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October 19, 2015

Board of Trustees
Rush Memorial Hospital
P.O. Box 608
1300 N. Main Street
Rushville, IN 46173

We have reviewed the audit report prepared by Blue & Co., LLC, Independent Public Accountants, for the period January 1, 2014 to December 31, 2014. In our opinion, the audit report was prepared in accordance with the guidelines established by the State Board of Accounts. Per the Independent Public Accountants' opinion, the financial statements included in the report present fairly the financial condition of the Rush Memorial Hospital, as of December 31, 2014 and the results of its operations for the period then ended, on the basis of accounting described in the report.

The Independent Public Accountants' 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



RUSH MEMORIAL
H o s p i t a l

CONSOLIDATED FINANCIAL STATEMENTS
AND
REQUIRED SUPPLEMENTARY INFORMATION

DECEMBER 31, 2014

CPAs / ADVISORS

 **blue**

RUSH MEMORIAL HOSPITAL

TABLE OF CONTENTS DECEMBER 31, 2014

	Page
Report of Independent Auditors	1
Required Supplementary Information	
Management's Discussion and Analysis (Unaudited)	i
Consolidated Financial Statements	
Consolidated Balance Sheet	3
Consolidated Statement of Revenues, Expenses and Changes in Net Position	4
Consolidated Statement of Cash Flows.....	5
Notes to Consolidated Financial Statements	6



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REPORT OF INDEPENDENT AUDITORS

Board of Trustees
Rush Memorial Hospital
Rushville, Indiana

Report on the Consolidated Financial Statements

We have audited the accompanying consolidated financial statements of Rush Memorial Hospital (the Hospital) which comprise the consolidated balance sheet as of December 31, 2014, and the related consolidated statements of revenues, expenses and changes in net position, and cash flows for the year then ended, and the related notes to the consolidated financial statements.

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 audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the Guidelines for Audits of County and City Hospitals by Independent Certified Public Accountants, issued by the Indiana State Board of Accounts. Those standards require that we plan and perform the audit 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 the Hospital's 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 the Hospital's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the consolidated financial statements.

Board of Trustees
Rush Memorial Hospital
Rushville, Indiana

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

Opinion

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of the Hospital as of December 31, 2014, and the results of its operations, changes in its net position and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Change in Consolidated Financial Statement Presentation

As discussed in Note 2 to the consolidated financial statements, management determined that its component unit, Rush Memorial Hospital Foundation, Inc., is a discrete component unit for financial reporting purposes. Accordingly, the Hospital displays its discrete component unit in a separate column throughout the accompanying 2014 consolidated financial statements. Our opinion is not modified with respect to that matter.

Report on Summarized Comparative Information

We have previously audited the Hospital's 2013 consolidated financial statements, and we expressed an unmodified opinion on those audited consolidated financial statements in our report dated July 28, 2014. In our opinion, the summarized comparative information presented herein as of and for the year ended December 31, 2013, is consistent, in all material respects, with the audited consolidated financial statements from which it has been derived.

Report on Required Supplementary Information

Accounting principles generally accepted in the United States of America require that Management's Discussion and Analysis 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
July 27, 2015

REQUIRED SUPPLEMENTARY INFORMATION

RUSH MEMORIAL HOSPITAL

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013 AND 2012)

This section of Rush Memorial Hospital's (the Hospital) annual consolidated financial statements presents background information and management's discussion and analysis (MD&A) of the Hospital's consolidated financial performance during the year ended December 31, 2014. This MD&A does include a discussion and analysis of the activities and results of the Hospital's discrete component unit, Rush Memorial Hospital Foundation, Inc. Please read it in conjunction with the Hospital's consolidated financial statements that follow this MD&A.

FINANCIAL HIGHLIGHTS

- The Hospital's net position increased approximately \$1,603,000 or 11% in 2014 compared to approximately \$1,662,000 or 13% in 2013.
- The Hospital reported an operating income of approximately \$414,000 for 2014, representing an increase of approximately \$602,000 in comparison to the year 2013 results.
- The Hospital's investment in facilities and equipment increased in 2014 by adding approximately \$4,089,000 in property and equipment. The Hospital disposed of capital assets with a net book value of approximately \$9,000 during the year. These items combined with depreciation expense of approximately \$1,433,000 resulted in net capital assets increasing approximately \$2,647,000 from the prior year.
- The Hospital's current assets for cash and investments decreased approximately \$1,374,000 while patient accounts receivable increased approximately \$2,550,000 as a result of a conversion in billing and electronic health record systems during 2014.
- The Hospital has agreements to lease the operations of multiple long-term care facilities. Long-term care services generated approximately \$17,267,000 and \$13,976,000 in gross patient service revenue during 2014 and 2013, respectively.

USING THIS ANNUAL REPORT

The Hospital's 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 activities and the financial position of the Hospital.

The Consolidated Balance Sheet includes all of the Hospital's assets and liabilities and provides information about the nature and amounts of investments in resources (assets) and the obligations to Hospital 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.

RUSH MEMORIAL HOSPITAL

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013 AND 2012)

Finally, the Consolidated Statement of Cash Flows' purpose is to provide information about the Hospital's 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 the Hospital's finances is, "Is the Hospital as a whole better or worse off as a result of the year's activities?" The consolidated balance sheet and the consolidated statement of revenues, expenses and changes in net position report information about the Hospital's resources and its activities in a way that helps answer this question. These statements include all restricted and unrestricted assets and all liabilities using the accrual basis of accounting. All of the current year's revenues and expenses are taken into account regardless of when cash is received or paid.

This statement reports the Hospital's net position and changes in it. Think of the Hospital's net position, the difference between assets and liabilities, as one way to measure the Hospital's financial health, or financial position. Over time, increases or decreases in the Hospital's net position are one indicator of whether its financial health is improving or deteriorating. Consider other nonfinancial factors, however, such as changes in the Hospital's patient base and measures of the quality of service it provides to the community, as well as local economic factors to assess the overall health of the Hospital.

Table 1: Consolidated Balance Sheet

Current assets increased approximately \$1,250,000 in 2014 mainly due to an increase in patient accounts receivable due to a billing system conversion. Assets whose use is limited increased approximately \$481,000 in 2014 compared to approximately \$1,702,000 in 2013. Capital assets increased approximately \$2,647,000 compared to approximately \$1,291,000 in 2013 based on the Hospital's capital additions.

Current liabilities decreased by approximately \$65,000 in 2014 and increased approximately \$5,410,000 in 2013 mainly related to the long-term care activities. Long-term debt increased approximately \$2,840,000 in 2014 due to issuance of new debt for the purchase and renovation real property and equipment and decreased approximately \$601,000 in 2013 due to principal payments of existing debt.

Net position increased approximately \$1,603,000 in 2014 and approximately \$1,662,000 in 2013. The increase in 2014 relates to favorable operating income, contributions and investment return.

Total assets in 2013 increased approximately \$6,471,000 compared to 2012. The increase was primarily in current assets such as cash and investments. Total liabilities increased approximately \$4,809,000 between 2012 and 2013 mainly due to accounts payable related to long-term care services. Net position increased \$1,662,000 between 2012 and 2013 based on overall operations.

