

# CONSOLIDATED FINANCIAL STATEMENTS AND

SUPPLEMENTARY INFORMATION

**APRIL 30, 2014 AND 2013** 



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#### REPORT OF INDEPENDENT AUDITORS

Board of Directors Community Hospital of Bremen, Inc. Bremen, Indiana

#### Report on the Consolidated Financial Statements

We have audited the accompanying consolidated financial statements of Community Hospital of Bremen, Inc. (Hospital) and its affiliate, which comprise the consolidated balance sheets as of April 30, 2014 and 2013, and the related consolidated statements of operations and changes in net assets, and cash flows for the years then ended, and the related notes to the consolidated financial statements.

#### Management's Responsibility for the Consolidated Financial Statements

Management is responsible for the preparation and fair presentation of these consolidated 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 consolidated 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 consolidated financial statements based on our audits. We conducted our audits 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 audits to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the Hospital's preparation and fair presentation of the consolidated 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 Hospital'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 consolidated financial statements.

Board of Directors Community Hospital of Bremen, Inc. Bremen, Indiana

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 consolidated financial statements referred to above present fairly, in all material respects, the financial position of the Hospital as of April 30, 2014 and 2013, and its results of operations, changes in net assets and cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

#### Report on Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The supplementary information listed in the accompanying table of contents is presented for purposes of additional analysis of the consolidated financial statements rather than to present the financial position, results of operations, changes in net assets and cash flows of the individual entities, and is not a required part of the consolidated 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 consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated 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 consolidated 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 July 14, 2014 on our consideration of the Hospital's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on 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.

Blue & Co., LLC

Indianapolis, Indiana July 14, 2014

#### CONSOLIDATED BALANCE SHEETS APRIL 30, 2014 AND 2013

#### **ASSETS**

Current assets         2014         2013           Cash and cash equivalents         \$ 1,382,901         \$ 1,047,284           Investments         1,658,075         1,661,351           Patient accounts receivable, less allowance for uncollectible accounts of \$937,000 in 2014 and \$730,000 in 2013         2,842,911         2,735,438           Supplies         150,980         125,172           Other current assets         740,488         637,589           Total current assets         6,775,355         6,206,834           Assets whose use is limited	ASSETS				
Cash and cash equivalents       \$ 1,382,901       \$ 1,047,284         Investments       1,658,075       1,661,351         Patient accounts receivable, less allowance for uncollectible accounts of \$937,000 in 2014 and \$730,000 in 2013       2,842,911       2,735,438         Supplies       150,980       125,172         Other current assets       740,488       637,589         Total current assets       6,775,355       6,206,834			2014		2013
Investments       1,658,075       1,661,351         Patient accounts receivable, less allowance for uncollectible accounts of \$937,000 in 2014 and \$730,000 in 2013       2,842,911       2,735,438         Supplies       150,980       125,172         Other current assets       740,488       637,589         Total current assets       6,775,355       6,206,834	Current assets				
Investments       1,658,075       1,661,351         Patient accounts receivable, less allowance for uncollectible accounts of \$937,000 in 2014 and \$730,000 in 2013       2,842,911       2,735,438         Supplies       150,980       125,172         Other current assets       740,488       637,589         Total current assets       6,775,355       6,206,834	Cash and cash equivalents	\$	1,382,901	\$	1,047,284
Patient accounts receivable, less allowance for uncollectible accounts of \$937,000 in 2014 and \$730,000 in 2013       2,842,911       2,735,438         Supplies       150,980       125,172         Other current assets       740,488       637,589         Total current assets       6,775,355       6,206,834	•		1,658,075		
for uncollectible accounts of \$937,000 in 2014 and \$730,000 in 2013 2,842,911 2,735,438 Supplies 150,980 125,172 Other current assets 740,488 637,589 Total current assets 6,775,355 6,206,834	Patient accounts receivable, less allowance		, ,		, ,
2014 and \$730,000 in 2013       2,842,911       2,735,438         Supplies       150,980       125,172         Other current assets       740,488       637,589         Total current assets       6,775,355       6,206,834					
Supplies         150,980         125,172           Other current assets         740,488         637,589           Total current assets         6,775,355         6,206,834	· ,		2.842.911		2.735.438
Other current assets         740,488         637,589           Total current assets         6,775,355         6,206,834					
Total current assets 6,775,355 6,206,834	• •		•		
Assets whose use is limited					
	Assets whose use is limited				
Board designated for capital improvements 327,204 341,782			327.204		341.782
Held by trustee 722,270 693,557	· · · · · · · · · · · · · · · · · · ·				
Donor restricted 13,000 13,000	•				•
Total assets whose use is limited 1,062,474 1,048,339	•				
<b>Property and equipment, net</b> 16,173,478 17,291,262			, ,		, ,
Other assets 13,918 14,124					
	•	Ф.		Ф.	
Total assets \$ 24,025,225 \$ 24,560,559	Total assets	Φ	24,025,225	Φ	24,560,559
LIABILITIES AND NET ASSETS	LIABILITIES AND NET	AS	SETS		
Current liabilities	Current liabilities				
Accounts payable \$ 1,072,139 \$ 704,329	Accounts payable	\$	1,072,139	\$	704,329
Accrued wages and related expenses 523,442 629,051	· ·		523,442		629,051
Other accrued liabilities 66,375 68,073	Other accrued liabilities		66,375		68,073
Estimated third-party settlements 281,027 396,143	Estimated third-party settlements		281,027		396,143
Lines of credit -0- 855,487	Lines of credit		-0-		855,487
Current portion of long-term debt	Current portion of long-term debt		722,854		600,065
Total current liabilities 2,665,837 3,253,148	Total current liabilities		2,665,837		3,253,148
Long-term debt, less current portion14,871,66615,149,294	Long-term debt, less current portion		14,871,666		15,149,294
Total liabilities 17,537,503 18,402,442	Total liabilities		17,537,503		18,402,442
Net assets	Net assets				
Unrestricted 6,474,722 6,145,117	Unrestricted		6,474,722		6,145,117
Temporarily restricted13,00013,000	Temporarily restricted		13,000		13,000
Total net assets 6,487,722 6,158,117	Total net assets		6,487,722		6,158,117
Total liabilities and net assets \$ 24,025,225 \$ 24,560,559	Total liabilities and net assets	\$		\$	

