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STATE BOARD OF ACCOUNTS  
302 WEST WASHINGTON STREET  
ROOM E418  
INDIANAPOLIS, INDIANA 46204-2765

Telephone: (317) 232-2513  
Fax: (317) 232-4711  
Web Site: [www.in.gov/sboa](http://www.in.gov/sboa)

May 24, 2019

Board of Trustees  
Hendricks Regional Health  
P.O. Box 409  
Danville, IN 46122-0409

We have reviewed the audit report of Hendricks Regional Health which was opined upon by Blue & Co., LLC, Independent Public Accountants, for the period January 1, 2018 to December 31, 2018. Per the *Report of Independent Auditors*, the financial statements included in the report present fairly the financial condition of the Hendricks Regional Health as of December 31, 2018, and the results of its operations for the period then ended, on the basis of accounting described in the report.

In our opinion, Blue & Co., LLC prepared the audit report in accordance with the guidelines established by the State Board of Accounts.

The audit report is filed with this letter in our office as a matter of public record.

A handwritten signature in blue ink that reads "Paul D. Joyce".

Paul D. Joyce, CPA  
State Examiner



**Hendricks**  
Regional Health

**CONSOLIDATED FINANCIAL STATEMENTS**  
**AND**  
**REQUIRED SUPPLEMENTARY INFORMATION**  
**DECEMBER 31, 2018 AND 2017**

CPAs / ADVISORS



**HENDRICKS REGIONAL HEALTH**

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DECEMBER 31, 2018 AND 2017

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Blue & Co., LLC / 500 N. Meridian Street, Suite 200 / Indianapolis, IN 46204  
main 317.633.4705 fax 317.633.4889 email blue@blueandco.com

## REPORT OF INDEPENDENT AUDITORS

Board of Trustees  
Hendricks Regional Health  
Danville, Indiana

We have audited the accompanying consolidated financial statements of Hendricks Regional Health (Hendricks), a component unit of Hendricks County, as of and for the years then ended December 31, 2018 and 2017 and the related notes to the consolidated financial statements, which collectively comprise Hendricks' basic consolidated financial statements as listed in the accompanying table of contents.

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

Management is responsible for the preparation and fair presentation of these consolidated 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 consolidated financial statements that are free from material misstatement, whether due to fraud or error.

### Auditor's Responsibility

Our responsibility is to express an opinion on these consolidated 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 *Uniform Compliance Guidelines for Audits of Hospitals and State and Local Governments by Authorized Independent Public Accountants*, issued by the Indiana State Board of Accounts. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the consolidated financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the consolidated financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the consolidated financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to Hendricks' preparation and fair presentation of the consolidated 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 Hendricks' 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 consolidated financial statements.

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

Board of Trustees  
Hendricks Regional Health  
Danville, Indiana

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of Hendricks as of December 31, 2018 and 2017, and the results of its operations, changes in its net position and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Required Supplementary Information

Accounting principles generally accepted in the United States of America require that Management's Discussion and Analysis, Schedule of Changes in Net Pension Liability and Related Ratios, and the Schedule of Contributions be presented to supplement the basic consolidated financial statements. Such information, although not a part of the basic consolidated financial statements, is required by the Governmental Accounting Standards Board who considers it to be an essential part of financial reporting for placing the basic consolidated financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic consolidated financial statements, and other knowledge we obtained during our audits of the basic consolidated 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.

**Blue & Co., LLC**

Indianapolis, Indiana  
April 22, 2019

**REQUIRED SUPPLEMENTARY INFORMATION**

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# HENDRICKS REGIONAL HEALTH

## MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2018 AND 2017

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This section of Hendricks Regional Health's (Hendricks) annual consolidated financial statements presents background information and management's discussion and analysis (MD&A) of Hendricks' consolidated financial performance during the year ended December 31, 2018. This MD&A does include a discussion and analysis of the activities and results of the Blended Component Units, Hendricks Regional Health Foundation, Inc., Hendricks Ambulatory Management Company, LLC., HRH Health Services Corporation and HRH Real Estate Holding Company, Inc. and should be read in conjunction with Hendricks' consolidated financial statements that follow this MD&A.

### Financial Highlights

- Hendricks' net position decreased approximately \$25,301,000 or 5.7% in 2018.
- Hendricks reported an operating loss of approximately \$11,003,000 for 2018, representing a decrease of \$28,866,000 in comparison to the 2017 results.
- Hendricks continued its expansion of facilities and equipment in 2018 by adding approximately \$43,412,000 in gross property and equipment. Hendricks disposed of capital assets with a net book value of \$386,000 during 2018. These items combined with depreciation expense of \$25,362,000 resulted in net capital assets increasing \$17,962,000 from the prior year.
- Hendricks' assets whose use is limited decreased approximately \$34,155,000 as a result of funding an Electronic Medical Record conversion with existing funds combined with unfavorable operations and investment returns.
- During 2018 and 2017, Hendricks recognized approximately \$296,133,000 and \$269,237,000, respectively, of gross patient service revenue related to long-term care.

### Using This Annual Report

Hendricks' consolidated financial statements consist of three statements – a balance sheet; a statement of revenues, expenses and changes in net position; and a statement of cash flows. These consolidated financial statements and related notes provide information about the financial activities and the financial position of Hendricks.

The consolidated balance sheet includes all of Hendricks' assets and liabilities and provides information about the nature and amounts of investments in resources (assets) and the obligations to creditors (liabilities).

All of the current year's revenue earned, expenses incurred and changes in net position are accounted for in the consolidated statement of revenues, expenses and changes in net position.

# HENDRICKS REGIONAL HEALTH

## MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2018 AND 2017

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Finally, the purpose of the consolidated statement of cash flows is to provide information about Hendricks' cash flows from operating activities, financing activities including capital additions, and investing activities. This statement provides information on the sources and uses of cash and the change in cash balance during the year.

### **The Consolidated Balance Sheet and Statement of Revenues, Expenses and Changes in Net Position**

One of the most important questions asked about Hendricks' finances is, "What is the financial strength of Hendricks?" The balance sheet and the statement of revenues, expenses and changes in net position report information about Hendricks' 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. All of the current year's revenues and expenses are taken into account regardless of when cash is received or paid.

These two statements report Hendricks' net position and changes in it. Think of Hendricks' net position, the difference between assets and liabilities, as one way to measure Hendricks' financial health, or financial position. Over time, increases or decreases in Hendricks' net position are one indicator of whether its financial health is improving or deteriorating. Consider other nonfinancial factors, however, such as changes in Hendricks' 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 Hendricks.

#### Table 1: Consolidated Balance Sheets

The significant change in Hendricks' assets and deferred outflows was in assets whose use is limited which decreased approximately \$34,155,000 in 2018 compared to 2017. The total asset and deferred outflows decrease of \$20,092,000 in 2018 was 2.8% from 2017.

Capital assets, prior to depreciation, increased approximately \$43,027,000 while accumulated depreciation increased \$25,065,000 for a net increase in capital assets of \$17,962,000 in 2018.

Current liabilities increased by approximately \$10,529,000 mainly related to an increase in accounts payable of \$10,385,000 for 2018.

Net position (or equity) decreased by approximately \$25,301,000 in 2018 compared to 2017. The decrease relates to unfavorable operations and investment return.



## HENDRICKS REGIONAL HEALTH

### MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2018 AND 2017

The following is a summary of the consolidated balance sheets for Hendricks.

	2018	2017	Change 2018 - 2017	2016	Change 2017 - 2016
<b>Assets</b>					
Current assets	\$ 165,175,272	\$ 166,232,060	\$ (1,056,788)	\$ 152,197,040	\$ 14,035,020
Capital assets, net	297,787,236	279,825,597	17,961,639	235,513,450	44,312,147
Assets whose use is limited, net	217,727,458	251,882,691	(34,155,233)	222,575,137	29,307,554
Other assets	5,019,342	14,298,322	(9,278,980)	7,724,653	6,573,669
Total assets	685,709,308	712,238,670	(26,529,362)	618,010,280	94,228,390
<b>Deferred outflows</b>	12,321,069	5,883,371	6,437,698	7,399,305	(1,515,934)
Total assets and deferred outflows	<u>\$ 698,030,377</u>	<u>\$ 718,122,041</u>	<u>\$ (20,091,664)</u>	<u>\$ 625,409,585</u>	<u>\$ 92,712,456</u>
<b>Liabilities</b>					
Current liabilities	\$ 148,516,817	\$ 137,987,838	\$ 10,528,979	\$ 110,955,316	\$ 27,032,522
Long-term debt, net	129,683,670	133,697,670	(4,014,000)	111,863,462	21,834,208
Total liabilities	278,200,487	271,685,508	6,514,979	222,818,778	48,866,730
<b>Deferred inflows</b>	4,344,920	5,650,451	(1,305,531)	982,507	4,667,944
Total liabilities and deferred inflows	282,545,407	277,335,959	5,209,448	223,801,285	53,534,674
<b>Net position</b>					
Net investment in capital assets	162,076,720	133,005,426	29,071,294	117,527,909	15,477,517
Restricted	7,487,989	7,386,400	101,589	7,336,138	50,262
Unrestricted	245,920,261	300,394,256	(54,473,995)	276,744,253	23,650,003
Total net position	415,484,970	440,786,082	(25,301,112)	401,608,300	39,177,782
Total liabilities, deferred inflows and net position	<u>\$ 698,030,377</u>	<u>\$ 718,122,041</u>	<u>\$ (20,091,664)</u>	<u>\$ 625,409,585</u>	<u>\$ 92,712,456</u>

Total assets and deferred outflows in 2017 compared to 2016 increased approximately \$92,712,000. The majority of the change was in current assets and assets whose use is limited which increased \$43,343,000 in 2017 from 2016. Net capital assets increased \$44,312,000 in 2017 from 2016.

Current liabilities in 2017 increased approximately \$27,033,000 mainly related to an increase in accounts payable of \$12,214,000 for 2017.

The net position in 2017 increased approximately \$39,178,000 over 2016 based on favorable operations and investment return.

#### Table 2: Consolidated Statements of Revenues, Expenses and Changes in Net Position

Hendricks' performance in 2018 showed a negative return on equity of 6.1% compared to positive 8.9% in 2017.

Total operating revenue increased approximately \$55,474,000 as net patient service revenue increased \$54,793,000 in 2018 over 2017. Acute care services constituted the majority of the increase in 2018.

## HENDRICKS REGIONAL HEALTH

### MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2018 AND 2017

Expenses increased by approximately \$84,340,000 between 2017 and 2018. Salaries, wages and benefits increased \$26,871,000 in 2018. Purchased services increased \$28,370,000 in 2018 while other supplies and expenses increased \$6,907,000 in 2018.

Increases in operating expenses were consistent with Hendricks' plan resulting from investments made to facilities to improve and expand access to care in Hendricks County as well as the replacement of the Hendricks' Electronic Medical Record (EMR) system during 2018. The EMR system is enhancing care provided locally and providing access to medical information, when needed, throughout the United States.

Nonoperating income (expense) decreased by approximately \$35,791,000 due to investment loss of \$7,780,000 in 2018 compared to investment return \$27,139,000 in 2017 combined with interest expense increasing \$872,000 from 2017.