RUSH MEMORIAL HOSPITAL

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013 AND 2012)

	2014	2013	2014-2013 Change	2012	2013-2012 Change
Assets					
Current assets	\$ 17,023,269	\$ 15,773,206	\$ 1,250,063	\$ 12,293,867	\$ 3,479,339
Assets whose use is limited	3,637,504	3,156,715	480,789	1,454,604	1,702,111
Capital assets	13,899,434	11,252,698	2,646,736	9,961,846	1,290,852
Other assets	28,920	28,903	17	29,998	(1,095)
Total assets	<u>\$ 34,589,127</u>	<u>\$ 30,211,522</u>	<u>\$ 4,377,605</u>	<u>\$ 23,740,315</u>	<u>\$ 6,471,207</u>
Liabilities					
Current liabilities	\$ 13,187,410	\$ 13,252,841	\$ (65,431)	\$ 7,843,045	\$ 5,409,796
Long-term debt	5,538,419	2,698,137	2,840,282	3,298,728	(600,591)
Total liabilities	18,725,829	15,950,978	2,774,851	11,141,773	4,809,205
Net position					
Net investment in capital assets	7,580,877	7,961,270	(380,393)	6,082,945	1,878,325
Restricted	3,491,833	2,838,516	653,317	1,171,814	1,666,702
Unrestricted	4,790,588	3,460,758	1,329,830	5,343,783	(1,883,025)
Total net position	<u>15,863,298</u>	<u>14,260,544</u>	<u>1,602,754</u>	<u>12,598,542</u>	<u>1,662,002</u>
Total liabilities and net position	<u>\$ 34,589,127</u>	<u>\$ 30,211,522</u>	<u>\$ 4,377,605</u>	<u>\$ 23,740,315</u>	<u>\$ 6,471,207</u>

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

The Hospital had positive performance in 2014 with a return on equity of 10.1%. This remains comparable to return on equity of 11.7% in 2013 and 11.8% in 2012.

Total revenues increased approximately \$5,852,000 and \$8,491,000 in 2014 and 2013, respectively, as utilization in inpatient and outpatient services increased. Long-term care gross services revenue was approximately \$17,267,000 in 2014 and \$13,976,000 in 2013.

Expenses increased by approximately \$5,250,000 and \$9,446,000 in 2014 and 2013, respectively, as purchased services and other expenses related to long-term care services comprised the majority of the current year increase.

Nonoperating revenue (expense), net decreased by approximately \$661,000 in 2014 and increased by approximately \$1,128,000 in 2013 mainly due to contributions, investment income and other nonoperating revenue. Interest expense was approximately \$275,000 in 2014 compared to approximately \$204,000 from 2013.

RUSH MEMORIAL HOSPITAL

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013 AND 2012)

	2014	2013	2014-2013 Change	2012	2013-2012 Change
Revenues					
Net patient service revenue	\$ 41,894,801	\$ 36,172,011	\$ 5,722,790	\$ 27,451,560	\$ 8,720,451
Other operating revenue	1,023,056	893,799	129,257	1,123,284	(229,485)
Total revenue	<u>42,917,857</u>	<u>37,065,810</u>	<u>5,852,047</u>	<u>28,574,844</u>	<u>8,490,966</u>
Expenses					
Salary and benefits	15,405,765	13,727,803	1,677,962	12,722,163	1,005,640
Purchased services and medical fees	13,030,380	10,963,666	2,066,714	5,941,557	5,022,109
Medical and other supplies	4,666,477	3,699,812	966,665	3,226,260	473,552
Depreciation	1,433,527	1,208,261	225,266	1,207,369	892
Other expenses	7,967,805	7,654,255	313,550	4,710,236	2,944,019
Total operating expenses	<u>42,503,954</u>	<u>37,253,797</u>	<u>5,250,157</u>	<u>27,807,585</u>	<u>9,446,212</u>
Operating income (loss)	413,903	(187,987)	601,890	767,259	(955,246)
Non-operating revenue (expense), net	1,188,851	1,849,989	(661,138)	722,046	1,127,943
Change in net position	<u>\$ 1,602,754</u>	<u>\$ 1,662,002</u>	<u>\$ (59,248)</u>	<u>\$ 1,489,305</u>	<u>\$ 172,697</u>

CONSOLIDATED STATEMENT 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 "Where did cash come from?" "What was cash used for?" and "What was the change in cash balance during the reporting period?"

	2014	2013	2014-2013 Change	2012	2013-2012 Change
Cash flow from activities					
Operating	\$ (900,582)	\$ 3,336,312	\$ (4,236,894)	\$ 2,386,924	\$ 949,388
Noncapital financing	1,408,884	2,027,116	(618,232)	135,279	1,891,837
Capital and related financing	(1,365,979)	(161,729)	(1,204,250)	(1,641,481)	1,479,752
Investing	80,327	348,111	(267,784)	398,936	(50,825)
Change in cash equivalents	<u>\$ (777,350)</u>	<u>\$ 5,549,810</u>	<u>\$ (6,327,160)</u>	<u>\$ 1,279,658</u>	<u>\$ 4,270,152</u>

Total cash and cash equivalents decreased approximately \$777,000 in 2014. Operating activities decreased cash and cash equivalents by approximately \$901,000 during 2014 mainly from an increase in receivables. Noncapital financing provided approximately \$1,409,000 of cash and cash equivalents due to contributions. Capital and related financing decreased cash and cash equivalents by approximately \$1,366,000 during 2014 mainly from the purchase of capital assets. Investing activities increased cash and cash equivalents by approximately \$80,000 due to investment activity during the year.

Total cash and cash equivalents increased approximately \$5,550,000 in 2013. Operating activities generated cash and cash equivalents of approximately \$3,336,000 during 2013 mainly from operations. Noncapital financing provided approximately \$2,027,000 of cash and cash equivalents. Capital and related financing decreased cash and cash equivalents by approximately \$162,000 during 2013 mainly as the result of debt service payments. Investing activities increased cash and cash equivalents by approximately \$348,000 due to investment activity during the year.

RUSH MEMORIAL HOSPITAL

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013 AND 2012)

Cash equivalents increased by approximately \$1,280,000 in 2012 as capital and related financing used cash of approximately \$1,641,000 while other categories provided cash equivalents of approximately \$2,921,000.

SOURCES OF REVENUE

During 2014, the Hospital 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 65% of the Hospital's gross revenues in 2014. Following is a table of major sources of gross patient revenues, including long-term care, for the past three years:

<u>Payor Mix</u>	<u>2014</u>	<u>2013</u>	<u>2012</u>
Medicare	40%	42%	47%
Medicaid	25%	24%	14%
Blue Cross/Anthem	15%	13%	16%
Commercial insurance	12%	12%	13%
Self-pay	8%	9%	10%
Total	<u>100%</u>	<u>100%</u>	<u>100%</u>

The Hospital entered into agreements with third-party payers, including government programs and managed care health plans, under which payments for healthcare services provided to patients are based upon predetermined rates or discounts from gross charges. Provisions have been made in the consolidated financial statements for contractual adjustments, which represent the difference between the standard charges for services and the actual or estimated payment.

CAPITAL ASSETS

During 2014, the Hospital's capital assets increased approximately \$2,647,000 net of asset disposals and depreciation compared to approximately \$1,291,000 in 2013. The change in capital assets is outlined in the following table:

	<u>2014</u>	<u>2013</u>	<u>2014-2013 Change</u>	<u>2012</u>	<u>2013-2012 Change</u>
Land and improvements	\$ 514,714	\$ 507,141	\$ 7,573	\$ 452,435	\$ 54,706
Buildings and improvements	16,074,116	13,994,177	2,079,939	12,971,018	1,023,159
Equipment	14,757,495	12,161,246	2,596,249	11,363,413	797,833
Construction in progress	957	950,871	(949,914)	401,276	549,595
Total capital assets	<u>31,347,282</u>	<u>27,613,435</u>	<u>3,733,847</u>	<u>25,188,142</u>	<u>2,425,293</u>
Accumulated depreciation	17,447,848	16,360,737	1,087,111	15,226,296	1,134,441
Capital assets, net	<u>\$ 13,899,434</u>	<u>\$ 11,252,698</u>	<u>\$ 2,646,736</u>	<u>\$ 9,961,846</u>	<u>\$ 1,290,852</u>

RUSH MEMORIAL HOSPITAL

MANAGEMENT'S DISCUSSION AND ANALYSIS (UNAUDITED) DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013 AND 2012)

The Hospital continues to increase equipment resources to meet the needs of the community. The Hospital strives to replace equipment as it becomes obsolete as well as upgrade equipment as needed. More detailed information about the Hospital's capital assets is presented in the notes to the consolidated financial statements.

