

cPa DIXON, WALLER & CO., INC.

SOUTHEAST COLORADO
HOSPITAL DISTRICT

SPRINGFIELD, COLORADO

FINANCIAL STATEMENTS

DECEMBER 31, 2017

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July 24, 2018

DIXON, WALLER & CO., INC.

TABLE OF CONTENTS

SOUTHEAST COLORADO

HOSPITAL DISTRICT

DECEMBER 31, 2017

	<u>Page</u>
Title Page	
Table of Contents	
<u>FINANCIAL SECTION</u>	
Independent Auditor's Report.....	1-2
Management's Discussion and Analysis	i-viii
<u>BASIC FINANCIAL STATEMENTS:</u>	
Fund Financial Statements:	
Statement of Net Position.....	3
Statement of Revenues, Expenses and Changes in Net Position.....	4
Statement of Cash Flows.....	5
Notes to Basic Financial Statements.....	6-18

FINANCIAL SECTION

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Independent Auditor's Report

Board of Directors
Southeast Colorado Hospital District
Springfield, CO 81073

We have audited the accompanying financial statements of the business-type activities of Southeast Colorado Hospital District as of and for the years ended December 31, 2017 and 2016, and the related notes to the financial statements, which collectively comprise the District's basic financial statements as listed in the table of contents.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express opinions on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

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

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

Opinions

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the business-type activities of the Southeast Colorado Hospital District as of December 31, 2017 and 2016, and the changes in financial position and cash flows thereof for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Required Supplementary Information

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis on pages i through viii be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

Dixon, Walker & Co., PC.

June 30, 2018

MANAGEMENT'S DISCUSSION AND ANALYSIS

SOUTHEAST COLORADO HOSPITAL AND LONG TERM CARE CENTER

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SOUTHEAST COLORADO HOSPITAL DISTRICT Management's Discussion and Analysis and Financial Statements FY 2017

The three purposes of this discussion of Southeast Colorado Hospital District's financial performance are:

- To provide a narrative explanation of financial statements allowing the community and all stakeholders to see the District through the eyes of management.
- To improve overall financial disclosure and provide the context within which financial statements should be analyzed.
- To provide information about the status, and potential variability, of the District's earnings and cash flow, so one can ascertain the likelihood past performance is indicative of future performance.

SUMMARY

The District's Total Current Assets decreased by \$968,642, or 14.8%. The decrease was driven by a \$843,461 decrease in net accounts receivable, an increase in estimated third party settlements, purchase of capital acquisitions by \$ 3,987,285 and disposal of \$ 2,490,285 and offset by a \$ 760K decrease in cash and cash equivalents. The District has made progress with implementation of an accurate and timely accounts receivable monitoring procedure and providing direction to billing and collections personnel for bill submission and tracking. Recent changes in financial management practices resulted in effective billing and collections for 2017. Total assets decreased .1%

The District's Total Liabilities increased by \$170,207, or 4.3%, driven by an increase in current long term debt, long term debt and accrued salaries. The result in Net Position was a decrease of \$ 190,359.

Please see Table 1 for further details on the Statement of Net Position.

The District's total Operating Revenue had a total decrease of .5%. It is important to note there was a \$553,572, or 4.5% decrease in Hospital-based Net Patient Service Revenue, a \$426K, or 34.9% decrease in Clinic Revenue, a \$55 K, or 10.7% decrease in Home Health and Hospice Revenue.

The decrease in revenue all district areas is due, in large part, to a change in assignment of Professional Services Revenues for physician services provided in the Emergency Department. This change of assignment of revenues is an integral part of the new IT system and related financial applications that were implemented in January 2017. The overall decrease in these revenues is due to a lower level of physician activity due to the loss of permanent, full-time physicians. The District has recruited and has on staff now 2 physician providers and 2 mid-level providers.

Total Operating Expenses increase for the year by \$899,826 or 6.1%. There was \$425K or 4.3% increase in salaries and benefits, primarily due to increase in self-funded health insurance benefits and a pal time is paid out at the current rate of pay instead of at the accrued rate of pay. There is a \$195K or 11.2% increase in contract services.

With contributions, tax revenue, and meaningful use incentive payments, a total of \$ 1,161,118 was added to revenue resulting in an decrease in net position (net loss) of \$ 190K.

Please see Table 2 for further details on the Statement of Revenues, Expenses and Changes in Net Position.

TABLE 1 - STATEMENT OF NET POSITION

Assets	2016	2017
Total Current Assets	\$ 6,538,013	\$ 5,569,371
Total Noncurrent Cash and Investments	2,608,470	2,086,865
Total Capital Assets, Net	5,214,447	6,711,448
Total Assets	14,360,930	14,367,684
Liabilities and Net Position		
Total Current Liabilities	1,475,586	1,721,146
Long-Term Debt, Net of Current Maturities	2,478,915	2,403,562
Total Liabilities	3,954,501	4,124,708
Deferred Property Taxes	349,516	376,422
Net Position		
Total Net Position	10,056,913	9,866,554
Total Liabilities and Net Position	\$ 14,360,930	\$ 14,367,684

The District's Total Net Position---the difference between assets and liabilities---is one measure of the District's financial health or financial position. Over time, increases or decreases are one indicator of whether financial health is improving or deteriorating.

TABLE 2 - STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION

	<u>2016</u>	<u>2017</u>
<u>Operating Revenues</u>		
Net Patient Service Rev (Net of Contractual Adjust of \$ 7,303,259 in 2016 and \$ 6,834,707 in 2015)	12,206,015	12,759,587
Clinic Revenue	1,219,864	793,823
Home Health, Hospice & Therapy Revenue	520,879	465,788
Other	149,910	150,670
<u>Total Operating Revenue</u>	<u>14,096,668</u>	<u>14,169,868</u>
<u>Operating Expenses</u>		
Salaries and Benefits	9,916,349	10,341,157
Medical and Other Supplies	1,192,031	1,147,542
Insurance	103,449	100,204
Contracted Services	1,752,240	2,122,716
Repairs and Maintenance	332,125	375,459
Utilities and Telephone	243,583	237,963
Depreciation and Amortization	741,115	711,662
Other Expenses	316,822	480,069
<u>Total Operating Expenses</u>	<u>14,597,714</u>	<u>15,516,772</u>
<u>Operating Income (Loss)</u>	<u>(501,046)</u>	<u>1,346,904</u>
<u>Nonoperating Revenues (Expenses)</u>		
Property Taxes	351,435	378,785
Specific Ownership Taxes	44,684	43,531
E.H.R Incentive Payments	52,745	0
Investment Income	9,725	13,325
Interest Expense	(24,189)	(4,572)
Noncapital Grants and Contributions	80,954	13,295
Other	76,654	217,763
<u>Total Nonoperating Revenues and Expenses</u>	<u>592,008</u>	<u>662,127</u>
<u>Excess of Revenues Over (Under) Expenses Before Capital Grants and Contributions</u>	90,962	(684,777)
<u>Capital Grants and Contributions</u>	460,507	494,418
<u>Increase (Decrease) in Net Position</u>	<u>551,469</u>	<u>(190,359)</u>
<u>Net Position, Beginning of Year</u>	9,505,444	10,056,913
<u>Net Position, End of Year</u>	<u>10,056,913</u>	<u>9,866,554</u>

