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January 25, 2018

Board of Directors
Adams County Memorial Hospital
1100 Mercer Avenue, P.O. Box 151
Decatur, IN 46733

We have reviewed the report prepared by Adams County Memorial Hospital and opined upon by Somerset CPAs, Independent Public Accountants, for the period January 1, 2016 to December 31, 2016. Per the *Independent Auditors' Report* the financial statements included in the report present fairly the financial condition of Adams County Memorial Hospital as of December 31, 2016 and the results of its operations for the period then ended, on the basis of accounting described in the report.

In our opinion, Somerset CPAs prepared all required independent auditor's reports in accordance with generally accepted auditing standards and guidelines established by the State Board of Accounts.

The report is filed with this letter in our office as a matter of public record.

A handwritten signature in blue ink that reads "Paul D. Joyce".

Paul D. Joyce, CPA
State Examiner

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF
ADAMS COUNTY, INDIANA
Consolidated Financial Statements
Year Ended December 31, 2016**

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA**

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Independent Auditors' Report

To the Governing Board of the Hospital
ADAMS COUNTY MEMORIAL HOSPITAL
Decatur, Indiana

We have audited the accompanying consolidated financial statements of ADAMS COUNTY MEMORIAL HOSPITAL (Hospital), a component unit of Adams County, Indiana, which comprise the consolidated balance sheet as of December 31, 2016, and the related consolidated statements of revenues, expenses and changes in net position, and cash flows for the year then ended and the related notes to the consolidated financial statements.

Management's Responsibility for the 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.

Auditors' Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the Uniform Compliance Guidelines for Audit of State and Local Governments by Authorized Independent Public Accountants, issued by the Indiana State Board of Accounts. Those standards require that we plan and perform the audit 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 entity'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 entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

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

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of the Hospital, a component unit of Adams County, Indiana, as of December 31, 2016, and the results of its operations and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Emphasis of Matter Regarding Omission of Management's Discussion and Analysis

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



December 15, 2017

ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Consolidated Balance Sheet
December 31, 2016

	<u>Primary Government</u>	<u>Discrete Component Unit</u>	<u>Total Reporting Entity</u>
Assets and Deferred Outflows			
Current Assets			
Cash and cash equivalents	\$ 67,851,039	\$ 226,638	\$ 68,077,677
Patient accounts receivable, net of estimated allowance for uncollectible accounts of \$16,268,785	42,959,095	0	42,959,095
Supplies and other current assets	3,651,734	300	3,652,034
Total Current Assets	<u>114,461,868</u>	<u>226,938</u>	<u>114,688,806</u>
Investments	<u>6,469,246</u>	<u>0</u>	<u>6,469,246</u>
Held by Trustee for Debt Service	<u>4,575,820</u>	<u>0</u>	<u>4,575,820</u>
Capital Assets			
Land and construction in progress	1,904,689	0	1,904,689
Depreciable capital assets, net	49,528,149	0	49,528,149
Total Capital Assets, Net	<u>51,432,838</u>	<u>0</u>	<u>51,432,838</u>
Other Assets	<u>1,339,923</u>	<u>0</u>	<u>1,339,923</u>
Total Assets	<u>178,279,695</u>	<u>226,938</u>	<u>178,506,633</u>
Deferred Outflows - Deferred Loss on Bond Refunding			
	<u>1,007,023</u>	<u>0</u>	<u>1,007,023</u>
Total Assets and Deferred Outflows	<u>\$ 179,286,718</u>	<u>\$ 226,938</u>	<u>\$ 179,513,656</u>

See accompanying notes.

ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Consolidated Balance Sheet (Continued)
December 31, 2016

	<u>Primary Government</u>	<u>Discrete Component Unit</u>	<u>Total Reporting Entity</u>
Liabilities and Net Position			
Current Liabilities			
Current maturities of long-term debt	\$ 1,492,329	\$ 0	\$ 1,492,329
Line of credit	3,070,211	0	3,070,211
Accounts payable and accrued expenses	62,139,062	0	62,139,062
Estimated third-party settlements	1,633,539	0	1,633,539
Other current liabilities	2,877,998	0	2,877,998
	<u>71,213,139</u>	<u>0</u>	<u>71,213,139</u>
Total Current Liabilities			
Long-term Liabilities			
Long-term debt, less current maturities	30,273,689	0	30,273,689
Other long-term liabilities	1,040,136	0	1,040,136
	<u>31,313,825</u>	<u>0</u>	<u>31,313,825</u>
Total Long-term Liabilities			
Total Liabilities	<u>102,526,964</u>	<u>0</u>	<u>102,526,964</u>
Net Position			
Net investment in capital assets	20,044,139	0	20,044,139
Restricted for debt service	4,575,820	0	4,575,820
Unrestricted	52,139,795	226,938	52,366,733
	<u>76,759,754</u>	<u>226,938</u>	<u>76,986,692</u>
Total Net Position			
Total Liabilities and Net Position	<u>\$ 179,286,718</u>	<u>\$ 226,938</u>	<u>\$ 179,513,656</u>

See accompanying notes.

ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Consolidated Statement of Revenues, Expenses and Changes in Net Position
For the Year Ended December 31, 2016

	<u>Primary Government</u>	<u>Discrete Component Unit</u>	<u>Total Reporting Entity</u>
Operating Revenue			
Net patient service revenue	\$ 312,500,485	\$ 0	\$ 312,500,485
Other operating revenue	3,382,948	0	3,382,948
Total Operating Revenue	<u>315,883,433</u>	<u>0</u>	<u>315,883,433</u>
Operating Expenses			
Salaries, wages, benefits and contracted payroll	172,264,036	0	172,264,036
Supplies	27,576,633	0	27,576,633
Insurance	8,568,785	0	8,568,785
Facility and equipment leases	22,446,324	0	22,446,324
Utilities	7,186,073	0	7,186,073
Contracted services	30,226,971	0	30,226,971
Depreciation and amortization	5,283,192	0	5,283,192
Other expenses	32,444,517	159,079	32,603,596
Total Operating Expenses	<u>305,996,531</u>	<u>159,079</u>	<u>306,155,610</u>
Operating Income (Loss)	<u>9,886,902</u>	<u>(159,079)</u>	<u>9,727,823</u>
Nonoperating Revenues (Expenses)			
Investment income	690,806	513	691,319
Interest expense	(1,384,610)	0	(1,384,610)
Other nonoperating expenses	(876)	0	(876)
Total Nonoperating Revenues (Expenses)	<u>(694,680)</u>	<u>513</u>	<u>(694,167)</u>
Excess of Revenues Over Expenses Before Capital Grants and Contributions	9,192,222	(158,566)	9,033,656
Capital Grants and Contributions	<u>1,363,062</u>	<u>164,987</u>	<u>1,528,049</u>
Increase in Net Position	10,555,284	6,421	10,561,705
Net Position, Beginning of Year	<u>66,204,470</u>	<u>220,517</u>	<u>66,424,987</u>
Net Position, End of Year	<u>\$ 76,759,754</u>	<u>\$ 226,938</u>	<u>\$ 76,986,692</u>

See accompanying notes.

ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Consolidated Statement of Cash Flows
For the Year Ended December 31, 2016

	Primary Government	Discrete Component Unit	Total
Operating Activities			
Receipts from and on behalf of patients	\$ 306,463,465	\$ 0	\$ 306,463,465
Payments to suppliers and contractors	(115,844,291)	(159,229)	(116,003,520)
Payments to employees	(171,753,103)	0	(171,753,103)
Other receipts, net	3,175,536	0	3,175,536
Net cash provided by (used in) operating activities	<u>22,041,607</u>	<u>(159,229)</u>	<u>21,882,378</u>
Capital and Related Financing Activities			
Capital grants and contributions	1,363,062	164,987	1,528,049
Net receipts on line of credit	2,488,014	0	2,488,014
Borrowings on long-term debt	150,000	0	150,000
Principal paid on long-term debt	(1,274,474)	0	(1,274,474)
Interest paid on long-term debt	(1,418,762)	0	(1,418,762)
Acquisition and construction of capital assets	(6,425,201)	0	(6,425,201)
Net cash provided by (used in) capital and related financing activities	<u>(5,117,361)</u>	<u>164,987</u>	<u>(4,952,374)</u>
Cash Flows from Investing Activities			
Investment income	690,806	513	691,319
Redemption of certificates of deposit	11,698,953	0	11,698,953
Purchase of certificates of deposit	(3,725,216)	0	(3,725,216)
Net cash provided by investing activities	<u>8,664,543</u>	<u>513</u>	<u>8,665,056</u>
Net Increase in Cash and Cash Equivalents	25,588,789	6,271	25,595,060
Cash and Cash Equivalents, Beginning of Year	<u>46,838,070</u>	<u>220,367</u>	<u>47,058,437</u>
Cash and Cash Equivalents, End of Year	<u><u>\$ 72,426,859</u></u>	<u><u>\$ 226,638</u></u>	<u><u>\$ 72,653,497</u></u>
Reconciliation of Cash and Cash Equivalents to the Balance Sheet			
Cash and cash equivalents in current assets	\$ 67,851,039	\$ 226,638	\$ 68,077,677
Restricted cash and cash equivalents	<u>4,575,820</u>	<u>0</u>	<u>4,575,820</u>
Total Cash and Cash Equivalents	<u><u>\$ 72,426,859</u></u>	<u><u>\$ 226,638</u></u>	<u><u>\$ 72,653,497</u></u>

See accompanying notes.

ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Consolidated Statement of Cash Flows (Continued)
For the Year Ended December 31, 2016

	<u>Primary Government</u>	<u>Discrete Component Unit</u>	<u>Total</u>
Reconciliation of Operating Income to Net Cash Provided by (Used In) Operating Activities			
Operating income (loss)	\$ 9,886,902	\$ (159,079)	\$ 9,727,823
Adjustments to reconcile operating income (loss) to net cash flows provided by (used in) operating activities:			
Depreciation and amortization	5,283,192	0	5,283,192
Provision for uncollectible accounts	1,101,602	0	1,101,602
Changes in operating assets and liabilities:			
Patient accounts receivable	(7,138,622)	0	(7,138,622)
Supplies and other current assets	2,316,123	(150)	2,315,973
Other assets related to operating activities	(207,412)	0	(207,412)
Accounts payable and accrued expenses	13,270,179	0	13,270,179
Other current liabilities	(1,440,535)	0	(1,440,535)
Estimated third-party settlements	(1,163,642)	0	(1,163,642)
Other liabilities related to operating activities	133,820	0	133,820
Net cash provided by (used in) operating activities	<u>\$ 22,041,607</u>	<u>\$ (159,229)</u>	<u>\$ 21,882,378</u>

See accompanying notes.

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Notes to Consolidated Financial Statements
December 31, 2016**

Note 1 - Nature of Operations and Summary of Significant Accounting Policies:

Nature of Operations and Reporting Entity

Adams County Memorial Hospital (Hospital) is a county-owned facility and operates under the Indiana County Hospital Law, Indiana Code 16-22-2-2. The Hospital provides acute inpatient and outpatient health care.

The Board of County Commissioners of Adams County appoints the Governing Board of the Hospital and a financial benefit/burden relationship exists between Adams County and the Hospital. For these reasons, the Hospital is considered a component unit of Adams County.

