



Dave Yost • Auditor of State

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

TABLE OF CONTENTS

TITLE	PAGE
Independent Auditor's Report	1
Management's Discussion and Analysis.....	3
Basic Financial Statements:	
Government-Wide Financial Statements:	
Statement of Net Position – Cash Basis	11
Statement of Activities – Cash Basis	12
Fund Financial Statements:	
Statement of Assets and Fund Balances – Cash Basis – Governmental Funds	13
Statement of Cash Receipts, Disbursements and Changes in Cash Basis Fund Balance – Governmental Funds – For the Year Ended December 31, 2015.....	14
Statement of Receipts, Disbursements and Change in Fund Balance – Budget and Actual – Budget Basis – General Fund For the Year Ended December 31, 2015.....	15
Statement of Receipts, Disbursements and Change in Fund Balance – Budget and Actual – Budget Basis – Help Me Grow Fund For the Year Ended December 31, 2015.....	16
Statement of Receipts, Disbursements and Change in Fund Balance – Budget and Actual – Budget Basis – Women, Infants and Children Fund For the Year Ended December 31, 2015.....	17
Notes to the Basic Financial Statements	19
Independent Auditor's Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Required by <i>Government Auditing Standards</i>	31
Summary Schedule of Prior Audit Findings	33

THIS PAGE INTENTIONALLY LEFT BLANK



Dave Yost • Auditor of State

INDEPENDENT AUDITOR'S REPORT

Crawford County General Health District
Crawford County
1520 Isaac Beal Road
Bucyrus, Ohio 44820

To the Board of Health:

Report on the Financial Statements

We have audited the accompanying modified cash-basis financial statements of the governmental activities, each major fund, and the aggregate remaining fund information of the Crawford County General Health District, Crawford County, Ohio (the District), as of and for the year ended December 31, 2015, and the related notes to the financial statements, which collectively comprise the District's basic financial statements as listed in the table of contents.

Management's Responsibility for the Financial Statements

Management is responsible for preparing and fairly presenting these financial statements in accordance with the cash accounting basis Note 2 describes. This responsibility includes determining that the cash accounting basis is acceptable for the circumstances. Management is also responsible for designing, implementing and maintaining internal control relevant to preparing and fairly presenting financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to opine on these financial statements based on our audit. We audited in accordance with auditing standards generally accepted in the United States of America and the financial audit standards in the Comptroller General of the United States' *Government Auditing Standards*. Those standards require us to plan and perform the audit to reasonably assure the financial statements are free from material misstatement.

An audit requires obtaining evidence about financial statement amounts and disclosures. The procedures selected depend on our judgment, including assessing the risks of material financial statement misstatement, whether due to fraud or error. In assessing those risks, we consider internal control relevant to the District's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not to the extent needed to opine on the effectiveness of the District's internal control. Accordingly, we express no opinion. An audit also includes evaluating the appropriateness of management's accounting policies and the reasonableness of their significant accounting estimates, as well as our evaluation of the overall financial statement presentation.

We believe the audit evidence we obtained is sufficient and appropriate to support our audit opinions.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective cash financial position of the governmental activities, each major fund, and the aggregate remaining fund information of the Crawford County General Health District, Crawford County, Ohio, as of December 31, 2015, and the respective changes in cash financial position and the respective budgetary comparisons for the General, Help Me Grow, and Women, Infants and Children funds thereof for the year then ended in accordance with the accounting basis described in Note 2.

Accounting Basis

We draw attention to Note 2 of the financial statements, which describes the accounting basis. The financial statements are prepared on the modified cash basis of accounting, which differs from generally accepted accounting principles. We did not modify our opinion regarding this matter.

Emphasis of Matter

As discussed in Note 3 to the financial statements, the 2014 financial statements have been restated to show a consolidation of fund balances. We did not modify our opinion regarding this matter.

Other Matters

Other Information

We applied no procedures to Management's Discussion & Analysis, as listed in the table of contents. Accordingly, we express no opinion or any other assurance on it.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated October 7, 2016, on our consideration of the District's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements and other matters. That report describes the scope of our internal control testing over financial reporting and compliance, and the results of that testing, and does not opine 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 the District's internal control over financial reporting and compliance.



Dave Yost
Auditor of State
Columbus, Ohio

October 7, 2016

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

**MANAGEMENT'S DISCUSSION AND ANALYSIS
FOR THE YEAR ENDED DECEMBER 31, 2015**

Unaudited

The discussion and analysis of the District Board of Health's (the District) financial performance provides a review of the District's financial activities for the year ended December 31, 2015, within the limitations of the District's cash basis of accounting. The intent of this discussion and analysis is to provide readers with a general explanation of the District's financial performance. Readers should also review the basic financial statements and notes to the basic financial statements to enhance their understanding of the District's financial performance.

Using the Basic Financial Statements

This annual report is presented in a format consistent with the presentation requirements of Governmental Accounting Standards Board Statement No. 34, as applicable to the District's cash basis of accounting.

This annual report consists of a series of financial statements and notes to those statements. These statements are organized so the reader can understand the District as a financial whole, an entire operating entity. The statements then proceed to provide an increasingly detailed look at specific financial activities and conditions on a cash basis of accounting.

The Statement of Net Position - Cash Basis and Statement of Activities - Cash Basis provide information about the activities of the whole District, presenting both an aggregate view of the District's finances and a long-term view of those finances. Fund financial statements provide a greater level of detail. Funds are created and maintained on the financial records of the District as a way to segregate money whose use is restricted to a particular specified purpose. These statements present financial information by fund, presenting funds with the largest balances or most activity in separate columns.

The notes to the financial statements are an integral part of the government-wide and fund financial statements and provide expanded explanation and detail regarding the information reported in the statements.

Basis of Accounting

The basis of accounting is a set of guidelines that determine when financial events are recorded. The District has elected to present its financial statements on a cash basis of accounting. This basis of accounting is a basis of accounting other than generally accepted accounting principles. Under the District's cash basis of accounting, receipts and disbursements are recorded when cash is received or paid.

As a result of using the cash basis of accounting, certain assets and their related revenues (such as accounts receivable) and certain liabilities and their related expenses (such as accounts payable) are not recorded in the financial statements. Therefore, when reviewing the financial information and discussion within this report, the reader must keep in mind the limitations resulting from the use of the cash basis of accounting.

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

**MANAGEMENT'S DISCUSSION AND ANALYSIS
FOR THE YEAR ENDED DECEMBER 31, 2015**

Unaudited
(continued)

Reporting the District as a Whole

The statement of net position and the statement of activities reflect how the District did financially during 2015, within the limitations of the cash basis of accounting. The Statement of Net Position - Cash Basis presents the cash balances of the governmental activities of the District at year end. The Statement of Activities - Cash Basis compares disbursements with program receipts for each governmental activity. Program receipts include charges paid by the recipient of the program's goods or services and grants and contributions restricted to meeting the operational or capital requirements of a particular program. General receipts are all receipts not classified as program receipts. The comparison of disbursements with program receipts identifies how each governmental function draws from the District's general receipts.

These statements report the District's cash position and the changes in cash position. Keeping in mind the limitations of the cash basis of accounting, these changes can be one way to measure the District's financial health. Over time, increases or decreases in the District's cash position is one indicator of whether the District's financial health is improving or deteriorating. When evaluating the District's financial condition, other nonfinancial factors should also be considered, such as the District's property tax base, the condition of the District's capital assets, the reliance on non-local financial resources for operations and the need for continued growth.

The Statement of Activities - Cash Basis reports all of the District's activities, which are governmental. Subdivision settlements, a local subsidy, charges for services and federal grant monies finance most of these activities.

