



**WEISBROD MEMORIAL COUNTY HOSPITAL
AND
THE KIOWA COUNTY HOSPITAL DISTRICT**

Management's Discussion and Analysis,

Financial Statements

And

Supplementary Information

For the Years Ended December 31, 2023 and 2022,

And

Independent Auditors' Report

WEISBROD MEMORIAL COUNTY HOSPITAL AND THE KIOWA COUNTY HOSPITAL DISTRICT

TABLE OF CONTENTS

	Page
INDEPENDENT AUDITORS' REPORT	1
MANAGEMENT'S DISCUSSION AND ANALYSIS	4
FINANCIAL STATEMENTS FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022	
Statements of Net Position	8
Statements of Revenues, Expenses and Changes in Net Position	10
Statements of Cash Flows	11
Notes to Financial Statements	13
SUPPLEMENTARY INFORMATION	
Budgeted and Actual Revenues and Expenses	22

INDEPENDENT AUDITORS' REPORT

The Board of Directors
Weisbrod Memorial County Hospital and the Kiowa County Hospital District
Eads, Colorado

Opinion

We have audited the accompanying financial statements of Weisbrod Memorial County Hospital and the Kiowa County Hospital District (the District), which comprise the statements of net position as of December 31, 2023 and 2022, and the related statements of revenues, expenses and changes in net position and of cash flows for the years then ended and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Weisbrod Memorial County Hospital and the Kiowa County Hospital District as of December 31, 2023 and 2022, and the changes in its financial position and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the District, and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the District's ability to continue as a going concern for twelve months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

Auditors' Responsibility for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion.

Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

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

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

Required Supplementary Information

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis on pages 4 through 7 be presented to supplement the basic financial statements. Such information is the responsibility of management, and 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.

Other Supplementary Information

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

Stockman Kast Ryan + Co. LLP

May 22, 2024

WEISBROD MEMORIAL COUNTY HOSPITAL AND THE KIOWA COUNTY HOSPITAL DISTRICT

MANAGEMENT'S DISCUSSION AND ANALYSIS

The management's discussion and analysis of the financial performance of Weisbrod Memorial County Hospital and the Kiowa County Hospital District (the District) provides an overview and analysis of the District's financial activities for the years ended December 31, 2023, 2022 and 2021. It should be read in conjunction with the accompanying basic financial statements.

Financial Highlights

- The District's total net position increased by \$249,744 and \$1,076,884 during 2023 and 2022, respectively. As of December 31, 2023, the District's net position is \$12,608,473.
- Operating revenues decreased by \$550,457 and increased by \$821,824 during 2023 and 2022, respectively.
- Operating expenses increased by \$306,954 and \$353,954 during 2023 and 2022, respectively.

Financial Statements

The District's financial statements are prepared using proprietary fund accounting that focuses on the determination of changes in financial position and cash flows in a manner similar to private-sector businesses. The District is accounted for as a business-type activity and presents its financial statements using the economic resources measurement focus and the accrual basis of accounting. The District's financial statements consist of three statements: a statement of net position, a statement of revenues, expenses and changes in net position and a statement of cash flows.

The statement of net position presents information on the District's assets, deferred outflows, liabilities and deferred inflows, with the net difference reported as net position. Over time, increases or decreases in net position may indicate whether the financial position of the District is improving or deteriorating.

The statement of revenues, expenses and changes in net position presents both the operating revenues and expenses and non-operating revenues and expenses along with other changes in net position. This statement is an indication of the success of the District's operations.

The statement of cash flows presents the change in cash and cash equivalents resulting from operating activities, non-capital financing activities, capital and related financing activities and investing activities. The primary purpose of this statement is to provide information about the District's cash receipts and cash payments.

The notes to the financial statements provide additional information that is essential for a full understanding of the financial statements.

Statements of Net Position

	2023	2022	2021
ASSETS			
Cash and investments	\$ 6,944,066	\$ 6,743,228	\$ 5,893,524
Patient accounts receivable, net	635,411	867,473	1,472,702
Other current assets	1,714,275	1,648,455	1,148,894
Capital assets, net	<u>4,450,800</u>	<u>4,043,435</u>	<u>4,370,824</u>
Total assets	<u>\$ 13,744,552</u>	<u>\$ 13,302,591</u>	<u>\$ 12,885,944</u>
LIABILITIES, DEFERRED INFLOWS AND NET POSITION			
Current liabilities	<u>\$ 443,783</u>	<u>\$ 420,086</u>	<u>\$ 1,100,242</u>
Long-term liabilities - note payable	<u>168,405</u>		
Deferred inflows of resources — deferred property tax revenue	<u>523,891</u>	<u>523,776</u>	<u>503,857</u>
NET POSITION			
Investment in capital assets	4,234,283	4,043,435	4,370,824
Restricted	811,848	8,197	8,393
Unrestricted	<u>7,562,342</u>	<u>8,307,097</u>	<u>6,902,628</u>
Total net position	<u>12,608,473</u>	<u>12,358,729</u>	<u>11,281,845</u>
Total liabilities and net position	<u>\$ 13,744,552</u>	<u>\$ 13,302,591</u>	<u>\$ 12,885,944</u>