The Hospital also operates Adams Woodcrest, a Continuing Care Retirement Community (CCRC), consisting of Woodcrest Nursing Center, a 143-bed nursing facility; Adams Evergreen Assisted Living, a 34-apartment assisted living community; Woodcrest Independent Living with 42 villas and 48 apartments. The Hospital also operates Adams Heritage, a 61-bed nursing facility. The Hospital owns and operates Physicians Office Practices. Adams Health Network is a financial entity created to accumulate and then assign shared costs to each of the six aforementioned entities. Adams Health Network also performs certain administrative functions for all entities. The Hospital leases certain office buildings to multiple independent physicians. In addition, the Hospital employs and operates family medical practices, general surgical practices and an orthopedic surgery practice as departments of the Hospital.

The accompanying consolidated financial statements present the activities of the Hospital (primary government) and its significant component units. The discretely presented component unit discussed below is included in the Hospital's reporting entity because of the significance of its' operational or financial relationship with the Hospital. Discretely presented component units are involved in activities of an operational nature independent from the government; their transactions are reported in a separate column in the basic consolidated financial statements to emphasize that it is legally separate from the Hospital.

Long-term Care Operations

The Hospital owns the operations of 41 long-term care facilities by way of arrangements with the Managers of the facilities. These facilities provide nursing and therapy services. Gross revenues from the operation of the facilities are the property of the Hospital and the Hospital is responsible for the associated operating expenses and working capital requirements. While the management and related lease agreements are in effect, the performance of all activities of the Managers shall be on behalf of the Hospital and the Hospital retains the authority and legal responsibility for the operation of the facilities.

The Hospital entered into lease agreements with the long-term care facilities, collectively referred to as the Lessors, to lease the facilities managed by the Managers. Additionally, the Hospital entered into agreements with the Managers to manage the above-leased facilities on behalf of the Hospital. As part of the agreements entered into, the Hospital pays the Managers a management fee which consists of base management fees, subordinated management fees and incentive payments. The agreements expire at various times through 2019.

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Notes to Consolidated Financial Statements
December 31, 2016**

Note 1 - Nature of Operations and Summary of Significant Accounting Policies (Continued):

Long-term Care Operations (Continued)

All parties involved can terminate the agreement without cause with 90 days written notice. The terms of these agreements are automatically renewed at the end of each term on a two-year basis.

Discretely Presented Component Unit

The Adams County Memorial Hospital Foundation (Foundation) is a significant discretely presented component unit of the Hospital. The primary government appoints a voting majority of the Foundation's board and a financial benefit/burden relationship exists between the Hospital and the Foundation.

A separate audit report is not prepared for the individual component unit.

Enterprise Fund Accounting

The Hospital utilizes the enterprise fund method of accounting whereby revenue and expenses are recognized on the accrual basis of accounting. Revenues and expenses are subject to accrual.

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 disclosures of contingent assets and liabilities at the date of the consolidated financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash and Cash Equivalents

Cash and cash equivalents include demand deposits and investments in highly liquid debt instruments with an original maturity date of three months or less. The carrying amount reported in the Consolidated Balance Sheet for cash and cash equivalents approximates its fair value. The Hospital's financial instruments that are exposed to concentrations of credit risk consist primarily of cash and cash equivalents. At times, such amounts may be in excess of the FDIC insured limit. The Hospital has never experienced any losses related to these balances.

Investments

Short-term investments are investments with remaining maturities of up to 90 days. Statutes authorize the Hospital to invest in interest-bearing deposit accounts, passbook savings accounts, certificates of deposit, money market deposit accounts, mutual funds, pooled fund investments, securities backed by the full faith and credit of the United States Treasury and repurchase agreements. The statutes require that repurchase agreements be fully collateralized by U.S. Government or U.S. Government Agency obligations.

ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Notes to Consolidated Financial Statements
December 31, 2016

Note 1 - Nature of Operations and Summary of Significant Accounting Policies (Continued):

Investments (Continued)

Certificates of deposit, demand deposits and similar nonparticipating negotiable instruments that are not reported as cash and cash equivalents are reported as investments at cost.

Debt securities are reported at fair value. Debt securities are defined as securities backed by the full faith and credit of the United States Treasury or fully insured or guaranteed by the United States or any United States government agency. Open-end mutual funds are reported at fair value.

Money market investments that mature within one year or less at the date of their acquisition are reported at amortized cost. Other money market investments are reported at fair value. Other investments are generally reported at fair value.

Investment income, including changes in the fair value of investments, is reported as nonoperating revenues in the Consolidated Statement of Revenues, Expenses and Changes in Net Position.

Limited Use Investments and Assets

Limited use assets are stated at fair market value in the financial statements. These assets include investments designated by the Hospital Board for internal purposes. These investments consist primarily of cash and cash equivalents, certificates of deposit stated at contract value, U.S. government securities, mutual funds and corporate stock. Investment interest, dividends, gains and losses, both realized and unrealized, are included in nonoperating revenues (expenses) in the Consolidated Statement of Revenues, Expenses and Changes in Net Position.

Supplies

Inventories of drugs and other supplies are stated at the lower of cost (first-in, first-out) or market and are included within other current assets in the Hospital's Consolidated Balance Sheet.

Capital Assets and Depreciation

Capital assets, which include land, land improvements, buildings and improvements, and equipment, are reported at actual or estimated historical cost based on appraisals or deflated current replacement cost. Contributed or donated assets are reported at estimated fair value at the time received.

The Hospital provides for depreciation of property and equipment using annual rates, which are sufficient to depreciate the cost of depreciable assets over their estimated useful lives using the straight-line method.

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Notes to Consolidated Financial Statements
December 31, 2016**

Note 1 - Nature of Operations and Summary of Significant Accounting Policies (Continued):

Capital Assets and Depreciation (Continued)

The range of useful lives in computing depreciation is as follows:

<u>Description</u>	<u>Range of Useful Lives</u>
Land improvements	3 - 40 years
Buildings	5 - 40 years
Fixed equipment	3 - 29 years
Major moveable equipment	3 - 23 years

For depreciated assets, the cost of normal maintenance and repairs that do not add to the value of the asset or materially extend asset lives are not capitalized and are expenses as incurred.

