

**PRIMARY HEALTH SERVICES CENTER, INC.
AND AFFILIATE**

Monroe, Louisiana

**Financial and Compliance Report
December 31, 2017**

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INDEPENDENT AUDITOR'S REPORT

Board of Directors
Primary Health Services Center, Inc. and Affiliate
Monroe, Louisiana

Report on the Financial Statements

I have audited the accompanying combined financial statements of Primary Health Services Center, Inc. and Affiliate (a non-profit organization), which comprise the combined statement of financial position as of December 31, 2017, and the related combined statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the combined financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these combined 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 combined financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

My responsibility is to express an opinion on these combined financial statements based on my audit. I conducted my 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 I plan and perform the audit to obtain reasonable assurance about whether the combined financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the combined financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the combined 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 combined 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, I 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 combined financial statements.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my audit opinion.

Opinion

In my opinion, the combined financial statements referred to above present fairly, in all material respects, the combined financial position of Primary Health Services Center, Inc. and Affiliate as of December 31, 2017, and the changes in its net assets and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

I have previously audited the Primary Health Services Center, Inc.'s 2016 financial statements, and I expressed an unmodified audit opinion on those audited financial statements in my report dated June 1, 2017. In my opinion, the summarized comparative information presented herein as of and for the year ended December 31, 2016, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Other Matters

Other Information

My audit was conducted for the purpose of forming an opinion on the combined financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U. S. *Code of Federal Regulations* (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, is presented for purposes of additional analysis and is not a required part of the combined financial statements. In addition, the accompanying combining statement of financial position, combining statement of activities and schedule of compensation, benefits and other payments is also presented for purposes of additional analysis and is not a required part of the combined 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 combined financial statements. The information has been subjected to the auditing procedures applied in the audit of the combined financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the combined financial statements or to the combined financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In my opinion, the information is fairly stated, in all material respects, in relation to the combined financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, I have also issued my report dated June 26, 2017, on my consideration of Primary Health Services Center, Inc. and Affiliate's internal control over financial reporting and on my 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 my testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the 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 Primary Health Services Center, Inc. and Affiliate's internal control over financial reporting and compliance.

Steven M. DeRouen & Associates

Lake Charles, Louisiana
June 15, 2018

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Combined Statements of Financial Position
As of December 31, 2017
With Summarized Comparative Totals for 2016

Assets	2017	2016
Current Assets		
Cash and cash equivalents	\$ 1,398,956	\$ 1,243,002
Cash - restricted	239,547	295,579
Patient accounts receivable, net	163,337	145,461
Grants receivable	1,412,884	1,360,480
Certificates of deposit	671,216	671,010
Other receivable	-	37,148
Deposits	25,250	27,500
Total Current Assets	3,911,190	3,780,180
Property, Plant and Equipment		
Building and improvements	14,208,419	13,593,087
Furniture and equipment	3,488,827	3,277,677
Automobiles	426,697	381,171
	18,123,943	17,251,935
Less accumulated depreciation	(4,020,008)	(3,352,753)
	14,103,935	13,899,182
Land	807,491	807,491
Net Property, Plant and Equipment	14,911,426	14,706,673
Other Assets		
LA Partnership for Choice & Access, LLC	3,000	3,000
Utility Deposits	13,820	13,820
PCDC receivable - new markets tax credit	74,394	74,394
Notes receivable - new markets tax credit	9,359,000	9,359,000
Total Other Assets	9,450,214	9,450,214
Total Assets	\$ 28,272,830	\$ 27,937,067

See accompanying notes to financial statements.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Combined Statements of Financial Position (Continued)
As of December 31, 2017
With Summarized Comparative Totals for 2016

	2017	2016
Liabilities and Net Assets		
Current Liabilities		
Accounts payable	\$ 132,913	\$ 158,466
Accrued vacation and payroll	243,416	218,598
Payroll taxes payable	65,232	43,446
Accrued interest payable	9,167	9,167
Current portion of notes payable	120,054	65,619
Total Current Liabilities	570,782	495,296
Long Term Liabilities		
Notes payable - net of current portion	15,947,372	15,454,449
Total Liabilities	16,518,154	15,949,745
Net Assets		
Unrestricted net assets	10,341,792	10,626,842
Temporarily restricted net assets	1,412,884	1,360,480
Total Net Assets	11,754,676	11,987,322
Total Liabilities and Net Assets	\$ 28,272,830	\$ 27,937,067

See accompanying notes to financial statements.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Combined Statements of Activities
For the Year Ended December 31, 2017
With Summarized Comparative Totals for the Year Ended December 31, 2016

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>2017 Totals</u>	<u>2016 Totals</u>
Revenue and Support				
Revenue:				
Gross patient service revenue	\$ 13,090,891	\$ -	\$ 13,090,891	\$ 11,793,694
Less: contractual allowances and discounts	<u>(6,974,873)</u>	<u>-</u>	<u>(6,974,873)</u>	<u>(6,493,379)</u>
	6,116,018	-	6,116,018	5,300,315
Less: provision for uncollectible accounts	<u>(41,541)</u>	<u>-</u>	<u>(41,541)</u>	<u>(14,207)</u>
Net patient service revenue	<u>6,074,477</u>	<u>-</u>	<u>6,074,477</u>	<u>5,286,108</u>
Support and other income:				
Federal grants	2,384,630	-	2,384,630	2,106,805
Interest income	98,366	-	98,366	95,364
Other	305,311	-	305,311	12,563
Net assets released from restriction	1,360,480	(1,360,480)	-	-
Temporarily restricted revenue - federal grant	<u>-</u>	<u>1,412,884</u>	<u>1,412,884</u>	<u>1,360,480</u>
Total support and other income	<u>4,148,787</u>	<u>52,404</u>	<u>4,201,191</u>	<u>3,575,212</u>
Total revenue, support and other income	<u>10,223,264</u>	<u>52,404</u>	<u>10,275,668</u>	<u>8,861,320</u>
Expenses				
Program expenses	8,506,790	-	8,506,790	7,448,331
Management and general	<u>2,001,524</u>	<u>-</u>	<u>2,001,524</u>	<u>1,727,418</u>
Total Expenses	<u>10,508,314</u>	<u>-</u>	<u>10,508,314</u>	<u>9,175,749</u>
Increase (decrease) in Net Assets	(285,050)	52,404	(232,646)	(314,429)
Net Assets - Beginning of Year	<u>10,626,842</u>	<u>1,360,480</u>	<u>11,987,322</u>	<u>12,301,751</u>
Net Assets - End of Year	<u>\$ 10,341,792</u>	<u>\$ 1,412,884</u>	<u>\$ 11,754,676</u>	<u>\$ 11,987,322</u>

