, regulations and professional standards. EisnerAmper LLP is a licensed CPA firm that provides attest services, and Eisner Advisory Group LLC and its subsidiary entities provide tax and business consulting services. Eisner Advisory Group LLC and its subsidiary entities are not licensed CPA firms.

The District's Response to Finding

Government Auditing Standards requires the auditor to perform limited procedures on the District's response to the finding identified in our audit and described in the accompanying schedule of findings and questioned costs. The District'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.

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 District's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Governmental Auditing Standards* in considering the District's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Eisner Amper LLP

EISNERAMPER LLP Donaldsonville, Louisiana February 29, 2024



SCHEDULE OF FINDINGS AND RESPONSES YEAR ENDED AUGUST 31, 2023

SECTION I - SUMMARY OF AUDIT RESULTS

Financial Statements

 Type of auditor's report issued:
 Unmodified

 Internal control over financial reporting:
 •

 •
 Material weakness(es) identified:
 Yes

 •
 Significant deficiency(ies) identified that are not considered to be material weaknesses:
 None reported

 Noncompliance material to the financial statements:
 No

SECTION II – FINANCIAL STATEMENT FINDINGS

MATERIAL WEAKNESS

2023-001 Internal Control over Financial Reporting

Criteria:	Internal control over financial reporting includes ensuring that policies and procedures exist that pertain to an entity's ability to initiate, record, process, and report financial data consistent with the assertion embodied in the annual financial statements, which for the District, is that financial statements are prepared in accordance with generally accepted accounting principles (GAAP).
Condition:	During the audit, we noted several accounts which required adjustment in order for them to properly reflect end of year balances. These accounts included property and equipment, inventory, and receivable and liability accruals. Additionally, there are accounts (suspense liabilities) that do not have subledgers to support the balances.
Cause:	The District does not have adequate policies, procedures, and internal controls to prepare accurate and complete financial statements in accordance with GAAP on a timely basis.
Effect:	Due to the inaccuracy of the information provided to the Board, the District may not have the ability to make appropriate financial decisions.
Recommendation:	 The District should evaluate its accounting and financial reporting function. Specifically, the District should consider the following: Take more of a role in preparing and recording journal entries historically proposed by the auditors as part of the audit. Implement procedures and controls to ensure accounts payable and expenses are properly coded and reported on a timely basis at year-end.
View of Responsible Official:	The District is under new administration and is currently reviewing all month end close

processes. An outside consultant has been engaged to assist in addressing this finding.

SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS YEAR ENDED AUGUST 31, 2023

A. FINDINGS - FINANCIAL STATEMENT AUDIT

2022-001 Internal Control over Financial Reporting

- **Condition:** During the audit, we noted several accounts which required adjustment in order for them to properly reflect end of year balances. These accounts included patient revenues, property and equipment, inventory, and receivable and liability accruals. Additionally, there are accounts (suspense liabilities) that do not have subledgers to support the balances.
- *Current Status:* Similar conditions still exist. See similar finding 2023-001.

B. FINDINGS AND QUESTIONED COSTS - MAJOR FEDERAL AWARDS PROGRAMS AUDIT

2022-002 Enhancement of Policies and Procedures for Federal Awards

Condition: The District reported certain Provider Relief Fund expenses of \$310,568 as an expense in both Period 1 and Period 2; therefore, the data input into the reporting portal was not accurate.

Current Status: Resolved.

2022-003 Enhancement of Policies and Procedures for Federal Awards

- **Condition:** During our audit procedures, we identified that the written policies and procedures of the District do not directly address all required compliance areas with the Uniform Guidance for federal programs. Additionally, documentation could be improved to track and identify time spend on COVID-19 initiatives.
- Current Status: Resolved.

