



**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**Financial Statements**

**For the Years Ended December 31, 2024 and 2023,**

**Supplementary Information**

**For the Year Ended December 31, 2024**

**And**

**Independent Auditors' Reports**

# HUERFANO COUNTY HOSPITAL DISTRICT D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER

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## **INDEPENDENT AUDITORS' REPORT**

Board of Directors  
Huerfano County Hospital District  
d/b/a Spanish Peaks Regional Health Center Walsenburg, Colorado

### **Opinion**

We have audited the accompanying financial statements of Huerfano County Hospital District, d/b/a Spanish Peaks Regional Health Center (the District), which comprise the statements of net position as of December 31, 2024 and 2023, and the related statements of revenues, expenses and changes in net position and 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 the District as of December 31, 2024 and 2023, 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 and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the 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 audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### **Responsibilities of Management for the Financial Statements**

Management is responsible for the preparation and fair presentation of 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 within one year after the date that the financial statements are available to be issued.

### **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 and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the 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.

#### **Other Matters**

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

## **Supplementary Information**

Our audit was conducted for the purpose of forming an opinion on the 2024 financial statements as a whole. The schedule of budget and actual revenues and expenses and the schedule of expenditures of federal awards as required by Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, as listed in the table of contents, are presented for the purpose of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the 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 2024 financial statements as a whole.

## **Other Reporting Required by Government Auditing Standards**

In accordance with *Government Auditing Standards*, we have also issued our report dated September 23, 2025 on our consideration of the District's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the District's internal control over financial reporting and compliance.

*Stockman Kast Ryan & Co., LLP*

September 23, 2025

**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**STATEMENTS OF NET POSITION  
DECEMBER 31, 2024 AND 2023**

	<b>2024</b>	<b>2023</b>
<b>ASSETS</b>		
<b>CURRENT ASSETS</b>		
Cash and cash equivalents	\$ 5,022,041	\$ 3,865,279
Cash held for residents	57,439	62,128
Patient accounts receivable, net	4,536,972	3,884,042
Property taxes receivable	1,092,316	1,092,879
Employee retention tax credits receivable	4,072,572	3,303,095
Supplies	827,711	746,043
Other current assets	<u>702,627</u>	<u>927,288</u>
Total current assets	<u>16,311,678</u>	<u>13,880,754</u>
<b>NON-CURRENT CASH AND INVESTMENTS</b>		
Internally designated	1,080	2,334,182
Assets whose use is limited		
Investments held as collateral on long-term debt	1,500,000	1,500,000
Held by Colorado State Treasurer	296,462	286,464
Cash restricted by donors	<u>87,126</u>	<u>116,000</u>
Total non-current cash and investments	<u>1,884,668</u>	<u>4,236,646</u>
<b>CAPITAL ASSETS, NET</b>	<u>14,272,252</u>	<u>14,535,184</u>
<b>TOTAL</b>	<u>\$ 32,468,598</u>	<u>\$ 32,652,584</u>

(Continued)

**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**STATEMENTS OF NET POSITION  
DECEMBER 31, 2024 AND 2023**

	<b>2024</b>	<b>2023</b>
<b>LIABILITIES, DEFERRED INFLOWS OF RESOURCES AND NET POSITION</b>		
<b>CURRENT LIABILITIES</b>		
Accounts payable	\$ 1,649,282	\$ 1,122,217
Accrued expenses and other current liabilities	1,955,665	1,950,390
Deposits from residents	57,439	62,128
Estimated third-party payer settlements	1,200,345	898,498
Current maturities of notes payable	195,657	186,443
Current maturities of lease liabilities	<u>274,810</u>	<u>475,212</u>
Total current liabilities	5,333,198	4,694,888
NOTES PAYABLE	574,280	758,146
LEASE LIABILITIES	<u>499,445</u>	<u>1,333,935</u>
Total liabilities	6,406,923	6,786,969
<b>DEFERRED INFLOWS OF RESOURCES</b>		
Deferred property tax revenues	<u>1,092,316</u>	<u>1,092,879</u>
<b>TOTAL LIABILITIES AND DEFERRED INFLOWS OF RESOURCES</b>	<u>7,499,239</u>	<u>7,879,848</u>
<b>NET POSITION</b>		
Net investment in capital assets	12,728,060	11,781,448
Restricted expendable	1,883,588	1,902,464
Unrestricted	<u>10,357,711</u>	<u>11,088,824</u>
Total net position	<u>24,969,359</u>	<u>24,772,736</u>
<b>TOTAL</b>	<u>\$ 32,468,598</u>	<u>\$ 32,652,584</u>

See notes to financial statements.

(Concluded)

**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION  
FOR THE YEARS ENDED DECEMBER 31, 2024 AND 2023**

	<b>2024</b>	<b>2023</b>
OPERATING REVENUES		
Net patient service revenue	\$ 36,526,451	\$ 35,015,569
Other operating revenue	<u>1,410,351</u>	<u>1,604,004</u>
Total operating revenues	<u>37,936,802</u>	<u>36,619,573</u>
OPERATING EXPENSES		
Salaries, wages and employee benefits	24,522,955	24,440,141
Supplies and other	9,010,776	8,218,748
Purchased services and professional fees	6,207,024	6,088,669
Depreciation	<u>2,289,411</u>	<u>1,853,243</u>
Total operating expenses	<u>42,030,166</u>	<u>40,600,801</u>
LOSS FROM OPERATIONS	<u>(4,093,364)</u>	<u>(3,981,228)</u>
NON-OPERATING INCOME (EXPENSE)		
Property taxes	1,327,440	1,157,647
Interest income	926,114	166,118
Non-capital grants and gifts	569,142	1,505,224
Interest expense	(64,956)	(109,372)
Other	<u>(212,401)</u>	<u>229,411</u>
Non-operating income, net	<u>2,545,339</u>	<u>2,949,028</u>
REVENUES UNDER EXPENSES BEFORE CAPITAL GRANTS AND GIFTS	(1,548,025)	(1,032,200)
CAPITAL GRANTS AND GIFTS	<u>1,744,648</u>	<u>                    </u>
INCREASE (DECREASE) IN NET POSITION	196,623	(1,032,200)
NET POSITION, Beginning of year	<u>24,772,736</u>	<u>25,804,936</u>
NET POSITION, End of year	<u>\$ 24,969,359</u>	<u>\$ 24,772,736</u>

See notes to financial statements.