DEBT

Total long-term debt (including current portion) increased from approximately \$3,291,000 to \$6,319,000 in 2014 based on new borrowings of \$3,750,000 and principal payments of approximately \$723,000. More detailed information about the Hospital's long-term debt is presented in the notes to the consolidated financial statements.

ECONOMIC OUTLOOK

Management believes that the health care industry's and the Hospital's operating margins will continue to be under pressure because of changes in payor mix and growth in operating expenses that are in excess of the increases in contractually arranged and legally established payments received for services rendered. Another factor that poses a challenge to management is the increasing competitive market for the delivery of health care services. The ongoing challenge facing the Hospital 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 cost factor affecting the Hospital is the increases in labor costs due to the increasing competition for quality health care workers.

CONTACTING THE HOSPITAL'S FINANCIAL MANAGEMENT

This financial report is designed to provide our patients, suppliers, taxpayers, and creditors with a general overview of the Hospital's finances and to show the Hospital's accountability for the money it receives. If you have questions about this report or need additional financial information, contact the Hospital Controller's Office, PO Box 125, Rushville, IN, 46173.

RUSH MEMORIAL HOSPITAL
CONSOLIDATED BALANCE SHEET
DECEMBER 31, 2014
(WITH COMPARATIVE TOTALS FOR 2013)

	2014			2013	
	Total Hospital	Foundation	Eliminations	Total Reporting Entity	Total Reporting Entity
ASSETS					
Current assets					
Cash and cash equivalents	\$ 5,537,371	\$ 17,210	\$ -0-	\$ 5,554,581	\$ 6,835,700
Investments	7,337	82,779	-0-	90,116	83,475
Patient accounts receivable, net of allowance for uncollectible accounts of \$1,644,000 in 2014 and \$1,597,000 in 2013	8,502,077	-0-	-0-	8,502,077	5,952,137
Other current assets	2,874,395	2,100	-0-	2,876,495	2,901,894
Total current assets	16,921,180	102,089	-0-	17,023,269	15,773,206
Assets whose use is limited					
Internally designated	145,671	-0-	-0-	145,671	318,199
Donor restricted	3,197,748	294,085	-0-	3,491,833	2,838,516
Total assets whose use is limited	3,343,419	294,085	-0-	3,637,504	3,156,715
Capital assets					
Land	188,708	-0-	-0-	188,708	188,708
Depreciable capital assets, net	13,529,803	180,923	-0-	13,710,726	11,063,990
Total capital assets, net	13,718,511	180,923	-0-	13,899,434	11,252,698
Other assets					
	28,920	-0-	-0-	28,920	28,903
Total assets	<u>\$ 34,012,030</u>	<u>\$ 577,097</u>	<u>\$ -0-</u>	<u>\$ 34,589,127</u>	<u>\$ 30,211,522</u>
LIABILITIES AND NET POSITION					
Current liabilities					
Accounts payable and accrued expenses	\$ 6,977,644	\$ -0-	\$ -0-	\$ 6,977,644	\$ 7,024,917
Accrued wages and related liabilities	1,489,661	-0-	-0-	1,489,661	1,314,992
Lines of credit	3,283,111	-0-	-0-	3,283,111	3,311,935
Current portion of long-term debt	780,138	-0-	-0-	780,138	593,291
Estimated third-party settlements	656,856	-0-	-0-	656,856	1,007,706
Total current liabilities	13,187,410	-0-	-0-	13,187,410	13,252,841
Long term debt, net of current portion					
	5,538,419	-0-	-0-	5,538,419	2,698,137
Total liabilities	18,725,829	-0-	-0-	18,725,829	15,950,978
Net position					
Net investment in capital assets	7,399,954	180,923	-0-	7,580,877	7,961,270
Restricted					
Expendable for various purposes upon donors' specific restriction	2,000,000	294,085	-0-	2,294,085	1,616,995
Nonexpendable donor restricted	1,197,748	-0-	-0-	1,197,748	1,221,521
Total restricted net position	3,197,748	294,085	-0-	3,491,833	2,838,516
Unrestricted	4,688,499	102,089	-0-	4,790,588	3,460,758
Total net position	15,286,201	577,097	-0-	15,863,298	14,260,544
Total liabilities and net position	<u>\$ 34,012,030</u>	<u>\$ 577,097</u>	<u>\$ -0-</u>	<u>\$ 34,589,127</u>	<u>\$ 30,211,522</u>

See accompanying notes to consolidated financial statements.

RUSH MEMORIAL HOSPITAL

CONSOLIDATED STATEMENT OF REVENUES, EXPENSES AND CHANGES IN NET POSITION YEAR ENDED DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

	2014			2013	
	Total Hospital	Foundation	Eliminations	Total Reporting Entity	Total Reporting Entity
Revenues					
Net patient service revenue	\$ 41,900,531	\$ -0-	\$ (5,730)	\$ 41,894,801	\$ 36,172,011
Other operating revenue	1,023,056	-0-	-0-	1,023,056	893,799
Total revenues	42,923,587	-0-	(5,730)	42,917,857	37,065,810
Expenses					
Salaries and wages	12,675,354	-0-	25,840	12,701,194	11,668,056
Employee benefits	2,704,571	-0-	-0-	2,704,571	2,059,747
Medical professional fees	2,605,943	-0-	-0-	2,605,943	2,283,272
Purchased services	10,424,437	-0-	-0-	10,424,437	8,680,394
Medical supplies and drugs	4,224,985	-0-	-0-	4,224,985	3,295,989
Other supplies	441,492	-0-	-0-	441,492	403,823
Food	203,287	-0-	-0-	203,287	209,153
Facility and equipment leases	2,705,941	-0-	-0-	2,705,941	2,351,454
HAF Program	608,624	-0-	-0-	608,624	1,217,741
Depreciation	1,428,604	4,923	-0-	1,433,527	1,208,261
Insurance	1,027,865	-0-	-0-	1,027,865	807,974
Repairs and maintenance	624,570	-0-	-0-	624,570	514,007
Utilities	902,243	-0-	-0-	902,243	755,583
Other expenses	1,895,275	-0-	-0-	1,895,275	1,798,343
Total expenses	42,473,191	4,923	25,840	42,503,954	37,253,797
Operating income (loss)	450,396	(4,923)	(31,570)	413,903	(187,987)
Nonoperating revenues (expenses)					
Investment income	106,782	8,385	-0-	115,167	215,849
Interest expense	(275,103)	-0-	-0-	(275,103)	(204,323)
Contributions	1,252,612	256,098	(99,826)	1,408,884	2,140,116
Other nonoperating revenue (expense)	5,583	(197,076)	131,396	(60,097)	(301,653)
Nonoperating revenues (expenses), net	1,089,874	67,407	31,570	1,188,851	1,849,989
Change in net position	1,540,270	62,484	-0-	1,602,754	1,662,002
Net position					
Beginning of year	13,745,931	514,613	-0-	14,260,544	12,598,542
End of year	\$ 15,286,201	\$ 577,097	\$ -0-	\$ 15,863,298	\$ 14,260,544

See accompanying notes to consolidated financial statements.