EISNERAMPER

WEST ASCENSION PARISH HOSPITAL SERVICE DISTRICT

REPORT ON STATEWIDE AGREED-UPON PROCEDURES ON COMPLIANCE AND CONTROL AREAS

FOR THE PERIOD ENDED AUGUST 31, 2023

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INDEPENDENT ACCOUNTANTS' REPORT ON APPLYING AGREED-UPON PROCEDURES

To the Board of Commissioners of West Ascension Parish Hospital Service District and the Louisiana Legislative Auditor

We have performed the procedures enumerated in Schedule A on the control and compliance (C/C) areas identified in the Louisiana Legislative Auditor's (LLA's) Statewide Agreed-Upon Procedures (SAUPs) of the West Ascension Parish Hospital Service District for the fiscal period September 1, 2022 through August 31, 2023. West Ascension Parish Hospital Service District's management is responsible for those C/C areas identified in the SAUPs.

West Ascension Parish Hospital Service District (the District) 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 the LLA's SAUPs for the fiscal period September 01, 2022 through August 31, 2023. Additionally, the 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 we performed, and the associated findings are summarized in the attached Schedule A, which is an integral part of this report.

We were engaged by the District to perform this agreed-upon procedures engagement and conducted our engagement in accordance with attestation standards established by the AICPA and the standards applicable to attestation engagements contained in *Government Auditing Standards* issued by the Comptroller General of the United States. 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 of the District for the fiscal period September 1, 2022 through August 31, 2023. 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 the District 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 intended solely to describe the scope of testing performed on those C/C areas identified in the SAUPs, and the result of that testing, and not to provide an opinion on control or compliance. Accordingly, this report is not suitable for any other purpose. Under Louisiana Revised Statute 24:513, this report is distributed by the LLA as a public document.

Eisner Amper LLP

EISNERAMPER LLP Donaldsonville, Louisiana February 29, 2024

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Schedule A

The procedures performed and the results thereof are set forth below. The procedure is stated first, followed by the results of the procedure presented in italics. If the item being subjected to the procedures is positively identified or present, then the results will read *"no exception noted" or for step 13 "we performed the procedure and discussed the results with management".* If not, then a description of the exception ensues.

1) Written Policies and Procedures

- A. 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:
 - i. **Budgeting**, including preparing, adopting, monitoring, and amending the budget.

No exception noted.

ii. *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.

No exception noted.

iii. **Disbursements**, including processing, reviewing, and approving.

No exception noted.

iv. **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).

No exception noted.

v. **Payroll/Personnel**, including (1) payroll processing, (2) reviewing and approving time and attendance records, including leave and overtime worked, and (3) approval process for employee rates of pay or approval and maintenance of pay rate schedules.

No exception noted.

vi. **Contracting**, including (1) types of services requiring written contracts, (2) standard terms and conditions, (3) legal review, (4) approval process, and (5) monitoring process.

The District's written policies and procedures for contracting do not address attribute (1) types of services requiring written contracts. The other attributes are addressed in the policies and procedures.

vii. *Travel and Expense Reimbursement*, including (1) allowable expenses, (2) dollar thresholds by category of expense, (3) documentation requirements, and (4) required approvers.

The District's written policies and procedures for travel and expense reimbursement do not address attributes (1) allowable expenses, (2) dollar thresholds by category of expense, and (4) required approvers. The other attributes are addressed in the policies and procedures.

Schedule A

viii. **Credit Cards (and debit cards, fuel cards, purchase 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).

No exception noted.

ix. *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.

No exception noted.

x. **Debt Service**, including (1) debt issuance approval, (2) continuing disclosure/EMMA reporting requirements, (3) debt reserve requirements, and (4) debt service requirements.

The District does not have written policies and procedures for debt service. The District did not have debt outstanding during the fiscal period.

xi. 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.

The District's written policies and procedures for disaster recovery/business continuity do not address attributes (4) use of antivirus software on all systems, (5) timely application of all available system and software patches/updates, and (6) identification of personnel and tools needed to recover operations after a critical event. The other attributes are addressed in the policies and procedures.

xii. *Prevention of Sexual Harassment*, including R.S. 42:342-344 requirements for (1) agency responsibilities and prohibitions, (2) annual employee training, and (3) annual reporting.