**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**STATEMENTS OF CASH FLOWS  
FOR THE YEARS ENDED DECEMBER 31, 2024 AND 2023**

	<b>2024</b>	<b>2023</b>
<b>OPERATING ACTIVITIES</b>		
Receipts from and on behalf of patients	\$ 36,175,368	\$ 36,139,275
Payments to suppliers and contractors	(14,690,735)	(14,077,106)
Payments to employees	(24,517,680)	(24,221,568)
Other receipts, net	<u>1,548,655</u>	<u>899,792</u>
Net cash used in operating activities	<u>(1,484,392)</u>	<u>(1,259,607)</u>
<b>NON-CAPITAL FINANCING ACTIVITIES</b>		
Property taxes supporting operations	1,327,440	1,157,647
Non-capital grants and gifts	569,142	1,505,224
Other	<u>51,651</u>	<u>(250)</u>
Net cash provided by non-capital financing activities	<u>1,948,233</u>	<u>2,662,621</u>
<b>CAPITAL AND RELATED FINANCING ACTIVITIES</b>		
Capital grants and gifts	1,744,648	
Purchases of capital assets	(1,502,314)	(3,736,971)
Principal payments on notes payable and lease liabilities	(1,983,562)	(644,147)
Interest paid	(64,956)	(109,372)
Proceeds from sale of capital assets		<u>243,413</u>
Net cash used in capital and related financing activities	<u>(1,806,184)</u>	<u>(4,247,077)</u>
<b>INVESTING ACTIVITIES</b>		
Interest received	142,438	166,118
Proceeds from maturities of investments		<u>570,637</u>
Net cash provided by investing activities	<u>142,438</u>	<u>736,755</u>
<b>NET DECREASE IN CASH AND CASH EQUIVALENTS</b>	<b>(1,199,905)</b>	<b>(2,107,308)</b>
<b>CASH AND CASH EQUIVALENTS, Beginning of year</b>	<b><u>6,664,053</u></b>	<b><u>8,771,361</u></b>
<b>CASH AND CASH EQUIVALENTS, End of year</b>	<b><u>\$ 5,464,148</u></b>	<b><u>\$ 6,664,053</u></b>

(Continued)

**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**STATEMENTS OF CASH FLOWS  
FOR THE YEARS ENDED DECEMBER 31, 2024 AND 2023**

	<b>2024</b>	<b>2023</b>
<b>RECONCILIATION OF CASH AND CASH EQUIVALENTS TO THE STATEMENTS OF NET POSITION</b>		
Cash and cash equivalents	\$ 5,022,041	\$ 3,865,279
Cash held for residents	57,439	62,128
Cash held by Colorado State Treasurer	296,462	286,464
Cash restricted by donors	87,126	116,000
Internally designated	<u>1,080</u>	<u>2,334,182</u>
Total cash and cash equivalents	<u>\$ 5,464,148</u>	<u>\$ 6,664,053</u>
<b>RECONCILIATION OF LOSS FROM OPERATIONS TO NET CASH USED IN OPERATING ACTIVITIES</b>		
Loss from operations	\$ (4,093,364)	\$ (3,981,228)
Depreciation	2,289,411	1,853,243
Changes in operating assets and liabilities:		
Patient accounts receivable, net	(652,930)	(515)
Estimated third-party payer settlements	301,847	1,124,221
Accounts payable and other current liabilities	527,651	439,147
Other	<u>142,993</u>	<u>(694,475)</u>
Net cash used in operating activities	<u>\$ (1,484,392)</u>	<u>\$ (1,259,607)</u>
<b>NON-CASH CAPITAL AND FINANCING ACTIVITIES</b>		
Lease liabilities incurred for capital assets	<u>\$ 774,018</u>	<u>\$ —</u>

See notes to financial statements.

(Concluded)

# HUERFANO COUNTY HOSPITAL DISTRICT D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER

## NOTES TO FINANCIAL STATEMENTS

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### 1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

**Nature of Operations and Reporting Entity** — Huerfano County Hospital District d/b/a Spanish Peaks Regional Health Center (the District) is a political subdivision formed under the Colorado Revised Statutes as a local service and improvement district to provide medical care to the residents of Huerfano County, Colorado, including Walsenburg. The District supports and operates the Spanish Peaks Hospital (the Hospital), a 20-bed facility that is certified as a Critical Access Hospital. In addition, a 120-bed Spanish Peaks Veterans Community Living Center (the Living Center) is operated by the District adjacent to the Hospital. The District has component units but is not a component unit of another governmental entity.

In November 1993, the District entered into a contract for the operation of the Living Center with the state of Colorado for the benefit of the Department of Human Services. Under the terms of the contract, the District is responsible for the costs associated with operating the facility; in return, all revenue, bank accounts and receivables accrue to the benefit of the District. The original term of the contract was 20 years and is renewable at the District's option for successive 10-year terms up to 99 years from the original commencement date.

As stipulated in the agreement, expenditures made in excess of revenues earned by the Living Center are the responsibility of the District.

The District is organized to finance and operate a hospital and a nursing home. As required by accounting principles generally accepted in the United States of America, these financial statements present the District and each of its component units. The component units are included in the District's reporting entity because of the significance of their operational or financial relationships with the District.

**Basis of Accounting and 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, liabilities and deferred inflows of resources from exchange and exchange-like transactions are recognized when the exchange transaction takes place, while those from government-mandated non-exchange transactions (principally federal and state grants and county appropriations) 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 (such as county appropriations), property taxes, investment income and interest on capital assets-related debt are included in non-operating income and expense. The District first applies restricted net positions 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, liabilities and deferred inflows of resources 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 with original maturities of three months or less to be cash equivalents.

**Patient Accounts Receivable** — The District reports patient accounts receivable for services rendered at net realizable amounts from third-party payers, patients and others. Patient accounts receivable are due in full when billed. The District provides an allowance for uncollectible accounts based upon a review of outstanding receivables, historical collection information and existing economic conditions.

**Supplies** — Supply inventories are stated at the lower of cost or net realizable value. Costs are determined using the first-in, first-out (FIFO) method.

**Investments and Investment Income** — Investments in U.S. Treasury obligations and in non-negotiable certificates of deposit are carried at cost. All other investments are carried at fair value. Investment income includes dividend and interest income, realized gains and losses on investments carried at other than fair value and the net change for the year in the fair value of investments carried at fair value.

**Capital Assets** — Capital assets are recorded at cost at the date of acquisition, or acquisition value at the date of donation if acquired by gift. Depreciation is computed using the straight-line method over the estimated useful life of each asset. Assets under lease liabilities and leasehold improvements are depreciated over the shorter of the lease term or their respective estimated useful lives. Amortization of assets subject to leases is reported with depreciation expense. The following estimated useful lives are being used by the District:

Buildings and leasehold improvements	10 – 40 years
Equipment and computer software	3 – 10 years

The District evaluates capital assets for impairment whenever events or circumstances indicate a significant, unexpected decline in the service utility of a capital asset has occurred. If a capital asset is tested for impairment and the magnitude of the decline in service utility is significant and unexpected, accumulated depreciation is increased by the amount of the impairment loss. No asset impairment was recognized during the years ended December 31, 2024 and 2023.

Lease assets are initially recorded at the initial measurement of the lease liability, plus lease payments made at or before the commencement of the lease term, less any lease incentives received from the lessor at or before the commencement of the lease, plus initial direct costs that are ancillary to place the asset into service. Lease assets are amortized on a straight-line basis over the shorter of the lease term or the useful life of the underlying asset.

**Compensated Absences** — District policies permit most employees to accumulate vacation and sick leave benefits that may be realized as paid time off or, in limited circumstances, as a cash payment. Expense and the related liability are recognized as benefits are earned whether the employee is expected to realize the benefit as time off or in cash. Compensated absence liabilities are computed using the regular pay and termination pay rates in effect at the statement of net position date plus an additional amount for compensation-related payments such as social security and Medicare taxes computed using rates in effect at that date.

**Risk Management** — The District is exposed to various risks of loss from torts; theft of, damage to and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; medical malpractice; and employee health, dental and accidental benefits. Commercial insurance coverage is purchased for claims arising from such matters other than medical malpractice and employee health claims. Settled claims have not exceeded this commercial coverage in any of the three preceding years.