Reporting the District's Most Significant Funds

Fund Financial Statements

Fund financial statements provide detailed information about the District's major funds.

Governmental Funds - The District's activities are reported in governmental funds. The governmental fund financial statements provide a detailed short-term view of the District's governmental operations and the health services provided. Governmental fund information helps determine whether there are more or less financial resources that can be spent to finance the District's programs. The District's significant governmental funds are presented on the financial statements in separate columns. The District's major governmental funds are the General Fund, Help Me Grow, and Women, Infants and Children (WIC) Funds.

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

**MANAGEMENT'S DISCUSSION AND ANALYSIS
FOR THE YEAR ENDED DECEMBER 31, 2015**

Unaudited
(continued)

The District as a Whole

Table 1 provides a summary of the District's net position for 2015 compared to 2014 on a cash basis:

**Table 1
Net Position - Cash Basis**

	Governmental Activities	
	2015	2014
Assets		
Equity in Pooled Cash and Cash Equivalents	\$736,603	\$669,494
Net Position		
Restricted for Other Purposes	407,474	475,078
Unrestricted	329,129	194,416
Total Net Position	\$736,603	\$669,494

Total net position for the District increased \$67,109 or 10 percent from 2014. The increase in total net position and unrestricted was mostly attributable to an increase in revenue to administer nursing services to the jail and schools.

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

**MANAGEMENT'S DISCUSSION AND ANALYSIS
FOR THE YEAR ENDED DECEMBER 31, 2015**

Unaudited
(continued)

Table 2 reflects the change in net position for 2015 and 2014.

**Table 2
Change in Net Position**

	Governmental Activities	
	2015	2014
Program Cash Receipts		
Charges for Services	\$879,085	\$832,641
Operating Grants and Contributions	838,289	800,724
Total Program Cash Receipts	<u>1,717,374</u>	<u>1,633,365</u>
General Receipts		
Subdivision Settlements	145,883	163,373
Miscellaneous	16,829	27,878
Total General Receipts	<u>162,712</u>	<u>191,251</u>
Total Receipts	<u>1,880,086</u>	<u>1,824,616</u>
Disbursements		
Health		
General Health	345,256	410,395
Central Regional Ebola Preparedness	5,924	0
Food Service	59,284	54,333
Help Me Grow	320,891	255,652
Immunization Action Plan	1,570	16,849
Landfill/Construction and Demolition	35,502	50,002
Maternal Infant Home Visiting	102,496	92,852
Mobile Home and RV Park	2,702	4,967
Public and School Health Services	466,137	422,241
Public Health Emergency Preparedness	82,326	94,094
Reserve Balance	1,215	0
Sewage	23,550	19,363
Solid Waste	67,203	63,091
Swimming Pool	3,840	1,447
Water System	14,232	18,011
Women, Infants and Children	280,849	257,755
Total Disbursements	<u>1,812,977</u>	<u>1,761,052</u>
Change in Net Position	67,109	63,564
Net Position Beginning of Year	<u>669,494</u>	<u>605,930</u>
Net Position End of Year	<u><u>\$736,603</u></u>	<u><u>\$669,494</u></u>

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

**MANAGEMENT'S DISCUSSION AND ANALYSIS
FOR THE YEAR ENDED DECEMBER 31, 2015**

Unaudited
(continued)

In 2015, 9 percent of the District's total receipts were from general receipts, consisting mainly of subdivision settlements collected for general health district purposes. The revenue category, subdivision settlements, represents revenue received from the various townships, villages, and municipality that comprise the District. Revenue received from the various townships, villages, and municipality decreased by 10 percent from 2014. Ohio law sets forth the requirements of how the various townships, villages and municipality that comprise the District are charged. Program cash receipts accounted for the majority of the District's total receipts in 2015. These receipts consist primarily of charges for services for nursing services and service contracts, birth and death certificates, sewage permits, food service licenses, mobile home and RV park, swimming pools, and water system permits and state and federal operating grants. Both the charges for services and operating grants and contributions revenue categories realized a 5 percent increase each in 2015 when compared to 2014. The increase in operating grants and contributions revenue category was primarily attributable to an increase in intergovernmental receipts for the Central Regional Ebola Program, Women, Infants and Children Program, and the Maternal Infant Home Visiting Program.

Governmental Activities

Table 3 indicates the total cost of services and the net cost of services. The total cost of services represents expenses related to carrying out public health duties. The net cost of services identifies the cost of those services supported by charges for services, subdivision settlements, and federal grant monies. Information in the following table is derived from the Statement of Activities - Cash Basis which provides further detail on the cost of program services and the charges for services and sales and operating grants and contributions offsetting those services.

**Table 3
Governmental Activities**

	Total Cost of Services		Net Cost of Services	
	2015	2014	2015	2014
Health				
General Health	\$345,256	\$410,395	\$32,655	\$106,434
Central Regional Ebola Preparedness	5,924	0	2,476	0
Food Service	59,284	54,333	(921)	(7,504)
Help Me Grow	320,891	255,652	(5,314)	(56,728)
Immunization Action Plan	1,570	16,849	(4,555)	3,074
Landfill/Construction and Demolition	35,502	50,002	(7,399)	(5,562)
Maternal Infant Home Visiting	102,496	92,852	(464)	13,428
Mobile Home and RV Park	2,702	4,967	(721)	(3,296)
Public and School Health Services	466,137	422,241	47,048	50,859
Public Health Emergency Preparedness	82,326	94,094	7,632	10,417
Reserve Balance	1,215	0	1,215	0
Sewage	23,550	19,363	7,284	1,275
Solid Waste	67,203	63,091	7,203	3,091
Swimming Pool	3,840	1,447	(263)	(2,815)
Water System	14,232	18,011	(220)	4,205
Women, Infants and Children	280,849	257,755	9,947	10,809
Total Expenses	\$1,812,977	\$1,761,052	\$95,603	\$127,687

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

**MANAGEMENT'S DISCUSSION AND ANALYSIS
FOR THE YEAR ENDED DECEMBER 31, 2015**

Unaudited
(continued)

In 2015, program cash receipts supported 95 percent of the costs of services for the District. Program cash receipts include charges for services and sales and operating grants and contributions. General receipts include subdivision settlements revenue and miscellaneous revenue.

Overall, the total cost for providing general health services decreased modestly from 2014 to 2015. The decrease in total cost of services for General Health program was primarily due to an increase in employee time spent in other programs such as Public and School Health Services, Food Service, and Maternal Infant Home Visiting.

In 2015, the cost of providing services was not covered by the charges for services or operating grants revenues. Therefore, general receipts including subdivision settlements revenue and miscellaneous revenue supported the remaining 5 percent of the costs of services for the District that was not covered by program cash receipts. The decrease in net cost of services for the Public School and Health Services and Help Me Grow programs were due to receiving more service contract revenue and intergovernmental revenue.

The Health District's Funds

The governmental funds had total receipts of \$1,880,086 and disbursements of \$1,812,977. The governmental funds had an increase in the cash balance of \$67,109. The increase was partially attributable to an increase in revenue to charges for services revenue for administering nursing services to the jail and school entities. An increase in intergovernmental receipts was also realized from the District receiving the Central Regional Ebola grant for the first time and an increase in intergovernmental receipts for the Women, Infants and Children Program.

Budgetary Highlights

The District's budget is prepared according to Ohio law and is based on accounting for certain transactions on a basis of cash receipts, disbursements, and encumbrances. The most significant budgeted fund is the General Fund.