Total assets increased by \$441,961 in 2023. Cash and investments increased mainly as the result of improved collections during the year. Patient accounts receivable decreased due to improved timeliness of billings and collections. Other current assets increased mainly due to a grant receivable of \$183,566 as of December 31, 2023, which was collected during 2024. Capital assets increased due to asset purchases exceeding depreciation expense during the year. Current liabilities increased by \$23,697 due to normal operating fluctuations. Net position increased by \$249,744, as discussed further below.

Total assets increased by \$416,647 in 2022. Cash and investments increased mainly as the result of revenues in excess of expenses and improved collections during the year. Patient accounts receivable decreased due to improved timeliness of billings and collections. Other current assets increased mainly due to a receivable from the Medicare program of \$383,075 as of December 31, 2022. Capital assets decreased due to depreciation expense exceeding asset purchases during the year. Current liabilities decreased by \$680,156 in 2022, due mainly to the \$498,886 Medicare cost report liability as of December 31, 2021 being settled in 2022. Net position increased by \$1,629,724, as discussed further below.

Statements of Revenues, Expenses and Changes in Net Position

	2023	2022	2021
OPERATING REVENUES	<u>\$ 9,990,539</u>	<u>\$ 10,540,996</u>	<u>\$ 9,719,172</u>

OPERATING EXPENSES			
Salaries, wages and employee benefits	5,025,350	4,808,860	5,249,044
Purchased services and professional fees	3,276,722	2,990,929	2,407,776
Supplies	1,204,769	1,271,200	1,286,776
Depreciation	382,941	463,478	436,570
Other	<u>861,005</u>	<u>909,366</u>	<u>709,713</u>
Total operating expenses	<u>10,750,787</u>	<u>10,443,833</u>	<u>10,089,879</u>
INCOME (LOSS) FROM OPERATIONS	<u>(760,248)</u>	<u>97,163</u>	<u>(370,707)</u>
NON-OPERATING INCOME			
Property taxes	736,692	713,410	788,476
Grant revenue	262,316	232,561	1,496,192
Other income, net	<u>10,984</u>	<u>33,750</u>	<u>84,302</u>
Non-operating income, net	<u>1,009,992</u>	<u>979,721</u>	<u>2,368,970</u>
REVENUES OVER EXPENSES	249,744	1,076,884	1,998,263
Grants and contributions restricted for capital assets	<u> </u>	<u> </u>	<u>271,164</u>
CHANGE IN NET POSITION	249,744	1,076,884	2,269,427
NET POSITION, Beginning of year	<u>12,358,729</u>	<u>11,281,845</u>	<u>9,012,418</u>
NET POSITION, End of year	<u>\$ 12,608,473</u>	<u>\$ 12,358,729</u>	<u>\$ 11,281,845</u>

The 2023 statement shows a decrease in operating revenues of \$550,457 and an increase in operating expenses of \$306,954, resulting in loss from operations of \$760,248 in 2023 compared with income from operations of \$97,163 in 2022. The increase in net position was \$249,744 in 2023 compared with an increase of \$1,076,884 in 2022. The 2022 statement shows an increase in operating revenues of \$821,824 and an increase in operating expenses of \$353,954, resulting in income from operations of \$97,163 in 2022 compared with a loss from operations of \$370,707 in 2021.

Operating revenues decreased in 2023 compared to 2022 primarily due to decreased Medicare swing bed revenues. Operating expenses increased in 2023 compared to 2022 primarily due to increased professional fees due to staffing shortages and increased salaries, wages and employee benefits.

Operating revenues increased in 2022 compared to 2021 primarily due to increased Medicare swing bed revenues. Operating expenses increased in 2022 compared to 2021 primarily due to increased professional fees due to staffing shortages.

Non-operating income increased by \$30,271 in 2023 compared to 2022 due primarily to additional property tax and grant revenues received in 2023.

Non-operating income decreased by \$1,389,249 in 2022 compared to 2021 due primarily to \$1,496,192 of CARES Act grant revenue during 2021.

