# **Grayson County Health Department**

**Financial Statements** 

Fiscal Year Ended June 30, 2018

Roy W Hunter, CPA, PLLC 1890 Star Shoot Parkway Suite 170-147 Lexington, KY 40509

# **Grayson County Health Department**

Table of Contents June 30, 2018

Page	<u>)</u>
Independent Auditor's Report	
Financial Statements	
Statement of Assets, Liabilities and Fund Balance	
Statement of Revenues, Expenditures and Changes in Fund Balance	
Notes to Financial Statements6-10	
Supplementary Information	
Schedule of Revenues and Expenditures by Cost Center	
Schedule of Revenues and Expenditures - Actual vs. Budget	
Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements	
Performed in Accordance With Government Auditing Standards	
Audit Adjustment	
Management Letter Comments	,
Prior Year Management Letter Comments	



#### **Independent Auditor's Report**

To the Board of Directors Grayson County Health Department

#### **Report on the Financial Statements**

We have audited the accompanying financial statements of Grayson County Health Department (the "Department") as of and for the year ended June 30, 2018, which comprise the statements of assets, liabilities and fund balance as of June 30, 2018 and the related statements of revenues, expenditures, and changes in fund balance for the year then ended, and the related notes to the financial statements.

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

Management is responsible for the preparation and fair presentation of these financial statements in conformity with the financial reporting prescribed by the Kentucky Cabinet for Health and Family Services, Department for Public Health, Division of Administration and Financial Management, Administrative Reference. Management is also responsible 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.

### Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

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

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

### **Independent Auditor's Report (Continued)**

## Basis for Adverse Opinion on U.S. Generally Accepted Accounting Principles

As described in Note B, the financial statements are prepared by the Department, on the basis of the financial reporting provisions prescribed by the Kentucky Cabinet for Health and Family Services, Department for Public Health, Division of Administration and Financial Management, Administrative Reference, which is a basis of accounting other than accounting principles generally accepted in the United States of America, to comply with the requirements of modified cash basis of accounting as prescribed by the Kentucky Cabinet for Health and Family Services (CHFS), Department for Public Health, Division of Administration and Financial Management, Administrative Reference.

The effects on the financial statements of the variances between the regulatory basis of accounting described in Note B and accounting principles generally accepted in the United States of America, although not reasonably determinable, are presumed to be material.

### Adverse Opinion on U.S. Generally Accepted Accounting Principles

In our opinion, because of the significance of the matter discussed in the "Basis for Adverse Opinion on U.S. Generally Accepted Accounting Principles" paragraph, the financial statements referred to in the first paragraph do not present fairly, in accordance with accounting principles generally accepted in the United States of America, the financial position of the Department, as of June 30, 2018, the changes in its financial position, or, where applicable, its cash flows for the year then ended.

### **Opinion on Regulatory Basis of Accounting**

In our opinion, the financial statements referred to in the first paragraph present fairly, in all material respects, the cash balance of the Department, as of June 30, 2018, and the revenues, expenditures and change in fund balance for the year then ended, on the basis of the financial reporting provisions prescribed by the Kentucky Cabinet for Health and Family Services, Department for Public Health, Division of Administration and Financial Management, Administrative Reference as described in Note B.

#### **Other Matters**

#### Other Information

Our audit was conducted for the purpose of forming an opinion on the financial statements that collectively comprise the Department's basic financial statements. The Schedule of Revenues and Expenditures by Cost Center and the Schedule of Revenues and Expenditures – Actual vs Budget are presented for purposes of additional analysis and are not a required part of the basic financial statements.

The Schedule of Revenues and Expenditures by Cost Center and Schedule of Revenues and Expenditures – Actual vs. Budget are the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. Such 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 Schedule of Revenue and Expenditures by Cost Center and Schedule of Revenues and Expenditures – Actual vs. Budget are fairly stated, in all material respects, in relation to the basic financial statements as a whole.

#### **Independent Auditor's Report (Continued)**

## Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated October 18, 2018 on our consideration of the Department'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 the Department's internal control over financial reporting and compliance.

