

STATE OF MINNESOTA

Office of the State Auditor



Rebecca Otto
State Auditor

ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA
(D/B/A Grand Village)

FOR THE YEAR ENDED SEPTEMBER 30, 2009

Description of the Office of the State Auditor

The mission of the Office of the State Auditor is to oversee local government finances for Minnesota taxpayers by helping to ensure financial integrity and accountability in local governmental financial activities.

Through financial, compliance, and special audits, the State Auditor oversees and ensures that local government funds are used for the purposes intended by law and that local governments hold themselves to the highest standards of financial accountability.

The State Auditor performs approximately 160 financial and compliance audits per year and has oversight responsibilities for over 3,300 local units of government throughout the state. The office currently maintains five divisions:

Audit Practice - conducts financial and legal compliance audits of local governments;

Government Information - collects and analyzes financial information for cities, towns, counties, and special districts;

Legal/Special Investigations - provides legal analysis and counsel to the Office and responds to outside inquiries about Minnesota local government law; as well as investigates allegations of misfeasance, malfeasance, and nonfeasance in local government;

Pension - monitors investment, financial, and actuarial reporting for approximately 730 public pension funds; and

Tax Increment Financing - promotes compliance and accountability in local governments' use of tax increment financing through financial and compliance audits.

The State Auditor serves on the State Executive Council, State Board of Investment, Land Exchange Board, Public Employees Retirement Association Board, Minnesota Housing Finance Agency, and the Rural Finance Authority Board.

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**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA
(D/B/A Grand Village)**

For the Year Ended September 30, 2009



**Audit Practice Division
Office of the State Auditor
State of Minnesota**

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**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

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**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

ORGANIZATION
SEPTEMBER 30, 2009

<u>Office</u>	<u>Name</u>	<u>Term Expires</u>
Chair	Catherine McLynn	December 31, 2011
Vice Chair	Rusty Eichorn	December 31, 2011
Secretary	Jeff Walker	December 31, 2010
Member	Karen Burthwick	December 31, 2010
Member	Lori Dowling	December 31, 2010
Member	Mark Mandich	December 31, 2010
Member	Chris Reed	December 31, 2011
Administrator	Jacob Goering	Indefinite

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REBECCA OTTO
STATE AUDITOR

STATE OF MINNESOTA OFFICE OF THE STATE AUDITOR

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INDEPENDENT AUDITOR'S REPORT

Nursing Home Board
Itasca Nursing Home

We have audited the accompanying basic financial statements of the Itasca Nursing Home as of and for the year ended September 30, 2009, as listed in the table of contents. These financial statements are the responsibility of the Nursing Home's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

As discussed in Note 1.A., the financial statements present only the Itasca Nursing Home Enterprise Fund and are not intended to present fairly the financial position of Itasca County, Minnesota, and the results of its operations and the cash flows of its proprietary funds in conformity with accounting principles generally accepted in the United States of America.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the Itasca Nursing Home as of September 30, 2009, and the changes in its financial position and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

The required supplementary information referred to in the table of contents is not a required part of the financial statements but is supplementary information required by the Governmental Accounting Standards Board. We have applied certain limited procedures to this information, which consisted principally of inquiries of management regarding the methods of measurement and presentation of the required supplementary information. However, we did not audit the information and express no opinion on it.

Our audit was made for the purpose of forming an opinion on the financial statements taken as a whole. The accompanying financial information listed as statistical data in the table of contents is presented for the purpose of additional analysis and is not a required part of the financial statements of the Itasca Nursing Home. The statistical data has not been audited and, accordingly, we express no opinion on it.

In accordance with *Government Auditing Standards*, we have also issued our report dated March 5, 2010, on our consideration of the Itasca Nursing Home's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of our audit.

/s/Rebecca Otto

REBECCA OTTO
STATE AUDITOR

March 5, 2010

/s/Greg Hierlinger

GREG HIERLINGER, CPA
DEPUTY STATE AUDITOR

BASIC FINANCIAL STATEMENTS

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**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

EXHIBIT A

**STATEMENT OF NET ASSETS
SEPTEMBER 30, 2009**

Assets

Current assets

Cash and cash equivalents	\$ 1,351,950
Petty cash and change funds	1,560
Accounts receivable - net	1,243,502
Inventories	40,710
Prepaid items	82,142

Total current assets **\$ 2,719,864**

Restricted assets

Bond reserve account	
Cash and cash equivalents	\$ 327,233
Resident trust funds	15,795

Total restricted assets **\$ 343,028**

Noncurrent assets

Deferred debt issuance costs	\$ 103,388
Excess other postemployment benefits contributions	60,244
Capital assets - net	7,238,417