# CONSOLIDATED STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS YEARS ENDED APRIL 30, 2014 AND 2013

	2014	2013
Unrestricted operating revenues and gains Net patient service revenue	\$ 15,773,781	\$ 16,330,937
Less provision for bad debts	626,232	575,351
Net patient service revenue net of provision for bad debts	15,147,549	15,755,586
Grants and other public support	76,957	141,348
Other revenue	1,310,939	650,520
Total unrestricted operating revenues and gains	16,535,445	16,547,454
Operating expenses		
Salaries and wages	5,918,366	6,184,105
Employee benefits Physician fees	1,411,918 1,270,574	1,388,117 587,378
Medical and surgical supplies	1,608,445	1,594,991
	, ,	, ,
Other supplies Purchased services	187,687 1,798,681	188,132 1,880,857
Equipment rentals	768,148	722,535
Utilities	363,358	336,177
Insurance	126,360	154,933
Depreciation	1,212,199	1,219,640
Interest	665,263	679,903
HAF Program	597,259	528,941
Other	341,376	459,309
Total operating expenses	16,269,634	15,925,018
Operating income	265,811	622,436
Nonoperating revenues (expenses)		
Foundation unrestricted revenues	137,255	210,635
Foundation unrestricted expenses	(73,461)	(72,459)
Total nonoperating revenues (expenses)	63,794	138,176
Excess revenues over expenses	329,605	760,612
Temporarily restricted net assets		
Contributions	-0-	13,000
Change in temporarily restricted net assets	-0-	13,000
Change in net assets	329,605	773,612
Net assets		
Beginning of year	6,158,117	5,384,505
End of year	\$ 6,487,722	\$ 6,158,117

#### CONSOLIDATED STATEMENTS OF CASH FLOWS YEARS ENDED APRIL 30, 2014 AND 2013

	 2014	2013
Operating activities		_
Change in net assets	\$ 329,605	\$ 773,612
Adjustments to reconcile change in net assets to		
net cash flows from operating activities		
Depreciation	1,212,199	1,219,640
Provision for bad debts	626,232	575,351
Net realized and unrealized (gain) loss on investments Changes in operating assets and liabilities	3,745	(52,738)
Patient accounts receivable	(733,705)	(1,503,708)
Supplies, other current assets, and other assets	(128,501)	(19,058)
Accounts payable	367,810	402,851
Accrued wages and related expenses	(105,609)	122,690
Other accrued liabilities	(1,698)	49,982
Estimated third-party settlements	 (115,116)	 (598,332)
Net cash flows from operating activities	1,454,962	970,290
Investing activities		
Proceeds from the sale of investments	(469)	80,231
Purchase of investments	(14,135)	(238,882)
Purchase of property and equipment	(94,415)	(571,704)
Net cash flows from investing activities	(109,019)	(730,355)
Financing activities		
Payments on long-term debt	(617,635)	(523,532)
Proceeds from the issuance of long-term debt	462,796	449,520
Borrowings (payments) on line of credit, net	(855,487)	60,206
Net cash flows from financing activities	(1,010,326)	(13,806)
Net change in cash and cash equivalents	335,617	226,129
Cash and cash equivalents		
Beginning of year	 1,047,284	821,155
End of year	\$ 1,382,901	\$ 1,047,284
Supplemental cash flows information		
Cash paid for interest	\$ 667,128	\$ 679,445

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

#### 1. SIGNIFICANT ACCOUNTING POLICIES

The significant accounting policies followed by Community Hospital of Bremen, Inc. (Hospital) in the preparation of its consolidated financial statements are summarized below:

#### Organization

The Hospital, located in Bremen, Indiana, is a not-for-profit acute care hospital. The Hospital provides inpatient, outpatient, and other ancillary services to the residents of Bremen and surrounding communities. Admitting physicians are primarily practitioners in the local area.

Community Hospital of Bremen Foundation, Inc. (Foundation), an affiliate of the Hospital, is a not-for-profit corporation established to support and assist the Hospital through grants and gifts as well as to provide other assistance towards the Hospital's stated exempt purpose.

#### Principles of Consolidation

The accompanying consolidated financial statements include the accounts of the Hospital and the Foundation. All material intercompany balances and transactions have been eliminated in the consolidation. Because the Foundation's sole purpose is to support the activities of the Hospital, the results of the Foundation have been consolidated with the Hospital's results. The consolidated net assets of the Hospital as of April 30, 2014 and 2013 include approximately \$1,344,000 and \$1,349,000, respectively, of net assets of the Foundation.

#### **Use of Estimates**

The preparation of consolidated 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 and disclosure of contingent assets and liabilities at the date of the consolidated financial statements. Estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

#### Cash and Cash Equivalents

The Hospital considers highly liquid investments available for operating purposes with an original maturity of 90 days or less to be cash and cash equivalents for the purposes of the consolidated statements of cash flows.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

#### <u>Investments</u>

The Hospital's investments consist of certificates of deposit with local financial institutions carried at contract value, money market funds and mutual funds carried at fair value.

#### Patient Accounts Receivable

Patient service revenue and the related accounts receivable are recorded at the time services to patients are performed. The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its 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 future periods as final settlements are determined.

#### Allowance for Uncollectible Accounts

Patient accounts receivable are reduced by an allowance for uncollectible accounts based on the Hospital's evaluation of its major payor sources of revenue, the aging of the accounts, historical losses, current economic conditions, and other factors unique to its service area and the healthcare industry. Management regularly reviews data about the major payor sources of revenue in evaluating the sufficiency of the allowance for uncollectible accounts. For receivables associated with services provided to patients who have third-party coverage, the Hospital analyzes contractually due amounts and provides an allowance for uncollectible accounts and a provision for bad debts, if necessary, For receivables associated with self-pay payments, 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 Hospital 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 uncollectible accounts.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

During 2014, the Hospital's allowance for uncollectible accounts changed approximately \$207,000 from \$730,000 to \$937,000. The uncollectible allowance for self-pay balances increased approximately \$127,000 as the uncollectible estimate increased to 80% of self-pay balances from 57% as of April 30, 2013. The uncollectible allowance for third-party payor accounts increased approximately \$80,000 but the uncollectible estimate remained at 8% of third-party payor balances for April 30, 2014 and 2013. In addition, the Hospital's self-pay related write-offs increased approximately \$80,000 to \$420,000 in 2014 from \$340,000 in 2013. The increases were the result of negative trends experienced in the collection of amounts from patients in 2014. The Hospital did not change its charity care or uninsured discount policies during 2014 or 2013.