	2018	2017	Change 2018 - 2017	2016	Change 2017 - 2016
<b>Operating revenue</b>					
Net patient service revenue	\$ 596,685,946	\$ 541,893,318	\$ 54,792,628	\$ 523,310,331	\$ 18,582,987
Other operating revenue	9,023,458	8,342,498	680,960	7,250,114	1,092,384
Total operating revenue	<u>605,709,404</u>	<u>550,235,816</u>	<u>55,473,588</u>	<u>530,560,445</u>	<u>19,675,371</u>
<b>Operating expenses</b>					
Salaries and benefits	174,729,272	147,858,408	26,870,864	130,889,262	16,969,146
Medical supplies and drugs	45,349,061	41,663,896	3,685,165	41,753,356	(89,460)
Depreciation and amortization	25,125,879	20,176,823	4,949,056	19,107,017	1,069,806
Other operating expenses	371,508,116	322,673,253	48,834,863	301,792,441	20,880,812
Total operating expenses	<u>616,712,328</u>	<u>532,372,380</u>	<u>84,339,948</u>	<u>493,542,076</u>	<u>38,830,304</u>
Operating income (loss)	(11,002,924)	17,863,436	(28,866,360)	37,018,369	(19,154,933)
<b>Nonoperating income (expense)</b>					
Investment return	(7,780,454)	27,139,140	(34,919,594)	12,357,393	14,781,747
Interest expense	(5,877,006)	(5,005,194)	(871,812)	(5,116,398)	111,204
Total nonoperating income (expense), net	<u>(13,657,460)</u>	<u>22,133,946</u>	<u>(35,791,406)</u>	<u>7,240,995</u>	<u>14,892,951</u>
Change in net position before other items	(24,660,384)	39,997,382	(64,657,766)	44,259,364	(4,261,982)
<b>Other items</b>					
Dividends to non-controlling interest	(640,728)	(819,600)	178,872	(850,800)	31,200
Change in net position	<u>(25,301,112)</u>	<u>39,177,782</u>	<u>(64,478,894)</u>	<u>43,408,564</u>	<u>(4,230,782)</u>
<b>Net position</b>					
Beginning of year	<u>440,786,082</u>	<u>401,608,300</u>	<u>39,177,782</u>	<u>358,199,736</u>	<u>43,408,564</u>
End of year	<u>\$ 415,484,970</u>	<u>\$ 440,786,082</u>	<u>\$ (25,301,112)</u>	<u>\$ 401,608,300</u>	<u>\$ 39,177,782</u>

Total operating revenue increased approximately \$19,675,000 as net patient service revenue increased \$18,583,000 in 2017 over 2016. Acute care services constituted the majority of the increase in 2017.

Expenses increased by approximately \$38,830,000 between 2016 and 2017. Salaries, wages and benefits increased by \$16,969,000 in 2017. Purchased services increased \$7,585,000 in 2017 while other professional fees increased \$5,690,000 in 2017.

## HENDRICKS REGIONAL HEALTH

### MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2018 AND 2017

Nonoperating income (expense) increased by approximately \$14,893,000 due to investment return of \$27,139,000 in 2017 compared to \$12,357,000 in 2016 and interest expense increasing \$111,000 from 2016.

#### Consolidated Statements of Cash Flows

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 "What were the sources of cash?" "What was cash used for?" and "What was the change in cash balance during the reporting period?"

Total cash and cash equivalents decreased approximately \$13,223,000 in 2018. This was a decrease of \$18,848,000 from 2017. Operating activities generated cash of \$10,702,000 during 2018 compared to \$53,400,000 in 2017. Capital and related financing decreased cash and cash equivalents by \$57,431,000 during 2018 compared to a decrease of \$38,313,000 in 2017, mainly as the result of expenditures for property and equipment additions. Investing activities increased cash and cash equivalents by \$33,506,000 in 2018 compared to decreasing cash and cash equivalents by \$9,462,000 in 2017, due to investment activity and the purchase of investments with available cash.

	2018	2017	Change 2018 - 2017	2016	Change 2017 - 2016
<b>Cash flow from activities</b>					
Operating	\$ 10,701,828	\$ 53,399,793	\$ (42,697,965)	\$ 51,685,421	\$ 1,714,372
Capital and related financing	(57,431,376)	(38,313,026)	(19,118,350)	(9,548,109)	(28,764,917)
Investing	33,506,102	(9,462,274)	42,968,376	(39,041,854)	29,579,580
Change in cash and cash equivalents	<u>\$ (13,223,446)</u>	<u>\$ 5,624,493</u>	<u>\$ (18,847,939)</u>	<u>\$ 3,095,458</u>	<u>\$ 2,529,035</u>

Cash flows from operating activities in 2017 were approximately \$1,714,000 higher than 2016. Cash flows used in capital and related financing activities in 2017 were \$28,765,000 less than 2016. Finally, cash flows used in investing activities in 2017 were \$29,637,000 more than 2016. Cash and cash equivalents in total increased \$2,529,000 in 2017.

#### Sources of Revenue

During 2018, Hendricks derived substantially all of its revenue from patient service and other related activities. A significant portion of the patient service revenue is from patients that are insured by government health programs, principally Medicare and Medicaid, which are highly regulated and subject to frequent and substantial changes. Revenues from the Medicare and Medicaid programs represented 54% of gross revenues of operations in 2018 but only 40% of Hendricks' net patient service revenues.

## HENDRICKS REGIONAL HEALTH

### MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2018 AND 2017

The following is a table of major sources of gross patient revenues for 2018:

Payor	% of Gross Revenues
Medicare	44%
Anthem/Blue Cross	22%
Commercial and other	20%
Medicaid	10%
Self-Pay	4%
Total	100%

Outpatient services represented approximately 76% of acute care gross patient revenue for 2018 and 2017. According to the Indiana Hospital Association's IHA Databank, the State of Indiana's average outpatient percent of total charges was approximately 56% and 55% for 2018 and 2017, respectively.

#### Capital Assets

During 2018, Hendricks invested approximately \$43,027,000 in capital assets net of asset disposals compared to \$27,382,000 in 2017. Capital assets net of asset disposals added during 2016 were \$36,416,000. The change in capital assets is outlined in the following table:

	2018	2017	Change 2018 - 2017	2016	Change 2017 - 2016
Land and improvements	\$ 35,003,690	\$ 34,087,839	\$ 915,851	\$30,940,211	\$ 3,147,628
Buildings and fixed equipment	286,006,646	264,065,955	21,940,691	277,546,619	(13,480,664)
Major moveable equipment	152,266,055	80,146,928	72,119,127	87,279,345	(7,132,417)
Construction in progress	5,729,794	57,678,640	(51,948,846)	12,830,797	44,847,843
Total capital assets	479,006,185	435,979,362	43,026,823	408,596,972	27,382,390
Less accumulated depreciation	181,218,949	156,153,765	25,065,184	173,083,522	(16,929,757)
Capital assets - net	\$ 297,787,236	\$ 279,825,597	\$ 17,961,639	\$ 235,513,450	\$ 44,312,147

Hendricks continues to invest in its facilities to meet the needs of the community, and strives to replace, as well as upgrade, equipment as needed. More detailed information about Hendricks' capital assets is presented in the Notes to the Consolidated Financial Statements.

#### Debt

Total long-term debt (including current portion) decreased from approximately \$146,820,000 to \$135,711,000 in 2018. The primary reasons for the decrease in long term debt was principal payments made during the year. More detailed information about Hendricks' long-term debt is presented in the Notes to the Consolidated Financial Statements.

# HENDRICKS REGIONAL HEALTH

## MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2018 AND 2017

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### **Economic Outlook**

Management believes that the health care industry's and Hendricks' operating margins will continue to be under pressure due to a variety of factors including, but not limited to, uncertainty regarding health care reform, changes in payor and services mix, and growth in operating expenses that are in excess of the increases in contractually arranged and legally established payments received for services rendered. In addition, the adoption of high-deductible health plans by employers continues to occur and patients are increasingly being held responsible for more of the cost of health care. Consequently, the health care market place has been increasingly more competitive. The ongoing challenge facing Hendricks is to continue to provide quality patient care in this competitive environment, and to attain reasonable rates for the services that are provided while managing costs. The most significant factor affecting Hendricks is finding the balance in maintaining and controlling labor costs in the face of pressures on volume and pricing for its services in this increasingly competitive, retail-like environment.

### **Contacting Hendricks' Financial Management**

This financial report is designed to provide our patients, suppliers, taxpayers, and creditors with a general overview of Hendricks' finances and to show Hendricks' accountability for the money it receives. If you have questions about this report or need additional financial information, contact the Administrative Offices (ATTN: Vice President of Finance/CFO), at PO Box 409, Danville, IN, 46122.

# HENDRICKS REGIONAL HEALTH

## CONSOLIDATED BALANCE SHEETS DECEMBER 31, 2018 AND 2017

### ASSETS AND DEFERRED OUTFLOWS

	2018	2017
<b>Current assets</b>		
Cash and cash equivalents	\$ 20,095,862	\$ 14,523,670
Investments	38,708,314	57,539,620
Patient accounts receivable, less allowance for uncollectible accounts of \$36,213,000 in 2018 and \$24,914,000 in 2017	70,949,240	55,081,850
Inventories	3,243,901	3,264,563
Other current assets	26,151,109	22,699,856
Current portion of assets whose use is limited	6,026,846	13,122,501
Total current assets	165,175,272	166,232,060
<b>Assets whose use is limited</b>		
Board designated funded depreciation investments	217,337,687	258,689,510
Held by trustee	6,210,647	6,112,205
Other board designated investments	205,970	203,477
Total assets whose use is limited	223,754,304	265,005,192
Less current portion	6,026,846	13,122,501
Noncurrent assets whose use is limited	217,727,458	251,882,691
<b>Capital assets</b>		
Land	25,010,345	24,094,494
Depreciable capital assets	448,266,046	354,206,228
Construction in progress	5,729,794	57,678,640
	479,006,185	435,979,362
Less accumulated depreciation	181,218,949	156,153,765
Capital assets, net	297,787,236	279,825,597
<b>Other assets</b>		
Pension asset	3,000,566	12,753,843
Other	2,018,776	1,544,479
Total other assets	5,019,342	14,298,322
Total assets	685,709,308	712,238,670
<b>Deferred outflows</b>		
Total assets and deferred outflows	\$ 698,030,377	\$ 718,122,041

See accompanying notes to consolidated financial statements.

# HENDRICKS REGIONAL HEALTH

## CONSOLIDATED BALANCE SHEETS DECEMBER 31, 2018 AND 2017

### LIABILITIES, DEFERRED INFLOWS AND NET POSITION

	2018	2017
<b>Current liabilities</b>		
Current portion of long-term debt	\$ 6,026,846	\$ 13,122,501
Line of credit	24,000,000	22,900,000
Accounts payable	37,132,735	26,747,370
Accrued salaries and related liabilities	16,722,817	12,561,699
Accrued expenses and other current liabilities	58,163,464	58,284,392
Accrued interest	1,682,388	1,581,925
Estimated third-party settlements	4,788,567	2,789,951
Total current liabilities	148,516,817	137,987,838
<b>Long-term debt, net of current portion</b>	129,683,670	133,697,670
Total liabilities	278,200,487	271,685,508
<b>Deferred inflows</b>	4,344,920	5,650,451
Total liabilities and deferred inflows	282,545,407	277,335,959
<b>Net position</b>		
Net investment in capital assets	162,076,720	133,005,426
Restricted		
Held by trustee	6,210,647	6,112,205
Non-expendable	1,277,342	1,274,195
Total restricted	7,487,989	7,386,400
Unrestricted	245,920,261	300,394,256
Total net position	415,484,970	440,786,082
Total liabilities, deferred inflows and net position	\$ 698,030,377	\$ 718,122,041

See accompanying notes to consolidated financial statements.