See accompanying notes to financial statements.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Combined Statements of Cash Flows
For the Year Ended December 31, 2017
With Summarized Comparative Totals for 2016

	2017	2016
Cash Flows From Operating Activities		
Change in net assets	\$ (232,646)	\$ (314,429)
Adjustments to reconcile change in net assets to net cash provided by operating activities:		
Depreciation and amortization	667,255	684,762
(Increase) decrease in accounts receivable, net	(17,876)	29,181
(Increase) decrease in grants receivable	(52,404)	(55,413)
(Increase) decrease in deposits	2,250	(27,500)
(Increase) decrease in other assets	37,148	194,019
Increase (decrease) in accounts payable	(25,553)	(177,474)
Increase (decrease) in accrued vacation and payroll	46,604	46,106
Increase (decrease) in other payables	-	1,281
	<u>424,778</u>	<u>380,533</u>
Net Cash Provided by Operating Activities		
Cash Flows From Investing Activities		
Purchase of certificate of deposits	(206)	(896)
Fixed asset acquisitions	(841,628)	(540,746)
Gain on sale of property, plant and equipment	-	(756)
Purchase of investment interest	-	(525)
	<u>(841,834)</u>	<u>(542,923)</u>
Net Cash Used by Investing Activities		
Cash Flows From Financing Activities		
Proceeds from loans	584,165	328,450
Principal payments on bank loans	(67,187)	(21,434)
	<u>516,978</u>	<u>307,016</u>
Net Cash Provided by Financing Activities		
Net Increase in Cash and Cash Equivalents	99,922	144,626
Cash and Cash Equivalents - Beginning of Year	1,538,581	1,393,955
Cash and Cash Equivalents - End of Year	<u>\$ 1,638,503</u>	<u>\$ 1,538,581</u>
Cash and Cash Equivalents:		
Cash - unrestricted	1,398,956	1,243,002
Cash - restricted	239,547	295,579
	<u>\$ 1,638,503</u>	<u>\$ 1,538,581</u>
Supplemental Disclosure:		
Interest paid	<u>\$ 314,612</u>	<u>\$ 257,806</u>

See accompanying notes to financial statements.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Combined Statement of Functional Expenses
For the Year Ended December 31, 2017
With Summarized Comparative Totals for 2016

	Public Health Service	Management and General	Total	
			2017	2016
Personnel	\$ 5,783,414	\$ 1,020,602	6,804,016	\$ 6,045,700
Fringe benefits/insurance	459,841	81,148	540,989	456,662
Medical contract	15,061	-	15,061	10,596
Non-medical contract	-	72,094	72,094	3,295
Supplies and services - medical	309,871	-	309,871	227,460
Repairs and maintenance	185,079	32,661	217,740	197,027
Telephone	41,996	7,411	49,407	49,982
Travel and education	-	99,639	99,639	101,272
Dues and permits	-	46,010	46,010	24,446
Office	148,985	223,477	372,462	304,007
Professional	54,713	82,069	136,782	150,065
Technical assistance	-	126,308	126,308	120,195
Occupancy	323,723	57,128	380,850	309,023
Advertising	309,083	-	309,083	189,267
Depreciation and amortization	567,167	100,088	667,255	654,754
Interest	267,420	47,192	314,612	287,814
Recruitment	11,479	-	11,479	12,427
Rental	28,517	5,032	33,549	29,848
Other	443	664	1,107	1,909
Total Functional Expenses	\$ 8,506,790	\$ 2,001,524	\$ 10,508,314	\$ 9,175,749

See accompanying notes to financial statements.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE

Monroe, Louisiana

Notes to Combined Financial Statements

December 31, 2017

NOTE 1 - NATURE OF ACTIVITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Activities

Primary Health Services Center, Inc. (a nonprofit corporation) was incorporated in the State of Louisiana to provide comprehensive health care to area residents, with particular emphasis on the socio-economically disadvantaged. The Organization is a federally qualified health center (FQHC).

During August 2014, the Healthcare Vision, Inc. non-profit corporation was organized for the purpose of recognizing the benefits of the New Markets Tax Credit transaction that occurred in September 2014.

These two entities whose financial statements are included in the combined financial statements are collectively referred to as the "Organization".

Income Taxes

Primary Health Services Center, Inc. and its Affiliate have been recognized as exempt from federal income taxes under Section 501 (c) (3) of the Internal Revenue Code and applicable state codes. Accordingly, no provision for federal and state income taxes is included in the combined financial statements. The Organization's income tax filings are subject to examination by the Internal Revenue Service generally for three years after they were filed. The Organization's income tax filings are subject to examination by the IRS, generally for three years after they are filed.