Total noncurrent assets **\$ 7,402,049**

Total Assets **\$ 10,464,941**

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

**EXHIBIT A
(Continued)**

**STATEMENT OF NET ASSETS
SEPTEMBER 30, 2009**

<u>Liabilities</u>	
Current liabilities	
Accounts payable	\$ 204,994
Salaries payable	145,639
Accrued vacation payable	162,254
Interest payable	44,814
General obligation bonds payable - current	195,000
Revenue bonds payable - current	85,000
	<hr/>
Total current liabilities	\$ 837,701
Current liabilities payable from restricted assets	
Due to residents	\$ 15,795
	<hr/>
Noncurrent liabilities	
General obligation bonds payable - long-term (net of discount of \$419)	\$ 414,581
Revenue bonds payable - long-term	3,970,000
	<hr/>
Total noncurrent liabilities	\$ 4,384,581
	<hr/>
Total Liabilities	\$ 5,238,077
	<hr/>
<u>Net Assets</u>	
Invested in capital assets - net of related debt	\$ 2,573,836
Unrestricted	2,653,028
	<hr/>
Total Net Assets	\$ 5,226,864
	<hr/> <hr/>

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

EXHIBIT B

**STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET ASSETS
FOR THE YEAR ENDED SEPTEMBER 30, 2009**

Operating Revenues	
Patient service revenues	\$ 8,243,144
Miscellaneous	1,881,493
	<hr/>
Total Operating Revenues	\$ 10,124,637
Operating Expenses	
Nursing services	\$ 3,392,647
Other care-related	286,630
Ancillary and other services	860,842
Dietary	849,743
Laundry and linen	115,304
Housekeeping	230,468
Plant operations	981,611
Administration	1,075,540
Other property and related costs	80,058
Employee benefits	1,172,742
Other postemployment benefits expense	56,880
Amortization	7,486
Depreciation	411,672
	<hr/>
Total Operating Expenses	\$ 9,521,623
Operating Income (Loss)	\$ 603,014
Nonoperating Revenues (Expenses)	
Interest income	\$ 9,307
Contributions and donations	11,792
Interest expense	(276,544)
	<hr/>
Total Nonoperating Revenues (Expenses)	\$ (255,445)
Change in Net Assets	\$ 347,569
Net Assets - October 1	4,879,295
	<hr/>
Net Assets - September 30	\$ 5,226,864
	<hr/> <hr/>

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

EXHIBIT C

**STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED SEPTEMBER 30, 2009
Increase (Decrease) in Cash and Cash Equivalents**

Cash Flows from Operating Activities	
Cash received from customers	\$ 9,946,577
Cash paid to suppliers	(5,048,078)
Cash paid to employees	(4,175,244)
	<u>723,255</u>
Net cash provided by (used in) operating activities	\$ 723,255
Cash Flows from Noncapital Financing Activities	
Cash received from contributions and donations	\$ 11,792
	<u>11,792</u>
Cash Flows from Capital and Related Financing Activities	
Acquisition of capital assets	\$ (223,022)
Principal and interest paid on general obligation revenue bonds	(218,533)
Principal and interest paid on revenue bonds	(321,400)
Bond administration fees	(3,479)
	<u>(766,434)</u>
Net cash provided by (used in) capital and related financing activities	\$ (766,434)
Cash Flows from Investing Activities	
Interest received	\$ 9,307
	<u>9,307</u>
Net Increase (Decrease) in Cash and Cash Equivalents	\$ (22,080)
Cash and Cash Equivalents at October 1	1,702,823
	<u>1,702,823</u>
Cash and Cash Equivalents at September 30	\$ 1,680,743
	<u>1,680,743</u>
Reconciliation of Operating Income (Loss) to Net Cash Provided by (Used in) Operating Activities	
Operating income (loss)	\$ 603,014
Adjustments to reconcile net operating income (loss) to net cash provided by (used in) operating activities	
Depreciation	411,672
Amortization	7,486
Change in assets and liabilities	
Accounts receivable	(178,060)
Inventories	12,093
Prepaid items	(51,428)
Excess other postemployment benefits contributions	(33,603)
Accounts payable	(44,159)
Salaries payable	30,367
Accrued vacation payable	(34,127)
	<u>(22,080)</u>
Net Cash Provided by (Used in) Operating Activities	\$ 723,255
	<u>723,255</u>

The notes to the financial statements are an integral part of this statement.

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**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

**NOTES TO THE FINANCIAL STATEMENTS
AS OF AND FOR THE YEAR ENDED SEPTEMBER 30, 2009**

1. Summary of Significant Accounting Policies

The financial reporting policies of the Itasca Nursing Home conform to generally accepted accounting principles (GAAP). The Governmental Accounting Standards Board (GASB) is responsible for establishing GAAP for state and local governments through its pronouncements (statements and interpretations). Governments are also required to follow the pronouncements of the Financial Accounting Standards Board (FASB) issued through November 30, 1989, (when applicable) that do not conflict with or contradict GASB pronouncements. Although the Nursing Home has the option to apply FASB pronouncements issued after that date, it has chosen not to do so. The more significant accounting policies established in GAAP and used by the Nursing Home are discussed below.

A. Financial Reporting Entity

The Itasca Nursing Home was organized by the Itasca County Board, pursuant to Minn. Stat. §§ 376.55-.60, to provide long-term care services.