## HENDRICKS REGIONAL HEALTH

### CONSOLIDATED STATEMENTS OF REVENUES, EXPENSES AND CHANGES IN NET POSITION YEARS ENDED DECEMBER 31, 2018 AND 2017

	2018	2017
<b>Operating revenue</b>		
Net patient service revenue	\$ 596,685,946	\$ 541,893,318
Other operating revenue	9,023,458	8,342,498
Total operating revenue	605,709,404	550,235,816
<b>Operating expenses</b>		
Salaries and wages	140,173,695	116,043,833
Employee benefits	34,555,577	31,814,575
Professional medical fees	1,449,668	2,254,988
Other professional fees	36,857,758	33,935,997
Medical and surgical supplies	33,080,456	30,145,013
Drugs and intravenous solutions	12,268,605	11,518,883
Food	7,397,966	6,706,853
Purchased services	193,291,235	164,921,105
Equipment rental	3,009,946	3,238,154
HAF and HIP program assessments	9,289,458	7,173,702
Telephone and utilities	13,559,337	11,195,734
Depreciation and amortization	25,125,879	20,176,823
Insurance	7,403,349	5,912,044
Facility and equipment leases	39,330,828	34,323,363
Other supplies and expenses	59,918,571	53,011,313
Total operating expenses	616,712,328	532,372,380
Operating income (loss)	(11,002,924)	17,863,436
<b>Nonoperating income (expense)</b>		
Investment return	(7,780,454)	27,139,140
Interest expense	(5,877,006)	(5,005,194)
Total nonoperating income (expense), net	(13,657,460)	22,133,946
Change in net position before other items	(24,660,384)	39,997,382
<b>Other items</b>		
Dividends to non-controlling interest	(640,728)	(819,600)
Change in net position	(25,301,112)	39,177,782
<b>Net position</b>		
Beginning of year	440,786,082	401,608,300
End of year	\$ 415,484,970	\$ 440,786,082

See accompanying notes to consolidated financial statements.



## HENDRICKS REGIONAL HEALTH

### CONSOLIDATED STATEMENTS OF CASH FLOWS YEARS ENDED DECEMBER 31, 2018 AND 2017

	2018	2017
<b>Operating activities</b>		
Cash received from patient services	\$ 582,817,172	\$ 541,143,606
Cash paid for salaries, wages and benefits	(168,558,106)	(145,731,772)
Cash paid to vendors and suppliers	(412,580,696)	(350,354,539)
Other receipts, net	9,023,458	8,342,498
Net cash flows from operating activities	10,701,828	53,399,793
<b>Capital and related financing activities</b>		
Acquisition and construction of capital assets	(41,329,345)	(60,575,705)
Dividends to non-controlling interest	(640,728)	(819,600)
Loss of disposal of property and equipment	88,349	197,979
Interest on long-term debt	(5,776,543)	(5,086,877)
Borrowings on line of credit	24,000,000	-0-
Payments on line of credit	(22,900,000)	(1,100,000)
Proceeds from issuance of long-term debt	2,713,301	35,330,926
Principal payments for long-term debt	(13,586,410)	(6,259,749)
Net cash flows from capital and related financing activities	(57,431,376)	(38,313,026)
<b>Investing activities</b>		
Investment income	(7,780,454)	27,139,140
Purchase of investments	(8,644,217)	(44,324,403)
Proceeds from sale of investments	49,930,773	7,722,989
Net cash flows from investing activities	33,506,102	(9,462,274)
Net change in cash and cash equivalents	(13,223,446)	5,624,493
<b>Cash and cash equivalents</b>		
Beginning of year	70,821,224	65,196,731
End of year	\$ 57,597,778	\$ 70,821,224
<b>Reconciliation of cash and cash equivalents to the balance sheets</b>		
Cash and cash equivalents		
In current assets - cash and cash equivalents	\$ 20,095,862	\$ 14,523,670
In investments	37,286,742	56,085,163
In board designated investments	215,174	212,391
Total cash and cash equivalents	\$ 57,597,778	\$ 70,821,224

See accompanying notes to consolidated financial statements.

## HENDRICKS REGIONAL HEALTH

### CONSOLIDATED STATEMENTS OF CASH FLOWS YEARS ENDED DECEMBER 31, 2018 AND 2017

	2018	2017
<b>Reconciliation of operating income to net cash flows from operating activities</b>		
Operating income (loss)	\$ (11,002,924)	\$ 17,863,436
Adjustment to reconcile operating income (loss) to net cash flows from operating activities		
Depreciation and amortization	25,125,879	20,176,823
Provision for bad debts	27,140,321	21,010,665
Changes in operating assets and liabilities		
Patient accounts receivable	(43,007,711)	(23,103,942)
Inventories	20,662	(741,074)
Other current assets	(3,451,253)	1,480,686
Pension asset	9,753,277	(5,682,134)
Other assets	(474,297)	(891,535)
Deferred outflows	(6,437,698)	1,515,934
Accounts payable	8,302,297	8,103,091
Accrued salaries and related liabilities	4,161,118	1,624,892
Accrued expenses and other current liabilities	(120,928)	6,031,442
Estimated third-party settlements	1,998,616	1,343,565
Deferred inflows	(1,305,531)	4,667,944
Net cash flows from operating activities	\$ 10,701,828	\$ 53,399,793
 <b>Supplemental disclosure of cash flows information</b>		
Cash paid for interest, net of capitalized interest of \$-0- in 2018 and \$340,000 in 2017	\$ 5,776,543	\$ 5,086,877
 <b>Noncash capital and related financing activities</b>		
Property purchases in accounts payable	\$ 2,083,068	\$ 4,110,793

See accompanying notes to consolidated financial statements.

# HENDRICKS REGIONAL HEALTH

## NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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### 1. SIGNIFICANT ACCOUNTING POLICIES

#### Organization and Reporting Entity

Hendricks County Hospital, doing business as Hendricks Regional Health (Hendricks), is a county owned facility operating under Title 16 Article 22 of the Indiana statutes. Hendricks provides inpatient, outpatient, emergency and ambulatory care as well as long-term care. The Board of County Commissioners of Hendricks County appoints the Governing Board of Hendricks and a financial benefit/burden relationship exists between Hendricks County (County) and Hendricks. For these reasons, Hendricks is considered a component unit of the County.

The consolidated financial statements of Hendricks are intended to present the financial position and the changes in financial position and cash flows of only that portion of the business-type activities of the County that is attributable to the transactions of Hendricks and its component units. They do not purport to, and do not, present the financial position of the County as of December 31, 2018 and 2017, the changes in its net position or its cash flows for the years then ended.

Accounting principles generally accepted in the United States of America require the consolidated financial statements present Hendricks and its blended component units, collectively referred to as "primary government". The component units discussed in these consolidated financial statements are included in Hendricks' reporting entity because of the significance of their operational or financial relationship with Hendricks. A blended component unit, although a legally separate entity, is in substance part of the primary government unit of operations and exists solely to provide services to Hendricks.

#### Long-Term Care Operations

Hendricks leases the operations of over twenty-five long-term care facilities by way of arrangements with the managers of the facilities. These facilities provide inpatient and therapy services. Generally, gross revenues from the operation of the facilities are the property of Hendricks, who is responsible for the associated operating expenses and working capital requirements. While the management and related lease agreements are in effect, the performance of all activities of the managers shall be on behalf of Hendricks, who retains the authority and legal responsibility for the operation of the facilities.

Hendricks has lease agreements for the long-term care facilities, collectively referred to as the lessors, to lease the facilities managed by the managers. Concurrently, Hendricks entered into agreements with the managers to manage the leased facilities. As part of the agreements, Hendricks pays the managers a management fee to continue managing the facilities on behalf of Hendricks in accordance with the terms of the agreements. These management fees consist of base management fees, subordinated management fees, and quarterly incentive payments. The agreements expire at various times through 2020. The terms of these agreements may be renewed at the end of each term for an additional period of two years. All parties involved can terminate the agreement without cause with 90 days written notice.

# HENDRICKS REGIONAL HEALTH

## NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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### Basis of Consolidation

The accompanying consolidated financial statements of Hendricks includes the accounts of its blended component units, Hendricks Regional Health Foundation, Inc. (the Foundation), a separate not-for-profit entity organized to support the operations of Hendricks, Hendricks Ambulatory Management Company, LLC (HAMCO), a separate limited liability company entity, HRH Health Services Corporation (HRH Health Services), and HRH Real Estate Holding Company (HRH Real Estate).

HAMCO was formed to manage Hendricks' outpatient surgery center. As the sole Class B member of HAMCO, Hendricks maintains controlling interest in voting rights. Hendricks also maintains substantial participation in the operations of HAMCO in addition to an economic interest in HAMCO's financial position. HRH Health Services and HRH Real Estate are not-for-profit corporations with Hendricks as the sole corporate member.

All significant transactions between the entities have been eliminated for financial reporting purposes. Separate financial statements related to the individual component units can be obtained by contacting Hendricks' management.

### Measurement Focus and Basis of Accounting

The consolidated financial statements are reported using the economic resources measurement focus and on the accrual basis of accounting. Revenues are recorded when earned and expenses are recorded when a liability is incurred, regardless of the timing of related cash flows.

### Use of Estimates

The preparation of consolidated financial statements in conformity with accounting principles generally accepted in the United State of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the consolidated financial statements. Estimates also affect the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

### Cash and Cash Equivalents

Cash and cash equivalents include all cash held in checking, savings and money market deposit accounts available for operating purposes with original maturity dates of 90 days or less. Hendricks maintains its cash in accounts, which at times may exceed federally insured limits. Hendricks has not experienced any losses in such accounts and believes that it is not exposed to any significant credit risk on cash and cash equivalents. Included in cash and cash equivalents are amounts held by Hendricks under agreement with the State of Indiana relating to non-state government operated nursing facilities. These funds are required to be held through the end of Hendricks' fiscal year, at which time they are available for the general corporate purposes of Hendricks. As of December 31, 2018 and 2017, these amounts approximately \$37,200,000 and \$55,800,000, respectively.

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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#### Investments

Investments consist of cash and cash equivalents, certificates of deposit, mutual funds (including exchange traded funds), U.S. Government obligations and fixed income obligations. Investments other than certificates of deposit are reported at fair value. Certificates of deposit are reported at contract value.

#### Patient Accounts Receivable and Net Patient Service Revenue

Patient revenues and the related accounts receivable are recorded at the time services to patients are performed. Hendricks is a provider of services to patients entitled to coverage under Titles XVIII and XIX of the Health Insurance Act (Medicare and Medicaid). Differences between the total program billed charges and the payments received are reflected as deductions from revenue. At year-end, a cost report for hospital-based services is filed with the Medicare program computing reimbursement amounts related to Medicare patients. The difference between computed reimbursement and interim reimbursement is reflected as a receivable from or payable to the third-party programs. These programs have audited the year-end cost report filed with the Medicare program through December 31, 2016 with differences reflected as deductions from revenue in the year the cost report is settled. Amounts for unresolved cost reports for 2017 through 2018 are reflected in estimated third-party settlements on the consolidated balance sheets. During 2018 and 2017, Hendricks recognized an increase in net position in the consolidated statements of revenues, expenses and changes in net position of approximately \$70,000 and \$-0- during 2018 and 2017, respectively, due to the differences between original estimates and subsequent revisions for the final settlement of cost reports. Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. Although these audits may result in some changes in these amounts, they are not expected to have a material effect on the accompanying consolidated financial statements.

Hendricks has entered into agreements with certain commercial carriers. Reimbursement for services under these agreements includes discounts from established charges and other payment methodologies. Patient charges under these programs, on which no interim payments have been received, are included in patient accounts receivable at the estimated net realizable value of such charges.

Management estimates an allowance for uncollectible patient accounts receivable based on an evaluation of historical losses, current economic conditions, and other factors unique to Hendricks' customer base.

#### Inventories

Pharmaceutical inventories are valued at the lower of cost or net realizable value with cost being determined on the first-in, first-out (FIFO) method while medical and all other supplies are priced using the last-in, first-out (LIFO) method. Inventories at year-end consist of the following:

	2018	2017
Medical supplies and other	\$ 2,669,445	\$ 2,682,431
Pharmaceutical	574,456	582,132
	<u>\$ 3,243,901</u>	<u>\$ 3,264,563</u>

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# HENDRICKS REGIONAL HEALTH

## NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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### Other Current Assets

Other current assets consist of prepaid expenses, other receivables and various other current items. These assets are classified as current as they are expected to be utilized within the next fiscal year. Other receivables approximated \$22,196,000 and \$15,708,000 of the total as of December 31, 2018 and 2017, respectively.

