SWLA CENTER FOR HEALTH SERVICES Lake Charles, Louisiana

Financial and Compliance Report May 31, 2021

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INDEPENDENT AUDITOR'S REPORT

Board of Directors SWLA Center for Health Services Lake Charles, Louisiana

Report on the Financial Statements

We have audited the accompanying statements of SWLA Center for Health Services. (a non-profit organization), which comprise the statement of financial position as of May 31, 2021, and the related statements of activities, functional expenses, and cash flows for the fiscal year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on my 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 of material misstatement.

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of SWLA Center for Health Services as of May 31, 2021, and the changes in its net assets and its cash flows for the fiscal year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited the SWLA Center for Health Services' May 31, 2020 financial statements and my report dated January 26, 2021 expressed an unmodified opinion on those audited financial statements. In our opinion, the summarized comparative information presented herein as of and for the fiscal year ended May 31, 2020, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Other Matters

Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements of Federal Awards*, and the Schedule of Compensation, Benefits and Other Payments, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements and certain additional procedures, including 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 my report dated November 26, 2021, on my consideration of SWLA Center for Health Services' 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 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 SWLA Center for Health Services' internal control over financial reporting and compliance.

Steven M. DeRouen & Associates

Lake Charles, Louisiana November 26, 2021

SWLA CENTER FOR HEALTH SERVICES Lake Charles, Louisiana Statements of Financial Position As of May 31, 2021 With Summarized Comparative Totals as of May 31, 2020

	2021	2020
Assets		
Current Assets		
Cash and cash equivalents	\$ 4,045,115	\$ 1,720,133
Patient accounts receivable, net	3,664,153	2,240,880
Other receivables	279,070	869,733
Supplies inventory	25,903	57,483
Prepaid expenses	262,130	261,736
Total Current Assets	8,276,371	5,149,965
Property, Plant and Equipment		
Furniture and equipment	5,208,055	5,259,816
Building and improvements	12,122,929	15,236,146
Automobiles	202,909	172,098
	17,533,893	20,668,060
Less accumulated depreciation	(6,336,051)	(9,342,216)
	11,197,842	11,325,844
Land	953,584	953,584
Construction in progress	-	594,701
Net Property, Plant and Equipment	12,151,426	12,874,129
Total Assets	\$ 20,427,797	\$ 18,024,094

See accompanying notes to financial statements.

SWLA CENTER FOR HEALTH SERVICES Lake Charles, Louisiana Statements of Financial Position (Continued) As of May 31, 2021 With Summarized Comparative Totals as of May 31, 2020

	 2021		2020
Liabilities and Net Assets			
Current Liabilities			
Accounts payable	\$ 322,060	\$	321,554
Accrued vacation and payroll	713,786		701,769
Payroll taxes payable	58,142		54,889
PPP loan payable	1,803,390		1,358,830
Capital lease obligation payable	20,049		19,440
Current portion of notes payable	 60,319		477,167
Total Current liabilities	 2,977,746		2,933,649
Long Term Liabilities			
Capital lease obligation payable - net of current portion	17,148		35,641
Notes payable - net of current portion	 1,349,852		945,020
Total Liabilities	 4,344,746		3,914,310
Net Assets			
Without donor restrictions	16,083,051		14,109,784
Total Net Assets	 16,083,051	. <u> </u>	14,109,784
Total Liabilities and Net Assets	 20,427,797		18,024,094

See accompanying notes to financial statements.

SWLA CENTER FOR HEALTH SERVICES Lake Charles, Louisiana Statements of Activities For the Year Ended May 31, 2021 With Summarized Comparative Totals for the Year Ended May 31, 2020

