

FINANCIAL STATEMENTS AND REPORT OF
INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS
SOUTHWEST MEDICAL CENTER
DECEMBER 31, 2012 AND 2011

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SOUTHWEST MEDICAL CENTER
MANAGEMENT'S DISCUSSION AND ANALYSIS
Years ended December 31, 2012 and 2011

Our discussion and analysis of the financial performance of Southwest Medical Center provides a narrative overview of the Medical Center's financial activities for the years ended December 31, 2012 and 2011. Please read it in conjunction with the accompanying basic financial statements.

Financial highlights

The Medical Center's net position, or equity, increased during each of the past two years with a \$1,148,822 or 3.4 percent increase in 2012 and a \$721,128 or 2.2 percent increase in 2011.

The Medical Center reported a \$366,780 or 53.9 percent increase in operating income for 2012 and a \$253,462 or 59.3 percent increase in operating income for 2011.

The net position of Southwest Medical Center Foundation (the Foundation), a component unit of the Medical Center, decreased by \$228,861 or 4.0 percent in 2012 and increased by \$717,887 or 14.3 percent in 2011.

Using these financial statements

The Medical Center's financial statements consist of three statements - a Statement of Net Position; a Statement of Revenues, Expenses, and Changes in Net Position; and a Statement of Cash Flows. These financial statements and related notes provide information about the activities of the Medical Center, including resources held by or for the benefit of the Medical Center, and resources restricted for specific purposes by contributors, grantors, and indenture agreements.

One of the most important questions asked about the Medical Center's finances is, "Is the Medical Center, as a whole, better or worse off as a result of the year's activities?" The Statement of Net Position and the Statement of Revenues, Expenses, and Changes in Net Position report information about the Medical Center's resources and its activities in a way that helps answer this question. These statements include all restricted and unrestricted assets and all liabilities using the accrual basis of accounting. For purposes of these two statements, revenues and expenses are taken into account regardless of when cash is received or paid.

These two statements report the Medical Center's net position and changes in it. The Medical Center's net position - the difference between assets and liabilities - may be thought of as one way to measure its financial health, or financial position. Over time, increases or decreases in the Medical Center's net position are one indicator of whether its financial health is improving or deteriorating. Consideration must also be given to other nonfinancial indicators, such as changes in the Medical Center's patient base and measures of the quality of service it provides to the community, as well as local economic factors, to assess the overall health of the Medical Center.

The final required statement is the Statement of Cash Flows. The statement reports cash receipts, cash payments, and net changes in cash resulting from operations, investing, and financing activities. It provides answers to such questions as "Where did cash come from?", "What was cash used for?", and "What was the change in cash balance during the reporting period?"

SOUTHWEST MEDICAL CENTER
MANAGEMENT'S DISCUSSION AND ANALYSIS - CONTINUED
Years ended December 31, 2012 and 2011

Assets, liabilities, and net position

The Medical Center's statements of net position as of the end of each of the last three years are summarized as follows:

	<u>2012</u>	<u>2011</u>	<u>2010</u>
Assets			
Current assets	\$11,928,560	\$11,843,168	\$10,844,571
Assets limited as to use	13,381,227	16,407,132	30,966,760
Capital assets, net	30,594,713	27,080,743	11,868,063
Other assets	<u>305,935</u>	<u>324,106</u>	<u>342,415</u>
Total assets	<u>\$56,210,435</u>	<u>\$55,655,149</u>	<u>\$54,021,809</u>
Liabilities			
Long-term obligations	\$16,885,379	\$17,085,941	\$17,281,698
Current liabilities	<u>4,320,221</u>	<u>4,713,195</u>	<u>3,605,226</u>
Total liabilities	<u>\$21,205,600</u>	<u>\$21,799,136</u>	<u>\$20,886,924</u>
Net position	<u>\$35,004,835</u>	<u>\$33,856,013</u>	<u>\$33,134,885</u>

Cash and cash equivalents in the current asset category decreased by \$304,888 during 2012 and increased by \$288,388 during 2011.

Most of the Medical Center's invested cash is set aside by the Board of Trustees for replacement of capital assets or for purchase of additional capital assets. Although, at the discretion of the Board, they may subsequently be used for other purposes, these assets are reported as internally designated assets limited as to use on the statements of net position. This category of assets decreased by \$986,847 during 2012 and decreased by \$3,402,045 during 2011. Net transfers were made from operating cash to this category of assets that totaled \$1,883,985 in 2012 and \$1,800,000 in 2011. Internally designated assets decreased in 2012 and 2011 due to construction expenditures and capital equipment purchases.

In aggregate, the Medical Center's unrestricted cash and invested cash total was \$11,643,009 and \$12,934,744 as of December 31, 2012 and 2011, respectively. These represent 111 days and 127 days, respectively, of average cash expenses during each of the years then ended. These figures exceed the median values for other hospitals similar to the Medical Center.

The Medical Center's net patient accounts receivable were 54 percent of current assets as of December 31, 2012, 49 percent as of December 31, 2011, and 55 percent as of December 31, 2010. In relation to net patient service revenue, net patient accounts receivable increased 7.4 percent during 2012, decreased 1.7 percent during 2011, and increased 17.4 percent during 2010. The average number of days of net patient revenue represented by them was 58 days, 54 days, and 54 days as of December 31, 2012, 2011, and 2010, respectively. The slight decrease in patient accounts receivable that occurred in 2011 was primarily due to improved collections as a result of filled positions in the department.

SOUTHWEST MEDICAL CENTER
MANAGEMENT'S DISCUSSION AND ANALYSIS - CONTINUED
Years ended December 31, 2012 and 2011

During 2010, management of the Medical Center determined that expansion and renovation of its patient service area was necessary to meet the current and future health care delivery demands. Management also decided to construct a medical office building for physician clinics located adjacent to and connected with the Medical Center. This endeavor was mostly financed by proceeds from the bonds issued during May 2010 in the amount of \$17,670,000. The medical office building was expected to cost \$4,600,000 and was paid for with available funds of the Medical Center. No new long-term obligations were incurred during either 2012 or 2011.