### Assets Whose Use is Limited

Assets whose use is limited are stated at fair value in the consolidated financial statements. These assets include investments designated by Hendricks' Board for internal purposes and investments held by trustees and capital improvements. These investments consist primarily of cash and cash equivalents, certificates of deposit, mutual funds and fixed income obligations. Investment income, to the extent not capitalized, is reported as nonoperating income in the consolidated statements of revenues, expenses and changes in net position.

### Capital Assets and Depreciation

Capital assets such as property and equipment are stated at cost and include expenditures for new additions and other costs added to existing facilities which exceed Hendricks' capitalization threshold and which substantially increase the useful lives of existing facilities. Maintenance, repairs and minor renewals are expensed as incurred.

Hendricks provides for depreciation of property and equipment using annual rates, which are sufficient to depreciate the cost of depreciable assets over their estimated useful lives using the straight-line method.

The range of useful lives in computing depreciation is as follows:

<u>Description</u>	<u>Range of Useful Lives</u>
Land improvements	5-25 years
Buildings and fixed equipment	3-50 years
Major movable equipment	3-30 years

### Advertising and Community Relations

Hendricks records advertising and community relations expense in the period incurred. Total expense for advertising and community relations was approximately \$2,153,000 and \$2,302,000 for 2018 and 2017, respectively.

### Net Position

Net position of Hendricks is classified in four components. (1) Net investment in capital assets consist of capital assets net of accumulated depreciation reduced by the balance of any outstanding borrowings used to finance the purchase or construction of those assets. (2) Restricted expendable net position includes assets that must be used for a particular purpose, as specified by creditors, grantors, or

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## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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contributors external to Hendricks, including amounts deposited with trustees as required by revenue note indentures (3) Restricted nonexpendable net position includes the principal portion of permanent endowments and non-controlling interests owned by external investors. (4) Unrestricted net position is remaining net position that does not meet the definition of net investment in capital assets or restricted. Hendricks first applies restricted resources when an expense is incurred for purposes for which both restricted and unrestricted net position are available.

#### Consolidated Statements of Revenues, Expenses and Changes in Net Position

Hendricks' consolidated statements of revenues, expenses and changes in net position distinguish between operating and nonoperating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services which is the principal activity of Hendricks. Contributions and investment return are reported as nonoperating revenues. Operating expenses are all expenses incurred to provide health care services, excluding interest costs.

#### Charity Care and Assistance to the Uninsured

Hendricks provides care without charge or at amounts less than its established rates to patients who meet certain criteria under its charity care and financial assistance policy, including those patients who are uninsured. Because Hendricks does not collect amounts deemed to be charity care, revenue is adjusted for these amounts. Hendricks maintains records to identify and monitor the level of charity care it provides. These records include the amount of services and supplies furnished under its charity care and financial assistance policy. The charity care charges provided during 2018 and 2017 were approximately \$6,618,000 and \$3,984,000, respectively. Hendricks did not change its charity care and financial assistance policy during 2018 and 2017.

Of Hendricks' total expenses reported, including interest expense, in 2018 and 2017, an estimated \$2,887,000 and \$1,726,000 arose from providing services to charity patients during 2018 and 2017, respectively. The estimated costs of providing charity services are based on a calculation which applies a ratio of costs to charges to the gross uncompensated charges associated with providing care to charity patients. The ratio of cost to charges is calculated based on Hendricks' total expenses including interest expense to gross patient service revenue.

Hendricks has a policy with discounted rates similar to contractual payors for uninsured patients. Uninsured self-pay discounts provided to patients were approximately \$4,456,000 and \$4,241,000 for 2018 and 2017, respectively.

#### Costs of Borrowing

Interest cost incurred on borrowed funds during the period of construction of capital assets is capitalized as a component of the cost of acquiring those assets. During 2018 and 2017, capitalized interest was approximately \$-0- and \$340,000, respectively.

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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#### Federal or State Income Taxes

Hendricks is a governmental instrumentality organized under Title 16, Article 22, of the Indiana statutes and, accordingly, is generally exempt from federal income tax under Section 115 of the Internal Revenue Code (IRC) of 1986. As a governmental entity under Section 115 of the IRC, Hendricks is not required to file Federal Form 990 – Return of Organization Exempt from Income Tax, which is an informational return only.

The Foundation, HRH Health Services and HRH Real Estate are organized as a not-for-profit organization under Section 501(c)(3) of the United States IRC. As such, these entities are generally exempt from income taxes. However, they are required to file Federal Form 990 – Return of Organization Exempt from Income Tax. The Foundation, HRH Health Services and HRH Real Estate have filed their federal and state income tax returns for periods through December 31, 2017. These income tax returns are generally open to examination by the relevant taxing authorities for a period of three years from the later of the date the return was filed or its due date (including approved extensions).

HAMCO is a Limited Liability Company (LLC) and profit and loss are passed through to the members of the LLC. HAMCO has filed its federal and state income tax returns for periods through December 31, 2017. These income tax returns are generally open to examination by the relevant taxing authorities for a period of three years from the later of the date the return was filed or its due date (including approved extensions).

Accounting principles generally accepted in the United States of America require management to evaluate tax positions taken by Hendricks and its affiliates and recognize a tax liability if these organizations have taken an uncertain position that more likely than not would not be sustained upon examination by various federal and state taxing authorities. Management has analyzed the tax positions taken by these organizations, and has concluded that as of December 31, 2018 and 2017, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the accompanying consolidated financial statements. These organizations are subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

#### Compensated Absences

Hendricks' employees earn time off at varying rates depending on years of service under separate policies for vacation and personal leaves. The estimated amount of unused time off is reported as a liability in the consolidated financial statements.

#### Pensions

For purposes of measuring the net pension asset/liability, deferred outflows and deferred inflows of resources related to pensions, pension expense, information about the fiduciary net position of Hendricks defined benefit pension plan (the Plan), and additions to/deductions from the Plan's fiduciary net position have been determined on the same basis as they are reported by the Plan. For this purpose, benefit payments are recognized when due and payable in accordance with the benefit terms. Investments are reported at fair value.

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## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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#### Litigation

Hendricks is exposed to litigation arising in the normal course of business and is currently involved in certain litigation related to certain long-term care facilities. After consultation with legal counsel, management estimates that these matters will be resolved without material adverse effect on Hendricks' financial position.

#### Risk Management

Hendricks is exposed to various risks of loss from torts; theft of, damage to, and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; employee health, dental, and accident benefits. Except for health and dental benefits, commercial insurance coverage is purchased for claims arising from such matters and settled claims have not exceeded this commercial coverage in any of the three preceding years. Hendricks is self-insured for health and dental claims. Amounts are expensed as incurred and estimated accruals are made for incurred but not yet reported claims as of each balance sheet date.

#### Medical Malpractice

Malpractice insurance coverage is provided under a claims-made policy. Should the claims-made policy be terminated, Hendricks has the option to purchase insurance for claims having occurred during its term but reported subsequently. The Indiana Medical Malpractice Act, IC 34-18 (the Act) provides a maximum recovery of \$1,650,000 for an occurrence of malpractice until June 30, 2019, and \$1,800,000 thereafter. The Act requires Hendricks to maintain medical malpractice liability insurance in the amount of at least \$400,000 per occurrence and \$12,000,000 in the annual aggregate until June 30, 2019. Starting July 1, 2019, the Act will require Hendricks to maintain medical malpractice liability insurance in the amount of at least \$500,000 per occurrence and \$15,000,000 in the annual aggregate. The Act also requires Hendricks to pay a surcharge to the State Patient's Compensation Fund (Fund). The Fund is used to pay medical malpractice claims in excess of per occurrence and the annual aggregate amounts as noted above, under certain terms and conditions. No accrual for possible losses attributable to incidents that may have occurred but that have not been identified has been made because the amount, if any, is not reasonably estimable. The Fund is on a claims-made basis and as long as this coverage is continuous or replaced with equivalent insurance, claims based on occurrences during its term but reported subsequently will be insured.

Accounting principles generally accepted in the United States of America require a health care provider to accrue the expense of its share of malpractice claim costs, if any, for any reported and unreported incidents of potential improper professional service occurring during the year by estimating the probable ultimate costs of the incidents. Based upon Hendricks' claim experience, no such accrual has been made. It is reasonably possible that this estimate could change materially in the near term.

Hendricks is a member in a captive insurance company, Suburban Health Organization Segregated Portfolio Company, LLC, to fund Hendricks' required portion of the professional and physician insurance coverage pursuant to the Act as well as its general liability insurance and excess coverage. This provides protection from liability in an amount not to exceed \$400,000 per incident and aggregate liability protection not to exceed \$12,000,000 per year. In addition, Hendricks maintains a commercial

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# HENDRICKS REGIONAL HEALTH

## NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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umbrella/excess liability policy with a limit of \$1,000,000 each occurrence, \$1,000,000 completed operations aggregate limit, \$1,000,000 personal and advertising injury, \$100,000 fire damage, and a \$3,000,000 total policy aggregate.

### Reclassifications

Certain amounts from the 2017 consolidated financial statements have been reclassified to conform to the current year presentation. The reclassifications have no effect on previously reported net position or change in net position.

### Subsequent Events

Hendricks evaluates events or transactions occurring subsequent to consolidated balance sheet date for recognition and disclosure in the accompanying consolidated financial statements through the date the consolidated financial statements are issued which is April 22, 2019.

## **2. INVESTMENTS**

Investments consist of cash and cash equivalents, certificates of deposit, mutual funds, U.S. Government obligations and fixed income obligations. Certificates of deposit are reported at contract value. Mutual funds, exchange traded funds, and U.S. Government and fixed income obligations are reported at fair value. Investments balances as of December 31, 2018 and 2017 were approximately \$38,708,000 and \$57,540,000, respectively.

## **3. ASSETS WHOSE USE IS LIMITED**

Hendricks funds depreciation expense to meet the capital equipment needs of the facility. Depreciation is funded totally, with expenditures for capital equipment and debt principal payments reducing the funded depreciation balance. Hendricks designates other investments to fund specific projects. All interest earned by the funded depreciation and other board designated investments accounts are left to accumulate as an addition to the funds. Hendricks maintains funds which are held by trustee for debt service, capital improvements, and other purposes. The following represents assets whose use is limited as of December 31, 2018 and 2017:

	<u>2018</u>	<u>2017</u>
Assets whose use is limited		
Cash and cash equivalents	\$ 215,174	\$ 212,391
Investments	223,539,130	264,792,801
	<u>\$ 223,754,304</u>	<u>\$ 265,005,192</u>

## **4. DEPOSITS AND INVESTMENTS**

Deposits with financial institutions in the State of Indiana at year end were entirely insured by the Federal Depository Insurance Hospital or by the Public Deposit Insurance Fund. This includes any deposit accounts issued or offered by a qualifying financial institution.

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## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

Investments are carried at fair market value except for certificates of deposits which are carried at contract value. Net realized gains and losses on security transactions are determined on the specific identification cost basis. Funded depreciation investments consist of cash equivalents, mutual funds and U.S. Government and fixed income obligations.

As of December 31, 2018 and 2017, Hendricks had the following investments and maturities, all of which were held in Hendricks' name by custodial banks that are agents of Hendricks:

	December 31, 2018				
	Carrying Amount	Investment Maturities (in years)			
		Less than 1	1-5	6-10	More than 10
Mutual funds	\$ 209,983,238	\$ 209,983,238	\$ -0-	\$ -0-	\$ -0-
Exchange traded funds	536,651	536,651	-0-	-0-	-0-
U.S. Government obligations	7,110,813	7,110,813	-0-	-0-	-0-
Fixed income obligations	7,330,000	-0-	-0-	-0-	7,330,000
	\$ 224,960,702	\$ 217,630,702	\$ -0-	\$ -0-	\$ 7,330,000

	December 31, 2017				
	Carrying Amount	Investment Maturities (in years)			
		Less than 1	1-5	6-10	More than 10
Mutual funds	\$ 251,751,164	\$ 251,751,164	\$ -0-	\$ -0-	\$ -0-
Exchange traded funds	543,102	543,102	-0-	-0-	-0-
U.S. Government obligations	6,512,992	6,512,992	-0-	-0-	-0-
Fixed income obligations	7,440,000	-0-	-0-	-0-	7,440,000
	\$ 266,247,258	\$ 251,751,164	\$ -0-	\$ -0-	\$ 7,440,000

Credit risk - Statutes authorize Hendricks to invest in interest bearing deposit accounts, passbook savings accounts, certificates of deposit, money market deposit accounts, mutual funds, pooled fund investments, securities backed by the full faith and credit of the United States Treasury and repurchase agreements. The statutes require that repurchase agreements be fully collateralized by U.S. Government or U.S. Government Agency obligations.