	2021	2020
Revenue and Support - Without Donor Restrictions		
Revenue:		
Gross patient service revenue	\$ 16,551,827	\$ 17,858,586
Less: contractual allowances and discounts	(5,806,533)	(6,140,287)
	10,745,294	11,718,299
Less: provision for uncollectible accounts	(625,394)	(925,345)
Net patient service revenue	10,119,900	10,792,954
340 B program income	352,713	284,569
Total Revenue	10,472,613	11,077,523
Support and other income:		
Grant awards	7,059,483	6,561,540
Contributions	61,047	919
Interest and dividend income	24,999	60,294
In-kind donations	251,284	309,502
Other income	2,960,627	962,097
Total Support	10,357,440	7,894,352
Total Revenue and Support - Unrestricted	20,830,053	18,971,875
Expenses		
Program services	9,208,596	10,895,239
General and administrative	8,163,411	8,000,701
Loss on impairment of fixed assets	1,484,779	
Total Expenses	18,856,786	18,895,940
Change in Net Assets - Without Donor Restrictions	1,973,267	75,935
Net Assets - Beginning of Year	14,109,784	14,033,849
Net Assets - End of Year	\$ 16,083,051	\$ 14,109,784

SWLA CENTER FOR HEALTH SERVICES Lake Charles, Louisiana Statements of Cash Flows For the Year Ended May 31, 2021 With Summarized Comparative Totals for the Year Ended May 31, 2020

	2021	2020
Cash Flows From Operating Activities		
Change in net assets	S 1,973,267	\$ 75,935
Adjustments to reconcile change in net assets to net cash		
provided by operating activities:		
Depreciation	697,781	599,371
Change in allowance for doubtful accounts	285,527	(40,610)
(Increase) decrease in accounts receivable	(1,118,137)	(445,078)
Other	-	(765,087)
(Increase) decrease in supplies inventory	31,580	(10,325)
(Increase) decrease in prepaid expenses	(394)	(26,931)
Increase (decrease) in accounts payable	516	(49,527)
Increase (decrease) in accrued vacation and payroll	15,270	(73,194)
Net Cash Provided (Used) by Operating Activities	1,885,410	(735,446)
Cash Flows From Investing Activities		
Loss on disposal of assets	1,484,779	-
Fixed asset acquisitions	(1,459,967)	(885,097)
Net Cash Provided (Used) by Investing Activities	24,812	(885,097)
Cash Flows From Financing Activities		
Proceeds from loans	37,362	500,913
Payments on capital lease obligation	(17,884)	(3,194)
Proceeds from PPP loans	444,560	1,358,830
Principal payments on loans	(49.278)	(32,019)
Net Cash Provided (Used) by Financing Activities	414,760	1,824,530
Net Increase (Decrease) in Cash and Cash Equivalents	2.324.982	203,987
Cash and Cash Equivalents - Beginning of Year	1,720,133	1,516,146
Cash and Cash Equivalents - End of Year	\$ 4.045,115	\$ 1,720,133
Supplemental Disclosure:		
Interest paid	\$ 86,880	\$ 52,171

SWLA CENTER FOR HEALTH SERVICES Lake Charles, Louisiana Schedule of Functional Expenses For the Year Ended May 31, 2021 With Summarized Comparative Totals for the Year Ended May 31, 2020

			S	upporting Services			
			G	eneral and	Т	otal	
	Prog	ram Services	Ad	ministrative	 2021		2020
Salaries	\$	6,463,604	\$	3,185,606	\$ 9,649,210	\$	10,612,315
Fringe benefits		663,941		553,765	1,217,706		1,362,920
Payroll taxes		460,942		251,324	712,266		785,391
Consultants and contractual							
services		455,459		1,620,203	2,075,662		2,299,623
Supplies		625,617		189,909	815,526		1,278,790
Dues and subscriptions/printing		-		44,094	44,094		38,787
Maintenance and repairs		49,577		769,743	819,320		212,676
Telephone		-		145,045	145,045		190,091
Postage		-		15,117	15,117		24,166
Insurance		-		158,115	158,115		118,792
Travel, seminars and education		45,739		43,178	88,917		185,348
Taxes and licenses		4,133		21,435	25,568		36,412
Utilities		-		153,503	153,503		215,410
Interest		-		86,880	86,880		52,171
Legal and professional		-		151,187	151,187		163,106
Rent		-		11,323	11,323		69,702
In-kind donations (vaccines)		251,284		-	251,284		309,502
Miscellaneous		44		49,101	49,145		192,563
Service charges		-		68,103	68,103		61,307
Vehicle expense		-		71,640	71,640		29,365
Recruitment cost		64,615			 64,615		58,132
Total expenses before depreciation		9,084,955		7,589,271	16,674,226		18,296,569
Depreciation and amortization		123,641		574,140	 697,781		599,371
Total expenses	\$	9,208,596	\$	8,163,411	\$ 17,372,007	\$	18,895,940