Lexington, Kentucky October 18, 2018

oy W Idents

# Grayson County Health Department Statement of Assets, Liabilities and Fund Balance June 30, 2018

## Assets

Cash	\$ 371,991
Total Assets	\$ 371,991
Liabilities and Fund Balance	
Liabilities	
Administrative fee liability Payroll withholdings	\$ 3,995 1,713
Total Liabilities	5,708
Fund Balance	
Unrestricted	248,893
Restricted	117,390
Total Fund Balance	366,283
Total Liabilities and Fund Balance	\$ 371,991

See accompanying notes.

# Grayson County Health Department Statement of Revenues, Expenditures and Changes in Fund Balance Year Ended June 30, 2018

Revenues	
State funds	\$ 271,403
Federal funds	223,207
Local funds	355,728
Service fees	405,465
Interest income	550
Unrestricted carryover	 118,620
Total Revenues	1,374,973
Expenditures	
Compensation	647,645
Fringe benefits	491,495
Independent contracts	3,784
Travel	13,344
Occupancy	37,707
Office administration	67,186
Medical supplies	20,796
Automotive	10,694
Other	32,226
Total Expenditures	 1,324,877
Excess of revenues over expenditures	50,096
Fund Balance, Beginning of Year	435,895
Less: Prior year income carryovers included in current year revenue:	
State funds	(733)
Service fees	(355)
Unrestricted carryover	(118,620)
	(119,708)
Fund Balance, End of Year	\$ 366,283

See accompanying notes.

### Note A – Nature of Organization and Operations

Grayson County Health Department (the Department) was established pursuant to Kentucky Revised Statute (KRS) 212.850 to provide health services through the county health department in Grayson County. The Department is governed by the Grayson County Board of Health (the Board) which consists of representatives of Grayson County as set forth in KRS 212.850. The Department is exempt from federal and state income taxes.

## Note B – Summary of Significant Accounting Policies

- 1. <u>Basis of Accounting</u> The Department prepares its financial statements on the modified cash basis of accounting as prescribed by the Kentucky Cabinet for Health and Family Services (CHFS), Department for Public Health, Division of Administration and Financial Management, Administrative Reference, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America. Under this basis of accounting, revenues are recorded when received and expenditures are recorded when paid (the cash basis), with certain exceptions identified in the Administrative Reference. The Department uses the indirect cost allocation plan developed by CHFS in accordance with the requirement of Uniform Guidance 2 CFR part 200, Appendices III–VII. Fixed assets are recorded as expenses when paid and are not capitalized. Also, in accordance with policy established by CHFS, the Department has not adopted the financial reporting standards of GASB 34 and GASB 54.
- 2. Source of Funds Revenue sources of the Department are divided into four groups as follows:
- State includes restricted and unrestricted state grant funds.
- Federal includes federal grant funds passed through from CHFS.
- Local includes funds from taxing districts, county and city appropriations, and donations from private sources.
- Service fees includes funds from school board contracts, Medicaid and Medicare payments for services, self-pay, insurance payments, other pay for service and sale of surplus assets.
- 3. <u>Accounting Estimates</u> The preparation of financial statements in conformity with accounting principles consistent with the basis of accounting described above requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.
- 4. <u>Subsequent Events</u> Subsequent events for the Department have been considered through the date of the Independent Auditor's Report which represents the date the financial statements were available to be issued.

#### **Note C – Cash and Cash Equivalents**

The Department's cash and equivalents consist of amounts deposited in both interest and noninterest-bearing accounts. As of June 30, 2018, the carrying amount of the Department's deposits was \$371,991 and the combined banking institutions' balance was \$382,450. The difference of \$10,459 between the Department's deposit balance and the banking institutions' balance results from outstanding checks. Of the banking institutions' balance, \$250,000 was covered by Federal depository insurance. Securities pledged as collateral for deposits totaled \$180,000 and are held in the name of the financial institution and pledged to the District.

#### Note D - Defined Benefit Pension Plan

*Plan Description*: All employees averaging 100 or more hours per month over a calendar or fiscal year participate in the Kentucky Employees Retirement System (KERS) of the Commonwealth of Kentucky, which is a cost-sharing multiple-employer defined benefit pension plan. The KERS provides retirement, as well as health care, disability, and death benefits to plan members. The KERS provides for cost-of-living adjustments at the discretion of the Kentucky legislature. Benefits are established by State statute.

*Benefits Provided*: KERS provides retirement, disability, and death benefits. Benefit provisions are established by state statute and can only be modified by the state legislature.