Concentration of credit risk - Hendricks maintains its investments, which at times may exceed federally insured limits. Hendricks has not experienced any losses in such accounts. Hendricks believes that it is not exposed to any significant credit risk on investments.

Hendricks does not have a formal policy for credit and concentration of credit risk for deposits and investments.

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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Deposits and investments consist of the following as of December 31, 2018 and 2017:

	2018	2017
Carrying amount		
Deposits	\$ 57,597,778	\$ 70,821,224
Investments	224,960,702	266,247,258
	<u>\$ 282,558,480</u>	<u>\$ 337,068,482</u>
Included in the balance sheet captions		
Cash and cash equivalents	\$ 20,095,862	\$ 14,523,670
Investments	38,708,314	57,539,620
Board designated funded depreciation investments	217,337,687	258,689,510
Held by trustee	6,210,647	6,112,205
Other board designated investments	205,970	203,477
	<u>\$ 282,558,480</u>	<u>\$ 337,068,482</u>

#### 5. FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy are described as follows:

- Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that Hendricks has the ability to access.
- Level 2: Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3: Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used as of December 31, 2018 and 2017:

- *Mutual funds and exchange traded funds:* Valued at the daily closing price as reported by the fund. Mutual funds and exchange traded funds held by Hendricks are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact at that price. The mutual funds and exchange traded funds held by Hendricks are deemed to be actively traded.
- *U.S. Government obligations:* Valued using pricing models maximizing the use of observable inputs for similar securities.
- *Fixed income obligations:* Valued at the closing price reported on the active market on which the individual securities are traded, when available. The fair value of fixed income obligations for which quoted market price is not available are valued based on yields currently available on comparable securities of issuers with similar credit ratings.

Assets and liabilities measured at fair value on a recurring basis as of December 31, 2018 and 2017 are as follows:

	December 31, 2018			
	Total	Level 1	Level 2	Level 3
<b>Assets</b>				
Investments				
Mutual funds - short term bond	\$ 884,921	\$ 884,921	\$ -0-	\$ -0-
Exchange traded funds	536,651	536,651	-0-	-0-
	<u>1,421,572</u>	<u>\$ 1,421,572</u>	<u>\$ -0-</u>	<u>\$ -0-</u>
Cash and cash equivalents	37,286,742			
	<u>\$ 38,708,314</u>			
Assets whose use is limited				
Mutual funds				
Foreign large growth	\$ 7,583,501	\$ 7,583,501	\$ -0-	\$ -0-
Foreign large value	7,878,655	7,878,655	-0-	-0-
Intermediate-term bond	102,104,064	102,104,064	-0-	-0-
Large blend	66,702,399	66,702,399	-0-	-0-
Large growth	10,992,911	10,992,911	-0-	-0-
Short-term bond	110,682	110,682	-0-	-0-
Small growth	6,872,197	6,872,197	-0-	-0-
Small value	6,853,908	6,853,908	-0-	-0-
Total mutual funds	209,098,317	209,098,317	-0-	-0-
U.S. Government obligations	7,110,813	-0-	7,110,813	-0-
Fixed income obligations	7,330,000	-0-	7,330,000	-0-
	<u>223,539,130</u>	<u>\$ 209,098,317</u>	<u>\$ 14,440,813</u>	<u>\$ -0-</u>
Cash and cash equivalents	215,174			
Total assets whose use is limited	<u>\$ 223,754,304</u>			

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

	December 31, 2017			
	Total	Level 1	Level 2	Level 3
<b>Assets</b>				
Investments				
Mutual funds - short term bond	\$ 881,753	\$ 881,753	\$ -0-	\$ -0-
Exchange traded funds	543,102	543,102	-0-	-0-
U.S. Government obligations	29,602	-0-	29,602	-0-
	<u>1,454,457</u>	<u>\$ 1,424,855</u>	<u>\$ 29,602</u>	<u>\$ -0-</u>
Cash and cash equivalents	56,085,163			
	<u>\$ 57,539,620</u>			
Assets whose use is limited				
Mutual funds				
Foreign large growth	\$ 9,774,258	\$ 9,774,258	\$ -0-	\$ -0-
Foreign large value	10,138,004	10,138,004	-0-	-0-
Intermediate-term bond	117,714,343	117,714,343	-0-	-0-
Large blend	82,913,699	82,913,699	-0-	-0-
Large growth	12,575,093	12,575,093	-0-	-0-
Short-term bond	107,238	107,238	-0-	-0-
Small growth	8,860,345	8,860,345	-0-	-0-
Small value	8,786,431	8,786,431	-0-	-0-
Total mutual funds	250,869,411	250,869,411	-0-	-0-
U.S. Government obligations	6,483,390	-0-	6,483,390	-0-
Fixed income obligations	7,440,000	-0-	7,440,000	-0-
	<u>264,792,801</u>	<u>\$ 250,869,411</u>	<u>\$ 13,923,390</u>	<u>\$ -0-</u>
Cash and cash equivalents	212,391			
Total assets whose use is limited	<u>\$ 265,005,192</u>			

Hendricks' policy is to recognize transfers between levels as of the end of the reporting period. There were no transfers during 2018 and 2017.

Realized gains and losses included in earnings are reported in the consolidated statements of revenues, expenses and changes in net position as a component of investment return. Differences between market value and cost of investments are classified as unrealized gains or losses. Unrealized gains or losses are included in earnings for the period attributable to the change in unrealized gains relating to assets held as of December 31, 2018 and 2017 and are reported in the consolidated statements of revenues, expenses and changes in net position as a component of investment return.

Hendricks holds investments which are exposed to various risks such as interest rate, market, and credit. Due to the level of risk associated with these securities and the level of uncertainty related to changes in the value, it is at least reasonably possible that changes in the various risk factors will occur in the near term that could materially affect the amounts reported in the accompanying consolidated financial statements.

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

#### 6. CAPITAL ASSETS

Progressions for capital assets for 2018 and 2017 follow:

	December 31, 2017	Additions	Disposals	Transfers	December 31, 2018
Land	\$ 24,094,494	\$ -0-	\$ -0-	\$ 915,851	\$ 25,010,345
Land improvements	9,993,345	-0-	-0-	-0-	9,993,345
Buildings and fixed equipment	264,065,955	9,539,256	-0-	12,401,435	286,006,646
Major movable equipment	80,146,928	30,022,648	(385,590)	42,482,069	152,266,055
Construction in progress	57,678,640	3,850,509	-0-	(55,799,355)	5,729,794
Total capital assets	435,979,362	43,412,413	(385,590)	-0-	479,006,185
Less accumulated depreciation					
Land improvements	5,477,702	657,075	-0-	-0-	6,134,777
Buildings and fixed equipment	98,857,563	9,568,291	-0-	-0-	108,425,854
Major movable equipment	51,818,500	15,137,059	(297,241)	-0-	66,658,318
Total accumulated depreciation	156,153,765	25,362,425	(297,241)	-0-	181,218,949
Capital assets, net	<u>\$ 279,825,597</u>	<u>\$ 18,049,988</u>	<u>\$ (88,349)</u>	<u>\$ -0-</u>	<u>\$ 297,787,236</u>

  

	December 31, 2016	Additions	Disposals	Transfers	December 31, 2017
Land	\$ 20,928,211	\$ 3,166,283	\$ -0-	\$ -0-	\$ 24,094,494
Land improvements	10,012,000	-0-	(18,655)	-0-	9,993,345
Buildings and fixed equipment	277,546,619	1,067,782	(14,548,446)	-0-	264,065,955
Major movable equipment	87,279,345	15,604,590	(22,737,007)	-0-	80,146,928
Construction in progress	12,830,797	44,847,843	-0-	-0-	57,678,640
Total capital assets	408,596,972	64,686,498	(37,304,108)	-0-	435,979,362
Less accumulated depreciation					
Land improvements	4,819,000	658,702	-0-	-0-	5,477,702
Buildings and fixed equipment	105,716,956	8,189,048	(15,048,441)	-0-	98,857,563
Major movable equipment	62,547,566	11,328,622	(22,057,688)	-0-	51,818,500
Total accumulated depreciation	173,083,522	20,176,372	(37,106,129)	-0-	156,153,765
Capital assets, net	<u>\$ 235,513,450</u>	<u>\$ 44,510,126</u>	<u>\$ (197,979)</u>	<u>\$ -0-</u>	<u>\$ 279,825,597</u>

Significant outstanding commitments on capital assets as of December 31, 2018 were approximately \$95,000.

#### 7. LONG-TERM DEBT

Hendricks issued Indiana Bond Bank Special Program Refunding Bonds, Series 2007A dated May 24, 2007 in the amount of \$44,915,000. The Series 2007A Bonds mature serially on an annual basis starting in April 2013 through April 2030 at interest rates ranging from 5.00% to 5.25%. Interest is due semi-annually on April 1 and October 1.

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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Hendricks issued Indiana Bond Bank Special Program Bonds, Series 2009A dated March 12, 2009 in the amount of \$75,000,000. The Series 2009A Bonds mature serially on a semi-annual basis (February 1 and August 1) through February 2029 at interest rates ranging from 4.0% to 5.5%. Subsequent to December 31, 2018, the Series 2009A Bonds were refinanced.

In 2009, Hendricks issued Indiana Taxable Economic Development Revenue Bonds, Series 2009 in the amount of \$5,000,000. These Bonds bear interest at 5% through February 2030 with the first principal payment due in February 2019 and are unsecured. Hendricks is also the sole bond holder of the Indiana Taxable Economic Development Revenue Bonds, Series 2009.

In 2015, Hendricks borrowed from the Indiana Finance Authority (the Authority), the Health Facility Revenue Bonds, Series 2015A Bonds (tax-exempt) for \$40,125,000 and Series 2015B Bonds (taxable) for \$7,875,000 to construct a new ambulatory care facility in Brownsburg, Indiana. Hendricks, the Authority and Fifth Third Bank (Fifth Third) then entered into a Bond Purchase Agreement (the Agreement) where Fifth Third purchased from the Authority all of the Series 2015A and 2015B Bonds in a private placement.

The Agreement runs through the maturity date of the Series 2015A and 2015B Bonds which is October 2022. The 2015A Bonds bear interest at a fixed rate of 1.87% and Series 2015B Bonds bear interest at a fixed rate of 2.83%. Principal payments for these bonds begin in January 2018 through October 2022. The Series 2015A and 2015B Bonds are secured by Hendricks' net revenues. Subsequent to December 31, 2018, the Series 2015A and 2015B Bonds were refinanced.

During 2016, Hendricks issued Indiana Taxable Economic Development Revenue Bonds, Series 2016 in the amount of \$2,600,000. These Series 2016 Bonds bear interest at 2% through April 2036 and are unsecured. Hendricks is also the sole bond holder of the Indiana Taxable Economic Development Revenue Bonds, Series 2016.

The Series 2007A, 2009A, 2015A and 2015B Bonds are covered under a Master Trust Indenture and are secured by an interest in the gross revenues of Hendricks. The Series 2007A, 2009A, 2015A and 2015B Bonds require Hendricks to comply with certain financial covenants. As of December 31, 2018 and 2017, Hendricks believed it was in compliance with these financial covenants.