During the course of 2015, the District amended its estimated revenues as set forth by Ohio law, and the budgetary statement reflects that financial activity. Amendments to original receipts in the General Fund were made as a result of the District receiving slightly more charges for services than anticipated. Amendments to original appropriations are made in accordance with Ohio law in the General Fund. Budgetary changes were made in the General Fund, Help Me Grow Fund, and Women, Infants and Children Fund. Amendments to personal services were made in the General Fund due to staffing changes. Amendments were made to materials and supplies and capital outlay for the Help Me Grow Fund for the purchase of parenting materials, resource guides, and for technology and office equipment upgrades. Amendments were made in the Women, Infants and Children Fund for rent and utilities.

Actual receipts and disbursements in the General Fund did not vary significantly from the final budget.

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

**MANAGEMENT'S DISCUSSION AND ANALYSIS
FOR THE YEAR ENDED DECEMBER 31, 2015**

Unaudited
(continued)

Contacting the District's Financial Management

This financial report is designed to provide a general overview of the District's finances for all those with an interest in the District's finances and to reflect the District's accountability for the money it receives. Questions concerning any of the information in this report or requests for additional information should be directed to the Crawford County General Health District, 1520 Isaac Beal Road, Bucyrus, Ohio 44820.

THIS PAGE INTENTIONALLY LEFT BLANK

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*STATEMENT OF NET POSITION - CASH BASIS
DECEMBER 31, 2015*

	<u>Governmental Activities</u>
Assets	
Equity in Pooled Cash and Cash Equivalents	<u>\$736,603</u>
<i>Total Assets</i>	<u><u>736,603</u></u>
Net Position	
Restricted for:	
Other Purposes	407,474
Unrestricted	<u>329,129</u>
<i>Total Net Position</i>	<u><u>\$736,603</u></u>

See accompanying notes to the basic financial statements

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*STATEMENT OF ACTIVITIES - CASH BASIS
FOR THE YEAR ENDED DECEMBER 31, 2015*

	<u>Program Cash Receipts</u>		<u>Net (Disbursements) Receipts and Changes in Net Position</u>	
	<u>Disbursements</u>	<u>Charges for Services and Sales</u>	<u>Operating Grants and Contributions</u>	
			<u>Governmental Activities</u>	
Governmental Activities				
Health				
General Health	\$345,256	\$283,714	\$28,887	(\$32,655)
Central Regional Ebola	5,924	0	3,448	(2,476)
Food Service	59,284	60,205	0	921
Help Me Grow	320,891	0	326,205	5,314
Immunization Action Plan	1,570	0	6,125	4,555
Landfill/Construction and Demolition	35,502	42,901	0	7,399
Maternal Infant Home Visiting	102,496	0	102,960	464
Mobile Home and RV Park	2,702	3,423	0	721
Public and School Health Services	466,137	394,021	25,068	(47,048)
Public Health Emergency Preparedness	82,326	0	74,694	(7,632)
Reserve Balance	1,215	0	0	(1,215)
Sewage	23,550	16,266	0	(7,284)
Solid Waste	67,203	60,000	0	(7,203)
Swimming Pool	3,840	4,103	0	263
Water System	14,232	14,452	0	220
Women, Infants and Children	280,849	0	270,902	(9,947)
	<u>280,849</u>	<u>0</u>	<u>270,902</u>	<u>(9,947)</u>
<i>Total Governmental Activities</i>	<u>\$1,812,977</u>	<u>\$879,085</u>	<u>\$838,289</u>	<u>(95,603)</u>
		General Receipts		
				145,883
				16,829
		<i>Total General Receipts</i>		<u>162,712</u>
				67,109
		<i>Change in Net Position</i>		<u>67,109</u>
				669,494
		<i>Net Position Beginning of Year</i>		<u>669,494</u>
				\$736,603
		<i>Net Position End of Year</i>		<u><u>\$736,603</u></u>

See accompanying notes to the basic financial statements

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*STATEMENT OF ASSETS AND FUND BALANCES - CASH BASIS
GOVERNMENTAL FUNDS
DECEMBER 31, 2015*

	General	Help Me Grow	Women, Infants and Children	Other Governmental Funds	Total Governmental Funds
Assets					
Equity in Pooled Cash and Cash Equivalents	\$329,129	\$229,786	\$49,098	\$128,590	\$736,603
Total Assets	\$329,129	\$229,786	\$49,098	\$128,590	\$736,603
Fund Balances					
Restricted	\$0	\$229,786	\$49,098	\$128,590	\$407,474
Assigned	303,058	0	0	0	303,058
Unassigned	26,071	0	0	0	26,071
<i>Total Fund Balances</i>	\$329,129	\$229,786	\$49,098	\$128,590	\$736,603

See accompanying notes to the basic financial statements

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*STATEMENT OF CASH RECEIPTS, DISBURSEMENTS AND CHANGE IN CASH BASIS
FUND BALANCE - GOVERNMENTAL FUNDS
FOR THE YEAR ENDED DECEMBER 31, 2015*

	General	Help Me Grow	Women, Infants and Children	Other Governmental Funds	Total Governmental Funds
Receipts					
Charges for Services	\$655,962	\$0	\$0	\$2,720	\$658,682
Contributions	0	1,911	0	0	1,911
Licenses, Fees and Permits	92,888	0	0	123,973	216,861
Fines	42	0	0	0	42
Intergovernmental	203,338	324,294	270,902	187,227	985,761
Miscellaneous	10,134	500	0	6,195	16,829
<i>Total Receipts</i>	<u>962,364</u>	<u>326,705</u>	<u>270,902</u>	<u>320,115</u>	<u>1,880,086</u>
Disbursements					
Current:					
Health					
Personal Services	616,911	244,159	244,187	180,547	1,285,804
Materials and Supplies	119,943	19,663	3,471	250	143,327
Remittances	31,904	0	0	91,586	123,490
Contractual Services	79,535	20,354	18,307	27,117	145,313
Capital Outlay	1,617	12,092	4,623	6,192	24,524
Other	36,214	24,623	10,261	19,421	90,519
<i>Total Disbursements</i>	<u>886,124</u>	<u>320,891</u>	<u>280,849</u>	<u>325,113</u>	<u>1,812,977</u>
<i>Excess of Receipts Over (Under) Disbursements</i>	<u>76,240</u>	<u>5,814</u>	<u>(9,947)</u>	<u>(4,998)</u>	<u>67,109</u>
Other Financing Sources (Uses)					
Advances In	20,000	0		30,000	50,000
Advances Out	<u>(30,000)</u>	<u>0</u>	<u>0</u>	<u>(20,000)</u>	<u>(50,000)</u>
<i>Total Other Financing Sources (Uses)</i>	<u>(10,000)</u>	<u>0</u>	<u>0</u>	<u>10,000</u>	<u>0</u>
Net Changes in Fund Balance	66,240	5,814	(9,947)	5,002	67,109
<i>Fund Balance Beginning of Year - Restated</i>	<u>262,889</u>	<u>223,972</u>	<u>59,045</u>	<u>123,588</u>	<u>669,494</u>
<i>Fund Balance End of Year</i>	<u><u>\$329,129</u></u>	<u><u>\$229,786</u></u>	<u><u>\$49,098</u></u>	<u><u>\$128,590</u></u>	<u><u>\$736,603</u></u>

See accompanying notes to the basic financial statements

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*STATEMENT OF RECEIPTS, DISBURSEMENTS AND CHANGE
IN FUND BALANCE - BUDGET AND ACTUAL - BUDGET BASIS
GENERAL FUND
FOR THE YEAR ENDED DECEMBER 31, 2015*

