FINANCIAL STATEMENTS AND REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS RANSOM MEMORIAL HOSPITAL DECEMBER 31, 2012 AND 2011

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REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Board of Trustees Ransom Memorial Hospital

We have audited the accompanying financial statements of the business-type activity and discretely presented component unit of Ransom Memorial Hospital, a component unit of Franklin County, Kansas, as of and for the years ended December 31, 2012 and 2011, which collectively comprise the Hospital's financial statements as listed in the table of contents, 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 accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the business-type activity and discretely presented component unit of Ransom Memorial Hospital as of December 31, 2012 and 2011, and the respective changes in net position and cash flows for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Other-Matters

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

Wendling May Malson # Malson

Topeka, Kansas May 10, 2013



RANSOM MEMORIAL HOSPITAL STATEMENTS OF NET POSITION December 31,

ASSETS

	2012		2011	
		Component		Component
	<u> Hospital</u>	<u>unit</u>	<u>Hospital</u>	<u>unit</u>
CURRENT ASSETS				
Cash and cash equivalents Patient accounts receivable, net of allowance for doubtful accounts of \$2,900,000 in 2012 and \$3,287,096	\$ 2,736,764	\$ 20,237	\$ 1,113,371	\$ 33,047
in 2011	3,798,978		4,047,946	
Other receivables	895,065		442,212	
Inventories	919,542		1,022,756	
Prepaid expenses Estimated third-party payor	319,022		252,213	
settlements	285,351			
Total current assets	8,954,722	20,237	6,878,498	33,047
ASSETS LIMITED AS TO USE				
Internally designated by Board	5,696,743		5,818,734	
Deposit with Community Foundation		278,837		250,655
	5,696,743	278,837	5,818,734	250,655
CAPITAL ASSETS, net	18,936,892	449,376	19,675,920	465,674
Total assets	\$33,588,357	\$ 748,450	\$32,373,152	\$ 749,376

LIABILITIES AND NET POSITION

	2012		2011	
	<u> Hospital</u>	Component unit	Hospital	Component unit
CURRENT LIABILITIES				
Accounts payable and other				
accrued expenses	\$ 1,275,295	\$ -	\$ 984,989	\$ 12,152
Construction and equipment			, , , , , , , , , , , , , , , , , , , ,	,,
costs payable	194,467		740,723	
Salaries, wages, and related				
withholdings payable	809,682		741,830	
Accrued discretionary leave	646,289		682,671	
Estimated third-party payor				
settlements	450,000		415,109	
Total current liabilities	3,375,733		3,565,322	12,152
NET POSITION				
Invested in capital assets - net of				
related debt	18,936,892	449,376	19,675,920	465,674
Restricted	,	,		103,071
Expendable for specific purposes		14,279		29,919
Nonexpendable permanent endowments		438,765		438,765
Unrestricted	11,275,732	(153,970)	9,131,910	(197,134)
Total net position	30,212,624	748,450	28,807,830	737,224
Total liabilities and net position	\$33,588,357	\$ 748,450	\$32,373,152	\$ 749,376

RANSOM MEMORIAL HOSPITAL

STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION

Year ended December 31,

	2012		2011	
		Component		Component
	<u> Hospital</u>	<u>unit</u>	<u> Hospital</u>	<u>unit</u>
Operating revenues				
Net patient service revenue	\$28,847,226	\$ -	\$27,735,542	\$ -
Electronic health record	Q 20 / 0 1 / / 220	4	Ψ 2 /	۲
incentives	1,136,625		1,440,709	
Other	724,005	60,869	485,340	103,471
	····			
Total operating revenue	30,707,856	60,869	29,661,591	103,471
Operating expenses				
Salaries and wages	15,971,663		15,949,683	
Employee benefits	3,399,600		3,478,597	
Supplies and other	9,528,893	64,233	9,134,708	74,624
Depreciation and amortization	2,370,860	16,298	2,237,568	15,728
-				
Total operating expenses	31,271,016	80,531	30,800,556	90,352
Operating income (loss)	(563,160)	(19,662)	(1,138,965)	13,119
Nonoperating revenues				
Investment income	22,890	30,888	49,406	3,260
Noncapital grants and	,		/	3,200
contributions	15,806		23,302	
Sales tax revenue	1,551,995		1,519,565	
Other	1,358		975	