At the end of 2012, the Medical Center had \$30,594,713 invested in capital assets, net of accumulated depreciation. The total value of new equipment placed in service totaled \$2,274,062 and \$2,133,029 during 2012 and 2011, respectively. Construction project expenditures were \$2,584,687 and \$11,077,981 during 2012 and 2011, respectively, for hospital facility additions and renovations, and \$434,358 and \$3,693,004 during 2012 and 2011, respectively, for a new medical office building. These assets were completed and placed into service during 2012.

The Medical Center's net position increased during each of the past three years: \$1,148,822 or 3.4 percent during 2012, \$721,128 or 2.2 percent during 2011, and \$391,548 or 1.2 percent during 2010. The percentage of total assets financed with its net position, or equity, was 62.3 percent, 60.8 percent, and 61.3 percent as of December 31, 2012, 2011, and 2010, respectively.

The Foundation's statements of net position as of the end of its last three fiscal years ended June 30 are summarized as follows:

	<u>2012</u>	<u>2011</u>	<u>2010</u>
Assets			
Current assets	\$5,049,519	\$5,216,291	\$4,496,386
Capital assets, net	400,701	466,135	470,568
Other investments	<u>69,247</u>	<u>65,902</u>	<u>63,487</u>
Total assets	<u>\$5,519,467</u>	<u>\$5,748,328</u>	<u>\$5,030,441</u>
Liabilities			
Current liabilities	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>
Net position	<u>\$5,519,467</u>	<u>\$5,748,328</u>	<u>\$5,030,441</u>

The Foundation's current assets consist primarily of investments in marketable securities. Its net position decreased \$228,861 or 4.0 percent during fiscal year 2012 and increased \$717,887 or 14.3 percent during fiscal year 2011. These changes in net position were primarily influenced by investment market conditions during those years.

SOUTHWEST MEDICAL CENTER
MANAGEMENT'S DISCUSSION AND ANALYSIS - CONTINUED
Years ended December 31, 2012 and 2011

Operating results and changes in net position

The Medical Center's operating results and changes in net position for each of the last three years are summarized as follows:

	<u>2012</u>	<u>2011</u>	<u>2010</u>
Operating revenues	\$41,450,206	\$39,801,005	\$40,591,444
Operating expenses	<u>40,402,366</u>	<u>39,119,945</u>	<u>40,163,846</u>
Operating income	1,047,840	681,060	427,598
Interest expense	(288,981)	(202,544)	(269,241)
Nonoperating revenues	148,844	(12,388)	153,191
Capital grants and contributions	<u>241,119</u>	<u>255,000</u>	<u>80,000</u>
Increase in net position	<u>\$ 1,148,822</u>	<u>\$ 721,128</u>	<u>\$ 391,548</u>

The first, and most significant, component of the overall change in the Medical Center's net position is its operating income - generally, the difference between net patient service revenue and the expenses incurred to perform those services. Operating income increased \$366,780 during 2012 and increased \$253,462 during 2011.

Gross and net patient service revenue for the past three years is analyzed as follows:

	<u>2012</u>	<u>2011</u>	<u>2010</u>
Inpatient services	\$30,926,853	\$32,104,483	\$31,181,315
Outpatient services	57,488,308	56,741,539	55,610,943
Physician services	<u>4,355,946</u>	<u>5,612,894</u>	<u>5,609,431</u>
Gross patient service revenue	92,771,107	94,458,916	92,401,689
Contractual adjustments	(44,106,178)	(48,350,024)	(46,248,010)
Provision for bad debts	(6,354,780)	(4,517,591)	(4,361,559)
Charity care	<u>(1,658,718)</u>	<u>(2,463,196)</u>	<u>(1,830,968)</u>
Net patient service revenue	<u>\$40,651,431</u>	<u>\$39,128,105</u>	<u>\$39,961,152</u>

The Medical Center raised its rates for hospital services by 5 percent on January 19, 2011, and on January 19, 2012. The actual changes in gross patient service revenue were different than expected because of changes in patient utilization.

Total inpatient days decreased by 10.3 percent and total outpatient registrations increased by 1.8 percent during 2012. Total inpatient days decreased by 7.1 percent and total outpatient registrations increased by 11.7 percent during 2011.

SOUTHWEST MEDICAL CENTER
MANAGEMENT'S DISCUSSION AND ANALYSIS - CONTINUED
Years ended December 31, 2012 and 2011

In July and August of 2011, the Family Medicine, Orthopedic, and ENT clinics opened with employed physicians. In September 2011, the independent surgeons' practice that the Medical Center contracted with closed. A part-time surgeon from that practice was contracted with in October 2011. The Medical Center will also use locum tenens surgeons while searching for permanent replacements for surgeons on the medical staff. At the end of 2011, the Medical Center was in the process of completing negotiations for an employed general surgeon.

The Medical Center has agreements with various third-party payors that provide for payments to the Medical Center at amounts different from its established charge rates. These differences are referred to as contractual adjustments. When expressed as a percentage of gross patient service revenue, the Medical Center's contractual adjustments are comparable to median values for similar hospitals.

The Medical Center provides care free of charge or at amounts less than its established rates to patients who meet certain criteria under its charity care policy. Charity care write-offs decreased 32.7 percent in 2012. Charity care write-offs increased 34.5 percent in 2011. The changes in 2012 and 2011 did not occur as a result of policy or criteria changes. The changes are consistent with health care trends experienced during periods of changing economic conditions. There is also a continuing trend in the health care industry to identify and report the value of charity care provided to patients.

Together, the provision for bad debts and charity care write-offs represented 8.6 percent, 7.4 percent, and 6.7 percent of gross patient service revenue during 2012, 2011, and 2010, respectively, a relatively stable trend.

Employee salaries and wages increased by \$45,591 or 0.3 percent during 2012 and increased by \$41,793 or 0.2 percent during 2011. These changes are functions of changes in numbers of employees and in pay rates. Average pay rates increased by 2.6 percent and 2.9 percent during 2012 and 2011, respectively. Total full-time equivalent employees decreased by 8 or 2.3 percent during 2012 after decreasing by 9 or 2.6 percent during 2011.