Method of Accounting

The accompanying combined financial statements of the Organization have been prepared on the accrual basis of accounting, in accordance with generally accepted accounting principles.

Accounting Estimates

The preparation of combined financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Cash and Cash Equivalents

For purposes of reporting cash flows, the Organization considers all highly liquid debt investments purchased with a maturity of three months or less to be cash equivalents.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE

Monroe, Louisiana

Notes to Combined Financial Statements (Continued)

December 31, 2017

NOTE 1 - NATURE OF ACTIVITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)

Property and Equipment

Property and equipment is stated at cost. It is the Organization's policy to capitalize expenditures for these items in excess of \$5,000. Depreciation of property and equipment is computed principally by the straight-line method over the following estimated useful lives:

	<u>Years</u>
Buildings and improvements	10 – 40
Equipment, furniture and fixtures	5 – 10
Computer software	5
Vehicles	5

Functional Expenses

The costs of providing the various programs and other activities have been summarized on a functional basis in the combined statement of activity. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

Accounts Receivable

The Organization records accounts receivable at the time of service according to fees developed from cost data of this and similar organizations. These amounts are often reduced because of the patients' inability to pay or because of disallowances and reductions from third party payors.

Allowance for Doubtful Accounts and Bad Debts

Accounts receivable are reduced by an allowance for doubtful accounts. In evaluating the collectability of accounts receivable, the Organization 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 Organization analyzes contractually due amounts and provides an allowance for doubtful accounts and a provision for bad debts, if necessary. For receivables associated with self-pay patients (which includes both patients without insurance and patients with deductible and copayment balances due for which third-party coverage exists for part of the bill), the Organization records a significant provision for bad debts in the period of service on the basis of its past experience, which indicates that many patients are unable or unwilling to pay the portion of their bill for which they are financially responsible. The difference between the standard rates (or the discounted rates if negotiated) and the amounts actually collected after all reasonable collection efforts have been exhausted is charged off against the allowance for doubtful accounts.

Net Patient Service Revenue

Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Notes to Combined Financial Statements (Continued)
December 31, 2017

**NOTE 1 - NATURE OF ACTIVITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)**

Grants and Contributions

Grants and contributions are recognized as income when received. The Board reports grants as temporarily restricted support if they are received with stipulations that limit the use of the funds. When grantor restrictions expire, temporary restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. All other support is recognized when earned. Grants and contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the same year in which the grants and contributions are recognized. At December 31, 2017, temporarily restricted net assets were \$1,412,884, which represent amounts awarded, but not received from federal grants.

Fair Values of Financial Instruments

The Organization has a number of financial instruments, none of which is held for trading purposes. The Organization estimates that the fair values of all financial instruments as of December 31, 2017 do not differ materially from the aggregate carrying values of its financial instruments recorded in the accompanying balance sheet. The estimated fair value amounts have been determined by the Organization using available market information and appropriate valuation methodologies. Considerable judgment is necessarily required in interpreting market data to develop the estimates of fair value, and, accordingly, the estimates are not necessarily indicative of the amounts that the agency could realize in a current market exchange. The recorded values of cash and cash equivalents, accounts receivable, grants receivable, prepaid expenses, accounts payable, and accrued expenses approximate their fair values based on their short-term nature. The recorded values of notes payable and notes receivable approximate their fair value, as interest is insignificant.

Risk Management

The Organization 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 claims and judgments. Commercial insurance coverage is purchased for claims arising from such matters.

Major Funding Source

The Organization receives funds from DHHS, under section 330 of the Public Health Service Act (42 U.S.C. 254c). In accordance with DHHS policies, all funds disbursed should be in compliance with the specific terms of the grant agreements. DHHS may, at its discretion, request reimbursement for expenses or return of unexpended funds, or both, as a result of non-compliance by the Organization with the terms of the grants. In addition, if the Organization terminates its DHHS grant activities, all unexpended federal funds are to be returned to DHHS.

Monroe, Louisiana
Notes to Combined Financial Statements (Continued)
December 31, 2017

NOTE 1 - NATURE OF ACTIVITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES
(CONTINUED)

Investments

The Organization reports its investments in accordance with generally accepted accounting principles for not-for-profit organizations, which establish accounting standards for investments in certain equity securities and for all debt securities. The guidance prescribes that covered investments be reported in the statement of financial position at fair value with any realized or unrealized gains or losses reported in the statement of activities.

NOTE 2 - PATIENT ACCOUNTS RECEIVABLE

Patient accounts receivable are comprised of the following for the year ended December 31, 2017:

Medicaid	\$ 105,068
Medicare	23,387
Private	124,511
	252,966
Less allowance for doubtful accounts	(89,629)
	\$ 163,337

The method to calculate allowance for doubtful accounts did not significantly change from the prior year. The Organization’s write-offs, which primarily consisted of self-pay changes, totaled \$41,541 for the year ended December 31, 2017. The Organization changed its charity care policy during the year to update the patient’s sliding fee application for changes to the current Federal Poverty Level guidelines.

NOTE 3 – NEW MARKET TAX CREDIT

During the year ended December 31, 2014, the Organization received \$14 million in New Market Tax Credit Program (NMTC) financing as a qualified low income community investment within the meaning of Section 45D of the Internal Revenue Code. The NMTC Program attracts investment capital to low-income communities by allowing individual and corporate investors to receive a tax credit against their federal income tax return in exchange for making equity investments in a specialized financial institution called a “Community Development Entity” (CDE). The tax credit totals thirty-nine percent (39%) of the original investment amount and is claimed over a period of seven (7) years (compliance period). QCDEs, in turn, make investments into businesses or projects with terms that are more favorable than typically available with conventional financing.