Changes in Net Position

In the previous year, the Authority reported an increase in Net Position of \$551,469 compared to this year's decrease in Net Position of \$ 190,359. District's hospital operations were begun in 1969 as a special district hospital, when it was agreed that a portion of its costs would be subsidized by property tax revenues, making the facility more affordable for the County's lower income residents.

Non-operating Revenues and Expenses

Non-operating revenues consist primarily of property taxes levied by the District and Grants. In 2002 the district was successful in raising their mill levy to 7 mills through a vote of the district voters.

Grants, Contributions, Endowments, and Capital Reimbursement

The district receives both capital and operating grants from various federal, state and private institutions. The district received \$507,713 in Grants and Contributions in 2017. This is an increase of \$47,206 from 2016.

The Districts Cash Flows

Changes in the Districts cash flows are consistent with changes in operating gains and non-operating revenues and expenses, discussed earlier, with a couple exceptions. Due to issues with the implementation and monitoring of accounts receivable, cash flow was higher than expected.

Capital Asset and Debt Administration

Capital Asset purchased included additions of 11 new HVAC unites for Annex, Hospital, and LTC- \$ 159,309; New HVAC system for the hospital \$ 3,071,534; LTC new roof \$ 149,879

CAPITAL ASSETS

A schedule of changes in the District's capital assets for 2017 and 2016 follows:

	Balance Dec. 31, 2015	Additions	Retirements	Balance Dec. 31, 2016
Land	90,089	-	-	90,089
Land Improvements	109,480	33,212	-	142,692
Building & Improvements	6,021,100	-	-	6,021,100
Equipment	7,195,436	577,506	-	7,772,942
Construction in Progress	1,125	1,420,090	-	1,421,215
<u>Totals at Historical Cost</u>	<u>13,417,230</u>	<u>2,030,808</u>	<u>-</u>	<u>15,448,038</u>
Less Accumulated Depreciation for:				
Land Improvements	89,374	5,663	-	95,037
Building & Improvements	3,736,190	166,213	-	3,902,403
Equipment	5,666,913	569,238	-	6,236,151
<u>Total Accumulated Depreciation</u>	<u>9,492,477</u>	<u>741,114</u>	<u>-</u>	<u>10,233,591</u>
<u>Capital Assets, Net</u>	<u>3,924,753</u>	<u>1,289,694</u>	<u>-</u>	<u>5,214,447</u>

	Balance Dec 31, 2016	Additions	Retirements	Balance Dec 31, 2017
Land	90,089	-	-	90,089
Land Improvements	142,692	-	47,971	94,721
Construction in Progress	1,421,215	-	1,340,793	80,222
Building & Improvements	6,021,100	3,467,167	809,107	8,679,619
Equipment	7,772,942	127,185	4,035,662	3,864,465
<u>Totals at Historical Cost</u>	<u>15,448,038</u>	<u>3,594,812</u>	<u>6,233,533</u>	<u>12,809,117</u>

Less Accumulated

Depreciation for:				
Land Improvements	95,037	5,155	46,372	53,820
Building & Improvements	3,902,413	237,567	777,195	3,362,775
Equipment	6,236,151	468,940	4,024,017	2681074
<u>Total Accumulated Depreciation</u>	<u>10,233,591</u>	<u>711,662</u>	<u>4,847,584</u>	<u>6,097,669</u>
<u>Capital Assets, Net</u>	<u>5214447</u>	<u>2,883,150</u>	<u>1,386,149</u>	<u>6,711,448</u>

LONG-TERM DEBT

A schedule of changes in the District's long-term debt for 2013 and 2014 follows:

<u>Changes in Debt</u>	Balance			Balance 12/31/2016	Amounts Due Within One Year
	1/1/2016	Additions	Reductions		
Lease Purchase Agreements	197,387	2,782,374	191,815	2,787,946	309,031
Notes Payable	100,000		100,000		
<u>Total Long-Term Debt</u>	<u>297,387</u>	<u>2,782,374</u>	<u>291,815</u>	<u>2,787,946</u>	<u>309,031</u>

	Balance			Balance 12/31/2015	Amounts Due Within One Year
	1/1/2017	Additions	Reductions		
Lease Purchase Agreements	2,787,946	234380	315903	2706423	302861
<u>Total Long-Term Debt</u>	<u>2787946</u>	<u>234380</u>	<u>315903</u>	<u>2706423</u>	<u>302861</u>

<u>Lease Purchase Agreements</u>	2017	2016
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1) A lease purchase agreement for the purchase of three copiers was executed September 25, 2012. The original amount was \$16,925 with interest at 8.78% for 5 years with payments of \$349.52 per month.

0 3,211

2) A lease agreement for the purchase of a Philips 16 slice CT was executed April 30, 2013. The original amount was \$ 165,308 with interest at 4.5% for 5 years with payments of \$ 3,081.64 per month

12,212 47,770

3) A lease purchase agreement for the purchase of printers was executed June 20, 2014. The original amount was \$ 29,790 with interest at 3.2 % for 5 years with payments of \$ 538 monthly.

9,443 14,994

4. A Lease purchase agreement for the purchase of a Dimension Exl200 Chemistry Integrated System was executed on May 21, 2015. The original amount was \$ 100,000 with interest at 3.183% for 5 years with payments of \$ 1805 monthly

50,318 70,366

5. A lease purchase agreement for the Lexmark copier was executed on April 20, 2016. The original amount was \$ 7177 with interest at 5.64% for 5 years with payments of \$ 138 monthly

4,891 6,225

6. A lease purchase agreement for the purchase of HVAC Equipment was executed October 15, 2016. The original amount was d\$ 2,775,301 with interest at 3.24% for 10 years with payments of \$ 27,110 per month. An additional principal payment of \$ 90645 was made on December 28, 2016

2,615,556 2,645,380

7. A lease purchase agreement for the purchase of copiers was executed November 10, 2017. The original amount was d\$ 14,380 with interest at 9.55% for 5 years with payments of \$ 302.39 per month.

