FINANCIAL STATEMENTS

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

<u>September 30, 2019 AND 2018</u>

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<u>September 30, 2019 AND 2018</u>

TARLE	α	CONTENTS

	PAGE
Independent Auditor's Report	1 - 2
Basic Financial Statements:	
Statements of Net Position	3 - 4
Statements of Revenues, Expenses and Changes in Net Position	5
Statements of Cash Flows	6 - 7
Notes to the Financial Statements	8 - 18
Supplemental Information:	
Patient Service Revenues	19 - 20
Other Operating Revenues	21
Professional Services .	22
General and Administrative Services	23
Governing Board Expense	. 24
Schedule of CEO Compensation	25
Other Required Reports:	
Independent Auditor's Report on Internal Control over Financial Reporting and on Compliance and Other Matters based on a Audit of Financial Statements performed in accordance with Government Auditing Standards	26 - 27
Schedule of Findings and Questioned Costs and Management's	
Corrective Action Plan	28 - 29
Schedule of Prior Year Findings	30



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INDEPENDENT AUDITOR'S REPORT

Board of Commissioners Jackson Parish Hospital Service District No. 1 d/b/a Jackson Parish Hospital Jonesboro, Louisiana

REPORT ON THE FINANCIAL STATEMENTS

We have audited the accompanying financial statements of Jackson Parish Hospital Service District No. 1, d/b/a Jackson Parish Hospital, a component unit of the Jackson Parish Police Jury, State of Louisiana, ("the Hospital"), as of and for the years ended September 30, 2019 and 2018, and the related notes to the financial statements, which collectively comprise the Hospital's basic financial statements as listed in the table of contents.

MANAGEMENT'S RESPONSIBILITY FOR THE FINANCIAL STATEMENTS

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

AUDITOR'S RESPONSIBILITY

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

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

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

OPINIONS

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Jackson Parish Hospital, a component unit of the Jackson Parish Police Jury, State of Louisiana as of September 30, 2019 and 2018, and the changes in financial position and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

OTHER MATTERS

Required Supplementary Information

The Hospital has not presented Management's Discussion and Analysis that accounting principles generally accepted in the United States has determined is necessary to supplement, although not required to be a part of, the basic financial statements.

Other Supplemental Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedules identified in the table of contents as supplemental information are presented for purposes of additional analysis and are not a required part of the financial statements.

Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

OTHER REPORTING REQUIRED BY GOVERNMENT AUDITING STANDARDS

In accordance with Government Auditing Standards, we have also issued our report dated March 25, 2020 on our consideration of the Hospital's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the hospital'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 Hospital's internal control over financial reporting and compliance.

Largeinais Broussard & Kohlenberg

LANGLINAIS BROUSSARD & KOHLENBERG (A Corporation of Certified Public Accountants) Abbeville, Louisiana

March 25, 2020

STATEMENT OF NET POSITION

SEPTEMBER 30,

ASSETS

	2019	2018
CURRENT ASSETS:		
Cash and Cash Equivalents	\$ 8,612,159	\$ 6,745,695
Accounts Receivables, Less Allowance for Doubtful		
Accounts of \$1,096,216 in 2019 and \$1,732,018 in 2018	1,382,787	1,646,840
Due from Third Party Payors	2,859,239	1,127,808
Other Receivables	730,727	1,203,144
Inventories	447,856	382,046
Prepaid Expenses	131,000	67,845
Total Current Assets	14,163,768	11,173,378
ASSETS WHOSE USE IS LIMITED:		
Internally Designated for Capital Acquisitions		5,349
Total Assets Whose Use is Limited		5,349
PROPERTY, PLANT AND EQUIPMENT:		
Property, Plant and Equipment Cost	14,068,929	12,980,014
Less: Accumulated Depreciation	(10, 325, 415)	(9,333,335)
Total Property, Plant and Equipment	3,743,514	3,646,679
TOTAL ASSETS	\$ 17,907,282	\$ 14,825,406

STATEMENT OF NET POSITION

SEPTEMBER 30,

LIABILITIES AND NET POSITION

	2019	2018
CURRENT LIABILITIES:		
Current Portion of Long-Term Debt	\$ 264,458	\$ 375,142
Accounts Payable	531,674	247,672
Accrued Salaries and Related Withholdings	1,019,430	901,089
Credit Balances	228,790	267,075
Due to Third Party Payors	92,693	58,645
Due to Employees for Employee Benefits	90,241	90,241
Interest Payable	_	
Total Current Liabilities	2,227,286	1,939,864
LONG-TERM LIABILITIES:		
Long-Term Debt;		
Obligations under Capital Leases	352,680	613,962
Total Long-Term Liabilities	352,680	613,962
TOTAL LIABILITIES	2,579,966	2,553,826
NET POSITION;		
Invested in Capital, Net of Related Debt	3,126,376	2,657,575
Restricted Net Position (Expendable)	_	5,349
Unrestricted	12,200,940	9,608,656
TOTAL NET POSITION	15,327,316	12,271,580
TOTAL LIABILITIES AND NET POSITION	\$ 17,907,282	\$ 14,825,406

STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION

	•	
	2019	2018
OPERATING REVENUES:		
Net Patient Service Revenues before Provision for Doubtful Accounts	\$ 16,265,111	\$ 15,823,627
Provision for Doubtful Accounts	(1,380,826)	(1,376,460)
Net Patient Service Revenues after Provision for Doubtful Accounts	14,884,285	14,447,167
Intergovernmental Transfers - Operating	4,699,337	6,025,113
Other Operating Revenue	178,522	263,535
TOTAL OPERATING REVENUE	19,762,144	20,735,815
OPERATING EXPENSES:		
Professional Services	10,406,075	10,886,545
General and Administrative	7,684,461	6,990,874
Depreciation and Amortization	992,080	911,995
TOTAL OPERATING EXPENSES	19,082,616	18,789,414
INCOME FROM OPERATIONS	679,528	1,946,401
NON-OPERATING REVENUES (EXPENSES)		
Ad Valorem Taxes	2,315,883	2,316,470
Grant Income	3,750	123,331
Interest Income	95,665	15,454
Interest Expense	(38,974)	(29,354)
Gain (Loss) on Disposal of Asset	(116)	1,275
TOTAL NON-OPERATING REVENUES	2,376,208	2,427,176
CHANGE IN NET POSITION	3,055,736	4,373,577
TOTAL NET POSITION, BEGINNING	12,271,580	7,898,003
TOTAL NET POSITION, ENDING	\$ 15,327,316	\$ 12,271,580

STATEMENT OF CASH FLOWS

	· ·		
	2019	2018	
CASH FLOWS FROM OPERATING ACTIVITIES:			
Cash Received from Patients	\$ 13,404,596	\$ 13,593,172	
Cash Received from Other Revenues	178,522	263,535	
Cash Received from Intergovernmental Transfers	4,699,337	6,025,113	
Cash Payments to Suppliers for Goods and Services	(7,370,286)	(7,742,157)	
Cash Payments to Employees for Services	(10,436,248)	(10,246,930)	
Net Cash Flow Provided by Operating Activities	475,921	1,892,733	
CASH FLOW FROM NON-CAPITAL FINANCING ACTIVITIES:			
Ad Valorem Taxes	2,315,883	2,316,470	
Grant Income	476,167	(114,601)	
Loss (Gain) on Disposal of Asset	116	(1,275)	
Net Cash Provided By Non-Capital Financing Activities	2,792,166	2,200,594	
CASH FLOW FROM CAPITAL AND RELATED FINANCING ACTIVITIES:			
Purchase of Fixed Assets	(1,091,696)	(768,295)	
Principal Payments on Long-Term Debt	(371,967)	(662,844)	
Interest Payments on Long-Term Debt	(38,974)	(31,595)	
Net Cash Used in Capital and Related Financing Activities	(1,502,637)	(1,462,734)	
CASH FLOWS FROM INVESTING ACTIVITIES:			
Interest Income	95,665	15,454	
Net Cash Provided by Financing Activities	95,665	15,454	
NET INCREASE IN CASH AND CASH EQUIVALENTS	1,861,115	2,646,047	
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR INCLUDING \$5,349 AND \$5,833 LIMITED AS TO USE FOR 2019 AND 2018, RESPECTIVELY	6,751,044	4,104,997	
CASH AND CASH EQUIVALENTS AT END OF YEAR INCLUDING \$-0- AND \$5,349 LIMITED AS TO USE FOR 2019 AND 2018, RESPECTIVELY	\$ 8,612,159	<u>\$ 6,751,044</u>	