The District's sexual harassment policy does not address attributes (2) annual employee training and (3) annual reporting. The other attributes are addressed in the policies and procedures.

2) Board or Finance Committee

- 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 in effect during the fiscal period, and
 - i. Observe that the board/finance committee met with a quorum at least monthly, or on a frequency in accordance with the board's enabling legislation, charter, bylaws, or other equivalent document.

Schedule A

ii. For those entities reporting on the governmental accounting model, observe whether the minutes referenced or included monthly budget-to-actual comparisons on the general fund, quarterly budget-to-actual, at a minimum, on proprietary funds, and semi-annual budget-to-actual, at a minimum, on all special revenue funds. *Alternatively, for those entities reporting on the not-for-profit accounting model, observe that the minutes referenced or included financial activity relating to public funds if those public funds comprised more than 10% of the entity's collections during the fiscal period.*

No exception noted.

iii. For governmental entities, obtain the prior year audit report and observe the unassigned fund balance in the general fund. If the general fund had a negative ending unassigned fund balance in the prior year audit report, observe that the minutes for at least one meeting during the fiscal period referenced or included a formal plan to eliminate the negative unassigned fund balance in the general fund.

This step is not applicable to the District, as the District does not have a general fund.

iv. Observe whether the board/finance committee received written updates of the progress of resolving audit finding(s), according to management's corrective action plan at each meeting until the findings are considered fully resolved.

There was not evidence of the Board of Commissioners receiving written updates of the progress of resolving audit findings, according to management's corrective action plan, at each meeting until the findings are considered fully resolved.

3) Bank Reconciliations

A. 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 listing of bank accounts was provided and included a total of four bank accounts. Management identified the District's main operating account. No exceptions were noted as a result of performing this procedure. From the listings provided, we selected the four bank accounts and obtained the bank reconciliations for the month ended February 28, 2023, resulting in four bank reconciliations obtained and subjected to the below procedures.

i. Bank reconciliations include evidence that they were prepared within 2 months of the related statement closing date (e.g., initialed and dated, electronically logged);

No exception noted.

ii. Bank reconciliations include written evidence that a member of management or a 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

iii. 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.

No exception noted.

4) Collections (excluding electronic funds transfers)

A. 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).

A listing of deposit sites was provided and included a single deposit site. No exceptions were noted as a result of performing this procedure. We selected the single deposit site and performed the procedures below.

B. 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 (e.g. 5 collection locations for 5 deposit sites), obtain and inspect written policies and procedures relating to employee job duties (if there are no written policies or procedures, then inquire of employees about their job duties) at each collection location, and observe that job duties are properly segregated at each collection location such that

A listing of collection locations for the deposit site selected in procedure #4A was provided and included one collection location. No exceptions were noted as a result of performing this procedure. We selected the single collection location for the deposit site. Review of the District's written policies and procedures or inquiry with employee(s) regarding job duties was performed in order to perform the procedures below.

i. Employees responsible for cash collections do not share cash drawers/registers;

No exception noted.

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

No exception noted

iii. Each employee responsible for collecting cash is not also 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; and

No exception noted.

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

No exception noted.

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

Schedule A

D. Randomly select two deposit dates for each of the 5 bank accounts selected for Bank Reconciliations procedure #3A (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). *Alternatively, 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:

We haphazardly selected two deposit dates for each of the four bank accounts selected in procedure #3A; however, not all bank accounts had deposits during the period. We obtained supporting documentation for each of the two resulting deposits and performed the procedures below.

i. Observe that receipts are sequentially pre-numbered.

No exception noted.

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

No exception noted.

iii. Trace the deposit slip total to the actual deposit per the bank statement.

No exception noted.

iv. 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).

No exception noted.

v. Trace the actual deposit per the bank statement to the general ledger.

No exception noted.

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

A. 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).

The listing of locations that process payments for the fiscal period was provided. No exceptions were noted as a result of performing this procedure. We selected the single location and performed the procedures below.