14,003

Total Lease Purchase Payable

2,706,423 2,787,946

The District has entered into lease agreements for the acquisition of equipment. These lease purchase agreements qualify as capital leases for accounting purposes and, therefore, have been recorded at the present value of the future minimum lease payments as of the date of their inception. The following is a schedule of the future minimum lease payments under these capital leases, and the present value of the net minimum lease payments at December 31, 2016 and 2017.

Year	2017		Total
	Principal	Interest	
2018	302861	83393	386254
2019	297073	73627	370700
2020	290936	63900	354836
2021	290156	54416	344572
2022	298809	44745	343554
2023	305570	34962	340532
2024	315541	24991	340532
2025	325838	14694	340532
2026	279639	4134	283773
Total Minimum Lease Payts <u>2706423</u>			3105285
Less: Amount Representing interest			<u>398863</u>
Present Value of Future Minimum Lease Pymts			<u>2706423</u>

Other Economic Factors

The Hospital District is located in a rural setting where a large portion of the local economy depends on Agriculture. The District is the largest employer in Baca County. Given the current economics of Agriculture, the District is susceptible to changes and fluctuations in agricultural production and its impact on the overall regional economy. The District's service area also manifests a predominantly elderly population. While this results in increasing demand for healthcare for the senior population, the long-term drawback is that there is no economic development creating local employment to retain younger people and families or attract others to the local area. The population trend indicates a continued decline over the next 5-10 years.

Another challenge to the Hospital District is the ongoing reduction in Medicare and Medicaid payments, which together make up 80%-85% of our business. Medicare is scheduled to reduce payments by 2% for 1 year beginning in January of 2013, and there are other reductions in Medicare and Medicaid payment to facilities and professional providers that may be implemented by federal or state government. The complete impact of federal health care reform is not fully understood at this time. While some uninsured individuals and families may have better access to health care insurance, the reimbursement for such health insurance coverage may not meet the financial requirements of the Hospital District.

Contacting the District's Financial Management

If you have questions about this report or need additional financial information, contact the District's Chief Financial Officer at Southeast Colorado Hospital, 373 East 10th, and Springfield, Co. 81073.

BASIC FINANCIAL STATEMENTS

SOUTHEAST COLORADO HOSPITAL DISTRICT
STATEMENT OF NET POSITION
December 31, 2017 and 2016

	2017	2016
<u>ASSETS</u>		
<u>Current Assets:</u>		
Cash and Cash Equivalents	677,553	2,290,974
Investments	1,980,424	647,980
Property Tax Receivable	376,422	349,516
Patient Accounts Receivable, Net of Estimated Uncollectibles of \$1,662,634 in 2017 and \$2,629,255 in 2016	1,657,691	2,501,152
Estimated Third Party Payor Settlements	554,970	415,501
Other Accounts Receivable	9,619	9,876
Prepaid Expenses	46,947	62,348
Supplies, at Lower of Cost (First-In, First-Out) or Market	<u>265,745</u>	<u>260,666</u>
<u>Total Current Assets</u>	<u>5,569,371</u>	<u>6,538,013</u>
<u>Noncurrent Cash and Investments:</u>		
Internally Designated for Capital Acquisitions	1,991,136	2,510,099
Internally Designated for Scholarships:		
Cash	12,120	11,481
Investment	72,000	72,000
Internally Designated for Health Insurance	998	5,751
Held in Trust for Residents	<u>10,611</u>	<u>9,139</u>
<u>Total Noncurrent Cash and Investments</u>	<u>2,086,865</u>	<u>2,608,470</u>
<u>Capital Assets</u>		
Land	90,089	90,089
Depreciable Capital Assets, Net of Accumulated Depreciation	<u>6,621,359</u>	<u>5,124,358</u>
<u>Total Capital Assets, Net of Accumulated Depreciation</u>	<u>6,711,448</u>	<u>5,214,447</u>
<u>TOTAL ASSETS</u>	<u>14,367,684</u>	<u>14,360,930</u>
 <u>LIABILITIES AND NET POSITION</u>		
<u>Current Liabilities</u>		
Current Maturities of Long-Term Debt	302,861	309,031
Accounts Payable and Accrued Expenses	1,272,659	898,514
Estimated Third-Party Payor Settlements	135,170	259,250
Other Current Liabilities	<u>10,456</u>	<u>8,791</u>
<u>Total Current Liabilities</u>	<u>1,721,146</u>	<u>1,475,586</u>
<u>Long-Term Debt, Net of Current Maturities</u>	<u>2,403,562</u>	<u>2,478,915</u>
<u>TOTAL LIABILITIES</u>	<u>4,124,708</u>	<u>3,954,501</u>
 <u>DEFERRED INFLOW OF RESOURCES</u>		
Property Taxes	<u>376,422</u>	<u>349,516</u>
 <u>NET POSITION</u>		
Net Investment in Capital Assets	4,005,025	3,831,833
Unrestricted	<u>5,861,529</u>	<u>6,225,080</u>
<u>TOTAL NET POSITION</u>	<u>9,866,554</u>	<u>10,056,913</u>

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

SOUTHEAST COLORADO HOSPITAL DISTRICT
STATEMENT OF REVENUE, EXPENSES AND
CHANGES IN NET POSITION
Years Ended December 31, 2017 and 2016