RUSH MEMORIAL HOSPITAL

CONSOLIDATED STATEMENT OF CASH FLOWS YEAR ENDED DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

	2014			2013	
	Total Hospital	Foundation	Eliminations	Total Reporting Entity	Total Reporting Entity
Operating activities					
Cash received from patient services	\$ 38,391,117	\$ -0-	\$ (5,730)	\$ 38,385,387	\$ 36,035,165
Cash paid for salaries, wages and benefits	(15,205,256)	-0-	(25,840)	(15,231,096)	(13,638,867)
Cash paid to vendors and suppliers	(25,076,387)	(1,542)	-0-	(25,077,929)	(19,953,785)
Other receipts, net	1,023,056	-0-	-	1,023,056	893,799
Net cash flows from operating activities	(867,470)	(1,542)	(31,570)	(900,582)	3,336,312
Noncapital financing activities					
Contributions	1,252,612	256,098	(99,826)	1,408,884	2,027,116
Capital and related financing activities					
Proceeds from borrowings on long-term debt	3,750,000	-0-	-0-	3,750,000	-0-
Payments on long-term debt	(722,871)	-0-	-0-	(722,871)	(587,473)
Interest payments on long-term debt	(275,103)	-0-	-0-	(275,103)	(204,323)
Borrowings on line of credit	3,060,000	-0-	-0-	3,060,000	3,311,935
Payments on line of credit	(3,088,824)	-0-	-0-	(3,088,824)	-0-
Purchase of capital assets	(4,089,181)	-0-	-0-	(4,089,181)	(2,681,868)
Net cash flows from capital and related financing activities	(1,365,979)	-0-	-0-	(1,365,979)	(161,729)
Investing activities					
Investment income	106,782	8,385	-0-	115,167	215,849
Other nonoperating revenue (expense)	5,583	(197,076)	131,396	(60,097)	(301,653)
Proceeds from sale of investments	41,596	-0-	-0-	41,596	810,594
Purchase of investments	(9,346)	(6,993)	-0-	(16,339)	(376,679)
Net cash flows from investing activities	144,615	(195,684)	131,396	80,327	348,111
Net change in cash and cash equivalents	(836,222)	58,872	-0-	(777,350)	5,549,810
Cash and cash equivalents					
Beginning of year	8,379,523	261,742	-0-	8,641,265	3,091,455
End of year	<u>\$ 7,543,301</u>	<u>\$ 320,614</u>	<u>\$ -0-</u>	<u>\$ 7,863,915</u>	<u>\$ 8,641,265</u>
Reconciliation of cash and cash equivalents to the balance sheets					
In current assets					
Cash and cash equivalents	\$ 5,537,371	\$ 17,210	\$ -0-	\$ 5,554,581	\$ 6,835,700
Investments	-0-	9,319	-0-	9,319	7,836
In assets whose use is limited	2,005,930	294,085	-0-	2,300,015	1,797,729
Total cash and cash equivalents	<u>\$ 7,543,301</u>	<u>\$ 320,614</u>	<u>\$ -0-</u>	<u>\$ 7,863,915</u>	<u>\$ 8,641,265</u>
Reconciliation of operating income (loss) to net cash from operating activities					
Operating income (loss)	\$ 450,396	\$ (4,923)	\$ (31,570)	\$ 413,903	\$ (187,987)
Adjustments to reconcile operating income (loss) to net cash flows from operating activities					
Depreciation	1,428,604	4,923	-0-	1,433,527	1,208,261
Provision for bad debts	3,637,791	-0-	-0-	3,637,791	3,588,587
Changes in operating assets and liabilities					
Patient accounts receivable	(6,187,731)	-0-	-0-	(6,187,731)	(2,852,112)
Other current assets	26,999	(1,600)	-0-	25,399	(671,602)
Other assets	(75)	58	-0-	(17)	166,422
Accounts payable and accrued expenses	(47,273)	-0-	-0-	(47,273)	1,651,387
Accrued wages and related liabilities	174,669	-0-	-0-	174,669	88,936
Estimated third-party settlements	(350,850)	-0-	-0-	(350,850)	344,420
Net cash from operating activities	<u>\$ (867,470)</u>	<u>\$ (1,542)</u>	<u>\$ (31,570)</u>	<u>\$ (900,582)</u>	<u>\$ 3,336,312</u>
Noncash capital and noncapital financing activities					
Contribution of property	\$ -0-	\$ -0-	\$ -0-	\$ -0-	\$ 113,000

See accompanying notes to consolidated financial statements.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

1. SIGNIFICANT ACCOUNTING POLICIES

Organization and Reporting Entity

Rush Memorial Hospital (the Hospital) is a county owned facility operating under the Indiana County Hospital Law, Indiana Code (IC) 16-22. The Hospital provides inpatient, outpatient, emergency care as well as long-term care. The Board of County Commissioners of Rush County appoints the Governing Board of the Hospital and a financial benefit/burden relationship exists between Rush County (the County) and the Hospital. For these reasons, the Hospital is considered a component unit of the County.

The consolidated financial statements of Hospital 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 the Hospital and its discrete component unit. They do not purport to, and do not, present fairly the financial position of the County as of December 31, 2014 and 2013, the changes in its financial position or its cash flows for the years then ended.

For financial reporting purposes, the Hospital's reporting entity consists of the primary government and a component unit organization for which the nature and significance of its relationship with the primary government is such that exclusion would cause the reporting entity's financial statements to be misleading or incomplete, and it is financially accountable to the primary government.

The consolidated financial statements include certain prior year summarized comparative information in total but not by discrete component unit. Such information does not include sufficient detail to constitute a presentation in conformity with accounting principles generally accepted in the United States of America. Accordingly, such information should be read in conjunction with the Hospital's consolidated financial statements as of December 31, 2013 and for the year ended, from which the summarized information was derived.

Discrete Component Unit

Discretely presented component units are involved in activities of an operational nature independent from the government; their transactions are reported in a separate column in the consolidated financial statements to emphasize they are legally separate from the primary government. They are financially accountable to the primary government, or have relationships with the primary government such that exclusion would cause the reporting entity's financial statements to be misleading or incomplete. Rush Memorial Hospital Foundation, Inc. (the Foundation) is considered a discrete component unit for reporting purposes. All significant transactions between the Hospital and the Foundation have been eliminated for financial reporting purposes.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

Long-Term Care Operations

Pursuant to the provision of long-term care, the Hospital owns the operations of numerous long-term care facilities by way of an arrangement 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 the Hospital and the Hospital 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 the Hospital and the Hospital retains the authority and legal responsibility for the operation of the facilities.

The Hospital entered into lease agreements with the long-term care facilities, collectively referred to as the Lessors, to lease the facilities managed by the Managers. Concurrently, the Hospital entered into agreements with the Managers to manage the above leased facilities. As part of the agreements, the Hospital pays the Managers a management fee to continue managing the facilities on behalf of the Hospital 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 2017. 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.

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.

Enterprise Fund Accounting

The Hospital utilizes the enterprise fund method of accounting whereby revenue and expenses are recognized on the accrual basis of accounting. Substantially all revenues and expenses are subject to accrual.