All regular full-time employees of the Authority/Corporation are covered by KERS. A regular full-time employee is an employee that averages one hundred or more hours per month over a calendar or fiscal year. KERS consist of three tiers:

Tier 1: Participation prior to September 1, 2008

Tier 2: Participation on or after September 1, 2008 to December 31, 2013

Tier 3: Participation on or after January 1, 2014

For Tiers 1 and 2, the benefit paid is based on the following formula: Final Compensation X Benefit Factor X Years of Service = Annual Benefit. For Tier 3, the benefit paid is based on the member's accumulated account balance at the time of retirement.

In 2013, all Cost of Living Adjustments (COLA's) were eliminated unless the State Legislature so authorizes on a biennial basis and either (1) the system is over 100% funded or (2) the Legislature appropriates sufficient funds to prepay the increased liability for the COLA.

*Contributions*: Kentucky statutes set the rates for employer and employee contributions. Contributions rates can only be modified by the state legislature.

The employer and each employee contribute a percentage of the employee's creditable compensation. Creditable compensation consists of all wages includable on the employee's Federal Form W-2, Wage and Tax statement, under the heading "Wages, Tips, and Other Compensation". There are two exceptions of payment of wages not included in creditable compensation: (1) the lump-sum compensatory leave payments to employees in Tier 2 and 3 and (2) vacation payout at termination. The employer total contribution rate for FY18 was 49.47% comprised of 41.06% for pension contributions and 8.41% for insurance contributions. The employee's contribution rates are as follows: Tier 1 - 5%, Tier 2 and 3 - 6%.

Retired employees receive certain health care benefits depending on length of service. In accordance with State statutes, such benefits are provided and advanced-funded on an actuarially determined basis through the KERS. As indicated above, covered employees hired after September 1, 2008 are required by State statute to contribute an additional 1.00% of their salary to fund the Kentucky Retirement Systems insurance fund. The related employer contribution is included in the required employer contribution rates indicated above.

The Department's contribution requirement for the year ended June 30, 2018 totals \$312,539. This amount includes the pension and insurance contributions.

#### **Note D – Defined Benefit Pension Plan (Continued)**

Contributions (Continued): The risks of participating in a multiple-employer plan are different from a single-employer plan in the following two respects: (1) assets contributed to a multiple-employer plan by one employer may be used to provide benefits to employees of other participating employers and (2) if a participating employer stops contributing to the plan, the unfunded obligations of the plan may be borne by the remaining participating employers.

*Net Pension Liability*: The net pension liability is the total pension liability, less the amount of the plan's fiduciary net position. The most recent actuarial valuation of the net pension liability was performed as of June 30, 2016 and rolled-forward from the valuation date to the plan's fiscal year end, June 30, 2017. The net pension liability at June 30, 2017 for the System, as a whole, determined through an actuarial valuation performed as of that date was calculated based on three discount rates as follows:

	1% Increase In	Current	1% Decrease In
Assumption	Discount Rate	Discount Rate	Discount Rate
Discount Rate	6.25%	5.25%	4.25%
Net Pension Liability	\$ 11,810,153,309	\$ 13,388,336,606	\$ 15,286,444,750

The Kentucky Retirement System is required to determine the pro-rata share of each member for reporting in the member's financial statements. At June 30, 2017, the Health Department's proportionate share of the Total Net Pension Liability was .0327 percent, an increase from the prior year proportionate share of .0279 percent. The Department's share of the net pension liability at June 30, 2017 was calculated based on three discount rates as follows:

	1% Increase In	Current	1% Decrease In
Assumption	Discount Rate	Discount Rate	Discount Rate
Discount Rate	6.25%	5.25%	4.25%
Net Pension Liability	\$ 3,859,322	\$ 4,375,041	\$ 4,995,304

The Department's total employer pension expense for the fiscal year ended June 30, 2017 was \$797,202. These amounts do not appear in the financial statements since the financial statements are prepared on the modified cash basis of accounting as prescribed by the Kentucky Cabinet for Health and Family Services (CHFS), Department for Public Health, Division of Administration and Financial Management, Administrative Reference, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America.