STATEMENT OF CASH FLOWS

	 2019	 2018
CASH FLOWS FROM OPERATING ACTIVITIES:		
Operating Gain	\$ 679,528	\$ 1,946,401
Adjustments to Reconcile Operating Income to Net Cash		
Provided by (Used in) Operating Activities:		
Depreciation and Amortization	992,080	911,995
Provision for Doubtful Accounts	1,380,826	1,376,460
Increase in Receivables and Due from Third Parties	(2,849,891)	(2,468,927)
Decrease (Increase) in Inventories and Prepaid Expenses	(128,965)	124,845
Increase in Accounts Payable and Accrued Expenses	 402,343	 1,959
NET CASH PROVIDED BY OPERATING ACTIVITIES	\$ 475,921	\$ 1,892,733
Non-Cash Financing Activity:		
Acquisition of Assets by Capital Lease	\$ -	\$ 650,836

NOTES TO THE FINANCIAL STATEMENTS

September 30, 2019 and 2018

NOTE 1: DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Reporting Entity. Jackson Parish Hospital Service District No. 1 d/b/a Jackson Parish Hospital (the Hospital) was created in 1950, by the Parish Government of Jackson Parish, Louisiana to operate, control, and manage matters concerning the parish's health care functions. The Jackson Parish Police Jury appoints the Board of Commissioners of the Hospital, and the Hospital may not issue debt without the Parish's approval. For this reason, the Hospital is considered to be a component unit of the Jackson Parish Government, Jackson Parish, Louisiana.

Basis of accounting. The accompanying basic financial statements of the Hospital have been prepared in conformity with generally accepted accounting principles (GAAP) in the United States of America as applicable to governmental entities. The Governmental Accounting Standards Board (GASB) is the accepted standard-setting body for establishing governmental accounting and financial reporting principles. In June 1999, the GASB unanimously approved Statement No. 34, Basic Financial Statements and Management's Discussion and Analysis for State and Local Governments. GASB 34 established standards for external financial reporting for all state and local governmental entities, which included a balance sheet or statement of net position, a statement of revenues, expenditures and changes in net position, and a statement of cash flows utilizing the direct method of presentation. GASB 34 is found throughout the GASB Codification. The Hospital follows standards issued by GASB found in the GASB Codification.

Use of estimates. The preparation of financial statements in conformity with generally accepted accounting principles 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.

Proprietary fund accounting. The Hospital utilizes the proprietary fund method of accounting whereby revenue and expenses are recognized using the economic resources measurement focus and the accrual basis of accounting. Substantially all revenues and expenses are subject to accrual.

Inventories. Inventories of drugs and supplies are stated at the lower of cost (first-in, first-out)
or market.

Property, Plant and Equipment. Property and equipment acquisitions are recorded at cost. Depreciation is provided over the estimated useful life of each class of depreciable asset and is computed using the straight-line method. Equipment under capital lease obligations is amortized on the straight-line method over the shorter period of the lease term or the estimated useful life of the equipment. Such amortization is included in depreciation and amortization in the financial statements.

Gifts of long-lived assets such as land, buildings, or equipment are reported as unrestricted support, and are excluded from the excess of revenues over expenses, unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support.

Absent explicit donor stipulations about how long those long-lived assets must be maintained, expirations of donor restrictions are reported when the donated or acquired long-lived assets are placed in service.

Grants and donations. Revenues from grants and donations (including capital contributions of assets) are recognized when all eligibility requirements, including time requirements, are met. Grants and donations may be restricted for either specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific purpose are reported as non-operating revenues. Amounts restricted to capital acquisitions are reported after non-operating revenues and expense.

Operating revenues and expenses. The Hospital's Statements of Revenues, Expenses and Changes in Net Position distinguishes between operating and non-operating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services, the Hospital's principal activity. Non-exchange revenues, including taxes, grants and contributions received for purposes other than capital asset acquisition, are reported as non-operating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs.

NOTES TO THE FINANCIAL STATEMENTS

September 30, 2019 and 2018

NOTE 1: DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, CONTINUED

Income taxes. The Hospital is a political subdivision and exempt from taxes.

Advertising. The Hospital expenses advertising cost as incurred.

Costs of borrowing. Except for capital assets acquired through gifts, contributions, or capital grants, interest cost on borrowed funds during the period of construction of capital assets is capitalized as a component of the cost of acquiring those assets.

Cash and cash equivalents. Cash includes amounts in demand deposits, interest-bearing demand deposits, and time deposits. Cash equivalents include amounts in time deposits and those investments with original maturities of ninety days or less. Under state law, the Hospital may deposit funds in demand deposits, interest-bearing demand deposits, or time deposits with state banks organized under Louisiana law or any other state of the United States, or under the laws of the United States.

Trade receivables and allowance for uncollectible accounts. Trade receivables are carried at the original billed amount less an estimate made for uncollectible accounts based on a review of all outstanding amounts on a monthly basis. Management determines the allowance for uncollectible accounts by identifying troubled accounts and by using historical experiences applied to an aging of accounts. Trade receivables are written off when deemed uncollectible. Recoveries of trade receivables previously written off are recorded when received.

Ad valorem Taxes. The Hospital's property tax is levied by the parish on the taxable real property in the district in late October of each year. Bills are sent out in November of each year, and becomes a lien the following March. The collection period for the Hospital's property taxes is from December (at which time they become delinquent) to the succeeding May.

The Hospital received approximately 10.4 percent in 2019, and 10.0 percent in 2018, of its financial support from ad valorem taxes.

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

Restricted resources. When the Hospital has both restricted and unrestricted resources available to finance a particular program, it is the Hospital's policy to use restricted resources before unrestricted resources.

Environmental matters. Due to the nature of the Hospital's operations, materials handled could lead to environmental concerns. However, at the time, management is not aware of any environmental matters which need to be considered.

Reclassifications. To be consistent with current year classifications, some items from the previous year have been reclassified with no effect on net assets. Such reclassifications include the reclassification of revenue groupings and/or expense groupings in the supplemental schedules.

Investments in debt and equity securities. Investments in debt and equity securities are carried at fair value except for investments in debt securities with maturities of less than one year at the time of purchase. These investments are reported at amortized cost, which approximates fair value. Interest, dividends, and gains and losses, both realized and unrealized, on investments in debt and equity securities are included in non-operating income when earned.

Net Position. GASB 63 and GASB Codification Section P80, states that net position is equal to assets plus deferred outflows of resources less liabilities and deferred inflows of resources. Net position classifications are defined as follows:

Jonesboro, Louisiana

NOTES TO THE FINANCIAL STATEMENTS

September 30, 2019 and 2018

NOTE 1: DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, CONTINUED

Invested in Capital Assets, Net of Related Debt consist of capital assets, net of accumulated depreciation, reduced by the outstanding balances of any borrowing used for the acquisition, construction or improvement of those assets. Net assets invested in capital assets, net of related debt excludes unspent debt proceeds.

Restricted Net Position consists of restricted assets reduced by liabilities and deferred inflows or resources related to those assets. Assets may be restricted when there are limitations imposed on their use either through external constraints imposed by creditors (such as through debt covenants), grantors, contributors, or laws or regulations of other governments or constraints imposed by law through constitutional provisions or enabling legislation.

Unrestricted Net Position consists of net position that does not meet the definition of the two preceding categories.

The Hospital first applies restricted resources when an expenditure is incurred for purposes for which both restricted and unrestricted net position are available.

Net patient service revenue. The Hospital has agreements with third-party payors that provide payments to the Hospital at amounts different from its established rates. Inpatient acute care services, swing bed services and outpatient services rendered to Medicare program beneficiaries are reimbursed at cost plus 1% (subject to limits and rules), while other outpatient laboratory services are reimbursed on a fee schedule. The Hospital is reimbursed for cost reimbursable items at a tentative rate with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicare fiscal intermediary. The Hospital's Medicare cost reports have been settled by the Medicare fiscal intermediary through September 30, 2016.