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. The Hospital maintains its cash in accounts, which at times may exceed federally insured limits. The Hospital has not experienced any losses in such accounts. The Hospital believes that it is not exposed to any significant credit risk on cash and cash equivalents.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

Investments

Investments consist of cash equivalents and mutual funds, which are reported at fair 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. The Hospital is a provider of services to patients entitled to coverage under Titles XVIII and XIX of the Health Insurance Act (Medicare and Medicaid). The Hospital was granted Critical Access Status by Medicare and is paid for Medicare services based upon a cost reimbursement methodology. The Hospital is reimbursed for cost reimbursable items at an interim rate, with final settlement determined after submission of annual cost reports. Differences between the total program billed charges and the payments received are reflected as deductions from revenue. At the Hospital's year-end, a cost report 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 program. These programs have audited the year-end cost report filed with the Medicare program through December 31, 2012 with differences reflected in net patient service revenue in the year the cost report is settled. Amounts for unresolved cost reports for 2013 and 2014 are reflected in estimated third-party settlements on the consolidated balance sheets. The Hospital recognized a decrease of approximately \$22,000 in 2014 and an increase of approximately \$35,000 in 2013 in net patient service revenue in the consolidated statements of revenues, expenses and changes in net position 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.

The Hospital 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 the Hospital's customer base.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

Charity Care

The Hospital provides care without charge or at amounts less than its established rates to patients who meet certain criteria under its charity care policy. Because the Hospital does not collect amounts deemed to be charity care, they are not reported as revenue. The Hospital 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 policy. The charity care charges provided during 2014 and 2013 were approximately \$637,000 and \$787,000, respectively.

Of the Hospital's total expenses reported, including interest expense, approximately \$308,000 and \$367,000 arose from providing services to charity patients during 2014 and 2013, 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 the Hospital's total expenses including interest expense to gross patient service revenue.

Electronic Health Records (EHR) Incentive Payments

The Hospital receives EHR incentive payments under the Medicare and Medicaid programs. To qualify for the EHR incentive payments, the Hospital must meet "meaningful use" criteria that become more stringent over time. The Hospital periodically submits and attests to its use of certified EHR technology, satisfaction of meaningful use objectives, and various patient data. These submissions generally include performance measures for each annual EHR reporting period (Federal fiscal year ending September 30). The related EHR incentive payments are paid out over a four year transition schedule and are based upon data that is captured in the Hospital's cost reports. For Critical Access Hospitals, the payment calculation is based upon the net book value of the qualifying assets multiplied by the Medicare utilization using Medicare to total inpatient days plus 20%, not to exceed 100%. The total days are multiplied by a factor of total charges excluding charity care to total charges. Critical Access Hospitals can be reimbursed over a four year period for additional qualifying assets not claimed in the first year. The transitional factor ranges from 100% in the first payment year and decreases by 25% each payment year until it is completely phased out in the fifth year.

The Hospital recognizes EHR incentive payments as grant income when there is reasonable assurance that the Hospital will comply with the conditions of the meaningful use objectives and any other specific grant requirements. In addition, the consolidated financial statement effects of the grants must be both recognizable and measurable. During 2014 and 2013, the Hospital recognized approximately \$66,000 and \$339,000, respectively, in EHR incentive payments as grant income using the ratable recognition method. Under the ratable recognition method, the Hospital recognizes income ratably over the entire EHR reporting period when it is reasonably assured at the outset of the EHR reporting period that it will comply with the minimum requirements of the program.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

EHR incentive income is included in other operating revenue in the consolidated statements of revenues, expenses and changes in net position. EHR incentive income recognized is based on management's estimate and amounts are subject to change, with such changes impacting operations in the period the changes occur.

Receipt of these funds is subject to the fulfillment of certain obligations by the Hospital as prescribed by the program, subject to future audits and may be subject to repayment upon a determination of noncompliance.

Other Current Assets

Other current assets include inventories which are valued at the lower of cost or market with cost being determined on the first-in, first-out (FIFO) method. Inventories consist of the following:

	<u>2014</u>	<u>2013</u>
Medical supplies and other	\$ 426,944	\$ 416,634
Pharmaceutical	305,829	295,818
	<u>\$ 732,773</u>	<u>\$ 712,452</u>

Also included in other current assets are prepaid expenses, other receivables and various other current items related to long-term care operations. These assets are classified as current as they are expected to be utilized during the next fiscal year.

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 the Hospital Board for internal purposes such as funded depreciation and investments restricted by donors. These investments consist primarily of cash and cash equivalents, common stocks, mutual funds and beneficial interest in perpetual trusts. Investment income, to the extent not capitalized, is reported as nonoperating revenue 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 the Hospital's capitalization threshold and which substantially increase the useful lives of existing facilities. Maintenance, repairs and minor renewals are expensed as incurred.

The Hospital 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.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

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 improvements	5-40 years
Equipment	3-10 years

Net Position

Net position of the Hospital is classified in four components. (1) Net investment in capital assets consists of capital assets net of accumulated depreciation and reduced by the current balances of any outstanding borrowings used to finance the purchase or construction of those assets. (2) Restricted expendable net position includes assets that must be used for a particular purpose, as specified by creditors, grantors, or contributors external to the Hospital. (3) Restricted nonexpendable donor restricted includes net position restricted by the donor through beneficial interests in perpetual trusts. (4) Unrestricted includes remaining net position that does not meet the definition of invested in capital assets net of related debt or restricted.

Consolidated Statement of Revenues, Expenses and Changes in Net Position

The Hospital's consolidated statement 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 Hospital's principal activity. Contributions and investment income are reported as nonoperating revenues. Operating expenses are all expenses incurred to provide health care services, excluding interest costs.

Federal or State Income Taxes

The Hospital is a governmental instrumentality organized under Title 16, Article 12, of the Indiana statutes. The Hospital 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, the Hospital is not required to file Federal Form 990 – Return of Organization Exempt from Income Tax, which is an informational return only.

The Foundation is organized as a not-for-profit organization under Section 501(c)(3) of the United States IRC. As such, the Foundation is generally exempt from income taxes. However, the Foundation is required to file Federal Form 990 – Return of Organization Exempt from Income Tax, which is an informational return only. The Foundation has filed its federal and state income tax returns for periods through December 31, 2013. 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).

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

Accounting principles generally accepted in the United States of America require management to evaluate tax positions taken by the Hospital and Foundation 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, 2014 and 2013, 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. The Foundation is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Advertising and Community Relations

The Hospital records advertising and community relations expense in the period incurred. Total expense for advertising and community relations was approximately \$103,000 and \$101,000 for 2014 and 2013, respectively.

Compensated Absences

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

Reclassifications

Certain amounts from the 2013 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.

Litigation

The Hospital is involved in litigation arising in the normal course of business. After consultation with legal counsel, management estimates that these matters will be resolved without material adverse effect on the Hospital's future financial position, results from operations or cash flows.

Risk Management

The Hospital is exposed to various risks of loss from torts; theft of, damage to, and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; medical malpractice; and employee health, dental, and accident benefits. Commercial insurance coverage is purchased for claims arising from such matters. No settlements exceeded insurance coverage for the past three years.

Subsequent Events

The Hospital 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 available to be issued which is July 27, 2015.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

2. FINANCIAL PRESENTATION FOR COMPONENT UNIT

During 2014, the Hospital determined that the Foundation is a discrete component unit for reporting purposes in the Hospital's consolidated financial statements. Prior to 2014, the Foundation was included in the Hospital's consolidated financial statements as a blended component unit. The financial presentation change had no effect on previously reported net position or change in net position for the total reporting entity in the consolidated financial statements.

