

FINANCIAL STATEMENTS

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1

d/b/a LADY OF THE SEA GENERAL HOSPITAL

JUNE 30, 2025 AND 2024



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FINANCIAL STATEMENTS

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1

d/b/a LADY OF THE SEA GENERAL HOSPITAL

JUNE 30, 2025 AND 2024

TABLE OF CONTENTS

	<u>PAGE</u>
Independent Auditor's Report	1 - 2
Basic Financial Statements:	
Statement of Net Position	3 - 4
Statement of Revenues, Expenses, and Changes in Net Position	5
Statement of Cash Flows	6 - 7
Notes to the Financial Statements	8 - 22
Supplemental Information:	
Patient Service Revenues	23
Other Operating Revenues	24
Salaries by Department	25
Employee Benefits	26
Purchased Service by Department	27
Supplies and Other Expenses by Department	28
Governing Board Expenses	29
Compensation, Benefits and Other Payments to Chief Executive Officer	30
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	31 - 32
Schedule of Findings and Questioned Costs and Management's Corrective Action Plan	33 - 34
Schedule of Prior Year Findings	35



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INDEPENDENT AUDITOR'S REPORT

To the Chairman and Board of Commissioners
Lafourche Parish Hospital Service District No. 1
d/b/a Lady of the Sea General Hospital
Galliano, Louisiana

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of Lafourche Parish Hospital Service District No. 1, State of Louisiana, Parish of Lafourche, d/b/a Lady of the Sea General Hospital a component unit of the Lafourche Parish Council (Hospital), as of and for the years ended June 30, 2025 and 2024, and the related notes to the financial statements, which collectively comprise Hospital's basic financial statements as listed in the table of contents.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Hospital, as of June 30, 2025, and the respective changes in financial position and its cash flows thereof for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

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

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

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

Required Supplementary Information

Management has omitted Management's Discussion and Analysis that accounting principles generally accepted in the United States of America require to be presented to supplement the basic financial statements. Such missing information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. Our opinion on the basic financial statements is not affected by this missing information.

Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. The schedules identified in the table of contents as supplemental information are presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the basic financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the basic financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with Government Auditing Standards, we have also issued our report dated December 2, 2025 on our consideration of the Hospital's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is solely to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Hospital's internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the Hospital's internal control over financial reporting and compliance.



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

December 2, 2025

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

STATEMENT OF NET POSITION

JUNE 30,

	<u>ASSETS</u>	
	<u>2025</u>	<u>2024</u>
CURRENT ASSETS:		
Cash and Cash Equivalents	\$ 10,276,367	\$ 2,189,691
Investments	12,175,359	30,015,255
Accounts Receivable, Net of Allowance for doubtful accounts of \$2,332,635 in 2025 and \$1,779,915 in 2024, respectively	2,723,993	1,543,043
Due from Third Party Payors	4,039,780	3,755,711
Inventories	1,071,299	969,460
Prepaid Expenses	761,734	1,194,934
Total Current Assets	<u>31,048,532</u>	<u>39,668,094</u>
ASSETS WHOSE USE IS LIMITED:		
By Board	15,366,369	15,366,369
By Bond for Indenture Reserves - Debt Service Funds	1,471,022	1,069,732
Total Assets Whose Use is Limited	<u>16,837,391</u>	<u>16,436,101</u>
PROPERTY, PLANT, AND EQUIPMENT:		
Property, Plant, and Equipment, Net of Accumulated Depreciation	<u>75,446,080</u>	<u>35,992,351</u>
OTHER ASSETS:		
Other Receivables, Net of Estimated Uncollectibles of \$25,000 in 2025 and 2024, respectively	16,711,932	9,836,877
Other Assets	214,659	214,659
Total Other Assets	<u>16,926,591</u>	<u>10,051,536</u>
TOTAL ASSETS	<u>\$ 140,258,594</u>	<u>\$ 102,148,082</u>

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

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

STATEMENT OF NET POSITION

JUNE 30,

<u>LIABILITIES AND NET POSITION</u>	<u>2025</u>	<u>2024</u>
CURRENT LIABILITIES		
Current Portion of Long-Term Debt	\$ 1,712,420	\$ 1,733,547
Credit Balances	159,447	149,985
Accounts Payable	4,362,209	3,119,682
Accrued Salaries, Benefits and Related Withholdings	1,446,554	1,277,223
Due to Third Party Payors	150,113	111,364
Interest Payable	157,140	174,409
Accrued Self-Insurance	55,516	68,858
Total Current Liabilities	8,043,399	6,635,068
 LONG-TERM LIABILITIES:		
Capital Lease Obligations	-	329,966
General Obligation Bonds - Series 2013	495,000	730,000
General Obligation Bonds - Series 2022	12,140,000	13,600,000
Total Long-Term Liabilities	12,635,000	14,659,966
TOTAL LIABILITIES	20,678,399	21,295,034
 NET POSITION		
Invested in Capital Assets, Net of Related Debt	61,098,660	19,598,838
Restricted Net Position (Expendable)	1,471,022	1,069,732
Unrestricted Net Position	57,010,513	60,184,478
TOTAL NET POSITION	119,580,195	80,853,048
TOTAL LIABILITIES AND NET POSITION	\$ 140,258,594	\$ 102,148,082

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

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION FOR THE YEARS ENDED JUNE 30,

	2025	2024
OPERATING REVENUES:		
Net Patient Service Revenues Before Provision for Doubtful Accounts	\$ 26,432,433	\$ 22,381,853
Provision for Doubtful Accounts	(2,219,270)	(1,035,520)
Net Patient Service Revenues After Provision for Doubtful Accounts	24,213,163	21,346,333
340B Outside Pharmacy Revenue	1,282,355	766,131
Net Community Pharmacy Revenue	10,330,395	9,446,543
Intergovernmental Revenue-Operating	2,799,399	3,387,589
Other Operating Revenue	77,709	122,585
Total Operating Revenues	38,703,021	35,069,181
OPERATING EXPENSES:		
Salaries	16,992,036	15,250,598
Employee Benefits	4,083,938	3,232,450
Purchased Services	4,243,590	3,657,692
Supplies and Other	14,694,624	14,722,772
Depreciation and Amortization	2,456,371	1,207,024
Total Operating Expenses	42,470,559	38,070,536
LOSS FROM OPERATIONS	(3,767,538)	(3,001,355)
NON-OPERATING REVENUES (EXPENSES):		
Income on Investments Whose Use is Limited:		
Indenture Agreement and Board for Indenture Reserves	1,133	3,898
Grant Income	478,250	1,442,648
Interest Income	1,835,147	2,368,612
Interest Expense	(637,284)	(697,901)
Taxes:		
Bond - Restricted to Bond Retirement Fund	273,675	273,876
Maintenance	1,319,311	1,177,794
Insurance/FEMA Proceeds, net of disposed assets	39,575,542	28,707,031
Hurricane Ida expense	(351,089)	(274,507)
TOTAL NON-OPERATING REVENUES (EXPENSES)	42,494,685	33,001,451
CHANGE IN NET POSITION	38,727,147	30,000,096
TOTAL NET POSITION, BEGINNING	80,853,048	50,852,952
TOTAL NET POSITION, ENDING	\$ 119,580,195	\$ 80,853,048