Inpatient services rendered to Medicaid program beneficiaries are reimbursed at prospectively determined rates per day. Certain outpatient services to Medicaid program beneficiaries are reimbursed at cost plus 10%, subject to certain limits, while other outpatient services are reimbursed on a fee schedule. The Hospital is reimbursed for outpatient services at an interim rate with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicaid fiscal intermediary. The Hospital's Medicaid cost reports have been settled by the Medicaid fiscal intermediary through September 30, 2014.

The Louisiana Legislature, through the Healthcare Reform Act of 2007 and Act 1 of 2010, tasked the Department of Health and Hospitals (the DHH) to create a new system of care. In response, the DHH reformed its reimbursement methodology for Medicaid patients from a fee-for-service system to the use of a Coordinated Care Network (CCN). During 2011, the DHH enabled certain third-party payor companies to contract with providers under the CCN methodology. The Hospital is currently contracted and enrolled with payors participating in the Coordinated Care Network. The Hospital has filed annual cost reports with these payors, which are subject to audit and final settlement.

Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term. These adjustments will be recorded in the year they are realized.

The Hospital has entered into payment arrangements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. The basis for payment to the Hospital under these agreements includes prospectively determined rates per discharge, discounts from established charges, and per diem rates. To the extent management's estimate differs from actual results, the differences will be used to adjust income in the period when such differences arise.

For uninsured patients that do not qualify for charity care, the Hospital recognizes revenue on the basis of its standard rates for services provided. On the basis of historical experience, a significant portion of the Hospital's uninsured patients will be unable or unwilling to pay for the services provided. Thus, the Hospital records a significant provision for bad debts related to uninsured patients in the period the services are provided.

NOTES TO THE FINANCIAL STATEMENTS

September 30, 2019 and 2018

16,265,111

\$ 15,823,627

NOTE 2: NET PATIENT SERVICE REVENUE

The following schedule represents total Net Patient Service Revenue:

	2019	2018
Gross Patient Service Revenue Less: Contractual Adjustments	\$ 26,061,265 (9,796,154)	\$ 30,241,261 (14,417,634)
Net Patient Service Revenue before Provision for Doubtful Accounts Less: Provision for Doubtful Accounts	16,265,111 (1,380,826)	15,823,627 (1,376,460)
Net Patient Service Revenue after Provision for Doubtful Accounts	\$ 14,884,285	\$ 14,447,167
Net Patient Service Revenue by Payor before Provision for Doubtful	Accounts:	
	2019	2018
Medicare Medicaid All Other Payors Total Net Patient Service Revenue Before Provision for Doubtful	\$ 4,541,637 6,218,451 5,505,023	\$ 3,865,589 5,545,000 6,413,038

NOTE 3: ACCOUNTS RECEIVABLE - PATIENTS

Accounts

Accounts receivable are reduced by an allowance for doubtful accounts. In evaluating the collectability of accounts receivable, the Hospital analyzes its past history and identifies trends for each of its major payor sources of revenue to estimate the appropriate allowance for doubtful accounts and provision for bad debts. Management regularly reviews data about these major payor sources of revenue in evaluating the sufficiency of the allowance for doubtful accounts. For receivables associated with services provided to patients who have third-party coverage, the Hospital analyzes contractually due amounts and provides an allowance for doubtful accounts and a provision for bad debts, if necessary. For receivables associated with Medicaid, Commercial, and Self-Pay patients, the Hospital records a significant provision for bad debts in the period of service on the basis of its past experience and on the age of the receivable balance. The aged balance indicates that third-party claims have reached an age where the probability of payment is low and that self-pay patients are unable or unlikely to pay portion of their bill for which they are financially responsible. The difference between the standard rates and the amounts actually collected after all reasonable collection efforts have been exhausted is charged off against the allowance for doubtful accounts.

Patient Accounts Receivable consists of the following:

	 2019	 2018
Total Patient Accounts Receivable	\$ 3,871,892	\$ 4,933,956
Less: Allowance for Doubtful Accounts and Contractual Allowances	\$ (2,489,105)	\$ (3,287,116)
Net Patient Accounts Receivable	\$ 1,382,787	\$ 1,646,840

NOTE 4: MAJOR SOURCE OF REVENUE

The Hospital participates in the Medicare and Medicaid programs as a provider of medical services to program beneficiaries. The Hospital derived approximately 59% and 58% of its gross patient service revenue in 2019 and 2018, respectively, from patients covered by the Medicare and Medicaid programs.

NOTES TO THE FINANCIAL STATEMENTS

September 30, 2019 and 2018

NOTE 5: PROPERTY, PLANT AND EQUIPMENT

Property, plant and equipment, by major category, is as follows:

Asset

September 30, 2019

	Asset				
	Life in	Beginning			Ending
	Years	Balance	Additions	Deletions	Balance
Land		\$ 168,900	\$ -	\$ -	\$ 168,900
Construction in Progress		324,265	448,593	772,858	_
Total assets not being	depreciated	493,165	772,858	1,221,451	168,900
Other Capital Assets:					
Land Improvements	5 - 25	249,472	_	-	249,472
Building	10 - 40	3,399,731	218,238	_	3,617,969
Capital Leased Property	5 - 25	1,683,503	· -	- '	1,683,503
Fixed Equipment	5 - 25	3,125,500	10,926	_	3,136,426
Moveable Equipment	5 - 25	4,021,102	264,650	•	4,285,752
Automobile	5	7,541	21,985		29,526
Minor Equipment	7	-	897,381	_	897,381
Total Other Assets		12,486,849	1,413,180	+-	13,900,029
Less: Accumulated Depreci	ation	(9,333,335)	(992,080)	_	(10,325,415)
Net Property, Plant, and					
Equipment		\$ 3,646,679	\$ 869,693	\$ 772,858	\$ 3,743,514
-4		7 0/010/0/5	7 003,033	7 7727000	- 377137811
		September 30,	2018		
		Deptember 50)	2010		
	Asset				
	Life in	Beginning			Ending
	Years	Balance	Additions	Deletions	Balance
Land	16013	\$ 168,900	\$ -	s -	\$ 168,900
		\$ 100,900		Ş _	· ·
Construction in Progress		1.50 000	324,265		324,265
Total assets not being	depreclated	168,900	324,265		493,165
Other Capital Assets:		242 472			0.40 470
Land Improvements	5 - 25	249,472		_	249,472
Building	10 - 40	3,325,111	74,620	-	3,399,731
Capital Leased Property	5 - 25	1,032,668	650,835	-	1,683,503
Fixed Equipment	5 - 25	3,116,234	9,266	-	3,125,500
Moveable Equipment	5 - 25	3,794,482	360,145	(133,525)	4,021,102
Automobile	5	19,341	_	(11,800)	7,541
Total Other Assets		11,537,308	1,094,866	(145, 325)	12,486,849
Less: Accumulated Depreci	ation	(8,566,665)	(911,995)	145,325	(9,333,335)
-			***************************************	*	
Net Property, Plant, and	Equipment	\$ 3,139,543	\$ 507,136	\$ -	\$ 3,646,679
2,	4 4				

Depreciation expense for the years ended September 30, 2019 and 2018 amounted to \$992,080 and \$911,995, respectively.