3. INVESTMENTS

Investments consist of cash equivalents and mutual funds, which are reported at fair value. The following represents investments as of December 31, 2014 and 2013:

	2014	2013
Investments		
Cash equivalents	\$ 9,319	\$ 7,836
Mutual funds	80,797	75,639
	<u>\$ 90,116</u>	<u>\$ 83,475</u>

4. BENEFICIAL INTERESTS IN PERPETUAL TRUSTS

The Hospital is the beneficiary under two perpetual trusts held by third parties, the corpuses of which are not controlled by the management of the Hospital. Although the Hospital has no control over the administration or investment of the funds held in these trusts, the estimated fair value of the Hospital's interest in these trusts is recognized as a contribution in the period in which the Hospital receives notice that the trust agreements convey an unconditional right to receive benefits. The Hospital's interest in these perpetual trusts is reported at fair value, which is estimated as the Hospital's portion of the fair market value of the assets in the trusts. Under the terms of the perpetual trusts, the Hospital receives its portion of interest and dividends earned on the corpuses, which is included as unrestricted investment income in the consolidated statements of revenues, expenses and changes in net assets. Changes in the value of the trust assets are recorded as investment income in the consolidated statements revenues, expenses and changes in net position. The investment income and changes in the values increased net position by approximately \$27,000 and \$78,000 in 2014 and 2013, respectively.

5. ASSETS WHOSE USE IS LIMITED

Assets whose use is limited include:

Internally designated – Amounts transferred by the Hospital's Board of Trustees through funding depreciation expense. Such amounts are to be used for debt service, equipment and building, remodeling, repairing, replacing or making additions to the Hospital's buildings as authorized by IC 16-22-3-13.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

Donor restricted - Amounts restricted by donor as to use of assets and includes beneficial interests in perpetual trusts.

Assets whose use is limited consist of the following as of December 31, 2014 and 2013:

	2014	2013
Assets whose use is limited		
Internally designated		
Cash and cash equivalents	\$ 4,722	\$ 180,734
Common stocks	8,487	10,740
Mutual funds	132,462	126,725
Total internally designated	145,671	318,199
Donor restricted		
Cash and cash equivalents	2,295,293	1,616,995
Beneficial interests in perpetual trusts	1,196,540	1,221,521
Total donor restricted	3,491,833	2,838,516
Total assets limited as to use	\$ 3,637,504	\$ 3,156,715

6. DEPOSITS AND INVESTMENTS

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

Investments are carried at fair market value. Net realized gains and losses on security transactions are determined on the specific identification cost basis.

As of December 31, 2014 and 2013, the Hospital had the following investments and maturities, all of which were held in the Hospital's name by custodial banks that are agents of the Hospital:

		December 31, 2014			
		Investment Maturities (in years)			
	Carrying Amount	Less than 1	1-5	6-10	More than 10
Common stocks	\$ 8,487	\$ 8,487	\$ -0-	\$ -0-	\$ -0-
Mutual funds	213,259	213,259	-0-	-0-	-0-
	\$ 221,746	\$ 221,746	\$ -0-	\$ -0-	\$ -0-

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

		December 31, 2013			
		Investment Maturities (in years)			
	Carrying Amount	Less than 1	1-5	6-10	More than 10
Common stocks	\$ 10,740	\$ 10,740	\$ -0-	\$ -0-	\$ -0-
Mutual funds	202,364	202,364	-0-	-0-	-0-
	\$ 213,104	\$ 213,104	\$ -0-	\$ -0-	\$ -0-

Credit risk - Statutes authorize the Hospital to invest in interest bearing deposit accounts, passbook savings accounts, certificates of deposit, money market 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 - The Hospital maintains its investments, which at times may exceed federally insured limits. The Hospital has not experienced any losses in such accounts. The Hospital believes that it is not exposed to any significant credit risk on investments.

Deposits and investments consist of the following as of December 31, 2014 and 2013:

	2014	2013
Carrying amount		
Deposits	\$ 7,863,915	\$ 8,641,265
Investments	221,746	213,104
	\$ 8,085,661	\$ 8,854,369
Included in the balance sheet captions		
Cash and cash equivalents	\$ 5,554,581	\$ 6,835,700
Investments	90,116	83,475
Assets whose use is limited		
Internally designated	145,671	318,199
Donor restricted	2,295,293	1,616,995
	\$ 8,085,661	\$ 8,854,369

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

7. 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 the Hospital 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.

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, 2014 and 2013:

- *Common stocks*: Valued at the closing price reported on the active market on which the individual securities are traded.
- *Mutual funds*: Valued at the daily closing price as reported by the fund. Mutual funds held by the Hospital 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 held by the Hospital are deemed to be actively traded.
- *Beneficial interests in perpetual trusts*: Valued at fair value as reported by the trustees, which represents the Hospital's pro rata interest in the net assets of the trusts, substantially all of which are valued on a mark-to-market basis.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

Assets and liabilities measured at fair value on a recurring basis as of December 31, 2014 and 2013 are as follows:

	December 31, 2014			
	Total	Level 1	Level 2	Level 3
Assets				
Investments				
Mutual funds				
Large growth	\$ 54,937	\$ 54,937	\$ -0-	\$ -0-
Moderate allocation	25,860	25,860	-0-	-0-
Total mutual funds	80,797	\$ 80,797	\$ -0-	\$ -0-
Cash equivalents	9,319			
Total investments	\$ 90,116			
Assets whose use is limited				
Common stocks	\$ 8,487	\$ 8,487	\$ -0-	\$ -0-
Mutual funds				
Large growth	39,230	39,230	-0-	-0-
Income	75,857	75,857	-0-	-0-
Total return	17,375	17,375	-0-	-0-
Total mutual funds	132,462	132,462	-0-	-0-
Beneficial interests in perpetual trusts	1,196,540	-0-	-0-	1,196,540
	1,337,489	\$ 140,949	\$ -0-	\$ 1,196,540
Cash equivalents	2,300,015			
Total assets whose use is limited	\$ 3,637,504			
December 31, 2013				
	Total	Level 1	Level 2	Level 3
Assets				
Investments				
Mutual funds				
Large growth	\$ 42,271	\$ 42,271	\$ -0-	\$ -0-
Moderate allocation	33,368	33,368	-0-	-0-
Total mutual funds	75,639	\$ 75,639	\$ -0-	\$ -0-
Cash equivalents	7,836			
Total investments	\$ 83,475			
Assets whose use is limited				
Common stocks	\$ 10,740	\$ 10,740	\$ -0-	\$ -0-
Mutual funds				
Large growth	35,249	35,249	-0-	-0-
Income	75,385	75,385	-0-	-0-
Total return	16,091	16,091	-0-	-0-
Total mutual funds	126,725	126,725	-0-	-0-
Beneficial interests in perpetual trusts	1,221,521	-0-	-0-	1,221,521
	1,358,986	\$ 137,465	\$ -0-	\$ 1,221,521
Cash equivalents	1,797,729			
Total assets whose use is limited	\$ 3,156,715			

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

The following is a reconciliation of activity for 2014 and 2013 for level 3 assets:

	2014	2013
Balance, beginning of year	\$ 1,221,521	\$ 1,171,814
Realized gain	22,464	4,681
Unrealized gain	1,049	73,115
Purchases	(55,124)	(483,450)
Sales	46,148	473,983
Settlements	(39,518)	(18,622)
Balance, end of year	<u>\$ 1,196,540</u>	<u>\$ 1,221,521</u>

The Hospital's policy is to recognize transfers between levels as of the end of the reporting period. There were no transfers during 2014 and 2013.

Realized gains of approximately \$22,000 and \$5,000 for 2014 and 2013, respectively, and unrealized gains of approximately \$1,000 and \$73,000 for 2014 and 2013, respectively, are reported in the consolidated statements of revenues, expenses and changes in net position as a component of investment income.

The Hospital 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.