Major outlays for capital assets and improvements are capitalized as projects are constructed. Interest incurred during the construction phase of capital assets is included as part of the capitalized value of the assets constructed.

Deferred Outflows of Resources

A deferred outflow of resources is a consumption of net position by the Hospital that is applicable to a future reporting period. Deferred outflows of resources are reported in the consolidated balance sheet, but are not recognized in the financial statements as expenses until the periods to which they relate. Deferred outflows of resources of the Hospital consist of deferred losses on debt refundings (defeasance costs).

Compensated Absences

All employees earn paid time off ("PTO") at rates from 18 days to 33 days per year based upon the number of years of service. PTO accumulates to a maximum of 60 days. Paid days off are accrued when incurred and reported as a liability in the consolidated balance sheet.

Net Position

Net assets of the Hospital are classified in three components:

Net investment in capital assets consist of capital assets net of accumulated depreciation and are reduced by the current balances of any outstanding borrowings used to finance the purchase or construction of those assets.

Restricted expendable and nonexpendable net assets are noncapital net assets that must be used for a particular purpose, as specified by creditors, grantors, contributors or enabling legislation external to the Hospital, including amounts deposited with trustees as required by revenue bond indentures, discussed in Note 8.

Unrestricted net assets are remaining net assets that do not meet the definition of invested in capital assets net of related debt or restricted.

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Notes to Consolidated Financial Statements
December 31, 2016**

Note 1 - Nature of Operations and Summary of Significant Accounting Policies (Continued):

Patient Accounts Receivable and Patient Service Revenues

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. Patient revenues and the related accounts receivable are recorded at the time services to patients are performed. Accounts receivable for patients, insurance companies and governmental agencies are based on gross charges net of an allowance for contractual adjustments and interim payment advances. The allowance for contractual adjustments and interim payment advances is based on expected payment rates from payors based on current reimbursement methodologies. This amount also includes amounts received as interim payments against unpaid claims by certain payors. Management estimates an allowance for doubtful accounts receivable based on evaluations of historical losses, current economic conditions and other factors unique to the Hospital's customer base.

Net patient service revenue represents 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.

Charity Care

The Hospital has a policy of providing charity care to patients who are unable to pay for services provided by the Hospital. Such patients are identified based on financial information obtained from the patient and subsequent analysis. Because the Hospital does not expect payment, estimated charges for charity are not included in revenue. Charges excluded from revenue under the Hospital's charity care policy were approximately \$206,000 for 2016.

Grants and Contributions

From time to time, the Hospital receives grants from Adams County and the State of Indiana as well as contributions from individuals and private organizations. Revenues from grants and contributions (including contributions of capital assets) are recognized when all 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 nonoperating revenues. Amounts restricted to capital acquisitions are reported after nonoperating revenues and expenses.

Endowments

Endowments are provided to the Hospital on a voluntary basis by individuals and private organizations. Permanent endowments require that the principal or corpus of the endowment be retained in perpetuity. If a donor has not provided specific instructions, state law permits the Governing Board of the Hospital to authorize for expenditure the net appreciation of the investments of endowment funds.

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Notes to Consolidated Financial Statements
December 31, 2016**

Note 1 - Nature of Operations and Summary of Significant Accounting Policies (Continued):

Restricted Resources

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

Operating Revenues, Expenses and Changes in Net Position

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

Income Taxes

The Hospital is a governmental entity organized under the state laws of Indiana. The Hospital is generally exempt from federal income tax under Section 115 of the Internal Revenue Code of 1986. As a governmental entity, the Hospital is not required to file Federal Form 990 – Return of Organization Exempt from Income Tax.

The Foundation is organized as a not-for-profit corporation under Section 501(c)(3) of the United States Internal Revenue Code. As such, the Foundation is generally exempt from income taxes. However, the Foundation is required to file Federal Form 990 – Return of Organization Exempt from Income Tax. The Foundation has filed its federal and state income tax returns for periods through December 31, 2016. 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).

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 these organizations 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 these organizations, and has concluded that as of December 31, 2016, 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.

Advertising and Community Relations

The Hospital records advertising and community relations expense in the period incurred. Total expense for advertising and community relations was approximately \$650,000 for the year ended December 31, 2016.

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Notes to Consolidated Financial Statements
December 31, 2016**

Note 1 - Nature of Operations and Summary of Significant Accounting Policies (Continued):

Medical Malpractice

Malpractice insurance coverage is provided under a claims-made policy. Should the claims-made policy be terminated, the Hospital has the option to purchase insurance for claims having occurred during its term but reported subsequently.

The Indiana Medical Malpractice Act provides for a maximum recovery of \$1,250,000 per occurrence (\$7,500,000 annual aggregate) with the first \$250,000 covered by the Hospital's Insurance and the remainder by the Fund.

Note 2 - Net Patient Service Revenue:

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. A summary of the payment arrangements with major third-party payors follows.

Medicare

Hospital inpatient acute care services rendered to traditional Medicare program beneficiaries are paid based on a cost reimbursement methodology. The Hospital is reimbursed for cost reimbursable items at an interim rate with a final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicare administrative contractor. Hospital inpatient psychiatric services and skilled nursing care are paid based on prospectively determined rates. Outpatient hospital services are paid based on a percent of submitted charges (adjusted at least annually) and fee schedules. Physician services are paid based on a fee schedule. Services to beneficiaries enrolled in Medicare Advantage plans are paid through a variety of methodologies including per diem rates, fee schedules and percent of submitted charges.