NOTES TO THE FINANCIAL STATEMENTS

September 30, 2019 and 2018

NOTE 6: LONG-TERM DEBT

Long-term debt at September 30, 2019 and 2018, consisted of the following:

Long-term debt at September 30, 2019 and	2018, Consisted of the lollow	wriig;	
		2019	2018
Capital Lease Obligation, for the acquismachines, collateralized by the equipmer installments at a 3.25% interest rate, w	nt, payable in 60 monthly	\$ 57,101	\$ 104,354
Capital Lease Obligation, for the acquis collateralized by the equipment, payable 3.25% interest rate, with the final mate	in 48 monthly installments at	a 20,693	142,113
Capital Lease Obligation, for the acquisi collateralized by the equipment, payable 3.25% interest rate, maturity in 2020			68,425
Capital Lease Obligation, for the acquise Equipment, collateralized by the equipments at a 4.00% interest rate, m	ent, payable in 48 monthly	72,621	111,897
Capital Lease Obligation, for the acquist Dispensing Equipment, collateralized by monthly installments at a 4.75% interest	the equipment, payable in 60	144,764	178,873
Capital Lease Obligation, for the acquist collateralized by the equipment, payable 4.25% interest rate, maturity in 2022		a 82,769	110,551
Capital Lease Obligation, for the acquist collateralized by the equipment, payable 4.75% interest rate, maturity in 2023			272,891
Total Long-Term Debt Less: Current Portion		617,138 (264,458)	989,104 (375,142)
Long-Term Portion		\$ 352,680	\$ 613,962
A summary of long-term debt activity for	the year ended is as follows	:	
	September 30, 2019		
	Beginning Balance Additi	ons Reductions	Ending Balance
Capital Lease Obligations	\$ 989,104 \$	- \$ 371,967	\$ 617,137
	September 30, 2019		
	Beginning Balance Additi	ons Reductions	Ending Balance
General Obligation Issue 2008 Capital Lease Obligations	\$ 329,000 \$ 672,112 650,	- \$ 329,000 836 333,844	\$ 989,104
Total	\$ 1,001,112 \$ 650,	836 \$ 662,844	\$ 989,104

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

Jonesboro, Louisiana

	NOTES	TO THE	FINANCIAL	STATEMENTS
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NOTE 6: LONG-TERM DEBT (CONTINUED)

September 30, 2019 and 2018

Balance due within one year		
-	2019	2018
Capital Lease Obligations	\$ 264,458	\$ 375,142

Total \$ 264,458 \$ 375,142

Scheduled repayments on long-term debt are as follows:

September 30, 2019

		Principal	Interest	Total
2020		\$ 264,458	\$ 21,411	\$ 285,869
2021		173,810	12,328	186,138
2022		132,096	5,454	137,550
2023		46,774	557_	47,330
Total		\$ 617,138	\$ 39,750	\$ 656,888
	September 30, 2018			

	Principal	Interest	Total	
2019	\$ 375,142	\$ 34,415	\$ 409,557	
2020	261,283	21,411	282,694	
2021	173,810	12,328	186,183	
2022	132,096	5,454	137,550	
2023	46,773	<u>557</u>	47,330	
Total	\$ 989,104	\$ 74,165	\$ 1,063,269	

NOTE 7: ASSETS LIMITED AS TO USE AND RESTRICTED NET POSITION

In relation to the revenue bonds issued on December 4, 2008 with a face value of \$2,500,000, the hospital entered into an agreement to reserve cash funds as follows:

"All of the avails or proceeds of the Tax for each tax roll year shall be set aside in the Debt Service fund until such time as there is on deposit sufficient proceeds of the Tax to pay all principal and interest falling due on the Certificates in the ensuing year."

The Composition of assets limited as to use at September 30, 2019 and 2018, is set forth in the following table.

Cash:	2019	2018
By board for capital improvements	\$	\$ 5,349
	<u>\$</u>	\$ 5,349

NOTE 8: CASH FLOWS SUPPLEMENTAL INFORMATION

Total interest paid by the Hospital was \$38,974 and \$31,595, for 2019 and 2018, respectively.

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

Jonesboro, Louisiana

NOTES TO THE FINANCIAL STATEMENTS

September 30, 2019 and 2018

NOTE 9: CONCENTRATIONS OF CREDIT RISK

The Hospital grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of receivables from patients and third-party payors at September 30, 2019 and 2018, are as follows:

	2019	2018
Medicare	17%	13%
Medicaid	17	23
Commercial and other payors	66	64
	100%	100%

NOTE 10: PENSION PLAN

The Hospital sponsors a defined contribution plan. The Plan Administrator is the hospital. Eligibility requirements are six months of employment and attaining the age of 25. Employees are not vested until after 3 years of service, at which point they are 100% vested. The Plan's coverage includes death, disability and retirement benefits. The Hospital may amend the Plan at any time at its' sole discretion. However, no amendment may result in any participant's vested interest or any portion of the Plan's assets reverting back to the Hospital. The Hospital will match in an amount equal to a percentage of the employee salary deferrals. Forfeitures of matching contributions that relate to excess amounts may be used to reduce employer contributions. Forfeitures reflected in pension expense as a reduction of employer contributions were approximately \$-0- and \$24,081 for the years ended September 30, 2019 and 2018, respectively. The Hospital contributed \$244,439 and \$105,813 for the years ended September 30, 2019 and 2018, respectively. The accrued pension plan liability was \$11,226 and \$10,105 for the years ended September 30, 2019 and 2018, respectively.

NOTE 11: GRANT REVENUE

The Hospital entered into a cooperative endeavor agreement (CEA) with a regional public rural hospital (Grantor) whereby the Grantor awards as an intergovernmental transfer (IGT) to be used solely to provide adequate and essential medically necessary and available healthcare services to the Hospital's service population subject to the availability of such grant funds. The aggregate IGT grant income is \$4,699,337 and \$6,025,113 for the years ended September 30, 2019 and 2018, respectively.

Various other grants were received during the year for other uses.

NOTE 12: BANK DEPOSITS AND INVESTMENTS

Louisiana state statutes authorize the Hospital to invest in obligations of the U.S. Treasury, certificates or other obligations of the United States of America, and time certificates of deposit of state banks organized under the laws of Louisiana and national banks having the principal office in the State of Louisiana.

Louisiana state statutes require that all of the deposits of the hospital must be protected by insurance or collateral. The fair value of the collateral pledged must equal 100% of the deposits not covered by insurance.

At September 30, 2019 and 2018, the Hospital had bank balances as follows:

	2019	2018
Insured (FDIC)	\$ 250,000	\$ 250,000
Letter of Credit	9,000,000	4,900,000
Collateralized by Securities Held by the Pledging Financial		
Institution's Trust Department in the Hospital's Name	1,484,164	3,306,088
Total	10,734,164	\$ 8,456,088
Carrying Value	\$ 8,923,885	\$ 7,121,311

NOTES TO THE FINANCIAL STATEMENTS

September 30, 2019 and 2018

NOTE 13: PROFESSIONAL LIABILITY RISK

The Hospital participates in the Louisiana Patient's Compensation Fund (PCF) established by the State of Louisiana to provide medical professional liability coverage to health care providers. The PCF provides for \$400,000 in coverage per occurrence above the first \$100,000 per occurrence for which the Hospital is at risk. The PCF places no limitation on the number of occurrences covered. In connection with the establishment of the PCFs, the State of Louisiana enacted legislation limiting the amount of settlement for professional liability to \$500,000 per occurrence.

The courts have not tested the constitutionality of this legislation, although the Louisiana Supreme Court has decided that this limit does not apply in cases of strict liability. The Hospital's membership in the Louisiana Hospital Association Trust Fund provides additional coverage for professional medical malpractice liability. The trust fund bills members in advance based upon an estimate of their exposure. At policy year-end, premiums are re-determined utilizing actual losses of the Hospital.

NOTE 14: CRITICAL ACCESS STATUS

Effective November 1, 2004, Jackson Parish Hospital was approved for "critical access" status under the Medicare Rural Hospital Flexibility Program. The program allows states to designate rural facilities as "critical access hospitals" if they are located a sufficient distance from other hospitals, make available 24-hour emergency care, maintain no more than 25 inpatient beds, and keep inpatients no longer than 96 hours (except where weather or emergency conditions dictate, or a Peer Review Organization waives the limit). Payment for inpatient and outpatient services under this program is on the basis of reasonable cost.

NOTE 15: COMPENSATED ABSENCES/DUE TO EMPLOYEES FOR BENEFITS

Full time employees earn accrued time off (ATO) based on years of service, part time employees accrue ATO on a pro-rated basis based on years of service. All ATO balances will be paid upon termination. Sick pay is not vested and therefore not accrued. The Hospital's policy is to recognize the cost of sick pay when actually paid to employees. Accrued time off, which is included in accrued salaries and related withholdings, at September 30, 2019 and 2018 totaled \$549,407 and \$491,273, respectively.

