Tensas Community Health Center, Inc. St. Joseph, Louisiana November 30, 2013

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CERTIFIED PUBLIC ACCOUNTANTS

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Independent Auditor's Report

To the Board of Directors Tensas Community Health Center St. Joseph, Louisiana

Report on the Financial Statements

We have audited the accompanying financial statements of Tensas Community Health Center (a nonprofit organization), which comprise the statements of financial position as of November 30, 2013 and 2012, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the 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 from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Tensas Community Health Center as of November 30, 2013 and 2012, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Other Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The accompanying schedule of expenditures of federal awards, as required by Office of Management and Budget Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*, is presented for purposes of additional analysis and is not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated, in all material respects, in relation to the financial statements as a whole.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated July 14, 2014, on our consideration of Tensas Community Health Center'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 internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering Tensas Community Health Center's internal control over financial reporting and compliance.

Authorn, Wargnouth & arroll, LZP

July 14, 2014

Tensas Community Health Center, Inc. Statements of Financial Position November 30, 2013 and 2012

Assets

	2013	2012
Current Assets		
Patient receivables, net	\$ 103,262	\$ 66,215
Prepaid expenses	10,403	3,553
Grants receivable	73,153	29,778
Total current assets	186,818	99,546
Property and Equipment, net	961,885	980,499
Total assets	<u>\$ 1,148,703</u>	<u>\$1,080,045</u>

Liabilities and Net Assets

\$	59,689	\$	36,596
	3,121		18,770
	5,840		5,840
	89,091		118,714
	39,481		34,283
	197,222		214,203
	46,720		52,560
	243,942		266,763
	904,761		813,282
<u>\$ 1</u>	,148,703	<u>\$</u> 1	,080,045
		3,121 5,840 89,091 <u>39,481</u> 197,222 <u>46,720</u> 243,942	3,121 5,840 89,091 <u>39,481</u> 197,222 <u>46,720</u> 243,942 <u>904,761</u>

Tensas Community Health Center, Inc. Statements of Activities Years Ended November 30, 2013 and 2012

	Unrestricted		
	2013	2012	
Revenue and Other Support			
Grants and contracts	\$ 640,383	\$ 720,118	
Net patient service revenue	483,598	419,436	
In-kind contributions	89,000	89,000	
Miscellaneous revenue	<u> </u>	1,083	
Total revenue and other support	1,224,439	1,229,637	
Expenses			
Program	889,775	936,112	
Management and general	243,185	232,358	
Total expenses	1,132,960	1,168,470	
Increase in Net Assets	91,479	61,167	
Net Assets, beginning of period	813,282	752,115	
Net Assets, end of period	<u>\$ 904,761</u>	<u>\$ 813,282</u>	

Tensas Community Health Center, Inc. Statements of Functional Expenses Years Ended November 30, 2013 and 2012

	1	November 30,	2013		1	Novem	ber 30, 20)12	
	Program	Managemen and General		Total	Program		agement General		Total
Expenses									
Salaries and wages	\$ 360,191	\$ 90,894	\$	451,085	\$ 372,753	\$	88,079	\$	460,832
Payroll taxes and benefits	89,224	23,262		112,486	78,173		20,381		98,554
Professional services	255,596	16,359		271,955	272,044		17,907		289,951
Ancillary services	4,736	-		4,736	2,510		-		2,510
Supplies	47,498	17,801		65,299	49,632		13,268		62,900
Insurance	-	8,218		8,218	-		4,731		4,731
Recruitment/advertising	-	1,639		1,639	-		2,837		2,837
Travel, conferences, and meetings	2,275	1,516		3,791	4,058		2,705		6,763
Administrative	-	45,836		45,836	-		56,401		56,401
Bad debts	4,217	-		4,217	21,500		-		21,500
Interest	-	819		819	-		2,419		2,419
Depreciation	54,809	18,270		73,079	64,847		5,225		70,072
Rent	71,229	18,571		89,800	70,595		18,405		89,000
Total expenses	<u>\$ 889,775</u>	<u>\$ 243,185</u>	<u> </u>	1,132,960	\$ 936,112	\$	232,358	<u>\$</u>	1,168,470

Tensas Community Health Center, Inc. Statements of Cash Flows Years Ended November 30, 2013 and 2012