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

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

STATEMENT OF CASH FLOWS

FOR THE YEARS ENDED JUNE 30,

	2025	2024
CASH FLOWS FROM OPERATING ACTIVITIES:		
Receipts from and on behalf of patients	\$ 17,080,278	\$ 11,749,837
Receipts from 340B Program - Outside Pharmacy	1,043,696	739,337
Receipts from Intergovernmental Grant Agreement	2,189,664	3,268,430
Receipts from Community Pharmacies	10,223,058	9,443,803
Receipts from Other Operating Sources	77,709	122,585
Payments to Suppliers	(17,695,687)	(17,036,324)
Payments to Employees for Salaries, Benefits and Related Costs	<u>(20,791,871)</u>	<u>(16,426,725)</u>
Net Cash Flow (Used in) Operating Activities	<u>(7,873,153)</u>	<u>(8,139,057)</u>
CASH FLOWS FROM NON-CAPITAL FINANCING ACTIVITIES:		
Ad Valorem Taxes - Debt Service	273,459	273,876
Ad Valorem Taxes - Maintenance	1,318,271	1,177,794
Insurance Proceeds, Net of related Hurricane expenses	<u>39,306,516</u>	<u>13,898,405</u>
Net Cash Provided by Non-Capital Financing Activities	<u>40,898,246</u>	<u>15,350,075</u>
CASH FLOWS FROM CAPITAL AND RELATED FINANCING ACTIVITIES:		
Proceeds from Grant Revenue	478,250	1,442,648
Interest Paid on Long-Term Debt	(654,553)	(695,346)
Proceeds from the Issuance of Long-Term Debt	-	372,820
Repayment of Long-Term Debt	<u>(1,677,981)</u>	<u>(282,712)</u>
Net Cash (Used in) Provided by Capital and Related Financing Activities	<u>(1,854,284)</u>	<u>837,410</u>
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchases of Capital Assets	(42,353,319)	(16,621,294)
Proceeds from Sale of Investments	30,800,000	3,870,000
Purchase of Investments	(11,200,700)	(5,000,360)
Interest Income	<u>71,176</u>	<u>2,372,510</u>
Net Cash (Used in) Investing Activities	<u>(22,682,843)</u>	<u>(15,379,144)</u>
NET INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	8,487,966	(7,330,716)
CASH AND CASH EQUIVALENTS AT BEGINNING OF YEAR, INCLUDING \$1,069,732 AND \$350,292, LIMITED TO USE FOR 2025 AND 2024, RESPECTIVELY	<u>3,259,423</u>	<u>10,590,139</u>
CASH AND CASH EQUIVALENTS AT END OF YEAR, INCLUDING \$1,471,022 AND \$1,069,732, LIMITED TO USE FOR 2025 AND 2024, RESPECTIVELY	<u>\$ 11,747,389</u>	<u>\$ 3,259,423</u>

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

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

STATEMENT OF CASH FLOWS

FOR THE YEARS ENDED JUNE 30,

	2025	2024
CASH FLOWS FROM OPERATING ACTIVITIES:		
Operating Loss	\$ (3,767,538)	\$ (3,001,355)
Adjustments to Reconcile Operating Loss to Net Cash		
Used in Operating Activities		
Depreciation and Amortization	2,456,371	1,207,024
Provision for Doubtful Accounts	2,219,270	1,035,520
Increase in Accounts Receivable	(3,390,758)	(1,202,756)
Increase (Decrease) in Due to/from Third Party Payors	(245,320)	280,445
Increase in Other Receivables	(6,875,055)	(7,781,987)
Decrease (Increase) in Inventories and Prepaids	331,361	(461,729)
Increase in Accounts Payable and Accrued Expenses	1,411,858	1,789,027
Decrease in Other Current Liabilities	(13,342)	(3,246)
Net Cash Provided by (Used in) Operating Activities	\$ (7,873,153)	\$ (8,139,057)

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

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

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

Reporting Entity. Lafourche Parish Hospital Service District No. 1, State of Louisiana, d/b/a Lady of the Sea General Hospital, a component unit of the Lafourche Parish Council (Hospital) is an acute care facility created pursuant to Louisiana Revised Statutes of 1950, Title 46, Chapter 10, and Ordinance No. 863 of Lafourche Parish Council adopted January 27, 1953. It is the Hospital's mission to provide its community with high quality care and education in a friendly, caring and professional manner.

The administration of the Hospital is governed by a Board of Commissioners consisting of five members appointed by the Lafourche Parish Council in accordance with the terms of office set forth in Louisiana Revised Statute 46:1053 and in Section 24:300 (C) of Sub-Chapter "G" of the Code of Ordinance of the Lafourche Parish Council.

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

GASB Codification Sections 2100, 2600, and J50 (formerly GASB 14) established criteria for determining which component units should be considered part of the reporting entity for financial reporting purposes. The basic criterion for including a potential component unit within the reporting entity is financial accountability. The GASB has set forth criteria to be considered in determining financial accountability. These criteria include:

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

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

Accounting Standards. The financial statements of the Hospital have been prepared in conformity with Generally Accepted Accounting Principles (GAAP) as applied to governmental units. The Governmental Accounting Standards Board (GASB) is the accepted standard setting body for establishing governmental accounting and financial reporting principles.

Proprietary Fund Accounting. The Hospital utilizes the proprietary fund method of accounting and follows guidance in GASB Codification Section P80. Revenues and expenses are recognized on the accrual basis using the economic resources measurement focus. Substantially all revenues and expenses are subject to accrual. The basic financial statements include Statement of Net Position, Statement of Revenues, Expenses, and Changes in Net Position, and Statement of Cash Flows.

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 1 - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, CONT

Cash and Cash Equivalents. Cash and cash equivalents include investments in highly liquid debt instruments with a maturity of three months or less, excluding amounts whose use is limited by board designation, other arrangements under trust agreements, or with third-party payors.

Assets Whose Use is Limited. Assets whose use is limited include assets set aside by the Board of Commissioners for future capital improvements and future indenture agreements, over which the Board retains control and may at its discretion subsequently use for other purposes; assets set aside in accordance with agreements with third-party payors; and assets held by trustees under indenture agreements and self-insurance trust agreements.

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

Capital Assets. Capital assets are carried at cost or, if donated, at fair value at date of donation. Capital Assets are defined by the Hospital as assets with an initial individual cost of more than \$5,000 and an initial useful life of three years or greater. Depreciation is computed by the straight-line method over the assets' estimated useful lives generally ranging from 3 to 40 years. Equipment under lease is stated at the sum of the initial measurement of the lease liability plus any payments made to the lessor at or before the commencement of the lease term plus initial direct cost necessary to place the lease asset in service. Leased equipment is amortized on the straight-line method over the shorter of the lease term or estimated useful lives of the assets. Subscription-based information technology arrangement is stated at the sum of the initial measurement of the subscription liability plus any payments made to the lessor at or before the commencement of the subscription term plus initial direct cost necessary to place the subscription asset in service. Subscription-based information technology arrangements are amortized on the straight-line method over the shorter of the subscription term or estimated useful lives of the assets.

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

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

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

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

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

Costs of Borrowing. Interest cost incurred on borrowed funds during the period of construction of capital assets is capitalized as a component of the cost of acquiring those assets. Interest earned on these borrowed funds, before the funds are spent on the construction of the capital assets, is also capitalized.