**Deferred Inflows of Resources** — The District reports decreases in net position that relate to future periods as deferred inflows of resources in a separate section of its statements of net position.

**Net Position** — Net position of the District is classified in three components on its statements of net position. Net investment in capital assets consists of capital assets net of accumulated depreciation and reduced by the outstanding balances of borrowings used to finance the purchase or construction of those assets. Restricted expendable net position is made up of non-capital assets that must be used for a particular purpose, as specified by creditors, grantors or donors external to the District, including amounts deposited with trustees as required by debt agreements, reduced by the outstanding balances of any related borrowings. Unrestricted net position is the remaining net position that does not meet the definition of net investment in capital assets or restricted net position.

**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 includes estimated retroactive revenue adjustments and a provision for uncollectible accounts. The provision for uncollectible accounts totaled \$2,057,939 and \$501,414 for the years ended December 31, 2024 and 2023, respectively. Retroactive adjustments are considered in the recognition of revenue on an estimated basis in the period the related services are rendered and such estimated amounts are revised in future periods as adjustments become known.

**Charity 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 costs of charity care provided under the District's charity care policy were \$690,972 and \$237,072 in 2024 and 2023, respectively. The cost of charity care is estimated by applying the ratio of cost to gross charges to the gross uncompensated charges.

**Property Taxes** — The District received approximately 3% of its financial support from property taxes in both 2024 and 2023. These funds were used to support operations. Property taxes are assessed in January and are due in one installment on April 30 or in two installments on February 28 and June 15 of each year. Property tax revenue is recognized in the year for which the taxes are levied.

**Income Taxes** — As an essential government function of the County, the District is generally exempt from federal and state income taxes under Section 115 of the Internal Revenue Code and a similar provision of state law. However, the District is subject to federal income tax on any unrelated business taxable income.

**Living Center Cost Allocations** — Costs for the use of shared facilities, common areas and joint operations are allocated between the Living Center and the District in accordance with Medicare and Medicaid principles and guidelines. Allocation bases, such as direct salary dollars, and square footage are used to allocate the costs accumulated in the various departments between the two facilities.

**Adoption of New Accounting Standard** — In June 2022, GASB issued Statement No. 101, *Compensated Absences*. The objective of this Statement is to better meet the information needs of financial statement users by updating the recognition and measurement guidance for compensated absences. That objective is achieved by aligning the recognition and measurement guidance under a unified model and by amending certain previously required disclosures. This Statement requires that liabilities for compensated absences be recognized for (1) leave that has not been used and (2) leave that has been used but not yet paid in cash or settled through non-cash means. A liability should be recognized for leave that has not been used if (a) the leave is attributable to services already rendered, (b) the leave accumulates, and (c) the leave is more likely than not to be used for time off or otherwise paid in cash or settled through non-cash means. GASB Statement No. 101, *Compensated Absences*, is required to be applied retrospectively to all prior periods presented in the financial statements. However, the effect of the standard on the year ended December 31, 2023 was not material, and therefore was not restated.

**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. 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. These payment arrangements include:

*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.* Inpatient acute care services rendered to Medicaid program beneficiaries are paid at prospectively determined rates per discharge. These rates vary according to a patient classification system that is based on clinical, diagnostic and other factors. Medicaid outpatient services are paid based on prospectively determined rates. Rural health encounters are reimbursed at a tentative rate with final settlement determined after submission of cost reports and audits thereof by Medicaid.

Approximately 73% and 71% of net patient service revenue are from participation in the Medicare and Medicaid programs for the years ended December 31, 2024 and 2023, 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 by approximately \$159,000 and \$583,000 during 2024 and 2023, respectively, as the result of prior-year settlements and the elimination of prior year allowances.

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 fee on hospitals to generate matching funds to the state from federal sources through the Colorado Healthcare Accountability and Sustainability Enterprise (CHASE).

During the years ended December 31, 2024 and 2023, the impact on the District’s financial statements was as follows:

	<b>2024</b>	<b>2023</b>
CHASE supplemental payments		
included in net patient service revenue	\$ 4,286,470	\$ 4,095,802
CHASE fee expense	<u>(576,088)</u>	<u>(412,545)</u>
Effect of CHASE payments and fees	<u>\$ 3,710,382</u>	<u>\$ 3,683,257</u>

The CHASE provider fee payments have been recorded as an operating expense and the supplemental payments received have been recorded as an adjustment to net patient service revenue in the accompanying financial statements.

### **3. PATIENT ACCOUNTS RECEIVABLE, NET**

The District grants credit without collateral to its patients, many of whom are insured under third-party payer agreements.

Patient accounts receivable at December 31, 2024 and 2023 consisted of:

	<b>2024</b>	<b>2023</b>
Medicare	\$ 1,989,975	\$ 1,776,445
Medicaid	1,140,466	815,909

	<b>2024</b>	<b>2023</b>
Other third-party payers	2,940,845	2,219,633
Patients	<u>1,763,109</u>	<u>1,060,533</u>
Total	7,834,395	5,872,520
Less allowance for contractual adjustments and uncollectible accounts	<u>(3,297,423)</u>	<u>(1,988,478)</u>
Patient accounts receivable, net	<u>\$ 4,536,972</u>	<u>\$ 3,884,042</u>

#### 4. DEPOSITS AND INVESTMENTS

**Deposits** — Custodial credit risk is the risk that in the event of a bank failure, a government's deposits may not be returned to it. The District's deposit policy for custodial credit risk requires compliance with the provisions of state law. The Colorado Public Deposit Protection Act (the PDPA) requires financial institutions to collateralize any uninsured public deposits. The bank balance is insured by federal insurance (FDIC) for up to \$250,000 for interest and non-interest bearing accounts. Any excess of deposit accounts over the FDIC limit that is not insured is covered by collateral pledged by the financial institution in accordance with the PDPA.

At December 31, 2024 and 2023, \$6,945,815 and \$7,977,634, respectively, of the District's bank balances of \$7,656,674 and \$9,251,278, respectively, were exposed to custodial credit risk as follows:

	<b>2024</b>	<b>2023</b>
Insured (FDIC) or collateralized with securities held by the District	\$ 710,859	\$ 1,273,644
Uninsured and collateral held by pledging financial Institution's trust department or agent in other than the District's name	6,649,353	7,691,170
Held by Colorado State Treasurer	<u>296,462</u>	<u>286,464</u>
Total	<u>\$ 7,656,674</u>	<u>\$ 9,251,278</u>

Colorado Government Liquid Asset Trust (COLOTRUST) is an investment vehicle established for local government entities in Colorado to pool surplus funds for investment purposes by state statutes. At December 31, 2024, the District had deposits with COLOTRUST of \$4,450,685. COLOTRUST operates similarly to a money market fund and each share is equal in value to \$1.00. Designated custodial banks provide safekeeping and depository services to COLOTRUST in connection with the direct investment and withdrawal functions of COLOTRUST. All securities owned by COLOTRUST are held by the Federal Reserve Bank in the account maintained for the custodial bank. The custodian's internal records identify the investment owned by COLOTRUST. Investments of COLOTRUST consist of U.S. Treasury bills, notes and note strips and repurchase agreements collateralized by U.S. Treasury notes.