Hendricks has a line of credit agreement with Fifth Third with a maximum amount of \$24,000,000 to fund working capital. The amount outstanding as of December 31, 2018 and 2017 was \$24,000,000 and \$22,900,000, respectively. The line of credit bears interest at the floating 30 day LIBOR rate plus 125 basis points (2.8% at December 31, 2018) and is secured by Hendricks net revenues. The line of credit is renewable annually expires in February 2020. Subsequent to December 31, 2018, Hendricks paid off the line of credit.

Included in deferred outflows as of December 31, 2018 and 2017 is a loss on bond refunding of approximately \$1,325,000 and \$1,442,000, respectively, related to the refunding of Series 2002 Bonds during 2007. Annual amortization of the loss is approximately \$118,000 through April 2030.



## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

Progressions for long-term debt for 2018 and 2017 include the following:

	December 31, 2017	Additional Borrowings	Payments	December 31, 2018	Current Portion
Indiana Bond Bank					
Special Program Refunding					
Bonds Series 2007A	\$ 36,230,000	\$ -0-	\$ (2,015,000)	\$ 34,215,000	\$ 2,120,000
Special Hospital Program					
Bonds Series 2009A	51,540,000	-0-	(3,435,000)	48,105,000	3,575,000
Indiana Taxable Economic					
Development Revenue Bonds					
Series 2009	5,000,000	-0-	-0-	5,000,000	110,000
Series 2016	2,440,000	-0-	(110,000)	2,330,000	110,000
Indiana Finance Authority					
Health Facility Revenue					
Bonds, Series 2015A & B	48,000,000	-0-	(6,857,144)	41,142,856	6,857,144
Other	732,792	2,713,301	(1,169,266)	2,276,827	836,846
	143,942,792	\$ 2,713,301	\$ (13,586,410)	133,069,683	13,608,990
Unamortized bond premium	2,877,379			2,640,833	
	<u>\$ 146,820,171</u>			<u>\$ 135,710,516</u>	
Effect of 2019 refinancing					(7,582,144)
					<u>\$ 6,026,846</u>
	December 31, 2016	Additional Borrowings	Payments	December 31, 2017	Current Portion
Indiana Bond Bank					
Special Program Refunding					
Bonds Series 2007A	\$ 38,140,000	\$ -0-	\$ (1,910,000)	\$ 36,230,000	\$ 2,015,000
Special Hospital Program					
Bonds Series 2009A	54,835,000	-0-	(3,295,000)	51,540,000	3,435,000
Indiana Taxable Economic					
Development Revenue Bonds					
Series 2009	5,000,000	-0-	-0-	5,000,000	-0-
Series 2016	2,600,000	-0-	(160,000)	2,440,000	110,000
Indiana Finance Authority					
Health Facility Revenue					
Bonds, Series 2015A & B					
(construction draws)	12,698,640	35,301,360	-0-	48,000,000	6,857,144
Other	1,597,975	29,566	(894,749)	732,792	705,357
	114,871,615	\$ 35,330,926	\$ (6,259,749)	143,942,792	\$ 13,122,501
Unamortized bond premium	3,113,926			2,877,379	
	<u>\$ 117,985,541</u>			<u>\$ 146,820,171</u>	

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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Subsequent to December 31, 2018, Hendricks borrowed from the Indiana Finance Authority, the Health Facility Revenue Refunding Bonds, Series 2019 Bonds for \$85,120,000 to refinance the existing Series 2015A Bonds, Series 2015B Bonds, and Series 2009A Bonds. The Series 2019 Bonds are segregated into four separate issues, 2019A through 2019D, and have fixed interest rates ranging from 2.74% to 4.00%. The Series 2019 Bonds mature at various times through 2039.

The maturities schedule has been updated to reflect the new payment schedule related to the debt refinancing that occurred subsequent to December 31, 2018. Aggregate maturities of long-term debt are as follows:

Year Ending December 31,	Principal	Interest	Total
2019	\$ 6,026,846	\$ 3,087,339	\$ 9,114,185
2020	8,836,070	4,316,527	13,152,597
2021	8,779,924	4,020,324	12,800,248
2022	8,907,729	3,713,989	12,621,718
2023	9,193,586	3,395,438	12,589,024
2024-2028	50,522,726	11,725,391	62,248,117
2029-2033	22,300,000	4,028,798	26,328,798
2034-2038	12,975,000	1,698,424	14,673,424
2039	1,400,000	28,000	1,428,000
	<u>\$ 128,941,881</u>	<u>\$ 36,014,230</u>	<u>\$ 164,956,111</u>

#### 8. NET PATIENT SERVICE REVENUE

Hendricks has agreements with third-party payors that provide for reimbursement to Hendricks at amounts different from its established rates. Estimated contractual adjustments under third-party reimbursement programs represent the difference between Hendricks' billings at standard rates and amounts reimbursed by third-party payors. They also include any differences between estimated third-party reimbursement settlements for prior years and subsequent final settlements. A summary of the reimbursement arrangements with major third-party payors is as follows:

##### Medicare

Medicare inpatient services are reimbursed based on a predetermined amount for each case based on the diagnosis associated with the patient (Prospective Payment System). These rates vary according to a patient classification system that is based on clinical, diagnostic and other factors. The prospectively determined rates are not subject to retroactive adjustment. Hendricks' classification of patients under the Prospective Payment System and the appropriateness of patient admissions are subject to validation reviews by the Medicare peer review organization which is under contract with Hendricks to perform such reviews. Medicare outpatient services are primarily reimbursed on predetermined rates based on the services provided.

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## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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#### Medicaid and Hospital Assessment Fee and Healthy Indiana Programs

Hendricks is reimbursed for Medicaid inpatient services under a prospectively determined rate-per-discharge and for Medicaid outpatient services on a predetermined fee schedule. The differences between standard charges and reimbursement from these programs are recorded as contractual adjustments.

Hendricks participates in the State of Indiana's Hospital Assessment Fee (HAF) Program. The purpose of the HAF Program is to fund the State share of enhanced Medicaid payments and Medicaid Disproportionate Share (DSH) payments for Indiana hospitals as reflected in the HAF Program expense reported in the statements of revenues, expenses and changes in net position. Previously, the State share was funded by governmental entities through intergovernmental transfers. The Medicaid enhanced payments relate to both fee for service and managed care claims. The Medicaid enhanced payments are designed to follow the patients and result in increased Medicaid rates. Beginning July 1, 2017, hospitals also started funding the Healthy Indiana Plan (HIP), the State's Medicaid expansion program. The payments related to the HIP Program mirror the Medicaid payments under the HAF Program but the funding includes physician, state administration, and certain non-hospital expenditures. During 2018 and 2017, Hendricks recognized HAF and HIP program assessments of approximately \$9,289,000 and \$7,174,000, respectively, which resulted in increased Medicaid reimbursement. The HAF and HIP assessments are included in the statements of revenues, expenses and changes in net position as operating expenses. The Medicaid rate increases under the HAF Program and the HIP payments are included in patient service revenue in the statements revenues, expenses and changes in net position.

As a governmental entity, Hendricks is also eligible for the Indiana Medicaid Supplemental programs including Medicaid DSH and Municipal Upper Payment Limit programs. Hendricks recognized reimbursement from these programs within net patient service revenue of approximately \$4,356,000 and \$2,253,000 during 2018 and 2017, respectively. These programs are administered by the State of Indiana, but rely on Federal funding.

#### Other Payors

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

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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Patient service revenue for 2018 and 2017 consists of the following:

	2018	2017
Inpatient	\$ 183,692,220	\$ 158,010,953
Outpatient	569,130,622	496,545,255
Long-term care services	296,133,256	269,236,881
Gross patient service revenue	1,048,956,098	923,793,089
Contractual allowances	414,056,485	352,664,303
Uninsured self pay discounts	4,455,599	4,241,031
Charity care	6,617,747	3,983,772
Provision for bad debts	27,140,321	21,010,665
Deductions from revenue	452,270,152	381,899,771
Net patient service revenue	\$ 596,685,946	\$ 541,893,318

Hendricks also participates in a Medicare Shared Savings program through an Accountable Care Organization with several other hospitals, and shares in savings related to the cost of care provided to Medicare beneficiaries. Hendricks' share is included in the consolidated statements of revenues, expenses and changes in net position.

#### 9. DEFINED BENEFIT PENSION PLAN

##### Plan Description

Hendricks has a defined benefit pension plan (the Plan) as authorized by IC 16-22-3-11. The Plan is a single employer plan which provides retirement, disability and death benefits to Plan members and beneficiaries. The Plan was established by written agreement by the Board of Trustees. Nyhart is the actuary and third party administrator of the Plan. National Bank of Indianapolis is the custodian of the Plan's assets. In 2013, Hendricks froze benefits to a majority of Plan participants whose benefits were fully vested at that time and began offering retirement benefits to employees through a tax deferred annuity plan. Participants who meet certain age and service requirements continue to accrue benefits under the Plan. For more information on the Plan, participants should contact the Administrative Offices (ATTN: Vice President of Finance/CFO), at PO Box 409, Danville, IN, 46122.

##### Benefits Provided

The Plan principally provides retirement benefits. For those participants who continue to accrue benefits, the following summarizes benefits available:

Participants are fully vested after 7 years of service. Employee normal retirement date is the first day of the month coincident with or following age 65. The early retirement date for vested employee members can occur once an employee has attained age 55 with 5 years of service. A participant's monthly normal retirement benefit is the total of 0.45% final average compensation plus 0.45% of

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## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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final average compensation in excess of \$833. This total is multiplied by years of benefit service. No benefits accrue for years ending before age 25. A participant's early retirement benefit is reduced by approximately 5% for each year prior to the participant's normal retirement date. The late retirement benefit is the greater of 1) average monthly earnings and benefit service determined as of the normal retirement date or 2) average monthly earnings and benefit service determined as of the late retirement date.

For participants who have terminated their employment, vested benefits are generally distributable at their time of termination in a lump sum.

#### Funding Policy

The contribution requirements of Plan members are established by the written agreement between Hendricks Board of Trustees and the Plan Administrator. Plan members' contributions are not required by the Plan agreement. Hendricks is required to contribute at an actuarially determined rate. No contributions were required in 2018 and 2017 and Hendricks does not expect to be required to contribute to the Plan in 2019.

#### Employees Covered by Benefit Terms

As of December 31, 2018 and 2017, the following employees were covered by the benefit terms of the Plan:

	<u>2018</u>	<u>2017</u>
Active plan members, including		
terminated but vested participants	829	916
Inactive plan members and		
beneficiaries receiving benefits	338	307
Inactive plan members entitled to but		
not yet receiving benefits	<u>268</u>	<u>224</u>
	<u>1,435</u>	<u>1,447</u>

#### Contributions

The annual required contributions for 2018 and 2017 and estimated liabilities as of January 1, 2018 and 2017 were determined as part of the actuarial valuations using the Entry Age Normal cost method.

#### Net Pension Liability

The total pension liability was measured as of December 31, 2018 and 2017, and the total pension liability used to calculate the net pension liability was determined by an actuarial valuation as of January 1, 2018 and 2017.

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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#### *Actuarial assumptions*

The total pension liability in the December 31, 2018 and 2017 actuarial valuations were determined using the following actuarial assumptions, applied to all periods included in the measurement:

Inflation	2.75%
Salary increases	3.00%
Investment rate of return	7.25%

Mortality rates were based on the Social Security Administration's assumptions to RP-2014 Sex Distinct Mortality with generational improvements beginning in 2006 based on the Social Security Administration's assumptions. During 2018, the scale applied to the table for generational mortality improvement has been updated from a scale based on assumptions developed from the 2017 Social Security Trustees Report to a scale based on assumptions developed from the 2018 Social Security Trustees Report. The base mortality table is unchanged. This results in a decrease in the liability and normal cost.

The actuarial value of assets was based on market value of assets. The same actuarial assumptions were used to determine the actuarial value required contributions for 2018 and 2017.

The long-term expected rate of return on pension plan investments was determined using a building-block method in which best-estimate ranges of expected future real rates of return (expected returns, net of pension plan investment expense and inflation) are developed for each major asset class. These ranges are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by the target asset allocation percentage and by adding expected inflation.