Investments. Investments, including assets limited as to use, are recorded at fair value in accordance with GASB Codification Section I50.105, *Accounting and Financial Reporting for Investments*. Investments in equity securities with readily determinable fair values and all investments in debt securities, including those classified as assets limited as to use, are

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 1 - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, CONT

measured at fair value in the Statement of Net Position. Securities traded on a national or international exchange are valued at the last reported sales price at current exchange rates. Investment income, including realized gains and losses on investments, interest and dividends, and changes in unrealized gains and losses are included in non-operating income. Investments in associated companies are accounted for by the equity method of accounting under which the Hospital's

share of the net income of the associated companies is recognized as income in the Hospital's statement of activities and added to the investment account. Dividends and distributions received from the associated companies are treated as a reduction of the investment account.

Use of Estimates. The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Accordingly, actual results could differ from those estimates. See the disclosure regarding Net Patient Service Revenue below for further discussion of significant estimates involving the revenue recognition methods of the Hospital.

Net Patient Service Revenue and Related Receivables. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods, as final settlements are determined. The Hospital provides care to patients even though they may lack adequate insurance or may be covered under contractual arrangements that do not pay full charges. As a result, the Hospital is exposed to certain credit risks. The Hospital manages such risk by regularly reviewing its accounts and contracts, and by providing appropriate allowances.

Patient receivables are carried at original charge amount less an estimate made for doubtful receivables based on a review of all outstanding amounts on a timely basis. Management estimates the allowance for doubtful accounts by identifying troubled accounts and by using historical experience applied to an aging of accounts. Patient receivables are written off when deemed uncollectible. Recoveries of patient receivables previously written off are recorded when received.

Non-Direct Response Advertising. The Hospital expenses advertising costs as incurred.

Compensated Absences. Employees of the Hospital are entitled to paid time off depending on their length of service and other factors. Accrued compensated absences included as a component of accrued salaries, benefits and related withholdings on the Hospital's Statement of Net Position for June 30, 2025 and 2024, was \$668,544 and \$571,297, respectively.

Grants and Contributions. From time to time, the Hospital receives grants and contributions from individuals or private and public organizations. Revenues from grants and contributions (including contributions of capital assets) are recognized when all the eligibility requirements, including time requirements, are met. Grants and contributions may be restricted for either specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as non-operating revenues. Amounts restricted to capital acquisitions are reported after non-operating revenues and expenses.

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

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 1 - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, CONT

Ad Valorem Taxes. Property taxes were levied on January 1, on property values assessed on that date. Notices of tax liability are mailed on or about November 1, of the same year and are due and payable at that time. All unpaid taxes levied become delinquent January 1, of the following year. Property tax revenues are recognized in the same fiscal year within which they are billed because they are considered "available" in that period. "Available" includes those property tax receivables expected to be collected within sixty days after year end.

Property taxes are collected through the local sheriff and remitted, net of collection fees, to the Hospital. The sheriff's office is responsible for collection, including establishing lien, levy and due dates of property taxes.

Income Taxes. The Hospital is a political subdivision and exempt from taxes. The hospital is required to file Form 990-T for the retail pharmacies.

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

Reclassifications. To be consistent with current year classifications, some items from the previous year have been reclassified with no effect on net position.

NOTE 2 - MAJOR SOURCE OF REVENUE

The Hospital participated in the Medicare and Medicaid programs as a provider of medical services to program beneficiaries. The Hospital derived approximately 36% and 41% of its gross patient service revenue for June 30, 2025 and 2024, respectively, from patients covered by the Medicare and Medicaid programs.

NOTE 3 - ACCOUNTS RECEIVABLE - PATIENTS

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

Patients Accounts Receivable consists of the following:

	<u>2025</u>	<u>2024</u>
Total Patients Accounts Receivable	\$ 7,005,723	\$ 5,059,788
Less: Allowances for Doubtful Accounts and Contractual Allowances	<u>4,281,730</u>	<u>3,516,745</u>
Net Patient Accounts Receivable	<u>\$ 2,723,993</u>	<u>\$ 1,543,043</u>

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 4 - NET PATIENT SERVICE REVENUE

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from established rates. Payment arrangements include prospectively determined rates-per-discharge, reimbursed costs, discounted charges and per diem payments. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in a future period as final settlements are determined.

The primary third-party programs include Medicare and Medicaid, which account for a significant amount of the Hospital's revenue. The laws and regulations under which Medicare and Medicaid programs operate are complex, and subject to interpretation and frequent changes. As part of operating under these programs, there is a possibility that government authorities may review the Hospital's compliance with these laws and regulations. Such review may result in adjustments to program reimbursement previously received and subject the Hospital to fines and penalties. Although no assurance can be given, management believes it has complied with the requirements of these programs.

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

Medicare. The Hospital is paid for inpatient and outpatient services rendered to Medicare program beneficiaries under cost-based reimbursement methodology. These rates vary according to a patient classification system that is based on clinical, diagnostic, and other factors. The retrospectively determined classification of patients and the appropriateness of the patients' admissions are subject to validation reviews by a Medicare peer review organization, which is under contract with the Hospital to perform such reviews. The Hospital files a year end cost report with Medicare to determine final settlement. This cost report is subject to audit by the Medicare fiscal intermediary.

The Hospital's Medicare cost reports have been settled by the Medicare fiscal intermediary through June 30, 2021.

Medicaid. Inpatient care services rendered to Medicaid program beneficiaries are paid at prospectively determined rates per day. Certain outpatient services rendered to Medicaid program beneficiaries are reimbursed under a cost reimbursement methodology. The Hospital is reimbursed at a tentative rate with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicaid fiscal intermediary. The Hospital's Medicaid cost reports have been settled by the Medicaid fiscal intermediary through June 30, 2016. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods, as settlements are determined.

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

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

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 4 - NET PATIENT SERVICE REVENUE, CONT

For uninsured patients that do not qualify for charity care, the Hospital recognizes revenue based on its standard rates for services provided. Based on historical experience, a significant portion of the Hospital's uninsured patients will be unable or unwilling to pay for the services provided. Thus, the Hospital records a significant provision for bad debts related to uninsured patients in the period the services are provided. Patient service revenue, net of contractual allowances and discounts, recognized in the period from these major sources, is as follows.

Net Patient Service Revenue by Payor before Provision for Doubtful Accounts:

	2025	2024
Medicare	\$ 2,209,022	\$ 1,527,692
Medicaid	8,618,671	9,160,950
All Other Payors	15,604,740	11,693,211
Total Net Patient Service Revenue Before Provision for Doubtful Accounts	\$ 26,432,433	\$ 22,381,853

The following schedule represents total Net Patient Service Revenue:

	2025	2024
Gross Patient Service Revenue	\$ 51,546,684	\$ 42,034,648
Less: Contractual Adjustments	25,114,251	19,652,795
Net Patient Service Revenue Before Provision for Doubtful Accounts	26,432,433	22,381,853
Provision for Doubtful Accounts	2,219,270	1,035,520
Net Patient Service Revenue After Provision for Doubtful Accounts	\$ 24,213,163	\$ 21,346,333

NOTE 5 - PROPERTY, PLANT, AND EQUIPMENT

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

	June 30, 2025				
	Asset Life in Years	Beginning Balance	Additions	Deletions	Ending Balance
Land Improvements	10 - 20	\$ 507,149	\$ -	\$ -	\$ 507,149
Building	10 - 20	26,346,222	557,140	223,200	26,680,162
Major Movable Equipment	5 - 20	5,350,324	228,875	43,750	5,535,449
Right of Use Assets		821,624	-	372,819	448,805
Software Subscriptions		92,566	-	-	92,566
Intangible Assets		1,460,433	-	-	1,460,433
Total Cost		34,578,318	786,015	639,769	34,724,564
Less: Accumulated Depreciation		8,121,667	2,362,387	148,969	10,335,085
Less: Accumulated Depreciation-ROU Asset		331,093	93,984	12,428	412,649
Less: Accumulated Amortization-Subscription Software		92,566	-	-	92,566
Gross Accumulated Depreciation		8,545,326	2,456,371	161,397	10,840,301
Depreciable Capital Assets, Net		26,032,992	(1,670,356)	478,372	23,884,263
Land		566,374	-	-	566,374
Construction in Progress		9,392,985	41,602,458	-	50,995,443
Net Property, Plant, and Equipment		\$ 35,992,351	\$ 39,932,102	\$ 478,372	\$ 75,446,080