In addition to the KERS, the Department's employees are also eligible to participate in two deferred compensation plans sponsored by the Commonwealth. These plans are organized as a Section 457 plan and as a Section 401(k) plan under the Internal Revenue Code. Both plans permit employees to defer a portion of their salary until future years. Deferred compensation is not available to employees until termination, retirement, death, or financial hardship. The Kentucky Public Employees Deferred Compensation Department issues a publicly available report that includes financial statements and other required supplementary information relative to the deferred compensation plans. Such report may be obtained by writing to the Kentucky Public Employees Deferred Compensation Department, 101 Sea Hero Road, Suite 110, Frankfort, Kentucky 40601. The Commonwealth's Comprehensive Annual Financial Report should also be referred to for additional disclosures related to the two deferred compensation plans.

#### **Note D – Defined Benefit Pension Plan (Continued)**

Ten-year historical trend information showing the KERS' progress in accumulating sufficient assets to pay benefits when due (as well as financial statements and other required supplementary information) is presented in the Kentucky Employees Retirement System's Annual Financial Report (which is a matter of public record). The most recent actuarial valuation is as of June 30, 2017. Such report may be obtained by writing to the Kentucky Retirement System, 1260 Louisville Road, Perimeter Park West, Frankfort, Kentucky 40601. The Commonwealth's Comprehensive Annual Financial Report should also be referred to for additional disclosures related to the KERS.

#### **Note E – Compensated Absences**

Employees of the Department earn vacation, sick and compensated hours monthly depending on job classification, length of service and other factors. Under the Department's method of accounting as described in Note B, the liability for the value of the compensated absences earned as of June 30, 2018 is not recorded.

The vacation and compensated hours earned are subject to cash payment upon termination of employment. At June 30, 2018, the value of vacation and compensated hours was a \$27,466.

The sick hours earned are not subject to cash payment upon termination but are subject to conversion into the employee's retirement account (see Note D) as creditable compensation. Upon such conversion, the Department is liable for the payment of the employer's share of the retirement contribution. At June 30, 2018, the value of sick hours earned was \$44,336. Based on the employer's contribution rate of 49.47%, the retirement contribution liability at June 30, 2018 was \$21,933.

#### Note F – Postemployment Benefits Other Than Pension Liability

Governmental Accounting Standards Board (GASB) Statement No. 75, "Accounting and Financial Reporting for Postemployment Benefits Other Than Pension (OPEB)" required that the Kentucky Retirement System (KRS) determine the total OPEB liability related to the Kentucky Employees' Health Plan that KRS administrates. The fully-insured premiums KRS pays for the Kentucky Employees' Health Plan are blended rates based on the combined experience of active and retired members. Because the average cost of providing health care benefits to retirees under age 65 is higher than the average cost of providing health care benefits to active employees, there is an implicit employer subsidy for the non-Medicare eligible retirees. GASB 75 requires that the liability associated with this implicit subsidy be included in the calculation of the total OPEB liability. The net OPEB liability is the total OPEB liability, less the amount of the plan's fiduciary net position. The most recent actuarial valuation of the net OPEB liability was performed as of June 30, 2016 and rolled-forward from the valuation date to the plan's fiscal year end, June 30, 2017. The net OPEB liability at June 30, 2017 for the System, as a whole was calculated based on three discount rates and three healthcare cost trend rates as follows:

	1% Increase In	Current	1% Decrease In
Assumption	Discount Rate	Discount Rate	Discount Rate
Discount Rate	6.83%	5.83%	4.83%
Net OPEB Liability	\$ 2,179,532,929	\$ 2,535,962,243	\$ 2,964,846,175

	1% Decrease In	Current	1% Increase In
	Healthcare Cost Trend	Healthcare Cost Trend	Healthcare Cost Trend
Assumption	Rate	Rate	Rate
Net OPEB Liability	\$ 2,154,746,815	\$ 2,535,962,243	\$ 3,014,646,108

#### **Note F – Postemployment Benefits Other Than Pension Liability (Continued)**

As a result of GASBS No. 75 the Kentucky Retirement System required the pro-rata share of each member to be determined for reporting in the member's financial statements. At June 30, 2017, the Health Department's proportion was .0327 percent. The Department's share of the net pension liability at June 30, 2017 was calculated based on three discount rates and three healthcare trend rates as follows:

	1% Increase In	Current	1% Decrease In
Assumption	Discount Rate	Discount Rate	Discount Rate
Discount Rate	6.83%	5.83%	4.83%
Net OPEB Liability	\$ 712,228	\$ 828,702	\$ 968,852

	1% Decrease In	Current	1% Increase In
	Healthcare Cost Trend	Healthcare Cost Trend	Healthcare Cost Trend
Assumption	Rate	Rate	Rate
Net OPEB Liability	\$ 704,128	\$ 828,702	\$ 985,126

The Department's total employer health plan expense for the fiscal year ended June 30, 2017 was \$82,208. These amounts do not appear in the financial statements since the financial statements are prepared on the modified cash basis of accounting as prescribed by the Kentucky Cabinet for Health and Family Services (CHFS), Department for Public Health, Division of Administration and Financial Management, Administrative Reference, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America.