Capital Assets and Debt Administration

Capital Assets — At December 31, 2023, 2022 and 2021, the District had \$4,450,800, \$4,043,435 and \$4,370,824, respectively, invested in capital assets, net of accumulated depreciation, as detailed in Note 5 to the financial statements. During 2023, the District acquired capital assets of \$797,715. The acquisitions consisted primarily of a duplex and equipment. During 2022, the District acquired capital assets of \$207,319. The acquisitions consisted primarily of building improvements and equipment. During 2021, the District acquired capital assets of \$2,017,332. The acquisitions consisted primarily of building improvements and equipment.

Debt — In 2023, the District borrowed \$250,409 to finance the purchase of a duplex. See note 6 for further information.

The District's Cash Flows

Changes in the District's cash flows are consistent with changes in operating income and non-operating income and expenses, discussed earlier.

Contacting the District's Financial Management

This financial report is designed to provide the citizens, taxpayers, patients and creditors of the District a general overview of the District's finances and to demonstrate the District's accountability. If you have questions about this report or need additional financial information, contact the Kiowa County Hospital District, P. O. Box 817, Eads, Colorado 81036.

**WEISBROD MEMORIAL COUNTY HOSPITAL AND
THE KIOWA COUNTY HOSPITAL DISTRICT**

**STATEMENTS OF NET POSITION
DECEMBER 31, 2023 AND 2022**

	2023	2022
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	\$ 6,132,218	\$ 5,947,467
Investments	549,799	651,797
Patient accounts receivable, net	635,411	867,473
Grants receivable	183,566	
Property taxes receivable	523,891	523,776
Estimated third-party payer settlements	474,778	510,391
Supplies	399,024	436,830
Other current assets	<u>133,016</u>	<u>177,458</u>
Total current assets	9,031,703	9,115,192
NON-CURRENT INVESTMENTS		135,767
ASSETS WHOSE USE IS LIMITED		
Investments held as collateral on note payable	250,159	
Cash held by County Treasurer	11,890	8,197
CAPITAL ASSETS, NET	<u>4,450,800</u>	<u>4,043,435</u>
TOTAL	<u>\$ 13,744,552</u>	<u>\$ 13,302,591</u>

(Continued)

**WEISBROD MEMORIAL COUNTY HOSPITAL AND
THE KIOWA COUNTY HOSPITAL DISTRICT**

**STATEMENTS OF NET POSITION
DECEMBER 31, 2023 AND 2022**

	2023	2022
LIABILITIES, DEFERRED INFLOWS OF RESOURCES AND NET POSITION		
CURRENT LIABILITIES		
Accounts payable	\$ 106,731	\$ 154,868
Accrued expenses and other current liabilities	288,940	230,218
Current portion of note payable	48,112	
Unearned grant revenue		35,000
Total current liabilities	<u>443,783</u>	<u>420,086</u>
NOTE PAYABLE	<u>168,405</u>	
Total liabilities	<u>612,188</u>	<u>420,086</u>
DEFERRED INFLOWS OF RESOURCES		
Deferred property tax revenue	<u>523,891</u>	<u>523,776</u>
NET POSITION		
Net investment in capital assets	4,234,283	4,043,435
Restricted	262,049	8,197
Unrestricted	<u>8,112,141</u>	<u>8,307,097</u>
Total net position	<u>12,608,473</u>	<u>12,358,729</u>
TOTAL	<u>\$ 13,744,552</u>	<u>\$ 13,302,591</u>

See notes to financial statements.

(Concluded)

**WEISBROD MEMORIAL COUNTY HOSPITAL AND
THE KIOWA COUNTY HOSPITAL DISTRICT**

**STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION
FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022**

	2023	2022
OPERATING REVENUES		
Net patient service revenue, net of provision for bad debts	\$ 9,906,683	\$ 10,469,339
Other operating revenue	<u>83,856</u>	<u>71,657</u>
Total operating revenues	<u>9,990,539</u>	<u>10,540,996</u>
OPERATING EXPENSES		
Salaries, wages and employee benefits	5,025,350	4,808,860
Purchased services and professional fees	3,276,722	2,990,929
Supplies and drugs	1,204,769	1,271,200
Depreciation	382,941	463,478
Other	<u>861,005</u>	<u>909,366</u>
Total operating expenses	<u>10,750,787</u>	<u>10,443,833</u>
INCOME (LOSS) FROM OPERATIONS	<u>(760,248)</u>	<u>97,163</u>
NON-OPERATING INCOME		
Property taxes	736,692	713,410
Grant revenue	262,316	232,561
Other, net	<u>10,984</u>	<u>33,750</u>
Non-operating income, net	<u>1,009,992</u>	<u>979,721</u>
CHANGE IN NET POSITION	249,744	1,076,884
NET POSITION, Beginning of year	<u>12,358,729</u>	<u>11,281,845</u>
NET POSITION, End of year	<u>\$ 12,608,473</u>	<u>\$ 12,358,729</u>

See notes to financial statements.