	Budgeted Amounts		Actual	Variance With Final Budget Positive (Negative)
	Original	Final		
Receipts				
Charges for Services	\$620,597	\$649,322	\$655,962	\$6,640
Licenses, Fees and Permits	104,387	104,386	92,888	(11,498)
Fines	200	200	42	(158)
Intergovernmental	223,573	223,573	203,338	(20,235)
Miscellaneous	5,380	3,880	10,134	6,254
<i>Total Receipts</i>	<u>954,137</u>	<u>981,361</u>	<u>962,364</u>	<u>(18,997)</u>
Disbursements				
Current:				
Health				
Personal Services	667,233	687,915	619,674	68,241
Materials and Supplies	169,881	164,248	124,923	39,325
Remittances	40,546	40,101	39,852	249
Contractual Services	107,060	105,405	86,249	19,156
Capital Outlay	5,452	5,939	5,217	722
Other	44,604	65,962	38,624	27,338
<i>Total Disbursements</i>	<u>1,034,776</u>	<u>1,069,570</u>	<u>914,539</u>	<u>155,031</u>
<i>Excess of Receipts Over Disbursements</i>	<u>(80,639)</u>	<u>(88,209)</u>	<u>47,825</u>	<u>136,034</u>
Other Financing Sources (Uses)				
Advances In	0	0	20,000	20,000
Advances Out	0	0	(30,000)	(30,000)
<i>Total Other Financing Sources (Uses)</i>	<u>0</u>	<u>0</u>	<u>(10,000)</u>	<u>(10,000)</u>
<i>Net Changes in Fund Balance</i>	(80,639)	(88,209)	37,825	126,034
<i>Fund Balance Beginning of Year - Restated</i>	237,452	237,452	237,452	0
Prior Year Encumbrances Appropriated	<u>25,437</u>	<u>25,437</u>	<u>25,437</u>	<u>0</u>
<i>Fund Balance End of Year</i>	<u><u>\$182,250</u></u>	<u><u>\$174,680</u></u>	<u><u>\$300,714</u></u>	<u><u>\$126,034</u></u>

See accompanying notes to the basic financial statements

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*STATEMENT OF RECEIPTS, DISBURSEMENTS AND CHANGE
IN FUND BALANCE - BUDGET AND ACTUAL - BUDGET BASIS
HELP ME GROW FUND
FOR THE YEAR ENDED DECEMBER 31, 2015*

	<u>Budgeted Amounts</u>		<u>Actual</u>	Variance With Final Budget Positive (Negative)
	<u>Original</u>	<u>Final</u>		
Receipts				
Intergovernmental	\$312,655	\$312,655	\$324,294	\$11,639
Contributions	1,000	1,000	1,911	911
Other	10,000	10,000	500	(9,500)
<i>Total Receipts</i>	<u>323,655</u>	<u>323,655</u>	<u>326,705</u>	<u>3,050</u>
Disbursements				
Current:				
Health				
Personal Services	251,432	249,455	244,159	5,296
Materials and Supplies	5,100	19,785	19,785	0
Contractual Services	29,963	24,981	21,199	3,782
Capital Outlay	8,614	12,157	12,092	65
Other	26,788	29,738	25,712	4,026
<i>Total Disbursements</i>	<u>321,897</u>	<u>336,116</u>	<u>322,947</u>	<u>13,169</u>
<i>Net Changes in Fund Balance</i>	1,758	(12,461)	3,758	16,219
<i>Fund Balance Beginning of Year</i>	223,972	223,972	223,972	0
Prior Year Encumbrances Appropriated	<u>3,351</u>	<u>3,351</u>	<u>3,351</u>	<u>0</u>
<i>Fund Balance End of Year</i>	<u><u>\$229,081</u></u>	<u><u>\$214,862</u></u>	<u><u>\$231,081</u></u>	<u><u>\$16,219</u></u>

See accompanying notes to the basic financial statements

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*STATEMENT OF RECEIPTS, DISBURSEMENTS AND CHANGE
IN FUND BALANCE - BUDGET AND ACTUAL - BUDGET BASIS
WOMEN, INFANTS AND CHILDREN FUND
FOR THE YEAR ENDED DECEMBER 31, 2015*

	<u>Budgeted Amounts</u>		<u>Actual</u>	Variance With
	<u>Original</u>	<u>Final</u>		Final Budget Positive (Negative)
Receipts				
Intergovernmental	\$283,310	\$283,310	\$270,902	(\$12,408)
Disbursements				
Current:				
Health				
Personal Services	250,327	244,186	244,186	0
Materials and Supplies	10,978	3,471	3,471	0
Contract Services	12,343	19,007	19,007	0
Capital Outlay	6,450	4,623	4,623	0
Other	4,582	10,766	10,766	0
<i>Total Disbursements</i>	<u>284,680</u>	<u>282,053</u>	<u>282,053</u>	<u>0</u>
<i>Net Changes in Fund Balance</i>	(1,370)	1,257	(11,151)	(12,408)
<i>Fund Balance Beginning of Year</i>	57,672	57,672	57,672	0
Prior Year Encumbrances Appropriated	<u>1,373</u>	<u>1,373</u>	<u>1,373</u>	<u>0</u>
<i>Fund Balance End of Year</i>	<u><u>\$57,675</u></u>	<u><u>\$60,302</u></u>	<u><u>\$47,894</u></u>	<u><u>(\$12,408)</u></u>

See accompanying notes to the basic financial statements

THIS PAGE INTENTIONALLY LEFT BLANK

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2015*

Note 1 - Reporting Entity

The Crawford County General Health District (the District), is a body corporate and politic established to exercise the rights and privileges conveyed to it by the constitution and laws of the State of Ohio. A seven-member Board of Health governs the District. Five members are appointed by the District Advisory Council and two members are appointed by the City of Bucyrus. The Board of Health appoints a health commissioner and all employees of the District.

The reporting entity is composed of the primary government. The primary government consists of all funds, departments, boards and agencies that are not legally separate from the District.

The District's services include communicable disease investigations, immunization clinics, inspections, public health nursing services, the issuance of health-related licenses and permits, and emergency response planning concerning public health threats.

The District's management believes these basic financial statements present all activities for which the District is financially accountable.

Note 2 - Summary of Significant Accounting Policies

As discussed further in Note 2.C, these financial statements are presented on a cash basis of accounting. This cash basis of accounting differs from accounting principles generally accepted in the United States of America (GAAP). Generally accepted accounting principles include all relevant Governmental Accounting Standards Board (GASB) pronouncements, which have been applied to the extent they are applicable to the cash basis of accounting. Following are the more significant of the District's accounting policies.

A. Basis of Presentation

The District's basic financial statements consist of government-wide financial statements, including a statement of net position and a statement of activities, and fund financial statements which provide a more detailed level of financial information.

Government-Wide Financial Statements

The statement of net position and the statement of activities display information about the District as a whole. These statements include the financial activities of the primary government. Governmental activities generally are financed through intergovernmental receipts or other nonexchange transactions.

The statement of net position presents the cash balance of the governmental activities of the District at year end. The statement of activities compares disbursements and program receipts for each program or function of the District's governmental activities. Disbursements are reported by function. A function is a group of related activities designed to accomplish a major service or regulatory program for which the District is responsible.

Program receipts include charges paid by the recipient of the goods or services offered by the program, grants and contributions that are restricted to meeting the operational or capital requirements of a particular program, and receipts of interest earned on grants that are required to be used to support a particular program.