The Itasca Nursing Home Board supervises the Nursing Home operations and consists of seven members: the five County Commissioners and two lay members appointed by the Commissioners. The Itasca Nursing Home Board contracts with Ecumen to manage the Nursing Home. As part of this agreement, Ecumen maintains the general ledger, bill payment, and payroll functions. The management agreement, which was in effect October 1, 2008, through September 30, 2009, calls for a payment of a flat fee of \$175,000, plus an additional 1.50 to 1.75 percent of total Nursing Home operating revenues depending on the accounts receivable days in aging. The amount paid to Ecumen for the management contract for the fiscal year ended September 30, 2009, was \$348,290.

The Nursing Home's financial statements are included in Itasca County's financial statements as an enterprise fund.

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

1. Summary of Significant Accounting Policies (Continued)

B. Basis of Presentation--Fund Accounting

The Nursing Home's operations are accounted for with a set of self-balancing accounts that comprise the assets, liabilities, equities, revenues, and expenses. Enterprise funds are used to account for operations that provide a service to citizens financed primarily by charges to users of that service and activities where the periodic measurement of net income is deemed appropriate for capital maintenance, public policy, management control, accountability, or other purposes.

C. Basis of Accounting

The Nursing Home maintains its financial records 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.

When both restricted and unrestricted resources are available for use, it is the Nursing Home's policy to use restricted resources first and then unrestricted resources as needed.

D. Assets and Liabilities

1. Cash and Cash Equivalents

The Nursing Home has defined cash and cash equivalents to include both restricted and unrestricted cash held with Itasca County as part of its pooled cash and investments account. The Itasca County pooled investment account is treated as a cash equivalent because the Nursing Home can deposit or effectively withdraw cash at any time without prior notice or penalty. Cash equivalents also include petty cash held in a demand deposit account. Resident trust accounts are not considered to be cash equivalents.

2. Deposits and Investments

The Nursing Home's cash balance is combined with Itasca County as part of its pooled cash and investments account. Investments are reported at their fair value at September 30, 2009, based on market prices.

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

1. Summary of Significant Accounting Policies

D. Assets and Liabilities (Continued)

3. Receivables

Accounts receivable is shown net of an allowance for bad debts of \$66,114.

4. Inventories and Prepaid Items

Inventories are valued at cost using the first in/first out method. Inventories are recorded as expenses when consumed.

Certain payments to vendors reflect costs applicable to future accounting periods and are recorded as prepaid items.

5. Restricted Assets

Certain assets are restricted for payment of principal and interest on bonds. These assets are classified as restricted assets on the statement of net assets because the restriction is either imposed by law through constitutional provisions or enabling legislation or imposed externally by creditors, grantors, contributors, or laws or regulations of other governments. Therefore, their use is limited by applicable laws and regulations.

6. Capital Assets and Depreciation

Capital assets are defined by the Nursing Home as assets with an initial, individual cost of more than \$1,000 and an estimated useful life of five or more years. Such assets are recorded at historical cost or estimated historical cost if purchased or constructed. Donated capital assets are recorded at estimated fair value at the date of donation.

The costs of normal maintenance and repairs that do not add to the value of the asset or materially extend assets' lives are not capitalized.

Major outlays for capital assets and improvements are capitalized as projects are constructed. Interest incurred during the construction phase of capital assets is included as part of the capitalized value of the assets constructed.

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

1. Summary of Significant Accounting Policies

D. Assets and Liabilities

6. Capital Assets and Depreciation (Continued)

Property, plant, and equipment of the Nursing Home are depreciated using the straight-line method over the following estimated useful lives:

<u>Assets</u>	<u>Years</u>
Land improvements	20
Buildings and improvements	10 - 40
Machinery, furniture, and equipment	5 - 20

7. Accrued Vacation Payable

The liability for accrued vacation payable reported in the financial statements consists of unpaid, accumulated personal leave.

Employees are granted personal leave days that are available for vacation, paid time away from work, and short-term illness. Personal leave days are granted from 11 to 38 days per year, depending on the years of service, and can be accumulated to a maximum balance of 320 hours. The balance of personal leave days is payable to the employee upon termination. The balance of personal leave time earned was \$162,254 at September 30, 2009, and is included on the financial statements.

An extended illness bank is available for long-term illness. Six days per year are accrued for this bank and may accumulate up to 400 hours. Employees are not compensated for their unused extended sick leave bank upon retirement, except that full-time union employees hired prior to July 1, 1994, may use their extended sick leave bank upon retirement to pay continued hospitalization insurance premiums. Unvested sick leave, valued at \$249,344 at September 30, 2009, is available to employees in the event of long-term illness-related absences and is not paid to them at termination. This amount is not recorded in the financial statements.

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

1. Summary of Significant Accounting Policies (Continued)

E. Revenues

Operating revenues, such as patient service revenues, result from exchange transactions associated with the principal activity of the fund. Exchange transactions are those in which each party receives and gives up essentially equal values. Nonoperating revenues, such as interest income and contributions and donations, result from nonexchange transactions or incidental activities.