**WEISBROD MEMORIAL COUNTY HOSPITAL AND
THE KIOWA COUNTY HOSPITAL DISTRICT**

**STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022**

	2023	2022
OPERATING ACTIVITIES		
Receipts from and on behalf of patients	\$ 10,174,358	\$ 10,065,291
Payments to vendors	(5,354,772)	(5,180,817)
Payments to employees	(4,964,683)	(4,789,219)
Other, net	<u>(55,268)</u>	<u>123,320</u>
Net cash provided by (used in) operating activities	<u>(200,365)</u>	<u>218,575</u>
NON-CAPITAL FINANCING ACTIVITIES		
Property taxes supporting operations	736,692	713,410
Other, net	<u>220,559</u>	<u>101,850</u>
Net cash provided by non-capital financing activities	<u>957,251</u>	<u>815,260</u>
CAPITAL AND RELATED FINANCING ACTIVITIES		
Purchases of capital assets	(547,306)	(207,319)
Proceeds from sales of capital assets		15,250
Principal payments on note payable	<u>(33,892)</u>	<u></u>
Net cash used in capital and related financing activities	<u>(581,198)</u>	<u>(192,069)</u>
INVESTING ACTIVITIES		
Investment income	25,150	7,938
Purchases of investments and restricted cash	(799,958)	(787,564)
Proceeds from disposition and maturities of investments	<u>787,564</u>	<u>783,944</u>
Net cash provided by investing activities	<u>12,756</u>	<u>4,318</u>
NET INCREASE IN CASH AND CASH EQUIVALENTS	188,444	846,084
CASH AND CASH EQUIVALENTS, Beginning of year	<u>5,955,664</u>	<u>5,109,580</u>
CASH AND CASH EQUIVALENTS, End of year	<u><u>\$ 6,144,108</u></u>	<u><u>\$ 5,955,664</u></u>

(Continued)

**WEISBROD MEMORIAL COUNTY HOSPITAL AND
THE KIOWA COUNTY HOSPITAL DISTRICT**

**STATEMENTS OF CASH FLOWS
FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022**

	2023	2022
RECONCILIATION OF CASH AND CASH EQUIVALENTS TO THE STATEMENTS OF NET POSITION		
Cash and cash equivalents	\$ 6,132,218	\$ 5,947,467
Cash held by County Treasurer	<u>11,890</u>	<u>8,197</u>
TOTAL CASH AND CASH EQUIVALENTS	<u>\$ 6,144,108</u>	<u>\$ 5,955,664</u>
RECONCILIATION OF INCOME (LOSS) FROM OPERATIONS TO NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES		
Income (loss) from operations	\$ (760,248)	\$ 97,163
Adjustments to reconcile income (loss) from operations to net cash provided by (used in) operating activities:		
Depreciation	382,941	463,478
Patient accounts receivable, net	232,062	605,229
Grants receivable	(183,566)	
Estimated third-party payer settlements	35,613	(1,009,277)
Accounts payable and other current liabilities	10,585	31,233
Other assets and liabilities	<u>82,248</u>	<u>30,749</u>
NET CASH PROVIDED BY (USED IN) OPERATING ACTIVITIES	<u>\$ (200,365)</u>	<u>\$ 218,575</u>
NON-CASH CAPITAL AND RELATED FINANCING ACTIVITIES		
Note payable incurred for capital assets	<u>\$ 250,409</u>	

See notes to financial statements.

(Concluded)

WEISBROD MEMORIAL COUNTY HOSPITAL AND THE KIOWA COUNTY HOSPITAL DISTRICT

NOTES TO FINANCIAL STATEMENTS

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

General — The Kiowa County Hospital District (the District), is a Colorado health services district organized and existing in accordance with the Special District Act and charged with the responsibility of ensuring the availability of necessary medical services to the citizens of Kiowa County, Colorado and the surrounding area. Consistent with its statutory purpose and authority, the District owns, operates, and conducts a hospital located within the geographic boundaries of the District, known as the Weisbrod Memorial County Hospital, a licensed 25-bed critical access hospital with acute and long-term beds and the Eads Medical Clinic (EMC), a rural health clinic, located in Eads, Colorado. The District's five-member Board of Directors is elected by the citizens of Kiowa County. The Board of Directors operates, controls and manages the District.

Reporting Entity — For financial reporting purposes, the District has included all funds, organizations, agencies, boards, commissions and authorities. The District has also considered all potential component units for which it is financially accountable and other organizations for which the nature and significance of their relationship with the District are such that the exclusion would cause the District's financial situation to be misleading or incomplete. The Governmental Accounting Standards Board (GASB) has set forth criteria to be considered in determining financial accountability. These criteria include appointing a voting majority of an organization's governing body and (1) the ability of the District to impose its will on that organization or (2) the potential for the organization to provide specific benefits to or impose specific financial burdens on the District. The District does not have a component unit which meets the GASB criteria.