Total nonoperating revenues, net	1,592,049	30,888	1,593,248	3,260
Excess of revenues over expenses				
before capital grants and contributions	1 000 000	11 006	454 000	16.000
Capital grants and contributions	1,028,889	11,226	454,283	16,379
capital grants and contributions	375,905		65,000	
Change in net position	1,404,794	11,226	519,283	16,379
Net position at beginning of year	28,807,830	737,224	28,288,547	720,845
F 00 00 00 00 1001				
Net position at end of year	\$30,212,624	\$ 748,450	\$28,807,830	\$ 737,224

RANSOM MEMORIAL HOSPITAL STATEMENTS OF CASH FLOWS Year ended December 31,

	2012		2011	
		Component		Component
	<u> Hospital</u>	<u>unit</u>	<u> Hospital</u>	<u>unit</u>
Cash flows from operating activities Receipts from and on behalf of				
patients Payments to or on behalf of employees	\$28,845,734 (19,364,793)	\$ -	\$28,081,539 (19,291,137)	\$ -
Payments to suppliers Other receipts and payments	(9,177,182) 1,407,777	(76,385) 60,869	(8,647,900) 2,011,718	(76,308) 90,971
Net cash provided (used) by operating activities	1,711,536	(15,516)	2,154,220	14,663
Cash flows from noncapital financing activities				
Sales tax revenue Noncapital grants and contributions	1,551,995 15,806		1,509,565 23,302	
Net cash provided by noncapital financing				
activities	1,567,801		1,532,867	-
Cash flows from capital and related financing activities				
Purchases of capital assets Grants and contributions for	(2,179,960)	-	(5,382,407)	(110,370)
capital Proceeds from sale of equipment	375,905 3,230		65,000 975	
Net cash used by capital				
and related financing activities	(1,800,825)		(5,316,432)	(110,370)
Cash flows from investing activities (Increase) decrease in assets limited				
as to use Investment income received	121,501 23,380	(3,748) 6,454	1,429,973	105,755 6,627
Net cash provided by investing activities	144,881	2,706	1,500,766	112,382
Change in cash and cash equivalents Cash and cash equivalents at	1,623,393	(12,810)	(128,579)	16,675
beginning of year	1,113,371	33,047	1,241,950	16,372
Cash and cash equivalents at end of year	\$ 2,736,764	\$ 20,237	¢ 1 112 271	\$ 33,047
or year	7 2,730,704	Y 20,231	\$ 1,113,371	\$ 33,047

RANSOM MEMORIAL HOSPITAL STATEMENTS OF CASH FLOWS - CONTINUED Year ended December 31,

	2012		2011	
	Component			Component
	<u> Hospital</u>	unit	<u> Hospital</u>	unit
Reconciliation of operating income (loss) to net cash provided (used) by operating activities				
Operating income (loss) Adjustments to reconcile operating income (loss) to net cash provided (used) by operating activities	\$ (563,160)	\$ (19,662)	\$ (1,138,965)	\$ 13,119
Depreciation and amortization Provision for bad debts Changes in	2,370,860 4,551,104	16,298	2,237,568 4,605,000	15,728
Patient accounts receivable Inventories Prepaid expenses Accounts payable and accrued	(4,302,136) 103,214 (66,809)		(4,359,003) (2,498) (29,773)	
expenses Estimated third-party payor	321,776	(12,152)	656,222	(348)
settlements Other receivables	(250,460) (452,853)	-	100,000 85,669	(13,836)
Net cash provided (used) by operating activities	\$ 1,711,536	\$ (15,516)	\$ 2,154,220	\$ 14,663

RANSOM MEMORIAL HOSPITAL NOTES TO FINANCIAL STATEMENTS December 31, 2012 and 2011

NOTE A - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A summary of the significant accounting policies of Ransom Memorial Hospital consistently applied in the preparation of the accompanying financial statements follows.

1. Reporting entity

Ransom Memorial Hospital (Hospital) is an acute care hospital located in Ottawa, Kansas. The Hospital is owned by Franklin County, Kansas (County), and is governed by a seven-member Board of Trustees appointed by the County Commissioners. The Hospital is a component unit of the County.