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 5 - PROPERTY, PLANT, AND EQUIPMENT, CONT

Asset	Life in Years	June 30, 2024			Ending Balance
		Beginning Balance	Additions	Deletions	
Land Improvements	10 - 20	\$ 226,650	\$ 280,499	\$ -	\$ 507,149
Building	10 - 20	16,820,419	17,301,086	7,775,283	26,346,222
Major Movable Equipment	5 - 20	2,980,149	2,380,655	10,480	5,350,324
Right of Use Assets		448,804	372,820	-	821,624
Software Subscriptions		92,566	-	-	92,566
Intangible Assets		1,460,433	-	-	1,460,433
Total Cost		22,029,021	20,335,060	7,785,763	34,578,318
Less: Accumulated Depreciation		13,448,114	1,111,049	6,437,496	8,121,667
Less: Accumulated Depreciation-ROU Asset		235,118	95,975	-	331,093
Less: Accumulated Amortization-Subscription Software		92,566	-	-	92,566
Gross Accumulated Depreciation		13,775,798	1,207,024	6,437,496	8,545,326
Depreciable Capital Assets, Net		8,253,223	19,128,036	1,348,267	26,032,992
Land		566,374	-	-	566,374
Construction in Progress		11,758,433	16,470,578	18,836,026	9,392,985
Net Property, Plant, and Equipment		\$ 20,578,030	\$ 35,598,614	\$ 20,184,293	\$ 35,992,351

Depreciation expense for the fiscal years ended June 30, 2025 and 2024 was \$2,456,371 and \$1,207,024, respectively.

On August 29, 2021, Hurricane Ida made landfall on the Louisiana Gulf Coast. The storm severely impacted the southeast Louisiana region, and the Hospital suffered significant damage from the storm. At the present time, the total loss to the Service District and the amount of reimbursement is unknown.

As of the balance sheet date, the Hospital is in the process of building a new hospital in its place. The estimated completion of this project is December 2025.

The Hospital has recognized \$39,657,605 and \$30,044,159 in FEMA and insurance proceeds for the years ending June 30, 2025 and 2024, respectively.

NOTE 6 - LONG-TERM DEBT

Long-term debt at June 30, 2025 and 2024 consisted of the following:

	2025	2024
General Obligation Bonds dated October 3, 2013, original amount of \$3,000,000 bearing interest of 3.38%, maturing serially on March 1, of each year beginning in 2014, with interest payable March 1, and September 1, of each year beginning in 2014, with the final maturity on March 1, 2028. The bonds are collateralized by the Hospital's ad valorem tax revenues.	\$ 730,000	\$ 955,000
Hurricane Recovery Revenue Bond, Series 2022, Dated October 27, 2022, Interest Rate 4.30% per annum, Interest Payable each April and October, Maturing October 1, 2032	13,600,000	15,000,000
Right of Use Obligation, Konica Minolta Bizhub 4752, payable in 60 monthly installments at a 1.58% interest rate, maturity in 2025	17,420	69,124

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 6 - LONG-TERM DEBT, CONT

Right of Use Obligation, Pitney Bowes, payable in 60 monthly installments at a 1.47% interest rate, maturity in 2024	-	1,275
Right of Use Obligation, GE Healthcare, payable in 60 monthly installments at a 3.62% interest rate, maturity in 2029	-	368,114
Total Debt	14,347,420	16,393,513
Less: Current Portion	1,712,420	1,733,547
Long-Term Debt	<u>\$ 12,635,000</u>	<u>\$ 14,659,966</u>

Scheduled repayments on long-term debt are as follows:

June 30, 2025

	<u>Principal</u>	<u>Interest</u>	<u>Total</u>
2026	\$ 1,712,420	\$ 575,493	\$ 2,287,913
2027	1,770,000	503,204	2,273,204
2028	1,840,000	427,893	2,267,893
2029	1,655,000	352,493	2,007,493
2030	1,730,000	279,715	2,009,715
2031 - 2035	5,640,000	370,660	6,010,660
Total	<u>\$ 14,347,420</u>	<u>\$ 2,509,458</u>	<u>\$ 16,856,878</u>

June 30, 2024

	<u>Principal</u>	<u>Interest</u>	<u>Total</u>
2025	\$ 1,733,547	\$ 667,447	\$ 2,400,994
2026	1,783,504	590,041	2,373,545
2027	1,844,367	509,403	2,353,770
2028	1,922,858	424,903	2,347,761
2029	1,739,237	340,172	2,079,409
2030 - 2034	7,370,000	571,148	7,941,148
Total	<u>\$ 16,393,513</u>	<u>\$ 3,103,114</u>	<u>\$ 19,496,627</u>

A summary of debt activity for the year ended is as follows:

June 30, 2025

	<u>Beginning</u>	<u>Additions</u>	<u>Reductions</u>	<u>Ending</u>	<u>Due Within One Year</u>
General Obligation Bonds, Series 2013	\$ 955,000	\$ -	\$ 225,000	\$ 730,000	\$ 235,000
Hurricane Recovery Bond Series 2022	15,000,000	-	1,400,000	13,600,000	1,460,000
Lease Obligations	438,513	-	421,093	17,420	17,420
Total	<u>16,393,513</u>	<u>-</u>	<u>2,046,093</u>	<u>14,347,420</u>	<u>1,712,420</u>

June 30, 2024

	<u>Beginning</u>	<u>Additions</u>	<u>Reductions</u>	<u>Ending</u>	<u>Due Within One Year</u>
General Obligation Bonds, Series 2013	\$ 1,175,000	\$ -	\$ 220,000	\$ 955,000	\$ 225,000
Hurricane Recovery Bond Series 2022	15,000,000	-	-	15,000,000	1,400,000
Lease Obligations	129,213	372,820	63,520	438,513	108,547
Total	<u>16,304,213</u>	<u>372,820</u>	<u>283,520</u>	<u>16,393,513</u>	<u>1,733,547</u>

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 7 - CONCENTRATIONS OF CREDIT RISK

The Hospital grants credit without collateral to its patients, most of whom are locals and are insured under third-party payor agreements. The mix of gross receivables from patients and third-party payors at June 30, 2025 and 2024 are as follows:

	2025	2024
Medicare	8%	7%
Medicaid	19%	22%
Commercial and other third-party payors	45%	42%
All others	28%	29%
Total	100%	100%

NOTE 8 - CASH FLOWS SUPPLEMENTAL INFORMATION

Cash and cash equivalents as of June 30, 2025 and 2024, respectively, consist of the following:

	2025	2024
Cash and Cash Equivalents	\$ 10,276,367	\$ 2,189,691
Assets Limited to Use By Bond	1,471,022	1,069,732
Total	\$ 11,747,389	\$ 3,259,423

Total interest paid by the Hospital was \$654,553 and \$695,346 for the years ended June 30, 2025 and 2024, respectively.