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

Nature of Activities

SWLA Center for Health Services (a nonprofit corporation) was incorporated May 1, 1978 to provide comprehensive health care to area residents, with particular emphasis on the socioeconomically disadvantaged. The Organization is a federally qualified health center (FQHC) and is principally funded under a grant from the Office of Public Health Services, a component of the U.S. Department of Health and Human Services (DHHS). The Board of Directors of SWLA Center for Health Services serve the Organization without paid compensation.

Income Taxes

The Organization is exempt from federal income taxes under Section 501 (c) (3) of the Internal Revenue Code. Accordingly, no provision for federal and state income taxes is included in the financial statements. The Organization's Form 990, *Return of Organization Exempt from Income Tax*, is subject to examination by the IRS, generally for three years after they are filed.

Method of Accounting

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

Accounting 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 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.

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:

	Years
Building	30
Equipment, furniture and fixtures	3 - 20
Vehicles	5

NOTE 1 - <u>NATURE OF ACTIVITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES</u> (CONTINUED)

Basis of Presentation

Financial statement presentation follows the recommendations of the FASB ASU 2016-14, <u>Financial Statements of Not-for-Profit Entities</u>. Under FASB ASU 2016-14, the Agency is required to report information regarding its financial position and activities according to two classes of net assets: with donor restrictions and without donor restrictions. Net assets without donor restrictions include amounts that are not subject to usage restrictions on donor-imposed requirements. This class also includes assets previously restricted where restrictions have expired or been met. Net assets with donor restrictions include assets subject to usage limitations based on donor-imposed or grantor restrictions. These restrictions may be temporary or may be based on a particular use. Restrictions may be met by the passage of time or by actions of the Agency. Certain restrictions may need to be maintained in perpetuity.

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.

Inventory

Supply inventories are stated at lower of cost, determined by the FIFO method, or market.

NOTE 1 - <u>NATURE OF ACTIVITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES</u> (CONTINUED)

Net Patient Service Revenue

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

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

<u>Medicare A</u> – 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.

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

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

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

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 fiscal year in which the grants and contributions are recognized.

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 value of all financial instruments as of May 31, 2020, 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

NOTE 1 - <u>NATURE OF ACTIVITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES</u> (CONTINUED)

Fair Values of Financial Instruments (continued)

agency could realize in a current market exchange. The recorded values of cash and cash equivalents, certificate of deposits, accounts receivable, prepaid expenses, deposits, accounts payable, and accrued expenses approximate their fair values based on their short-term nature. The recorded values of notes payable 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. The Organization is deemed under the Federal Torts Claims Act for claims arising from malpractice and commercial insurance.

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.

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.

Performance Indicator

The Organization utilizes revenues over expenses as its performance indicator.

NOTE 2 - PATIENT ACCOUNTS RECEIVABLE

Patient accounts receivable are comprised of the following for the years ending May 31, 2021:

Less allowance for doubtful accounts	(3,367,586) \$ 3,664,153
	7,031,739
Private	3,364,789
Medicaid	2,200,105
Medicare	\$ 1,466,845

The Organization's allowance for doubtful accounts for all payor types was calculated using an estimate of uncollectible accounts receivable based on aging. The allowance for doubtful accounts percentages did not change from the prior year's calculation. The Organization's write-offs, which primarily consisted of self-pay charges, totaled \$625,394 for the fiscal year May 31, 2021. During the fiscal year, the Organization automatically updated the patient's sliding fee application for changes to the current Federal Poverty Level guidelines.