As of April 30, 2014, the allowance for uncollectible accounts of approximately \$937,000 was comprised of \$461,000 reserved for self-pay balances and \$476,000 reserved for third-party payor balances. As of April 30, 2013, the allowance for uncollectible accounts of approximately \$730,000 was comprised of \$335,000 reserved for self-pay balances and \$395,000 reserved for third-party payor balances.

#### Patient Service Revenue

Patient service revenue and the related accounts receivable are recorded at the time services to patients are performed. A summary of the payment arrangements with major third-party payors follows:

#### Medicare

The Hospital is a provider of services to patients entitled to coverage under Titles XVIII and XIX of the Health Insurance Act (Medicare and Medicaid). The Hospital was granted Critical Access Status by Medicare and is paid for Medicare services based upon a cost reimbursement methodology. The Hospital is reimbursed for cost reimbursable items at an interim rate, with final settlement determined after submission of annual cost reports. Differences between the total program billed charges and the payments received are reflected as deductions from revenue. At the Hospital's year-end, a cost report is filed with the Medicare program computing reimbursement amounts related to Medicare patients.

#### Medicaid and Hospital Assessment Fee Program

The Hospital is reimbursed for Medicaid inpatient services under a prospectively determined rate-per-discharge and is not subject to retroactive adjustment. The differences between standard charges and reimbursement from these programs are recorded as contractual adjustments. Reimbursement for Medicaid outpatient services is based on predetermined rates, and is not subject to retroactive cost based settlements.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

In 2012, Hospital Assessment Fee (HAF) Program was approved by Centers for Medicare & Medicaid Services (CMS) for the period July 1, 2011 through June 30, 2013. The purpose of the HAF Program is to fund the State share of enhanced Medicaid payments and Medicaid Disproportionate Share (DSH) payments for Indiana hospitals. Previously, the State share was funded by governmental entities through intergovernmental transfers. The Medicaid enhanced payments relate to both fee for service and managed care claims. The Medicaid enhanced payments are designed to follow the patients and result in increased Medicaid rates.

During 2014 and 2013, the Hospital recognized HAF Program expense of approximately \$597,000 and \$529,000, respectively, which resulted in Medicaid rate increases. The HAF Program expense is included in operating expenses in the consolidated statements of operations and changes in net assets. The Medicaid rate increases under the HAF Program are included in patient service revenue in the consolidated statements of operations and changes in net assets.

The HAF Program was approved for extension in March 2014 by CMS for the period July 1, 2013 through June 30, 2017.

#### Other Payment Arrangements

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

The difference between computed reimbursement and interim reimbursement is reflected as a receivable from or payable to the third-party program. The year-end cost reports filed with the Medicare and Medicaid programs through April 30, 2012 have been audited by these programs and any resulting differences are reflected in the consolidated financial statements. During 2014 and 2013, the Hospital recognized an increase in net assets of approximately \$42,000 and \$63,000, respectively, due to the differences between original estimates and subsequent revisions for the final settlement of cost reports.

Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. Although these audits may result in some changes in these amounts, they are not expected to have a material effect on the accompanying consolidated financial statements.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

A summary of patient service revenue for 2014 and 2013 follows:

	2014	2013
Gross patient service revenue		
Inpatient services	\$ 5,349,686	\$ 7,255,314
Outpatient services	24,073,589	21,559,179
Total gross patient service revenue	29,423,275	28,814,493
Less provisions for Contractual adjustments under third-		
party reimbursement programs	12,778,984	11,695,271
Charity care	870,510	788,285
Net patient service revenue	15,773,781	16,330,937
Less provision for bad debts	626,232	575,351
Patient service revenue	\$ 15,147,549	\$ 15,755,586

#### **Charity Care**

The Hospital provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Because the Hospital does not pursue collection of amounts deemed to be charity care, they are not reported as revenue. Amounts recognized as charity care as of April 30, 2014 and 2013 are approximately \$871,000 and \$788,000, respectively.

Of the Hospital's total unrestricted operating expense reported, (approximately \$16,270,000 and \$15,926,000 during 2014 and 2013, respectively), an estimated \$481,000 and \$436,000 arose from providing services to charity patients during 2014 and 2013, respectively. The estimated costs of providing charity services are based on a calculation which applies a ratio of costs to charges to the gross uncompensated charges associated with providing care to charity patients. The ratio of cost to charges is calculated based on the Hospital's total expenses to gross patient service revenue.

#### Supplies

Supplies consist mainly of pharmaceuticals and medical supplies and are valued the lower of cost or market on a first-in first-out basis.

#### Other Current Assets

Other current assets consist of prepaid expenses, other receivables and various other current items. These assets are classified as current as they are expected to be utilized within 1 year.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

#### Contributions

Donations are recorded at fair value as revenue on the date the promise to give is irrevocable. Depending on the existence and nature of any donor restrictions, donations are reflected as increases in unrestricted, temporarily restricted, or permanently restricted net assets. When restrictions expire due to the passage of time or when the purpose is fulfilled, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the consolidated statements of operations and changes in net assets as net assets released from restrictions.

#### Assets Whose Use is Limited

Assets whose use is limited by internal board designation include cash and cash equivalents and are recorded at fair value.

Assets held by trustee include cash and cash equivalents from Hospital deposits for debt service payments and construction commitments in compliance with the debt agreements.

Donor restricted assets include cash and cash equivalents and are temporarily restricted by donors as to purpose.

#### Property and Equipment and Provision for Depreciation

Property and equipment are recorded at historical cost except for donations, which are recorded at fair market value at the date of the donation. Property and equipment include expenditures for additions and repairs that substantially increase the useful lives of existing property and equipment. Maintenance, repairs and minor renewals are expensed as incurred. Property and equipment are being depreciated over their estimated useful lives using the straight-line method.

The ranges of useful lives used in computing depreciation are as follows:

	Range of
Description	Useful Lives
Buildings and improvements	10-40 years
Equipment	3-20 years

Gifts of long-lived assets such as land, buildings, or equipment are reported as unrestricted support unless explicit donor stipulations specify how the donated assets must be used. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor restrictions about how long those long-lived assets must be maintained, expirations

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

of donor restrictions are reported when the donated or acquired long-lived assets are placed in service. During 2014 and 2013, there were no gifts of long-lived assets with restrictions.