Basis of Presentation — The financial statements of the District have been prepared on the accrual basis of accounting using the economic resources measurement focus. Revenues, expenses, gains, losses, assets and liabilities from exchange and exchange-like transactions are recognized when the exchange transaction takes place, while those from government-mandated nonexchange transactions (principally federal and state grants) are recognized when all applicable eligibility requirements are met. Operating revenues and expenses include exchange transactions and program-specific, government-mandated non-exchange transactions. Government-mandated non-exchange transactions that are not program specific, property taxes, investment income and interest on capital assets-related debt are included in non-operating revenues and expenses. The District first applies restricted net position when an expense or outlay is incurred for purposes for which both restricted and unrestricted net positions are available.

Use of Estimates — The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure 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.

Cash and Cash Equivalents — The District considers all liquid investments, other than those limited as to use, with the original maturities of three months or less to be cash equivalents.

Property Taxes — The District received approximately 7% and 6% of its financial support, excluding other non-operating income, from property taxes in 2023 and 2022, respectively. These funds were used to support operations. Taxes are assessed on January 1 and are due in one installment on April 30 or in two installments on February 28 and June 15 of each year. The County bills and collects property taxes for the District. Revenue from property taxes is recognized in the year for which the taxes are levied.

Investments and Investment Income — Investments consist of certificates of deposit and are stated at fair value. Certificates of deposit are valued based on cost, which approximates fair value. Investment income includes dividend and interest income and, when applicable, realized and unrealized gains and losses on investments.

Patient Accounts Receivable — The District reports patient accounts receivable for services rendered at net realizable amounts from third-party payers, patients and others. The District provides an allowance for uncollectible accounts based upon a review of outstanding receivables, historical collection information and existing economic conditions. As a service to the patient, the District bills third-party payers directly and bills the patient when the patient's liability is determined. Patient accounts receivable are due in full when billed. Accounts are considered delinquent and subsequently written off as bad debts based on individual credit evaluation and specific circumstances of the patient or third-party payor.

Inventories — Inventories are stated at the lower of cost or net realizable value. Cost is determined by the first-in, first-out method.

Capital Assets — Capital assets are recorded at cost at the date of acquisition or fair value at the date of donation if acquired by gift. The District capitalizes all capital assets exceeding \$5,000 and with an estimated useful life in excess of one year. Depreciation is computed using the straight-line method over the estimated useful life of each asset. Assets under capital lease obligations are depreciated over the shorter of the lease term or their respective estimated useful lives.

The following estimated useful lives are being used by the District:

Buildings	30 – 40 years
Improvements	10 – 15 years
Equipment	5 – 20 years

Gifts of capital assets such as land, buildings, or equipment are reported as additions to unrestricted net position and are excluded from revenues in excess of expenses. Gifts of long-lived assets with explicit restrictions that specify how the assets are to be used and gifts of cash or other assets that must be used to acquire capital assets are reported as restricted net position.

Compensated Absences — The District's policies permit employees to accumulate paid time off benefits. Expense and the related liability are recognized as benefits are earned. Compensated absence liabilities are computed using the regular pay rates in effect at the balance sheet date, plus an additional amount for compensation-related payments, such as Social Security and Medicare taxes computed using rates in effect at that date.

Net Position — The District's net position is classified in the following components:

- *Net Investment in Capital Assets* — This component consists of capital assets, net of accumulated depreciation, reduced by the outstanding balances of any bonds, mortgages, notes, or other borrowings that are attributable to the acquisition, construction, or improvement of those assets, if any. If there are significant unspent related debt proceeds, the portion of the debt attributable to the unspent proceeds is not included in the calculation of net investment in capital assets. Rather, that portion of the debt is included in the same net position component as the unspent proceeds.
- *Restricted* — This component consists of restricted assets reduced by liabilities and deferred inflows of resources related to those assets. Restricted assets are assets which have restrictions placed on the use of the assets through external constraints imposed by creditors (such as through debt covenants), contributors, or laws or regulations of other governments or constraints imposed by law through constitutional provisions or enabling legislation. Generally, a liability relates to restricted assets if the asset results from a resource flow that also results in the recognition of a liability or if the liability will be liquidated with the restricted assets reported.
- *Unrestricted* — This component consists of the net amount of assets, deferred outflows of resources, liabilities and deferred inflows of resources that are not included in the determination of net investment in capital assets or the restricted component of net position.

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.