NOTE 3 - 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.

NOTE 4 - ACCRUED VACATION

The Organization allows employees to carry over unused vacation hours, with written permission from the executive director. The accrual is calculated based on the employee's pay rate at the end of the year. At May 31, 2021, accrued vacation totaled \$310,086.

NOTE 5 - ECONOMIC DEPENDENCY

The Organization receives a substantial portion of its total support and revenues from the federal government. During the year ended May 31, 2021, SWLA Center for Health Services recorded \$6,111,043 in grant support from the Department of Health and Human Services. This represents 33% of total support and revenues for the year ended May 31, 2021. These funds are provided to subsidize charity services provided by the Organization.

NOTE 6 - PRIOR YEAR BALANCES

Certain prior year amounts may have been reclassified to conform to current year presentation.

NOTE 7 - CONCENTRATIONS OF CREDIT RISK

The Organization maintains several bank accounts at various banks. Accounts at an institution are insured by the Federal Deposit Insurance Corporation (FDIC), based on balances and interest rate terms. Amounts held in financial institutions occasionally are in excess of Federal Deposit Insurance Corporation limits. The Organization deposits its cash with high quality financial institutions, and management believes the organization is not exposed to significant credit risk on those amounts.

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

	2021
Medicare	33 %
Medicaid	57
Other	10
	<u> 100 </u> %

The mix of net patient revenues was as follows:

	_2021
Medicare	16 %
Medicaid	74
Other	10
	100 %

NOTE 8 -FUNCTIONAL ALLOCATION OF EXPENSES

Expenses were allocated in the accompanying 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.

NOTE 9 -<u>CHARITY CARE</u>

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 fiscal year ending May 31, 2021 was \$1,647,531.

NOTE 10-<u>401(k) PLAN</u>

The Organization sponsors a 401 (k) Plan covering substantially all of its employees. The employees may elect to make contributions pursuant to a salary reduction agreement upon meeting eligibility requirements. The Organization made matching contributions of \$289,750 for the year ended May 31, 2021.

NOTE 11-<u>LEASES</u>

The Organization has entered into a lease agreement as lessee for financing the acquisition of telephone equipment. This lease agreement qualifies as a capital lease for accounting purposes and, therefore, has been recorded at the lower of the present value of the future minimum lease payments or the fair value of the assets. The capitalized cost of this asset is \$152,516. The Organization is depreciating the capital asset over its estimated productive life. The accumulated depreciation on the equipment under this capital lease obligation was \$21,606 at May 31, 2021.

The following is a schedule of the future minimum lease payments under this capital lease, and the present value of the net minimum lease payments at May 31, 2021:

Year ending May 31, 2022	\$20,844	
Year ending May 31, 2023		
	38,214	
Less amount representing interest	1,017	
Present value of minimum lease payments	<u>\$37,197</u>	

NOTE 12-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 May 31, 2020, from which the summarized information was derived.

NOTE 13-IN-KIND DONATIONS

In-kind donations of \$251,384, represent the cost value of vaccines provided to SWLA. The vaccines were administered to qualifying children by SWLA staff.

NOTE 14-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 15-CONSTRUCTION LOAN PAYABLE

The Organization has a line of credit dated November 29, 2017 for a total amount \$1,021,023 for the purpose of constructing facility in Crowley, Louisiana. As of May 31, 2021, \$945,641 was payable. Interest at date of closing is 4.5%.

The Organization has a line of credit dated January 17, 2020 for a total amount \$480,000 for the purpose of constructing facility in Oberlin, Louisiana. As of May 31, 2021, \$464,530 was payable. Interest at date of closing is 4.25%.

Loan maturities for each of the five years following May 31, 2021, are as follows:

2022	\$ 60,319
2023	934,837
2024	26,378
2025	<u>388,637</u>
2026	
Total	<u>\$ 1,410,171</u>

NOTE 16-SUBSEQUENT EVENT

The Organization evaluated its May 31, 2021 financial statements for subsequent events through the date of the independent auditor's report, the date the financial statements were available to be issued.