#### Temporarily Restricted Net Assets

Temporarily restricted net assets are those whose use by the Hospital has been limited by external sources for a specific time period or purpose. When a restriction expires, temporarily restricted net assets are reclassified as unrestricted net assets and reported in the consolidated statements of operations and changes in net assets as net assets released from restrictions. Restrictions that are met within the year of receipt are reflected with unrestricted net assets. As of April 30, 2014 and 2013, temporarily restricted net assets related to the maternity and infant department were approximately \$13,000.

#### Operating Income

The consolidated statements of operations and changes in net assets include an intermediate measure of operations referred to as operating income. This intermediate measure of operations is comprised of unrestricted operating revenues and gains less operating expenses.

#### Performance Indicator

The consolidated statements of operations and changes in net assets include a performance indicator, excess revenues over expenses. Changes in unrestricted net assets that are excluded from the performance indicator include unrealized gain and loss on investments other than trading securities and contributions of long-lived assets.

#### Federal and State Income Taxes

Both the Hospital and Foundation are organized as not-for-profit corporations under Section 501(c)(3) of the United States Internal Revenue Code. The exemption is on all income except unrelated business income as noted under Section 511 of the Internal Revenue Code. Internal Revenue Code Section 513(a) defines an unrelated trade or business of an exempt organization as any trade or business which is not substantially related to the exercise or performance of its exempt purpose.

As such, the Hospital and Foundation are generally exempt from income taxes. However, the Hospital and Foundation are required to file Federal Form 990 – Return of Organization Exempt from Income Tax, which is an informational return only.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

Accounting principles generally accepted in the United States of America require management to evaluate tax positions taken by the Hospital and Foundation and recognize a tax liability if they have taken an uncertain position that more likely than not would not be sustained upon examination by various federal and state taxing authorities. Management has analyzed the tax positions taken by the Hospital and Foundation and has concluded that as of April 30, 2014 and 2013, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the accompanying consolidated financial statements. The Hospital and Foundation are subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

The Hospital and Foundation filed their federal and state income tax returns for periods through April 30, 2013. These income tax returns are generally open to examination by the relevant taxing authorities for a period of three years from the later of the date the return was filed or its due date (including approved extensions).

#### Advertising Costs

The Hospital's policy is to expense advertising costs when the advertising first takes place. Advertising expenses were approximately \$32,000 and \$45,000 in 2014 and 2013, respectively.

#### Electronic Health Records (EHR) Incentive Payments

The Hospital receives EHR incentive payments under the Medicare and Medicaid programs. To qualify for the EHR incentive payments, the Hospital must meet "meaningful use" criteria that become more stringent over time. The Hospital periodically submits and attests to its use of certified EHR technology, satisfaction of meaningful use objectives, and various patient data. These submissions generally include performance measures for each annual EHR reporting period (Federal fiscal vear ending September 30). The related EHR incentive payments are paid out over a four year transition schedule and are based upon data that is captured in the Hospital's cost reports. For Critical Access Hospitals, the payment calculation is based upon the net book value of the qualifying assets multiplied by the Medicare utilization using Medicare to total inpatient days plus 20%, not to exceed 100%. The total days are multiplied by a factor of total charges excluding charity care to total charges. Critical Access Hospitals can be reimbursed over a four year period for additional qualifying assets not claimed in the first year. The transitional factor ranges from 100% in the first payment year and decreases by 25% each payment year until it is completely phased out in the fifth year.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

The Hospital recognizes EHR incentive payments as grant income when there is reasonable assurance that the Hospital will comply with the conditions of the meaningful use objectives and any other specific grant requirements. In addition, the consolidated financial statement effects of the grants must be both recognizable and measurable. During 2014 and 2013, the Hospital recognized approximately \$930,000 and \$312,000, respectively, in EHR incentive payments as other revenue in the consolidated statement of operations and changes in net assets using the ratable recognition method. Under the ratable recognition method, the Hospital recognizes income ratably over the entire EHR reporting period when it is reasonably assured at the outset of the EHR reporting period that it will comply with the minimum requirements of the program. EHR incentive income recognized is based on management's estimate and amounts are subject to change, with such changes impacting operations in the period the changes occur.

Receipt of these funds is subject to the fulfillment of certain obligations by the Hospital as prescribed by the program, subject to future audits and may be subject to repayment upon a determination of noncompliance.

#### Reclassification

Certain items in the 2013 consolidated financial statements have been reclassified herein to conform to the current year presentation with no changes on previously reported net assets or change in net assets.

#### Subsequent Events

The Hospital has evaluated events or transactions occurring subsequent to the consolidated balance sheet date for recognition and disclosure in the accompanying consolidated financial statements through the date the consolidated financial statements are available to be issued which is July 14, 2014.

#### 2. INVESTMENTS

Investments consist of certificates of deposit (recorded at contract value), money market funds and mutual funds (recorded at fair value) as of April 30, 2014 and 2013:

	 2014	 2013
Cash and cash equivalents	\$ 112,150	\$ -0-
Certificates of deposit	643,250	641,592
Mutual funds	 902,675	 1,019,759
	\$ 1,658,075	\$ 1,661,351

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

The following is a reconciliation of investment income, included in other revenue on the consolidated statements of operations and changes in net assets for 2014 and 2013:

	 2014	 2013
Interest and dividends	\$ 24,044	\$ 26,983
Net realized and unrealized		
gain/(loss) on investments	 (3,745)	52,738
	\$ 20,299	\$ 79,721

#### 3. ASSETS WHOSE USE IS LIMITED

Assets whose use is limited include board-designated funds for capital improvements, funds designated for debt service held by trustee and donor restricted funds. The funds are recorded at fair value include the following as of April 30:

	2014	2013
Cash and cash equivalents	\$ 1,062,474	\$ 1,048,339

#### 4. FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy are described as follows:

- Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Hospital and the Foundation have the ability to access.
- Level 2: Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3: Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at April 30, 2014 and 2013.

- Money market funds: Valued based at the subscription and redemption activity at a \$1 stable net asset value (NAV). However, on a daily basis the funds are valued at their daily NAV calculated using the amortized cost of securities.
- Mutual funds: Valued at the daily closing price as reported by the fund. Mutual
  funds held by the Hospital are open-end mutual funds that are registered with the
  Securities and Exchange Commission. These funds are required to publish their
  daily NAV and to transact at that price. The mutual funds held by the Hospital are
  deemed to be actively traded.