**Investments** — The District may legally invest in certificates of deposit and direct obligations of and other obligations guaranteed as to principal by the U.S. Treasury and U.S. agencies and instrumentalities. It may also invest to a limited extent in equity securities. Certificates of deposit and U.S. Treasury notes are valued at cost as an estimate of fair value.

The District categorizes its fair value measurements within the fair value hierarchy established by generally accepted accounting principles based on the valuation of inputs used to measure the fair value of investments. Level 1 inputs are quoted prices in active markets for identical assets; Level 2 inputs are significant other observable inputs; and Level 3 inputs are significant unobservable inputs. The District's U.S. Treasury note is considered a Level 2 investment. Investments that are measured at fair value using the net asset value (NAV) per share (or its equivalent) as a practical expedient are not classified in the fair value hierarchy. COLOTRUST deposits are measured at fair value using NAV.

**Interest Rate Risk** – As a means of limiting its exposure to fair value losses arising from rising interest rates, the District's investment policy is limited to purchasing securities that mature within one year from the date of purchase for operating funds and five years or less from the date of purchase for capital reserves. A U.S. Treasury note was acquired to use as collateral on a note payable to bank and has a maturity date of August 31, 2026.

**Credit Risk** – Credit risk is the risk that the issuer or other counterparty to an investment will not fulfill its obligations. The District's only investments consist of money market accounts, COLOTRUST deposits and the U.S. Treasury note discussed above.

**Concentration of Credit Risk** – The District's policy is to not have any single investment exceed one-third of the total portfolio, except for U.S. Treasury securities and federal agencies.

**Foreign Currency Risk** – This risk is related to adverse effects on the fair value of an investment from changes in exchange rates. The District's investment policy does not permit foreign currency holdings.

**Summary of Carrying Values** — The carrying values of deposits and investments shown above are included in the statements of net position as follows:

	<b>2024</b>	<b>2023</b>
Carrying value:		
Bank deposits	\$ 5,163,956	\$ 6,373,089
US Treasury note	1,500,000	1,500,000
On deposit with Colorado State Treasurer	296,462	286,464
Cash on hand	<u>3,730</u>	<u>4,500</u>
Total	<u>\$ 6,964,148</u>	<u>\$ 8,164,053</u>

Included in the following statement of net position captions:

	<b>2024</b>	<b>2023</b>
Cash and cash equivalents	\$ 5,022,041	\$ 3,865,279
Cash held for residents	57,439	62,128
Non-current cash and investments:		
Investments to be held as collateral on long term debt	1,500,000	1,500,000
Held by Colorado State Treasurer	296,462	286,464
Internally designated	1,080	2,334,182
Cash restricted by donors	<u>87,126</u>	<u>116,000</u>
Total	<u>\$ 6,964,148</u>	<u>\$ 8,164,053</u>

## 5. CAPITAL ASSETS

Capital assets activity is as follows for the years ended December 31, 2024 and 2023:

	<b>Beginning Balance</b>	<b>Additions</b>	<b>Disposals</b>	<b>Transfers</b>	<b>Ending Balance</b>
<b>2024:</b>					
Land	\$ 47,784				\$ 47,784
Buildings and leasehold improvements	23,233,338	\$ 148,740		\$ 3,608,033	26,990,111
Equipment	13,267,446	490,191	\$ (238,746)	1,244,152	14,763,043
Lease right-of-use assets-equipment	4,458,767	774,018		(1,930,000)	3,302,785
Construction in progress	<u>3,585,663</u>	<u>863,383</u>	<u>(11,107)</u>	<u>(3,444,709)</u>	<u>993,230</u>
	<u>44,592,998</u>	<u>2,276,332</u>	<u>(249,853)</u>	<u>(522,524)</u>	<u>46,096,953</u>
Less accumulated depreciation:					
Buildings and leasehold improvements	17,255,817	495,686			17,751,503
Equipment	10,801,020	1,216,995		102,022	12,120,037
Lease right-of-use assets-equipment	<u>2,000,977</u>	<u>576,730</u>		<u>(624,546)</u>	<u>1,953,161</u>
	<u>30,057,814</u>	<u>2,289,411</u>	<u>—</u>	<u>(522,524)</u>	<u>31,824,701</u>
Capital assets, net	<u>\$ 14,535,184</u>	<u>\$ (13,079)</u>	<u>\$ (249,853)</u>	<u>\$ —</u>	<u>\$ 14,272,252</u>
<b>2023:</b>					
Land	\$ 17,633	\$ 30,151			\$ 47,784
Buildings and leasehold improvements	22,745,541	88,492	\$ (51,946)	\$ 451,251	23,233,338
Equipment	12,640,725	369,795		256,926	13,267,446
Lease right-of-use assets-equipment	4,428,152			30,615	4,458,767
Construction in progress	<u>1,075,922</u>	<u>3,248,533</u>		<u>(738,792)</u>	<u>3,585,663</u>
	<u>40,907,973</u>	<u>3,736,971</u>	<u>(51,946)</u>	<u>—</u>	<u>44,592,998</u>
Less accumulated depreciation:					
Buildings and leasehold improvements	16,664,684	629,327	(38,194)		17,255,817
Equipment	10,019,508	781,512			10,801,020
Lease right-of-use assets-equipment	<u>1,558,573</u>	<u>442,404</u>			<u>2,000,977</u>
	<u>28,242,765</u>	<u>1,853,243</u>	<u>(38,194)</u>	<u>—</u>	<u>30,057,814</u>
Capital assets, net	<u>\$ 12,665,208</u>	<u>\$ 1,883,728</u>	<u>\$ (13,752)</u>	<u>\$ —</u>	<u>\$ 14,535,184</u>

**6. LINE OF CREDIT**

The District has a line of credit agreement with a financial institution that provides for borrowings of up to \$1,000,000 through the maturity date of December 3, 2025. Interest on the line of credit borrowing is payable monthly at the prime rate less 1.35% with a floor of 3.5%. The line is collateralized by the District’s accounts receivable. There were no transactions during 2024 or 2023.

**7. LONG TERM DEBT**

The following is a summary of long-term debt transactions for the years ended December 31:

	<b>Beginning Balance</b>	<b>Additions</b>	<b>Reductions</b>	<b>Ending Balance</b>	<b>Amounts Due Within One Year</b>
<b>2024:</b>					
Notes payable to banks	\$ 944,589		\$ (174,652)	\$ 769,937	\$ 195,657
Lease liabilities	<u>1,809,147</u>	<u>\$ 774,018</u>	<u>(1,808,910)</u>	<u>774,255</u>	<u>274,810</u>
Total long-term debt	<u>\$ 2,753,736</u>	<u>\$ 774,018</u>	<u>\$ (1,983,562)</u>	<u>\$ 1,544,192</u>	<u>\$ 470,467</u>
<b>2023:</b>					
Notes payable to banks	\$ 1,128,990		\$ (184,401)	\$ 944,589	\$ 186,443
Lease liabilities	<u>2,268,893</u>		<u>(459,746)</u>	<u>1,809,147</u>	<u>475,212</u>
Total long-term debt	<u>\$ 3,397,883</u>	<u>\$ —</u>	<u>\$ (644,147)</u>	<u>\$ 2,753,736</u>	<u>\$ 661,655</u>

**Notes Payable to Banks** — During 2012, the District entered into a promissory note payable to a bank with maximum available borrowings for construction of \$2,500,000. As of December 31, 2024 and 2023, borrowings under the note totaled \$769,937 and \$944,589, respectively. Interest only payments at 4% were due until November 2013, when principal and interest payments became due monthly. The note matures in October 2027 and is secured by a U.S. Treasury note with a balance of \$1,500,000 as of December 31, 2024. The loan agreement requires the maintenance of certain financial covenants.