Medicaid

Inpatient services rendered to Medicaid program beneficiaries are reimbursed based on diagnosis. Outpatient services are reimbursed based on a fee schedule.

The Hospital is also eligible for Indiana Medicaid Supplemental programs including Medicaid Disproportionate Share Hospital (DSH) and Municipal Hospital Upper Payment Limit (UPL) programs. These programs are administered by the State of Indiana, but rely on Federal funding.

Revenue from the Medicare and Medicaid programs accounted for approximately 45% and 10%, respectively, of the Hospital's net patient revenue for the year ended December 31, 2016. Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term.

**ADAMS COUNTY MEMORIAL HOSPITAL
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Note 2 - Net Patient Service Revenue (Continued):

Other Payors

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

The following is a summary of net patient service revenue for 2016:

	<u>Primary Government</u>
Patient service revenue	
Inpatient	\$ 22,481,820
Outpatient	75,572,274
Long-term care operations	<u>296,608,362</u>
Gross patient service revenue	<u>394,662,456</u>
Deductions from revenue	
Contractual allowances	76,686,985
Provision for bad debts	5,268,662
Charity care	<u>206,324</u>
Total deductions from revenue	<u>82,161,971</u>
Net patient service revenue	<u><u>\$ 312,500,485</u></u>

Note 3 - Deposits and Investments:

Deposits

Custodial credit risk is the risk that, in the event of a bank failure, the government's deposits may not be returned to it. Indiana Code 16-22-3-16 allows a Hospital Governing Board to deposit public funds in a financial institution. At December 31, 2016, the Hospital had deposit balances in the amount of approximately \$78,763,000.

The bank balances were insured by the Federal Deposit Insurance Corporation or the Indiana Public Deposit Insurance Fund, which covers all public funds held in approved depositories.

**ADAMS COUNTY MEMORIAL HOSPITAL
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Notes to Consolidated Financial Statements
December 31, 2016**

Note 3 - Deposits and Investments (Continued):

Statutory Authorization for Investments

Indiana Code 16-22-3-20 authorizes the Hospital to invest in:

- Any interest bearing account that is authorized to be set up and offered by a financial institution or brokerage firm registered and authorized to do business in Indiana.
- Repurchase or resale agreements involving the purchase and guaranteed resale of any interest bearing obligations issued or fully insured or guaranteed by the United States or any United States government agency in which type of agreement the amount of money must be fully collateralized by interest bearing obligations as determined by the current market value computed on the day the agreement is effective.
- Mutual funds offered by a financial institution or brokerage firm registered and authorized to do business in Indiana.
- Securities backed by the full faith and credit of the United States Treasury or fully insured or guaranteed by the United States or any United States government agency.
- Pooled fund investments for participating hospitals offered, managed and administered by a financial institution or brokerage firm registered or authorized to do business in Indiana.

The Hospital's investments are reported at fair market value except for certificates of deposit which are carried at contract value. As of December 31, 2016, the Hospital had the following investments and maturities, all of which were held in the Hospital's name by custodial banks that are agents of the Hospital.

	Investment Maturities (in years)				
	Carrying Amount	Less than 1	1-5	6-10	More than 10
Certificates of deposit	\$ 5,757,661	\$ 3,757,661	\$ 2,000,000	\$ 0	\$ 0
Common stock	711,585	711,585	0	0	0
	<u>\$ 6,469,246</u>	<u>\$ 4,469,246</u>	<u>\$ 2,000,000</u>	<u>\$ 0</u>	<u>\$ 0</u>

Interest rate risk – The Hospital does not have a formal investment policy that limits investment maturities as a means of managing its exposure to fair value losses arising from changing interest rates.

Credit risk – Statutes authorize the Hospital to invest in interest bearing deposit accounts, passbook savings accounts, certificates of deposit, money market accounts, mutual funds, pooled fund investments, securities backed by the full faith the credit of the United States Treasury and repurchase agreements. The statutes require that repurchase agreements be fully collateralized by U.S. Government or U.S. Government Agency obligations.

ADAMS COUNTY MEMORIAL HOSPITAL
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December 31, 2016

Note 3 - Deposits and Investments (Continued):

Concentration of credit risk – The Hospital places a limit on the amount it may invest in any one issuer. The Hospital believes that it is not exposed to any significant credit risk on investments.

Investment income for 2016 is summarized as follows:

Unrealized gains	\$ 231,147
Interest and dividends	<u>459,659</u>
Total investment income	<u><u>\$ 690,806</u></u>

Note 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 has 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.

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 methodology used for assets measured at fair value. There have been no changes in the methodologies used as of December 31, 2016.

- Common stocks: Valued at the closing price reported on the active market on which the individual securities are traded.

**ADAMS COUNTY MEMORIAL HOSPITAL
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Notes to Consolidated Financial Statements
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Note 4 - Fair Value Measurements (Continued):

Assets and liabilities measured at fair value on a recurring basis as of December 31, 2016 are as follows:

	Total Fair Value at December 31, 2016	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Common stock:				
Finance	\$ 711,585	<u>\$ 711,585</u>	<u>\$ 0</u>	<u>\$ 0</u>
Certificates of deposit	<u>5,757,661</u>			
Total investments	<u>\$ 6,469,246</u>			

The following methods and assumptions were used by the Hospital in estimating the fair value of its financial instruments:

Cash and cash equivalents, accounts payable and accrued expenses, other current liabilities and estimated third-party settlements: The carrying amount reported in the consolidated balance sheet for cash and cash equivalents, accounts payable and accrued expenses, other current liabilities and estimated third-party settlements approximate fair value based on short-term maturity.

Long-term debt: The fair value of the Hospital's fixed rate debt (including capital lease obligations) is estimated using discounted cash flows based on current fixed rates available to similar entities with similar credit ratings. As of December 31, 2016, the carrying value of the fixed rate long-term debt approximated its fair value.