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2015
(Continued)*

Note 2 - Summary of Significant Accounting Policies (Continued)

Receipts which are not classified as program receipts are presented as general receipts of the District, with certain limited exceptions. The comparison of direct disbursements with program receipts identifies the extent to which each governmental program is self-financing on a cash basis or draws from the general receipts of the District.

Fund Financial Statements

During the year, the District segregates transactions related to certain District functions or activities in separate funds in order to aid financial management and to demonstrate legal compliance. Fund financial statements are designed to present financial information of the District at this more detailed level. The focus of governmental fund financial statements is on major funds. Each major fund is presented in a separate column. Nonmajor funds are aggregated and presented in a single column.

B. Fund Accounting

The District uses funds to maintain its financial records during the year. A fund is defined as a fiscal and accounting entity with a self-balancing set of accounts. The funds of the District are presented as governmental.

Governmental Funds

Governmental funds are those through which all governmental functions of the District are financed. The following are the District's major governmental funds:

General Fund - The General Fund accounts for all financial resources, except those required to be accounted for in another fund. The General Fund balance is available to the District for any purpose provided it is expended or transferred according to the general laws of Ohio.

Help Me Grow Fund - The Help Me Grow Fund receives intergovernmental revenue restricted to administering the Help Me Grow program. These monies are for the promotion of the well-being of young children through home-based specialized services and public awareness, with a special emphasis on early intervention and prevention.

Women, Infants, and Children (WIC) Fund - The Women, Infants, and Children Fund accounts for federal grant monies restricted to the Special Supplemental Nutrition Program.

The other governmental funds of the District account for grants and other resources, whose use is restricted or assigned, for a particular purpose.

C. Basis of Accounting

The District's financial statements are prepared using the cash basis of accounting. Except for modifications having substantial support, receipts are recorded in the District's financial records and reported in the financial statements when cash is received rather than when earned and disbursements are recorded when cash is paid rather than when a liability is incurred. Any such modifications made by the District are described in the appropriate section in this note.

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2015
(Continued)*

Note 2 - Summary of Significant Accounting Policies (Continued)

As a result of the use of this cash basis of accounting, certain assets and their related revenues (such as accounts receivable and revenue for billed or provided services not yet collected) and certain liabilities and their related expenses (such as accounts payable and expenses for goods or services received but not yet paid, and accrued expenses and liabilities) are not recorded in these financial statements.

D. Budgetary Process

All funds, except agency funds, are legally required to be budgeted and appropriated. The major documents prepared are the tax budget, the certificate of estimated resources, and the appropriations resolution, all of which are prepared on the budgetary basis of accounting. The certificate of estimated resources establishes a limit on the amount the County Board of Health may appropriate. The appropriations resolution is the County Board of Health's authorization to spend.

The Board of Health adopts an annual appropriation measure before the first Monday of April. The appropriation measure sets forth the amounts for current expenses for the next year and estimates the several sources of revenue available to the District, including the amount provided by the State and the amount to be collected in fees. The measure is certified to the County Auditor who submits it to the County Budget Commission. The Commission may reduce but not increase any item in the appropriation measure.

The appropriation, less the amount available from the several sources of revenue and any carry-over from the previous year, is apportioned among the townships and municipal corporations composing the District on the basis of taxable valuation. In order for the townships and municipal corporations to include the amounts for the District in their budgets, the District provides each with an estimate of contemplated revenues and expenditures before the first day of June.

Subject to the amount that has been apportioned among the townships and municipal corporations and as may become available from the several sources of revenue, the Board of Health, by resolution, may transfer funds from one account in the appropriation to another, reduce or increase any account, create new accounts, make additional appropriations or reduce total appropriations. Any such action must be submitted to and approved by the County Budget Commission.

E. Cash and Investments

The County Treasurer is the custodian for the District's cash and investments. The County's cash and investment pool holds the District's cash and investments, which are reported at the County Treasurer's carrying amount. Deposits and investments disclosures for the County as a whole are detailed in the County's Comprehensive Annual Financial Report and may be obtained from the Crawford County Auditor's Office, 112 East Mansfield Street, Bucyrus, Ohio 44820.

F. Restricted Assets

Assets are reported as restricted when limitations on their use change the nature or normal understanding of the availability of the asset. Such constraints are either externally imposed by creditors, contributors, grantors, or laws of other governments, or are imposed by law through constitutional provisions or enabling legislation.

G. Inventory and Prepaid Items

The District reports disbursements for inventory and prepaid items when paid. These items are not reflected as assets in the accompanying financial statements.

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2015
(Continued)*

Note 2 - Summary of Significant Accounting Policies (Continued)

H. Capital Assets

Acquisitions of property, plant and equipment are recorded as disbursements when paid. These items are not reflected as assets in the accompanying financial statements.

I. Interfund Receivables/Payables

The District reports advances-in and advances-out for interfund loans. These items are not reflected as assets and liabilities in the accompanying financial statements.

J. Accumulated Leave

In certain circumstances, such as upon leaving employment or retirement, employees are entitled to cash payments for unused leave. Unpaid leave is not reflected as a liability under the District's cash basis of accounting.

K. Employer Contributions to Cost-Sharing Pension Plans

The District recognizes the disbursement for employer contributions to cost-sharing pension plans when they are paid. As described in Notes 7 and 8, the employer contributions include portions for pension benefits and for postretirement health care benefits.

L. Long-Term Obligations

The District's cash basis financial statements do not report liabilities for long-term obligations. Proceeds of loans are reported as cash when received and principal and interest are reported when paid. Since recording a capital asset when entering into a capital lease is not the result of a cash transaction, neither an other financing source nor a capital outlay expenditure are reported at inception. Lease payments are reported when paid. The District did not have any long-term obligations in 2015.

M. Net Position

Net position is reported as restricted when there are limitations imposed on their use either through enabling legislation or through external restrictions imposed by creditors, grantors, or laws or regulations of other governments. Net position restricted for other purposes primarily include activities of WIC, Help Me Grow and other governmental. The District's policy is to first apply restricted resources when an expense is incurred for purposes for which both restricted and unrestricted resources are available.

The government-wide statement of net position reports \$407,474 of restricted net position. The District did not have any net position restricted by enabling legislation at December 31, 2015.

N. Fund Balance

Fund balance is divided into five classifications based primarily on the extent to which the District is bound to observe constraints imposed upon the use of the resources in governmental funds. The classifications are as follows:

Nonspendable - The nonspendable classification includes amounts that cannot be spent because they are not in spendable form or legally or contractually required to be maintained intact. The "not in spendable form" includes items that are not expected to be converted to cash.

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2015
(Continued)*

Note 2 - Summary of Significant Accounting Policies (Continued)

Restricted - The restricted classification includes amounts restricted when constraints placed on the use of resources are either externally imposed by creditors (such as through debt covenants), grantors, contributors, or laws or regulations of other governments, or is imposed by law through constitutional provisions or enabling legislation. (Board of Health resolutions).

Enabling legislation authorized the District to assess, levy, charge, or otherwise mandate payment of resources (from external resource providers) and includes a legally enforceable requirement that those resources be used only for the specific purposes stipulated in the legislation. Legal enforceability means the District can be compelled by an external party such as citizens, public interest groups, or the judiciary to use resources created by enabling legislation only for purposes specified by the legislation

Committed - The committed classification includes amounts that can be used only for the specific purposes imposed by a formal action (resolution) of the Board of Health. The committed amounts cannot be used for any other purpose unless the Board of Health remove or change the specified use by taking the same type of action (resolution) it employed to previously commit those amounts. In contrast to fund balance that is restricted by enabling legislation, committed fund balance may be redeployed for other purposes with appropriate due process. Constraints imposed on the use of committed amounts are imposed by the Board of Health, separate from the authorization to raise the underlying revenue; therefore, compliance with these constraints is not considered to be legally enforceable. Committed fund balance also incorporates contractual obligations to the extent that existing resources in the fund have been specifically committed for use in satisfying those contractual requirements.