The debt service requirements of the notes payable to banks are as follows as of December 31, 2024:

	<b>Principal</b>	<b>Interest</b>	<b>Total</b>
2025	\$ 195,657	\$ 28,399	\$ 224,056
2026	202,281	20,373	222,654
2027	<u>371,999</u>	<u>10,602</u>	<u>382,601</u>
Total	<u>\$ 769,937</u>	<u>\$ 59,374</u>	<u>\$ 829,311</u>

**Lease Liabilities** — The District is obligated under leases for buildings and equipment that are accounted for as lease liabilities. Lease liabilities are due in monthly installments including principal and interest at varying amounts from \$4,166 to \$11,000, including interest at varying rates from 1.75% to 4.76% through 2028; collateralized by related equipment.

The following is a schedule by year of future minimum lease payments under the leases as of December 31, 2024:

	<b>Principal</b>	<b>Interest</b>	<b>Total</b>
2025	\$ 274,810	\$ 26,968	\$ 301,778
2026	217,341	17,315	234,656
2027	200,373	7,951	208,324
2028	<u>81,731</u>	<u>1,261</u>	<u>82,992</u>
Total	<u>\$ 774,255</u>	<u>\$ 53,495</u>	<u>\$ 827,750</u>

**8. RESTRICTED EXPENDABLE NET POSITION**

At December 31, 2024 and 2023, restricted expendable net position is available for the following purposes:

	<b>2024</b>	<b>2023</b>
Investments held as collateral on long-term debt	\$ 1,500,000	\$ 1,500,000
Living Center expense reserve held by Colorado State Treasurer	296,462	286,464
Resident needs	<u>87,126</u>	<u>116,000</u>
Total restricted expendable net position	<u>\$ 1,883,588</u>	<u>\$ 1,902,464</u>

At December 31, 2024 and 2023, \$1,080 and \$2,334,182, respectively, of cash and investments have been designated for future use by the District’s Board of Directors. Designated balances remain under the control of the Board of Directors and may be used at their discretion.

**9. PENSION PLAN**

The District has established and administers the Spanish Peaks Regional Health Center 403(b) Plan (the Plan), a defined contribution plan. Benefit terms may be amended by the District. For all full-time employees meeting the eligibility requirements of the Plan, the employer will make matching contributions of up to 50% of the first 6% of compensation deferred under the compensation reduction election of the employee into the Plan. Employees are permitted to make contributions to the pension plan, up to applicable Internal Revenue Code limits.

Employees are immediately vested in their own contributions and earnings on those contributions. Employer contributions into the Plan are subject to a 5-year graded vesting schedule. Non-vested employer contributions are forfeited upon termination of employment. Forfeitures are used to reduce the employer contributions. Except as permitted under the Plan, distributions from an employee’s account may not be made earlier than the earliest date on which the employee has severance from employment, dies, becomes disabled, or attains age 59½. Contributions made or accrued by the District totaled \$357,310 and \$314,104 during 2024 and 2023, respectively.

**10. LIVING CENTER EXPENSE RESERVE ACCOUNT**

Under the terms of the operating contract with the state of Colorado (the State), the District is required to establish and fund an expense reserve account, under control of the State, to fund operations should the State be required to assume control of the Living Center. The District is required to make annual payments equal to one-half of the Living Center's average monthly net accounts receivable balance. The annual payments are to be made until the balance in the fund equals \$660,000. The District is allowed to borrow, interest free, up to 75% of the amount in the account. The balance in the expense reserve account (net of outstanding loans) was \$296,462 and \$286,464 as of December 31, 2024 and 2023, respectively, and is included in non-current cash and investments (see Note 4). Accordingly, the District had net borrowings from the account of \$363,538 and \$373,536 as of December 31, 2024 and 2023, respectively. Should the State assume control of the Living Center, the District would be required to repay the amount borrowed.

**11. VETERANS' HEALTH ADMINISTRATION GRANT REVENUE**

The Living Center receives Veterans Health Administration grant revenues as a contractor of the state of Colorado for the purpose of providing nursing home care to eligible veterans. For the years ended December 31, 2024 and 2023, such grant revenue totaled \$1,317,118 and \$1,336,988, respectively, and is recorded as other operating revenue in the accompanying financial statements.

**12. RISK MANAGEMENT AND CONTINGENCIES**

**Malpractice Insurance** — The District purchases medical malpractice insurance under a claims-made (or occurrence-basis) 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.

**Litigation, Claims and Disputes** — In the normal course of business, the District is, from time to time, subject to allegations that may or do result in litigation. Some of these allegations are in areas not covered by the District's commercial insurance. The District evaluates such allegations by conducting investigations to determine the validity of each potential claim. Based upon the advice of legal counsel, management records an estimate of the amount of ultimate expected loss, if any, for each. Events could occur that would cause the estimate of ultimate loss to differ materially in the near term.

**Self-Funded Health Plan** — During the year ended December 31, 2023, the District was self-funded for health benefits for eligible employees and their dependents. The District discontinued being self-funded in 2024.

The District has stop loss insurance to cover claims in excess of \$60,000 per claim. The District recognizes health benefit expenses relating this plan on an accrual basis.

An accrued liability is recorded at year-end which estimates the incurred but not reported claims that will be paid by the District. The accrued liability is estimated based on historical trends and actual payments made subsequent to year-end.

Activity relating to the self-funded health plan claims liability for the years ended December 31, 2024 and 2023, is as follows:

	<b>2024</b>	<b>2023</b>
Estimated claims liability, Beginning of year	\$ 355,000	\$ 340,000
Estimated claims incurred		2,731,341
Claims paid	<u>(192,000)</u>	<u>(2,716,341)</u>
Estimated claims liability, End of year	<u>\$ 163,000</u>	<u>\$ 355,000</u>

**13. TAX, SPENDING AND DEBT LIMITATIONS**

Colorado voters passed an amendment to the State Constitution, Article X, Section 20, which has several limitations, including revenue raising, spending abilities and other specific requirements of state and local governments. The District’s financial activity provides the basis for calculation of limitations adjusted for allowable increases tied to inflation and local growth.

The amendment excludes enterprises from its provisions. Enterprises are defined as government-owned businesses authorized to issue revenue bonds and who receive less than 10% of their annual revenue in grants from all state and local governments combined. The District is of the opinion that its operations qualify for this exclusion.

**14. EMPLOYEE RETENTION TAX CREDITS**

In response to the COVID-19 outbreak the Coronavirus Aid, Relief, and Economic Security (CARES) Act, was signed into law on March 27, 2020. The CARES Act provides for employee retention tax credits (ERTC), which are refundable tax credits against certain employment taxes. During 2022, the District determined that it is eligible for refundable employee retention tax credits for the six months ended June 30, 2021. Subsequent to December 31, 2022, the District filed for the tax credits. The District has recognized a receivable and non-operating income of approximately \$3.3 million for the employee retention tax credits as of and for the year ended December 31, 2022. During 2024, the District recognized an additional receivable of \$783,636 relating to interest on the ERTC claim. The receivable remained outstanding as of December 31, 2024 and was collected subsequent to year-end. ERTC claims are subject to audit by the Internal Revenue Service.