The cost of employee benefits was 28.9 percent of salaries and wages during 2012 as compared to 26.0 percent of salaries and wages during 2011. Employee benefit expenses increased \$501,161 during 2012 and decreased \$280,479 during 2011. The primary causes of the changes are increased costs for workers compensation and unemployment insurance during 2012 and decreased health insurance claims and decreased recruitment expense during 2011.

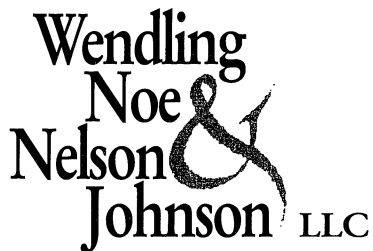
SOUTHWEST MEDICAL CENTER
MANAGEMENT'S DISCUSSION AND ANALYSIS - CONTINUED
Years ended December 31, 2012 and 2011

Supplies and other expenses increased by \$534,562 or 3.4 percent during 2012 and decreased by \$669,486 or 4.1 percent during 2011. Of the total 2011 decrease, \$422,024 occurred due to discontinuing psychiatric inpatient services and \$257,515 was due to lower physician recruitment expenses. These changes are generally consistent with changes in patient volumes experienced by the Medical Center combined with the general rate of health care inflation.

The Foundation's operating results and changes in net position for each of its last three years ended June 30 are summarized as follows:

	<u>2012</u>	<u>2011</u>	<u>2010</u>
Contributions	\$ 50	\$165,420	\$ 22,954
Investment income (loss)	(17,729)	772,267	478,298
Other income	112,919	119,465	117,935
Expenses	<u>(324,101)</u>	<u>(339,265)</u>	<u>(170,936)</u>
Change in net position	<u><u>\$ (228,861)</u></u>	<u><u>\$717,887</u></u>	<u><u>\$448,251</u></u>

Unrealized gains and losses are included in the investment income category on the Foundation's financial statements. The Foundation's investment income included net realized and unrealized losses of \$215,211 during the year ended June 30, 2012, and included net realized and unrealized gains of \$616,822 during the year ended June 30, 2011, and \$347,042 during the year ended June 30, 2010. These results followed changes in the broad market indices during those years.



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REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Board of Trustees
Southwest Medical Center

We have audited the accompanying financial statements of the business-type activity and discretely presented component unit of Southwest Medical Center (the Medical Center) as of and for the years ended December 31, 2012 and 2011, which collectively comprise the Medical Center's basic 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 our 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 Kansas Municipal Audit Guide. Those standards require that we plan and perform the audit 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 Southwest Medical Center as of December 31, 2012 and 2011, and the respective changes in financial position and cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Accounting principles generally accepted in the United States of America require that management's discussion and analysis on pages 1 through 6 be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the financial statements, and other knowledge we obtained during our audit of the financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

Our audit was conducted for the purpose of forming opinions on the basic financial statements as a whole. The supplementary information presented on pages 28 through 30 is for purposes of additional analysis and is not a required part of the basic 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 financial statements as a whole, except that no opinion is expressed as to the adequacy of insurance coverage.

Wendling Roe Nelson & Johnson LLC
Topeka, Kansas
March 25, 2013

FINANCIAL STATEMENTS

SOUTHWEST MEDICAL CENTER
STATEMENTS OF NET POSITION
December 31,

ASSETS

	2012		2011	
	Medical <u>Center</u>	Component <u>unit</u>	Medical <u>Center</u>	Component <u>unit</u>
CURRENT ASSETS				
Cash and cash equivalents	\$ 1,402,395	\$ 610,148	\$ 1,707,283	\$ 653,667
Marketable securities		4,439,371		4,562,624
Assets limited as to use	583,274		1,631,649	
Patient accounts receivable, net of allowance for uncollectible accounts of \$3,201,081 in 2012 and \$3,267,464 in 2011	6,491,131		5,819,462	
Estimated third-party payor settlements	479,565		10,445	
Other receivables	454,292		70,734	
Inventories	1,286,607		1,322,661	
Prepaid expenses	1,231,296		1,280,934	
Total current assets	11,928,560	5,049,519	11,843,168	5,216,291
ASSETS LIMITED AS TO USE				
Internally designated	10,240,614		11,227,461	
Under indenture agreements - held by trustee	3,289,044		6,424,446	
By contributors and grantors for capital acquisitions	434,843		386,874	
	13,964,501	-	18,038,781	-
Less amounts required to meet current obligations	583,274		1,631,649	
	13,381,227	-	16,407,132	-
CAPITAL ASSETS - NET	30,594,713	400,701	27,080,743	466,135
OTHER ASSETS				
Deferred financing costs, less accumulated amortization of \$47,687 in 2012 and \$29,516 in 2011	305,935		324,106	
Other investments		69,247		65,902
Total other assets	305,935	69,247	324,106	65,902
Total assets	\$56,210,435	\$ 5,519,467	\$55,655,149	\$ 5,748,328

The accompanying notes are an integral part of these statements.

LIABILITIES AND NET POSITION

	2012		2011	
	Medical Center	Component unit	Medical Center	Component unit
CURRENT LIABILITIES				
Current maturities of long-term debt	\$ 180,000	\$ -	\$ 175,000	\$ -
Accounts payable	1,900,206		1,108,094	
Construction costs payable	182,824		1,215,538	
Estimated third-party payor settlements	194,042		521,353	
Other accrued liabilities	229,201		66,574	
Accrued salaries and benefits	863,545		822,207	
Accrued compensated absences	647,787		675,367	
Accrued interest payable	302,616		304,062	
Total current liabilities	4,500,221	-	4,888,195	-
LONG-TERM DEBT, less current maturities				
	16,705,379		16,910,941	
Total liabilities	21,205,600	-	21,799,136	-
NET POSITION				
Invested in capital assets - net of related debt	14,738,743	400,701	13,118,890	466,135
Restricted				
For debt service	1,544,425		1,520,967	
Expendable for capital acquisitions	1,273,164		1,274,834	
For specific operating activities		342,796		340,462
Nonexpendable permanent endowments		510,333		508,703
Unrestricted	17,448,503	4,265,637	17,941,322	4,433,028
Total net position	35,004,835	5,519,467	33,856,013	5,748,328
Total liabilities and net position	\$56,210,435	\$ 5,519,467	\$55,655,149	\$ 5,748,328