Due to employee benefits calculated and over-withheld from employees in previous years, the Hospital has reflected a payable to employees in the amount of \$90,241 and \$90,241 for the years ended September 30, 2019 and 2018, respectively.

NOTE 16: OPERATING LEASES

The Hospital leases various equipment under operating leases expiring at various dates through 2023. Total rental expense for the years ended September 30, 2019 and 2018 for all operating leases was approximately \$277,443 and \$300,956, respectively.

The following is a schedule by year of future minimum lease payments under operating leases that have initial or remaining lease terms in excess of one year:

Sept	ember 30	, 2019	Septe	mber 30	, 2018
2020	\$	41,572	2019	\$	94,554
2021		41,572	2020		53,539
2022		41,572	2021		41,572
2023		18,193	2022		41,572
Total	\$	142,909	2023		18,193
			Total	\$	249,430

NOTES TO THE FINANCIAL STATEMENTS

September 30, 2019 and 2018

NOTE 17: CONTINGENCIES

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

Third-Party Reimbursement Programs.

Cost reimbursements and claims are subject to examination by agencies administering the programs. The Hospital is contingently liable for retroactive adjustments made by the Medicare and Medicaid programs as the result of their examinations as well as retroactive changes in interpretations applying statutes, regulations, and general instructions of those programs. The amount of such adjustments cannot be determined.

To ensure accurate payments to providers, the Tax Relief and Healthcare Act of 2006 mandated the Centers for Medicare & Medicaid Service (CMS) to implement a Recovery Audit Contractor (RAC) program on a permanent and nationwide basis no later than 2010. The program uses RACs to search for potentially improper Medicare payments that may have been made to health care providers that were not detected through existing CMS program integrity efforts, on payments that have occurred at least one year ago. Once a RAC identifies a claim it believes to be improper, it makes a deduction from the provider's Medicare reimbursement in an amount estimated to equal the overpayment. The Hospital will deduct from revenue, amounts assessed under the RAC audits at the time a notice is received until such time that estimates of net amount due can be reasonably estimated. RAC assessments are anticipated; however, the outcomes of such assessments are unknown and cannot be reasonably estimated.

Management believes that the Hospital is in compliance with fraud and abuse statutes as well as other applicable government law and regulations. Compliance with such laws and regulations can be subject to future government review and interpretation as well as regulatory actions unknown or unasserted at this time.

Professional Liability Risk

The Hospital is contingently liable for losses from professional liability not underwritten by the Louisiana Patient's Compensation Fund or the Louisiana Hospital Association Trust Fund.

Workman's Compensation Risk

The Hospital participated in the Louisiana Hospital Association Self-Insurance Workmen's Compensation Trust Fund in 2019 and 2018, respectively. Should the fund's assets not be adequate to cover claims made against it, the Hospital may be assessed its pro rata share of the resulting deficit. It is not possible to estimate the amount of additional assessments, if any.

Laws and Regulations

The healthcare industry is subject to numerous laws and regulations of federal, state, and local governments. Compliance with such laws and regulations can be subject to future government review and interpretation, as well as regulatory actions unknown or unasserted at this time. These laws and regulations include, but are not limited to, accreditation, licensure, government healthcare program participation requirements, reimbursement for patient services, and Medicare and Medicaid fraud and abuse. Government activity has increased with respect to investigations and allegations concerning possible violations of fraud and abuse statutes and regulations by healthcare providers. Violations of these laws and regulations could result in exclusion from government healthcare program participation, together with the imposition of significant fines and penalties, as well as significant repayment for past reimbursement for patient services received. While the Hospital is subject to similar regulatory reviews, management believes the outcome of any such regulatory review will not have a material adverse effect on the Hospital's financial position.

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

Jonesboro, Louisiana

NOTES TO THE FINANCIAL STATEMENTS

September 30, 2019 and 2018

NOTE 18: GOVERNMENTAL REGULATIONS

Legislation and regulation at all levels of government have affected and are likely to continue to affect the operation of the Hospital. Federal healthcare reform legislation proposals debated in Congress in recent years have included significant reductions in Medicare and Medicaid program reimbursement to hospitals and the promotion of a restructured delivery and payment system focusing on competition among providers based on price and quality, managed care, and steep discounting or capitated payment arrangements with many, if not all, of the Hospital's principal payors. It is not possible at this time to determine the impact on the Hospital of government plans to reduce Medicare and Medicaid spending, government implementation of national and state healthcare reform or payment methodology changes. However, such changes could have an adverse impact on operating results, cash flows and estimated debt service coverage of the Hospital in the future years.

NOTE 19: CHARITY CARE

The Hospital provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. The Hospital maintains records to identify and monitor the level of charity care it provides. Because the Hospital does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue. The records include the amount of charges foregone for services and supplies furnished under its charity care policy. Charges foregone and supplies furnished, based on established rates, were \$3,910 and \$56,017 as of September 30, 2019 and 2018, respectively.

Management estimates that approximately \$2,863 and \$34,804 of costs were related to charity care for the years ended September 30, 2019 and 2018, respectively. This estimate is based on a ratio of total cost to gross patient charges applied to gross uncompensated charges associated with providing care to charity patients.

NOTE 20: NET POSITION

Net position for the years ended September 30, are as follows:

	2019	2018
Invested in Capital Assets, net of related debt	\$ 3,126,376	\$ 2,657,575
Restricted for:		
Debt Service (Expendable)	_	5,349
Unrestricted	12,200,940	9,608,656
Total Net Position	\$ 15,327,316	\$ 12,271,580
10000 100 100 100 100 100 100 100 100 1		

NOTE 21: RECENTLY ISSUED ACCOUNTING PRONOUNCEMENTS

GASB's new lease accounting standard, GASB Statement No. 87, was issued in June 2017. This Statement requires recognition of certain lease assets and liabilities for leases that previously were classified as operating leases and recognized as inflows of resources or outflows of resources based on the payment provisions of the contract. It establishes a single model for lease accounting based on the foundational principle that leases are financings of the right to use an underlying asset. Under this Statement, a lessee is required to recognize a lease liability and an intangible right-to-use lease asset. The requirements of this Statement are effective for reporting periods beginning after December 15, 2019. Earlier application is encouraged.

NOTE 22: SUBSEQUENT EVENTS

In preparing these financial statements, the Hospital has evaluated events and transactions for potential recognition or disclosure through March 25, 2020, the date the financial statements were available to be issued.

SCHEDULES	OF	DATTENT	SERVICE	REVENIES

	 2019		2018
INPATIENT SERVICE REVENUES			
Daily Patient Services:			
Room and Board	\$ 337,417	\$	371,744
Observation	 12,700		27,840
Total	 350,117		399,584
Other Nursing Services:			
Central Supplies	273,078		430,616
Emergency Service	54,360		151,470
Total	 327,438		582,086
Other Professional Services:			
Anesthesiology	_		168
Blood	15,808		11,232
Laboratory	392,165		636,880
Pharmacy	855,681		1,145,565
Radiology	292,105		478,283
Respiratory	481,344		646,616
Therapy Services	 37,086		28,024
Total	2,074,189		2,946,768
TOTAL INPATIENT SERVICE REVENUE	 2,751,744		3,928,438

SCHEDULES OF PATIENT SERVICE REVENUES	YEAR ENDED	YEAR ENDED SEPTEMBER 30,		
	?			
	2019	2018		
OUTPATIENT SERVICE REVENUES				
Other Nursing Services:				
Central Supplies	584,587	717,533		
Emergency Service	2,949,559	3,388,065		
Observation	(122,281)	214,185		
Operating Room	1,136,581	422,050		
Total	4,548,446	4,741,833		
Other Professional Services:				
Anesthesiology	37,632	37,632		
Blood	38,830	26,596		
Clinics	2,848,110	3,016,253		
Laboratory	6,901,825	7,119,982		
Hospitalist	-	10,890		
Pharmacy	2,179,684	1,830,813		
Professional Fees	254,858	1,685,127		
Radiology	5,718,729	6,975,177		
Respiratory	,781,407	868,520		
Total	18,761,075	21,570,990		
TOTAL OUPATIENT SERVICE REVENUE	23,309,521	26,312,823		
GROSS PATIENT SERVICE REVENUE	26,061,265	30,241,261		
Less: Contractual Adjustments	9,796,154	14,417,634		
NET PATIENT SERVICE REVENUE BEFORE				