The following table sets forth by level, within the hierarchy, the Hospital's assets and liabilities measured at fair value on a recurring basis as of April 30, 2014 and 2013 are as follows:

April 30, 2014							
	Total	Level 1		Level 1 Level 2		Level 3	
					_		
_		_		_			
\$	112,150	\$	-0-	\$	112,150	\$	-0-
	59,242		59,242		-0-		-0-
	155,880		155,880		-0-		-0-
	170,415		170,415		-0-		-0-
	53,220		53,220		-0-		-0-
			311,246		-0-		-0-
	152,672		152,672		-0-		-0-
	902,675		902,675		112,150		-0-
	1,014,825	\$	902,675	\$	224,300	\$	-0-
	643,250						
\$	1,658,075						
\$	1,062,474	\$	-0-	\$	1,062,474	\$	-0-
	\$	\$ 112,150 59,242 155,880 170,415 53,220 311,246 152,672 902,675 1,014,825	\$ 112,150 \$  59,242 155,880 170,415 53,220 311,246 152,672 902,675 1,014,825 643,250 \$ 1,658,075	Total       Level 1         \$ 112,150       \$ -0-         59,242       59,242         155,880       155,880         170,415       170,415         53,220       53,220         311,246       311,246         152,672       152,672         902,675       902,675         1,014,825       \$ 902,675         643,250       \$ 1,658,075	Total       Level 1         \$ 112,150       \$ -0-         \$ 59,242       59,242         \$ 155,880       \$ 155,880         \$ 170,415       \$ 170,415         \$ 53,220       \$ 53,220         \$ 311,246       \$ 311,246         \$ 152,672       \$ 902,675         \$ 902,675       \$ 902,675         \$ 1,014,825       \$ 902,675         \$ 1,658,075	Total         Level 1         Level 2           \$ 112,150         -0-         \$ 112,150           59,242         59,242         -0-           155,880         155,880         -0-           170,415         170,415         -0-           53,220         53,220         -0-           311,246         311,246         -0-           152,672         152,672         -0-           902,675         902,675         112,150           1,014,825         \$ 902,675         \$ 224,300           \$ 1,658,075         \$ 1,658,075	Total         Level 1         Level 2         I           \$ 112,150         \$ -0-         \$ 112,150         \$           \$ 59,242         59,242         -0-         -0-           \$ 155,880         155,880         -0-         -0-           \$ 170,415         170,415         -0-         -0-           \$ 311,246         311,246         -0-         -0-           \$ 152,672         152,672         -0-         -0-           \$ 902,675         902,675         112,150         -0-           \$ 1,014,825         \$ 902,675         \$ 224,300         \$           \$ 43,250         \$ 1,658,075         \$ 1,658,075         \$ 1,658,075

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

	April 30, 2013							
		Total	Level 1		Level 2		Level 3	
Assets Investments								
Mutual funds Large/Mid Cap International equity Emerging market Fixed income Other	\$	344,906 93,197 72,068 319,473 190,115	\$	344,906 93,197 72,068 319,473 190,115	\$	-0- -0- -0- -0-	\$	-0- -0- -0- -0-
Total mutual funds		1,019,759	\$	1,019,759	\$	-0-	\$	-0-
Certificates of deposit	\$	641,592 1,661,351						
Assets whose use is limited Cash and cash equivalents Money market funds	\$	1,048,339	\$	-0-	\$	1,048,339	\$	-0-

The Hospital's policy is to recognize transfers between levels as of the end of the reporting period. There were no transfers during 2014 and 2013.

Realized gain and loss are reported in the consolidated statements of operations and changes in net assets as a component of investment income which is included in other revenue. The market value of investments exceeded the cost by approximately \$23,000 and \$20,000 as of April 30, 2014 and 2013, respectively. The unrealized gain or loss is included in earnings for the period attributable to the change in unrealized gain or loss relating to assets held as of April 30, 2014 and 2013 and is reported in the consolidated statements of operations and changes in net assets as a component of investment income which is included in other revenue. During 2014, the Hospital recognized a net realized and unrealized loss of approximately \$4,000 compared to a net realized and unrealized gain of approximately \$53,000 in 2013.

The Hospital holds investments which are exposed to various risks such as interest rate, market, and credit. Due to the level of risk associated with these securities and the level of uncertainty related to changes in the value, it is at least reasonably possible that changes in the various risk factors will occur in the near term that could materially affect the amounts reported in the accompanying consolidated financial statements.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

#### 5. PROPERTY AND EQUIPMENT

Property and equipment consist of the following as of April 30:

	2014	2013
Land and land improvements	\$ 440,039	\$ 440,039
Buildings and improvements	17,740,105	17,740,105
Equipment	6,878,216	6,741,983
Construction in progress	132,806	197,826
	25,191,166	25,119,953
Less accumulated depreciation	9,017,688	7,828,691
	\$ 16,173,478	\$ 17,291,262

There were no significant commitments related to property and equipment as of April 30, 2014 and 2013.

#### 6. LONG-TERM DEBT

The following is the summary of long-term debt as of April 30:

	2014	2013
Loan payable to Lake City Bank dated August 4, 2004, semi- annual payments of principal and interest at variable rate (3.50% as of April 30, 2014), due January 1, 2025, secured by real property.	\$ 3,836,321	\$ 4,185,078
Loan payable to United States Department of Agriculture dated April 25, 2005, semi-annual payments of principal and interest, interest at fixed rate of 4.25%, due April 15, 2045, secured by real property.	10,960,102	11,128,231
Loan payable to Lake City Bank dated February 28, 2013, monthly payments of principal and interest at a fixed rate of 4.10%, due February 28, 2018, secured by general assets.	352,864	436,050
Loan payable to Lake City Bank dated March 14, 2014, monthly payments of principal and interest at a fixed rate of 4.24%, due March 14, 2019, secured by general assets.	409,970	-0-
Other various notes	35,263	
Less current portion	15,594,520 722,854	15,749,359 600,065
	\$ 14,871,666	\$ 15,149,294

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

Annual maturities of long-term debt for the years succeeding April 30, 2014 are as follows:

Year Ending		
April 30,		
2015	\$	722,854
2016		702,084
2017		717,257
2018		715,911
2019		639,436
Thereafter	1	12,096,978
	\$ 1	15,594,520

The Hospital's loan with Lake City Bank, dated August 4, 2004, bears interest at a variable rate equal to the prime rate, minus .50%, adjusted annually with a floor of 3.50% and a ceiling of 8.50%. The variable rate was 3.50% as of April 30, 2014 and 2013. The outstanding balance on the loan as of April 30, 2014 and 2013 was approximately \$3,836,000 and \$4,185,000, respectively. The loan is secured by the real property with a net book value of approximately \$14,414,000 and \$15,313,000 as of April 30, 2014 and 2013, respectively. Additionally, the loan is guaranteed up to 90% by the United States Department of Agriculture (USDA).