In order for the CDE to provide NMTC financing, the borrower must be deemed a “qualified active low-income community business” (QALICB) and the financed project must be deemed a “qualified low-income community investment” (QLICI) in order for tax credit investors in a CDE to receive the tax credits described above. As part of this transaction, Healthcare Vision, Inc. was formed to serve as the QALICB for the NMTC transaction. Healthcare Vision, Inc. is a supporting foundation of Primary Health Services, Inc. and two of Healthcare Vision Inc.’s three board members also serve on Primary Health Services, Inc.’s board of directors.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Notes to Combined Financial Statements (Continued)
December 31, 2017

NOTE 3 – NEW MARKET TAX CREDIT (Continued)

Utilization of the NMTC Program has the end result of providing the financing to complete construction and renovation of a new medical clinic, which began in 2012, at favorable and below market rate terms.

The NMTC transaction was structured whereby Healthcare Vision, Inc. received a QLICI loan and the Betin Street Campus was sold to Healthcare Vision, Inc. for \$12,723,484. The NMTC transaction is as follows: The Primary Care Development Corporation provided a loan to Primary Health Services Center, Inc. in the amount of \$2,000,000, who in turn used this loan along with the proceeds of the sale of the Betin Street campus to make a loan in the amount of \$9,359,000 to COCRF Investor 27, LLC. Capital One then made an equity contribution to COCRF Investor 27, LLC in the amount of \$4,641,000. The total investment of \$14,000,000 was then transferred from COCFR Investor 27, LLC as an equity contribution to PCDC Health Opportunities Fund V, LLC (CDE) and COCRF Sub CDE XX, LLC (CDE) in the amounts of \$9,500,000 and \$4,500,000, respectively. PCDC Health Opportunities Fund V, LLC and COCRF Sub CDE XX, LLC then made two (2) loans each (four total loans) to Healthcare Vision, Inc. totaling \$13,715,000. The remaining \$285,000 was used to pay upfront fees owed to the Primary Care Development Corporation.

The loans will be made at an interest rate of approximately 1.0%, with interest-only debt payments for an initial seven (7) year period (compliance period) and then interest and principal payments sufficient to fully repay the loan at maturity. Prepayment of the loans during the compliance period will not be permitted.

After the seven year recapture period, the Capital One has the option to sell, within the three month “put period”, to put its equity interest in COCRF Investor 27, LLC (\$4,641,000) to Primary Health Services Center, Inc. or an affiliate for an amount equal to \$1,000 plus taxes and transfer expenses. In the event that Capital One does not put its interest in COCRF Investor 27, LLC, Primary Health Services Center, Inc. has a call option to purchase Capital One’s interest in COCRF Investor 27, LLC at fair market value as determined by an independent appraiser. In conjunction with this event, COCFR SUBCDE XX, LLC (CDE) will be liquidated and its assets distributed to COCRF Investor 27, LLC.

Immediately after the exit transactions are completed, Healthcare Vision, Inc. may be dissolved and the Betin Street campus may be transferred back to Primary Health Services Center, Inc. The Organization anticipates receiving a net benefit from the results of these transactions of approximately \$4,500,000, net of transaction costs.

After the NMTC transaction was completed, Healthcare Vision, Inc. leased the Betin Street campus to Primary Health Services Center, Inc., for which the lease payments were used to pay the debt service on the new loans. The rental expense and rental income will be intercompany transactions that will be eliminated for purposes of the combined financial statements.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Notes to Combined Financial Statements (Continued)
December 31, 2017

NOTE 4 - NOTES PAYABLE

Notes payable for the year ended December 31, 2017 consisted of the following:

<p><u>Healthcare Vision, Inc. Promissory Note Payable (A) from PCDC Health Opportunities Fund V, LLC:</u> New Market Tax Credit loan dated September 29, 2014, in the amount of \$6,350,750, interest payable quarterly in 28 installments starting on December 10, 2014 until conversion to amortizing loan with principal and interest payments commencing on December 10, 2021, and continuing until the maturity date of September 28, 2044, bearing an fixed interest of 1.028762%; collateralized by real estate, assignment of leases and rents, security agreement and fixture filing encumbrance.</p>	\$ 6,350,750
<p><u>Healthcare Vision, Inc. Promissory Note Payable (B) from PCDC Health Opportunities Fund V, LLC:</u> New Market Tax Credit loan dated September 29, 2014, in the amount of \$2,864,250, interest payable quarterly in 28 installments starting on December 10, 2014 until conversion to amortizing loan with principal and interest payments commencing on December 10, 2021, and continuing until the maturity date of September 28, 2044, bearing an fixed interest of 1.028762%; collateralized by real estate, assignment of leases and rents, security agreement and fixture filing encumbrance.</p>	2,864,250
<p><u>Healthcare Vision, Inc. Promissory Note Payable (A) from COCRF SUBCDE XX, LLC:</u> New Market Tax Credit loan dated September 29, 2014, in the amount of \$3,008,250, interest payable quarterly in 28 installments starting on December 10, 2014 until conversion to amortizing loan with principal and interest payments commencing on December 10, 2021, and continuing until the maturity date of September 28, 2044, bearing an fixed interest of 1.028762%; collateralized by real estate, assignment of leases and rents, security agreement and fixture filing encumbrance.</p>	3,008,250
<p><u>Healthcare Vision, Inc. Promissory Note Payable (B) from COCRF SUBCDE XX, LLC:</u> New Market Tax Credit loan dated September 29, 2014, in the amount of \$1,491,750, interest payable quarterly in 28 installments starting on December 10, 2014 until conversion to amortizing loan with principal and interest payments commencing on December 10, 2021, and continuing until the maturity date of September 28, 2044, bearing an fixed interest of 1.028762%; collateralized by real estate, assignment of leases and rents, security agreement and fixture filing encumbrance.</p>	1,491,750
<p><u>Primary Health Services Center, Inc. Promissory Note Payable from Origin Bank:</u> Real estate mortgage dated December 6, 2017, in the amount of \$559,677, payable in 59 monthly installments of \$5,965.50 beginning on January 21, 2018 and a balloon payment of \$391,469 payable on August 31, 2021, fixed interest rate of 4.99%, collateralized by real estate located in Lincoln Parish, Louisiana and funds on deposit with Origin Bank.</p>	559,677
<p><u>Primary Health Services Center, Inc. Loan from Community Trust Bank:</u> Automobile loan dated November 19, 2014, in the amount of \$52,569.86; 59 payments of \$992.50, fixed interest rate of 4.950%, matures November 19, 2019; collateralized by automobiles.</p>	21,722