NOTE 9 - COMMITMENTS

Employment Contracts. The Hospital has employment contracts with multiple physicians, which expire at varying times. These agreements generally provide for a base salary or hourly rate in return for services provided, and incentive compensation based on practice income as defined in the individual agreements. The agreements stipulate the circumstances under which termination may occur. The terms of some of the agreements, however, stipulate that in the case of termination without cause, the Hospital is obligated to provide reduced base salary payments for varying monthly periods as is defined in the agreements.

NOTE 10 - DEFERRED COMPENSATION PLAN AND PENSION PLAN

The Hospital has a 403 (b) plan where qualifying employees may defer certain amounts of their salary.

Effective November 1, 1995, all full-time employees who had one year of continuous service are eligible to participate in the Hospital's retirement plan. The plan is a defined contribution, money purchase plan. The plan is voluntary and there is no requirement for employees to contribute to the plan. The employee contribution has a maximum set at 20% of base pay, or other guidelines as required by tax code. Part-time employees can participate in the plan but are limited to only employee contributions. Employees are 100% vested at the time of their enrollment so there are no forfeitures.

The Hospital funds the plan based on a percentage of eligible employees' annual salary. This percentage is determined by the Board annually and is currently 3.25%. There is no prior funding required. The Hospital's contribution to the plan for June 30, 2025 and 2024 was \$373,038 and \$315,820, respectively. At June 30, 2025 and 2024, the amount due to the plan was \$69,504 and \$55,707, respectively.

The hospital also has the Lady of the Sea General Hospital 457(b) plan which was enacted on October 1, 2008. The Hospital incurs no cost under this plan. The plan allows for pre-tax deferrals of income

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 10 - DEFERRED COMPENSATION PLAN AND PENSION PLAN, CONT

for chief officers, nurse practitioners, physicians, physician assistants, and directors. The plan is voluntary and there is no requirement for employees to contribute to the plan. These employees are eligible to participate in the plan on their first day of employment and are 100% vested at the time of their enrollment.

NOTE 11 - CONTINGENCIES AND RISK MANAGEMENT

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

The Hospital is a member of two separate trust funds established by the Louisiana Hospital Association that encompass self-insurance of (1) Hospital professional liability and comprehensive general liability and (2) Statutory workers' compensation. The Hospital continues to carry commercial insurance for all other risks of loss.

The Hospital participates in the State of Louisiana patient compensation fund (the fund). The fund provides malpractice coverage to the Hospital for claims in excess of \$100,000 up to \$500,000. According to current state law, medical malpractice liability (exclusive of future medical care awards) is limited to \$500,000 per occurrence. The management of the Hospital has no reason to believe that the Hospital will be prevented from continuing its participation in the fund.

Professional Liability. The Hospital's membership in the Louisiana Hospital Association Trust Fund provides additional coverage for medical malpractice liability. The trust fund bills members in advance, based upon an estimate of their exposure. At policy year-end, premiums are re-determined utilizing actual losses of the Hospital. The trust fund presumes to be a "grantor trust" and, accordingly, income and expenses are prorated to member hospitals. The Hospital has included these allocations and equity amounts assigned to the Hospital by the trust fund in its financial statements.

Workers' Compensation. The Hospital also participates in the Louisiana Hospital Association Self Insurance Workmen's Compensation Trust fund. Should the fund's assets not be adequate to cover claims made against it, the Hospital may be assessed its pro rata share of the resulting deficit. It is not practical to estimate the amount of additional assessments, if any, and the costs

associated with any such assessments are treated as period expenses at the time they are assessed. The trust fund presumes to be a "grantor trust" and, accordingly, income and expenses are prorated to member hospitals. The Hospital has included these allocations and equity amounts assigned to the Hospital by the trust fund in its financial statements.

Self-Insurance for Health Insurance. The Hospital elected to self-insure employee and eligible dependent health claims. The self-insured claims are processed through a plan administrator. The Hospital's self-insured plan has stop-loss insurance coverage for claims in excess of \$100,000 per individual per plan year and \$35,000 in the aggregate for claims in excess of the individual stop-loss. Prior to this election, the Hospital maintained commercial insurance coverage for health claims.

Laws and Regulations. The healthcare industry is subject to numerous laws and regulations of federal, state, and local governments. Compliance with such laws and regulations can be subject to future government review and interpretation, as well as regulatory actions unknown or unasserted at this time. These laws and regulations include, but are not limited to, accreditation, licensure, government health care program participation requirements, reimbursement for patient services, and Medicare and Medicaid fraud and abuse. Recently, government activity has increased with respect to investigations and allegations concerning possible violations of fraud and abuse statutes and regulations by health care providers.

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 11 - CONTINGENCIES AND RISK MANAGEMENT, CONT

Violations of these laws and regulations could result in exclusion from government health care program participation, together with the imposition of significant fines and penalties, as well as significant repayment for past reimbursement for patient services received. While the Hospital is subject to similar regulatory reviews, management believes the outcome of any such regulatory review will not have a material adverse effect on the Hospital's financial position.

NOTE 12 - BANK DEPOSITS AND INVESTMENTS

State statutes authorize the Hospital to invest in obligations of the U.S. Treasury, certificates or other obligations of the United States of America, and time certificates of deposit of state banks organized under the laws of Louisiana and national banks having the principal office in the State of Louisiana. The hospital must follow Louisiana state statutes regarding collateralization. Per Louisiana Revised Statute 39:1225, the amount of the security shall at all times be equal to one hundred percent of the amount of collected funds on deposit to the credit of each depositing authority except that portion of the deposits insured by any governmental agency insuring bank deposits which is organized under the laws of the United States.

At June 30, 2025 and 2024, the Hospital had bank balances as follows:

	2025	2024
Insured (FDIC)	\$ 590,665	\$ 561,999
Collateralized by securities held by the pledging financial Institutions' trust department in the hospital's name	12,207,640	3,325,889
	12,798,304	3,887,888
Carrying Value	\$ 11,835,182	\$ 3,698,932

For June 30, 2025 and 2024, respectively, investment income and gains on assets limited as to use, cash equivalents, and other investments are comprised of the following:

	2025	2024
Interest Income	\$ 1,133	\$ 3,898

Investments consists of assets held in The Louisiana Asset Management Pool (LAMP) which is an investment pool established as a cooperative endeavor to enable public entities of the State of Louisiana to aggregate funds for investment. It is administered by Louisiana Asset Management Pool, Incorporated, a nonprofit corporation, which is subject to the regulatory oversight of the Treasurer of the State of Louisiana. The LAMP portfolio includes only securities and other obligations in which local governments in Louisiana are authorized to invest in accordance with LA R.S. 33:2955. LAMP is designed to be highly liquid and prepares its own interest rate risk disclosure using the weighted average maturity (WAM) method. The WAM of LAMP assets is restricted to not more than 60 days and consists of no securities with a maturity in excess of 397 days. Investments are reported at fair value on the Statement of Net Position. The fair value for these investments is not materially different from its reported amounts.

At year end, the Hospital's investment balances were as follows:

	2025	2024
LAMP (AAAm/Standard & Poor)	\$27,541,728	\$ 45,381,624

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 12 - BANK DEPOSITS AND INVESTMENTS, CONT

Fair Value of Financial Instruments.

FASB Accounting Standards Codification Topic 820, "Fair Value Measurements (Topic 820)". Topic 820 requires disclosures that stratify balance sheet amounts measured at fair value based on the inputs used to derive fair value measurements.

These levels are:

Level 1 - inputs are based upon adjusted quoted prices for identical instruments traded in active markets.