Assigned - Amounts in the assigned classification are intended to be used by the District for specific purposes but do not meet the criteria to be classified as restricted or committed. In governmental funds, other than the General Fund, assigned amounts represent intended uses established by the Board of Health or by a District official delegated that authority by resolution.

Unassigned - Unassigned fund balance is the residual classification for the General Fund and includes all spendable amounts not contained in the other classifications. In other governmental funds, the unassigned classification is used only to report a deficit balance resulting from overspending for specific purposes for which amounts had been restricted, committed, or assigned.

The District first applies restricted resources when an expenditure is incurred for purposes for which either restricted or unrestricted (committed, assigned, and unassigned) amounts are available. Similarly, within unrestricted fund balance, committed amounts are reduced first followed by assigned and then unassigned amounts when expenditures are incurred for purposes for which amounts in any of the unrestricted fund balance classifications can be used.

O. Interfund Transactions

Exchange transactions between funds are reported as receipts in the seller funds and as disbursements in the purchaser funds. Subsidies from one fund to another without a requirement for repayment are reported as interfund transfers. Interfund transfers are reported as other financing sources/uses in governmental funds. Repayments from funds responsible for particular cash disbursements to the funds that initially paid for them are not presented in the financial statements.

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2015
(Continued)*

Note 3 - Restatement of Fund Balances

In 2015, the District consolidated its funds that were not statutorily required to be reported separately. The adjustment had the following effect on fund balances of the major governmental funds and all other funds as previously reported:

	General	Help Me Grow	Public and School Health Services	Women, Infants and Children
Fund Balance at December 31, 2014	\$102,944	\$223,972	\$92,460	\$59,045
Adjustment	159,945	0	(92,460)	0
Adjusted Fund Balance at December 31, 2014	\$262,889	\$223,972	\$0	\$59,045
		Other Governmental	Total Governmental Funds	
Fund Balance at December 31, 2014		\$191,073	\$669,494	
Adjustment		(67,485)	0	
Adjusted Fund Balance at December 31, 2014		\$123,588	\$669,494	

Note 4 - Budgetary Basis of Accounting

The budgetary basis as provided by law is based upon accounting for certain transactions on the basis of cash receipts, disbursements, and encumbrances. The Statement of Receipts, Disbursements and Changes in Fund Balance - Budget and Actual - Budget Basis presented for the General Fund and each major special revenue fund is prepared on the budgetary basis to provide a meaningful comparison of actual results with the budget. The difference between the budgetary basis and the cash basis is outstanding year end encumbrances are treated as expenditures (budgetary basis) rather than as restricted, committed, or assigned fund balance (cash basis). The encumbrances outstanding at year end (budgetary basis) amounted to:

General Fund	\$28,415
Major Special Revenue Funds:	
Help Me Grow	2,057
Women, Infants and Children	1,205

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2015
(Continued)*

Note 5 - Subdivision Settlements and Local Subsidy

Section 3709.28 of the Ohio Revised Code sets forth the requirements that must be followed in determining the apportionments that each township and village comprising the District must pay. In accordance with Ohio law, the County Auditor is required to apportion the aggregate appropriation of the District as fixed by the County Budget Commission, less the amounts available to the District from all sources of revenue certified by the ensuing fiscal year, including any amounts in the District fund from the previous appropriation, and after considering and allowing for funds needed to fund ongoing operations in the ensuing fiscal year. In accordance with Ohio law, the County Auditor makes all apportionments based on each entity's taxable property valuations, and the County Auditor withholds these apportionments from the property tax settlements and distributes these monies back to the District's General Fund. Subdivision settlements for 2015 totaled \$145,883 and are reported as intergovernmental receipts in the financial statements. Auburn, Bucyrus, Chatfield, Cranberry, Dallas, Holmes, Jackson, Jefferson, Liberty, Lykens, Polk, Sandusky, Texas, Tod, Vernon and Whetstone Townships, and the Villages of Chatfield, Crestline, New Washington, North Robinson, and Tiro comprise the District. The City of Bucyrus also contracts with the District for health services in accordance with Ohio law. For 2015, the amount received by the District from the City of Bucyrus for providing health services was \$226,178 and is reported in the financial statements as charges for services revenue.

Note 6 - Risk Management

The District is exposed to various risks of property and casualty losses, and injuries to employees. The District insures against injuries to employees through the Ohio Bureau of Worker's Compensation.

The District belongs to the Public Entities Pool of Ohio (PEP), a risk-sharing pool available to Ohio local governments. PEP provides property and casualty insurance for its members. York Risk Pooling Services, Inc. (YORK), functions as the administrator of PEP and provides underwriting, claims, loss control, risk management, and reinsurance services for PEP. PEP is a member of the American Public Entity Excess Pool (APEEP), which is also administered by YORK. Member governments pay annual contributions to fund PEP. PEP pays judgments, settlements and other expenses resulting from covered claims that exceed the members' deductibles.

Casualty and Property Coverage

APEEP provides PEP with an excess risk-sharing program. Under this arrangement, PEP retains insured risks up to an amount specified in the contracts. At December 31, 2015, PEP retained \$350,000 for casualty claims and \$100,000 for property claims.

The aforementioned casualty and property reinsurance agreement does not discharge PEP's primary liability for claims payments on covered losses. Claims exceeding coverage limits are the obligation of the respective government.

Financial Position

PEP's financial statements (audited by other accountants) conform with generally accepted accounting principles, and reported the following assets, liabilities and retained earnings at December 31, 2015 and 2014:

<u>Casualty and Property Coverage</u>	<u>2015</u>	<u>2014</u>
Assets	\$38,307,677	\$35,402,177
Liabilities	(12,759,127)	(12,363,257)
Net Position - Unrestricted	\$25,548,550	\$23,038,920

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2015
(Continued)*

Note 6 - Risk Management (Continued)

At December 31, 2015 and 2014, respectively, the assets above also include approximately \$11 million and \$10.8 million of unpaid claims to be billed to approximately 499 member governments in the future, as of December 31, 2015, respectively. These amounts will be included in future contributions from members when the related claims are due for payment.

Based on discussions with PEP, the expected rates PEP charges to compute member contributions, which are used to pay claims as they become due, are not expected to change significantly from those used to determine the historical contributions detailed below. By contract, the annual liability of each member is limited to the amount of financial contributions required to be made to PEP for each year of membership.

<u>Contributions to PEP</u>	
2015	\$7,538
2014	\$7,338

After one year of membership, a member may withdraw on the anniversary of the date of joining PEP, if the member notifies PEP in writing (via certified mail) 60 days prior to the anniversary date. Upon withdrawal, members are eligible for a full or partial refund of their capital contributions, minus the subsequent year's contribution. Withdrawing members have no other future obligation to PEP. Also upon withdrawal, payments for all casualty claims and claim expenses become the sole responsibility of the withdrawing member, regardless of whether a claim occurred or was reported prior to the withdrawal.

Note 7 - Defined Benefit Pension Plans

Plan Description - Ohio Public Employees Retirement System (OPERS)

Plan Description - District employees participate in the Ohio Public Employees Retirement System (OPERS). OPERS administers three separate pension plans. The traditional pension plan is a cost-sharing multiple-employer defined benefit pension plan. The member-directed plan is a defined contribution plan and the combined plan is a cost-sharing multiple-employer defined benefit pension plan with defined contribution features. While members (e.g. District employees) may elect the member-directed plan and the combined plan, substantially all employee members are in OPERS' traditional plan; therefore, the following disclosure focuses on the traditional pension plan.