	2013	2012
Cash Flows From Operating Activities		
Increase in net assets	\$ 91,479	\$ 61,167
Adjustments to reconcile increase in net assets to		
net cash provided by operating activities		
Depreciation	73,079	70,072
Bad debts	4,217	21,500
(Increase) Decrease in assets:		
Patient receivables	(41,264)	(20,619)
Prepaid expenses	(6,850)	(556)
Grants receivable	(43,375)	(13,023)
Increase (Decrease) in liabilities:		(
Accounts payable	(29,623)	(507)
Retainage payable	-	(34,798)
Accrued liabilities	5,198	8,806
Deferred grant revenue		(60,733)
Net cash provided by operating activities	52,861	31,309
Cash Flows From Investing Activities		
Purchase of property and equipment	(54,465)	(59,124)
Net cash used in investing activities	(54,465)	(59,124)
Cash Flows From Financing Activities		
Change in managed overdraft	23,093	(15,497)
Change in line of credit	-	(20,210)
Proceeds from capital lease payable	-	58,400
Payments on capital lease payable	(5,840)	-
Proceeds from note payable	-	21,184
Payments on note payable	(15,649)	(16,062)
Net cash provided by financing activities	1,604	27,815
Net Change in Cash and Cash Equivalents	-	-
Cash and Cash Equivalents, beginning of year		
Cash and Cash Equivalents, end of year	<u>\$</u>	<u> </u>
Supplemental Disclosure of Cash Flow Information Cash paid during the year for interest	\$ 819	\$ 2,419
	<u> </u>	

Note 1-Nature of Operations

Tensas Community Health Center, Inc. (the "Center") was incorporated September 19, 2003 to increase access to high quality comprehensive health care services, regardless of ability to pay, for the under-served population of Tensas Parish, Louisiana and the surrounding areas. The Center primarily earns revenue by providing medical and dental services to its patients and through various federal and state grants.

Note 2-Summary of Significant Accounting Policies

A. Basis of Accounting and Presentation

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

The Center reports information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. Unrestricted net assets include those net assets whose use by the Center is not restricted by donors, even though their use may be limited in other respects, such as by contract or board designation. Temporarily restricted net assets are those net assets whose use by the Center has been limited by donors to later periods of time or other specific dates, or for specified purposes. Permanently restricted net assets are those net assets received with donor-imposed restrictions limiting the Center's use of the asset. At November 30, 2013 and 2012, the Center had no temporarily or permanently restricted net assets.

B. 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 the estimates that were used. The most significant item on the statements of financial position involving a greater degree of accounting estimates subject to changes in the near future is the assessment of the allowance for doubtful accounts. As additional information becomes available (or actual amounts are determinable), the recorded estimates are revised and reflected in operating results in the period they are determined.

C. Cash and Cash Equivalents

For purposes of the statements of cash flows, the Center considers all highly liquid investments with an original maturity of three months or less to be cash equivalents.

D. Patient Receivables

Patient receivables are carried at the original billed amount less contractual adjustments and the allowance for doubtful accounts. The allowance is based on management's estimates, historical experiences, and a review of all outstanding amounts on an ongoing basis. Patient receivables are written off when deemed uncollectible.

Note 2-Summary of Significant Accounting Policies (Continued)

D. Patient Receivables (Continued)

Recoveries, if any, are recorded when received. As of November 30, 2013 and 2012, management established an allowance of \$138,961 and \$150,169, respectively.

E. Property and Equipment

Property and equipment are stated at cost. Depreciation is computed using the straight-line method over the following estimated useful lives of the respective assets:

Dental building	39 years
Computer equipment	5 years
Medical equipment	3 - 7 years
Vehicles	5 years

Expenditures for major repairs and improvements that extend the useful lives of property and equipment are capitalized at cost. Expenditures for maintenance and minor repairs are charged to expense as incurred. Amortization of assets under capital lease is included in total depreciation.

F. Grant Revenue

Grant revenue is recorded as related expenses are incurred.

G. Net Patient Service Revenue

Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payers, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payers. Retroactive adjustments are estimated and accrued in the period the related services are rendered and adjusted in future periods as final settlements are determined.

The Center has a sliding fee plan for patients whose income levels fall within the sliding fee guidelines and who do not have coverage with a third-party payer.