<u>\$ 16,265,111</u> <u>\$ 15,823,627</u>

PROVISION FOR DOUBTFUL ACCOUNTS

SCHEDULES OF OTHER OPERATING REVENUES

	 2019		2018	
Cafeteria and Vending Sales	\$ 57,934	\$	62,994	
Medical Records	4,256		4,185	
Other	 116,332		196,356	
Total	\$ 178,522	\$	263,535	

	2019	2018	
Salaries and Fees:			
Central Supply	\$ 46,819	\$ 35,939	
Clinics	2,038,971	2,133,760	
Emergency Room	1,666,547	1,950,251	
Hospitalist	-	249,525	
Laboratory	1,026,063	1,083,499	
Nursing	1,726,053	1,717,938	
Operating Room and Anesthesiology	90,877	99,765	
Pharmacy	272,307	275,936	
Radiology	956,488	1,021,340	
Respiratory	412,613	445,715	
Therapy	90,826	76,753	
Total Salaries and Fees	8,327,564	9,090,421	
Supplies and Other Expenses:			
Blood	39,956	24,752	
Clinics	342,766	162,336	
Emergency Room	127,974	100,507	
Laboratory	406,121	394,988	
Nursing	125,483	147,939	
Operating Room and Anesthesiology	37,264	44,096	
Pharmacy	370,722	402,283	
Radiology	553,926	445,367	
Respiratory	74,299	73,856	
Total Supplies and Other Expenses	2,078,511	1,796,124	
Total Professional Services	\$ 10,406,075	\$ 10,886,545	

	2019	2018
Salaries and Fees:		
Administrative	\$ 1,441,458	\$ 1,334,259
Dietary	208,588	191,725
Housekeeping	235,985	229,134
Maintenance	278,087	218,115
Medical Records	248,761	174,514
Total Salaries and Fees	2,412,879	2,147,747
Supplies and Other Expenses:	1 702 571	1 712 207
Administrative	1,703,571	1,712,387
Dietary	163,488	156,550
Employee Benefits Housekeeping	2,248,437 80,800	2,067,655 69,970
Information Technology	491,456	181,233
Insurance	187,484	211,372
Maintenance	341,338	385,192
Medical Records	55,008	58,768
Total Supplies and Other Expenses	5,271,582	4,843,127
Total General and Administrative Services	\$ 7,684,461	\$ 6,990,874

SCHEDULES OF GOVERNING BOARD EXPENSES

	2	019	2	018
	COMPE	NSATION	COMPE	NSATION
Chris Bowman	\$	243	\$	_
Rebecca Crouch	\$	400	\$	400
Angela Curtis	\$	400	\$	360
Shontae Mims	\$	400	\$	440

SCHEDULE OF COMPENSATION, BENEFITS AND OTHER PAYMENTS TO CHIEF EXECUTIVE OFFICER

SEPTEMBER 30,

		2019	2018	
JOHN MORGAN				
Salary	\$	173,939	\$	167,782
Benefits-Insurance		12,347		12,621
Benefits-Retirement		6,261		
Benefits-Other		7		-
Reimbursements		1,200		767
Travel		828		2,616
Special Meals		591		_
ı				
	\$	195,173	\$	183,786



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INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON CENTRAL DEBAILON, CPA
AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH

GOVERNMENT AUDITING STANDARDS

Board of Commissioners Jackson Parish Hospital Service District No. 1 d/b/a Jackson Parish Hospital Jonesboro, 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 Jackson Parish Hospital Service District No.1, d/b/a Jackson Parish Hospital, a component unit of the Jackson Parish Police Jury, State of Louisiana (the Hospital), as of September 30, 2019 and 2018, and the related notes to the financial statements, which collectively comprise the Hospital's basic financial statements as listed in the table of contents, and have issued our report thereon dated March 25, 2020.

INTERNAL CONTROL OVER FINANCIAL STATEMENTS

In planning and performing our audit of the financial statements, we considered the Hospital's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we do not express an opinion on the effectiveness of the entity's internal control.

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

Our consideration of internal control was for the limited purpose described in the first paragraph 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 have not been identified. However, as described in the accompanying "Schedule of Findings and Questioned Costs and Management's Corrective Action Plan", we identified certain deficiencies in internal control that we consider to be material weaknesses - Findings 2019-1 through 2019-3.

COMPLIANCE AND OTHER MATTERS

As part of obtaining reasonable assurance about whether the Hospital's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts and grants agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests did not identify findings of noncompliance.

HOSPITAL'S RESPONSE TO FINDINGS

The Hospital's response to the findings identified in our audit is described in the accompanying schedule of findings and responses. The Hospital's response was not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on it.

PURPOSE OF THIS REPORT

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

This communication is intended for the information and use of the Board of Commissioners and management of the Hospital, others within the Hospital, federal awarding agencies, and the Legislative Auditor of the State of Louisiana and is not intended to be, and should not be, used by anyone other than these specified parties.

Sincerely,

LANGLINAIS BROUSSARD & KOHLENBERG

Larylinais Broussard & Kohlenberg

(A Corporation of Certified Public Accountants)

Abbeville, Louisiana

March 25, 2020

JACKSON PARISH HOSPITAL SERVICE DISTRICT NO. 1 d/b/a JACKSON PARISH HOSPITAL JONESBORO, LOUISIANA

SCHEDULE OF FINDINGS AND QUESTIONED COSTS AND MANAGEMENT'S CORRECTIVE ACTION PLAN For the Years Ended September 30, 2019 and 2018

We have audited the financial statements of Jackson Parish Hospital Service District No. 1, d/b/a Jackson Parish Hospital (the Hospital), a component unit of the Jackson Parish Police Jury, State of Louisiana, as of and for the years ended September 30, 2019 and 2018, and have issued our report thereon dated March 25, 2020. We conducted our audit in accordance with generally accepted auditing standards and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, and the provisions of OMB Circular A-133. Our audits of the financial statements as of September 30, 2019 and 2018 resulted in unmodified opinions.

Section I: Summary of Auditor's Reports

A. Report on Internal Control and Compliance Material to the Financial Statements:

Compliance
Compliance Material to Financial Statements

No

Internal Control

Material Weaknesses: Significant Deficiencies: Yes No

Section II: Financial Statement Findings

Material Weaknesses

Finding 2019-1 Financial Statement Preparation

Criteria: The Hospital does not present full disclosure financial statements to its board in accordance with Generally Accepted Accounting Principles.

Condition: As is common in small operations, the Hospital relies on its outside auditors to assist in the preparation of full disclosure GAAP financial statements.

Cause: The Hospital has a small accounting staff.

Effect: The Hospital designates an employee with skilled knowledge and experience to review the draft of the prepared financial statements and footnotes prior to approving them and accepting responsibility for their contents and presentation.

Recommendation: The hospital's accounting personnel should attend education courses to further their knowledge in the application of Generally Accepted Accounting Principles.

Management Response: Hospital's accounting staff will continue education of Generally Accepted Accounting Principles.

Finding 2019-2 Lack of Segregation of Duties

Criteria: Best practices in internal controls would facilitate segregation of duties in all accounting functions and oversight in each area.

Condition: Due to a limited number of available employees, the authorization, recording, and reconciling of transactions as well as the custody of assets related to those transactions are not adequately segregated in all accounting areas.

Cause: The hospital has a small accounting staff.

Effect: Failure to adequately segregate accounting and financial functions increases the risk that errors and irregularities including fraud may occur and not be prevented or detected.

Recommendation: The authorization, recording, and reconciliation of transactions and decisions as well as the custody of assets related to those transactions and decisions should be segregated as much as possible. Management should consider the cost/benefit of segregation of duties and continue to monitor areas where lack of segregation exists.

Management Response: Policies and procedures are being reviewed, updated, and implemented as necessary to create a separation of duties to the fullest extent possible without significantly increasing hospital staffing.