Third-Party Reimbursement Agreements

The Nursing Home participates in the Medicaid program administered by the Minnesota Department of Human Services. The Nursing Home bills the Department of Human Services monthly based on the applicable rate and number of days for every eligible resident. The Department subsequently reimburses the Nursing Home. The Medicaid occupancy was 57 percent for the fiscal year ended September 30, 2009.

Net patient revenue is reported at estimated net realizable amounts from Medicare, a third-party payor. Retroactive adjustment estimates are revised in future periods as adjustments become known.

Revenue from the Medicare and Medicaid programs accounted for 10 percent and 56 percent of the Nursing Home's net patient revenues for the year ended September 30, 2009.

Laws and regulations governing the Medicare program are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility the recorded estimates will change by a material amount in the near term. The contractual adjustment for Medicare for the year ended September 30, 2009, resulted in a decrease to net patient service revenue of \$203,127.

The rate system for Medicaid and private-pay residents has 36 rate levels. The following are the ranges of the effective daily rates charged to Medicaid and private-pay residents during the year ended September 30, 2009.

<u>Daily Rates</u>	<u>Period Rates in Effect</u>
\$139.20 to \$244.93	October 1, 2008, to September 30, 2009

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

1. Summary of Significant Accounting Policies (Continued)

F. Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States 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 financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

2. Stewardship, Compliance, and Accountability

Budget Information

The Itasca Nursing Home Board annually adopts an accrual basis budget. Following is a summary of the operating budget compared with actual operations for the year ended September 30, 2009.

Year Ended September 30, 2009	Budget	Actual	Variance Favorable (Unfavorable)
Operating revenues	\$ 9,873,538	\$ 10,124,637	\$ 251,099
Operating expenses	9,307,504	9,521,623	(214,119)
Operating Income (Loss)	\$ 566,034	\$ 603,014	\$ 36,980
Nonoperating revenues (expenses)	(244,296)	(255,445)	(11,149)
Change in Net Assets	\$ 321,738	\$ 347,569	\$ 25,831

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

3. Detailed Notes on All Funds

A. Assets

1. Deposits and Investments

The Itasca Nursing Home pools its cash and investments with Itasca County.

Itasca County is authorized by Minn. Stat. §§ 118A.02 and 118A.04 to deposit its cash and to invest in certificates of deposit in financial institutions designated by the County Treasurer. Minnesota statutes require that all Nursing Home deposits be covered by insurance, surety bond, or collateral. The County may invest in the types of investments authorized by Minn. Stat. §§ 118A.04 and 118A.05.

Additional disclosures required by GASB Statement No. 40, *Deposit and Investment Risk Disclosures*, are disclosed on an entity-wide basis in the Itasca County annual financial report.

The Resident Trust Fund is not included in the County's pooled cash. It is held in an interest-bearing checking account and is fully insured.

2. Capital Assets

A summary of changes in capital assets for the year ended September 30, 2009, follows:

	Balance October 1, 2008	Increase	Decrease	Reclassification	Balance September 30, 2009
Capital assets not depreciated					
Land	\$ 22,496	\$ -	\$ -	\$ -	\$ 22,496
Construction in progress	41,199	83,440	-	(41,199)	83,440
Capital assets not depreciated	<u>\$ 63,695</u>	<u>\$ 83,440</u>	<u>\$ -</u>	<u>\$ (41,199)</u>	<u>\$ 105,936</u>
Capital assets depreciated					
Land improvements	\$ 115,311	\$ 82,049	\$ -	\$ -	\$ 197,360
Buildings and improvements	10,534,833	16,740	-	-	10,551,573
Machinery, furniture, and equipment	1,502,959	40,793	-	41,199	1,584,951
Total capital assets depreciated	<u>\$ 12,153,103</u>	<u>\$ 139,582</u>	<u>\$ -</u>	<u>\$ 41,199</u>	<u>\$ 12,333,884</u>

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

3. Detailed Notes on All Funds

A. Assets

2. Capital Assets (Continued)

	Balance October 1, 2008	Increase	Decrease	Reclassification	Balance September 30, 2009
Less: accumulated depreciation for					
Land improvements	\$ 52,644	\$ 7,790	\$ -	\$ -	\$ 60,434
Buildings and improvements	3,762,040	281,739	-	-	4,043,779
Machinery, furniture, and equipment	975,047	122,143	-	-	1,097,190
Total accumulated depreciation	\$ 4,789,731	\$ 411,672	\$ -	\$ -	\$ 5,201,403
Total capital assets depreciated, net	\$ 7,363,372	\$ (272,090)	\$ -	\$ 41,199	\$ 7,132,481
Total Capital Assets, Net	\$ 7,427,067	\$ (188,650)	\$ -	\$ -	\$ 7,238,417