Level 2 - inputs are based upon quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in markets that are not active, and model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data for substantially the full term of assets or liabilities.

Level 3 - inputs are generally unobservable and typically reflect management's estimate of assumptions that market participants would use in pricing the asset or liability. The fair values are therefore determined using model-based techniques that include option pricing models, discounted cash flow models, and similar techniques.

All investments are based on Level 1 inputs. The hospital relies on the valuation procedures and methodologies of the external managers hired specifically to invest in such securities or in strategies which employ such securities.

NOTE 13 - ASSETS LIMITED AS TO USE

On October 3, 2013, the Hospital issued General Obligation Bonds in the amount of \$3,000,000, which required restricted cash to be held in the form of a sinking fund. Section 9.1 of the Series 2013 bond document requires the following cash reservation:

Sinking Fund (a) For the payment of the principal of and the interest on the Bonds, the issuer will maintain a special fund, to be held by the regularly designated fiscal agent of the issuer (the "sinking" fund), into which the issuer will deposit the proceeds of the aforesaid tax...and no other moneys whatsoever...funds fully sufficient to pay promptly the principal and interest falling due on such date.

On October 20, 2022, the Hospital issued General Obligation Bonds in the amount of \$15,000,000, which required restricted cash to be held in the form of a sinking fund. Section 9 of the Series 2022 bond document requires the following cash reservation:

Sinking Fund. For the payment of the principal of and the interest on the Bonds, there is hereby created a special fund known as "Hurricane Recovery Revenue Bonds (2022) Sinking Fund," said Sinking Fund to be established and maintained with the regularly designated fiscal agent bank of the Issuer. The Issuer shall deposit in the Sinking Fund on or before the 20th day of each month of each year, (i) commencing November 20, 2022, a sum equal to one sixth (1/6) of the interest falling due on the next Interest Payment Date, and (ii) commencing October 20, 2023, one-twelfth (1/12) of the principal falling due on the next principal payment date.

Assets limited as to use that are required for obligations classified as current liabilities are reported in current assets. The composition of assets limited as to use at June 30, 2025 and 2024, are as follows:

	<u>2025</u>	<u>2024</u>
Under Indenture Agreement:		
Debt Service Funds	<u>\$ 1,471,022</u>	<u>\$ 1,069,732</u>

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 14 - CHARITY CARE

The Hospital provides services without charge or at amounts less than its rates to patients who meet the criteria of its charity care policy. The criterion for charity care considers items such as family income, net worth, extent of financial obligations for healthcare services, etc. Because the Hospital does not pursue collection of amounts determined to qualify as charity care, such amounts are not reported in revenue.

The Hospital maintains records to identify and monitor the level of charity care it provides. These records include the amount of charges foregone for services and supplies furnished under its charity care policy. Charges forgone, based on established rates, were approximately \$116,900 and \$87,126 for the years ended June 30, 2025 and 2024, respectively.

Management estimates that approximately \$74,816 and \$57,503 of costs were related to charity care for the years ended June 30, 2025 and 2024, respectively. This estimate is based on a ratio of total cost to gross patient charges applied to gross uncompensated charges associated with providing care to charity patients.

NOTE 15 - NET POSITION

Net position for the years ended June 30, 2025 and 2024 are as follows:

	2025	2024
Invested in capital assets, net of related debt	\$ 61,098,660	\$ 19,598,838
Restricted for:		
Bond Indenture (expendable)	1,471,022	1,069,732
Unrestricted	57,010,513	60,184,478
Total Net Position	\$ 119,580,195	\$ 80,853,048

NOTE 16 - GRANT REVENUE

The Hospital entered into a cooperative endeavor agreement (CEA) with a regional public rural hospital (Grantor) whereby the Grantor awards as an intergovernmental transfer (IGT) to be used solely to provide adequate and essential medically necessary and available healthcare services to the Hospital's service population subject to the availability of such grant funds. The aggregate IGT grant income is \$2,799,399 and \$3,387,589 for the years ended June 30, 2025 and 2024, respectively. The Hospital recognized non-operating grant income of \$432,517 and \$411,534 from Medicare and Medicaid for the years ended June 30, 2025 and 2024, respectively, as an incentive for implementing electronic health records (EHR). The key component of receiving the EHR incentive payments is "demonstrating meaningful use" which is meeting a series of objectives that make use of an EHR's potential related to the improvement of quality, efficiency, and patient safety. The Centers for Medicare and Medicaid has indicated that demonstrating meaningful use will be phased in in three stages, with each progressive stage incorporating more stringent measures. The Hospital's policy is to record the incentive payments once various stages have been met rather than recognizing ratably throughout the attestation period. To receive the incentive payments under each stage, a hospital must attest through a secure mechanism that they have met the meaningful use criteria. The EHR payments each year are based on management's best estimate.

The payments can be retained, and additional payments can be earned for each stage if the Hospital meets certain criteria in future implementation. The EHR incentive payments are reimbursed at a tentative rate with final settlement determined after submittal of the annual cost reports and audits thereof by the fiscal intermediaries.

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

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 17 - 340B DRUG PROGRAM

The Hospital participates in the 340B Drug Pricing Program through the Health Resources and Services Administration (HRSA). Eligible patients receiving care from the Hospital may receive reduced pricing on certain prescriptions if filled with an outside retail pharmacy which is contracted with the Hospital. Gross revenue recognized from 340B outside pharmacies for the years ended June 30, 2025 and 2024 were \$1,282,355 and \$766,131, respectively.

NOTE 18 - RETAIL PHARMACY REVENUE

On January 8, 2015, the Hospital opened Lady of the Sea Community Pharmacy in Larose, Louisiana. On July 1, 2015, the Hospital opened Lady of the Sea Community Pharmacy in Cut Off, Louisiana. Net revenues for the pharmacies are shown on the face of the Statement of Revenues, Expenses, and Changes in Net Position. Net revenues are as follows:

	<u>2025</u>	<u>2024</u>
Gross Pharmacy Revenue	\$ 20,393,479	\$ 20,472,445
Less: Contractual Adjustments	<u>10,063,0284</u>	<u>11,025,990</u>
Net Community Pharmacy Revenue	<u>\$ 10,330,395</u>	<u>\$ 9,446,543</u>

The Lady of the Sea Community Pharmacy participates in the 340B drug pricing program for eligible patients of the Hospital.

NOTE 19 - GOVERNMENTAL REGULATIONS

The healthcare industry is subject to numerous laws and regulations of federal, state and local governments. These laws and regulations include, but are not necessarily limited to, matters such as licensure, accreditation, government healthcare program participation requirements, reimbursement for patient services, and Medicare and Medicaid fraud and abuse. Government activity has increased with respect to investigations and allegations concerning possible violations of fraud and abuse statutes and regulations by healthcare providers. Violations of these laws and regulations could result in expulsion from government healthcare programs together with the imposition of significant fines and penalties, as well as significant repayments for patient services previously billed. Management believes that the Hospital is in compliance with fraud and abuse as well as other applicable government laws and regulations. Compliance with such laws and regulations can be subject to future government review and interpretation as well as regulatory actions unknown or unasserted at this time.

Legislation and regulation at all levels of government have affected and are likely to continue to affect the operation of the Hospital. It is not possible currently to determine the impact on the Hospital of government plans to reduce Medicare and Medicaid spending, government implementation of national and state healthcare reform or market-initiated delivery system and/or payment methodology changes. However, such changes could have an adverse impact on operating results, cash flows and estimated debt service coverage of the Hospital in future years.