The target allocation and best estimates of arithmetic real rates of return for each major asset class are summarized in the following table:

<u>Asset Class</u>	<u>Target Allocation</u>	<u>Long-Term Expected Real Rate of Return</u>
Fixed income funds	35%	1.60%
Equity funds	65%	6.25%
	<u>100%</u>	

#### *Discount Rate*

The discount rate used to measure the total pension liability was 7.25% for 2018 and 2017. The projection of cash flows used to determine the discount rate assumed that Hendricks' contributions will be made at rates equal to the difference between actuarially determined contribution rates and the employee rate. Based on those assumptions, the pension plan's fiduciary net position was projected to be available to make all projected future benefit payments of current active and inactive employees. Therefore, the long-term expected rate of return on pension plan investments was applied to all periods of projected benefit payments to determine the total pension liability.

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## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

#### *Sensitivity of the Net Pension (Asset) Liability*

The following presents the net pension (asset) liability of Hendricks, calculated using the discount rate of 7.25%, as well as what Hendricks' net pension (asset) liability would be if it were calculated using a discount rate that is 1% lower (6.25%) or 1% higher (8.25%) than the current rate:

	1% Decrease (6.25%)	Current Discount Rate (7.25%)	1% Increase (8.25%)
Net pension (asset) liability	\$ 4,564,119	\$ (3,000,566)	\$ (9,314,055)

Detailed information about the pension plan's fiduciary net position is available in a separately issued actuarial valuation report.

#### *Changes in the Net Pension (Asset) Liability*

The changes in the net pension (asset) liability during 2018 and 2017 were as follows:

	Total Pension Liability (a)	Plan Fiduciary Net Position (b)	Net Pension (Asset) Liability (a) - (b)
Balance, 12/31/2017	\$ 59,047,848	\$ 71,801,691	\$ (12,753,843)
Service cost	354,904	-0-	354,904
Interest	4,222,130	-0-	4,222,130
Change of benefit terms	-0-	-0-	-0-
Differences between expected and actual experience	940,439	-0-	940,439
Changes of assumptions	(124,468)	-0-	(124,468)
Benefit payments	(2,332,950)	(2,332,950)	-0-
Net investment income	-0-	(4,241,637)	4,241,637
Administrative expenses	-0-	(135,542)	135,542
Other	-0-	16,907	(16,907)
Net change	3,060,055	(6,693,222)	9,753,277
Balance, 12/31/2018	\$ 62,107,903	\$ 65,108,469	\$ (3,000,566)

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

	Total Pension Liability (a)	Plan Fiduciary Net Position (b)	Net Pension (Asset) Liability (a) - (b)
Balance, 12/31/2016	\$ 56,557,144	\$ 63,628,853	\$ (7,071,709)
Service cost	449,870	-0-	449,870
Interest	4,059,028	-0-	4,059,028
Change of benefit terms	-0-	-0-	-0-
Differences between expected and actual experience	271,415	-0-	271,415
Changes of assumptions	(248,774)	-0-	(248,774)
Benefit payments	(2,040,835)	(2,040,835)	-0-
Net investment income	-0-	10,340,867	(10,340,867)
Administrative expenses	-0-	(144,474)	144,474
Other	-0-	17,280	(17,280)
Net change	2,490,704	8,172,838	(5,682,134)
Balance, 12/31/2017	\$ 59,047,848	\$ 71,801,691	\$ (12,753,843)

#### Pension Expense and Deferred Outflows of Resources and Deferred Inflows of Resources Related to Pensions

For 2018 and 2017, Hendricks recognized pension expense of approximately \$1,892,000 and \$384,000, respectively. As of December 31, 2018 and 2017, Hendricks reported deferred outflows of resources and deferred inflows of resources related to pension from the following sources:

	Deferred Outflows of Resources	Deferred Inflows of Resources
Balance, December 31, 2017	\$ 4,441,120	\$ (5,650,451)
Differences between expected and actual experience	940,439	-0-
Amortization of expected versus actual	(336,773)	191,029
Changes in assumptions	-0-	(124,468)
Amortization of changes in assumptions	(547,054)	60,433
Differences between projected and actual earnings on plan investments	9,340,870	-0-
Amortization of projected versus actual earnings on plan investments	(2,842,049)	1,178,537
Balance, December 31, 2018	10,996,553	\$ (4,344,920)
Deferred outflows - loss on bond refunding	1,324,516	
Total deferred outflows, December 31, 2018	\$ 12,321,069	



## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

	Deferred Outflows of Resources	Deferred Inflows of Resources
Balance, December 31, 2016	\$ 5,839,319	\$ (982,507)
Differences between expected and actual experience	271,415	-0-
Amortization of expected versus actual	(148,685)	191,029
Changes in assumptions	-0-	(248,774)
Amortization of changes in assumptions	(547,054)	35,539
Differences between projected and actual earnings on plan investments	-0-	(5,824,273)
Amortization of projected versus actual earnings on plan investments	(973,875)	1,178,535
Balance, December 31, 2017	4,441,120	\$ (5,650,451)
Deferred outflows - loss on bond refunding	1,442,251	
Total deferred outflows, December 31, 2017	\$ 5,883,371	

Amounts reported as deferred outflows of resources and deferred inflows of resources related to pension will be recognized in pension expense as follows:

Year Ending December 31,	
2019	\$ 2,309,559
2020	1,393,983
2021	910,256
2022	2,034,604
2023	3,231
	\$ 6,651,633

#### 10. TAX DEFERRED ANNUITY PLAN AND OTHER BENEFIT PLANS

##### Plan Description

Hendricks has a tax deferred annuity plan as authorized by IC 16-22-3-11. The plan provides retirement, disability and death benefits to plan members and beneficiaries. The plan was established by a written agreement by the Board of Trustees, generally to replace the defined benefit pension plan. Great West Life & Annuity Insurance Company is the third party administrator for the plan. Wells Fargo Bank, NA is the custodian of the plan's assets.

Hendricks also offers non-qualified 457(b) benefit plans to certain eligible employees. For more information on the plans, participants should contact the Administrative Offices (ATTN: Vice President of Finance/CFO), at PO Box 409, Danville, IN, 46122.

# HENDRICKS REGIONAL HEALTH

## NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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### Funding Policy

The contribution requirements of plan members are established by the written agreement between the Board of Trustees and the Plan Administrator. Plan members may elect to contribute to the plan. Hendricks will contribute to each plan members' elective deferrals a matching amount up to a maximum percentage of each participant's annual compensation, to be determined at the discretion of the Board of Trustees. In 2018 and 2017, the discretionary match was 50% of the plan member's deferral up to 10% of the eligible compensation. The discretionary employer contribution was 2% of eligible compensation for 2018 and 2017.

Hendricks' contributions to the plans for 2018 and 2017 were approximately \$6,031,000 and \$3,269,000, respectively.

### **11. RENTAL EXPENSE**

Hendricks has leases expiring at various times through 2024. Leases that do not meet the criteria for capitalization are classified as operating leases with related rentals charged to operating as incurred. Total rent expense, including cancelable and non-cancelable leases, for 2018 and 2017 was approximately \$3,010,000 and \$3,238,000, respectively.

Minimum future payments on non-cancelable leases for the years following December 31, 2018 are:

Year Ending December 31,	
2019	\$ 344,267
2020	312,080
2021	128,789
2022	54,822
2023	35,487
Thereafter	<u>7,455</u>
	<u>\$ 882,900</u>

Rent expense for facilities and equipment under the long-term care leases discussed in Note 1 was approximately \$39,331,000 and \$34,323,000 for 2018 and 2017, respectively. Annual rent expense through 2020 is scheduled to approximate \$30,000,000 under these leases.

### **12. CONCENTRATION OF CREDIT RISK**

Hendricks corporate office and its hospital facilities are located in Danville, Indiana. Other outpatient, ambulatory care and physician services are located in Avon, Plainfield, Lizton, Bainbridge, Greencastle and Brownsburg, Indiana. Hendricks grants credit without collateral to its patients, most of who are residents of the County and are insured under third-party payor agreements.

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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The mix of receivables and revenue from patients and third-party payors as of December 31, 2018 and 2017 was as follows:

	Receivables		Revenues	
	2018	2017	2018	2017
Medicare	28%	29%	44%	40%
Medicaid	15%	16%	10%	10%
Anthem/Blue Cross	17%	13%	22%	25%
Commercial and other	23%	24%	20%	21%
Self-Pay	17%	18%	4%	4%
	<u>100%</u>	<u>100%</u>	<u>100%</u>	<u>100%</u>

Under the long-term care leases, Hendricks recorded expenses related to purchased services from the managers of the facilities of approximately \$168,096,000 and \$142,030,000 during 2018 and 2017, respectively. Amounts due to the managers included in current liabilities as of December 31, 2018 and 2017 approximated \$70,081,000 and \$52,540,000, respectively.

# HENDRICKS REGIONAL HEALTH

## NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

### 13. BLENDED COMPONENT UNITS

Hendricks includes its blended component units in its reporting entity. Condensed component unit information for all of its blended component units as of and for the years ended December 31, 2018 and 2017 is as follows:

	2018			
	Foundation	HAMCO	HRH Health Services	HRH Real Estate
<b>Balance sheet</b>				
Assets				
Current assets	\$ 2,037,516	\$ 2,534,843	\$ 6,047,858	\$ 98,021
Capital assets	-0-	736,104	-0-	6,084,139
Total assets	\$ 2,037,516	\$ 3,270,947	\$ 6,047,858	\$ 6,182,160
Liabilities				
Other current liabilities	\$ 26,922	\$ 716,262	\$ 10,083	\$ -0-
Total liabilities	26,922	716,262	10,083	-0-
Net position				
Net investment in capital assets	-0-	736,104	-0-	6,084,139
Unrestricted	2,010,594	1,818,581	6,037,775	98,021
Total net position	2,010,594	2,554,685	6,037,775	6,182,160
Total liabilities and net position	\$ 2,037,516	\$ 3,270,947	\$ 6,047,858	\$ 6,182,160
<b>Statement of Revenues and Expenses and Changes in Net Position</b>				
Revenues	\$ -0-	\$ 4,477,863	\$ 195,147	\$ 78,479
Expenses				
Depreciation	-0-	154,047	-0-	-0-
Other expenses	443,993	3,038,945	208,537	33
Total expenses	443,993	3,192,992	208,537	33
Operating income (loss)	(443,993)	1,284,871	(13,390)	78,446
Nonoperating revenues (expenses)	929,346	3,573	-0-	-0-
Excess revenues over expenses	485,353	1,288,444	(13,390)	78,446
Contributions (distributions)	-0-	(1,282,147)	3,000,000	-0-
Change in net position	485,353	6,297	2,986,610	78,446
Net position, beginning of year	1,525,241	2,548,388	3,051,165	6,103,714
Net position, end of year	\$ 2,010,594	\$ 2,554,685	\$ 6,037,775	\$ 6,182,160
2018				
<hr/>				
	Foundation	HAMCO	HRH Health Services	HRH Real Estate
<b>Statement of cash flows</b>				
Cash provided by (used in)				
Operating activities	\$ 264,244	\$ 154,217	\$ (31,021)	\$ 78,446
Capital and related financing activities	-0-	(172,148)	3,000,000	-0-
Investing activities	7,704	1	-0-	-0-
Change	271,948	(17,930)	2,968,979	78,446
Cash and cash equivalents, beginning of year	1,161,071	17,930	3,050,329	19,575
Cash and cash equivalents, end of year	\$ 1,433,019	\$ -0-	\$ 6,019,308	\$ 98,021