The component unit discussed in Note A2 is included in the Hospital's reporting entity because of the nature and significance of its relationship with the Hospital.

2. Component unit

The financial statements include the financial data of the discretely presented component unit described below. The component unit is reported separately to emphasize that it is legally separate from the Hospital.

Ransom Memorial Hospital Charitable Association, Inc. (Association), is a not-for-profit corporation established in 1991 for the purpose of providing financial assistance to the Hospital and assisting the Hospital and others in the recruitment of physicians and other medical health care personnel to locate and practice in Franklin County, Kansas. The Association is administered by a self-perpetuating Board of Directors. One of the seven members of that Board is also a member of the Hospital's Board of Trustees.

3. Use of estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and 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 these estimates.

4. Basis of accounting

The Hospital utilizes enterprise fund accounting. Revenues and expenses are recognized on the accrual basis using the economic resources measurement focus.

5. Cash and cash equivalents

The Hospital considers all cash and invested cash, excluding amounts reported as assets limited as to use and short-term investments, to be cash equivalents.

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2012 and 2011

NOTE A - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

6. Allowance for doubtful accounts

The Hospital provides for accounts receivable that could become uncollectible in the future by establishing an allowance to reduce the carrying value of such receivables to their estimated net realizable value. The Hospital estimates this allowance based on the aging of its accounts receivable and its historical collection experience for each type of payor.

7. Inventories

Inventories are stated at cost as determined by the first-in, first-out method.

8. Assets limited as to use

Assets limited as to use include assets set aside by the Board of Trustees for replacement of capital assets or for the purchase of additional capital assets, over which the Board retains control and may, at its discretion, subsequently use for other purposes; assets restricted by contributors for specific purposes; and assets required to be retained in perpetuity by the contributors.

9. Capital assets

Capital assets (including assets recorded as capital leases) are stated at cost. Depreciation and amortization of capital assets are provided on the straight-line method over the estimated useful lives of the assets. The estimated lives used are generally in accordance with the guidelines established by the American Hospital Association.

The costs of maintenance and repairs are charged to operating expenses as incurred. The costs of significant additions, renewals, and betterments to depreciable properties are capitalized and depreciated over the remaining or extended estimated useful lives of the item or the properties. Gains and losses on disposition of capital assets are included in nonoperating gains and losses.

10. Grants and contributions

From time to time, the Hospital receives grants and contributions from individuals and private organizations. Revenues from grants and contributions are recognized when all eligibility requirements, including time requirements, are met. Grants and contributions may be restricted for specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as nonoperating revenues. Amounts restricted to capital acquisitions are reported after nonoperating revenues and expenses.

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2012 and 2011

NOTE A - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

11. Accrued health insurance claims

The Hospital is self-insured for health insurance claims of its employees (see Note K). Management estimates the net liability for reported and unreported claims incurred as of the end of each reporting period. The estimate is based on known claims and historical claims experience.

Although management believes the estimate for accrued health insurance claims is reasonable, it is possible that actual incurred claims expense may vary from the estimate.

12. Net position

Net position of the Hospital is classified in four components. "Net position invested in capital assets net of related debt" consists of capital assets net of accumulated depreciation and reduced by the current balances of any outstanding borrowings used to finance the purchase or construction of those assets. "Restricted expendable" is net position that must be used for a particular purpose, as specified by creditors, grantors, or contributors external to the Hospital. "Restricted nonexpendable" is net position equal to the principal portion of permanent endowments. "Unrestricted net position" is the remaining net position that does not meet the definition of "invested in capital assets net of related debt" or "restricted."

13. Operating revenues and expenses

The Hospital's statement of revenues, expenses, and changes in net position distinguishes between operating and nonoperating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services, the Hospital's principal activity. Nonexchange revenues, including grants and contributions received for purposes other than capital asset acquisition, are reported as nonoperating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs.

14. Charity care

The Hospital provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Because the Hospital does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue. The amount of charity care provided by the Hospital is disclosed in Note B.

15. Income taxes

The Hospital is exempt from federal income taxes pursuant to Section 115 of the Internal Revenue Code.

The Association is a not-for-profit corporation as described in Section 501(c)(3) of the Internal Revenue Code and is exempt from federal income taxes on its related income pursuant to Section 501(a) of the Code.