#### Note G - Related Parties

The Grayson County Public Health Taxing District was created pursuant to Kentucky Revised Statute (KRS) 212.750 to levy a special ad valorem tax for the purpose of providing funding for the local Health Department. During the fiscal year under audit the Grayson County Public Health Taxing District assessed a tax rate of \$0.026 per \$100 on real property and \$0.03 per \$100 on tangible property. During the 2018 fiscal year the Grayson County Public Health Taxing District remitted \$355,728 to the Department; this amount is included as "Local funds" revenue on the Statement of Revenues, Expenditures and Changes in Fund Balance.



Grayson County Health Department Schedule of Revenues and Expenditures By Cost Center Year Ended June 30, 2018

	500	520	540	560	700	712	718	726	736
					Preventive		Lab/	Zika	
	Food	Public	General	Onsite	Presenting	Dental	Testing/	Preparedness	
	Service	Facilities	Sanitation	Sewage	Problems	Services	Radiology	and Response	CHAT
Revenues									
State funds	\$ 35,473	\$	\$	\$	\$	\$ 43	\$	\$	\$
Federal funds								3,756	965
Local funds	23,326	33,008	71,846						13
Service fees	1,700			88,300		19			
Interest income	542								
Unrestricted carry over									
Total revenues	61,041	33,008	71,846	88,300		62		3,756	978
Expenditures									
Direct									
Compensation	16,202	8,709	19,181	21,909	104,317		3,575	1,093	352
Fringe benefits	8,933	4,801	10,574	12,077	47,142		1,777	682	219
Independent contracts					223				
Travel					111				237
Occupancy									
Office administration				86	38				
Medical supplies					7,919		4,014		
Automotive									
Other		120			165	36	358	1,379	
Total direct	25,135	13,630	29,755	34,072	159,915	36	9,724	3,154	808
Indirect allocation	35,906	19,378	42,091	47,850	137,996		4,188	526	170
Resource based allocation					(297,911)	7	(13,912)		
			-1.01.			_			
Total expenditures	61,041	33,008	71,846	81,922	(159,915)	7	(9,724)	3,680	978
Excess of revenues over									
expenditures	\$	s	\$	\$ 6,378	\$	\$ 19	\$	\$ 76	\$
	Ψ	Ψ	Ψ	Ψ 0,570	Ψ	Ψ 19	Ψ	Ψ /0	Ψ

Grayson County Health Department Schedule of Revenues and Expenditures By Cost Center (Continued) Year Ended June 30, 2018

_	752	758	766	774	800	802	803	804	806
				Child				WIC	Tuberculosis
	Hands GF	Human	MCH	Fatality	Pediatric/	Family	M aternity	Visits &	Visits &
-	Services	Vitality	Coordinator	Prevention	Adolescent	Planning	Services	Activities	Activity
Revenues									
State funds	\$ 69,890	\$	\$	\$	\$	\$ 47	\$	\$	\$
Federal funds			14,743	774	250	15,125		144,415	50
Local funds	54,198		3,131	1,699	17,180	28,075	2,037	18,729	19,696
Service fees		16,225			6,673	19,918			4,522
Interest income						8			
Unrestricted carry over									·
Total revenues	124,088	16,225	17,874	2,473	24,103	63,173	2,037	163,144	24,268
Expenditures									
Direct									
Compensation	58,036	3,251	6,567	967	4,615	832		2,664	974
Fringe benefits	24,355	1,771	3,838	605	2,886	504		1,649	609
Independent contracts	2.,555	1,771	2,020	000	2,000	1,817	781	1,0.5	009
Travel	2,282	37	94	245				1,069	150
Occupancy	, -							,	
Office administration			117					140	
Medical supplies		4,649				3,544	27		
Automotive						,			
Other		29	2,964	99				1,443	71
Total direct	84,673	9,737	13,580	1,916	7,501	6,697	808	6,965	1,804
Total direct	64,073	9,737	13,580	1,910	7,501	0,097	808	0,903	1,004
Indirect allocation	39,415	2,142	4,294	557	2,224	405	1,229	1,310	469
Resource based allocation	35,113	2,1 (2	1,291	337	14,378	56,071	1,22)	154,869	21,995
- resource sused unocurion					11,570	20,071		13 1,003	21,553
Total expenditures	124,088	11,879	17,874	2,473	24,103	63,173	2,037	163,144	24,268
Excess of revenues over									
expenditures	¢	\$ 4,346	¢	¢	\$	\$	Φ	\$	\$
:	\$	\$ 4,346	\$	Ф	Þ	<b>D</b>	Ф	<b>D</b>	<b>D</b>