**ADAMS COUNTY MEMORIAL HOSPITAL
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Notes to Consolidated Financial Statements
December 31, 2016**

Note 5 - Patient Accounts Receivable:

The Hospital grants credit without collateral to its patients, many of whom are area residents and are insured under third-party payer agreements. Patient accounts receivable at year end consisted of these amounts:

	Primary Government
Medicare	\$ 15,210,450
Medicaid	24,895,821
Other third-party payors	12,620,285
Private pay	6,501,324
	59,227,880
Less allowance for uncollectible accounts	16,268,785
Patient accounts receivable, net	\$ 42,959,095

Note 6 - Internally Designated Assets:

Assets set aside by the Hospital Board of Trustees for identified purposes and over which the Board retains control and may, at its discretion, subsequently use for other purposes. There were no internally designated assets set aside by the Hospital Board of Trustees at December 31, 2016.

ADAMS COUNTY MEMORIAL HOSPITAL
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Note 7 - Capital Assets:

Primary government capital asset activity for the year ended December 31, 2016, was as follows:

	<u>Beginning Balance</u>	<u>Additions</u>	<u>Disposals</u>	<u>Transfers</u>	<u>Ending Balance</u>
Capital Assets, not being depreciated					
Land	\$ 818,750	\$ 0	\$ 0	\$ 0	\$ 818,750
Construction in progress	799,542	1,541,815	0	(1,255,418)	1,085,939
Land improvements	6,957,491	2,252,899	0	119,518	9,329,908
Buildings	57,279,055	415,563	0	0	57,694,618
Fixed equipment	5,534,842	20,347	0	122,500	5,677,689
Major movable equipment	28,248,708	1,768,980	6,850	1,013,400	31,024,238
Clinic	4,991,712	425,597	0	0	5,417,309
Total Capital Assets	104,630,100	6,425,201	6,850	0	111,048,451
Less accumulated depreciation for:					
Land improvements	2,424,036	665,943	0	0	3,089,979
Buildings	25,639,732	1,999,056	0	0	27,638,788
Fixed equipment	2,584,386	344,886	0	0	2,929,272
Major movable equipment	20,539,106	2,083,038	6,850	0	22,615,294
Clinic	3,152,011	190,269	0	0	3,342,280
Total Accumulated Depreciation	54,339,271	5,283,192	6,850	0	59,615,613
Total Capital Assets, Net	\$ 50,290,829	\$ 1,142,009	\$ 0	\$ 0	\$ 51,432,838

Note 8 - Long-term Obligations:

Primary government long-term obligation activity for the year ended December 31, 2016, was as follows:

	<u>Beginning Balance</u>	<u>Additions</u>	<u>Reductions</u>	<u>Ending Balance</u>	<u>Current Portion</u>
Revenue Bonds					
Series 2012	\$ 31,512,165	\$ 0	\$ 1,221,725	\$ 30,290,440	\$ 1,259,589
Loans payable	227,319	150,000	0	377,319	177,974
Capital lease obligations	264,020	0	52,749	211,271	54,766
	32,003,504	<u>\$ 150,000</u>	<u>\$ 1,274,474</u>	30,879,030	<u>\$ 1,492,329</u>
Unamortized bond premium	988,793			886,988	
	<u>\$ 32,992,297</u>			<u>\$ 31,766,018</u>	

**ADAMS COUNTY MEMORIAL HOSPITAL
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Notes to Consolidated Financial Statements
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Note 8 - Long-term Obligations (Continued):

Revenue Bonds Payable

Series 2012

In October 2012, the Hospital participated in the issuance of \$34,710,000 Lease Rental Revenue Refunding Bonds, Series 2012 (Series 2012). On March 31, 2013, the First Supplemental Trust Indenture was entered into and the agreement amended the principal balance, interest rates and maturity dates of the original indenture of the Series 2012 Bonds. As amended, the Series 2012 bonds bear interest at rates ranging from 2.0% to 5.0% annually. Interest on the Series 2012 Bonds shall be payable on February 1 and August 1 of each year, commencing on February 1, 2013. The Series 2012 Bonds require annual principal payments on January 15 of each year beginning in 2014 in amounts ranging from \$1,165,000 to \$2,600,000 through January 2033. The Series 2012 Bonds payable on or after January 15, 2023, may be optionally redeemed prior to maturity at the option of the Hospital in whole or in part in any order of maturity selected by the Hospital and by lots within maturities, on any date not earlier than January 15, 2022, at face value plus interest accrued to the date fixed for redemption and without any redemption premium, provided notice has been given to the registered owners of all the Series 2012 Bonds to be redeemed.

The original proceeds of the Series 2012 Bonds were used for the advanced refunding of the Series 2003 Bonds in 2012.

The Trust Indenture requires certain funds be established with the trustee. Accordingly, these funds are included as assets under the caption Held by Trustee for Debt Service in the Hospital's Consolidated Balance Sheet at December 31, 2016.

The Hospital has pledged, as security for bonds issued by the Indiana Bond Bank, a portion of the Hospital's revenues. The Hospital has committed to appropriate each year, from the Hospital's revenue, amounts sufficient to cover the principal and interest requirements on the Hospital's debt. The Hospital has pledged, as the sole security for the bonds, the annual appropriations from the Hospital.

Loans Payable

In 2012, the Hospital entered into a \$180,000 note payable which was utilized for leasehold improvements for one of the Hospital's leased nursing home facilities as discussed in Note 1.

The entire unpaid outstanding balance, plus accumulated interest was due to be paid on or before October 31, 2016. The note was not renewed and is due on demand. The note bears interest at a rate of 5.00% per annum. The note amounted to \$147,319 at December 31, 2016.