Net Patient Service Revenue — The District has agreements with third-party payers that provide for payments to the District at amounts different from its established rates. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payers and others for services rendered and include estimated retroactive revenue adjustments and a provision for bad debts. Retroactive adjustments are recorded on an estimated basis in the period the services are rendered and such estimated amounts are revised in future periods, as adjustments become known. The provision for bad debts was \$232,623 and \$492,742 for the years ended December 31, 2023 and 2022, respectively.

Charity and Indigent Care — The District provides care without charge or at amounts less than its established rates to patients meeting certain criteria under its charity care policy. Because the District does not pursue collection of amounts determined to qualify as charity care, these amounts are not reported as net patient service revenue. The District provided charity care based upon standard rates for the years ended December 31, 2023 and 2022 of \$292 and \$4,875, respectively.

Income Taxes — As an essential government function of the County, the District is generally exempt from federal and state income taxes. However, the District is subject to federal income tax on any unrelated business taxable income. The District believes that it does not have any uncertain tax positions that are material to the financial statements.

Budget and Budgetary Accounting — Prior to October 15, the budget is prepared by the administration and staff of the District and is submitted to the District's Board of Directors.

After conducting a public hearing, the budget is approved by the Board of Directors and legally enacted through passage of a resolution. Budgets may be amended during the year by supplemental appropriation. All appropriations lapse at year end.

Subsequent Events — The District has evaluated subsequent events for recognition or disclosure through the date of the Independent Auditors' Report, which is the date the financial statements were available for issuance.

2. DEPOSITS AND INVESTMENTS

Deposits — Custodial credit risk is the risk that in the event of a bank failure, a hospital's deposits may not be returned to it. The District does not have a formal policy that addresses custodial credit risk.

The Colorado Public Deposit Protection Act requires financial institutions to collateralize any uninsured public deposits. Any excess of deposits over the Federal Deposit Insurance Corporation (FDIC) limits that are not insured is covered by collateral pledged by the financial institution in accordance with Public Deposit Protection Act.

At December 31, 2023 and 2022, \$316,385 and \$474,124, respectively, of the District's bank balances were insured by the FDIC.

The remaining balances were uninsured but collateralized by securities held by the pledging financial institution's trust department in other than the District's name.

Investments — The District's investments are subject to various risks, including the following:

Interest Rate Risk — As a means of limiting its exposure to fair value losses arising from rising interest rates, the District invests primarily in certificates of deposit with limited durations. The District does not have a formal investment policy that limits investment maturities as a means of managing its exposure to fair value losses arising from increasing interest rates.

Credit Risk — Credit risk is the risk that an issuer or counterparty to an investment will not fulfill its obligations. The District does not have a formal investment policy that would limit its investment options.

Concentration of Credit Risk — The District does not have a formal investment policy for managing concentration of credit risk.

Summary of Carrying Values — At December 31, 2023 and 2022 the District's deposits and investments consisted of the following:

	2023	2022
Carrying value:		
Cash and cash equivalents	\$ 6,144,108	\$ 5,955,664
Certificates of deposit	<u>799,958</u>	<u>787,564</u>
Total	<u>\$ 6,944,066</u>	<u>\$ 6,743,228</u>

Included in the following statement of net position captions:

	2023	2022
Cash and cash equivalents	\$ 6,132,218	\$ 5,947,467
Short-term investments	549,799	651,797
Long-term investments		135,767
Investments held as collateral on note payable	250,159	
Cash held by County Treasurer	<u>11,890</u>	<u>8,197</u>
Total	<u>\$ 6,944,066</u>	<u>\$ 6,743,228</u>

Fair Value Measurements — 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 and give the highest level to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest level to unobservable inputs (level 3), as follows:

Level 1 Unadjusted quoted prices for identical instruments in active markets.

Level 2 Observable inputs other than quoted market prices.

Level 3 Valuation derived from valuation techniques in which significant inputs are unobservable.

The District holds all of its investments in certificates of deposit as of December 31, 2023 and 2022, which are classified as Level 2 investments.

3. PATIENT ACCOUNTS RECEIVABLE, NET

The District grants credit without collateral to its patients, many of whom are area residents and are insured under third-party payor agreements. The mix of receivables from third-party payors and patients as of December 31, 2023 and 2022 is as follows:

	2023	2022
Medicare	58%	57%
Other third-party payors	18%	25%
Medicaid	13%	13%
Private pay	<u>11%</u>	<u>5%</u>
Total	<u>100%</u>	<u>100%</u>

Patient accounts receivable are net of allowances for bad debts and contractual adjustments of \$851,898 and \$753,540 as of December 31, 2023 and 2022, respectively.