In August 2020, Hurricane Laura inflicted extensive damage to the Organization's Lake Charles, Louisiana facility. The Organization has incurred significant costs which are expected to be partially resulting from the damages totaling almost \$1.5 million. Restorative expenses incurred for fiscal year ending May 31, 2021 total approximately \$478,000.

Restorative efforts to the Lake Charles, Louisiana facility are ongoing as of May 31, 2021. The estimated cost to restore the facility could range from \$6 million to \$15 million, depending on the final facility design.

NOTE 16-SUBSEQUENT EVENT (CONTINUED)

The Organization has filed insurance claims and has approved insurance reimbursements of about \$1.9 million as of May 31, 2021. The Organization has undertaken efforts to obtain additional insurance reimbursements, and reached a final settlement with the insurance company in November 2021. The Organization agreed to additional insurance reimbursements of \$5.3 million, which resulted in total insurance reimbursements of \$7.2 million. The Organization incurred total legal and consulting fees of \$1.4 million to finalize the settlement with the insurance company. Net total insurance reimbursements after subtracting the legal and consulting fees approximate \$5.8 million.

NOTE 17 – QUANTITATIVE AND QUALITATIVE LIQUIDITY AND AVAILABILITY OF RESOURCES

The Organization has \$5,010,630 of financial assets available within one year of the statement of financial position date to meet general expenditures consisting substantially of cash totaling \$4,045,153, and receivables totaling \$3,943,223. None of the financial assets are subject to donor or other restrictions that make them unavailable for general expenditures within one year of the statement of financial position.

NOTE 18 - PROVIDER RELIEF FUNDS

The CARES Act established a Provider Relief Fund to be used for economic support of health care entities in connection with health-care-related expenses or lost revenues attributable to COVID-19 and treatment of uninsured COVID-19 patients. The Organization recognized \$451,807 in provider relief funds during FYE May 31, 2020.

NOTE 19 – <u>PATIENT SERVICE REVENUE</u>

Patient service revenue is reported at the amount the Organization expects to be paid for providing patient care. These amounts are due from patients and third-party payors (including health insurers and government programs) and include variable consideration for retroactive revenue adjustments due to the settlement of audits, reviews, and investigations. Generally, the Organization bills the patients and third-party payors soon after the services are performed.

Patient service revenue is recognized as performance obligations are satisfied based on the nature of the services provided by the Organization. Revenue for performance obligations that are satisfied over time is recognized based on actual charges incurred in relation to total expected or actual charges. The Organization believes that this method provides a faithful depiction of the transfer of services over the term of the performance obligations based on the inputs needed to satisfy the obligation. Generally, performance obligations satisfied over time relate to patients receiving inpatient services. The Organization measures the performance obligations for patient services over a period of less than one day when goods or services are provided and the Organization does not believe it is required to provide additional goods or services to the patient.

NOTE 19 – <u>PATIENT SERVICE REVENUE</u> (CONTINUED)

Because all its performance obligations relate to contracts with a duration of less than one year, the Organization has elected to apply the optional exemption provided in ASC 606. Under this exemption, the System is not required to disclose the aggregate amount of the transaction price allocated to performance obligations that are unsatisfied or partially unsatisfied at the end of the reporting period. Since the unsatisfied or partially unsatisfied performance obligations referred to above are primarily related to inpatient services at the end of the reporting period, the performance obligations for these contracts are generally completed within days or weeks of the end of the reporting period.

The Organization determines the transaction price based on standard charges for goods and services provided, reducedby contractual adjustments provided to third-party payors, discounts provided to uninsured patients in accordance with the Organization's policy, and other implicit price concessions provided to uninsured patients. The Organization determines its estimates of contractual adjustments and discounts based on contractual agreements, its discount policies, and its historical settlement experience. The Organization determines its estimate of implicit price concessions for uninsured patients based on its historical collection experience with this class of patients.