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Notes to Combined Financial Statements (Continued)
December 31, 2017

NOTE 4 - NOTES PAYABLE (Continued)

<p><u>Primary Health Services Center, Inc. Promissory Note Payable from Primary Care Development Corporation:</u> New Market Tax Credit loan dated September 29, 2014, in the amount of \$2,000,000, interest payable quarterly installments commencing on December 1, 2014 until conversion to amortizing loan with principal and interest payments commencing on December 1, 2016, and continuing until the maturity date of September 29, 2021 at which time the remaining outstanding loan balance of \$1,785,431 will be due, bearing an fixed interest of 5.50%; collateralized by leasehold mortgage and pari-passu share in leveraged loan documents including pledge of investment fund membership interest in entities making the permanent financing loans to Healthcare Vision, Inc. Covenants include Debt Service Coverage Ratio of a minimum of 1.25:1, three prior year rolling average positive cash flow from operations, net assets not to fall below \$4MM, standard debt limitations, cross-default provisions.</p>	1,954,760
<p><u>Primary Health Services Center, Inc. Loan from Community Trust Bank:</u> Automobile loan dated September 27, 2017, in the amount of \$24,488.20; 36 payments of \$726.34, fixed interest rate of 4.250%, matures September 27, 2020; collateralized by automobiles.</p>	22,565
<p><u>Primary Health Services Center, Inc. Promissory Note Payable from Origin Bank:</u> Real estate mortgage dated August 31, 2016, in the amount of \$328,436.20, payable in 59 monthly installments of \$2,497.76 beginning on September 30, 2016 and a balloon payment of \$244,495.91 payable on August 31, 2021, fixed interest rate of 4.350%, collateralized by real estate located in Lincoln Parish, Louisiana and funds on deposit with Origin Bank.</p>	307,217
<p>Total debt</p>	16,580,941
<p>Less current portion</p>	(120,054)
<p>Less deferred financing costs, net</p>	(513,515)
<p>Long-term debt</p>	<u>\$ 15,947,372</u>

Maturities of debt are as follows:

December 31,	Amount
2018	\$ 120,054
2019	126,507
2020	119,587
2021	2,632,117
2022	532,712
Thereafter	13,049,964
Total	\$ 16,580,941

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
 Monroe, Louisiana
 Notes to Combined Financial Statements (Continued)
 December 31, 2017

NOTE 5 – COMPLIANCE WITH LOAN COVENANTS

The multiple loan agreements contain various requirements related to reserves, financial ratios, financial reporting due dates, etc. The Organization met the required loan covenants.

NOTE 6 – NOTE RECEIVABLE

Primary Health Services Center, Inc.'s note receivable of \$9,359,000 from COCRF Investor 27, LLC accrues interest at 1.0% which is payable quarterly through June 10, 2021. Beginning September 29, 2021, principal and interest will be payable quarterly sufficient to fully amortize the note with the final payment due September 28, 2044.

NOTE 7 - CONCENTRATIONS OF CREDIT RISK

The Organization maintains several bank accounts at various banks, where account balances are insured by the Federal Deposit Insurance Corporation (FDIC) up to \$250,000. At times, the Organization maintains deposit balances that exceed federally insured limits. Management believes this risk is limited.

The majority of the Organization's patients are located in Northeast Louisiana. The Organization grants credit without collateral to its patients. The mix of receivables from patients and third-party payors as of December 31, 2017 was as follows:

	<u>2017</u>
Medicaid	64 %
Medicare	14
Other	<u>22</u>
	<u>100 %</u>

The mix of net patient revenues for the year ended December 31, 2016 was as follows:

	<u>2017</u>
Medicaid	89 %
Medicare	5
Other	<u>6</u>
	<u>100 %</u>

NOTE 8 – FUNCTIONAL ALLOCATION OF EXPENSES

Expenses were allocated in the accompanying combined financial statements to program and supporting service functional expense groups. The methods of allocation were based on several factors such as utilization of office space as well as the Organization's estimates of the relative proportion of various staff members' time and effort between program and administrative functions.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Notes to Combined Financial Statements (Continued)
December 31, 2017

NOTE 9 – RETIREMENT PLAN

The Organization sponsors a 401(k) retirement plan covering qualified employees. The Organization made matching contributions of \$168,857 for 2017. Organization will match up to 4% of employee contributions to the plan.

NOTE 10 – ADVERTISING

The Organization expenses the cost of advertising as the expense is incurred. In 2017, the cost totaled \$285,235.

NOTE 11 – RESTRICTED CASH

As of December 31, 2017, \$7,268 was pledged and held in a separate bank account by Primary Health Services Center, Inc. for the payment of debt obligations.

As of December 31, 2017, Healthcare Vision, Inc. reserved and held in a separate bank account \$232,561 for audit, tax, asset management and incidental expenses.