SOUTHWEST MEDICAL CENTER
STATEMENTS OF REVENUES, EXPENSES,
AND CHANGES IN NET POSITION
Year ended December 31,

	2012		2011	
	Medical Center	Component unit	Medical Center	Component unit
Operating revenues				
Net patient service revenue	\$40,651,431	\$ -	\$39,128,105	\$ -
Electronic health record incentives	431,443			
Other	367,332		672,900	
Total operating revenues	41,450,206	-	39,801,005	-
Operating expenses				
Salaries and wages	16,818,162		16,772,571	
Employee benefits	4,860,813		4,359,652	
Supplies and other	16,356,225	319,701	15,821,663	334,832
Depreciation and amortization	2,367,166	4,400	2,166,059	4,433
Total operating expenses	40,402,366	324,101	39,119,945	339,265
Operating income (loss)	1,047,840	(324,101)	681,060	(339,265)
Nonoperating revenues (expenses)				
Investment income (loss)	109,653	(17,729)	169,078	772,267
Interest expense	(288,981)		(202,544)	
Noncapital grants and contributions	39,191	50	30,715	165,420
Loss on disposal of capital assets			(212,181)	
Other		112,919		119,465
Total nonoperating revenues (expenses)	(140,137)	95,240	(214,932)	1,057,152
Excess of revenues over expenses before capital grants and contributions	907,703	(228,861)	466,128	717,887
Capital grants and contributions	241,119		255,000	
Change in net position	1,148,822	(228,861)	721,128	717,887
Net position at beginning of year	33,856,013	5,748,328	33,134,885	5,030,441
Net position at end of year	\$35,004,835	\$ 5,519,467	\$33,856,013	\$ 5,748,328

The accompanying notes are an integral part of these statements.

SOUTHWEST MEDICAL CENTER
STATEMENTS OF CASH FLOWS
Year ended December 31,

	2012		2011	
	<u>Medical Center</u>	<u>Component unit</u>	<u>Medical Center</u>	<u>Component unit</u>
Cash flows from operating activities				
Receipts from and on behalf of patients	\$39,183,331	\$ -	\$39,661,209	\$ -
Payments to or on behalf of employees	(21,711,297)		(20,888,245)	
Payments for supplies and services	(15,269,714)	(258,667)	(16,179,409)	(334,832)
Other receipts and payments	<u>415,217</u>		<u>692,532</u>	
Net cash provided (used) by operating activities	<u>2,617,537</u>	<u>(258,667)</u>	<u>3,286,087</u>	<u>(334,832)</u>
Cash flows from noncapital financing activities				
Noncapital grants and contributions	<u>39,191</u>	<u>50</u>	<u>30,715</u>	<u>165,420</u>
Cash flows from capital and related financing activities				
Acquisition of capital assets	(6,414,785)		(16,369,917)	
Principal payments on long-term debt	(175,000)		(170,000)	
Interest paid	(736,150)		(739,550)	
Capital grants and contributions	180,085		255,000	
Proceeds from sale of equipment			33,583	
Insurance proceeds			<u>72,069</u>	
Net cash used by capital and related financing activities	<u>(7,145,850)</u>	<u>-</u>	<u>(16,918,815)</u>	<u>-</u>
Cash flows from investing activities				
Decrease in assets limited as to use	4,068,037		13,722,517	
Increase in investments		(91,956)		(122,472)
Other income received		109,572		160,543
Investment income received	<u>116,197</u>	<u>197,482</u>	<u>167,884</u>	<u>117,051</u>
Net cash provided by investing activities	<u>4,184,234</u>	<u>215,098</u>	<u>13,890,401</u>	<u>155,122</u>
Net change in cash and cash equivalents	(304,888)	(43,519)	288,388	(14,290)
Cash and cash equivalents at beginning of year	<u>1,707,283</u>	<u>653,667</u>	<u>1,418,895</u>	<u>667,957</u>
Cash and cash equivalents at end of year	<u>\$ 1,402,395</u>	<u>\$ 610,148</u>	<u>\$ 1,707,283</u>	<u>\$ 653,667</u>

The accompanying notes are an integral part of these statements.

SOUTHWEST MEDICAL CENTER
STATEMENTS OF CASH FLOWS - CONTINUED
Year ended December 31,

	2012		2011	
	<u>Medical Center</u>	<u>Component unit</u>	<u>Medical Center</u>	<u>Component unit</u>
Reconciliation of operating income (loss) to net cash provided (used) by operating activities				
Operating income (loss)	\$ 1,047,840	\$ (324,101)	\$ 681,060	\$ (339,265)
Adjustments to reconcile operating income (loss) to net cash provided (used) by operating activities				
Depreciation and amortization	2,367,166	4,400	2,166,059	4,433
Donation of land to the Medical Center		61,034		
Provision for bad debts	6,354,780		4,517,591	
Changes in				
Accounts receivable	(7,026,449)		(4,418,944)	
Other receivables	(383,558)		19,632	
Inventories and prepaid expenses	85,692		(179,483)	
Accounts payable and accrued expenses	968,497		65,715	
Estimated third-party payor settlements	<u>(796,431)</u>		<u>434,457</u>	
Net cash provided (used) by operating activities	<u>\$ 2,617,537</u>	<u>\$ (258,667)</u>	<u>\$ 3,286,087</u>	<u>\$ (334,832)</u>

The accompanying notes are an integral part of these statements.

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS
December 31, 2012 and 2011

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

1. Reporting entity

Southwest Medical Center (the Medical Center) is located in Liberal, Kansas, and is owned by Seward County, Kansas (the County), and governed by a seven-member Board of Trustees appointed by the Board of County Commissioners of the County. The Medical Center is a 101-bed, not-for-profit general hospital. The Medical Center can sue and be sued, and can buy, sell, or lease real property. Bond issuances must be approved by the County. The Medical Center is a component unit of the County.