Finding 2019-3 Proposed Audit Adjustments

Criteria and Condition: The proposed audit adjustments for the fiscal years ended September 30, 2019 and 2018 had material effects on the financial statements.

Cause: The filing of annual Medicare and Medicaid cost reports result in settlements either due to or from the Hospital. These settlements result from complex calculations, many variables, several payors, and the use of third-party data that is often not complete until several months after year end. These factors make it difficult to properly estimate and record cost report settlements.

Effect: The Hospital's financial statements have been adjusted to reflect all proposed audit journal entries approved by management.

Recommendation: Management should perform a comprehensive review of financial statements, estimates, and journal entries before closing the fiscal year.

Management Response: The Hospital has contracted two competent accountants to perform a comprehensive review of financial statements, estimates, and journal entries before closing the fiscal year.

Section III: Management Letter Items

There are no management letter items at September 30, 2019.

JACKSON PARISH HOSPITAL SERVICE DISTRICT NO. 1 d/b/a JACKSON PARISH HOSPITAL JONESBORO, LOUISIANA

SCHEDULE OF PRIOR YEAR FINDINGS For the Year Ended September 30, 2019

Finding 2018-1 Financial Statement Preparation: The Hospital relies on its outside auditors to assist in the preparation of full disclosure GAAP financial statements.

Status: Unresolved. See Finding 2019-1.

Finding 2018-2 Lack of Segregation of Duties: The authorization, recording, and reconciling of transactions as well as the custody of assets related to those transactions are not adequately segregated in all accounting areas.

Status: Unresolved. See Finding 2019-2.

Finding 2018-3 Proposed Audit Adjustments: The proposed audit adjustments for the fiscal years ended September 30, 2019 and 2018 had material effects on the financial statements.

Status: Unresolved. See Finding 2019-3.



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INDEPENDENT ACCOUNTANT'S REPORT ON APPLYING AGREED-UPON PROCEDURES

Chairman and Board of Commissioners Jackson Parish Hospital Service District No. 1 d/b/a Jackson Parish Hospital Jonesboro, Louisiana

We have performed the procedures described in Schedule A – Procedures and Results, which were agreed to by Jackson Parish Hospital Service District No. 1, d/b/a Jackson Parish Hospital, a component unit of the Jackson Parish Policy Jury, State of Louisiana, ("the Hospital"), and the Louisiana Legislative Auditor (LLA) on the control and compliance areas identified in the LLA's Statewide Agreed-Upon Procedures (SAUPs) for the fiscal period October 1, 2018 through September 30, 2019. The Hospital's management is responsible for those control and compliance areas identified in the SAUPs.

This agreed-upon procedures engagement was conducted in accordance with attestation standards established by the American Institute of Certified Public Accountants and applicable standards of *Government Auditing Standards*. The sufficiency of these procedures is solely the responsibility of the specified users of this report. Consequently, we make no representation regarding the sufficiency of the procedures described below either for the purpose for which this report has been requested or for any other purpose.

The procedures and associated findings are described in Schedule A – Procedures and Results.

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 control and compliance areas identified in the SAUPs. Accordingly, we do not express such an opinion or conclusion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

The purpose of this report is solely to describe the scope of testing performed on those control and compliance 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.

Largeriais Browssard & Kohlenberg

LANGLINAIS BROUSSARD & KOHLENBERG (A Corporation of Certified Public Accountants) Abbeville, Louisiana

March 25, 2020

Schedule A - Procedures and Results

Written Policies and Procedures

- 1. Obtain and inspect the entity's written policies and procedures and observe that they address each of the following categories and subcategories (if applicable to public funds and the entity's operations):
 - a) Budgeting, including preparing, adopting, monitoring, and amending the budget
 - Result: Policy included all of the required elements with no exceptions noted.
 - b) **Purchasing**, including (1) how purchases are initiated; (2) how vendors are added to the vendor list; (3) the preparation and approval process of purchase requisitions and purchase orders; (4) controls to ensure compliance with the public bid law; and (5) documentation required to be maintained for all bids and price quotes.
 - Result: Policy included all of the required elements with no exceptions noted.
 - c) Disbursements, including processing, reviewing, and approving
 - Result: Policy included all of the required elements with no exceptions noted.
 - d) Receipts/Collections, including receiving, recording, and preparing deposits. Also, policies and procedures should include management's actions to determine the completeness of all collections for each type of revenue or agency fund additions (e.g. periodic confirmation with outside parties, reconciliation to utility billing after cutoff procedures, reconciliation of traffic ticket number sequences, agency fund forfeiture monies confirmation).
 - Result: Policy included all of the required elements with no exceptions noted.
 - e) *Payroll/Personnel*, including (1) payroll processing, and (2) reviewing and approving time and attendance records, including leave and overtime worked.
 - Result: Policy included all of the required elements with no exceptions noted.
 - f) Contracting, including (1) types of services requiring written contracts, (2) standard terms and conditions, (3) legal review, (4) approval process, and (5) monitoring process
 - Result: Policy included all of the required elements with no exceptions noted.
 - g) Credit Cards (and debit cards, fuel cards, P-Cards, if applicable), including (1) how cards are to be controlled, (2) allowable business uses, (3) documentation requirements, (4) required approvers of statements, and (5) monitoring card usage (e.g., determining the reasonableness of fuel card purchases)
 - Result: Policy included all of the required elements with no exceptions noted.
 - h) *Travel and expense reimbursement*, including (1) allowable expenses, (2) dollar thresholds by category of expense, (3) documentation requirements, and (4) required approvers
 - Result: Policy included all of the required elements with no exceptions noted.
 - i) *Ethics*, including (1) the prohibitions as defined in Louisiana Revised Statute 42:1111-1121, (2) actions to be taken if an ethics violation takes place, (3) system to monitor possible ethics violations, and (4) requirement that all employees, including elected officials, annually attest through signature verification that they have read the entity's ethics policy.
 - Result: Policy included all of the required elements with no exceptions noted.

Schedule A – Procedures and Results

- j) **Debt Service**, including (1) debt issuance approval, (2) continuing disclosure/EMMA reporting requirements, (3) debt reserve requirements, and (4) debt service requirements.
 - Result: Policy included all of the required elements with no exceptions noted.
- k) 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.

Result: Policy included all of the required elements with no exceptions noted.

Board or Finance Committee

- 2. Obtain and inspect the board/finance committee minutes for the fiscal period, as well as the board's enabling legislation, charter, bylaws, or equivalent document in effect during the fiscal period, and:
 - a) 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.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
 - b) For those entities reporting on the governmental accounting model, observe that the minutes referenced or included monthly budget-to-actual comparisons on the general fund and major special revenue funds, as well as monthly financial statements (or budget-to-actual comparisons, if budgeted) for major proprietary funds.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
 - c) 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.

Result: Procedure Not Applicable - No exceptions noted in prior year.

Bank Reconciliations

- 3. Obtain a listing of client 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 selected each account, and observe that:
 - a) Bank reconciliations include evidence that they were prepared within 2 months of the related statement closing date (e.g., initialed and dated, electronically logged);
 - Result: Procedure was performed with no exceptions noted.

Schedule A – Procedures and Results

- b) Bank reconciliations include evidence that a member of management/board member who does not handle cash, post ledgers, or issue checks has reviewed each bank reconciliation (e.g., initialed and dated, electronically logged); and
 - Result: Procedure was performed with no exceptions noted.
- c) Management has documentation reflecting that it has researched reconciling items that have been outstanding for more than 12 months from the statement closing date, if applicable.
 - Result: Procedure was performed with no exceptions noted.

Collections (excluding EFTs)

4. Obtain a listing of <u>deposit sites</u> 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).

Result: Procedure was performed with no exceptions noted.