OPERS provides retirement, disability, survivor and death benefits, and annual cost of living adjustments to members of the traditional plan. Authority to establish and amend benefits is provided by Chapter 145 of the Ohio Revised Code. OPERS issues a stand-alone financial report that includes financial statements, required supplementary information, and detailed information about OPERS' fiduciary net position that may be obtained by visiting <https://www.opers.org/financial/reports.shtml>, by writing to the Ohio Public Employees Retirement System, 277 East Town Street, Columbus, Ohio 43215-4642, or by calling 800-222-7377.

Senate Bill (SB) 343 was enacted into law with an effective date of January 7, 2013. In the legislation, members were categorized into three groups with varying provisions of the law applicable to each group. The following table provides age and service requirements for retirement and the retirement formula applied to final average salary (FAS) for the three member groups under the traditional plan as per the reduced benefits adopted by SB 343 (see OPERS' CAFR referenced above for additional information).

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2015
(Continued)*

Note 7 - Defined Benefit Pension Plans (Continued)

Group A	Group B	Group C
Eligible to retire prior to January 7, 2013, or five years after January 7, 2013	20 years of service credit prior to January 7, 2013, or eligible to retire ten years after January 7, 2013	Members not in other groups and members hired on or after January 7, 2013
State and Local	State and Local	State and Local
Age and Service Requirements: Age 60 with 60 months of service credit or Age 55 with 25 years of service credit	Age and Service Requirements: Age 60 with 60 months of service credit or Age 55 with 25 years of service credit	Age and Service Requirements: Age 57 with 25 years of service credit or Age 62 with 5 years of service credit
Formula: 2.2% of FAS multiplied by years of service for the first 30 years and 2.5% for service years in excess of 30 years	Formula: 2.2% of FAS multiplied by years of service for the first 30 years and 2.5% for service years in excess of 30 years	Formula: 2.2% of FAS multiplied by years of service for the first 35 years and 2.5% for service years in excess of 35 years
Public Safety	Public Safety	Public Safety
Age and Service Requirements: Age 48 with 25 years of service credit or Age 52 with 15 years of service credit	Age and Service Requirements: Age 48 with 25 years of service credit or Age 52 with 15 years of service credit	Age and Service Requirements: Age 52 with 25 years of service credit or Age 56 with 15 years of service credit
Law Enforcement	Law Enforcement	Law Enforcement
Age and Service Requirements: Age 52 with 15 years of service credit	Age and Service Requirements: Age 48 with 25 years of service credit or Age 52 with 15 years of service credit	Age and Service Requirements: Age 48 with 25 years of service credit or Age 56 with 15 years of service credit
Public Safety and Law Enforcement	Public Safety and Law Enforcement	Public Safety and Law Enforcement
Formula: 2.5% of FAS multiplied by years of service for the first 25 years and 2.1% for service years in excess of 25 years	Formula: 2.5% of FAS multiplied by years of service for the first 25 years and 2.1% for service years in excess of 25 years	Formula: 2.5% of FAS multiplied by years of service for the first 25 years and 2.1% for service years in excess of 25 years

Final average salary (FAS) represents the average of the three highest years of earnings over a member's career for Groups A and B. Group C is based on the average of the five highest years of earnings over a member's career.

Members who retire before meeting the age and years of service credit requirement for unreduced benefits receive a percentage reduction in the benefit amount.

When a benefit recipient has received benefits for twelve months, an annual cost of living adjustment (COLA) is provided. This COLA is calculated on the base retirement benefit at the date of retirement and is not compounded. For those retiring prior to January 7, 2013, the COLA will continue to be a 3 percent simple annual COLA. For those retiring subsequent to January 7, 2013, beginning in calendar year 2019, the COLA will be based on the average percentage increase in the Consumer Price Index capped at 3 percent.

Funding Policy - The Ohio Revised Code (ORC) provides statutory authority for member and employer contributions as follows.

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2015
(Continued)*

Note 7 - Defined Benefit Pension Plans (Continued)

	State and Local	Public Safety	Law Enforcement
2015 Statutory Maximum Contribution Rates			
Employer	14.0%	18.1%	18.1%
Employee	10.0 %	*	**
2015 Actual Contribution Rates			
Employer			
Pension	12.0 %	16.1 %	16.1 %
Postemployment Health Care Benefits	2.0	2.0	2.0
Total Employer	<u>14.0 %</u>	<u>18.1 %</u>	<u>18.1 %</u>
Total Employee	<u>10.0 %</u>	<u>12.0 %</u>	<u>13.0 %</u>

* This rate is determined by OPERS' Board and has no maximum rate established by the ORC.

** This rate is also determined by OPERS' Board but is limited by the ORC to not more than 2 percent greater than the public safety rate.

Employer contribution rates are actuarially determined and are expressed as a percentage of covered payroll. The District's contractually required contribution was \$99,600 for 2015.

Note 8 - Postemployment Benefits

A. Ohio Public Employees Retirement System

Plan Description - The Ohio Public Employees Retirement System (OPERS) administers three separate pension plans: the traditional plan, a cost-sharing multiple-employer defined benefit pension plan; the member-directed plan, a defined contribution plan; and the combined plan, a cost-sharing multiple-employer defined benefit pension plan that has elements of both a defined benefit and defined contribution plan.

OPERS maintains two cost-sharing multiple-employer defined benefit postemployment health care trusts which fund multiple health care plans including medical coverage, prescription drug coverage, deposits to a health reimbursement arrangement, and Medicare Part B premium reimbursements to qualifying benefit recipients of both the traditional pension and combined plans. Members of the member-directed plan do not qualify for ancillary benefits including OPERS sponsored health care coverage.

In order to qualify for postemployment health care coverage, age and service retirees under the traditional pension and combined plans must have twenty or more years of qualifying Ohio service credit. Health care coverage for disability benefit recipients and qualified survivor benefit recipients is available. The health care coverage provided by OPERS meets the definition of an other postemployment benefit (OPEB) as described in Government Accounting Standards Board (GASB) Statement No. 45. See OPERS' CAFR referenced below for additional information.

The Ohio Revised Code permits, but does not require, OPERS to provide health care to its eligible benefit recipients. Authority to establish and amend health care coverage is provided to the Board in Chapter 145 of the Ohio Revised Code.

Disclosures for the health care plan are presented separately in the OPERS financial report which may be obtained by visiting <https://www.opers.org/financial/reports.shtml>, by writing to the Ohio Public Employees Retirement System, 277 East Town Street, Columbus, Ohio 43215-4642, or by calling 800-222-7377.

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2015
(Continued)*

Note 8 - Postemployment Benefits (Continued)

Funding Policy - The Ohio Revised Code provides the statutory authority requiring public employers to fund postemployment health care through their contributions to OPERS. A portion of each employer's contribution to OPERS is set aside for the funding of postemployment health care.

Employer contribution rates are expressed as a percentage of the earnable salary of active members. In 2015, state and local employers contributed 14 percent of earnable salary. This is the maximum employer contribution rate permitted by the Ohio Revised Code. Active member contributions do not fund health care.

OPERS maintains three health care trusts. The two cost-sharing multiple-employer trusts, the 401(h) Health Care Trust and the 115 Health Care Trust, work together to provide health care funding to eligible retirees and the traditional pension and combined plans. The third trust is a Voluntary Employee's Beneficiary Association (VEBA) that provides funding for a retiree medical account for member-directed plan members.