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2012 and 2011

NOTE A - DESCRIPTION OF REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

16. Reclassifications

Certain reclassifications and restatements have been made to the 2011 financial statements to conform with the current year presentation. The restatement had no impact on previously reported net position or the change in net position.

NOTE B - NET PATIENT SERVICE REVENUE

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established charge rates. The amounts reported on the balance sheet as estimated settlements with third-party payors consist of management's best estimate of the differences between the contractual amounts for providing covered services and the interim payments received for those services. A summary of the payment arrangements with major third-party payors follows:

Medicare - Inpatient acute care services 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. Skilled nursing services rendered to swing-bed patients are paid at prospectively determined rates per day. Physician services are paid based on a prospectively determined fee schedule. Outpatient services are paid at prospectively determined rates per occasion of service. rates vary according to a patient classification system that is based on clinical, diagnostic, and other factors. The Hospital is paid for services at a tentative rate with final settlement determined after submission of annual cost reports by the Hospital and audits or reviews thereof by the Medicare administrative contractor. The Hospital's classification of patients under the Medicare program and the appropriateness of their admission are subject to an independent review by a peer review organization. The Hospital's Medicare cost reports have been audited or reviewed by the Medicare administrative contractor through December 31, 2009.

Medicaid - Inpatient acute care services rendered 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. All other services rendered are paid at prospective rates determined on either a per diem or a fee-for-service basis.

Blue Cross and Blue Shield - All services rendered to patients who are insured by Blue Cross and Blue Shield are paid on the basis of prospectively determined rates per discharge or discounts from established charges.

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2012 and 2011

NOTE B - NET PATIENT SERVICE REVENUE - Continued

A summary of Hospital gross and net patient service revenue is as follows:

	2012	2011
Gross patient service revenue		
Inpatient	\$15,334,117	\$16,961,064
Outpatient	48,407,463	49,916,457
Physician clinics	5,196,748	4,047,004
	68,938,328	70,924,525
Third-party contractual adjustments	(35,005,719)	(37,328,667)
Medicaid DSH payments	914,485	663,926
Medicaid PAP payments	450,460	330,218
Other discounts and allowances	(1,453,011)	(1,632,415)
Charity care	(446,213)	(617,045)
Provision for bad debts	(4,551,104)	(4,605,000)
Net patient service revenue	\$28,847,226	\$27,735,542

Revenue from the Medicare and Medicaid programs accounted for approximately 37 percent and 14 percent, respectively, of the Hospital's net patient service revenue during 2012 and 2011, respectively. Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates could change by a material amount in the near term.

The Hospital maintains records to identify and monitor the level of charity care it provides. The amount of charges forgone for services and supplies furnished under its charity care policy for 2012 and 2011, was \$446,213 and \$617,045, respectively. The Hospital estimates that the cost of providing charity care, based on overall cost-to-charge ratios obtained from the Hospital's cost report, was \$184,308 and \$260,120 for 2012 and 2011, respectively.

NOTE C - ELECTRONIC HEALTH RECORD INCENTIVE PAYMENTS

The American Recovery and Reinvestment Act of 2009 (ARRA) provides for incentive payments under the Medicare and Medicaid programs for certain hospitals and physician practices that demonstrate meaningful use of certified electronic health record (EHR) technology. These provisions of ARRA are intended to promote the adoption and meaningful use of interoperable health information technology and qualified EHR technology.

The Hospital recognizes revenue for EHR incentive payments when it has reasonable assurance that it has demonstrated meaningful use of certified EHR technology for the applicable period and complied with the reporting conditions to receive the payment. The demonstration of meaningful use is based upon meeting a series of objectives and varies between hospital facilities and physician practices and between the Medicare and Medicaid programs. Additionally, meeting the objectives in order to demonstrate

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2012 and 2011

NOTE C - ELECTRONIC HEALTH RECORD INCENTIVE PAYMENTS - Continued

meaningful use becomes progressively more stringent as its implementation is phased in through stages as outlined by CMS. During the years ended December 31, 2012 and 2011, the Hospital recognized \$1,136,625 and \$1,440,709 of revenue for EHR incentive payments.

The Hospital incurs both capital expenditures and operating expenses in connection with the implementation of its EHR initiatives. The amounts and timing of these expenditures do not directly correlate with the timing of the Hospital's recognition of EHR incentive payments as revenue.