## 15. CONDENSED COMBINING INFORMATION

The following tables are condensed combining statements of net position for the District and its blended component units as of December 31, 2024 and 2023:

	<u>DISTRICT</u>	<u>HOSPITAL</u>	<u>LIVING CENTER</u>	<u>ELIMINATIONS</u>	<u>TOTALS</u>
<b>2024:</b>					
<b>ASSETS</b>					
Current assets	\$ 12,129,979	\$ 11,594,574	\$ 5,586,008	\$ (12,998,883)	\$ 16,311,678
Non-current cash and investments	1,797,542		87,126		1,884,668
Capital assets, net		10,131,767	4,140,485		14,272,252
Total	<u>\$ 13,927,521</u>	<u>\$ 21,726,341</u>	<u>\$ 9,813,619</u>	<u>\$ (12,998,883)</u>	<u>\$ 32,468,598</u>
<b>LIABILITIES</b>					
Current liabilities		\$ 17,849,298	\$ 482,783	\$ (12,998,883)	\$ 5,333,198
Long-term liabilities		1,073,725			1,073,725
Total liabilities	<u>\$ —</u>	<u>18,923,023</u>	<u>482,783</u>	<u>(12,998,883)</u>	<u>6,406,923</u>
DEFERRED INFLOWS OF RESOURCES	<u>1,092,316</u>				<u>1,092,316</u>
<b>NET POSITION</b>					
Net investment in capital assets		8,587,575	4,140,485		12,728,060
Restricted expendable	1,796,462		87,126		1,883,588
Unrestricted	<u>11,038,743</u>	<u>(5,784,257)</u>	<u>5,103,225</u>		<u>10,357,711</u>
Total net position	<u>12,835,205</u>	<u>2,803,318</u>	<u>9,330,836</u>	<u>—</u>	<u>24,969,359</u>
Total	<u>\$ 13,927,521</u>	<u>\$ 21,726,341</u>	<u>\$ 9,813,619</u>	<u>\$ (12,998,883)</u>	<u>\$ 32,468,598</u>
<b>2023:</b>					
<b>ASSETS</b>					
Current assets	\$ 8,467,722	\$ 10,416,480	\$ 6,406,152	\$ (11,409,600)	\$ 13,880,754
Non-current cash and investments	4,120,646		116,000		4,236,646
Capital assets, net		11,918,083	2,617,101		14,535,184
Total	<u>\$ 12,588,368</u>	<u>\$ 22,334,563</u>	<u>\$ 9,139,253</u>	<u>\$ (11,409,600)</u>	<u>\$ 32,652,584</u>
<b>LIABILITIES</b>					
Current liabilities		\$ 15,604,304	\$ 500,184	\$ (11,409,600)	\$ 4,694,888
Long-term liabilities		2,092,081			2,092,081
Total liabilities	<u>\$ —</u>	<u>17,696,385</u>	<u>500,184</u>	<u>(11,409,600)</u>	<u>6,786,969</u>
DEFERRED INFLOWS OF RESOURCES	<u>1,092,879</u>				<u>1,092,879</u>
<b>NET POSITION</b>					
Net investment in capital assets		9,164,347	2,617,101		11,781,448
Restricted expendable	1,786,464		116,000		1,902,464
Unrestricted	<u>9,709,025</u>	<u>(4,526,169)</u>	<u>5,905,968</u>		<u>11,088,824</u>
Total net position	<u>11,495,489</u>	<u>4,638,178</u>	<u>8,639,069</u>	<u>—</u>	<u>24,772,736</u>
Total	<u>\$ 12,588,368</u>	<u>\$ 22,334,563</u>	<u>\$ 9,139,253</u>	<u>\$ (11,409,600)</u>	<u>\$ 32,652,584</u>

The following tables are condensed combining statements of revenues, expenses and changes in net position for the District and its blended component units for the years ended December 31, 2024 and 2023:

	<u>DISTRICT</u>	<u>HOSPITAL</u>	<u>LIVING CENTER</u>	<u>ELIMINATIONS</u>	<u>TOTALS</u>
<b>2024:</b>					
<b>OPERATING REVENUES</b>					
Net patient service revenue		\$ 25,310,894	\$ 11,215,557		\$ 36,526,451
Other operating revenue		93,233	1,317,118		1,410,351
Total operating revenues	\$ —	25,404,127	12,532,675	\$ —	37,936,802
<b>OPERATING EXPENSES</b>					
Depreciation		1,851,948	437,463		2,289,411
Other operating expenses		27,961,331	11,779,424		39,740,755
Total operating expenses	—	29,813,279	12,216,887	—	42,030,166
INCOME (LOSS) FROM OPERATIONS	—	(4,409,152)	315,788	—	(4,093,364)
<b>NON-OPERATING INCOME</b>					
Property taxes	1,327,440				1,327,440
Non-capital grants and gifts		556,517	12,625		569,142
Other	12,276	273,127	363,354		648,757
Total non-operating income, net	1,339,716	829,644	375,979	—	2,545,339
REVENUE OVER (UNDER) EXPENSE BEFORE CAPITAL GRANTS AND GIFTS	1,339,716	(3,579,508)	691,767	—	(1,548,025)
CAPITAL GRANTS AND GIFTS		1,744,648			1,744,648
CHANGE IN NET POSITION	1,339,716	(1,834,860)	691,767		196,623
NET POSITION, Beginning of year	11,495,489	4,638,178	8,639,069		24,772,736
NET POSITION, End of year	\$ 12,835,205	\$ 2,803,318	\$ 9,330,836	\$ —	\$ 24,969,359
<b>2023:</b>					
<b>OPERATING REVENUES</b>					
Net patient service revenue		\$ 24,925,099	\$ 10,090,470		\$ 35,015,569
Other operating revenue		267,016	1,336,988		1,604,004
Total operating revenues	\$ —	25,192,115	11,427,458	\$ —	36,619,573
<b>OPERATING EXPENSES</b>					
Depreciation		1,532,524	320,719		1,853,243
Other operating expenses	100	27,054,142	11,693,316		38,747,558
Total operating expenses	100	28,586,666	12,014,035	—	40,600,801
INCOME (LOSS) FROM OPERATIONS	(100)	(3,394,551)	(586,577)	—	(3,981,228)
<b>NON-OPERATING INCOME (EXPENSE)</b>					
Property taxes	1,157,647				1,157,647
Non-capital grants and gifts		1,463,069	42,155		1,505,224
Other	21,175	265,232	(250)		286,157
Non-operating income, net	1,178,822	1,728,301	41,905	—	2,949,028
CHANGE IN NET POSITION	1,178,722	(1,666,250)	(544,672)	—	(1,032,200)
NET POSITION, Beginning of year	10,316,767	6,304,428	9,183,741		25,804,936
NET POSITION, End of year	\$ 11,495,489	\$ 4,638,178	\$ 8,639,069	\$ —	\$ 24,772,736