	<u>2017</u>	<u>2016</u>
<u>OPERATING REVENUES</u>		
Net Patient Service Revenue (Net of contractual adjustments of \$6,399,740 in 2017 and \$7,303,259 in 2016)	12,759,587	12,206,015
Clinic Revenue	793,823	1,219,864
Home Health Hospice Care & Therapy Revenue	465,788	520,879
Other	<u>150,670</u>	<u>149,910</u>
<u>Total Operating Revenue</u>	<u>14,169,868</u>	<u>14,096,668</u>
<u>OPERATING EXPENSES</u>		
Salaries and Benefits	10,341,157	9,916,349
Medical and Other Supplies	1,147,542	1,192,031
Insurance	100,204	103,449
Contracted Services	2,122,716	1,752,240
Repairs and Maintenance	375,459	332,125
Utilities and Telephone	237,963	243,583
State Provider Tax	268,204	176,086
Depreciation and Amortization	711,662	741,115
Other Expenses	<u>211,865</u>	<u>140,736</u>
<u>Total Operating Expenses</u>	<u>15,516,772</u>	<u>14,597,714</u>
<u>Operating Income (Loss)</u>	<u>(1,346,904)</u>	<u>(501,046)</u>
<u>NONOPERATING REVENUES (EXPENSES)</u>		
Property Taxes	378,785	351,435
Specific Ownership Tax	43,531	44,684
E.H.R. Incentive Payments	-	52,745
Investment Income	13,325	9,725
Interest Expense	(4,572)	(24,189)
Insurance Proceeds	192,631	-
Noncapital Grants and Contributions	13,295	10,764
Loss on Disposition of Fixed Assets	(46,956)	-
Other	<u>72,088</u>	<u>76,654</u>
<u>Total Nonoperating Revenues (Expenses)</u>	<u>662,127</u>	<u>521,818</u>
<u>EXCESS OF REVENUES OVER (UNDER) EXPENSES BEFORE CAPITAL GRANTS, CONTRIBUTIONS AND REIMBURSEMENTS</u>	<u>(684,777)</u>	<u>20,772</u>
<u>CAPITAL GRANTS, CONTRIBUTIONS AND REIMBURSEMENTS</u>	<u>494,418</u>	<u>530,697</u>
<u>INCREASE (DECREASE) IN NET POSITION</u>	<u>(190,359)</u>	<u>551,469</u>
<u>NET POSITION, Beginning of Year</u>	<u>10,056,913</u>	<u>9,505,444</u>
<u>NET POSITION, End of Year</u>	<u>9,866,554</u>	<u>10,056,913</u>

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

SOUTHEAST COLORADO HOSPITAL DISTRICT
STATEMENT OF CASH FLOWS
Years Ended December 31, 2017 and 2016

	<u>2017</u>	<u>2016</u>
<u>CASH FLOWS FROM OPERATING ACTIVITIES</u>		
Receipts From and On Behalf of Patients	15,013,329	13,304,954
Payments to Suppliers and Contractors	(4,532,416)	(4,045,532)
Payments to Employees Salaries & Benefits	(10,149,854)	(9,797,436)
<u>Net Cash Provided (Used) by Operating Activities</u>	<u>331,059</u>	<u>(538,014)</u>
<u>CASH FLOWS FROM NON-CAPITAL FINANCING ACTIVITIES</u>		
Property Taxes	422,316	396,119
Noncapital Grants and Contributions	13,295	63,509
Other Non Operating Revenues	264,719	76,654
<u>Net Cash Provided (Used) by Non-Capital Financing Activities</u>	<u>700,330</u>	<u>536,282</u>
<u>CASH FLOWS FROM CAPITAL & RELATED FINANCING ACTIVITIES</u>		
Capital Grants and Contributions	494,418	530,697
Debt Proceeds	220,000	1,405,332
Principal Paid on Long-Term Debt	(315,903)	(291,815)
Interest Paid on Long-Term Debt	(91,476)	(24,189)
Purchase of Capital Assets	(2,154,335)	(653,766)
<u>Net Cash Provided (Used) by Capital and Related Financing Activities</u>	<u>(1,847,296)</u>	<u>966,259</u>
<u>CASH FLOWS FROM INVESTING ACTIVITIES</u>		
Interest and Dividends on Investments	13,325	9,725
Purchases of Investments	(1,332,444)	(3,641)
<u>Net Cash Provided by Investing Activities</u>	<u>(1,319,119)</u>	<u>6,084</u>
<u>NET INCREASE (DECREASE) IN CASH & CASH EQUIVALENTS</u>	<u>(2,135,026)</u>	<u>970,611</u>
<u>CASH AND CASH EQUIVALENTS, Beginning of Year</u>	<u>4,827,444</u>	<u>3,856,833</u>
<u>CASH AND CASH EQUIVALENTS, End of Year</u>	<u>2,692,418</u>	<u>4,827,444</u>
<u>Reconciliation of Cash and Cash Equivalents to the Statement of Net Position:</u>		
Cash and Cash Equivalents in Current Assets	677,553	2,290,974
Restricted Cash and Cash Equivalents	2,014,865	2,536,470
Total Cash and Cash Equivalents	<u>2,692,418</u>	<u>4,827,444</u>
<u>Reconciliation of Operating Income (Loss) to Net Cash Provided (Used)</u>		
<u>By Operating Activities</u>		
Operating Income (Loss)	(1,346,904)	(501,046)
<u>Adjustments to Reconcile Operating Income to Net Cash Flows Used in Operating Activities</u>		
Depreciation	711,662	741,115
<u>Changes In</u>		
Patient Accounts Receivable	843,461	(500,495)
Supplies and Other Current Assets	10,579	461
Accounts Payable, Accrued Expenses, and Other Current Liabilities	375,810	13,170
Estimated Third-Party Payor Settlements	(263,549)	(291,219)
<u>Net Cash Provided by (Used in) Operating Activities</u>	<u>331,059</u>	<u>(538,014)</u>
<u>Non-Cash Investing, Capital, and Financing Activities</u>		
Cash Paid for Interest	91,476	24,189
Cash Paid for Income Tax	-	-
Equipment Acquired through Capital Lease Obligations	14,380	1,377,042

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

SOUTHEAST COLORADO HOSPITAL DISTRICT
SPRINGFIELD, COLORADO
NOTES TO FINANCIAL STATEMENTS
December 31, 2017

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The Southeast Colorado Hospital District is a local government unit created for the purpose of providing health care to Baca County and the surrounding area.

Reporting Entity

The reporting entity, for financial purposes, is defined as the primary government (Southeast Colorado Hospital District) and its component units. The District has no component units, and the reporting entity consists of the hospital and long-term care facility. Southeast Colorado Hospital District is managed by five board members.

Presentation

The District prepares its financial statements in accordance with accounting principles applicable to hospitals as described in the Audit and Accounting Guide Health Care Entities published by the American Institute of Certified Public Accountants.

Government - Wide and Fund Financial Statements

The government-wide financial statements (i.e. the statement of net position and the statement of activities) report information on all the nonfiduciary activities of the primary government and its component units. *Governmental activities*, which normally are supported by taxes and intergovernmental revenues, are reported separately from *business-type activities*, which rely to a significant extent on fees and charges for support. All activities of the Southeast Colorado Hospital District are reported as business-type.