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

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 Medical Center.

Southwest Medical Center Foundation, Inc. (the Foundation), is a not-for-profit corporation formed in August of 1980 to receive, invest, and disburse funds received for the benefit, support, and maintenance of the Medical Center. The Foundation is administered by a Board of Trustees. Three of the seven members of that Board are also members of the Medical Center's Board of Trustees.

Financial data of the Foundation are presented as of June 30, 2012 and 2011, and for the years then ended.

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 Medical Center uses enterprise fund accounting. Revenues and expenses are recognized on the accrual basis using the economic resources measurement focus.

5. Cash and cash equivalents

The Medical Center considers all cash and invested cash to be cash equivalents, excluding any assets limited as to use and items classified as investments by the Foundation.

SOUTHWEST MEDICAL CENTER
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 uncollectible accounts

The Medical Center 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 Medical Center 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 the lower of cost or market with cost determined on the first-in, first-out method.

8. Investments and investment income

Investments in debt and equity securities are reported at fair value. Interest, dividends, and gains and losses, both realized and unrealized, on investments in debt and equity securities are included in nonoperating revenue when earned.

9. 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 purchase of additional capital assets, over which the Board retains control and may at its discretion subsequently use for other purposes; assets held by a trustee under indenture agreements; and assets restricted by contributors and grantors for capital acquisitions. Assets limited as to use that are required for obligations classified as current liabilities are reported in current assets.

10. 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 revenues and expenses.

11. Costs of borrowing

Interest costs (including amortization of deferred financing costs and bond premium) incurred on borrowed funds during the period of construction of capital assets are capitalized as a component of the cost of acquiring those assets. Costs incurred in connection with the issuance of long-term debt (including original issue premiums and discounts) are amortized using the interest method over the term of the related debt.

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2012 and 2011

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

12. Grants and contributions

From time to time, the Medical Center 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.

13. Estimated health insurance claims payable

The Medical Center is self-insured for health insurance claims of its employees. Management estimates the net liability for reported and unreported claims incurred as of the end of each reporting period. These estimates are based on known claims and historical claims experience.

Management believes that estimates for health insurance claims payable are reasonable. However, it is possible that actual incurred claims expense may vary significantly from the estimate included in the accompanying financial statements.

14. Net position

The net position of the Medical Center is classified into four components. "Net position invested in capital assets net of related debt" consists of capital assets net of accumulated depreciation reduced by the balances of any outstanding borrowings used to finance the purchase or construction of those assets. "Restricted expendable net position" is the noncapital net position that must be used for a particular purpose, as specified by creditors, grantors, or contributors external to the Medical Center, including amounts deposited with trustees as required by indenture agreements. "Restricted nonexpendable net position" equals the principal portion of permanent endowments. "Unrestricted net position" is the remaining net position that does not meet the definitions of the other three components of net position.

15. Operating revenues and expenses

The Medical Center'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, which is the Medical Center's principal activity. Nonexchange revenues, including noncapital grants and contributions, are reported as nonoperating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs.

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2012 and 2011

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

16. Net patient service revenue

Net patient service revenue is reported at established charges with deductions for discounts, charity care, contractual adjustments, and provision for bad debts, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

17. Charity care

The Medical Center 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 Medical Center does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue.

18. Income taxes

The Medical Center is exempt from federal income taxes pursuant to Sections 115 and 501(a) of the Internal Revenue Code. Management is not aware of any uncertainties in income tax positions. Tax years ending on and before December 31, 2008, are not subject to examination by taxing authorities.

The Foundation 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. Management is not aware of any uncertainties in income tax positions. Tax years ending on and before December 31, 2008, are not subject to examination by taxing authorities.

19. Subsequent events

The Medical Center has evaluated subsequent events through March 25, 2013, which is the date the financial statements were available to be issued.

NOTE B - REIMBURSEMENT PROGRAMS

The Medical Center has agreements with third-party payors that provide for payments to the Medical Center at amounts different from its established charge rates. The amounts reported on the balance sheets as estimated third-party payor settlements consist of the estimated 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 rendered to Medicare program beneficiaries are paid at prospectively determined rates per discharge. Inpatient skilled nursing services are paid at prospectively determined per diem rates. Outpatient services are paid at prospectively determined rates per occasion of service. Physician services rendered to Medicare beneficiaries are paid based on a prospectively determined fee schedule.

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2012 and 2011

NOTE B - REIMBURSEMENT PROGRAMS - Continued

Prospectively determined rates vary according to patient classification systems that are based on clinical, diagnostic, and other factors. The Medical Center is paid for cost reimbursable and other items at tentative rates with final settlement determined after submission of annual cost reports by the Medical Center and audits or reviews thereof by the Medicare administrative contractor. The Medical Center'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 Medical Center's Medicare cost reports have been audited or reviewed by the Medicare administrative contractor through December 31, 2009.

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. All other services rendered to Medicaid beneficiaries 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-Blue Shield are paid on the basis of prospectively determined rates per discharge or discounts from established charges.

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

A summary of gross and net patient service revenue follows:

	<u>2012</u>	<u>2011</u>
Gross patient service revenue	\$ 92,771,107	\$ 94,458,916
Contractual adjustments	(44,106,178)	(48,350,024)
Provision for bad debts	(6,354,780)	(4,517,591)
Charity care	<u>(1,658,718)</u>	<u>(2,463,196)</u>
Net patient service revenue	<u>\$ 40,651,431</u>	<u>\$ 39,128,105</u>

Revenue from the Medicare and Medicaid programs accounted for approximately 21 percent and 14 percent, respectively, of the Medical Center's net patient service revenue during 2012, and 23 percent and 11 percent, respectively, of the Medical Center's net patient service revenue during 2011. 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 will change by a material amount in the near term.

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2012 and 2011

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 Medical Center 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 meaningful use becomes progressively more stringent as its implementation is phased in through stages as outlined by CMS. During the year ended December 31, 2012, the Medical Center recognized \$431,443 of revenue for EHR incentive payments.

The Medical Center 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 Medical Center's recognition of EHR incentive payments as revenue.