NOTE 12 – INVESTMENTS

The Organization applies GAAP for fair value measurements of financial assets that are recognized at fair value in the combined financial statements on a recurring basis. GAAP establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to measurements involving significant unobservable inputs (Level 3 measurements). The three levels of fair market hierarchy are as follows:

Level 1 inputs are quoted prices (unadjusted) in active markets for identical assets or liabilities the Organization has the ability to access.

Level 2 inputs are inputs (other than quoted prices included in Level 1) that are observable for the asset or liability, either directly or indirectly.

Level 3 are unobservable inputs for the asset or liability and rely on management's own assumptions about the assumptions that market participants would use in pricing the asset or liability. (The unobservable inputs should be developed based on the best information available).

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Notes to Combined Financial Statements (Continued)
December 31, 2017

NOTE 12 – INVESTMENTS (Continued)

As of December 31, 2017, the Organization’s investments measured on a recurring basis consisted of certificate of deposits with fair market value (quoted prices in active market – Level 1) and a member’s interest in a limited liability company with fair market value (Level 3) and costs bases as follows:

	Amortized Cost	Fair Value	Unrealized Gain/(Loss)
Certificate of deposits (Level 2 Observable Inputs)	\$ 671,216	\$ 671,216	\$ -0-

NOTE 13 – COST REPORT RECEIVABLE

The Organization participates in the Medicare and Medicaid programs as a provider of medical services to program beneficiaries. The Organization participates in the Medicaid program as a federally qualified health center. Final settlements will be made upon completion of audits by program representatives. Retroactive adjustments arising under reimbursement agreements with third-party payors are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

NOTE 14 – DEFERRED FINANCING COSTS

Deferred financing costs are capitalized and amortized over the life of the related debt using the straight-line method. Total capitalized costs were \$32,283 and \$579,016 and the related accumulated amortization was \$9,184 and \$57,902, as of December 31, 2017, for Primary Health Services Center, Inc. and Healthcare Vision, Inc., respectively. Deferred financing costs are reported as a direct deduction from the face amount of the related notes payable in the combined statements of financial position.

The following is the estimated aggregate amortization expense for each of the five years succeeding December 31, 2017:

Year	Healthcare Visions, Inc.	Primary Health Services, Inc.	Total Amount
2018	\$ 25,734	\$ 4,247	\$ 29,981
2019	25,734	4,247	29,981
2020	25,734	4,247	29,981
2021	25,734	4,247	29,981
2022	25,734	4,247	29,981

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Notes to Combined Financial Statements (Continued)
December 31, 2017

NOTE 15 – LITIGATION

The Organization is involved in litigation arising in the course of business. After consultation with legal counsel, no reliable evaluation of an unfavorable outcome or the estimated range of loss can be provided at this time.

NOTE 16 – ECONOMIC DEPENDENCY

The Organization receives a substantial portion of its total support and revenues from the federal government. During 2017, Primary Health Services Center, Inc. recorded \$3,797,514 in grant support from the Department of Health and Human Services. This represents 37% of total support and revenues for the year ended December 31, 2017.

NOTE 17 – PRIOR-YEAR SUMMARIZED INFORMATION

The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the Organization's financial statements for the year ended December 31, 2016, from which the summarized information was derived.

NOTE 18 – CHARITY CARE

The Organization provides care to patients who qualify under federal guidelines and other policies of the Organization at fees less than its established rates. The amount of charity care is reduced from the amount of fees for services presented in the statement of activities. The amount of charity care for disclosure purposes should be measured by costs, including direct and indirect costs. Management has calculated the costs associated with providing charity care utilizing the cost to charge ratio obtained from the Medicare cost report data. The amount of costs associated with charity care for the year ended December 31, 2017 was \$370,434.

NOTE 19 - LEASES

Effective September 29, 2014, Primary Health Services Center, Inc. began leasing its facilities from Healthcare Vision, Inc. as part of the New Markets Tax Credit transaction. The lease commenced on September 29, 2014 and is for a term of seven (7) years. At the end of the lease, Primary Health Services Center, Inc. will have the option to extend the lease in five (5) year increments or purchase the leased facilities for the greater of the debt owed or the premise's fair market value, which shall be determined by an independent appraiser.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Notes to Combined Financial Statements (Continued)
December 31, 2017

NOTE 19 - LEASES (Continued)

The cost and accumulated depreciation of the property under these lease agreements was \$12,352,992 and \$1,003,681, respectively. In 2017, quarterly lease payments made by Primary Health Services, Inc. to Healthcare Vision, Inc. totaled \$113,680. This lease expense and lease income are intercompany transactions that were eliminated for purposes of these combined financial statements. The following is a schedule of future minimum rentals on non-cancelable leases due to Healthcare Vision, Inc. over the next five years:

Year ended December 31:

2018	\$ 113,680
2019	\$ 113,680
2020	\$ 113,680
2021	\$ 113,680
2022	\$ 113,680

NOTE 20 – THIRD PARTY PAYORS

Primary Health Services Center, Inc. has agreements with third-party payors that provide reimbursement to the Organization at amounts different from its established rates. Contractual adjustments under third-party reimbursement programs represent the difference between the Primary Health Services Center, Inc.'s rates for services and amounts reimbursed by third-party payors. A summary of the basis of reimbursement with major third-party payors follows:

Medicare A – All-Inclusive Encounter Rate – Reimbursed on one rate regardless of the services provided.

Medicare B- Fee for Service – Reimbursed per encounter up to the payors allowable amount.

Regular Medicaid and Medicaid Bayou Health – All-Inclusive Encounter Rate – Reimbursed on one rate regardless of the services provided.

All Other Medicaid – Fee-For-Service – Reimbursed per encounter up to the payors allowable amount.

Commercial – Fee-For-Service – Reimbursed per contract or per payor's allowable fee schedule.