NOTE D - ALLOWANCE FOR UNCOLLECTIBLE ACCOUNTS

The Hospital's allowance for uncollectible accounts on amounts due from patients was 83 percent and 88 percent of self-pay accounts receivable as of December 31, 2012 and 2011, respectively. The Hospital's net bad debt write-offs were \$5,161,381 and \$3,916,682 for the years ended December 31, 2012 and 2011, respectively. The Hospital did not change its charity care or uninsured discount policies during the years ended December 31, 2012 or 2011. The Hospital does not maintain a material allowance for uncollectible accounts from third-party payors, nor has it incurred any significant bad debt write-offs from third-party payors.

NOTE E - ASSETS LIMITED AS TO USE

Internally designated assets are assets to be used for replacement of capital assets or for the purchase of additional capital assets. The assets may be used for other purposes by action of the Board. Internally-designated assets consist of the following:

	<u>2012</u>	2011
Invested cash Interest receivable	\$ 5,694,478 2,265	\$ 5,815,979 2,755
	\$ 5,696,743	\$ 5,818,734

Assets limited as to use, held by the Association, are carried at fair market value and consist of the following:

	2012	2011
Invested cash and money market pool Equity pool Fixed income pool	\$ 13,577 168,371 96,889	\$ 12,352 149,603 88,700
	\$ 278,837	\$ 250,655

The above amounts are invested in pooled investment accounts through the Greater Kansas City Community Foundation.

RANSOM MEMORIAL HOSPITAL NOTES TO FINANCIAL STATEMENTS - CONTINUED December 31, 2012 and 2011

NOTE F - CAPITAL ASSETS

Capital assets consist of the following:

	Balance	Transfers		Balance
	December 31, 2011	and additions	Retirements	December 31, 2012
Land	\$ 20,000	\$ -	\$ -	\$ 20,000
Land improvements Buildings	372,657 23,865,136	585 638,401		373,242
Equipment	14,217,816	993,218	1,132,388	24,503,537 14,078,646
	38,475,609	1,632,204	1,132,388	38,975,425
Less accumulated				
depreciation and				
amortization				
Land improvements	326,089	10,397		336,486
Buildings	9,322,249	1,086,048		10,408,297
Equipment	9,157,143	1,274,415	1,130,516	9,301,042
	18,805,481	2,370,860	1,130,516	20,045,825
	19,670,128	(738,656)	1,872	18,929,600
Construction in progress	•	1,500		7,292
Capital assets, net	\$19,675,920	\$ (737,156)	\$ 1,872	\$18,936,892
	Palango	Transfors		Dalamas
	Balance	Transfers		Balance
	December 31,	and	Detirements	December 31,
			<u>Retirements</u>	
Land	December 31,	and	Retirements	December 31,
Land Land improvements	December 31, 	and additions		December 31, 2011 \$ 20,000
	December 31, 2010 \$ 20,000	and additions		December 31, 2011
Land improvements	December 31, 2010 \$ 20,000 372,657	and <u>additions</u> \$ -		December 31, 2011 \$ 20,000 372,657
Land improvements Buildings	December 31, 2010 \$ 20,000 372,657 19,553,969	and <u>additions</u> \$ - 4,311,167	\$ -	December 31, 2011 \$ 20,000 372,657 23,865,136
Land improvements Buildings Equipment Less accumulated	\$ 20,000 \$ 272,657 19,553,969 13,206,405	and <u>additions</u> \$ - 4,311,167 1,853,385	\$ -	\$ 20,000 372,657 23,865,136 14,217,816
Land improvements Buildings Equipment Less accumulated depreciation and	\$ 20,000 \$ 272,657 19,553,969 13,206,405	and <u>additions</u> \$ - 4,311,167 1,853,385	\$ -	\$ 20,000 372,657 23,865,136 14,217,816
Land improvements Buildings Equipment Less accumulated depreciation and amortization	\$ 20,000 \$72,657 19,553,969 13,206,405 33,153,031	and additions \$ - 4,311,167 1,853,385 6,164,552	\$ -	\$ 20,000 372,657 23,865,136 14,217,816 38,475,609
Land improvements Buildings Equipment Less accumulated depreciation and amortization Land improvements	\$ 20,000 \$72,657 19,553,969 13,206,405 33,153,031	and additions \$ - 4,311,167 1,853,385 6,164,552	\$ -	\$ 20,000 372,657 23,865,136 14,217,816 38,475,609
Land improvements Buildings Equipment Less accumulated depreciation and amortization Land improvements Buildings	\$ 20,000 \$72,657 19,553,969 13,206,405 33,153,031 315,684 8,338,647	and additions \$ - 4,311,167 1,853,385 6,164,552	\$ - 841,974 841,974	\$ 20,000 372,657 23,865,136 14,217,816 38,475,609
Land improvements Buildings Equipment Less accumulated depreciation and amortization Land improvements	\$ 20,000 \$72,657 19,553,969 13,206,405 33,153,031	and additions \$ - 4,311,167 1,853,385 6,164,552	\$ -	\$ 20,000 372,657 23,865,136 14,217,816 38,475,609
Land improvements Buildings Equipment Less accumulated depreciation and amortization Land improvements Buildings	\$ 20,000 \$72,657 19,553,969 13,206,405 33,153,031 315,684 8,338,647	and additions \$ - 4,311,167 1,853,385 6,164,552	\$ - 841,974 841,974	\$ 20,000 372,657 23,865,136 14,217,816 38,475,609
Land improvements Buildings Equipment Less accumulated depreciation and amortization Land improvements Buildings	\$ 20,000 \$72,657 19,553,969 13,206,405 33,153,031 315,684 8,338,647 8,755,557 17,409,888 15,743,143	and additions \$ - 4,311,167 1,853,385 6,164,552 10,405 983,602 1,243,560	\$ - 841,974 841,974	\$ 20,000 372,657 23,865,136 14,217,816 38,475,609 326,089 9,322,249 9,157,143
Land improvements Buildings Equipment Less accumulated depreciation and amortization Land improvements Buildings	\$ 20,000 \$72,657 19,553,969 13,206,405 33,153,031 315,684 8,338,647 8,755,557 17,409,888	and additions \$ - 4,311,167 1,853,385 6,164,552 10,405 983,602 1,243,560 2,237,567	\$ - 841,974 841,974	\$ 20,000 372,657 23,865,136 14,217,816 38,475,609 326,089 9,322,249 9,157,143 18,805,481