Measurement Focus, Basis of Accounting, and Financial Statement Presentation

The government-wide financial statements are reported using the *economic resources measurement focus* and the *accrual basis of accounting*, as are the proprietary fund and fiduciary fund financial statements. Revenues are recorded when earned and expenses are recorded when a liability is incurred, regardless of the timing of related cash flows. Property taxes are recognized as revenues in the year for which they are levied. Grants and similar items are recognized as revenue as soon as all eligibility requirements imposed by the provider have been met.

SOUTHEAST COLORADO HOSPITAL DISTRICT
SPRINGFIELD, COLORADO
NOTES TO FINANCIAL STATEMENTS
December 31, 2017

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Measurement Focus, Basis of Accounting, and Financial Statement Presentation (Continued)

The District consists of one major proprietary fund.

Proprietary funds distinguish *operating revenues* and expenses from *nonoperating* items. Operating revenues and expenses generally result from providing services and producing and delivering goods in connection with a proprietary fund's principal ongoing operations. The principal operating revenues of the District are charges to customers for sales and services and ad valorem tax. Operating expenses for the District include the cost of services, administrative expenses, and depreciation on capital assets.

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 determined to qualify as charity care, they are reported as gross revenue and as a contractual adjustment to determine total operating revenue

Net Patient Service Revenue

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

Receivables

Patient accounts receivable are recorded at established rates as services are provided. Provisions for uncollectible accounts is made in amounts required to maintain an adequate allowance for anticipated losses. In some cases, services to patients are paid for by Medicare, Medicaid, or other third parties. The amount reimbursed is generally based upon the cost of the services provided, as defined by government regulations. Account balances are reduced for the estimated amount of contractual allowances.

Property Taxes

Under Colorado Law, all property taxes become due and payable in the year following that in which they are levied. Property taxes are recognized as revenue when payable from the County Treasurer.

Property taxes attach as an enforceable lien on property as of January 1. Taxes may be paid without penalty in either of two ways: (a) Full payment by April 30, or (b) First half must be paid by last day of February, and second half must be paid by June 15.

SOUTHEAST COLORADO HOSPITAL DISTRICT
SPRINGFIELD, COLORADO
NOTES TO FINANCIAL STATEMENTS
December 31, 2017

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Inventories

Inventories are stated at lower of cost or market, calculated using the first-in, first-out method.

Property, Plant and Equipment

Property, plant and equipment are stated at cost. The District uses the straight-line method for financial statement reporting. Estimated useful lives are 5 to 40 years for equipment and building improvements and 40 years for buildings. Property, plant and equipment with unit costs of less than \$5,000 are expensed in the year purchased.

Compensated Absences (Personnel Annual Leave Payable)

At December 31, 2017 and 2016 the District had liabilities for accrued vacation of \$384,086 and \$318,792 respectively and are included in the "accounts payable and accrued expenses" in the accompanying statement of net position.

Budgetary Accounting

Revenues and expenditures are controlled by budgetary accounting system in accordance with various legal requirements. The budgeted revenues and expenditures represent the original adopted budget as in accordance with Colorado Laws. Budgets are generally prepared on the same basis as that used for accounting purposes.

The District has set procedures to be followed in establishing the budgetary data reflected in the financial statements:

1. Prior to October 15, the Chief Financial Officer submits to the Hospital Board a proposed operating budget for the fiscal year commencing the following January 1. The operating budget includes proposed expenditures and the means of financing them.
2. Public notices are released to obtain taxpayer comments.
3. Prior to December 31, the budget is legally enacted through passage of a resolution.
4. The Chief Financial Officer is authorized to transfer budgeted amounts between categories, however, any revisions that alter the total expenditures must be approved by the Hospital Board.
5. Formal budgetary integration should be employed as a management control device during the year.
6. The budget is adopted on a basis consistent with generally accepted accounting principles (GAAP). See Note 6.

SOUTHEAST COLORADO HOSPITAL DISTRICT
SPRINGFIELD, COLORADO
NOTES TO FINANCIAL STATEMENTS
December 31, 2017

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Costs of Borrowing

Borrowing costs directly attributable to the acquisition, construction or production of qualifying assets, which are assets that necessarily take a substantial period of time to get ready for their intended use or sale, are added to the cost of those assets, until such time as the assets are substantially ready for their intended use or sale. Investment income earned on the temporary investment of specific borrowings pending their expenditure on qualifying assets is deducted from the borrowing costs eligible for capitalization. Investment income was not earned on specific borrowing during 2017.

All other borrowing costs are recognized in profit or loss in the period in which they are incurred.

	<u>2017</u>	<u>2016</u>
Capitalized Interest	86,904	-
Other Interest on Long-Term Debt	<u>4,572</u>	<u>24,189</u>
<u>Total Interest Expense</u>	<u>91,476</u>	<u>24,189</u>

Cash and Cash Equivalents

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

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Grants and Contributions

From time to time, the District receives grants 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.

Restricted Resources

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

SOUTHEAST COLORADO HOSPITAL DISTRICT
SPRINGFIELD, COLORADO
NOTES TO FINANCIAL STATEMENTS
December 31, 2017

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Net Position – Net position of the District is classified in the following four components:

- Net Investment in Capital Assets – consist of capital assets net of accumulated depreciation and reduced by the current balances of any outstanding borrowing used to finance the purchase or construction of those assets.
- Restricted expendable – consist of noncapital net assets that must be used for a particular purpose, as specified by creditors, grantors, or contributors external to the Board.
- Restricted nonexpendable – equal the principal portion of permanent endowments.
- Unrestricted – consist of the remaining net position that do not meet the definition of invested in capital assets net of related debt or restricted.

Operating Revenues and Expenses

The District's statement of revenues, expenses and changes in net position distinguishes between operating and nonoperating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services – the Hospital's principal activity. Nonexchange revenues, including taxes, 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.

Noncurrent Assets – Noncurrent assets primarily include assets held by trustees under indenture agreements and designated assets set aside by the Board for future capital improvements, over which the Board retains control and may at its discretion subsequently use for other purposes. Amounts required to meet current liabilities of the Hospital have been reclassified in the balance sheet at December 31, 2017 and 2016.