B. Liabilities

1. Long-Term Debt

Type of Indebtedness	Final Maturity	Installment Amounts	Interest Rate (%)	Original Issue Amount	Outstanding Balance September 30, 2009
Bonds					
1998 G.O. Crossover Refunding Bonds	2012	\$135,000 - \$210,000	4.10 - 4.85	\$ 1,880,000	\$ 610,000
2003 Gross Revenue Nursing Home Bonds	2033	\$70,000 - \$305,000	2.50 - 6.25	4,435,000	4,055,000
Total Bonds				<u>\$ 6,315,000</u>	\$ 4,665,000
Less: unamortized discount					(419)
Total Bonds, Net					<u>\$ 4,664,581</u>

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

3. Detailed Notes on All Funds

B. Liabilities (Continued)

2. Debt Service Requirements

Debt service requirements at September 30, 2009, were as follows:

Year Ending September 30	General Obligation Bonds Crossover Refunding Bonds		Gross Revenue Nursing Home Bonds	
	Principal	Interest	Principal	Interest
	2010	\$ 195,000	\$ 24,554	\$ 85,000
2011	205,000	15,054	90,000	233,782
2012	210,000	5,092	95,000	229,386
2013	-	-	95,000	224,708
2014	-	-	100,000	219,783
2015 - 2019	-	-	605,000	1,008,528
2020 - 2024	-	-	800,000	805,381
2025 - 2029	-	-	1,070,000	521,288
2030 - 2033	-	-	1,115,000	144,531
Total	<u>\$ 610,000</u>	<u>\$ 44,700</u>	<u>\$ 4,055,000</u>	<u>\$ 3,625,174</u>

3. Changes in Long-Term Liabilities

The following is a summary of the changes in long-term debt for the year ended September 30, 2009.

	Balance October 1, 2008	Additions	Reductions	Balance September 30, 2009	Due Within One Year
Long-Term Liabilities					
Bonds payable					
G.O. Crossover Refunding Bonds	\$ 795,000	\$ -	\$ 185,000	\$ 610,000	\$ 195,000
Gross Revenue Nursing Home Bonds	4,135,000	-	80,000	4,055,000	85,000
Less: deferred amounts for issuance discounts	(567)	-	(148)	(419)	-
Total Bonds Payable	<u>\$ 4,929,433</u>	<u>\$ -</u>	<u>\$ 264,852</u>	<u>\$ 4,664,581</u>	<u>\$ 280,000</u>

It is anticipated that debt service on these bonds will be repaid from net revenues of the Nursing Home. If revenues are ever insufficient to meet the debt service requirements on the General Obligation Crossover Refunding Bonds, Itasca County is obligated to pay the maturing principal and interest from another fund and levy a tax to repay the fund from which the advance was made.

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

3. Detailed Notes on All Funds

B. Liabilities

3. Changes in Long-Term Liabilities (Continued)

The Gross Revenue Nursing Home Bonds are payable solely from net revenues of the Nursing Home. There is no pledge of the taxing power of Itasca County on these bonds.

4. Pension Plans

A. Plan Description

All full-time and certain part-time employees of the Itasca Nursing Home are covered by defined benefit pension plans administered by the Public Employees Retirement Association of Minnesota (PERA). PERA administers the Public Employees Retirement Fund, which is a cost-sharing, multiple-employer retirement plan. The plan is established and administered in accordance with Minn. Stat. chs. 353 and 356.

Public Employees Retirement Fund members belong to either the Coordinated Plan or the Basic Plan. Coordinated Plan members are covered by Social Security, and Basic Plan members are not. All new members must participate in the Coordinated Plan.

PERA provides retirement benefits as well as disability benefits to members and benefits to survivors upon death of eligible members. Benefits are established by state statute and vest after three years of credited service. The defined retirement benefits are based on a member's highest average salary for any five successive years of allowable service, age, and years of credit at termination of service.

Two methods are used to compute benefits for Coordinated and Basic Plan members. The retiring member receives the higher of a step-rate benefit accrual formula (Method 1) or a level accrual formula (Method 2). Under Method 1, the annuity accrual rate for a Basic Plan member is 2.2 percent of average salary for each of the first ten years of service and 2.7 percent for each year thereafter. For a Coordinated Plan member, the annuity accrual rate is 1.2 percent of average salary for each of the first ten years and 1.7 percent for each successive year. Using Method 2, the annuity accrual rate is 2.7 percent of average salary for Basic Plan members and 1.7 percent for Coordinated Plan members for each year of service.

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

4. Pension Plans

A. Plan Description (Continued)

For Public Employees Retirement fund members whose annuity is calculated using Method 1, a full annuity is available when age plus years of service equal 90. Normal retirement age is 65 for members hired prior to July 1, 1989, and is the age for unreduced Social Security benefits capped at age 66 for Coordinated Plan members hired on or after July 1, 1989. A reduced retirement annuity is also available to eligible members seeking early retirement.

The benefit provisions stated in the previous paragraphs of this section are current provisions and apply to active plan participants. Vested, terminated employees who are entitled to benefits but are not yet receiving them are bound by the provisions in effect at the time they last terminated public service.