Grayson County Health Department Schedule of Revenues and Expenditures By Cost Center (Continued) Year Ended June 30, 2018

	807	809	810	811	813	818	821	823	826
	Sexually			Lead	Breast &	Community	Bioterrorism	Bioterrorism	
	Transmitted	Diabetes	Adult	Poisoning	Cervical	Based	Focus - A	(Focus	Communicare
	Disease Services	Services	Services	Prevention	Cancer	Services 799	Preparedness	Area E)	Grant
Revenues									
State funds	\$	\$ 5,102	\$	\$	\$	\$	\$	\$	\$
Federal funds					912		13,217	3,129	
Local funds	7,872		43,874	157	9,019	21,339			
Service fees	3,238		22,986		5,348				3,000
Interest income									
. Unrestricted carry over						27,414	1,273	1,885	
<b>Total revenues</b>	11,110	5,102	66,860	157	15,279	48,753	14,490	5,014	3,000
Expenditures									
Direct									
Compensation	749	1,092	11,438	36	1,578	21,846	5,472	2,182	
Fringe benefits	469	682	7,153	24	987	13,662	3,421	1,363	
Independent contracts			, , , ,		963	-,	-,	,	
Travel		86					226		
Occupancy									
Office administration							1,676		
Medical supplies									
Automotive									
. Other		189		80		298	96		1,592
Total direct	1,218	2,049	18,591	140	3,528	35,806	10,891	3,545	1,592
Indirect allocation	362	1,349	4,286	17	761	12,947	3,599	1,469	
Resource based allocation	9,530	1,349	43,983	17	10,990	12,747	3,377	1,409	
. Resource based anocation	7,550		43,783		10,550				
Total expenditures	11,110	3,398	66,860	157	15,279	48,753	14,490	5,014	1,592
Excess of revenues over									
expenditures	\$	\$ 1,704	\$	\$	\$	\$	\$	\$	\$ 1,408
:		-,,.						-	

# Grayson County Health Department Schedule of Revenues and Expenditures By Cost Center (Continued) Year Ended June 30, 2018

	836		837		842	853		890	891	892	895	897
				HIV				Core			Allocable	
	To	bacco			Testing/			Public Health	M edicaid	Minor	Leave &	Space
	Ces	sation	Abstinenc	e	Counseling	H	IANDS	Assessment	Match	Restricted	Fringes	Indirect
Revenues												
State funds	\$	6,987	\$		\$ 733	\$	5,380	\$	\$	\$	\$ 147,748	\$
Federal funds			2,0	38							23,833	
Local funds							529					
Service fees							233,150			386		
Interest income												
Unrestricted carry over					544		74,927	9,412	1,936	1,229		
<b>Total revenues</b>		6,987	2,0	38	1,277		313,986	9,412	1,936	1,615	171,581	
Expenditures												
Direct												
Compensation		1,623	6	01	453		142,741	4,038				10,781
Fringe benefits		1,015	3	75	282		66,353	2,524			133,410	1,210
Independent contracts												
Travel		350			325		4,300					
Occupancy												37,707
Office administration							2,458	197				
Medical supplies												
Automotive												
Other		20	3	80			3,347	168	1,936	1,615	4,087	
Total direct		3,008	1,3	56	1,060		219,199	6,927	1,936	1,615	137,497	49,698
Indirect allocation		2,069	5	14	217		94,787	2,485			(3)	(49,698)
Resource based allocation												
Total expenditures		5,077	1,8	70	1,277		313,986	9,412	1,936	1,615	137,494	
Excess of revenues over												
expenditures	ď	1.010	¢ 1	<b>6</b> 0	¢.	ď		¢	¢	¢	¢ 24.007	¢.
***	\$	1,910	\$ 1	68	\$	\$		\$	\$	\$	\$ 34,087	\$