Agreements with third-party payors typically provide for payments at amounts less than established charges. A summary of the payment arrangements with major third-party payors follows:

- Medicare: Certain services are paid at prospectively determined rates based on clinical, diagnostic, and other factors. Certain services are paid based on cost-reimbursement methodologies (subject to certain limits) with final settlement determined after Medicare Administrative Contractors have audited annual cost reports submitted by the Organization. Services are paid based upon established fee schedulesbased on services provided.
- Medicaid: Reimbursements for Medicaid services are generally paid at prospectively determined ratesper discharge, per occasion of service, or per covered member.

NOTE 19 – <u>PATIENT SERVICE REVENUE</u> (CONTINUED)

• Other: Payment agreements with certain commercial insurance carriers, HMOs, and preferred providerorganizations provide for payment using prospectively determined rates.

The healthcare industry is subject to laws and regulations concerning government programs, including Medicare and Medicaid, which are complex and subject to varying interpretation. Compliance with such laws and regulations may also be subject to future government review and interpretation as well as significant regulatory action, including fines, penalties, and potential exclusion from the related programs. While the Organization operates a Compliance Program, which reviews its compliance with these laws and regulations, there can be no assurance that regulatory authorities will not challenge the Organization's compliance with these laws and regulations, and it isnot possible to determine the impact (if any) such claims or penalties would have upon the Organization. In addition, the contracts the Organization has with commercial payors also provide for retroactive audit and review of claims.

Settlements with third-party payors for retroactive adjustments due to audits, reviews, or investigations are considered variable consideration and are included in the determination of the estimated transaction price for providing patient care. These settlements are estimated based on the terms of the payment agreement with the payor, correspondence from the payor, and the Organization's historical settlement activity, including an assessment to ensure that it is probable that a significant reversal in the amount of cumulative revenue recognized will not occur when the uncertainty associated with the retroactive adjustment is subsequently resolved. Estimated settlements are adjusted in future periods as adjustments become known (that is, new information becomes available), or as years are settled or are no longer subject to such audits, reviews, and investigations.

Consistent with the Organization's mission, care is provided to patients regardless of their ability to pay. Therefore, the Organization has determined it has provided implicit price concessions to uninsured patients and patients with other uninsured balances (for example, copays and deductibles). For uninsured patients, the System applies a policy discount from standard charges to determine amounts billed to those patients. The implicit price concessions included in estimating the transaction price represent the difference between amounts billed to patients and the amounts the Organization expects to collect based on its collection history with that class of patients.

Subsequent changes to the estimate of the transaction price are generally recorded as adjustments to patient service revenue in the period of the change. Subsequent changes that are determined to be the result of an adverse change in the patient's ability to pay are recorded as bad debt expense.

SWLA CENTER FOR HEALTH SERVICES Lake Charles, Louisiana Schedule of Expenditures of Federal Awards Year Ended May 31, 2021

Program Title	CFDA <u>Number</u>	<u>Grant Number</u>	Program <u>Year</u>	Program <u>Receipts</u>	Program Expenses
U. S. Department of Health and Human Services					
Direct Programs:					
Community Health Center Section 330	93.224	H80CS00558	* 6/1/20 - 5/31/21	\$ 5,556,761	\$ 5,556,761
Coronavirus Supplemental funding for Health Centers COVID-19	93.224	H80CS00558	* 6/1/20 - 5/31/21	435,656	435,656
Capital Assistance for Hurricane Response CARES	93.224	C13CS31956	9/1/2018 - 8/31/20	118,626	118,626
Provider Relief Funds	93.498			451.807	451,807
Total U. S. Department of Health and Human Services				6,562,850	6,562,850
Federal Communications Commissior COVID-19 Telehealth Program	32.006		6/1/20 - 5/31/21	793,274	793,274
U. S. Department of Agriculture Passed through: Louisiana Department of					
Health and Hospitals: Office of Public Health	10.572		10/1/20 - 9/30/21	58,710	58,710
Total federal assistance				\$ 7,414,834	\$ 7,414,834