Laws and regulations governing the Medicare and Medicaid programs are extremely complex and subject to interpretation. As a result, there is at least a reasonable possibility that recorded estimates will change by a material amount in the near term.

H. Income Tax Status

The Center is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code and has been classified as an entity other than a private foundation within the meaning of Section 509(a). Accordingly, no provision has been made for income taxes.

Note 2-Summary of Significant Accounting Policies (Continued)

H. Income Tax Status (Continued)

Management has determined that there are no uncertain tax positions that would require recognition in the financial statements. If the Center was to incur an income tax liability in the future, interest on any income tax liability would be reported as interest expense and penalties on any income tax would be reported as income taxes. Management's conclusions regarding uncertain tax positions may be subject to review and adjustment at a later date based on ongoing analysis of tax laws, regulations, and interpretations thereof as well as other factors. Generally, tax returns may be examined for three years from the filing date and the current and prior three years remain subject to examination as of November 30, 2013.

I. Advertising

Advertising costs are expensed as incurred and totaled \$1,414 and \$1,072 for the years ended November 30, 2013 and 2012, respectively.

J. <u>Reclassifications</u>

Certain prior year amounts have been reclassified to conform with current year presentation. These reclassifications had no effect on total net assets or the increase in net assets for the year ended November 30, 2013.

Note 3-Property and Equipment

Property and equipment are comprised of the following as of November 30:

	2013	2012
Dental building	\$ 781,945	\$ 767,143
Computer equipment	85,230	85,230
Medical equipment	192,461	152,798
Vehicles	18,485	18,485
Leased dental equipment	58,400	58,400
Land	75,958	75,958
	1,212,479	1,158,014
Less: accumulated depreciation	250,594	177,515
	<u>\$ 961,885</u>	<u>\$ 980,499</u>

Included in depreciation expense is amortization for assets under capital lease amounting to \$8,343 for the years ended November 30, 2013 and 2012. Included in accumulated depreciation is accumulated amortization for assets under capital lease amounting to \$16,686 and \$8,343 as of November 30, 2013 and 2012, respectively.

Note 4-Note Payable		
	<u>2013</u>	2012
Note payable to a financial institution in the original amount of \$21,184, bearing interest at 7.50% per annum, payable over one year in monthly principal and interest installments of \$1,497, maturing on October 20, 2013, unsecured.	<u>\$ 3,121</u>	<u>\$ 18,770</u>
Note 5-Capital Lease Payable		
	2013	2012
The Center acquired equipment under the provisions of a long-term lease, payable to the Tensas Parish Police Jury in the original amount of \$58,400, payable over ten years in annual principal installments of \$5,840, secured by the equipment under the lease. Less: current portion Following are the aggregate future maturities of the capital lease:	\$ 52,560 (5,840) \$ 46,720	\$ 58,400 (5,840) \$ 52,560
2014 \$ 5,840		
2015 5,840		
2016 5,840		
2017 5,840		
2018 5,840		
Thereafter 23,360		
<u>\$ 52,560</u>		

Note 6-Economic Dependency

The Center depends significantly on a federal grant to carry out its program activities. If significant budget cuts are enacted at the federal level, the amount of funds the Center receives could be reduced significantly and have an adverse impact on its operations. Management is not aware of any actions that will adversely affect the amount of funds the Center will receive in the next fiscal year.

Note 7-Contingencies

The Center participates in a federal grant program which is governed by various rules and regulations. Costs charged to the grant program are subject to audit and adjustment by the grantor agency; therefore, to the extent that the Center has not complied with the rules and regulations governing the grants, refunds of any money received and the collectability of any related receivable at year end may be impaired. In management's opinion, there are no significant contingent liabilities relating to compliance with the rules and regulations governing the grants; therefore, no provision has been recorded in the accompanying financial statements for such contingencies. Any costs disallowed would be recognized in the period agreed upon by the grantor agency and the Center.

Note 8-Concentrations of Credit Risk

The Center grants credit without collateral to its patients, most of whom are local residents insured under thirdparty payer agreements. Revenue from patients and third-party payers for the years ended November 30 was as follows:

	2013	2012
Medicaid	58%	58%
Medicare	6%	5%
Sliding fee/private pay	26%	27%
Commercial insurance	10%	10%

Note 9-Donated Facilities

The Tensas Parish Police Jury provides the Center, on an in-kind basis, office space which houses the administrative offices as well as the patient care facilities located in St. Joseph, Louisiana. The estimated value associated with these facilities that has been recognized in the statement of activities as in-kind contributions and rent expense for each of the years ended November 30, 2013 and 2012 was \$89,000.