Each year, the OPERS Board of Trustees determines the portion of the employer contribution rate that will be set aside to fund the health care plans. The portion of the employer contribution allocated to health care for members in both the traditional pension and combined plans was 2 percent for 2015. As recommended by the OPERS actuary, the portion of the employer contribution allocated to health care beginning January 1, 2016, remained at 2 percent for both plans. The Board is also authorized to establish rules for the retiree or their surviving beneficiaries to pay a portion of the health care provided. Payment amounts vary depending on the number of covered dependents and the coverage selected. The employer contribution as a percentage of covered payroll deposited into the VEBA for participants in the member-directed plan was 4.5 percent for 2015.

Substantially all of the District's contribution allocated to fund postemployment health care benefits relates to the cost-sharing multiple-employer trusts. The corresponding contribution for the years ended December 31, 2015, 2014, and 2013 was \$18,986, \$18,374, and \$8,441, respectively. For 2015, 92 percent has been contributed with the balance being reported as an intergovernmental payable. The full amount has been contributed for 2014 and 2013.

Note 9 - Interfund Activity

During 2015, no transfers were made from the General Fund to other governmental funds. Transfers represent the allocation of unrestricted receipts collected in the General Fund to finance various programs accounted for in other funds in accordance with budgetary authorizations. During 2015, advances were made from the General Fund to other governmental funds in the amount of \$30,000. Advances were also repaid from other governmental funds to the General Fund in the amount of \$20,000.

Note 10 - Fund Balance

Fund balance is classified as nonspendable, restricted, committed, assigned, and/or unassigned based primarily on the extent to which the County is bound to observe constraints imposed upon the use of the resources in governmental funds.

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

*NOTES TO THE BASIC FINANCIAL STATEMENTS
FOR THE YEAR ENDED DECEMBER 31, 2015
(Continued)*

Note 10 - Fund Balance (Continued)

The constraints placed on fund balance for the major governmental funds and all other governmental funds are presented below.

Fund Balance	General	Help Me Grow	Women, Infants and Children	Other Governmental Funds
Restricted for:				
Camp, Manufactured Home and Park Licensing	\$0	\$0	\$0	\$7,661
Central Regional Ebola Preparedness	0	0	0	2,524
Construction and Demolition Debris Remittances	0	0	0	44,703
Emergency Preparedness	0	0	0	17,164
Maternal Infant Home Visiting	0	0	0	14,476
Private Sewer Operations	0	0	0	13,094
Public Immunizations	0	0	0	4,171
Public Pool Licensing	0	0	0	6,277
Solid Waste Facility Licensing	0	0	0	18,520
Women and Children Nutrition	0	0	49,098	0
Young Child Well Being	0	229,786	0	0
Total Restricted	0	229,786	49,098	128,590
Assigned for:				
Food Service and Vending Licensing	61,277	0	0	0
Private Water System Licensing	7,696	0	0	0
Unpaid Obligations	234,085	0	0	0
Total Assigned	303,058	0	0	0
Unassigned	26,071	0	0	0
Total Fund Balance	\$229,786	\$229,786	\$49,098	\$128,590

Note 11 - Contingent Liabilities

Amounts grantor agencies pay to the District are subject to audit and adjustment by the grantor, principally the federal government. Grantors may require refunding any disallowed costs. Management cannot presently determine amounts grantors may disallow. However, based on prior experience, management believes any refunds would be immaterial.



Dave Yost • Auditor of State

INDEPENDENT AUDITOR'S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS REQUIRED BY *GOVERNMENT AUDITING STANDARDS*

Crawford County General Health District
Crawford County
1520 Isaac Beal Road
Bucyrus, Ohio 44820

To the Board of Health:

We have audited, in accordance with auditing standards generally accepted in the United States and the Comptroller General of the United States' *Government Auditing Standards*, the financial statements of the governmental activities, each major fund, and the aggregate remaining fund information of the Crawford County General Health District, Crawford County, Ohio (the District), as of and for the year ended December 31, 2015, and the related notes to the financial statements, which collectively comprise the District's basic financial statements and have issued our report thereon dated October 7, 2016, wherein we noted the District uses a special purpose framework other than generally accepted accounting principles. We further noted the 2014 financial statements have been restated to show a consolidation of fund balances.

Internal Control Over Financial Reporting

As part of our financial statement audit, we considered the District's internal control over financial reporting (internal control) to determine the audit procedures appropriate in the circumstances to the extent necessary to support our opinions on the financial statements, but not to the extent necessary to opine on the effectiveness of the District's internal control. Accordingly, we have not opined on it.

A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, when performing their assigned functions, to prevent, or detect and timely correct misstatements. A *material weakness* is a deficiency, or combination of internal control deficiencies resulting in a reasonable possibility that internal control will not prevent or detect and timely correct a material misstatement of the District's financial statements. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that 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 internal control deficiencies that might be material weaknesses or significant deficiencies. Given these limitations, we did not identify and deficiencies in internal control that we consider material weaknesses. However, unidentified material weaknesses may exist.

Compliance and Other Matters

As part of reasonably assuring whether the District's financial statements are free of material misstatement, we tested its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could directly and materially affect the determination of financial statement amounts. However, opining on compliance with those provisions was not an objective of our audit and accordingly, we do not express an opinion. The results of our tests disclosed no instances of noncompliance or other matters we must report under *Government Auditing Standards*.

Purpose of this Report

This report only describes the scope of our internal control and compliance testing and our testing results, and does not opine on the effectiveness of the District's internal control or on compliance. This report is an integral part of an audit performed under *Government Auditing Standards* in considering the District's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

A handwritten signature in black ink that reads "Dave Yost". The signature is written in a cursive style with a large, looping "D" and "Y".

Dave Yost
Auditor of State
Columbus, Ohio

October 7, 2016

**CRAWFORD COUNTY GENERAL HEALTH DISTRICT
CRAWFORD COUNTY**

**SCHEDULE OF PRIOR AUDIT FINDINGS
DECEMBER 31, 2015**

Finding Number	Finding Summary	Status	Additional Information
2014-001	Material Noncompliance/Material Weakness – Receipt and Expenditure Posting	Partially Corrected	There was one instance noted in 2015 in which receipts were misclassified in the General fund; however, the amount was immaterial to the financial statements and no adjustment was required.
2014-002	Material Noncompliance/Material Weakness – Allowable Costs/Cost Principles	Corrective Action Taken and Finding is Fully Corrected	
2014-003	Material Noncompliance/Material Weakness – Cash Management and Reporting	Corrective Action Taken and Finding is Fully Corrected	
2014-004	Material Weakness – Activities Allowed or Unallowed and Allowable Costs/Cost Principles	Corrective Action Taken and Finding is Fully Corrected	
2014-005	Material Noncompliance – Schedule of Federal Awards Expenditures. Finding was also issued in the fiscal year 2013 audit as finding 2013-001.	Partially Corrected	The District improperly excluded federal grant monies in the amount of \$5,924 from its 2015 Schedule of Federal Awards Expenditures; however, this amount was immaterial to total federal expenditures and did not result in the District exceeding the \$750,000 single audit threshold.

This page intentionally left blank.



Dave Yost • Auditor of State

CRAWFORD COUNTY GENERAL HEALTH DISTRICT

CRAWFORD COUNTY

CLERK'S CERTIFICATION

This is a true and correct copy of the report which is required to be filed in the Office of the Auditor of State pursuant to Section 117.26, Revised Code, and which is filed in Columbus, Ohio.

Susan Babbitt

CLERK OF THE BUREAU

**CERTIFIED
NOVEMBER 22, 2016**