Cash and cash equivalents, accounts payable, line-of-credit, accrued expenses, accrued wages and related liabilities and estimated third-party settlements: The carrying amount reported in the consolidated balance sheets for cash and cash equivalents, accounts payable, accrued expenses, accrued wages and related liabilities and estimated third-party settlements approximate fair value based on their short-term maturity.

Long-term debt: Fair value of the Hospital's fixed rate notes payable is estimated using discounted cash flows based on current fixed rates available to similar entities with similar credit ratings. As of December 31, 2014 and 2013, the carrying value of the fixed rate long-term debt approximated fair value.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

8. CAPITAL ASSETS

Progressions for capital assets for 2014 and 2013 follow:

	December 31, 2013	Additions	Retirements	Transfers	December 31, 2014
Land	\$ 188,708	\$ -0-	\$ -0-	\$ -0-	\$ 188,708
Land improvements	318,433	7,573	-0-	-0-	326,006
Buildings and improvements	13,994,177	915,024	-0-	1,164,915	16,074,116
Equipment	12,161,246	499,277	(355,334)	2,452,306	14,757,495
Construction in progress	950,871	2,667,307	-0-	(3,617,221)	957
Total capital assets	<u>27,613,435</u>	<u>4,089,181</u>	<u>(355,334)</u>	<u>-0-</u>	<u>31,347,282</u>
Accumulated depreciation					
Land improvements	221,902	4,176	-0-	-0-	226,078
Buildings and improvements	6,862,111	491,234	-0-	-0-	7,353,345
Equipment	9,276,724	938,117	(346,416)	-0-	9,868,425
Total accumulated depreciation	<u>16,360,737</u>	<u>1,433,527</u>	<u>(346,416)</u>	<u>-0-</u>	<u>17,447,848</u>
Capital assets, net	<u>\$ 11,252,698</u>	<u>\$ 2,655,654</u>	<u>\$ (8,918)</u>	<u>\$ -0-</u>	<u>\$ 13,899,434</u>

	December 31, 2012	Additions	Retirements	Transfers	December 31, 2013
Land	\$ 164,978	\$ 23,730	\$ -0-	\$ -0-	\$ 188,708
Land improvements	287,457	26,415	-0-	4,561	318,433
Buildings and improvements	12,971,018	332,112	(302,500)	993,547	13,994,177
Equipment	11,363,413	649,505	(67,075)	215,403	12,161,246
Construction in progress	401,276	1,763,106	-0-	(1,213,511)	950,871
Total capital assets	<u>25,188,142</u>	<u>2,794,868</u>	<u>(369,575)</u>	<u>-0-</u>	<u>27,613,435</u>
Less accumulated depreciation:					
Land improvements	202,270	19,632	-0-	-0-	221,902
Buildings and improvements	6,473,820	395,036	(6,745)	-0-	6,862,111
Equipment	8,550,206	793,593	(67,075)	-0-	9,276,724
Total accumulated depreciation	<u>15,226,296</u>	<u>1,208,261</u>	<u>(73,820)</u>	<u>-0-</u>	<u>16,360,737</u>
Capital assets, net	<u>\$ 9,961,846</u>	<u>\$ 1,586,607</u>	<u>\$ (295,755)</u>	<u>\$ -0-</u>	<u>\$ 11,252,698</u>

There were no significant outstanding commitments related to capital assets as of December 31, 2014.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

9. DEBT

The following is a summary of the Hospital's debt as of December 31, 2014 and 2013:

	2014	2013
<p>Note payable to financial institution dated July 7, 2005, monthly interest payments with a fixed rate of 4.523%, principal payments scheduled to begin October 2015 with maturity at June 2030, secured by property and equipment with a net book value of \$1,861,000 and \$2,030,000 as of December 31, 2014 and 2013, respectively.</p>	\$ 1,875,000	\$ 1,875,000
<p>Note payable to financial institution dated July 7, 2005, monthly principal and interest payments with a fixed rate of 6.690%, with maturity at June 2030, secured by property and equipment with a net book value of \$1,861,000 and \$2,030,000 as of December 31, 2014 and 2013, respectively.</p>	59,246	148,030
<p>Note payable to financial institution dated February 27, 2012, monthly principal and interest payments with a variable rate of prime plus .25% (3.500% as of December 31, 2014) with maturity at February 2017, secured by real property with a net book value of \$443,000 and \$500,000 as of December 31, 2014 and 2013, respectively.</p>	331,379	370,485
<p>Note payable to financial institution dated June 1, 2012, monthly principal and interest payments with a variable rate of prime plus .25% (3.208% as of December 31, 2014) with maturity at December 2017, secured by equipment with a net book value of \$239,000 and \$300,000 as of December 31, 2014 and 2013, respectively.</p>	301,638	406,520
<p>Note payable to financial institution dated September 29, 2014, monthly principal and interest payments at a fixed rate of 2.490% with maturity at September 2019, secured by equipment with a net book value of \$1,534,000 as of December 31, 2014.</p>	1,857,551	-0-
<p>Construction loan as of December 31, 2014 was subsequently converted to a note payable with financial institution dated February 8, 2015, with monthly principal and interest payments at a fixed rate of 4.890% with maturity at February 2025, secured by building with a net book value of \$2,044,000 as of December 31, 2014.</p>	1,450,000	-0-

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

	2014	2013
Note payable to financial institution dated August 4, 2014, monthly principal and interest payments with a fixed rate of 2.890%, with maturity at August 2019, secured by certain equipment, fixtures, and furniture with a net book value of \$350,000 as of December 31, 2014.	\$ 327,446	\$ -0-
Various note payables to financial institutions with monthly principal and interest payments at fixed rates ranging from 3.800% to 4.779% with maturity dates through February 2015, secured by equipment with a net book value of \$150,000 and \$600,000 as of December 31, 2014 and 2013, respectively.	116,297	491,393
	6,318,557	3,291,428
Less current portion	780,138	593,291
	\$ 5,538,419	\$ 2,698,137

Progressions for long-term debt for 2014 and 2013 include the following:

	December 31, 2013	Additional Borrowings	Payments	December 31, 2014	Current Portion
Notes payable	\$ 3,291,428	\$ 3,750,000	\$ (722,871)	\$ 6,318,557	\$ 780,138
	December 31, 2012	Additional Borrowings	Payments	December 31, 2013	Current Portion
Notes payable	\$ 3,878,901	\$ -0-	\$ (587,473)	\$ 3,291,428	\$ 593,291

Aggregate maturities of long-term debt are as follows:

Years Ending December 31,	Principal	Interest	Total
2015	\$ 780,138	\$ 218,014	\$ 998,152
2016	783,422	202,092	985,514
2017	987,763	170,576	1,158,339
2018	654,110	149,196	803,306
2019	542,787	130,981	673,768
2020-2024	1,081,786	480,473	1,562,259
2025-2029	1,379,046	117,174	1,496,220
2030	109,505	1,159	110,664
	\$ 6,318,557	\$ 1,469,665	\$ 7,788,222

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

The Hospital has a line of credit available with a local financial institution with a maximum amount of \$3,500,000. The line of credit is at a variable rate of interest at the prime rate with a floor of 3.75% (3.75% as of December 31, 2014). The Hospital had approximately \$3,283,000 and \$2,457,000 outstanding on the line of credit as of December 31, 2014 and 2013, respectively. The line of credit expires in June 2016 and is collateralized by deposit accounts of approximately \$2,530,000 as of December 31, 2014.

Additionally, the Hospital had a \$1,950,000 line of credit available with a local financial institution. During September 2014, the line of credit was converted to promissory note, which has an outstanding balance of approximately \$1,858,000 as of December 31, 2014. The outstanding balance on the line of credit was approximately \$855,000 as of December 31, 2013 with a fixed interest rate of 2.49%. The line of credit was collateralized by deposit accounts of approximately \$855,000 as of December 31, 2013.