Note 10-Subsequent Events

The Center evaluated all subsequent events through July 14, 2014, the date the financial statements were available to be issued. As a result, the Center noted no subsequent events that required adjustment to, or disclosure in, these financial statements.

HAWTHORN, WAYMOUTH & CARROLL, L.L.P.

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Independent Auditor's 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*

To the Board of Directors Tensas Community Health Center St. Joseph, Louisiana

We have audited, in accordance with the 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, the financial statements of Tensas Community Health Center (a nonprofit organization), which comprise the statement of financial position as of November 30, 2013, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements, and have issued our report thereon dated July 14, 2014.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered Tensas Community Health Center's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of Tensas Community Health Center's internal control. Accordingly, we do not express an opinion on the effectiveness of Tensas Community Health Center's internal control.

A *deficiency in internal control* 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 and correct, misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control, such that there is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether Tensas Community Health Center's financial statements are free from 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

instances of noncompliance or other matters that are required to be reported under Government Auditing Standards and which are described in the accompanying schedule of findings and questioned costs as item 2013-01.

Tensas Community Health Center's Response to Findings

Tensas Community Health Center's response to the finding identified in our audit is described in the accompanying schedule of findings and questioned costs. Tensas Community Health Center's response was not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on it.

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the organization's internal control or on compliance. This report is an integral part of an audit performed in accordance with Government Auditing Standards in considering the organization's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Hauthen, Warponith & and, LEP

July 14, 2014

HAWTHORN, WAYMOUTH & CARROLL, L.L.P.

LCUIS C. McKNIGHT, III, C.P.A. CHARLES R. PEVEY, JR., C.P.A. DAVID J. BROUSSARD, C.P.A. NEAL D. KING, C.P.A. KARIN S. LEJEUNE, C.P.A. ALYCE S. SCHMITT, C.P.A.



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Independent Auditor's Report on Compliance for Each Major Program And on Internal Control over Compliance Required by OMB Circular A-133

To the Board of Directors Tensas Community Health Center St. Joseph, Louisiana

Report on Compliance for Each Major Federal Program

We have audited Tensas Community Health Center's compliance with the types of compliance requirements described in the OMB Circular A-133 Compliance Supplement that could have a direct and material effect on each of Tensas Community Health Center's major federal programs for the year ended November 30, 2013. Tensas Community Health Center's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

Management's Responsibility

Management is responsible for compliance with the requirements of laws, regulations, contracts, and grants applicable to its federal programs.

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of Tensas Community Health Center's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations.* Those standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about Tensas Community Health Center's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our opinion on compliance for each major federal program. However, our audit does not provide a legal determination of Tensas Community Health Center's compliance.

Opinion on Each Major Federal Program

In our opinion, Tensas Community Health Center complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on each of its major federal programs for the year ended November 30, 2013.

Report on Internal Control Over Compliance

Management of Tensas Community Health Center is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered Tensas Community Health Center's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major federal program and to test and report on internal control over compliance in accordance with OMB Circular A-133, but not for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of Tensas Community Health Center's internal control over compliance.

A *deficiency in internal control over compliance* exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. A *material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance requirement of a federal program with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance is a deficiency or a combination of deficiencies, in internal control over compliance is a deficiency or a combination of deficiencies, in internal control over compliance is a deficiency or a combination of deficiencies, in internal control over compliance is a deficiency or a combination of deficiencies, in internal control over compliance is a deficiency or a combination of deficiencies, in internal control over compliance is a deficiency or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of OMB Circular A-133. Accordingly, this report is not suitable for any other purpose.

Hutton, Waymouth & Corroll, LLP

July 14, 2014

Tensas Community Health Center, Inc. Schedule of Expenditures of Federal Awards Year Ended November 30, 2013

<u>Federal Grantor/Pass Through Grantor/</u> <u>Program Title or Cluster Title</u>	CFDA	Federal Expenditures
U.S. Department of Health and Human Services Consolidated Health Centers*	93.224	\$ 598,040
Total expenditures of federal awards		<u>\$ </u>

*Denotes major program

The accompanying notes are an integral part of this schedule.