PERA issues a publicly available financial report that includes financial statements and required supplementary information for the Public Employees Retirement Fund. That report may be obtained on the internet at www.mnpera.org; by writing to PERA at 60 Empire Drive, Suite 200, Saint Paul, Minnesota 55103-2088; or by calling 651-296-7460 or 1-800-652-9026.

B. Funding Policy

Pension benefits are funded from member and employer contributions and income from the investment of fund assets. Rates for employer and employee contributions are set by Minn. Stat. ch. 353. These statutes are established and amended by the State Legislature. The Itasca Nursing Home makes annual contributions to the pension plans equal to the amount required by state statutes. Public Employees Retirement Fund Basic Plan members and Coordinated Plan members are required to contribute 9.1 and 6.0 percent, respectively, of their annual covered salary.

The Itasca Nursing Home is required to contribute the following percentages of annual covered payroll in 2009:

Public Employees Retirement Fund	
Basic Plan members	11.78%
Coordinated Plan members	6.75

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

4. Pension Plans

B. Funding Policy (Continued)

The Nursing Home's contributions for the years ending September 30, 2009, 2008, and 2007, for the Public Employees Retirement Fund were:

<u>2009</u>	<u>2008</u>	<u>2007</u>
\$ 240,806	\$ 233,062	\$ 225,512

These contribution amounts are equal to the contractually required contributions for each year as set by state statute.

5. Postemployment Benefits

A. Plan Description and Funding Policy

The Nursing Home provides health insurance benefits for certain retired employees under a single-employer plan. Employees who were hired before July 1, 1994, are continuously employed until retirement, have at least 15 years of service with the Nursing Home, have participated in the health care insurance program for 15 years prior to retirement, and have met the eligibility requirements of PERA, are eligible to receive hospital/medical benefits to the same extent as active employees for the life of the retiree or surviving spouse. The Nursing Home will pay 100 percent of the retiree's premium and 50 percent of the spouse's premium for those employees who retired before July 1, 1994. For retirements after July 1, 1994, the retiree is responsible for 50 percent of the premium. The authority to provide this benefit is established in Minn. Stat. § 471.61, subd. 2a. A separate report is not issued for the plan.

Active employees who retire from the Nursing Home when eligible to receive a retirement benefit from PERA, that do not qualify for the aforementioned benefits, and do not participate in any other health benefits program providing coverage similar to that herein described, are eligible to continue coverage with respect to both themselves and their eligible dependents under the Nursing Home's health benefits program. These retirees are required to pay 100 percent of the total premium cost. Since the premium is a blended rate determined on the entire active and retiree population, the retirees are receiving an implicit rate subsidy.

As of September 30, 2009, 18 retirees were receiving health benefits under the Nursing Home's health plan. The cost of other postemployment benefits is funded on a "pay-as-you-go" method.

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

5. Postemployment Benefits (Continued)

B. Annual OPEB Cost and Excess OPEB Contributions

The Nursing Home's annual other postemployment benefits (OPEB) cost is calculated based on the annual required contribution (ARC) of the employer, an amount actuarially determined in accordance with the parameters of GASB Statement 45. The ARC represents a level of funding that, if paid on an ongoing basis, is projected to cover normal cost each year and amortize any unfunded actuarial liabilities (or funding excess) over a period not to exceed 30 years. The following table shows the components of the Nursing Home's annual OPEB cost for 2009, the amount actually contributed to the plan, and changes in the Nursing Home's net OPEB obligation:

ARC	\$	57,055
Interest on net OPEB obligation		(1,332)
Adjustment to ARC		1,157
		1,157
Annual OPEB cost	\$	56,880
Contributions during the year		(90,483)
		(90,483)
Decrease (Increase) in excess OPEB contributions	\$	(33,603)
Excess Contributions - Beginning of Year		(26,641)
		(26,641)
Excess Contributions - End of Year	\$	(60,244)
		(60,244)

The Nursing Home's annual OPEB cost, the percentage of annual OPEB cost contributed to the plan, and the excess OPEB contributions for 2009 were as follows:

		Year Ended September 30, 2009
		2009
Percentage of annual OPEB cost contributed		159%
Annual OPEB cost	\$	56,880
Employer contributions		(90,483)
		(90,483)
Excess Contributions	\$	(33,603)
		(33,603)

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

5. Postemployment Benefits (Continued)

C. Funding Status and Funding Progress

The actuarial accrued liability for benefits at September 30, 2008, the most recent actuarial valuation date, is \$1,138,640. The Nursing Home currently has no assets that have been irrevocably deposited in a trust for future health benefits, thus the entire amount is unfunded. The covered payroll (annual payroll of active employees covered by the plan) is \$3,868,671. The ratio of the unfunded actuarially accrued liabilities (UAAL) to covered payroll is 29.43 percent.