NOTE D - DEPOSITS WITH FINANCIAL INSTITUTIONS

Kansas statutes authorize the Medical Center, with certain restrictions, to deposit or invest in open accounts, time deposits, certificates of deposit, repurchase agreements, U.S. Treasury Bills and Notes, and the State Treasurer's investment pool. Kansas statutes also require that collateral be pledged for bank deposits with a fair market value equal to 100 percent of the uninsured amounts and must be assigned for the benefit of the Medical Center.

At December 31, 2012, the carrying amount of the Medical Center's bank deposits, including certificates of deposit, was \$12,071,168 and the bank balances were \$12,402,216. Of the bank balances, \$500,000 was covered by federal depository insurance and \$11,902,216 was covered by collateral held by a third-party bank, but not registered in the Medical Center's name.

The Medical Center's bank deposits are included in the financial statements under the following categories:

Cash and cash equivalents	\$ 1,399,321
Assets limited as to use	
Internally designated	10,237,004
By contributors and grantors	
for capital acquisitions	<u>434,843</u>
Total bank deposits	<u>\$ 12,071,168</u>

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2012 and 2011

NOTE E - INVESTMENTS

The Foundation's investments are stated at fair value. The composition of its investments is as follows:

	<u>2012</u>	<u>2011</u>
Equity securities	\$ 4,181,205	\$ 4,127,920
Fixed income securities	<u>258,166</u>	<u>434,704</u>
	<u>\$ 4,439,371</u>	<u>\$ 4,562,624</u>

NOTE F - ASSETS LIMITED AS TO USE

The composition of assets limited as to use is as follows:

	<u>2012</u>	<u>2011</u>
Internally designated		
Cash	\$ 2,737,004	\$ 1,217,608
Certificates of deposit	7,500,000	10,000,000
Accrued interest receivable	<u>3,610</u>	<u>9,853</u>
	<u>\$ 10,240,614</u>	<u>\$ 11,227,461</u>
Under indenture agreements - held by trustee		
U.S. Treasury obligations	\$ 2,280,143	\$ 5,415,545
State and local government obligations	992,501	992,501
Accrued interest receivable	<u>16,400</u>	<u>16,400</u>
	<u>\$ 3,289,044</u>	<u>\$ 6,424,446</u>
By contributors and grantors for capital acquisitions		
Cash	<u>\$ 434,843</u>	<u>\$ 386,874</u>

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2012 and 2011

NOTE G - CAPITAL ASSETS

Capital asset additions, retirements, and balances for the Medical Center are as follows:

	2012			
	<u>Beginning balance</u>	<u>Transfers and additions</u>	<u>Retirements</u>	<u>Ending balance</u>
Land	\$ 43,012	\$ 61,034	\$ -	\$ 104,046
Land improvements	903,176	1,262,568		2,165,744
Buildings and fixed equipment	24,167,288	17,456,038		41,623,326
Major movable equipment	30,704,761	2,274,062		32,978,823
Totals at historical cost	<u>55,818,237</u>	<u>21,053,702</u>	<u>-</u>	<u>76,871,939</u>
Less accumulated depreciation and amortization				
Land improvements	829,482	53,715		883,197
Buildings and fixed equipment	20,262,833	785,009		21,047,842
Major movable equipment	25,485,891	1,528,442		27,014,333
	<u>46,578,206</u>	<u>2,367,166</u>	<u>-</u>	<u>48,945,372</u>
Construction in progress	9,240,031 <u>17,840,712</u>	18,686,536 <u>(15,172,566)</u>	-	27,926,567 <u>2,668,146</u>
Capital assets, net	<u>\$27,080,743</u>	<u>\$ 3,513,970</u>	<u>\$ -</u>	<u>\$30,594,713</u>

	2011			
	<u>Beginning balance</u>	<u>Transfers and additions</u>	<u>Retirements</u>	<u>Ending balance</u>
Land	\$ 43,012	\$ -	\$ -	\$ 43,012
Land improvements	903,176			903,176
Buildings and fixed equipment	23,992,860	174,428		24,167,288
Major movable equipment	28,809,112	1,958,601	62,952	30,704,761
Totals at historical cost	<u>53,748,160</u>	<u>2,133,029</u>	<u>62,952</u>	<u>55,818,237</u>
Less accumulated depreciation and amortization				
Land improvements	816,617	12,865		829,482
Buildings and fixed equipment	19,614,475	648,358		20,262,833
Major movable equipment	24,010,424	1,504,836	29,369	25,485,891
	<u>44,441,516</u>	<u>2,166,059</u>	<u>29,369</u>	<u>46,578,206</u>
Construction in progress	9,306,644 <u>2,561,419</u>	(33,030) <u>15,563,543</u>	33,583 <u>284,250</u>	9,240,031 <u>17,840,712</u>
Capital assets, net	<u>\$11,868,063</u>	<u>\$15,530,513</u>	<u>\$ 317,833</u>	<u>\$27,080,743</u>

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2012 and 2011

NOTE G - CAPITAL ASSETS - Continued

Construction in progress at December 31, 2012, consisted mainly of costs incurred for various equipment and software upgrades. At December 31, 2011, it consisted primarily of costs incurred for renovations and additions to the Medical Center's facilities.

Capital asset additions, retirements, and balances for the Foundation are as follows:

	2012			
	<u>Beginning balance</u>	<u>Transfers and additions</u>	<u>Retirements</u>	<u>Ending balance</u>
Land	\$ 435,560	\$ -	\$ (61,034)	\$ 374,526
Land improvements	96,231			96,231
Major movable equipment	<u>2,079</u>			<u>2,079</u>
Totals at historical cost	533,870	-	(61,034)	472,836
Less accumulated depreciation and amortization	<u>67,735</u>	<u>4,400</u>		<u>72,135</u>
Capital assets, net	<u>\$ 466,135</u>	<u>\$ (4,400)</u>	<u>\$ (61,034)</u>	<u>\$ 400,701</u>