The following tables are condensed combining statements of cash flows for the District and its blended component units for the years ended December 31, 2024 and 2023:

	<u>DISTRICT</u>	<u>HOSPITAL</u>	<u>LIVING CENTER</u>	<u>TOTALS</u>
<b>2024:</b>				
<b>NET CASH PROVIDED BY (USED IN):</b>				
Operating activities		\$ (1,476,978)	\$ (7,414)	\$ (1,484,392)
Non-capital financing activities	\$ (2,336,907)	4,220,863	64,277	1,948,233
Capital and related financing activities		(1,740,674)	(65,510)	(1,806,184)
Investing activities	<u>12,276</u>	<u>130,162</u>		<u>142,438</u>
Increase (decrease) in cash and cash equivalents	(2,324,631)	1,133,373	(8,647)	(1,199,905)
CASH AND CASH EQUIVALENTS, Beginning of year	<u>2,622,173</u>	<u>3,843,852</u>	<u>198,028</u>	<u>6,664,053</u>
CASH AND CASH EQUIVALENTS, End of year	<u>\$ 297,542</u>	<u>\$ 4,977,225</u>	<u>\$ 189,381</u>	<u>\$ 5,464,148</u>
<b>2023:</b>				
<b>NET CASH PROVIDED BY (USED IN):</b>				
Operating activities	\$ (100)	\$ (1,284,550)	\$ 25,043	\$ (1,259,607)
Non-capital financing activities	(102,784)	2,723,500	41,905	2,662,621
Capital and related financing activities		(4,069,254)	(177,823)	(4,247,077)
Investing activities	<u>591,812</u>	<u>144,943</u>		<u>736,755</u>
Increase (decrease) in cash and cash equivalents	488,928	(2,485,361)	(110,875)	(2,107,308)
CASH AND CASH EQUIVALENTS, Beginning of year	<u>2,133,245</u>	<u>6,329,213</u>	<u>308,903</u>	<u>8,771,361</u>
CASH AND CASH EQUIVALENTS, End of year	<u>\$ 2,622,173</u>	<u>\$ 3,843,852</u>	<u>\$ 198,028</u>	<u>\$ 6,664,053</u>

**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**Supplementary Information**

**And**

**Compliance and Internal Control Reports**

**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**BUDGET AND ACTUAL REVENUES AND EXPENSES  
FOR THE YEAR ENDED DECEMBER 31, 2024**

	<b>ACTUAL</b>	<b>BUDGET</b>	<b>FAVORABLE (UNFAVORABLE) VARIANCE</b>
<b>OPERATING REVENUES</b>			
Net patient service revenue	\$ 36,526,451	\$ 36,380,268	\$ 146,183
Other operating revenue	<u>1,410,351</u>	<u>2,700,643</u>	<u>(1,290,292)</u>
Total operating revenues	<u>37,936,802</u>	<u>39,080,911</u>	<u>(1,144,109)</u>
<b>OPERATING EXPENSES</b>			
Salaries, wages and employee benefits	24,522,955	24,916,082	393,127
Other operating expenses	<u>17,507,211</u>	<u>13,878,588</u>	<u>(3,628,623)</u>
Total operating expenses	<u>42,030,166</u>	<u>38,794,670</u>	<u>(3,235,496)</u>
INCOME (LOSS) FROM OPERATIONS	(4,093,364)	286,241	(4,379,605)
NON-OPERATING INCOME, NET	2,545,339	1,836,713	708,626
CAPITAL GRANTS AND GIFTS	<u>1,744,648</u>	<u></u>	<u>1,744,648</u>
INCREASE IN NET POSITION	<u>\$ 196,623</u>	<u>\$ 2,122,954</u>	<u>\$ (1,926,331)</u>

**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS  
FOR THE YEAR ENDED DECEMBER 31, 2024**

<u>Federal Agency / Pass-Through Entity and Cluster or Program</u>	<u>Assistance Listing Number</u>	<u>Amount Expended</u>
<b>United States Department of Health and Human Services:</b>		
Community Project Funding/ Congressionally Directed Spending – Construction Pass-Through Program:	93.493	\$ 1,100,000
Colorado Department of Public Health and Environment Family Planning Services	93.217	<u>43,245</u>
Total U.S. Department of Health and Human Services		1,143,245
<b>United States Department of Treasury:</b>		
Coronavirus State and Local Fiscal Recovery Funds	21.027	<u>644,648</u>
<b>TOTAL EXPEDITURES OF FEDERAL AWARDS</b>		<u>\$ 1,787,893</u>

**Notes to Schedule:**

1. The Schedule of Expenditures of Federal Awards (the schedule) includes the Federal awards activity of Huerfano County Hospital District D/B/A Spanish Peaks Regional Health Center (the District), and is presented on the accrual basis of accounting. The information in the schedule is presented in accordance with the requirements of Title 2 U.S. *Code of Federal Regulations* (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards*. Because the schedule presents only a selected portion of the operations of the District, it is not intended to and does not present the financial position, results of operations, changes in net assets, or cash flows of the District.
2. The District provided no federal awards to subrecipients.
3. The District has elected to not use the 10 percent *de minimus* indirect cost rate to charge costs to their federal awards.

**INDEPENDENT AUDITORS' REPORT ON INTERNAL CONTROL OVER  
FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS  
BASED ON THE AUDIT OF FINANCIAL STATEMENTS PERFORMED IN  
ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS***

The Board of Directors  
Huerfano County Hospital District  
d/b/a Spanish Peaks Regional Health Center Walsenburg, Colorado

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of Huerfano County Hospital District d/b/a Spanish Peaks Regional Health Center (the District), which comprise the statements of net position as of December 31, 2024, and the related statements of revenues, expenses and changes in net position and of cash flows for year then ended, and the related notes to the financial statements and have issued our report thereon dated September 23, 2025.

**Report on Internal Control Over Financial Reporting**

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

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

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. We identified certain deficiencies in internal control, described in the accompanying schedule of findings and questioned costs as items 2024-001 and 2024-002 that we consider to be a material weakness and a significant deficiency, respectively.

**Report on Compliance and Other Matters**

As part of obtaining reasonable assurance about whether the District's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, non-compliance with which could have a direct and material effect on the financial statements.

However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of non-compliance or other matters that are required to be reported under *Government Auditing Standards*.

#### **The District's Responses to Findings**

*Government Auditing Standards* requires the auditor to perform limited procedures on the District's responses to the findings identified in our audit is described in the accompanying schedule of findings and questioned costs. The District's responses were not subjected to the other auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on the response.

#### **Purpose of this Report**

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

*Stockman Kast Ryan & Co., LLP*

September 23, 2025

**INDEPENDENT AUDITORS' REPORT ON COMPLIANCE FOR  
EACH MAJOR PROGRAM AND ON INTERNAL CONTROL OVER  
COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE**

The Board of Directors  
Huerfano County Hospital District  
d/b/a Spanish Peaks Regional Health Center Walsenburg, Colorado

**Report on Compliance for Each Major Federal Program**

**Opinion on The Major Federal Program**

We have audited Huerfano County Hospital District d/b/a Spanish Peaks Regional Health Center's (the District) compliance with the types of compliance requirements identified as subject to audit in the *OMB Compliance Supplement* that could have a direct and material effect on the District's major federal program for the year ended December 31, 2024. The District's major federal program is identified in the summary of auditors' results section of the accompanying schedule of findings and questioned costs.