4. NET PATIENT SERVICE REVENUE

The District recognizes patient service revenue associated with services provided to patients who have third-party payer coverage on the basis of contractual rates for the services rendered. For uninsured patients that do not qualify for charity care, the District recognizes revenue on the basis of its standard rates for services provided.

On the basis of historical experience, a significant portion of the District’s uninsured patients will be unable or unwilling to pay for the services provided. Thus, the District records a significant provision for bad debts related to uninsured patients in the period the services are provided. This provision for bad debts is presented in the statements of revenues, expenses and changes in net position as a component of net patient service revenue.

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

Medicare — The District is designated as a Critical Access Hospital and is reimbursed on a cost basis. The District is reimbursed at tentative rates with final settlement determined after submission of annual cost reports by the District and audit thereof by the Medicare fiscal intermediary.

Medicaid — Services rendered to Medicaid program beneficiaries are reimbursed at prospectively determined rates and cost reimbursement methodologies. The District is reimbursed at a tentative rate with final settlement determined after audits by the Medicaid fiscal intermediary.

Approximately 78% and 84% of net patient service revenues are from participation in the Medicare and Medicaid programs for the years ended December 31, 2023 and 2022, respectively. Laws and regulations governing the Medicare and Medicaid programs are complex and subject to interpretation and change. As a result, it is reasonably possible that recorded estimates will change materially in the near term. Net patient service revenue increased (decreased) by approximately \$(20,000) and \$204,000 during 2023 and 2022, respectively, as the result of prior-year settlements.

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

The State of Colorado has implemented a provider fee on Medicaid providers which generates additional federal matching funds. Provider fee revenue and expense were as follows for the years ended December 31, 2023 and 2022:

	2023	2022
Provider fee revenue	\$ 1,804,156	\$ 1,938,844
Provider fee expense	<u>(175,665)</u>	<u>(218,715)</u>
Net excess of revenue over expense	<u>\$ 1,628,491</u>	<u>\$ 1,720,129</u>

Provider fee revenue has been recorded within net patient service revenue and provider fee expense has been recorded within other operating expenses in the accompanying financial statements.

5. CAPITAL ASSETS

Capital assets activity is as follows for the years ended December 31, 2023 and 2022:

	Beginning Balance	Additions	Disposals	Ending Balance
2023:				
Capital assets:				
Land	\$ 25,000			\$ 25,000
Buildings	3,919,041	\$ 315,060		4,234,101
Equipment	<u>3,420,348</u>	<u>482,655</u>	\$ (153,524)	<u>3,749,479</u>
	<u>7,364,389</u>	<u>797,715</u>	<u>(153,524)</u>	<u>8,008,580</u>
Less accumulated depreciation:				
Buildings	(1,805,687)	(151,336)		(1,957,023)
Equipment	<u>(1,515,267)</u>	<u>(231,605)</u>	<u>146,115</u>	<u>(1,600,757)</u>
	<u>(3,320,954)</u>	<u>(382,941)</u>	<u>146,115</u>	<u>(3,557,780)</u>
Capital assets, net	<u>\$ 4,043,435</u>	<u>\$ 414,774</u>	<u>\$ (7,409)</u>	<u>\$ 4,450,800</u>
2022:				
Capital assets:				
Land	\$ 25,000			\$ 25,000
Buildings	3,884,041	\$ 35,000		3,919,041
Equipment	<u>4,684,983</u>	<u>172,319</u>	\$ (1,436,954)	<u>3,420,348</u>
	<u>8,594,024</u>	<u>207,319</u>	<u>(1,436,954)</u>	<u>7,364,389</u>
Less accumulated depreciation:				
Buildings	(1,664,853)	(140,834)		(1,805,687)
Equipment	<u>(2,558,347)</u>	<u>(322,644)</u>	<u>1,365,724</u>	<u>(1,515,267)</u>
	<u>(4,223,200)</u>	<u>(463,478)</u>	<u>1,365,724</u>	<u>(3,320,954)</u>
Capital assets, net	<u>\$ 4,370,824</u>	<u>\$ (256,159)</u>	<u>\$ (71,230)</u>	<u>\$ 4,043,435</u>

6. NOTE PAYABLE

The following is a summary of note payable transactions for the year ended December 31, 2023:

	Beginning Balance	Borrowings	Payments	Ending Balance	Due Within One Year
Note payable	<u>\$ —</u>	<u>\$ 250,409</u>	<u>\$ (33,892)</u>	<u>\$ 216,517</u>	<u>\$ 48,112</u>

Note Payable to Bank — During 2023, the District entered into a promissory note payable to a bank of \$250,409. The note bears interest at 3.29%. Principal and interest payments of \$4,642 are due monthly. The note matures in February 2028 and is secured by certificates of deposit with a balance of \$250,159 as of December 31, 2023.