- 5. For each deposit site selected, obtain a listing of <u>collection locations</u> and management's representation that the listing is complete. Randomly select one collection location for each deposit site (i.e. 5 collection locations for 5 deposit sites), obtain and inspect written policies and procedures relating to employee job duties (if no written policies or procedures, inquire of employees about their job duties) at each collection location, and observe that job duties are properly segregated at each collection location such that:
 - a) Employees that are responsible for cash collections do not share cash drawers/registers.
 - Result: Procedure was performed with no exceptions noted.
 - b) Each employee responsible for collecting cash is not responsible for preparing/making bank deposits, unless another employee/official is responsible for reconciling collection documentation (e.g. pre-numbered receipts) to the deposit.
 - Result: Procedure was performed with no exceptions noted.
 - c) Each employee responsible for collecting cash is not responsible for posting collection entries to the general ledger or subsidiary ledgers, unless another employee/official is responsible for reconciling ledger postings to each other and to the deposit.
 - Result: Procedure was performed with no exceptions noted.
 - d) The employee(s) responsible for reconciling cash collections to the general ledger and/or subsidiary ledgers, by revenue source and/or agency fund additions are not responsible for collecting cash, unless another employee verifies the reconciliation.
 - Result: Procedure was performed with no exceptions noted.
- 6. Inquire of management that all employees who have access to cash are covered by a bond or insurance policy for theft.
 - Result: Procedure was performed with no exceptions noted.
- 7. Randomly select two deposit dates for each of the 5 bank accounts selected for procedure #3 under "Bank Reconciliations" above (select the next deposit date chronologically if no deposits were made on the dates randomly selected and randomly select a deposit if multiple deposits are made on the same day). Obtain supporting documentation for each of the 10 deposits and:

Schedule A - Procedures and Results

- a) Observe that receipts are sequentially pre-numbered.
 - Result: Procedure was performed with no exceptions noted.
- b) Trace sequentially pre-numbered receipts, system reports, and other related collection documentation to the deposit slip.
 - Result: Procedure was performed with no exceptions noted.
- c) Trace the deposit slip total to the actual deposit per the bank statement.
 - Result: Procedure was performed with no exceptions noted.
- d) Observe that the deposit was made within one business day of receipt at the collection location (within one week if the depository is more than 10 miles from the collection location or the deposit is less than \$100).
 - Result: Procedure was performed with no exceptions noted.
- e) Trace the actual deposit per the bank statement to the general ledger.
 - Result: Procedure was performed with no exceptions noted.

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

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

 Result: Procedure Not Applicable No exceptions noted in prior year.
- 9. For each location selected under #8 above, obtain a listing of those employees involved with non-payroll purchasing and payment functions. Obtain written policies and procedures relating to employee job duties (if the agency has no written policies and procedures, inquire of employees about their job duties), and observe that job duties are properly segregated such that:
 - a) At least two employees are involved in initiating a purchase request, approving a purchase, and placing an order/making the purchase.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
 - b) At least two employees are involved in processing and approving payments to vendors.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
 - c) The employee responsible for processing payments is prohibited from adding/modifying vendor files, unless another employee is responsible for periodically reviewing changes to vendor files.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
 - d) Either the employee/official responsible for signing checks mails the payment or gives the signed checks to an employee to mail who is not responsible for processing payments.
 - Result: Procedure Performed; no exceptions noted.
- 10. For each location selected under #8 above, obtain the entity's non-payroll disbursement transaction population (excluding cards and travel reimbursements) and obtain management's representation that the population is complete. Randomly select 5 disbursements for each location, obtain supporting documentation for each transaction and:

Schedule A - Procedures and Results

- a) Observe that the disbursement matched the related original invoice/billing statement.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
- b) Observe that the disbursement documentation included evidence (e.g., initial/date, electronic logging) of segregation of duties tested under #9, as applicable.
 - Result: Procedure Not Applicable No exceptions noted in prior year.

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

- 11. Obtain from management a listing of all active credit cards, bank debit cards, fuel cards, and P-cards (cards) for the fiscal period, including the card numbers and the names of the persons who maintained possession of the cards. Obtain management's representation that the listing is complete.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
- 12. Using the listing prepared by management, randomly select 5 cards (or all cards if less than 5) that were used during the fiscal period. Randomly select one monthly statement or combined statement for each card (for a debit card, randomly select one monthly bank statement), obtain supporting documentation, and:
 - a) Observe that there is evidence that the monthly statement or combined statement and supporting documentation (e.g., original receipts for credit/debit card purchases, exception reports for excessive fuel card usage) was reviewed and approved, in writing (or electronically approved), by someone other than the authorized card holder.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
 - b) Observe that finance charges and late fees were not assessed on the selected statements.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
- 13. Using the monthly statements or combined statements selected under #12 above, excluding fuel cards, randomly select 10 transactions (or all transactions if less than 10) from each statement, and obtain supporting documentation for the transactions (i.e. each card should have 10 transactions subject to testing). For each transaction, observe 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 note whether management had a compensating control to address missing receipts, such as a "missing receipt statement" that is subject to increased scrutiny.

Result: Procedure Not Applicable - No exceptions noted in prior year.

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

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

Schedule A – Procedures and Results

- a) If reimbursed using a per diem, agree the reimbursement rate to those rates established either by the State of Louisiana or the U.S. General Services Administration (www.gsa.gov).
 - Result: Procedure Not Applicable No exceptions noted in prior year.
- b) If reimbursed using actual costs, observe that the reimbursement is supported by an original itemized receipt that identifies precisely what was purchased.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
- c) 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 policy (procedure #1h).
 - Result: Procedure Not Applicable No exceptions noted in prior year.
- d) Observe that each reimbursement was reviewed and approved, in writing, by someone other than the person receiving reimbursement.
 - Result: Procedure Not Applicable No exceptions noted in prior year.

Contracts

- 15. Obtain from management a listing of all agreements/contracts for professional services, materials and supplies, leases, and construction activities that were initiated or renewed during the fiscal period. Obtain management's representation that the listing is complete. Randomly select 5 contracts (or all contracts if less than 5) from the listing, excluding the practitioner's contract, and:
 - a) Observe that the contract was bid in accordance with the Louisiana Public Bid Law (e.g., solicited quotes or bids, advertised), if required by law.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
 - b) Observe that the contract was approved by the governing body/board, if required by policy or law (e.g. Lawrason Act, Home Rule Charter).
 - Result: Procedure Not Applicable No exceptions noted in prior year.
 - c) If the contract was amended (e.g. change order), observe that the original contract terms provided for such an amendment.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
 - d) Randomly select one payment from the fiscal period for each of the 5 contracts, obtain the supporting invoice, agree the invoice to the contract terms, and observe that the invoice and related payment agreed to the terms and conditions of the contract.
 - Result: Procedure Not Applicable No exceptions noted in prior year.

Schedule A – Procedures and Results

Payroll and Personnel

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

Result: Procedure Not Applicable - No exceptions noted in prior year.

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

Result: Procedure Not Applicable - No exceptions noted in prior year.

- b) Observe that supervisors approved the attendance and leave of the selected employees/officials.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
- c) Observe that any leave accrued or taken during the pay period is reflected in the entity's cumulative leave records.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
- 18. Obtain a listing of those employees/officials that received termination payments during the fiscal period and management's representation that the list is complete. Randomly select two employees/officials, obtain related documentation of the hours and pay rates used in management's termination payment calculations, agree the hours to the employee/officials' cumulate leave records, and agree the pay rates to the employee/officials' authorized pay rates in the employee/officials' personnel files.

Result: Procedure Not Applicable - No exceptions noted in prior year.

19. Obtain management's representation that employer and employee portions of payroll taxes, retirement contributions, health insurance premiums, and workers' compensation premiums have been paid, and associated forms have been filed, by required deadlines.

Result: Procedure Not Applicable - No exceptions noted in prior year.

Ethics

- 20. Using the 5 randomly selected employees/officials from procedure #16 under "Payroll and Personnel" above obtain ethics documentation from management, and:
 - a. Observe that the documentation demonstrates each employee/official completed one hour of ethics training during the fiscal period.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
 - b. Observe that the documentation demonstrates each employee/official attested through signature verification that he or she has read the entity's ethics policy during the fiscal period.
 - Result: Procedure Not Applicable No exceptions noted in prior year.

Schedule A - Procedures and Results

Debt Service

- 21. 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.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
- 22. 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).

Result: Procedure Not Applicable - No exceptions noted in prior year.

Other

- 23. 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.
 - Result: Procedure Not Applicable No exceptions noted in prior year.
- 24. 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.
 - Result: Procedure Not Applicable No exceptions noted in prior year.