In our opinion, the District complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on its major federal program for the year ended December 31, 2024.

**Basis for Opinion on The Major Federal Program**

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and the audit requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditors' Responsibilities for the Audit of Compliance section of our report.

We are required to be independent of the District and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion on compliance for the major federal program. Our audit does not provide a legal determination of the District's compliance with the compliance requirements referred to above.

**Responsibility of Management for Compliance**

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to the District's federal programs.

## **Auditors' Responsibility for the Audit of Compliance**

Our objectives are to obtain reasonable assurance about whether material non-compliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the District's compliance based on our audit. 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, *Government Auditing Standards*, and the Uniform Guidance will always detect material non-compliance when it exists. The risk of not detecting material non-compliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Non-compliance with the compliance requirements referred to above is considered material if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the District's compliance with the requirements of the major federal program as a whole.

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material non-compliance, 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 District's compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of the District's internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of the District's internal control over compliance. Accordingly, no such opinion is expressed.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

## **Report on Internal Control Over Compliance**

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

Our consideration of internal control over compliance was for the limited purpose described in the Auditors' Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over the compliance that might be material weaknesses or significant deficiencies in internal control over compliance and therefore, material weaknesses or significant deficiencies may exist that were not identified.

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

*Stockman Kast Ryan & Co., LLP*

September 23, 2025

**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**SCHEDULE OF FINDINGS AND QUESTIONED COSTS  
FOR THE YEAR ENDED DECEMBER 31, 2024**

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**SECTION I – SUMMARY OF AUDITORS' RESULTS**

**FINANCIAL STATEMENTS**

1. Type of auditors' report issued was:

- Unmodified                       Modified                       Adverse                       Disclaimed

2. Internal control over financial reporting:

- (A) Material weakness(es) identified?                       Yes                       No  
 (B) Significant deficiencies identified?                       Yes                       None Reported

3. Non-compliance material to the financial statements noted?                       Yes                       No

**FEDERAL AWARDS**

1. Internal control over major programs:

- (A) Material weakness(es) identified?                       Yes                       No  
 (B) Significant deficiencies identified?                       Yes                       None Reported

2. Type of auditors' report issued on compliance for major programs:

- Unmodified                       Modified                       Adverse                       Disclaimed

3. Any audit findings that are required to be reported in accordance with 2CFR 200.516(a)?                       Yes                       No

4. The Auditee's major program was:

<u>Assistance Listing Number</u>	<u>Federal Agency / Pass-Through Entity and Cluster or Program</u>
93.493	United States Department of Health and Human Services: Community Project Funding/Congressionally Directed Spending – Construction

5. Dollar threshold used to distinguish between Type A and Type B programs:                      \$ 750,000

6. Auditee qualified as low-risk auditee under Section 520 of the Uniform Guidance?                       Yes                       No

(Continued)

**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**SCHEDULE OF FINDINGS AND QUESTIONED COSTS  
FOR THE YEAR ENDED DECEMBER 31, 2024**

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**SECTION II – FINANCIAL STATEMENT FINDINGS**

Reference Number	Finding	Questioned Costs
2024-001	<p><i>Criteria or Specific Requirement</i> – Management is responsible for preparing the financial statements in accordance with generally accepted accounting principles.</p> <p><i>Condition</i> – Audit adjustments were required to correct net patient receivables, accounts payable, accrued expenses, estimated third-party payer settlements, net position, and related patient service revenues and operating expenses.</p> <p><i>Context</i> – Allowances on patient receivables, accounts payable, the estimated self-funded health plan claims liability and settlement activity related to estimated third-party payer settlements were not properly recorded.</p> <p><i>Cause</i> – Patient accounts receivable, accounts payable, estimated self-funded health plan claims liability and prior year third-party payer settlements were not reconciled and reviewed regularly due to limited personnel and turnover of personnel in the current year.</p> <p><i>Effect or Potential Effect</i> – The District’s internal financial statements were misstated.</p> <p><i>Recommendation</i> – We recommend the District ensure that reconciliations to the financial statements are performed timely and the internal financial statements are adjusted accordingly.</p> <p><i>Views of Responsible Officials and Planned Corrective Actions</i> – Management agrees with the finding and will implement the recommendation.</p>	None
2024-002	<p><i>Criteria or Specific Requirement</i> – Segregation of duties is an essential element of the internal control structure.</p> <p><i>Condition</i> – The District has internal control weaknesses with respect to segregation of duties over cash receipts and disbursements.</p> <p><i>Context</i> – As a small rural hospital, the District has limited personnel resulting in limitations on their ability to segregate duties.</p>	None

(Continued)

**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**SCHEDULE OF FINDINGS AND QUESTIONED COSTS  
FOR THE YEAR ENDED DECEMBER 31, 2024**

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<b>Reference Number</b>	<b>Finding</b>	<b>Questioned Costs</b>
	<p><i>Cause</i> – Due to limited personnel, the District has been unable to achieve adequate segregation of duties.</p> <p><i>Effect or Potential Effect</i> – The lack of adequate segregation of duties causes the District to be more susceptible to misappropriation of assets.</p> <p><i>Recommendation</i> – We recommend that the District implement procedures to mitigate its segregation of duty weaknesses as much as possible including review processes by the Chief Executive Officer and/or Chief Financial Officer.</p> <p><i>Views of Responsible Officials and Planned Corrective Actions</i> – Management agrees with the finding and will consider controls such as review processes that will mitigate its segregation of duty weaknesses.</p>	

**SECTION II – FEDERAL AWARD FINDINGS AND QUESTIONED COSTS**

No matters are reported.

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(Concluded)

**HUERFANO COUNTY HOSPITAL DISTRICT  
D/B/A SPANISH PEAKS REGIONAL HEALTH CENTER**

**SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS  
FOR THE YEAR ENDED DECEMBER 31, 2024**

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**SECTION II – FINANCIAL STATEMENT FINDINGS**

Reference Number	Finding	Questioned Costs
2023-001	<p><i>Condition</i> – Significant adjusting entries were made to accrued expenses, estimated third-party payer settlements and related employee benefits expenses and patient service revenues.</p> <p><i>Recommendation</i> – We recommend the District ensure that reconciliations to the financial statements are performed timely and the internal financial statements are adjusted accordingly.</p> <p><i>Current Status</i> – Condition is ongoing, see item 2024-001.</p>	None
2023-002	<p><i>Condition</i> – The District has internal control weaknesses with respect to segregation of duties over cash receipts and disbursements.</p> <p><i>Recommendation</i> – We recommend that the District implement procedures to mitigate its segregation of duty weaknesses as much as possible including review processes by the Chief Executive Officer and/or Chief Financial Officer.</p> <p><i>Current Status</i> – Condition is ongoing, see item 2024-002.</p>	None
2023-003	<p><i>Condition</i> – Evidence of certain payroll expenses transactions under the United States Department of Homeland Security program was not maintained by management.</p> <p><i>Recommendation</i> – We recommend that management review procedures and change as necessary to ensure evidence is maintained to support expense transactions.</p> <p><i>Current Status</i> – Recommendation was implemented during the year and there is no continuing finding or conditions.</p>	None