In 2013, the Hospital entered into a \$150,300 note payable which was utilized for leasehold improvements for one of the Hospital's leased nursing home facilities as discussed in Note 1. The note is payable monthly through July 2018 with annual interest at 2.00% and amounted to \$80,000 at December 31, 2016.

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Notes to Consolidated Financial Statements
December 31, 2016**

Note 8 - Long-term Obligations (Continued):

Loans Payable (Continued)

In 2015, the Hospital entered into a \$150,000 note payable which was utilized for leasehold improvements for one of the Hospital's leased nursing home facilities as discussed in Note 1. The entire unpaid outstanding balance, plus accumulated interest is due on demand. The note payable bears interest at a rate of 2.00% annually and amounted to \$150,000 at December 31, 2016.

Aggregate maturities of long-term debt are as follows:

<u>Year Ending December 31,</u>	<u>Principal</u>	<u>Interest</u>	<u>Total</u>
2017	\$ 1,492,329	\$ 916,301	\$ 2,408,630
2018	1,568,038	876,252	2,444,290
2019	1,419,451	834,560	2,254,011
2020	1,456,895	791,976	2,248,871
2021	1,471,239	748,270	2,219,509
2022 - 2026	8,508,571	3,520,662	12,029,233
2027 - 2031	10,125,182	2,244,376	12,369,558
Thereafter	4,837,325	725,599	5,562,924
	<u>\$ 30,879,030</u>	<u>\$ 10,657,995</u>	<u>\$ 41,537,025</u>

Line of Credit

In October 2015, the Hospital entered into a \$6,000,000 revolving credit agreement which was utilized for leasehold improvements and operations for several of the Hospital's leased nursing home facilities as discussed in Note 1. The agreement is set to mature in October 2019 and bears interest at 1 month LIBOR plus 3.75% with a floor of 5.25% (5.25% at December 31, 2016). Amounts borrowed are secured by substantially all of the respective skilled nursing facility assets. The respective skilled nursing homes are required to maintain compliance with specified financial covenants. Outstanding borrowings at December 31, 2016, were \$3,070,211.

Note 9 - Restricted Net Assets:

Restricted, expendable net assets are available for the following purposes:

Hospital debt service	<u>\$ 4,575,820</u>
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Unless the contributor provides specific instructions, state statute permits the Hospital Board to authorize for expenditure the net appreciation (realized and unrealized) of the investments in its endowments. Any net appreciation that is spent is required to be spent for the purposes designated by the contributor.

Restricted nonexpendable net assets represent principal amounts of permanent endowments, restricted to investment in perpetuity. Investment earnings from the Hospital's permanent endowments are expendable to support programs as established by the contributor. There are no restricted nonexpendable net assets as of December 31, 2016.

**ADAMS COUNTY MEMORIAL HOSPITAL
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Notes to Consolidated Financial Statements
December 31, 2016**

Note 10 - Risk Management:

The Hospital is exposed to various risks of loss related to torts; theft of, damage to and destruction of assets; errors and omissions; job related illnesses or injuries to employees; medical benefits to employees, retirees and dependents (excluding postemployment benefits); and natural disasters.

The risks of torts; theft of, damage to and destruction of assets; errors and omissions; job related illnesses or injuries to employees; and natural disasters are covered by commercial insurance from independent third parties. Settled claims from these risks have not exceeded commercial insurance coverage for the past four years. There were no significant reductions in insurance by major category of risk.

Further, the risks of medical benefits to employees, retirees and dependents (excluding postemployment benefits) are covered by the Hospitals' health plan policy that covers those services that are to be provided outside of the Hospital network of internally provided services. There were no significant reductions in insurance and no settled claims from these risks that have exceeded this coverage.

Note 11 - Medical Benefits to Employees:

The Hospital has chosen to service a portion of the risks associated with medical benefits to employees for medical procedures that are able to be provided by the Hospital. The Hospital also has a traditional medical benefit policy in effect through a commercial insurance provider that covers individual claims submitted for medical procedures performed outside of Adams County Memorial Hospital. Settled claims resulting from this risk did not exceed commercial insurance coverage in the past three years. Provisions are also made for unexpected and unusual claims.

Claim expenditures and liabilities associated with the medical procedures that are provided by the Hospital 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.

Changes in the balance of claim liabilities during the year is as follows:

Balance, beginning of year	\$	0
Current year claims incurred and changes in estimates for claims incurred in prior years		3,746,180
Claims and expenses paid		<u>3,746,180</u>
Balance, end of year	<u>\$</u>	<u>0</u>

The Hospital also maintains a partially self-funded workers' compensation insurance program. Under the insurance policy, the Hospital's self-funded liability is limited to \$100,000 per incident. In 2016, no individual incident exceeded the liability limit.

**ADAMS COUNTY MEMORIAL HOSPITAL
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Notes to Consolidated Financial Statements
December 31, 2016**

Note 12 - Contingent Liabilities:

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 material adverse effect on the Hospital's future financial position or results from operations.

Note 13 - Defined Contribution Retirement Plan:

The Hospital has a defined contribution plan which is administered by the Hospital and the Hospital's Retirement Committee. The defined contribution plan covers all employees who meet the eligibility requirements set forth in the plan. Contributions are made at management's discretion and are allocated based upon each participant's eligible compensation. Eligible employees are not required to contribute to the plan. Amendments to the plan provisions may be changed at the discretion of the Hospitals' Retirement Committee and approval of the Hospital's governing body. The Hospital's contribution amounted to approximately \$867,000 or 3% of the plan's participants' eligible compensation for the year ended December 31, 2016.