Net Patient Service Revenue

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

- Medicare – As a critical access Hospital, all Medicare revenue sources except Ambulance, Home Health, and Hospice are reimbursed on a cost plus 1% basis. Other Medicare revenues are paid on a per unit of service basis. The Hospital is reimbursed for cost reimbursable items at a tentative rate with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicare fiscal intermediary. The Hospital's classification of patients under the Medicare program and the appropriateness of their admission are subject to an independent review by a peer review organization under contract with the Hospital. The Hospital's Medicare cost reports have been audited by the Medicare fiscal intermediary through December 31, 2015.

SOUTHEAST COLORADO HOSPITAL DISTRICT
SPRINGFIELD, COLORADO
NOTES TO FINANCIAL STATEMENTS
December 31, 2017

NOTE 1 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Net Patient Service Revenue (Continued)

- Medicaid – Inpatient services provided to Medicaid Program beneficiaries are paid prospectively determined rates per discharge. Outpatient and Nursing Facility services rendered to Medicaid program beneficiaries are reimbursed under a cost reimbursement methodology. The Hospital is reimbursed at a tentative rate with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the Medicaid fiscal intermediary. The Hospital's Medicaid cost reports have been audited by the Medicaid fiscal intermediary through December 31, 2015.

- Blue Cross - Inpatient services rendered to Blue Cross subscribers are reimbursed based on charges less an adjustment of from 2% to 9%.

The Hospital has also entered into payment agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. The basis for payment to the Hospital under these agreements is charges less an adjustment of from 2% to 9%.

NOTE 2 DEPOSITS AND INVESTMENTS

The Colorado Public Deposit Protection Act (PDPA), requires that all units of local government deposit cash in eligible public depositories, eligibility is determined by state regulators. Amounts on deposit in excess of federal insurance levels must be collateralized. The eligible collateral is determined by the PDPA. PDPA allows the institution to create a single collateral pool for all public funds. The pool is to be maintained by another institution or held in trust for all the uninsured public deposits as a group. The market value of the collateral must be at least equal to the aggregate uninsured deposits.

SOUTHEAST COLORADO HOSPITAL DISTRICT
 SPRINGFIELD, COLORADO
 NOTES TO FINANCIAL STATEMENTS
 December 31, 2017

NOTE 2 DEPOSITS AND INVESTMENTS (Continued)

At December 31, 2017 and 2016, the District had bank balances as follows:

	<u>2017</u>		<u>2016</u>	
	<u>Carrying Balance</u>	<u>Bank Balance</u>	<u>Carrying Balance</u>	<u>Bank Balance</u>
Insured (FDIC)	787,550	787,306	318,732	318,732
Uninsured, collateralized under the Public Deposit Protection Act of the State of Colorado	2,619,473	2,409,212	5,216,573	5,518,387
Cash with the County Treasurer	3,458	-	2,753	-
Cash on Hand	7,241	-	9,366	-
<u>Total Cash and Deposits</u>	<u>3,417,722</u>	<u>3,196,518</u>	<u>5,547,424</u>	<u>5,837,119</u>
<u>Recap</u>				
Cash and Cash Equivalents	2,692,418		4,827,444	
Certificates of Deposit	725,304		719,980	
<u>Total</u>	<u>3,417,722</u>		<u>5,547,424</u>	

Deposits with a bank balance of \$2,409,212 and \$5,518,387 and carrying balance of \$2,619,473 and \$5,216,573 as of December 31, 2017 and 2016 are uninsured, are exposed to custodial risk, and are collateralized with securities held by the pledging financial institution.

Investments

Colorado statutes specify investment instruments meeting defined rating and risk criteria in which the local government entities may invest:

- Obligations of the United States and certain U.S. government agency securities
- Certain international agency securities
- General obligation and revenue bonds of U.S. local government entities
- Bankers' acceptances of certain banks
- Commercial paper
- Local government investment pools
- Written repurchase agreements collateralized by certain authorized securities
- Certain money market funds
- Guaranteed investment contracts

SOUTHEAST COLORADO HOSPITAL DISTRICT
 SPRINGFIELD, COLORADO
 NOTES TO FINANCIAL STATEMENTS
 December 31, 2017

NOTE 2 DEPOSITS AND INVESTMENTS (Continued)

Investments (Continued)

At December 31, 2017 and 2016, the District had the following investments:

<u>Year</u>	<u>Investment</u>	<u>Maturity</u>	<u>Fair Value</u>	<u>Credit Risk Rating</u>
2017	Certificates of Deposit	6 to 12 Months	725,304	N/A
2017	COLOTRUST	44 Day Average	<u>1,327,120</u>	AAA
		Total	<u>2,052,424</u>	
2016	Certificates of Deposit	6 to 12 Months	<u>719,980</u>	N/A

Interest Rate Risk – The District does not have a formal investment policy that limits investment maturities for managing possible fair value losses due to increasing interest rates.

Credit Risk – State Law limits the type of investments allowable. The Certificates of deposit are not rated.

Concentration of Credit Risk – The District has no policy restricting the amount that can be invested in any issuer.

The District categorizes its fair value measurements within the fair value hierarchy established by generally accepted accounting principles. The hierarchy is based on the valuation inputs used to measure the fair value of the asset. Level 1 inputs are quoted prices in active markets for identical assets; Level 2 inputs are significant other observable inputs; Level 3 inputs are significant unobservable inputs.

The District has the following recurring fair value measurements as of December 31, 2017:

- Certificates of Deposit are valued at cost (Level 3 Inputs)
- COLOTRUST – Investments in this external investment pool are reported at \$1 net asset value per share and are not subject to fair value measurement. The investment is reported at cost.