NOTE 21– SUBSEQUENT EVENTS

The Organization evaluated its December 31, 2017 combined financial statements for subsequent events through the date of the independent auditor's report, which is the date the financial statements were available to be issued. The Organization is not aware of any subsequent events which would require recognition or disclosure in the financial statements.

PRIMARY HEALTH SERVICES CENTER, INC.

Schedule of Expenditures of Federal Awards
Year Ended December 31, 2017

<u>Program Title</u>	<u>CFDA Number</u>	<u>Grant Number</u>	<u>Program Year</u>	<u>Program Revenues</u>	<u>Program Expenses</u>
U. S. Department of Health and Human Services					
Direct Programs:					
Community Health Center Section 330	93.224	H80CS00754	5/1/17 - 4/30/18	\$ 3,797,514	\$ 3,797,514
Total federal assistance				\$ 3,797,514	\$ 3,797,514

Above program consider major.

Basis of Presentation

The accompanying schedule of expenditures of federal awards includes the federal grant activity of Primary Health Services Center, Inc., and is presented on the accrual basis of accounting. The information on this schedule is presented in accordance with the requirements contained by Title 2 of U. S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles, and Requirements for Federal Awards (Uniform Guidance).

The amounts presented in this schedule do not differ from the amounts presented in, or used in the preparation of the financial statements.

Primary Health Services Center, Inc. has elected not to use the 10 percent *de minimis* indirect cost rate as allowed under the Uniform Guidance.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Combining Statement of Financial Position
As of December 31, 2017

	<u>Primary Health Services Center, Inc.</u>	<u>Healthcare Vision, Inc.</u>	<u>Eliminations</u>	<u>Combined Total</u>
Assets				
Current Assets				
Cash and cash equivalents	1,358,275	\$ 40,681	\$ -	\$ 1,398,956
Cash - restricted	7,286	232,261	-	239,547
Patient accounts receivable, net	163,337	-	-	163,337
Grants receivable	1,412,884	-	-	1,412,884
Certificates of deposit	671,216	-	-	671,216
Other receivable	-	-	-	-
Prepaid expenses	25,250	-	-	25,250
	<u>3,638,248</u>	<u>272,942</u>	<u>-</u>	<u>3,911,190</u>
Property, Plant and Equipment				
Building and improvements	1,855,427	12,352,992	-	14,208,419
Furniture and equipment	3,488,827	-	-	3,488,827
Automobiles	426,697	-	-	426,697
	<u>5,770,951</u>	<u>12,352,992</u>	<u>-</u>	<u>18,123,943</u>
Less accumulated depreciation	(3,016,328)	(1,003,680)	-	(4,020,008)
	<u>2,754,623</u>	<u>11,349,312</u>	<u>-</u>	<u>14,103,935</u>
Land	436,999	370,492	-	807,491
	<u>3,191,622</u>	<u>11,719,804</u>	<u>-</u>	<u>14,911,426</u>
Other Assets				
Investments other	3,000	-	-	3,000
Utility Deposits	13,820	-	-	13,820
PCDC receivable - new markets tax credit	74,394	-	-	74,394
Notes receivable - new markets tax credit	9,359,000	-	-	9,359,000
	<u>9,450,214</u>	<u>-</u>	<u>-</u>	<u>9,450,214</u>
Total Assets	<u>\$ 16,280,084</u>	<u>\$ 11,992,746</u>	<u>\$ -</u>	<u>\$ 28,272,830</u>

See accompanying notes to financial statements.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Combining Statement of Financial Position (Continued)
As of December 31, 2017

	<u>Primary Health Services Center, Inc.</u>	<u>Healthcare Vision, Inc.</u>	<u>Eliminations</u>	<u>Combined Total</u>
Liabilities and Net Assets				
Current Liabilities				
Accounts payable	\$ 132,913	\$ -	\$ -	\$ 132,913
Accrued vacation and payroll	243,416	-	-	243,416
Payroll taxes payable	65,232	-	-	65,232
Accrued interest payable	9,167	-	-	9,167
Current portion of notes payable	<u>120,054</u>	<u>-</u>	<u>-</u>	<u>120,054</u>
Total Current Liabilities	570,782	-	-	570,782
Long Term Liabilities				
Notes payable - net of current portion	<u>2,727,752</u>	<u>13,219,620</u>	<u>-</u>	<u>15,947,372</u>
Total Liabilities	<u>3,298,534</u>	<u>13,219,620</u>	<u>-</u>	<u>16,518,154</u>
Net Assets				
Unrestricted net assets	11,568,666	(1,226,874)	-	10,341,792
Temporarily restricted net assets	<u>1,412,884</u>	<u>-</u>	<u>-</u>	<u>1,412,884</u>
Total Net Assets	<u>12,981,550</u>	<u>(1,226,874)</u>	<u>-</u>	<u>11,754,676</u>
Total Liabilities and Net Assets	<u>\$ 16,280,084</u>	<u>\$ 11,992,746</u>	<u>\$ -</u>	<u>\$ 28,272,830</u>

See accompanying notes to financial statements.