B. For each location selected under #5A 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, then inquire of employees about their job duties), and observe that job duties are properly segregated such that

The listing of employees involved with non-payroll purchasing and payment functions for the single payment processing location selected in procedure #5A was provided. No exceptions were noted as a result of performing this procedure. Review of the District's written policies and procedures or inquiry with employee(s) regarding job duties was performed in order to perform the procedures below.

Schedule A

i. At least two employees are involved in initiating a purchase request, approving a purchase, and placing an order or making the purchase;

For the location selected for our procedures, there are instances where a single employee can initiate purchase requests and approves purchases.

ii. At least two employees are involved in processing and approving payments to vendors;

No exception noted.

iii. 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;

For the location selected for our procedures, the person processing payments was not prohibited from adding / modifying vendor files. There is no periodic review of changes to vendor files.

iv. 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; and

No exception noted.

v. Only employees/officials authorized to sign checks approve the electronic disbursement (release) of funds, whether through automated clearinghouse (ACH), electronic funds transfer (EFT), wire transfer, or some other electronic means.

No exception noted.

C. For each location selected under #5A 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 listing of non-payroll disbursements for each payment processing location selected in procedures #5A was provided related to the fiscal period. No exceptions were noted as a result of performing this procedure. From the listing provided, we haphazardly selected 5 disbursements and performed the procedures below.

i. Observe whether the disbursement, whether by paper or electronic means, matched the related original itemized invoice, and that supporting documentation indicates that deliverables included on the invoice were received by the entity, and

No exception noted.

ii. Observe whether the disbursement documentation included evidence (e.g., initial/date, electronic logging) of segregation of duties tested under procedure #5B above, as applicable.

No exception noted.

D. Using the entity's main operating account and the month selected in Bank Reconciliations procedure #3A, randomly select 5 non-payroll-related electronic disbursements (or all electronic disbursements if less than 5) and observe that each electronic disbursement was (a) approved by only those persons authorized to disburse funds (e.g., sign checks) per the entity's policy, and (b) approved by the required number of authorized signers per the entity's policy. Note: If no electronic payments were made from the main operating account during the month selected the practitioner should select an alternative month and/or account for testing that does include electronic disbursements.

The District did not have electronic disbursements during the period.

Schedule A

6) Credit Cards/Debit Cards/Fuel Cards/Purchase Cards (Cards)

A. Obtain from management a listing of all active credit cards, bank debit cards, fuel cards, and purchase 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.

A listing of cards was provided, including a total of two cards. No exceptions were noted as a result of performing this procedure.

B. 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

From the listing provided, we selected the two cards used during the fiscal period. We haphazardly selected one monthly statement for each of the two cards and performed the procedures noted below.

i. 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) were reviewed and approved, in writing (or electronically approved) by someone other than the authorized card holder (those instances requiring such approval that may constrain the legal authority of certain public officials, such as the mayor of a Lawrason Act municipality, should not be reported); and

No exception noted.

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

No exception noted.

C. Using the monthly statements or combined statements selected under procedure #7B above, <u>excluding fuel cards</u>, randomly select 10 transactions (or all transactions if less than 10) from each statement, and obtain supporting documentation for the transactions (e.g., each card should have 10 transactions subject to inspection). For each transaction, observe that it is supported by (1) an original itemized receipt that identifies precisely what was purchased, (2) written documentation of the business/public purpose, and (3) documentation of the individuals participating in meals (for meal charges only). For missing receipts, the practitioner should describe the nature of the transaction and observe whether management had a compensating control to address missing receipts, such as a "missing receipt statement" that is subject to increased scrutiny.

We haphazardly selected 10 transactions for one card selected and the single transaction on the second card selected. Thus, eleven transactions were subject to testing. One of the eleven transactions selected did not have an original itemized receipt that identifies precisely what was purchased or written documentation of the business/public purpose. The missing receipt was for antivirus protection coverage, based on management's representation. Management's process includes review of credit card statements. No exceptions were noted for the other transactions selected for testing.

Schedule A

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

A. 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, and 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

The listing of travel and travel-related expense reimbursements was provided for the fiscal period. No exceptions were noted as a result of performing this procedure. From the listing provided, we selected all three reimbursements in the listing and performed the procedures below.

i. If reimbursed using a per diem, observe that 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 exception noted.