NOTE 3 ACCOUNTS RECEIVABLE AND PAYABLE

Patient accounts receivable and accounts payable (including accrued expenses) reported as current assets and liabilities by the District at December 31, 2017 and 2016 consisted of these amounts:

<u>Patient Accounts Receivable</u>	<u>2017</u>	<u>2016</u>
Receivable from Patients and their Insurance Carriers	921,598	1,135,559
Receivable from Medicare	1,685,145	3,098,289
Receivable from Medicaid	<u>713,582</u>	<u>896,559</u>
<u>Total Patient Accounts Receivable</u>	3,320,325	5,130,407
Less Allowance for Uncollectibles Amounts	<u>1,662,634</u>	<u>2,629,255</u>
<u>Patient Accounts Receivable, Net</u>	<u>1,657,691</u>	<u>2,501,152</u>
<u>Accounts Payable and Accrued Expenses</u>		
Payable to Employees	691,079	631,831
Construction Retainage Payable	323,197	-
Payable to Suppliers	158,383	166,683
Self Insurance – Claims Incurred Not Reported	<u>100,000</u>	<u>100,000</u>
<u>Total Accounts Payable and Accrued Expenses</u>	<u>1,272,659</u>	<u>898,514</u>

SOUTHEAST COLORADO HOSPITAL DISTRICT
 SPRINGFIELD, COLORADO
 NOTES TO FINANCIAL STATEMENTS
 December 31, 2017

NOTE 4 CAPITAL ASSETS

Capital asset additions, retirements, and balances for the years ended December 31, 2016 and 2017 were as follows:

	Balance <u>Dec.31, 2015</u>	<u>Adjustment</u>	<u>Additions</u>	<u>Retirements</u>	Balance <u>Dec. 31, 2016</u>
Land	90,089	-	-	-	90,089
Land Improvements	109,480	-	33,212	-	142,692
Buildings & Improvements	6,021,100	-	-	-	6,021,100
Equipment	7,195,436	1,125	576,381	-	7,772,942
Construction in Progress	1,125	<u>(1,125)</u>	<u>1,421,215</u>	-	<u>1,421,215</u>
<u>Totals at Historical Cost</u>	<u>13,417,230</u>	<u>-</u>	<u>2,030,808</u>	<u>-</u>	<u>15,448,038</u>
Less Accumulated Depreciation for:					
Land Improvements	89,374	-	5,663	-	95,037
Buildings & Improvements	3,736,190	-	166,213	-	3,902,403
Equipment	<u>5,666,913</u>	<u>-</u>	<u>569,238</u>	<u>-</u>	<u>6,236,151</u>
<u>Total Accumulated Depreciation</u>	<u>9,492,477</u>	<u>-</u>	<u>741,114</u>	<u>-</u>	<u>10,233,591</u>
<u>Capital Assets, Net</u>	<u>3,924,753</u>	<u>-</u>	<u>1,289,694</u>	<u>-</u>	<u>5,214,447</u>
	Balance <u>Dec.31, 2016</u>	<u>Adjustment</u>	<u>Additions</u>	<u>Retirements</u>	Balance <u>Dec. 31, 2017</u>
Land	90,089	-	-	-	90,089
Land Improvements	142,692	-	-	47,971	94,721
Buildings & Improvements	6,021,100	1,340,993	2,126,634	809,107	8,679,620
Equipment	7,772,942	-	127,185	4,035,662	3,864,465
Construction in Progress	<u>1,421,215</u>	<u>(1,340,993)</u>	<u>-</u>	<u>-</u>	<u>80,222</u>
<u>Totals at Historical Cost</u>	<u>15,448,038</u>	<u>-</u>	<u>2,253,819</u>	<u>4,892,740</u>	<u>12,809,117</u>
Less Accumulated Depreciation for:					
Land Improvements	95,037	-	5,155	46,372	53,820
Buildings & Improvements	3,902,403	-	237,567	777,195	3,362,775
Equipment	<u>6,236,151</u>	<u>-</u>	<u>468,940</u>	<u>4,024,017</u>	<u>2,681,074</u>
<u>Total Accumulated Depreciation</u>	<u>10,233,591</u>	<u>-</u>	<u>711,662</u>	<u>4,847,584</u>	<u>6,097,669</u>
<u>Capital Assets, Net</u>	<u>5,214,447</u>	<u>-</u>	<u>1,542,157</u>	<u>45,156</u>	<u>6,711,448</u>

SOUTHEAST COLORADO HOSPITAL DISTRICT
 SPRINGFIELD, COLORADO
 NOTES TO FINANCIAL STATEMENTS
 December 31, 2017

NOTE 5 LONG-TERM DEBT AND OTHER NONCURRENT LIABILITIES

A schedule of changes in the District's noncurrent liabilities for 2016 and 2017 follows:

<u>Changes in Debt</u>	<u>Balance</u> <u>1-1-16</u>	<u>Additions</u>	<u>Reductions</u>	<u>Balance</u> <u>12-31-16</u>	<u>Amounts Due</u> <u>Within One Year</u>
Lease Purchase Agreements	197,387	2,782,374	191,815	2,787,946	309,031
Notes Payable	<u>100,000</u>	<u>-</u>	<u>100,000</u>	<u>-</u>	<u>-</u>
Total Long-Term Debt	<u>297,387</u>	<u>2,782,374</u>	<u>291,815</u>	<u>2,787,946</u>	<u>309,031</u>
	<u>Balance</u> <u>1-1-17</u>	<u>Additions</u>	<u>Reductions</u>	<u>Balance</u> <u>12-31-17</u>	<u>Amounts Due</u> <u>Within One Year</u>
Lease Purchase Agreements	2,787,946	234,380	315,903	2,706,423	302,861
Notes Payable	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total Long-Term Debt	<u>2,787,946</u>	<u>234,380</u>	<u>315,903</u>	<u>2,706,423</u>	<u>302,861</u>

<u>Lease Purchase Agreements</u>	<u>2017</u>	<u>2016</u>
1) A lease purchase agreement for the purchase of three copiers was executed September 25, 2012. The original amount was \$16,925 with interest at 8.78% for 5 years with payments of \$349.52 per month.	-	3,211
2) A lease purchase agreement for the purchase of a Phillips 16 slice CT was executed April 30, 2013. The original amount was \$165,308 with interest at 4.50% for 5 years with payments of \$3,081.64 per month.	12,212	47,770
3) A lease purchase agreement for the purchase of printers was executed June 20, 2014. The original amount was \$29,790 with interest at 3.20% for 5 years with payments of \$538 monthly.	9,443	14,994
4) A lease purchase agreement for the purchase of a Dimension_ExL200 Chemistry Immunoassay Integrated System was executed May 21, 2015. The original amount was \$100,000 with interest at 3.183% for 5 years with payments of \$1,805 monthly.	50,318	70,366
5) A lease purchase agreement for the purchase of a Lexmark copier was executed April 20, 2016. The original amount was \$7,177 with interest at 5.64% for 5 years with payments of \$138 monthly.	4,891	6,225
6) A lease purchase agreement for the purchase of HVAC Equipment was executed October 15, 2016. The original amount was \$2,775,197 with interest at 3.242% for 10 years with payments of \$27,110.04 per month. An additional principal payment of \$90,645 was made on December 28, 2016.	2,615,556	2,645,380
7) A lease purchase agreement for the purchase of a copier was executed November 10, 2017. The original amount was \$14,380 with interest at 9.55% per 5 years with payment of \$302.39 per month.	<u>14,003</u>	<u>-</u>
<u>Total Lease Purchase Payable</u>	<u>2,706,423</u>	<u>2,787,946</u>

SOUTHEAST COLORADO HOSPITAL DISTRICT
 SPRINGFIELD, COLORADO
 NOTES TO FINANCIAL STATEMENTS
 December 31, 2017

NOTE 5 LONG-TERM DEBT AND OTHER NONCURRENT LIABILITIES (Continued)

The District has entered into lease agreements for the acquisition of equipment. These lease purchase agreements qualify as capital leases for accounting purposes and, therefore, have been recorded at the present value of the future minimum lease payments as of the date of their inception. The following is a schedule of the future minimum lease payments under these capital leases, and the present value of the net minimum lease payments at December 31, 2016 and 2017.