Note 14 - Pension Plan:

Plan Description

The Hospital has a single-employer defined benefit pension plan administered by Adams County Memorial Hospital as authorized by Indiana Code 16-22-3-11. The plan provides retirement, disability and death benefits to plan members and beneficiaries. The plan was established by written agreement between the Hospital Board of Trustees and the plan administrator. The plan administrator issues a publicly available financial report that includes financial statements and required supplementary information of the plan. That report may be obtained by contacting:

Cuni, Rust & Strenk
4555 Lake Forest Drive, Suite 620
Cincinnati, OH 45242-5617
Ph. (513) 891-0270

Funding Policy

The contribution requirements of plan members are established by the written agreement between the Hospital Board of Trustees and the plan administrator. Plan members are not required to contribute to the plan. The Hospital is required to contribute at an actuarially determined rate. The current rate is 0.00% of annual covered payroll as the valuation assets exceed the accrued liability by more than the expense assumptions of \$50,000.

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Notes to Consolidated Financial Statements
December 31, 2016**

Note 14 - Pension Plan (Continued):

Funding Policy (Continued)

The following is a summary of the plan as of December 31, 2016 (based on actuarial valuation date of January 1, 2017):

Annual required contribution	\$ 0
Interest on net pension obligation	(133,233)
Adjustment to annual required contribution	<u>203,656</u>
Annual pension cost	70,423
Contributions made	<u>0</u>
Increase in net pension obligation	70,423
Net pension obligation, beginning of year	<u>(1,903,328)</u>
Net pension obligation, end of year	<u><u>\$ (1,832,905)</u></u>
Actuarial valuation date	1/1/2017
Actuarial cost method	Unit credit
Amortization method	Level dollar, unfunded actuarial accrued liability re-established each year and amortized over 10 years
Remaining amortization period	10 years
Asset valuation method	Five year smoothed actuarial value

Actuarial Assumptions

Investment rate of return	7.0%
Projected salary increases	N/A
Include inflation at	0.0%
Cost-of-living adjustments	None

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Notes to Consolidated Financial Statements
December 31, 2016**

Note 14 - Pension Plan (Continued):

Funding Policy (Continued)

Three-Year Trend Information			
Year Ending	Annual Pension Cost (APC)	Percentage of APC Contributed	Net Pension Obligation
12/31/2014	\$ 75,938	0.0%	\$ (1,976,457)
12/31/2015	73,129	0.0%	(1,903,328)
12/31/2016	70,423	0.0%	(1,832,905)

The funded status of the plan as of January 1, 2017, the most recent actuarial valuation date, is as follows:

Actuarial Value of Plan Assets (a)	Actuarial Accrued Liability (AAL) Entry Age (b)	Excess of Assets Over AAL (b-a)	Funded Ratio (a/b)	Annual Covered Payroll (c)	Excess AAL as a Percentage of Covered Payroll ((b-a)/c)
\$ 17,167,251	\$ 11,696,669	\$ 5,470,582	147%	\$ 11,288,338	48%

Note 15 - Operating Leases:

The Hospital has leases for facilities and equipment expiring at various times through 2032. Total lease expense for 2016 was approximately \$126,000.

Future minimum commitments under these agreements are as follows at December 31, 2016:

<u>Year Ending December 31,</u>	<u>Facilities</u>
2017	\$ 14,400
2018	14,400
2019	14,400
2020	14,400
2021	14,400
Later Years	145,200
	<u>\$ 217,200</u>

Lease expense for facilities and equipment under the long-term care agreements discussed in Note 1 was approximately \$22,446,000 for 2016.

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Notes to Consolidated Financial Statements
December 31, 2016**

Note 16 - Management Evaluation of Subsequent Events:

Management has evaluated subsequent events through December 15, 2017, the date on which the consolidated financial statements were available to be issued.

Subsequent to December 31, 2016, the Hospital entered into two management, lease and intangible agreements to lease the operations of two skilled nursing facilities. While the management of the facilities are managed with independent third parties, the operations will be included in the Hospital's 2017 financial statements.

Subsequent to December 31, 2016, on January 1, 2017, the Hospital terminated five management, lease and intangible agreements with the manager of five skilled nursing facilities.

Subsequent to December 31, 2016, on September 1, 2017, the Hospital terminated eleven management, lease and intangible agreements with the manager of eleven skilled nursing facilities.

Independent Auditors' Report on the Supplementary Information

**To the Governing Board of the Hospital
ADAMS COUNTY MEMORIAL HOSPITAL
Decatur, Indiana**

Our audit of the consolidated financial statements included in the preceding section of this report was conducted for the purpose of forming an opinion on those statements as a whole. The supplementary information presented in the following section of this report is presented for purposes of additional analysis 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 audits 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.

Somerset CPAs, PC

December 15, 2017

**ADAMS COUNTY MEMORIAL HOSPITAL
A COMPONENT UNIT OF ADAMS COUNTY, INDIANA
Schedule of Funding Progress
December 31, 2016**

The Schedule of Funding Progress presents multiyear trend information about whether the actuarial value of plan assets for the Hospital's defined benefit pension plan is increasing or decreasing over time relative to the actuarial accrued liability for benefit.

Employees' Pension Plan						
Actuarial Valuation Date	Actuarial Value of Assets (a)	Actuarial Accrued Liability (AAL) (b)	Excess / (Unfunded) AAL (a - b)	Funded Ratio (a / b)	Covered Payroll (c)	Unfunded AAL as a Percentage of Covered Payroll ((a - b) / c)
1/1/2012	15,298,445	11,820,144	3,478,301	129%	16,413,570	21%
1/1/2013	14,954,377	11,524,731	3,429,646	130%	14,286,609	24%
1/1/2014	15,787,604	11,376,913	4,410,691	139%	13,666,336	32%
1/1/2015	16,379,161	11,913,608	4,465,553	137%	12,878,664	35%
1/1/2016	16,645,143	11,827,040	4,818,103	141%	12,432,742	39%
1/1/2017	17,167,251	11,696,669	5,470,582	147%	11,288,338	48%