# Grayson County Health Department Schedule of Revenues and Expenditures By Cost Center (Continued) Year Ended June 30, 2018

	898	899	900	901		
	Departmental Administration	Clinic Clerical	M edical Indirect	Environmental Indirect	Totals	
Revenues						
State funds	\$	\$	\$	\$	\$ 271,403	
Federal funds					223,207	
Local funds					355,728	
Service fees					405,465	
Interest income					550	
. Unrestricted carry over					118,620	
<b>Total revenues</b>	-	-			1,374,973	
Expenditures						
Direct						
Compensation	78,527	51,715	5,171	54,358	647,645	
Fringe benefits	62,349	26,357	4,121	43,316	491,495	
Independent contracts					3,784	
Travel	2,568	999	243	22	13,344	
Occupancy					37,707	
Office administration	47,983	10,137		4,354	67,186	
Medical supplies		643			20,796	
Automotive	60			10,634	10,694	
Other	10,576	1,013		165	32,226	
Total direct	202,063	90,864	9,535	112,849	1,324,877	
Indirect allocation Resource based allocation	(202,063)	(90,864)	(9,535)	(112,849)		
Total expenditures					1,324,877	
Excess of revenues over expenditures	\$	\$	\$	\$	\$ 50,096	

## Grayson County Health Department Schedule of Revenues and Expenditures by Actual vs. Budget Year Ended June 30, 2018

	 Actual	J)	Jnaudited) Budget	 Positive (Negative) Variance
Revenues				
State funds	\$ 271,403	\$	303,987	\$ (32,584)
Federal funds	223,207		211,843	11,364
Local funds	355,728		355,000	728
Service fees	405,465		413,360	(7,895)
Interest income	550		-	550
Unrestricted carryover	 118,620		19,240	 99,380
Total Revenues	1,374,973		1,303,430	71,543
Expenditures				
Compensation	647,645		630,047	(17,598)
Fringe benefits	491,495		475,251	(16,244)
Independent contracts	3,784		13,100	9,316
Travel	13,344		9,279	(4,065)
Occupancy	37,707		37,500	(207)
Office administration	67,186		55,126	(12,060)
Medical supplies	20,796		21,997	1,201
Automotive	10,694		5,500	(5,194)
Other	32,226		50,371	18,145
Total Expenditures	1,324,877		1,298,171	(26,706)
Tour Experiences	 1,527,077		1,270,171	 (20,700)
Excess of Revenues Over Expenditures	\$ 50,096	\$	5,259	\$ 44,837



Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance With *Government Auditing Standards* 

To the Members of the Board of the **Grayson County Health Department** 

We have audited, 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, the financial statements of the Grayson County Health Department (Department), as of and for the year ended June 30, 2018, and the related notes to the financial statements which collectively comprise the Department's basic financial statements, and have issued our report thereon dated October 18, 2018.

## **Internal Control Over Financial Reporting**

In planning and performing our audit of the financial statements, we considered the Department's internal control over financial reporting ("internal control") to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Department's internal control. Accordingly, we do not express an opinion on the effectiveness of the Department'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. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance With Government Auditing Standards (Continued)

## **Compliance and Other Matters**

As part of obtaining reasonable assurance about whether the Department's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit, and accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

## **Purpose of this Report**

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the 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.

Lexington, Kentucky October 18, 2018

of W Ident

# Grayson County Health Department Audit Adjustment Year Ended June 30, 2018

Account Number	Account Name	Debit	Credit	
To correctly record	l an expenditure.			
899-585-389	Client Clerical Other	\$ 4,086	\$ -	
143000	State income tax payable		4,086	
		\$ 4,086	\$ 4,086	



Grayson County Health Department Management Letter Comments Year Ended June 30, 2018

## **Management Letter Comments:**

No current year management letter comments were noted.



Grayson County Health Department Management Letter Comments Year Ended June 30, 2018

## **Management Letter Comments:**

No prior year management letter comments were noted.