# HENDRICKS REGIONAL HEALTH

## NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

	2017			
	Foundation	HAMCO	HRH Health Services	HRH Real Estate
<b>Balance sheet</b>				
Assets				
Current assets	\$ 1,770,837	\$ 2,695,389	\$ 3,052,647	\$ 19,575
Capital assets	-0-	718,003	-0-	6,084,139
Total assets	\$ 1,770,837	\$ 3,413,392	\$ 3,052,647	\$ 6,103,714
Liabilities				
Other current liabilities	\$ 245,596	\$ 865,004	\$ 1,482	\$ -0-
Total liabilities	245,596	865,004	1,482	-0-
Net position				
Net investment in capital assets	-0-	718,003	-0-	6,084,139
Unrestricted	1,525,241	1,830,385	3,051,165	19,575
Total net position	1,525,241	2,548,388	3,051,165	6,103,714
Total liabilities and net position	\$ 1,770,837	\$ 3,413,392	\$ 3,052,647	\$ 6,103,714
<b>Statement of Revenues and Expenses and Changes in Net Position</b>				
Revenues	\$ -0-	\$ 4,145,686	\$ 103,397	\$ 19,575
Expenses				
Depreciation	451	312,059	-0-	-0-
Other expenses	404,448	2,185,659	52,232	-0-
Total expenses	404,899	2,497,718	52,232	-0-
Operating income (loss)	(404,899)	1,647,968	51,165	19,575
Nonoperating revenues (expenses)	856,468	16,671	-0-	-0-
Excess revenues over expenses	451,569	1,664,639	51,165	19,575
Dividends	-0-	(1,639,200)	3,000,000	6,084,139
Change in net position	451,569	25,439	3,051,165	6,103,714
Net position, beginning of year	1,073,672	2,522,949	-0-	-0-
Net position, end of year	\$ 1,525,241	\$ 2,548,388	\$ 3,051,165	\$ 6,103,714

	2017			
	Foundation	HAMCO	HRH Health Services	HRH Real Estate
<b>Statement of cash flows</b>				
Cash provided by (used in)				
Operating activities	\$ 587,848	\$ (2,342,878)	\$ 50,329	\$ 19,575
Capital and related financing activities	-0-	1,888,522	3,000,000	-0-
Investing activities	(52,207)	1	-0-	-0-
Change	535,641	(454,355)	3,050,329	19,575
Cash equivalents, beginning of year	625,430	472,285	-0-	-0-
Cash equivalents, end of year	\$ 1,161,071	\$ 17,930	\$ 3,050,329	\$ 19,575

Separate financial information for the component units can be obtained by contacting the Administrative Offices (ATTN: Vice President of Finance/CFO), at PO Box 409, Danville, IN, 46122.

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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#### 14. SELF INSURANCE

Hendricks is self-insured for employee health claims. A third party administrator processes the claims for Hendricks who maintains an estimated liability for the amount of claims incurred but not reported. Hendricks also maintains reinsurance including a stop loss for individual employees over \$300,000 a year with no aggregate limit. Substantially all employees are covered for major medical benefits. The total health claims expense was approximately \$14,719,000 and \$16,659,000 for 2018 and 2017, respectively.

Claim expenditures and liabilities are reported when it is probable that a loss has occurred and the amount of the loss can be reasonably estimated. These losses include an estimate of claims that have been incurred but not reported. Changes in balance of health claim liabilities during the past two years are as follows:

	<u>2018</u>	<u>2017</u>
Unpaid claims, beginning of year	\$ 2,795,475	\$ 2,263,062
Incurred claims and changes in estimates	14,718,635	16,659,195
Claim payments	<u>(15,439,562)</u>	<u>(16,126,782)</u>
Unpaid claims, end of year	<u>\$ 2,074,548</u>	<u>\$ 2,795,475</u>

As of December 31, 2018 and 2017, Hendricks had \$-0- of reinsurance recovery receivables for stop loss claims netted against the unpaid claims liability.

#### 15. RESTRICTED NON-EXPENDABLE NET POSITION

Restricted nonexpendable net position includes non-controlling interests, which represents the portion that is owned by investors that are external to and not included in the consolidated financial statements, as described below:

	<u>2018</u>	<u>2017</u>
Non-controlling interests	<u>\$ 1,277,342</u>	<u>\$ 1,274,195</u>

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

Hendricks consolidates as a blended component unit, HAMCO, in which external investors have a minority, non-controlling interest. Total net position for Hendricks' controlling and the non-controlling interest is described below:

	Controlling Interest	Non-controlling Interest	Total
Net position, December 31, 2016	\$ 1,261,474	\$ 1,261,475	\$ 2,522,949
Operating income	823,984	823,984	1,647,968
Nonoperating income	8,335	8,336	16,671
Dividends	(819,600)	(819,600)	(1,639,200)
Change in net position	12,719	12,720	25,439
Net position, December 31, 2017	1,274,193	1,274,195	2,548,388
Operating income	642,782	642,089	1,284,871
Nonoperating income	1,787	1,786	3,573
Dividends	(641,419)	(640,728)	(1,282,147)
Change in net position	3,150	3,147	6,297
Net position, December 31, 2018	\$ 1,277,343	\$ 1,277,342	\$ 2,554,685

#### 16. RECENTLY ISSUED ACCOUNTING STANDARDS

In January 2017, the Governmental Accounting Standards Board (GASB) issued GASB Statement No. 84, *Fiduciary Activities*, which will be effective for periods beginning after December 15, 2018. This statement establishes criteria for identifying fiduciary activities of all state and local governments. The focus of the criteria generally is on (1) whether a government is controlling the assets of the fiduciary activity and (2) the beneficiaries with whom a fiduciary relationship exists. Separate criteria are included to identify fiduciary component units and postemployment benefit arrangements that are fiduciary activities.

In June 2017, GASB issued GASB Statement No. 87, *Leases*, which will be effective for periods beginning after December 15, 2019. This statement requires recognition of certain lease assets and liabilities for leases that previously were classified as operating leases and recognized as inflows of resources or outflows of resources based on the payment provisions of the contract. It establishes a single model for lease accounting based on the foundational principle that leases are financings of the right to use an underlying asset.

In March 2018, GASB issued GASB Statement No. 88, *Certain Disclosures Related to Debt, including Direct Borrowings and Direct Placements*, which will be for effective for periods beginning after June 15, 2018. This statement requires that additional essential information related to debt be disclosed in notes to financial statements, including unused lines of credit; assets pledged as collateral for the debt; and terms specified in debt agreements related to significant events of default with finance-related consequences, significant termination events with finance-related consequences, and significant subjective acceleration clauses. This statement also requires that existing and additional information be provided for direct borrowings and direct placements of debt separately from other debt.

## HENDRICKS REGIONAL HEALTH

### NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017

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In June 2018, GASB issued GASB Statement No. 89, *Accounting for Interest Cost Incurred before the End of a Construction Period*, which will be effective for periods beginning after December 15, 2019. This statement requires that interest cost incurred before the end of a construction period be recognized as an expense in the period in which the cost is incurred for financial statements prepared using the economic resources measurement focus. As a result, interest cost incurred before the end of a construction period will not be included in the historical cost of a capital asset reported in a business-type activity or enterprise fund.

Hendricks is presently evaluating the impact of these standards on its future consolidated financial statements.



**REQUIRED SUPPLEMENTARY INFORMATION**

# HENDRICKS REGIONAL HEALTH

## REQUIRED SUPPLEMENTARY INFORMATION DECEMBER 31, 2018

### SCHEDULE OF CHANGES IN NET PENSION LIABILITY AND RELATED RATIOS

	2018	2017	2016	2015	2014
Total pension liability					
Service cost	\$ 354,904	\$ 449,870	\$ 405,170	\$ 466,554	\$ 452,071
Interest	4,222,130	4,059,028	3,994,066	3,737,349	3,636,062
Change of benefit terms	-0-	-0-	246,372	-0-	-0-
Differences between expected and actual experience	940,439	271,415	(1,146,174)	659,468	-0-
Changes of assumptions	(124,468)	(248,774)	1,389,220	1,893,100	-0-
Benefit payments	(2,332,950)	(2,040,835)	(2,361,119)	(4,183,243)	(1,321,007)
Net change in pension liability	3,060,055	2,490,704	2,527,535	2,573,228	2,767,126
Total pension liability - beginning	59,047,848	56,557,144	54,029,609	51,456,381	48,689,255
Total pension liability - ending (a)	<u>\$ 62,107,903</u>	<u>\$ 59,047,848</u>	<u>\$ 56,557,144</u>	<u>\$ 54,029,609</u>	<u>\$ 51,456,381</u>
Plan fiduciary net position					
Benefit payments	\$ (2,332,950)	\$ (2,040,835)	\$ (2,361,119)	\$ (4,183,243)	\$ (1,321,007)
Net investment income	(4,241,637)	10,340,867	4,239,435	203,831	4,722,125
Administrative expenses	(135,542)	(144,474)	(140,674)	(229,428)	(71,215)
Other	16,907	17,280	15,894	8,498	-0-
Net change in plan fiduciary net position	(6,693,222)	8,172,838	1,753,536	(4,200,342)	3,329,903
Plan fiduciary net position - beginning	71,801,691	63,628,853	61,875,317	66,075,659	62,745,756
Plan fiduciary net position - ending (b)	<u>\$ 65,108,469</u>	<u>\$ 71,801,691</u>	<u>\$ 63,628,853</u>	<u>\$ 61,875,317</u>	<u>\$ 66,075,659</u>
Net pension (asset) liability (a) - (b)	<u>\$ (3,000,566)</u>	<u>\$ (12,753,843)</u>	<u>\$ (7,071,709)</u>	<u>\$ (7,845,708)</u>	<u>\$ (14,619,278)</u>
Plan fiduciary net position as a % of total pension liability	104.83%	121.60%	112.50%	114.52%	128.41%
Covered payroll	\$ 15,261,212	\$ 15,572,358	\$ 16,057,360	\$ 16,766,172	\$ 17,051,344
Net pension liability as a % of covered payroll	-19.66%	-81.90%	-44.04%	-46.79%	-85.74%

\* The schedule is presented to illustrate the requirement to show information for 10 years. However, until a full 10 year trend is compiled, Hendricks will present information for those years for which information is available.

## HENDRICKS REGIONAL HEALTH

### REQUIRED SUPPLEMENTARY INFORMATION DECEMBER 31, 2018

#### SCHEDULE OF CONTRIBUTIONS

	Actuarially Determined Contribution	Employer Contribution	Contribution Deficiency (Excess)	Covered Payroll	Contributions as % of Covered Payroll
12/31/2018	\$ -0-	\$ -0-	\$ -0-	\$ 15,261,212	0.00%
12/31/2017	\$ -0-	\$ -0-	\$ -0-	\$ 15,572,358	0.00%
12/31/2016	\$ -0-	\$ -0-	\$ -0-	\$ 16,057,360	0.00%
12/31/2015	\$ -0-	\$ -0-	\$ -0-	\$ 16,766,172	0.00%
12/31/2014	\$ -0-	\$ -0-	\$ -0-	\$ 17,051,344	0.00%
12/31/2013	\$ -0-	\$ -0-	\$ -0-	\$ 17,062,098	0.00%
12/31/2012	\$ 1,862,492	\$ -0-	\$ 1,862,492	\$ 76,121,054	0.00%
12/31/2011	\$ 1,613,170	\$ 750,000	\$ 863,170	\$ 74,645,517	1.00%
12/31/2010	\$ 1,737,544	\$ 3,165,000	\$ (1,427,456)	\$ 72,800,013	4.35%
12/31/2009	\$ 2,235,559	\$ 3,000,000	\$ (764,441)	\$ 67,826,899	4.42%

#### Notes to Schedule

Valuation date: Actuarially determined contribution rates are calculated as of January 1.

#### Methods and assumptions used to determine contribution rates:

Actuarial cost method	Entry age normal
Amortization method	15 year level dollar
Remaining amortization period	15 year period
Asset valuation method	Market value of assets
Salary increases	3.00%
Investment rate of return	7.25%
Retirement age	65 and 5 years of participation
Mortality	RP-2014 Sex Distinct Mortality with generational improvements beginning in 2006 based on the Social Security Administration's assumptions included in the 2018 Trustee's Report