	2011			
	<u>Beginning balance</u>	<u>Transfers and additions</u>	<u>Retirements</u>	<u>Ending balance</u>
Land	\$ 435,560	\$ -	\$ -	\$ 435,560
Land improvements	96,231			96,231
Major movable equipment	<u>2,079</u>			<u>2,079</u>
Totals at historical cost	533,870	-	-	533,870
Less accumulated depreciation and amortization	<u>63,302</u>	<u>4,433</u>		<u>67,735</u>
Capital assets, net	<u>\$ 470,568</u>	<u>\$ (4,433)</u>	<u>\$ -</u>	<u>\$ 466,135</u>

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2012 and 2011

NOTE H - LONG-TERM DEBT

Long-term debt consists of the following:

	<u>2012</u>	<u>2011</u>
2.0% to 5.0% General Obligation Hospital Refunding and Improvement Bonds, Series 2010-A; issued on May 27, 2010, in the original amount of \$17,670,000, due serially through August 1, 2040	\$ 16,455,000	\$ 16,630,000
Net unamortized premium	<u>430,379</u>	<u>455,941</u>
	16,885,379	17,085,941
Less current portion	<u>180,000</u>	<u>175,000</u>
	<u>\$ 16,705,379</u>	<u>\$ 16,910,941</u>

On May 27, 2010, the County issued \$17,670,000 in General Obligation Hospital Refunding and Improvement Bonds, Series 2010-A, (the 2010-A bonds) on behalf of the Medical Center pursuant to a bond trust indenture dated May 1, 2010. The proceeds of the bonds were used, together with other available funds of the Medical Center, for the purpose of providing funds to (1) expand and renovate the Medical Center's existing facilities, (2) pay for the costs of certain items of equipment, (3) fund a debt service reserve fund, (4) pay certain costs related to issuance of the bonds, and (5) make the payment as scheduled on August 1, 2010, for principal and interest due then on the 2001-A bonds.

On November 1, 2010, the County engaged in a current refunding of the 2001-A bonds then outstanding by making an irrevocable deposit with a trustee of \$3,119,280 of available funds of the Medical Center. Those funds were used by the trustee to purchase direct obligations of the United States of America that would mature and pay interest in amounts and at times that provided for payment of principal and interest on the 2001-A bonds through August 1, 2011, and to redeem and pay the 2001-A bonds remaining outstanding on that date at a redemption price of 100 percent.

The indenture agreements for the bonds require the Medical Center to transfer to a trustee, on a monthly basis, specified amounts which, when combined with interest earned on the respective funds held by the trustee, will provide sufficient funds to pay the bond principal and interest on the appropriate due dates. Such amounts were maintained and are included with assets limited as to use in the financial statements. The indenture agreements also include certain restrictive covenants relating to the acquisition and disposition of property, incurrence of additional indebtedness, and level of fees and rates charged.

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2012 and 2011

NOTE H - LONG-TERM DEBT - Continued

Scheduled annual debt service requirements on long-term debt are as follows:

	<u>Principal</u>	<u>Interest</u>	<u>Total</u>
2013	\$ 180,000	\$ 732,650	\$ 912,650
2014	355,000	729,050	1,084,050
2015	360,000	721,062	1,081,062
2016	370,000	712,062	1,082,062
2017	380,000	700,963	1,080,963
2018 - 2022	2,110,000	3,304,473	5,414,473
2023 - 2027	2,515,000	2,896,130	5,411,130
2028 - 2032	3,180,000	2,243,750	5,423,750
2033 - 2037	4,055,000	1,365,250	5,420,250
2038 - 2040	<u>2,950,000</u>	<u>299,750</u>	<u>3,249,750</u>
	<u>\$ 16,455,000</u>	<u>\$ 13,705,140</u>	<u>\$ 30,160,140</u>

The following is a summary of changes in long-term debt:

Principal outstanding at January 1, 2011	\$ 16,800,000
Principal payments	<u>(170,000)</u>
Principal outstanding at January 1, 2012	16,630,000
Principal payments	<u>(175,000)</u>
Principal outstanding at December 31, 2012	<u>\$ 16,455,000</u>

Total interest costs are summarized as follows:

	<u>2012</u>	<u>2011</u>
Total interest incurred	\$ 734,704	\$ 738,146
Amortization of deferred financing costs and bond premium	<u>(7,391)</u>	<u>(7,448)</u>
	727,313	730,698
Less interest earned on borrowed funds offset against capitalized interest costs	(301)	(1,284)
Net capitalized interest costs	<u>(438,031)</u>	<u>(526,870)</u>
Interest expense	<u>\$ 288,981</u>	<u>\$ 202,544</u>

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2012 and 2011

NOTE I - DEFINED BENEFIT PENSION PLAN

The Medical Center participates in the Kansas Public Employees Retirement System (KPERS), a cost-sharing multiple-employer defined benefit pension plan as provided by K.S.A. 74-4901, et. seq. Substantially all employees of the Medical Center are eligible to participate in KPERS following the completion of one year of service. KPERS provides retirement benefits, life insurance, disability income benefits, and death benefits. Kansas law establishes and amends benefit provisions. KPERS issues a publicly available financial report that includes financial statements and required supplementary information. That report may be obtained by writing to KPERS (611 S. Kansas Avenue, Topeka, Kansas 66603-3803) or by calling 1-888-275-5737.

K.S.A. 74-4919 establishes the KPERS member-employee contribution rate at 4 percent of covered salary for employees hired prior to July 1, 2009, and 6 percent of covered salary for employees hired on or after July 1, 2009. The employer collects and remits member-employee contributions according to the provisions of Section 414(h) of the Internal Revenue Code. State law provides that the employer contribution rate be determined annually based on the results of an annual actuarial valuation.

KPERS is funded on an actuarial reserve basis. State law sets a limitation on annual increases in the contribution rates for KPERS employers. The employer rates established by statute for calendar years 2012 and 2011 were 8.09 percent and 7.49 percent, respectively. The Medical Center's employer contributions to KPERS for the years ended December 31, 2012 and 2011, were \$1,233,305 and \$1,175,435, respectively, equal to the statutory required contributions for each year.