NOTE 20 - RECENTLY ISSUED ACCOUNTING PRONOUNCEMENTS

As of the date of this report, there were no new pronouncements that affect the Hospital.

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO.1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

NOTES TO FINANCIAL STATEMENTS

JUNE 30, 2025 AND 2024

NOTE 21 - SUBSEQUENT EVENTS

In preparing these financial statements, the Hospital has evaluated events and transactions for potential recognition or disclosure through December 2, 2025, the date the financial statements were available to be issued.

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

PATIENT SERVICE REVENUES

FOR THE YEARS ENDED JUNE 30,

	2025	2024
Cardiopulmonary	\$ 512,397	\$ 87,647
Central Supply	182,323	128,346
Clinics	6,933,657	6,997,250
Dialysis	3,310,241	2,641,708
EKG	455,183	374,536
Emergency Room	9,630,457	9,164,202
Home Health	1,139,215	881,278
Laboratory	13,628,594	11,198,134
Med/Surg	1,049,335	34,612
Observation	349,888	8,120
Pharmacy	2,134,287	1,380,203
Radiology	9,079,904	6,529,259
Therapy	3,141,203	2,609,353
 GROSS PATIENT SERVICE REVENUE	 51,546,684	 42,034,648
 Contractual Adjustments	 (25,114,251)	 (19,652,795)
 NET PATIENT SERVICE REVENUE BEFORE PROVISION FOR DOUBTFUL ACCOUNTS	 \$ 26,432,433	 \$ 22,381,853

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

OTHER OPERATING REVENUES

FOR THE YEARS ENDED JUNE 30,

	<u>2025</u>	<u>2024</u>
Medical Records Revenue	\$ 17,126	\$ 25,722
Miscellaneous	22,387	49,648
Rebate Income	<u>38,196</u>	<u>47,214</u>
Total Other Operating Revenue	<u>\$ 77,709</u>	<u>\$ 122,585</u>

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

SALARIES BY DEPARTMENT

FOR THE YEARS ENDED JUNE 30,

	<u>2025</u>	<u>2024</u>
Administration	\$ 965,494	\$ 938,964
Business Office	645,417	495,120
Cardiopulmonary	431,664	394,643
Clinic Administration	181,415	256,460
Education - Infection Control	92,497	61,694
Emergency Room	1,299,802	1,467,097
ER Doctors	1,376,852	1,386,464
General Accounting	229,919	213,882
Home Health	415,546	441,164
Housekeeping	241,147	142,555
Human Resource and Risk Management	34,396	34,000
Information Technology	380,503	412,938
Laboratory	917,423	767,676
Learning Center	1,880	3,360
Maintenance	383,643	361,332
Medical Records	273,842	192,633
Medical/Surgical	1,183,059	308,306
Other	-	14
Pharmacy	461,522	356,580
Pharmacy Cut Off	708,903	731,941
Pharmacy Larose	469,408	419,034
Public Relations	117,106	103,105
Purchasing	222,725	227,436
Radiology	802,960	668,180
Renal Dialysis	375,658	362,409
Rural Health Clinics	4,706,365	4,463,584
Ultrasound	72,890	40,027
	<u>\$ 16,992,036</u>	<u>\$ 15,250,598</u>
Total Salaries		

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

EMPLOYEE BENEFITS

FOR THE YEARS ENDED JUNE 30,

	<u>2025</u>	<u>2024</u>
Disability Insurance	\$ 86,608	\$ 79,349
Hospitalization	2,319,864	1,695,870
Life Insurance	24,312	14,251
Pension Expense	373,038	315,820
Scholarships	12,000	12,000
Social Security	1,181,961	1,045,907
Workers' Compensation	86,155	64,777
Other	<u>-</u>	<u>4,476</u>
Total Employee Benefits	<u>\$ 4,083,938</u>	<u>\$ 3,232,450</u>

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

PURCHASED SERVICES BY DEPARTMENT

FOR THE YEARS ENDED JUNE 30,

	<u>2025</u>	<u>2024</u>
Administration	\$ 1,424,019	\$ 833,273
Business Office	24,022	56,254
Cardiopulmonary	36,236	22,110
Clinic Pharmacy	24,934	19,721
Dialysis	88,318	86,548
Emergency Room	489,631	399,276
Freestanding Health Clinics	300	18,050
Home Health	148,892	121,138
Information Technology	3,022	3,855
Laboratory	117,355	207,554
Maintenance	8,817	212,423
Materials Management	9,945	16,025
Medical Clinic	-	1,295
Medical Records	33,306	6,355
Medical/Surgical	4,014	21,443
Nutritional Services	154,171	139,193
Outpatient Rehab	777,452	707,188
Pharmacy	60,736	38,103
Pharmacy - LaRose	18,353	20,795
Radiology	109,952	100,215
Rural Health Clinics	469,622	470,722
Social Services	4,185	270
Speech Therapy	28,220	-
340B - Outside Pharmacy	<u>208,088</u>	<u>155,886</u>
Total Purchased Services	<u>\$ 4,243,590</u>	<u>\$ 3,657,692</u>

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

SUPPLIES AND OTHER EXPENSES BY DEPARTMENT

FOR THE YEARS ENDED JUNE 30,

	<u>2025</u>	<u>2024</u>
Administration	\$ 1,789,163	\$ 1,583,052
Blood Bank	11,486	-
Business Office	29,661	94,117
Cardiopulmonary	67,836	68,954
Dialysis	294,394	377,792
Dietary	102,193	81,635
Education	14,828	5,976
Emergency Room	366,541	539,243
Freestanding Health Clinics	-	1,248
General Accounting	73,977	104,655
Home Health	100,716	79,728
Housekeeping	61,913	82,492
Human Resources	13,367	6,643
Information Technology	106,714	134,476
Laboratory	732,618	744,923
Maintenance	107,216	164,177
Medical Clinic	(8,216)	(5,239)
Medical Records	25,312	45,334
Medical/Surgical	275,700	307,566
Operating Room	-	176
Outpatient Rehab	132,744	35,360
Pharmacy	303,506	164,533
Pharmacy - Larose	2,960,307	2,973,018
Pharmacy - Cutoff	4,960,102	4,669,964
Public Relations	142,446	117,194
Purchasing	83,607	89,080
Radiology	459,943	638,025
Rural Health Clinics	919,716	1,218,218
Utilization Management	21,031	3,370
340B Outside Pharmacy	<u>545,803</u>	<u>397,062</u>
 Total Supplies and Other	 <u>\$ 14,694,624</u>	 <u>\$ 14,722,772</u>

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

GOVERNING BOARD EXPENSES

FOR THE YEARS ENDED JUNE 30,

The Board of Commissioners receive no compensation for serving on the Board.

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

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

JUNE 30,

	<u>2025</u>	<u>2024</u>
LLOYD GUIDRY		
Salary	\$ 212,187	\$ 200,676
Benefits-Insurance	10,422	7,647
Benefits-Retirement	7,030	6,205
Benefits-Disability/Life	2,483	2,447
Travel	<u>298</u>	<u>91</u>
	<u>\$ 232,420</u>	<u>\$ 217,066</u>

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

Chairman and Board of Commissioners
Lafourche Parish Hospital Service District No. 1
d/b/a Lady of the Sea General Hospital
Galliano, 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 Lafourche Parish Hospital Service District No. 1, State of Louisiana, Parish of Lafourche, d/b/a Lady of the Sea General Hospital, a component unit of the Lafourche Parish Council (Hospital), as of and for the years ended June 30, 2025 and 2024, and the related notes to the financial statements, which collectively comprise the Hospital's basic financial statements, and have issued our report thereon dated December 2, 2025.