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2012 and 2011

NOTE G - OPERATING LEASES

The Hospital leases equipment under operating leases with related rentals charged to operations as incurred. Total rent expense for 2012 and 2011 was approximately \$108,000 and \$70,000, respectively.

Scheduled minimum rental payments for noncancellable operating leases for the next five years are as follows:

2013	\$ 106,581
2014	106,581
2015	83,354
2016	 27,476

\$ 323,992

NOTE H - CONTINGENCY

The Hospital has entered into an agreement with a financial institution under which the Hospital transfers to the financial institution its interest in certain self-pay accounts receivable. The accounts are assumed with full recourse, and the Hospital is contingently liable for any uncollected accounts. Accounts transferred under this agreement amounted to approximately \$64,000 and \$73,000 in 2012 and 2011, respectively. Approximately \$138,000 and \$153,000 of these accounts were uncollected in 2012 and 2011, respectively.

NOTE I - RISK MANAGEMENT

The Hospital is insured for professional liability under a comprehensive hospital liability policy provided by an independent insurance carrier with limits of \$200,000 per occurrence up to an annual aggregate of \$600,000 for all claims made during the policy year. The Hospital is further covered by the Kansas Health Care Stabilization Fund for claims in excess of its comprehensive hospital liability policy up to \$800,000 pursuant to any one judgment or settlement against the Hospital for any one party, subject to an aggregate limitation for all judgments or settlements arising from all claims made in the policy year in the amount of \$2,400,000. The policy provided by the independent insurance carrier provides for umbrella liability in excess of the underlying limits set forth above in the amount of \$2,000,000 per occurrence with an aggregate amount in any policy year of \$2,000,000. All coverage is on a claims-made basis. The above policies are currently in effect through June 2013. The Hospital intends to renew this coverage on that date and is aware of no reason why such coverage would be denied at that time.