Actuarial valuations involve estimates of the value of reported amounts and assumptions about the probability of occurrence of events far into the future. Examples include assumptions about future employment, mortality, and health care cost trends. Amounts determined regarding the funded status of the plan and the annual required contributions of the employer are subject to continual revision as actual results are compared with past expectations and new estimates are made about the future. The Schedule of Funding Progress, presented as required supplementary information following the notes to the financial statements, will present multi-year trend information about whether the actuarial value of plan assets is increasing or decreasing over time relative to the actuarial accrued liabilities for benefits.

Projections of benefits for financial reporting purposes are based on the substantive plan (as understood by the employer and plan members) and include the types of benefits provided at the time of each valuation. The actuarial methods and assumptions used include techniques that are designed to reduce the effect of short-term volatility in actuarial accrued liabilities, consistent with the long-term perspective of the calculations.

In the September 30, 2008, actuarial valuation, the entry age normal level percentage of pay actuarial cost method was used. The actuarial assumptions included a five percent discount rate, which is based on the estimated long-term investment yield on the general assets of the Nursing Home. The annual health care cost trend rate is ten percent initially, reduced incrementally to an ultimate rate of five percent after six years. The unfunded actuarial accrued liability is being amortized as a level dollar amount over 30 years.

**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

6. Risk Management

The Nursing Home is exposed to various risks of loss related to torts; theft of, damage to, or destruction of assets; errors or omissions; injuries to employees; or natural disasters. To manage these risks, the Nursing Home purchases commercial insurance.

There were no significant reductions in insurance from the prior year. The amount of settlements did not exceed insurance coverage for the past three fiscal years.

7. Contingent Liabilities

The Nursing Home has one pending claim against it. This claim is covered by insurance; however, there is a \$250,000 self-insurance retention for the claim. If found liable, the Nursing Home could potentially be responsible for up to \$125,000 for the claim, while Ecumen will be responsible for the other half. It is not known whether the amount of the claim will exceed this amount.

8. Subsequent Events

On September 22, 2009, the Itasca County Board approved the issuance and sale of the following bond issues:

\$4,605,000	Taxable General Obligation Nursing Home Revenue Bonds, Series 2009A
1,490,000	Taxable General Obligation Nursing Home Revenue Bonds, Series 2009B
615,000	General Obligation Nursing Home Revenue Refunding Bonds, Series 2009C

The bonds were dated and sold on October 14, 2009. The taxable revenue bonds were issued to finance a major renovation of the Nursing Home. The refunding bonds were issued to refund \$610,000 of bonds from the Nursing Home's 1998 bond issue currently outstanding and callable.

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REQUIRED SUPPLEMENTARY INFORMATION

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**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

Schedule 1

**SCHEDULE OF FUNDING PROGRESS
OTHER POSTEMPLOYMENT BENEFITS PLAN
SEPTEMBER 30, 2009**

Actuarial Valuation Date	Actuarial Value of Assets (a)	Actuarial Accrued Liability (b)	Unfunded Actuarial Accrued Liability (UAAL) (b - a)	Funded Ratio (a/b)	Covered Payroll (c)	UAAL as a Percentage of Covered Payroll ((b - a)/c)
September 30, 2008	\$ -	\$ 1,138,640	\$ 1,138,640	0.00%	\$ 3,868,671	29.43%

Notes to Schedule of Funding Progress

The Itasca Nursing Home currently has no assets that have been irrevocably deposited in a trust for future health benefits. Therefore, the actuarial value of assets is zero.

The Nursing Home implemented Governmental Accounting Standards Board Statement 45 for the fiscal year ended September 30, 2008. Information for prior years is not available.

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STATISTICAL DATA

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**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

**STATISTICAL DATA
FOR THE YEAR ENDED SEPTEMBER 30, 2009
(Unaudited)**

Occupancy

Licensed beds available at year-end	143
Number of resident days available	52,195
Number of actual resident days	46,580
Number of Medicaid days	26,443
Facility occupancy rate	89.25%
Average daily census	127.6
Average case mix score	1.06

Operating Revenues	\$ 10,124,637
Operating Expenses	<u>9,521,623</u>
Income (Loss) From Operations	<u><u>\$ 603,014</u></u>

Income per resident day	\$ 217.36
Cost per resident day	<u>204.41</u>
Income (Loss) From Operations Per Resident Day	<u><u>\$ 12.95</u></u>

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**ITASCA NURSING HOME
GRAND RAPIDS, MINNESOTA**

Schedule 2

SCHEDULE OF FINDINGS AND RECOMMENDATIONS
FOR THE YEAR ENDED SEPTEMBER 30, 2009

**I. FINDINGS RELATED TO FINANCIAL STATEMENTS AUDITED IN
ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS***

INTERNAL CONTROL

PREVIOUSLY REPORTED ITEM NOT RESOLVED

97-1 Internal Control/Segregation of Duties

Management is responsible for establishing and maintaining internal control. This responsibility includes the internal control over the various accounting cycles, the fair presentation of the financial statements and related notes, and the accuracy and completeness of all financial records and related information. Adequate segregation of duties is a key internal control in an organization's accounting system. The size of the Itasca Nursing Home and its staffing limits the internal control that management can design and implement into the organization. Management should be aware that segregation of duties is not adequate from an internal control point of view.