The debt service requirements of the note payable to bank are as follows as of December 31, 2023:

	Principal	Interest	Total
2024	\$ 48,112	\$ 6,396	\$ 54,508
2025	49,741	4,767	54,508
2026	51,404	3,104	54,508
2027	53,124	1,384	54,508
2028	<u>14,136</u>	<u>70</u>	<u>14,206</u>
Total	<u>\$ 216,517</u>	<u>\$ 15,721</u>	<u>\$ 232,238</u>

7. RISK MANAGEMENT, CONTINGENCIES AND COMMITMENTS

Risk Management — The District is exposed to various risks of loss from torts; thefts of, damage to and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; employee health, dental and accident benefits.

Commercial insurance coverage is purchased for claims arising from such matters. Settled claims did not exceed this commercial coverage during 2023 or 2022.

Medical Malpractice — The District purchases medical malpractice insurance under a claims-made policy on a fixed premium basis. Accounting principles generally accepted in the United States of America require a health care provider to accrue the expense of its share of malpractice claim costs, if any, for any reported and unreported incidents of potential improper professional service occurring during the year by estimating the probable ultimate costs of the incidents. Based upon the District's claims experience, no such accrual has been made. It is reasonably possible that this estimate could change materially in the near term.

Industry Regulations — The healthcare industry is subject to numerous laws and regulations of federal, state and local governments. These laws and regulations include, but are not necessarily limited to, matters such as licensure, accreditations, government healthcare program participation requirements, reimbursement for patient services, and Medicare and Medicaid fraud and abuse.

Government activity continues with respect to investigations and allegations concerning possible violations of fraud and abuse statues and regulations by healthcare providers. Violations of these laws and regulations could result in expulsion from government healthcare programs together with the imposition of significant fines and penalties, as well as significant repayments for patient services previously billed. Compliance with such laws and regulations can be subject to future government review and interpretation, as well as regulatory actions. Management believes that the District is in compliance with fraud and abuse statues, as well as other applicable government laws and regulations.

Tax, Spending and Debt Limitations — Colorado voters passed an amendment to the State Constitution, Article X, Section 20, which has several limitations including raising revenue, spending abilities, and other specific requirements of state and local governments. Management believes that the District is compliant with the rules of Colorado's Taxpayer's Bill of Rights (TABOR), however, many provisions of the Tabor Amendment are complex and subject to further interpretation and will require judicial interpretation.

Commitments — During 2023, the District entered into a subscription-based information technology arrangement with a commencement date in August 2024 which will require monthly payments of approximately \$40,000.

8. RETIREMENT PLAN

The District provides pension benefits for its employees through a 457(b) deferred compensation plan. Participation in the plan is voluntary. Employees are eligible to participate immediately and are eligible for employer contributions after completion of one year of service and at least 1,000 hours. Employees may elect to contribute any amount up to the maximum allowed under the Internal Revenue Code. The District matches employee contributions up to a maximum of 3% of the employee's gross wages. Benefit provisions were established and can be amended by the District's Board of Directors and management. Retirement plan contributions made by the District totaled \$69,743 and \$57,223 during 2023 and 2022, respectively.

**WEISBROD MEMORIAL COUNTY HOSPITAL
AND
THE KIOWA COUNTY HOSPITAL DISTRICT**

SUPPLEMENTAL INFORMATION

**WEISBROD MEMORIAL COUNTY HOSPITAL AND
THE KIOWA COUNTY HOSPITAL DISTRICT**

**BUDGETED AND ACTUAL REVENUES AND EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2023**

	<u>Actual</u>	<u>Budgeted</u>	<u>Favorable (Unfavorable) Variance</u>
OPERATING REVENUES			
Net patient service revenue	\$ 9,906,683	\$ 9,550,251	\$ 356,432
Other operating revenue	<u>83,856</u>	<u>84,071</u>	<u>(215)</u>
Total operating revenues	<u>9,990,539</u>	<u>9,634,322</u>	<u>356,217</u>
OPERATING EXPENSES			
Salaries, wages and employee benefits	5,025,350	4,890,356	(134,994)
Other operating expenses	<u>5,725,437</u>	<u>5,358,586</u>	<u>(366,851)</u>
Total operating expenses	<u>10,750,787</u>	<u>10,248,942</u>	<u>(501,845)</u>
LOSS FROM OPERATIONS			
	(760,248)	(614,620)	(145,628)
Non-operating income, net	<u>1,009,992</u>	<u>803,954</u>	<u>206,038</u>
CHANGE IN NET POSITION	<u>\$ 249,744</u>	<u>\$ 189,334</u>	<u>\$ 60,410</u>