In addition to the risk disclosed elsewhere in these financial statements and notes thereto, the Hospital is exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; errors and omissions; injuries to employees; and natural disasters. The Hospital purchases commercial insurance for these risks.

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2012 and 2011

NOTE J - PENSION PLANS

Substantially all employees of the Hospital participate in the Ransom Memorial Hospital Match Plan or Physicians Match Plan (Match Plans) which are defined contribution pension plans. The payroll for employees covered by the Plans for 2012 and 2011 was approximately \$10,900,000 and \$10,600,000, respectively. The total payroll for 2012 and 2011 was \$15,971,663 and \$15,949,683, respectively. Contributions to the Plans by the Hospital are discretionary and are determined annually by the Board of Trustees of the Hospital. Contributions to the Match Plans are based upon matching employee contributions to the Match Plans up to a specific percentage of the employee's compensation. Hospital contributions to the Plans vest based upon the Plan's vesting schedule and the employee's years of service with the Hospital. Employee contributions to the Plans vest immediately. Net pension expense was \$262,981 for 2012 and \$241,870 for 2011. Contributions to the Plans are invested in self-directed investment accounts with an insurance company.

NOTE K - EMPLOYEE HEALTH INSURANCE CLAIMS

The Hospital is self-insured for health insurance claims of its employees. The Hospital has reinsured a portion of its risk for such claims. The reinsurance arrangement covers annual claims in excess of \$120,000 for each covered individual. Covered employees also provide part of the funds to pay claims through monthly contributions at predetermined rates. The Hospital has retained a third-party administrator to process and settle claims. The Hospital reimburses the agent weekly for the amount of claims paid by the agent net of any amounts recovered by reinsurance.

The following is a summary of the activity under this arrangement:

	2012	2011
Estimated employee health insurance claims payable at the beginning of the year Provision for employer's share of incurred claims and reinsurance expense for the period, net of	\$ 250,000	\$ 275,000
any reinsurance proceeds	1,555,021	1,779,658
Employee contributions Payments made for claims and	545,297	524,465
reinsurance	(2,125,318)	(2,329,123)
Estimated employee health insurance claims payable at the end of the year	\$ 225,000	\$ 250,000

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2012 and 2011

NOTE L - DEPOSITS WITH FINANCIAL INSTITUTIONS

Kansas statutes authorize the Hospital, with certain restrictions, to deposit or invest in open accounts, time deposits, certificates of deposit, repurchase agreements, the State Treasurer's municipal investment pool, and U.S. Treasury bills and notes. Also, statutes require that financial institutions pledge securities with a market value equal to total deposits, net of moneys acquired through grants, donations, bequests, and gifts, in excess of F.D.I.C. coverage at any given time, and the securities pledged be deposited with a Kansas state or national bank or trust company, the Federal Reserve Bank, the Federal Home Loan Bank, or the Kansas State Treasurer.

The carrying amount of the Hospital's deposits with financial institutions was \$8,430,422 and the bank balance was \$8,295,367 at December 31, 2012. The bank balance is categorized as follows at December 31, 2012:

Amount insured by the F.D.I.C., or collateralized with securities held by the Hospital or by its agent in the Hospital's name

\$ 3,658,031

Uncollateralized (collateralized with securities held in safekeeping under joint custody receipt by an authorized depository other than the pledging financial institution's trust department, but not in the Hospital's name)

4,637,336

\$ 8,295,367

NOTE M - CONCENTRATION OF CREDIT RISK

The Hospital is located in Ottawa, Kansas. The Hospital grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of receivables from patients and third-party payors is as follows:

	2012	2011
Medicare Medicaid Blue Cross Commercial insurance Self-pay	30% 11 11 13 35	28% 13 11 14 34
	<u>100</u> %	100%

NOTES TO FINANCIAL STATEMENTS - CONTINUED

December 31, 2012 and 2011

NOTE N - OTHER RELATED PARTY TRANSACTION

Ransom Memorial Hospital Charitable Association, Inc., is a component unit of the Hospital (see Note A2). In 2012 and 2011, the Association transferred \$40,355 and \$50,000, respectively, to the Hospital to be used for capital asset additions.

NOTE O - SUBSEQUENT EVENTS

The Hospital has evaluated all subsequent events through the date of the independent accountant's report which is the date the financial statements were available to be issued.