Management is responsible for the accuracy and completeness of all financial records and related information. Also, management is responsible for controls over the period-end financial reporting process, including controls over procedures used to enter transaction totals into the general ledger; initiate, authorize, record, and process journal entries into the general ledger; and record recurring and nonrecurring adjustments to the financial statements.

Management has requested that the Office of the State Auditor prepare the annual financial statements and related notes. This arrangement is not unusual for an organization the size of the Itasca Nursing Home. This decision was based on the availability of the Nursing Home's staff and the cost benefit of using our expertise.

We recommend the Nursing Home Board be mindful that limited staffing causes inherent risks in safeguarding the Nursing Home's assets and the proper reporting of its financial activity. We recommend the Nursing Home Board continue to implement oversight procedures and monitor those procedures to determine if they are still effective internal controls.

Client's Response:

Additional oversight procedures include an audit of business office operations conducted by Ecumen representatives annually. Periodic account reconciliations involve staff at the Ecumen home office in Shoreview and the Itasca County Auditor's Office. Further electronic information system enhancements may soon be added to create additional monitoring efficiencies.

II. OTHER FINDINGS AND RECOMMENDATIONS

MINNESOTA LEGAL COMPLIANCE

PREVIOUSLY REPORTED ITEM RESOLVED

Social Events (06-1)

During our prior audits, we noted the Nursing Home held a staff appreciation dinner paid for with Nursing Home funds. Counties have authority for programs of preventative health and employee recognition services under Minn. Stat. § 15.46. However, any such "program" adopted by a county must be approved and in writing, and it should include clear wellness and/or recognition objectives.

Resolution

In 2009, the Nursing Home Board adopted a resolution establishing an employee recognition program as required by Minn. Stat. § 15.46.



REBECCA OTTO
STATE AUDITOR

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REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH *GOVERNMENT AUDITING STANDARDS*

Nursing Home Board
Itasca Nursing Home

We have audited the basic financial statements of the Itasca Nursing Home as of and for the year ended September 30, 2009, and have issued our report thereon dated March 5, 2010. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States.

Internal Control Over Financial Reporting

In planning and performing our audit, we considered the Itasca Nursing Home's internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Nursing Home's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the Nursing Home's internal control over financial reporting.

Our consideration of internal control over financial reporting was for the limited purpose described in the preceding paragraph of this section and would not necessarily identify all deficiencies in internal control over financial reporting that might be significant deficiencies or material weaknesses. However, as discussed below, we identified a deficiency in internal control over financial reporting that we consider to be a significant deficiency.

A control deficiency exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect misstatements on a timely basis. A significant deficiency is a control deficiency, or combination of control deficiencies, that adversely affects the Nursing Home's ability to initiate, authorize, record, process, or report financial data reliably in accordance with generally accepted accounting principles such that there is more than a remote likelihood that a misstatement of the Nursing Home's financial statements that is more than inconsequential will not be prevented or detected by the Nursing Home's internal control. We considered the deficiency described in the accompanying Schedule of Findings and Recommendations as item 97-1 to be a significant deficiency in internal control over financial reporting.

A material weakness is a significant deficiency, or combination of significant deficiencies, that results in more than a remote likelihood that a material misstatement of the financial statements will not be prevented or detected by the Itasca Nursing Home's internal control.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and would not necessarily identify all deficiencies in internal control that might be significant deficiencies and, accordingly, would not necessarily disclose all significant deficiencies that are also considered to be material weaknesses. However, we consider the significant deficiency described above as item 97-1 to be a material weakness.

Compliance and Other Matters

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

Minnesota Legal Compliance

We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the provisions of the *Minnesota Legal Compliance Audit Guide for Local Government*, promulgated by the State Auditor pursuant to Minn. Stat. § 6.65. Accordingly, the audit included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

The *Minnesota Legal Compliance Audit Guide for Local Government* contains six categories of compliance to be tested: contracting and bidding, deposits and investments, conflicts of interest, public indebtedness, claims and disbursements, and miscellaneous provisions. Our study included all of the listed categories.

The results of our tests indicate that, for the items tested, the Itasca Nursing Home complied with the material terms and conditions of applicable legal provisions.

The Itasca Nursing Home's written response to the material weakness identified in our audit has been included in the Schedule of Findings and Recommendations. We did not audit the Nursing Home's response and, accordingly, we express no opinion on it.

This report is intended solely for the information and use of the Nursing Home Board, management, and others within the Itasca Nursing Home and is not intended to be, and should not be, used by anyone other than those specified parties.

/s/Rebecca Otto

REBECCA OTTO
STATE AUDITOR

/s/Greg Hierlinger

GREG HIERLINGER, CPA
DEPUTY STATE AUDITOR

March 5, 2010