The Hospital obtained a direct construction loan, dated April 25, 2005, from the USDA in the amount of \$12 million. As of April 30, 2014 and 2013, the outstanding balance on the loan was approximately \$10,960,000 and \$11,128,000, respectively. The loan bears interest at a fixed of 4.25% to be repaid over 40 years. The loan is secured by the real property with a net book value of approximately \$14,414,000 and \$15,313,000 as of April 30, 2014 and 2013, respectively.

During 2013, the Hospital obtained a loan with Lake City Bank for the construction of a Magnetic Resonance Imaging housing unit. The loan bears interest at a fixed rate of 4.10% and is due in February of 2018. The outstanding balance on the loan as of April 30, 2014 was approximately \$353,000. The loan is secured by the general assets of the Hospital with a net book value of approximately \$374,000 and \$436,000 as of April 30, 2014 and 2013.

During 2014, the Hospital obtained a loan with Lake City Bank to assist with financing of an EHR system. The loan bears interest at a fixed rate of 4.24% and is due in March 14, 2019. The outstanding balance on the loan as of April 30, 2014 was approximately \$410,000. The loan is secured by the general assets of the Hospital with a net book value of approximately \$5,800,000 as of April 30, 2014.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

The above loan agreements require the Hospital to comply with certain restrictive covenants including maintenance of minimum debt service coverage. As of April 30, 2014, the management of the Hospital believed it was in compliance with the restrictive loan covenants.

The Hospital has a line of credit available with a local financial institution with maximum amount of \$1,000,000. The line of credit is at a variable rate of interest (4.0%) as of April 30, 2014 with a floor of 4.0% and a ceiling of 6.5% as determined by the financial institution's base rate. The Hospital had approximately \$-0- and \$855,000 outstanding on the line of credit as of April 30, 2014 and 2013, respectively. The line of credit is secured by general assets with a net book value of approximately \$1,000,000 as of April 30, 2014 and 2013. In May 2015, the amount available on the line of credit will be reduced by \$200,000. The remaining \$800,000 on the line of credit is available through October 2018.

#### 7. RETIREMENT PLAN

The Hospital has a defined contribution pension plan, which covers all eligible employees. The Hospital's contribution is limited to matching the employee's contribution up to 3% of each participant's annual salary. At various times during 2014 and 2013, the Hospital temporarily suspended the matching contribution. Pension expense was approximately \$8,000 and \$2,000 for 2014 and 2013, respectively.

#### 8. CONCENTRATIONS OF CREDIT RISK

Hospital is located in Bremen, Indiana. The Hospital grants credit without collateral to its patients, most of who are local residents and are insured under third-party payor agreements.

Percentages of patient accounts receivable and patient service revenue were as follows as of and for the years ended April 30, 2014 and 2013:

Receivables		Revenue	
2014	2013	2014	2013
39%	31%	32%	33%
13%	12%	9%	6%
30%	32%	35%	34%
14%	18%	16%	19%
4%	7%	8%	8%
100%	100%	100%	100%
	2014 39% 13% 30% 14% 4%	2014     2013       39%     31%       13%     12%       30%     32%       14%     18%       4%     7%	2014         2013         2014           39%         31%         32%           13%         12%         9%           30%         32%         35%           14%         18%         16%           4%         7%         8%

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

The Hospital maintains its cash in accounts, which at times may exceed federally insured limits. The Hospital has not experienced any losses in such accounts. The Hospital believes that it is not exposed to any significant credit risk on cash and cash equivalents.

#### 9. COMMITMENTS AND CONTINGENCIES

#### **Estimated Malpractice Costs**

The Hospital is exposed to various risks of loss related to property loss, torts, errors and omissions, and employee injuries (workers' compensation). The Hospital has purchased commercial insurance for malpractice, general liability, and employee medical claims. The Hospital is insured against medical malpractice claims under a claims-made policy, whereby only the claims reported to the insurance carrier during the policy period are covered regardless of when the incident giving rise to the claim occurred. Under the terms of the policy, the Hospital bears the risk of the ultimate costs of any individual claims exceeding \$250,000 or aggregate claims exceeding \$5,000,000 for claims asserted in the policy year. In addition, the Hospital has an umbrella policy with an additional \$5,000,000 of coverage.

#### **Litigation**

The Hospital is involved in litigation and regulatory investigations arising in the course of business. After consultation with legal counsel, management estimates that these matters will be resolved without a material adverse effect on the Hospital's future position, results from operations or cash flows.

#### 10. SELF FUNDED HEALTH INSURANCE

The Hospital is self-funded for medical and related health benefits provided to employees and their families. A third-party administrator has been retained to process and present all benefit claims to the Hospital for payment. A stop/loss policy through commercial insurance covers individual claims in excess of \$30,000 per individual per policy year with an aggregate limit of approximately \$1,000,000 per individual.

Claim expenditures and liabilities are reported when it is probable that a loss has occurred and the amount of the loss can be reasonably estimated. These losses include an estimate of claims that have been incurred but not reported. Self-funded health insurance and related expenses were \$925,000 and \$878,000 in 2014 and 2013, respectively.

#### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS APRIL 30, 2014 AND 2013

#### 11. FUNCTIONAL EXPENSES

The Hospital is an acute care hospital providing inpatient, outpatient and other ancillary services to the residents within its geographical region. Expenses related to providing these services for 2014 and 2013 approximate the following:

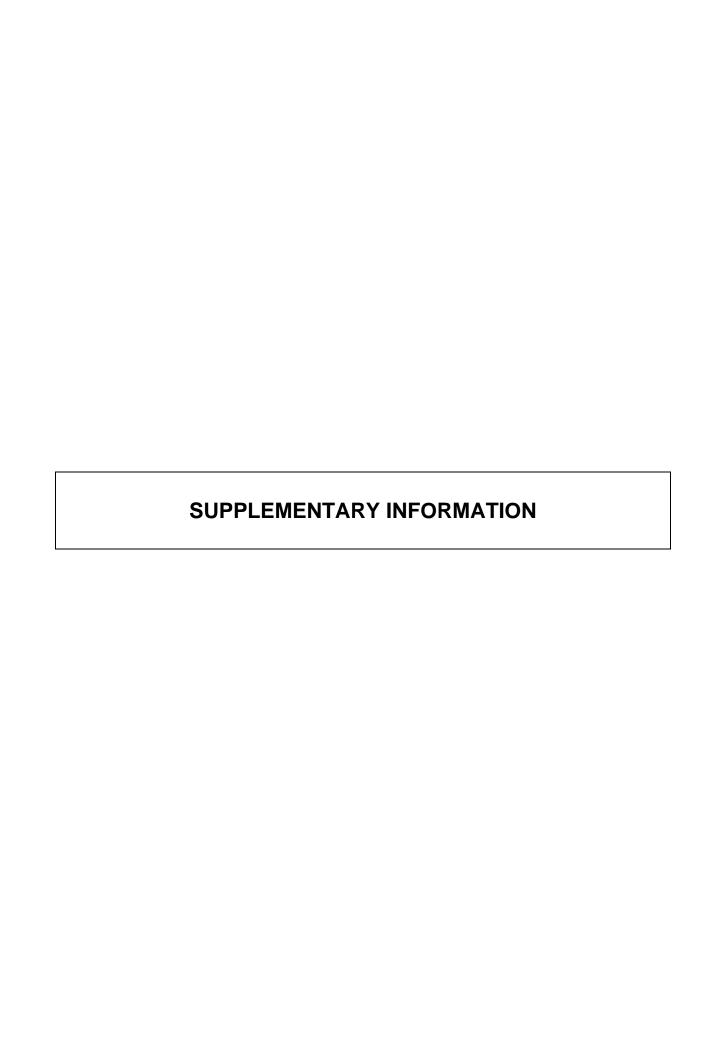
2014	2013
\$ 13,230,553	\$ 12,950,758
3,039,081	2,974,260
16,269,634	15,925,018
73,461	72,459
\$ 16,343,095	\$ 15,997,477
	3,039,081 16,269,634 73,461

Certain costs have been allocated among the health care services, administrative and general and fundraising categories based on the actual direct expenditures and cost allocations based upon time spent by the Hospital's personnel. Although the methods used were appropriate, alternative methods may provide different results.

#### 12. OPERATING LEASES

The Hospital has various non-cancelable lease agreements for medical and office equipment through 2019. Equipment rent expense was approximately \$768,000 and \$723,000 for 2014 and 2013, respectively. Minimum required lease payments are as follows:

Year Ending April 30,	
2015	\$ 712,000
2016	619,000
2017	453,000
2018	187,000
2019	38,000
	\$ 2,009,000



# CONSOLIDATING BALANCE SHEETS APRIL 30, 2014

ASSETS	Hospital	Foundation	Eliminations	Total
Current assets				
Cash and cash equivalents	\$ 1,029,299	\$ 353,602	\$ -0-	\$ 1,382,901
Investments	643,250	1,014,825	-0-	1,658,075
Patient accounts receivable, net	2,842,911	-0-	-0-	2,842,911
Supplies	150,980	-0-	-0-	150,980
Other current assets	785,368	-0-	(44,880)	740,488
Total current assets	5,451,808	1,368,427	(44,880)	6,775,355
Assets whose use is limited				
Board designated for capital improvements	327,204	-0-	-0-	327,204
Trustee held	722,270	-0-	-0-	722,270
Donor restricted	-0-	13,000	-0-	13,000
Total assets whose use is limited	1,049,474	13,000	-0-	1,062,474
Property and equipment, net	16,173,478	-0-	-0-	16,173,478
Other assets	-0-	13,918	-0-	13,918
Total assets	\$ 22,674,760	\$ 1,395,345	\$ (44,880)	\$ 24,025,225
LIABILITIES AND NET ASSETS Current liabilities				
Accounts payable	\$ 1,065,647	\$ 51,372	\$ (44,880)	\$ 1,072,139
Accrued wages and related expenses	523,442	-0-	-0-	523,442
Other accrued liabilities	66,375	-0-	-0-	66,375
Estimated third-party settlements	281,027	-0-	-0-	281,027
Current portion long-term debt	722,854	-0-	-0-	722,854
Total current liabilities	2,659,345	51,372	(44,880)	2,665,837
Long-term debt, less current portion	14,871,666	-0-	-0-	14,871,666
Total liabilities	17,531,011	51,372	(44,880)	17,537,503
Net assets				
Unrestricted	5,143,749	1,330,973	-0-	6,474,722
Temporarily restricted	-0-	13,000	-0-	13,000
Total net assets	5,143,749	1,343,973	-0-	6,487,722
Total liabilities and net assets	\$ 22,674,760	\$ 1,395,345	\$ (44,880)	\$ 24,025,225

# CONSOLIDATING BALANCE SHEETS APRIL 30, 2013

ASSETS	Hospital	Foundation	Eliminations	Total
Current assets Cash and cash equivalents Investments Patient accounts receivable, net Supplies Other current assets Total current assets	\$ 698,170 641,592 2,735,438 125,172 682,469 4,882,841	\$ 349,114 1,019,759 -0- -0- -0- 1,368,873	\$ -0- -0- -0- (44,880) (44,880)	\$ 1,047,284 1,661,351 2,735,438 125,172 637,589 6,206,834
Assets whose use is limited  Board designated for capital improvements Trustee held Donor restricted Total assets whose use is limited	341,782 693,557 -0- 1,035,339	-0- -0- 13,000 13,000	-0- -0- -0- -0-	341,782 693,557 13,000 1,048,339
Property and equipment, net	17,291,262	-0-	-0-	17,291,262
Other assets Total assets	-0- \$ 23,209,442	14,124 \$ 1,395,997	-0- \$ (44,880)	14,124 \$ 24,560,559
LIABILITIES AND NET ASSETS Current liabilities Accounts payable Accrued wages and related expenses Other accrued liabilities Estimated third-party settlements Lines of credit Current portion long-term debt Total current liabilities	\$ 701,720 629,051 68,073 396,143 855,487 600,065 3,250,539	\$ 47,489 -0- -0- -0- -0- -0- 47,489	\$ (44,880) -0- -0- -0- -0- (44,880)	\$ 704,329 629,051 68,073 396,143 855,487 600,065 3,253,148
Long-term debt, less current portion  Total liabilities	15,149,294	-0-	-0-	15,149,294
	18,399,833	47,489	(44,880)	18,402,442
Net assets Unrestricted Temporarily restricted Total net assets Total liabilities and net assets	4,809,609 -0- 4,809,609 \$ 23,209,442	1,335,508 13,000 1,348,508 \$ 1,395,997	-0- -0- -0- \$ (44,880)	6,145,117 13,000 6,158,117 \$ 24,560,559
i stai nabilitios and Het assets	Ψ 20,200,772	Ψ 1,000,001	Ψ (++,000)	Ψ 27,000,000