<u>Year</u>	<u>2016</u>			<u>2017</u>		
	<u>Principal</u>	<u>Interest</u>	<u>Total</u>	<u>Principal</u>	<u>Interest</u>	<u>Total</u>
2017	309,031	86,325	395,356	-	-	-
2018	291,388	76,026	367,414	302,861	83,393	386,254
2019	284,588	66,733	351,321	297,073	73,627	370,700
2020	278,485	57,512	335,997	290,936	63,900	354,836
2021	277,176	48,556	325,732	290,156	54,416	344,572
2022	285,876	39,444	325,320	298,809	44,745	343,554
2023	295,283	30,037	325,320	305,570	34,962	340,532
2024	304,999	20,321	325,320	315,541	24,991	340,532
2025	315,036	10,284	325,320	325,838	14,694	340,532
2026	<u>146,084</u>	<u>1,277</u>	<u>147,361</u>	<u>279,639</u>	<u>4,134</u>	<u>283,773</u>
Total Minimum Lease Payments	<u>2,787,946</u>	<u>436,515</u>	3,224,461	<u>2,706,423</u>	<u>398,862</u>	3,105,285
Less: Amount Representing Interest			<u>436,515</u>			<u>398,862</u>
Present Value of Future Minimum Lease Payments			<u>2,787,946</u>			<u>2,706,423</u>

NOTE 6 BUDGET

A comparison for budgeted and actual revenues and expenditures as of December 31, 2016 and 2017 is presented in the following schedule:

(This comparison is not a schedule of operations.)

	<u>2016</u>		<u>2017</u>	
	<u>Budget</u>	<u>Actual</u>	<u>Budget</u>	<u>Actual</u>
<u>Revenues</u>	<u>15,764,483</u>	<u>15,173,372</u>	<u>15,767,849</u>	<u>15,377,941</u>
<u>Expenditures</u>	<u>15,084,077</u>	<u>14,621,903</u>	<u>15,752,264</u>	<u>15,568,300</u>

SOUTHEAST COLORADO HOSPITAL DISTRICT
SPRINGFIELD, COLORADO
NOTES TO FINANCIAL STATEMENTS
December 31, 2017

NOTE 7 CONTINGENCIES

In November 1992, the voters of Colorado approved Amendment 1, commonly known as the Taxpayer's bill of rights (TABOR), which adds a new Section 20 to Article X of the Colorado Constitution. TABOR contains tax, spending, revenue and debt limitations which apply to the State of Colorado and all local governments.

Enterprises, defined as government-owned businesses authorized to issue revenue bonds and receiving less than 10% of annual revenue in property taxes and grants from all state and local governments combined, are excluded from the provisions of TABOR. (The District's management believes its operations qualify for this exclusion).

The District's management believes it is in compliance with the provisions of TABOR. However, TABOR is complex and subject to interpretation. Many of the provisions, including the interpretation of the qualifications of an Enterprise will require judicial interpretation.

The District is not in any claims or actions which will result in costs or losses to the District that are uninsured or of a material nature.

NOTE 8 RISK MANAGEMENT

The Hospital is exposed to various risks of loss related to torts, thefts of, damage to, or destruction of assets; errors or omissions; injuries to employees, or acts of God.

The Hospital maintains commercial insurance for all risks of loss. Settled claims have not exceeded this commercial coverage in any of the past three fiscal years.

NOTE 9 DEFINED CONTRIBUTION PENSION PLAN

The District provides pension benefits for substantially all full time employees through a defined contribution plan of Colorado County Officials and Employees Retirement Association. In a defined contribution plan, benefits depend solely on amounts contributed to the plan plus investment earnings. One year of service is required previous to participation in the Colorado County Officials and Employees Retirement Association Plan.

Employees contribute 3% of their salary to the plan with an equal amount contributed by the District. Vesting occurs at the rate of 20% per year. District contributions for, and earnings forfeited by, employees who leave employment before fully vesting are returned to the District.

SOUTHEAST COLORADO HOSPITAL DISTRICT
 SPRINGFIELD, COLORADO
 NOTES TO FINANCIAL STATEMENTS
 December 31, 2017

NOTE 9 DEFINED CONTRIBUTION PENSION PLAN (continued)

The following is a summary of the plan activity for 2016 and 2017:

	2016	2017
Total Payroll	7,921,786	8,306,148
Salary for Contributions	7,627,313	5,976,467
District Contributions (at 3%)	168,560	179,294
Employee Contributions (at 3%)	168,560	179,294
Pension Expense	155,301	174,577
Forfeitures	13,259	4,717

The District has no outstanding pension liability at year end.

Deferred Compensation Plan

The District offers its employees a deferred compensation plan created in accordance with Internal Revenue Code Section 457. The plan, available to all permanent employees, permits them to defer a portion of their salary until future years. The deferred compensation is not available to employees until termination, retirement, death, or unforeseeable emergency.

In previous years the District adopted an amendment to its Deferred Compensation Plan with CCOERA. The adoption of the amendment was due to recent changes in the Internal Revenue Code. Specifically the amendment states that all amounts deferred under this plan, all property and rights purchased with such amounts, and all income attributable to such amounts, property or rights shall, until made available to the participant or beneficiary, be held in the Colorado County Officials and Employees Retirement Association Deferred Compensation Plan Trust for the exclusive benefit of participants and their beneficiaries. Colorado County Officials and Employees Retirement Association is trustee of the trust.

Eligible voluntary employee contributions were \$93,360 for 2016 and \$88,790 for 2017.