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE
Monroe, Louisiana
Combining Statement of Activities
For the Year Ended December 31, 2017

	Primary Health Services Center, Inc.	Healthcare Vision, Inc.	Eliminations	Combined Total
Revenue and Support				
Revenue:				
Gross patient service revenue	\$ 13,090,891	\$ -	\$ -	\$ 13,090,891
Less: contractual allowances and discounts	(6,974,873)	-	-	(6,974,873)
	6,116,018	-	-	6,116,018
Less: provision for uncollectible accounts	(41,541)	-	-	(41,541)
Net patient service revenue	6,074,477	-	-	6,074,477
Support and other income:				
Federal grants	2,205,340	-	-	2,205,340
Interest income	98,366	-	-	98,366
Lease income	-	113,680	(113,680)	-
Other	305,311	-	-	305,311
Temporarily restricted revenue - federal grant	1,592,174	-	-	1,592,174
Total support and other income	4,201,191	113,680	(113,680)	4,201,191
Total revenue, support and other income	10,275,668	113,680	(113,680)	10,275,668
Expenses				
Program expenses	8,192,372	411,046	(96,628)	8,506,790
Management and general	1,937,118	81,458	(17,052)	2,001,524
Total Expenses	10,129,490	492,504	(113,680)	10,508,314
Increase (decrease) in Net Assets	146,178	(378,824)	-	(232,646)
Net Assets - Beginning of Year	12,835,372	(848,050)	-	11,987,322
Net Assets - End of Year	\$ 12,981,550	\$ (1,226,874)	\$ -	\$ 11,754,676

See accompanying notes to financial statements.

Primary Health Services Center, Inc. and Affiliate
Schedule of Compensation, Benefits and Other Payments to Executive Director
Paid from Public Funds
December 31, 2017

Agency Head Name: Catherine Tonore, Chief Executive Officer

Purpose	Amount
Salary	-
Benefits-health insurance	-
Benefits-retirement	-
Benefits-Life, ADD, LTD	-
Car allowance	-
Vehicle provided by government	-
Per diem	-
Reimbursements – Auto Mileage Reimb	-
Travel	-
Registration fees	-
Conference travel	-
Continuing professional education fees	-
Housing	-
Unvouchered expenses	-
Special meals	-
	-

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

Board of Directors
Primary Health Services Center, Inc. and Affiliate
Monroe, Louisiana

I 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 combined financial statements of Primary Health Services Center, Inc. and Affiliate (a nonprofit organization), which comprise the combined statement of financial position as of December 31, 2017, and the related combined statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements, and have issued my report thereon dated June 15, 2018.

Internal Control Over Financial Reporting

In planning and performing my audit, I considered Primary Health Services Center, Inc. and Affiliate's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing my opinion on the combined financial statements, but not for the purpose of expressing an opinion on the effectiveness of Primary Health Services Center, Inc. and Affiliate's internal control. Accordingly, I do not express an opinion on the effectiveness of Primary Health Services Center, Inc. and Affiliate'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.

My consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during my audit I did not identify any deficiencies in internal control that I consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether Primary Health Services Center, Inc. and Affiliate's combined financial statements are free of material misstatement, I performed tests of its compliance with certain provisions of laws, regulations, contracts, and grants, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of my audit, and accordingly, I do not express such an opinion. The results of my tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

Purpose of this Report

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

Steven M. DeRouen & Associates

Lake Charles, Louisiana
June 15, 2018

STEVEN M. DEROUEN & ASSOCIATES

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

The Board of Directors
Primary Health Services Center, Inc. and Affiliate
Monroe, Louisiana

Report on Compliance for Each Major Federal Program

I have audited Primary Health Services Center, Inc. and Affiliate's compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of Primary Health Services Center, Inc. and Affiliate's major federal programs for the year ended December 31, 2017. Primary Health Services Center and Affiliate's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal programs.

Auditor's Responsibility

My responsibility is to express an opinion on compliance for each of Primary Health Services Center, Inc. and Affiliate's major federal programs based on my audit of the types of compliance requirements referred to above. I conducted my audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that I plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about Primary Health Services Center and Affiliate's compliance with those requirements and performing such other procedures as I considered necessary in the circumstances.

I believe that my audit provides a reasonable basis for my opinion on compliance for each major federal program. However, my audit does not provide a legal determination of Primary Health Services Center, Inc. and Affiliate's compliance.

Opinion on Each Major Federal Program

In my opinion, Primary Health Services Center, Inc. and Affiliate complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended December 31, 2017.

Report on Internal Control Over Compliance

Management of Primary Health Services Center, Inc. and Affiliate is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered Primary Health Services Center, Inc. and Affiliate's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, I do not express an opinion on the effectiveness of Primary Health Services Center, Inc. and Affiliate's internal control over compliance.

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

My consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

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

Steven M. DeRouen & Associates

Lake Charles, Louisiana
June 15, 2018

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE

Schedule of Findings and Questioned Cost
Year Ended December 31, 2017

SECTION I – SUMMARY OF AUDITORS' RESULTS

Financial Statements

Type of auditor's report issued Unmodified
Internal control over financial reporting:
Material weaknesses identified? Yes No
Significant deficiencies identified not considered to
be material weaknesses? Yes None reported
Noncompliance material to financial statements
noted? Yes No

Federal Awards

Internal control over major programs:
Material weaknesses identified? Yes No
Significant deficiencies identified not considered to
be material weaknesses? Yes None reported
Type of auditor's report issued on compliance
for major programs: Unmodified
Any audit findings disclosed that are required
to be reported in accordance with Uniform
Guidance Yes No

Identification of major programs:

<u>CFDA Number</u>	<u>Name of Federal Program or Cluster</u>
93.224	US Department of Health and Human Services, Community Health Center Section 330

Dollar threshold used to distinguish between
Type A and Type B programs: \$750,000

Auditee qualified as low-risk auditee? Yes No

No Separate Management Letter Issued

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE

**Schedule of Findings and Questioned Cost
Year Ended December 31, 2017**

SECTION II – FINDINGS

None

PRIMARY HEALTH SERVICES CENTER, INC. AND AFFILIATE

**Summary Schedule of Prior Year Findings and Questioned Cost
Year Ended December 31, 2017**

SECTION III – PRIOR YEAR FINDINGS

None