# CONSOLIDATING STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS YEAR ENDED APRIL 30, 2014

Harrist to the second control of the	Hospital	Foundation	Eliminations	Total
Unrestricted operating revenue and gains Net patient service revenue	\$ 15,773,781	\$ -0-	\$ -0-	\$ 15,773,781
Less provision for bad debts	626,232	ъ -0-	5 -0- -0-	626,232
Net patient service revenue	020,232			020,232
net of provision for bad debts	15,147,549	-0-	-0-	15,147,549
Grants and other public support	76,957	-0-	-0-	76,957
Other revenue	1,312,739	-0-	(1,800)	1,310,939
Total unrestricted operating revenue and gains	16,537,245	-0-	(1,800)	16,535,445
Operating expenses				
Salaries and wages	5,879,725	-0-	38,641	5,918,366
Employee benefits	1,408,096	-0-	3,822	1,411,918
Physician fees	1,270,574	-0-	-0-	1,270,574
Medical and surgical supplies	1,608,445	-0-	-0-	1,608,445
Other supplies	187,087	-0-	600	187,687
Purchased services	1,798,681	-0-	-0-	1,798,681
Equipment rentals	768,148	-0-	-0-	768,148
Utilities	363,358	-0-	-0-	363,358
Insurance	126,360	-0-	-0-	126,360
Depreciation	1,212,199	-0-	-0-	1,212,199
Interest	665,263	-0-	-0-	665,263
HAF Program	597,259	-0-	-0-	597,259
Other	341,376	-0-	-0-	341,376
Total operating expenses	16,226,571	-0-	43,063	16,269,634
Operating income	310,674	-0-	(44,863)	265,811
Nonoperating revenues (expenses)				
Foundation revenues	-0-	137,255	-0-	137,255
Foundation expenses	-0-	(141,790)	68,329	(73,461)
Total nonoperating revenues (expenses)	-0-	(4,535)	68,329	63,794
Excess revenues over (under) expenses	310,674	(4,535)	23,466	329,605
Other changes in unrestricted net assets				
Contributions from Foundation	23,466	-0-	(23,466)	-0-
Change in unrestricted net assets	334,140	(4,535)	-0-	329,605
Net assets				
Beginning of year	4,809,609	1,348,508	-0-	6,158,117
End of year	\$ 5,143,749	\$ 1,343,973	\$ -0-	\$ 6,487,722

# CONSOLIDATING STATEMENTS OF OPERATIONS AND CHANGES IN NET ASSETS YEAR ENDED APRIL 30, 2013

	Hospital	Foundation	Eliminations	Total
Unrestricted operating revenue and gains				
Net patient service revenue	\$ 16,330,937	\$ -0-	\$ -0-	\$ 16,330,937
Less provision for bad debts	575,351	-0-	-0-	575,351
Net patient service revenue net of provision for bad debts	15,755,586	-0-	-0-	15,755,586
Grants and other public support	141,348	-0-	-0-	141,348
Other revenue	652,320	-0-	(1,800)	650,520
Total unrestricted operating revenue and gains	16,549,254	-0-	(1,800)	16,547,454
	10,010,201	· ·	(1,000)	10,017,101
Operating expenses	0.445.440		00.057	0.404.405
Salaries and wages	6,145,448	-0-	38,657	6,184,105
Employee benefits	1,384,294	-0-	3,823	1,388,117
Physician fees	587,378	-0-	-0-	587,378
Medical and surgical supplies	1,594,991	-0-	-0-	1,594,991
Other supplies	187,532	-0-	600	188,132
Purchased services	1,880,857	-0-	-0-	1,880,857
Equipment rentals	722,535	-0-	-0-	722,535
Utilities	336,177	-0-	-0-	336,177
Insurance	154,933	-0-	-0-	154,933
Depreciation	1,219,640	-0-	-0-	1,219,640
Interest	679,903	-0-	-0-	679,903
HAF program	528,941	-0-	-0-	528,941
Other	459,309	-0-	-0-	459,309
Total operating expenses	15,881,938	-0-	43,080	15,925,018
Operating income	667,316	-0-	(44,880)	622,436
Nonoperating revenues (expenses)				
Foundation revenues	-0-	210,635	-0-	210,635
Foundation expenses	-0-	(268,797)	196,338	(72,459)
Total nonoperating revenues (expenses)	-0-	(58,162)	196,338	138,176
Excess revenues over (under) expenses	667,316	(58,162)	151,458	760,612
Other changes in unrestricted net assets				
Contributions from Foundation	151,458	-0-	(151,458)	-0-
Change in unrestricted net assets	818,774	(58,162)	-0-	760,612
Temporarily restricted net assets		,		
Contributions	-0-	13,000	-0-	13,000
Change in net assets	818.774	(45,162)	-0-	773,612
-	010,774	(43,102)	-0-	770,012
Net assets	0.000.00=	4 000 075	•	E 00 1 E0 =
Beginning of year	3,990,835	1,393,670	-0-	5,384,505
End of year	\$ 4,809,609	\$ 1,348,508	\$ -0-	\$ 6,158,117



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# REPORT OF INDEPENDENT AUDITORS 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 Community Hospital of Bremen, Inc. Bremen, Indiana

#### Report on the Consolidated Financial Statements

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 consolidated financial statements of Community Hospital of Bremen, Inc. (Hospital), which comprise the consolidated balance sheet as of April 30, 2014, and the related consolidated statements of operations and changes in net assets, and cash flows for the year then ended, and the related notes to the consolidated financial statements, and have issued our report thereon dated July 14, 2014.

#### Internal Control Over Financial Reporting

In planning and performing our audit of the consolidated financial statements, we considered the Hospital's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the consolidated 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 Hospital's consolidated 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.

Board of Directors Community Hospital of Bremen, Inc. Bremen, Indiana

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 the Hospital's consolidated financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of consolidated financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests 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 our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the Hospital'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 Hospital's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Blue & Co., LLC

Indianapolis, Indiana July 14, 2014