* Denotes major program

Basis of Presentation

The accompanying schedule of expenditures of federal awards includes the federal grant activity of SWLA Center for Health Service: and is presented on the accrual basis of accounting. The information on this schedule is presented in accordance with the requirement contained by Title 2 of *U.S. Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Certain costs have been allocated to the federal program in accordance witl OMB Circular A-122. Cost Principles of Non-Profit Organizations. The amounts presented in this schedule do not differ from the amounts presented in, or used in the preparation of the financial statements

The Organization has elected not to use the 10 percentde minimis indirect cost rate as allowed under the Uniform Guidance

STEVEN M. DEROUEN & ASSOCIATES, LLC

Certified Public Accountants

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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 SWLA Center for Health Services Lake Charles, 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 SWLA Center for Health Services (a nonprofit organization), which comprise the statement of financial position as of May 31, 2021, and the related 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 November 26, 2021.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered SWLA Center for Health Services' 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 SWLA Center for Health Services' internal control. Accordingly, we do not express an opinion on the effectiveness of SWLA Center for Health Services' internal control.

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

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any

deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether SWLA Center for Health Services' financial statements are free of material misstatement, we 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, we do not express such an opinion. The results of our test 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 oour 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 November 26, 2021

STEVEN M. DEROUEN & ASSOCIATES, LLC

Certified Public Accountants

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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

Board of Directors SWLA Center for Health Services Lake Charles, Louisiana

Report on Compliance for Each Major Federal Program

We have audited SWLA Center for Health Services' compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of SWLA Center for Health Services' major federal programs for the year ended May 31, 2021. SWLA Center for Health Services' 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

Our responsibility is to express an opinion on compliance for each of SWLA Center for Health Services' major federal programs based on my audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Those standards and the Uniform Guidance require that we 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 SWLA Center for Health Service's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of SWLA Center for Health Services' compliance.

Opinion on Each Major Federal Program

In our opinion, SWLA Center for Health Services 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 May 31, 2021.

Report on Internal Control Over Compliance

Management of SWLA Center for Health Services 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 SWLA Center for Health Services' 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, we do not express an opinion on the effectiveness of SWLA Center for Health Services' 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 that a type of compliance with a type of compliance control over compliance with a type of compliance is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the 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.

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Steven M. DeRouen & Associates
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Lake Charles, Louisiana November 26, 2021

SWLA CENTER FOR HEALTH SERVICES

Schedule of Findings and Questioned Costs Year Ended May 31, 2021

SECTION I – SUMMARY OF AUDITORS' RESULTS

be material weakr	financial reporting: ses identified? encies identified not considered to	9Y	es <u>X</u> es <u>X</u> es <u>X</u>	None reported	Unmodified
be material weakr Type of auditor's rep for major program Any audit findings d	ses identified? encies identified not considered to nesses? port issued on compliance	9 Ye	es <u>X</u> es <u>X</u>	No	Unmodified
Identification of major programs:CFDA NumberName of Federal Program or Cluster93.224US Department of Health and Human Services, Community Health Center Section 330					
Dollar threshold used to Type A and Type B		<u>\$750,(</u>	<u>)00</u>		
Auditee qualified as lov	v-risk auditee?	<u>X</u> Y	es	No	

SWLA CENTER FOR HEALTH SERVICES

Schedule of Findings and Questioned Costs Year Ended May 31, 2021

SECTION II - FINDINGS

None

SECTION III – Prior Year Findings and Questioned Costs

None

SWLA Center for Health Services, Inc.

Schedule of Compensation, Benefits and Other Payments to Chief Executive Officer

May 31, 2021

Agency Head Name: William Brent III, Chief Executive Officer

NO COMPENSATION PAID FROM PUBLIC FUNDS

Purpose	Amount
Salary	\$0.00
Benefits-health insurance	0.00
Benefits-retirement	0.00
Benefits-Life, ADD, LTD	0.00
Car allowance	0.00
Vehicle provided by government	0.00
Per diem	0.00
Reimbursements – Auto Mileage Reimb	0.00
Travel	0.00
Registration fees	0.00
Conference travel	0.00
Continuing professional education fees	0.00
Housing	0.00
Unvouchered expenses	0.00
Special meals	0.00