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2012 and 2011

NOTE J - EMPLOYEE HEALTH INSURANCE

The Medical Center is self-insured for health insurance claims of its employees. The Medical Center has reinsured a portion of its risk for such claims. The reinsurance arrangement covers annual claims in excess of \$75,000 for each covered individual. The reinsurance arrangement also covers aggregate annual claims in excess of an amount determined in relation to the number of individuals participating in the self-insured health benefits plan during the year. Covered employees also provide part of the funds to pay claims through monthly contributions at predetermined rates. Contributions by the Medical Center and participating employees are remitted to the Southwest Medical Center Employee Health Plan Trust. The Trust has retained an insurance company as its agent to process and settle claims. The Trust reimburses the agent weekly for the amount of claims paid by the agent net of any amounts covered by reinsurance. The following is a summary of the activity under this arrangement:

	<u>2012</u>	<u>2011</u>
Estimated net health insurance claims payable at beginning of year	\$ 237,641	\$ 315,082
Provision for Medical Center's share of incurred claims and related expenses for the year, net of any reinsurance proceeds	1,675,958	1,663,964
Employee contributions	709,938	677,304
Payments made for claims and related expenses	<u>(2,368,775)</u>	<u>(2,418,709)</u>
Estimated net health insurance claims payable at end of year	254,762	237,641
Trust assets available for payment of claims and related expenses	<u>1,119,924</u>	<u>1,053,583</u>
Net estimated prepaid expense for health insurance claims at end of year	<u>\$ (865,162)</u>	<u>\$ (815,942)</u>

SOUTHWEST MEDICAL CENTER
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2012 and 2011

NOTE K - CONCENTRATION OF CREDIT RISK

The Medical Center 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 at December 31, 2012 and 2011, is as follows:

	<u>2012</u>	<u>2011</u>
Medicare	18%	25%
Medicaid	16	13
Blue Cross	13	9
Other third-party payors	20	24
Self-pay	<u>33</u>	<u>29</u>
	<u>100%</u>	<u>100%</u>

NOTE L - RELATED PARTY TRANSACTIONS

During 2012 and 2011, the Medical Center received \$175,000 and \$255,000, respectively, from the Foundation for the purchase of property and equipment. Additionally, in 2012 the Medical Center received a donation of seven acres of land adjacent to the Medical Center from the Foundation. This land was recorded by the Medical Center at the Foundation's historical cost (\$61,034).

NOTE M - RISK MANAGEMENT

For the years ended December 31, 2012 and 2011, the Medical Center was 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 Medical Center 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 Medical Center 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 coverage 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 November 21, 2013. The Medical Center 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 risks disclosed elsewhere in these financial statements and notes thereto, the Medical Center 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 Medical Center purchases commercial insurance for these risks. Settled claims have not exceeded this commercial coverage in any of the past three years.

SUPPLEMENTARY INFORMATION

SOUTHWEST MEDICAL CENTER
BALANCE IN DEPOSITORY COMPARED WITH DEPOSITORY SECURITY
December 31, 2012

	<u>Bank balances</u>	<u>F.D.I.C. coverage</u>	<u>Balance subject to pledging of securities</u>	<u>Market value of securities pledged</u>	<u>Market value of securities pledged in excess of (less than) depository requirements</u>
First National Bank	\$ 6,402,216	\$ 250,000	\$ 6,152,216	\$ 7,050,766	\$ 898,550
Community Bank	6,000,000	250,000	5,750,000	5,881,436	131,436

SOUTHWEST MEDICAL CENTER
SCHEDULE OF REVENUES AND EXPENSES
WITH BUDGET COMPARISON
Year ended December 31, 2012

	<u>Actual</u>	<u>Budget</u>	<u>Over (under)</u>
Net patient service revenue	\$ 40,651,431	\$ 40,158,000	\$ 493,431
Other	<u>798,775</u>	<u>720,000</u>	<u>78,775</u>
Total operating revenues	41,450,206	40,878,000	572,206
Total operating expenses	<u>40,402,366</u>	<u>40,299,000</u>	<u>103,366</u>
Operating income	1,047,840	579,000	468,840
Nonoperating revenues (expenses)	<u>(140,137)</u>	<u>(49,000)</u>	<u>(91,137)</u>
Excess of revenues over expenses before capital grants and contributions	<u>\$ 907,703</u>	<u>\$ 530,000</u>	<u>\$ 377,703</u>

SOUTHWEST MEDICAL CENTER
SUMMARY OF INSURANCE COVERAGE

December 31, 2012

<u>Insurer</u>	<u>Type of coverage</u>	<u>Coverage amount</u>	<u>Term</u>
KaMMCO Insurance Company	Hospital professional liability Other liability Personal injury/property	HPL \$200,000/\$600,000 PL \$1,000,000/\$3,000,000 PIP \$1,000,000/\$1,000,000	November 21, 2012 to November 21, 2013
Kansas Health Care Provider Insurance Availability Act	Excess hospital professional liability	\$800,000/\$2,400,000	November 21, 2012 to November 21, 2013
KaMMCO Insurance Company	Umbrella liability	\$2,000,000/\$2,000,000	November 21, 2012 to November 21, 2013
Darwin Insurance Co.	Directors, Officers, and Trustees liability	\$2,000,000/\$2,000,000	November 21, 2012 to November 21, 2013
KaMMCO Insurance Company	Limited pollution liability	\$50,000/\$50,000	November 21, 2012 to November 21, 2013
Travelers Insurance Company	Property	Real - \$48,769,615 Personal - \$25,410,011 Business interruption - \$37,718,750	June 30, 2012 to June 30, 2013
Travelers Insurance Company	Auto liability and physical damage	\$1,000,000/\$1,000,000	June 30, 2012 to June 30, 2013
Travelers Insurance Company	Commercial crime	Blanket employee dishonesty and forgery/alteration - \$100,000 Excess employee dishonesty - \$250,000 Theft, burglary - \$10,000	June 30, 2012 to June 30, 2013
KHA Workers' Compensation Fund, Inc.	Workers' compensation and employers liability (Kansas)	Statutory: Bodily injury by accident - \$500,000 each accident Bodily injury by disease - \$500,000 policy limit Bodily injury by disease - \$500,000 each employee	January 1, 2012 to January 1, 2013