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

This procedure is not applicable. None of the reimbursements selected used actual cost.

Observe that each reimbursement is supported by documentation of the business/public purpose (for meal charges, observe that the documentation includes the names of those individuals participating) and other documentation required by "Written Policies and Procedures", procedure #1A(vii); and

No exception noted.

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

For one of the three reimbursements selected, the person reviewing and approving was the same person that was receiving the reimbursement. No exceptions were noted for the other transactions selected for testing.

8) Contracts

A. 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. *Alternatively, 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

An active vendor list of all agreements/contracts for professional services, materials and supplies, leases, and construction activities that were initiated or renewed during the fiscal period was provided. No exceptions were noted as a result of performing this procedure. From the listing provided, we haphazardly selected five contracts and performed the procedures below.

i. 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;

This procedure is not applicable to the contracts selected for testing, as the Louisiana Public Bid Law did not apply to the contracts.

Schedule A

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

No exception noted.

iii. 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, the documented approval); and

No exception noted.

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

No exception noted.

9) Payroll and Personnel

A. 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.

A listing of employees/elected officials employed during the fiscal year was provided. No exceptions were noted as a result of performing this procedure. From the listing provided, we haphazardly selected five employees/officials and performed the specified procedures. No exception noted.

B. Randomly select one pay period during the fiscal period. For the 5 employees or officials selected under procedure #9A above, obtain attendance records and leave documentation for the pay period, and

We haphazardly selected 1 pay period during the fiscal period and performed the procedures below for the 5 employees/officials selected in procedure #9A.

i. Observe that all selected employees or officials documented their daily attendance and leave (e.g., vacation, sick, compensatory);

No exception noted.

ii. Observe whether supervisors approved the attendance and leave of the selected employees or officials;

No exception noted.

iii. Observe that any leave accrued or taken during the pay period is reflected in the entity's cumulative leave records; and

No exception noted.

iv. Observe the rate paid to the employees or officials agrees to the authorized salary/pay rate found within the personnel file.

Schedule A

C. 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 and 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's or official's cumulative leave records, agree the pay rates to the employee's or official's authorized pay rates in the employee's or official's personnel files, and agree the termination payment to entity policy.

A listing of employees/officials receiving termination payments during the fiscal period was provided. No exceptions were noted as a result of performing this procedure. From the listing provided, we selected the single employee who received a termination payment and performed the specified procedures. No exception noted.

D. 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.

No exception noted.

10) Ethics

- A. Using the 5 randomly selected employees/officials from Payroll and Personnel procedure #9A obtain ethics documentation from management, and
 - i. Observe whether the documentation demonstrates that each employee/official completed one hour of ethics training during the calendar year as required by R.S. 42:1170; and

No exception noted.

ii. Observe whether the entity maintains documentation which demonstrates that each employee and official were notified of any changes to the entity's ethics policy during the fiscal period, as applicable.

The entity did not have any changes to the ethics policy. Thus, this step is not applicable.

B. Inquire and/or observe whether the agency has appointed an ethics designee as required by R.S. 42:1170.

No exception noted.

11) Debt Service

A. Obtain a listing of bonds/notes issued during the fiscal period and management's representation that the listing is complete. Select all bonds/notes on the listing, obtain supporting documentation, and observe that State Bond Commission approval was obtained for each bond/note issued as required by Article VII, Section 8 of the Louisiana Constitution.

This step is not applicable to the District, as the District had no bonds/notes issued during the fiscal period.

Schedule A

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

This step is not applicable to the District, as the District had no bonds/notes outstanding at the end of the fiscal period.

12) Fraud Notice

A. 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 as required by R.S. 24:523.

Management asserted that there were no misappropriations of public funds and assets during the fiscal period.

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

No exception noted.