REPORT ON INTERNAL CONTROL OVER FINANCIAL STATEMENTS

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

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

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore material weaknesses or significant deficiencies may exist that were not identified. We identified certain deficiencies in internal control, described in the accompanying "Schedule of Findings and Questioned Costs and Management's Corrective Action Plan", as items (Finding 2025-1) that we consider to be material weaknesses.

REPORT ON COMPLIANCE AND OTHER MATTERS

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

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1'S RESPONSE TO FINDINGS

The Hospital's responses to the findings identified in our audit are described in the accompanying "Schedule of Findings and Questioned Costs and Management's Corrective Action Plan". The Hospital's responses were not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on it.

PURPOSE OF THIS REPORT

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

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

Sincerely,



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

December 2, 2025

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

SCHEDULE OF FINDINGS AND QUESTIONED COSTS AND MANAGEMENT'S CORRECTIVE ACTION PLAN

For the year ended June 30, 2025

We have audited the financial statements of Lafourche Parish Hospital Service District No. 1, State of Louisiana, Parish of Lafourche, d/b/a Lady of the Sea General Hospital, a component unit of the Lafourche Parish Council (Hospital), as of and for the years ended June 30, 2025, and 2024, respectively, and have issued our report thereon dated December 2, 2025.

We conducted our audit in accordance with generally accepted auditing standards of the United States and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, and the provisions of OMB Circular A-133. Our audit of the financial statements as of June 30, 2025, and 2024, respectively, resulted in an unmodified opinion.

Section I: Summary of Auditor's Reports

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

Internal Control

Material Weaknesses:	Yes
Significant Deficiencies:	No

Compliance:	
Compliance Material to Financial Statements	No

Section II: Financial Statement Findings

Material Weaknesses

Finding 2025-1 Proposed Audit Adjustments

Condition and Criteria: The proposed audit adjustments for the fiscal years ended June 30, 2025 and 2024 had material effects on the financial statements.

Cause: Cost report settlements were not available for recording as of the date of the hospital financial close period.

Effect: The accounting department has a limited amount of time to review the year end closing adjustments.

Recommendation: The hospital should consider extending its closing date for the year end to allow time for a comprehensive review to be performed by the CFO so that all non-cost report related adjustments can be made in a timely manner. The proposed audit adjustments should be reviewed by knowledgeable hospital personnel and approved before posting.

Management Response: Management acknowledges there are proposed audit entries for the fiscal year end. June financials are kept open for additional months beyond year end. End of year financials are presented as preliminary until final audit entries, including cost report entries, are recorded. After cost report preparation, the end of year financials are

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

SCHEDULE OF FINDINGS AND QUESTIONED COSTS AND MANAGEMENT'S CORRECTIVE ACTION PLAN

For the year ended June 30, 2025

presented as final. We do not prepare the cost report in-house, so we have no way of recording these entries until completion of the cost report by the audit firm.

Section III: Management Letter Items

There are no management letter items at June 30, 2025.

LAFOURCHE PARISH HOSPITAL SERVICE DISTRICT NO. 1
d/b/a LADY OF THE SEA GENERAL HOSPITAL

SCHEDULE OF PRIOR YEAR FINDINGS

For the Year Ended June 30, 2025

Section I - Internal Control and Compliance Material to the Financial Statements

Finding 2024-1 Bond Sinking Fund Under Reserved

The 2022 Bond for the fiscal year ended June 30, 2025 was under reserved.

Status: Resolved.

Finding 2024-2 Proposed Audit Adjustments

The proposed audit adjustments for the fiscal years ended June 30, 2024 and 2023 had material effects on the financial statements.

Status: Unresolved. See Finding 2025-2.



Glen P. Langlinois, CPA
Gayla F. Russo, CPA
Barrett B. Perry, CPA

INDEPENDENT ACCOUNTANT'S REPORT
ON APPLYING AGREED-UPON PROCEDURES

Michael P. Broussard, CPA
Elizabeth L. Whitford, CPA
Elizabeth N. DeBaillon, CPA
Chad V. Fortier, CPA

To the Chairman and Board of Commissioners
Lafourche Parish Hospital Service District No. 1
d/b/a Lady of the Sea General Hospital
Galliano, Louisiana

We have performed the procedures described in Schedule A – Procedures and Results, which were agreed to by Lafourche Parish Hospital Service District No.1, d/b/a Lady of the Sea General Hospital (Hospital), a component unit of Lafourche Parish Council, State of Louisiana, and on the control and compliance (C/C) areas identified in the Louisiana Legislative Auditor's (LLA's) Statewide Agreed-Upon Procedures (SAUPs) for the fiscal period July 1, 2024 through June 30, 2025. The Hospital's management is responsible for those C/C areas identified in the SAUPs.

The Hospital has agreed to and acknowledged that the procedures performed are appropriate to meet the intended purpose of the engagement, which is to perform specified procedures on the C/C areas identified in LLA's SAUPs for the fiscal period July 1, 2024 through June 30, 2025. Additionally, LLA has agreed to and acknowledged that the procedures performed are appropriate for its purposes. This report may not be suitable for any other purpose. The procedures performed may not address all the items of interest to a user of this report and may not meet the needs of all users of this report and, as such, users are responsible for determining whether the procedures performed are appropriate for their purposes.

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

We were engaged by the Hospital to perform this agreed-upon procedures engagement and conducted our engagement in accordance with attestation standards established by the American Institute of Certified Public Accountants and applicable standards of *Government Auditing Standards*. We were not engaged to and did not conduct an examination or review engagement, the objective of which would be the expression of an opinion or conclusion, respectively, on those C/C areas identified in the SAUPs. Accordingly, we do not express such an opinion or conclusion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you.

We are required to be independent of the Hospital and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements related to our agreed-upon procedures engagement.

This report is intended solely to describe the scope of testing performed on those C/C areas identified in the SAUPs, and the result of that testing, and not to provide an opinion on control or compliance. Accordingly, this report is not suitable for any other purpose. Under Louisiana Revised Statute 24:513, this report is distributed by the LLA as a public document.

Langlinois Broussard & Kohlenberg

LANGLINAIS BROUSSARD & KOHLENBERG
(A Corporation of Certified Public Accountants)
Abbeville, Louisiana
December 2, 2025

Schedule A – Procedures and Results

1) *Bank Reconciliations*

- A. Obtain a listing of entity bank accounts for the fiscal period from management and management's representation that the listing is complete. Ask management to identify the entity's main operating account. Select the entity's main operating account and randomly select 4 additional accounts (or all accounts if less than 5). Randomly select one month from the fiscal period, obtain and inspect the corresponding bank statement and reconciliation for each selected account, and observe that:
- i. Bank reconciliations include evidence that they were prepared within 2 months of the related statement closing date (e.g., initialed and dated or electronically logged);
Result: Procedure performed; no exceptions noted.
 - ii. Bank reconciliations include written evidence that a member of management or a board member who does not handle cash, post ledgers, or issue checks has reviewed each bank reconciliation within 1 month of the date the reconciliation was prepared. (e.g., initialed and dated, electronically logged); and
Result: Procedure performed; no exceptions noted.
 - iii. Management has documentation reflecting it has researched reconciling items that have been outstanding for more than 12 months from the statement closing date, if applicable.
Result: Procedure performed; no exceptions noted.