10. NET PATIENT SERVICE REVENUE

The Hospital has agreements with third-party payors that provide for reimbursement to the Hospital at amounts different from its established rates. Estimated contractual adjustments under third-party reimbursement programs represent the difference between the Hospital's 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

The Hospital is a provider of services to patients entitled to coverage under Titles XVIII and XIX of the Health Insurance Act (Medicare and Medicaid). The Hospital was granted Critical Access Status by Medicare and is paid for Medicare services based upon a cost reimbursement methodology. The Hospital is reimbursed for cost reimbursable items at an interim rate, with final settlement determined after submission of annual cost reports. Differences between the total program billed charges and the payments received are reflected as deductions from revenue. At the Hospital's year-end, a cost report is filed with the Medicare program computing reimbursement amounts related to Medicare patients.

Medicaid and the Hospital Assessment Fee Program

The Hospital is reimbursed for Medicaid inpatient services under a prospectively determined rate-per-discharge and is not subject to retroactive adjustment. The differences between standard charges and reimbursement from these programs are recorded as contractual adjustments. Reimbursement for Medicaid outpatient services is based on predetermined rates, and is not subject to retroactive cost based settlements.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

During 2012, Hospital Assessment Fee (HAF) Program was approved by Centers for Medicare & Medicaid Services (CMS) for the period July 1, 2011 through June 30, 2013. 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. 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.

During 2014 and 2013, the Hospital recognized HAF Program expense of approximately \$609,000 and \$1,218,000, respectively, which resulted in Medicaid rate increases. The HAF Program expense is included in operating expenses in the consolidated statements of revenues, expenses and changes in net position. The Medicaid rate increases under the HAF Program are included in patient service revenue in the consolidated statements of revenues, expenses and changes in net position. The HAF Program was approved for extension through June 30, 2017.

As a governmental entity, the Hospital is also eligible for the Indiana Medicaid Supplemental programs including Medicaid DSH and Municipal Upper Payment Limit programs. The Hospital recognized reimbursement from these programs within net patient revenue of approximately \$492,000 and \$183,000 during 2014 and 2013, respectively. These programs are administered by the State of Indiana, but rely on Federal funding.

Other Payors

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

Patient service revenue for 2014 and 2013 consists of the following:

	<u>2014</u>	<u>2013</u>
Patient service revenue		
Inpatient	\$ 5,948,094	\$ 5,377,039
Outpatient	51,632,538	47,396,889
Long-term care	<u>17,266,758</u>	<u>13,976,047</u>
Gross patient service revenue	74,847,390	66,749,975
Deductions from revenue		
Contractual allowances	28,678,151	26,202,392
Charity care	636,647	786,985
Provision for bad debts	<u>3,637,791</u>	<u>3,588,587</u>
Total deductions from revenue	<u>32,952,589</u>	<u>30,577,964</u>
Net patient service revenue	<u>\$ 41,894,801</u>	<u>\$ 36,172,011</u>

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

11. LEASE EXPENSE

The Hospital has multiple operating leases expiring at various times through 2015. 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 2014 and 2013 was approximately \$16,000 and \$22,000, respectively. Lease expense for facilities and equipment under the long-term care leases discussed in Note 1 was approximately \$2,690,000 and \$2,330,000 for 2014 and 2013, respectively.

12. PENSION PLAN

Plan Description

The Hospital has a defined contribution pension plan, Rush Memorial Hospital Employees' Pension Plan (the Plan), as authorized by Indiana Code 16-22-3-11. The Plan provides retirement, disability and death benefits to Plan members and beneficiaries. The Plan was established by written agreement between the Hospital Board of Trustees and the Plan Administrator, American United Life Insurance Company. The Plan Administrator issues a publicly available financial report that includes the financial statements and required supplementary information of the Plan.

Funding Policy

The contribution requirements of Plan members are established by the written agreement between the Hospital Board of Trustees and the Plan Administrator. The Hospital is required to contribute at the Board approved rate. The Hospital makes a matching contribution equal to 100% of an eligible employee's salary reduction contributions up to 5% of their eligible compensation. Forfeitures for non-vested contributions can be used to offset Hospital contributions. Pension expense was approximately \$217,000 and \$138,000 for 2014 and 2013, respectively.

13. CONCENTRATION OF CREDIT RISK

The Hospital is located in Rushville, Indiana. The Hospital grants credit without collateral to its patients, most of who are local residents and are insured under third-party payor agreements. The mix of gross receivables and gross revenue from patients and third-party payors as of and for the years ended December 31, 2014 and 2013 was as follows:

	Receivables		Revenues	
	2014	2013	2014	2013
Medicare	42%	29%	40%	42%
Medicaid	18%	18%	25%	24%
Blue Cross	12%	8%	15%	13%
Commercial	13%	16%	12%	12%
Self-pay	15%	29%	8%	9%
	<u>100%</u>	<u>100%</u>	<u>100%</u>	<u>100%</u>

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

14. RESTRICTED NONEXPENDABLE NET POSITION

Restricted nonexpendable net position includes perpetual trusts held by third parties, the corpuses of which are not controlled by the management of the Hospital. Restricted nonexpendable net position was approximately \$1,198,000 and \$1,222,000 as of December 31, 2014 and 2013, respectively.

15. SELF INSURANCE

The Hospital is self-insured for employee health claims. A third-party administrator processes the claims for the Hospital. The Hospital maintains an estimated liability for the amount of claims incurred but not reported. The Hospital also maintains reinsurance including a stop loss for individual employees over \$70,000 a year with no aggregate limit. Substantially all employees are covered for major medical benefits. The total health claims expense was approximately \$1,489,000 and \$995,000 for 2014 and 2013, 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 the balances of the health claim liabilities during the past two years are as follows:

	<u>2014</u>	<u>2013</u>
Unpaid claims, beginning of year	\$ 92,897	\$ 118,423
Incurred claims and changes in estimates	1,489,253	994,964
Claim payments	<u>(1,394,165)</u>	<u>(1,020,490)</u>
Unpaid claims, end of year	<u>\$ 187,985</u>	<u>\$ 92,897</u>

16. RISK MANAGEMENT

The Hospital is exposed to various risks of loss related to property loss, torts, errors and omissions, and employee injuries (workers' compensation). The Hospital has purchased commercial insurance for malpractice, general liability, and employee medical claims. The Hospital is insured against medical malpractice claims under a modified claims-made policy, whereby only the claims reported to the insurance carrier during the policy period are covered regardless of when the incident giving rise to the claim occurred. Under the terms of the policy, the Hospital bears the risk of the ultimate costs of any individual claims exceeding \$250,000 or aggregate claims exceeding \$5,000,000, for claims asserted in the policy year. In addition, the Hospital has an umbrella policy with an additional \$5,000,000 of coverage.

RUSH MEMORIAL HOSPITAL

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS DECEMBER 31, 2014 (WITH COMPARATIVE TOTALS FOR 2013)

17. UPCOMING GASB PRONOUNCEMENTS

Management has not currently determined what effects, if any, the implementation of the following recently enacted statements may have on its future financial statements:

GASB Statement No. 72, Fair Value Measurement and Application, issued February 2015, will be effective for periods beginning after June 15, 2015. This Statement will enhance the comparability of financial statements among governments by requiring the measurement of certain assets and liabilities at fair value using a consistent and more detailed definition of fair value and accepted valuation techniques. This Statement also will enhance fair value application guidance and related disclosures in order to provide information to financial statements users about the impact of fair value measurements on a government's financial position.