13) Information Technology Disaster Recovery/Business Continuity

- A. Perform the following procedures, verbally discuss the results with management, and report "We performed the procedure and discussed the results with management."
 - i. Obtain and inspect the entity's most recent documentation that it has backed up its critical data (if there is no written documentation, then inquire of personnel responsible for backing up critical data) and observe evidence that such backup (a) occurred within the past week, (b) was not stored on the government's local server or network, and (c) was encrypted.

We performed the procedure and discussed the results with management.

ii. Obtain and inspect the entity's most recent documentation that it has tested/verified that its backups can be restored (if there is no written documentation, then 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.

iii. 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.

Schedule A

B. Randomly select 5 terminated employees (or all terminated employees if less than 5) using the list of terminated employees obtained in procedure #9C. Observe evidenced that the selected terminated employees have been removed or disabled from the network.

We performed the procedure and discussed the results with management.

14) Prevention of Sexual Harassment

A. Using the 5 randomly selected employees/officials from "Payroll and Personnel" procedure #9A, obtain sexual harassment training documentation from management, and observe that the documentation demonstrates each employee/official completed at least one hour of sexual harassment training during the calendar year as required by R.S. 42:343.

No exception noted.

B. Observe that the entity has posted its sexual harassment policy and complaint procedure on its website (or in a conspicuous location on the entity's premises if the entity does not have a website).

No exception noted.

- C. Obtain the entity's annual sexual harassment report for the current fiscal period, observe that the report was dated on or before February 1, and observe that the report includes the applicable requirements of R.S. 42:344:
 - i. Number and percentage of public servants in the agency who have completed the training requirements;

No exception noted.

ii. Number of sexual harassment complaints received by the agency;

No exception noted.

iii. Number of complaints which resulted in a finding that sexual harassment occurred;

No exception noted.

iv. Number of complaints in which the finding of sexual harassment resulted in discipline or corrective action; and

No exception noted.

v. Amount of time it took to resolve each complaint.

WEST ASCENSION PARISH HOSPITAL SERVICE DISTRICT MANAGEMENT'S RESPONSE AND CORRECTIVE ACTION PLAN AUGUST 31, 2023

Schedule B

To address the identified deficiencies, we have already begun implementing corrective measures. Specifically, we are:

1. Written Policies and Procedures

A.i.-xii. Conducting a comprehensive review of our current policies and procedures to identify gaps and areas for improvement, updating our policies and procedures to ensure compliance with regulations and best practices, and providing additional training for staff to ensure understanding and adherence to updated policies and procedures.

2. Board of Finance Committee

iv. Regarding the observation about the Board of Commissioners receiving written updates on the progress of resolving audit findings, we acknowledge that there was not evidence of this practice during the audit period. To address this deficiency, we will implement a new protocol to provide written updates on the progress of resolving audit findings to the Board of Commissioners at each meeting until the findings are considered fully resolved.

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

- B.i. Conducting a comprehensive review of our current policies and procedures to identify gaps and areas for improvement, updating our policies and procedures to ensure compliance with regulations and best practices, and providing additional training for staff to ensure understanding and adherence to updated policies and procedures.
- B.iii. Conducting a comprehensive review of our current policies and procedures to identify gaps and areas for improvement, updating our policies and procedures to ensure compliance with regulations and best practices, and providing additional training for staff to ensure understanding and adherence to updated policies and procedures.

6. <u>Credit Cards/Debit Cards/Fuel Cards/Purchase Cards (Cards)</u>

- C. We will ensure that an original itemized receipts identifying what was purchased or written documentation of the business/public purpose is included on every transaction documentation.
- 7. <u>Travel and Travel Related Expense Reimbursements (excluding card transactions)</u>
 - A. iv. We have implemented a strict policy requiring that each reimbursement is reviewed and approved in writing by someone other than the person receiving the reimbursement. This measure will ensure proper oversight and compliance with regulations.

We are committed to improving our financial and management practices to ensure compliance with all applicable regulations. Thank you for your feedback, and we look forward to demonstrating our progress in the next audit cycle.

Sincerely,

Jessica Soileau Canning Interim CEO Prevost Memorial Hospital