Tensas Community Health Center, Inc. Notes to Schedule of Expenditures of Federal Awards Year Ended November 30, 2013

Note 1-Basis of Presentation

The accompanying schedule of expenditures of federal awards includes the federal grant activity of Tensas Community Health Center, Inc. under programs of the federal government for the year ended November 30, 2013. The information in this schedule is presented in accordance with the requirements of OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations.* Because the schedule presents only a selected portion of the operations of the Center, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the Center.

Note 2-Summary of Significant Accounting Principles

Expenditures reported on the schedule are reported on the accrual basis of accounting. Such expenditures are recognized following cost principles contained in OMB Circular A-122, *Cost Principles for Non-Profit Organizations*, wherein certain types of expenditures are not allowable or are limited as to reimbursement.

Note 3-Subrecipients

The Center did not pass-through any of its federal awards to a subrecipient during the fiscal year ended November 30, 2013.

Note 4-Non-cash Assistance

No federal awards were expended in the form of non-cash assistance during the year ended November 30, 2013.

Tensas Community Health Center, Inc. Schedule of Current Year Findings and Questioned Costs Year Ended November 30, 2013

Section I - Summary of Auditor's Results

Financial Statements

Type of auditor's report issued: Unmodified

Internal control over financial reporting

* Material weakness(es) identified:

* Significant deficiencies identified that are not considered to be material weaknesses:

____ Yes <u>X</u> None reported

Noncompliance material to financial statements noted:

<u>X</u> Yes <u>No</u>

Federal Awards

Internal control over major programs

* Material weakness(es) identified:

_____Yes <u>____</u>No

* Significant deficiencies identified that are not considered to be material weaknesses: _____Yes _X_None reported

Type of auditor's report issued on compliance for major programs: Unmodified

Any audit findings disclosed that are required to be reported in accordance with Section 510(a) of Circular A-133:

____Yes X_No

Identification of major programs:

CFDA Number	Federal Program or Cluster
93.224	Consolidated Health Centers

Dollar threshold used to distinguish between type A and type B programs: \$300,000

Auditee qualified as low-risk auditee:

<u> Yes X</u> No

Tensas Community Health Center, Inc. Schedule of Current Year Findings and Questioned Costs Year Ended November 30, 2013

Section II - Financial Statement Audit Findings

Noncompliance with State Laws and Regulations

2013-01 Filing of Report with Louisiana Legislative Auditor

Condition:

Financial statements were not timely filed with the Louisiana Legislative Auditor. This is a repeat finding from the prior year.

Criteria:

LSA-RS 24:513 (5)(a) requires the engagement to be completed within six months of the close of the entity's fiscal year.

Cause:

The Center was not ready for the audit in a timely manner.

Effect:

The Center's financial statements were not timely filed.

Auditor's Recommendation:

To comply with state laws and regulations, the Center should close its books sooner so the audit process can be completed prior to the deadline, or an extension should be filed with the Louisiana Legislative Auditor before May 31.

Management's Corrective Action Plan:

Tensas Community Health Center, Inc. will take appropriate action to ensure timely filing of the financial statements with the LA Legislative Auditor.

Section III - Federal Award Findings

None.

Tensas Community Health Center, Inc. Schedule of Prior Year Findings and Questioned Costs Year Ended November 30, 2013

Section II - Financial Statement Audit Findings

Noncompliance with State Laws and Regulations

2012-01 Filing of Report with Louisiana Legislative Auditor

Condition:

Financial statements were not timely filed with the Louisiana Legislative Auditor.

Criteria:

LSA-RS 24:513 (5)(a) requires the engagement to be completed within six months of the close of the entity's fiscal year.

Cause:

The Center was not ready for the audit in a timely manner.

Effect:

The Center's financial statements were not timely filed.

Auditor's Recommendation:

To comply with state laws and regulations, client should close its books sooner so the audit process can be completed prior to the deadline, or an extension should be filed with the Louisiana Legislative Auditor before May 31.

Management's Corrective Action Plan:

Tensas Community Health Center, Inc. will take appropriate action to ensure timely filing of the financial statements with the Louisiana Legislative Auditor.

Status:

This repeats as finding 2013-01 in the current year.

Section III - Federal Award Findings

None.