



Dave Yost • Auditor of State



**ROSS COUNTY HEALTH DISTRICT  
ROSS COUNTY**

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# Dave Yost • Auditor of State

## INDEPENDENT AUDITOR'S REPORT

Ross County Health District  
Ross County  
150 E Second St  
Chillicothe, Ohio 45601

To the Board of Trustees:

### ***Report on the Financial Statements***

We have audited the accompanying cash-basis financial statements of the governmental activities, each major fund, and the aggregate remaining fund information of Ross County Health District, Ross County, Ohio (the District), as of and for the year ended December 31, 2016, 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 Ross County Health District, Ross County, Ohio, as of December 31, 2016, and the respective changes in cash financial position and the respective budgetary comparison for the General, MAC, and Help Me Grow Home Visiting funds thereof for the year then ended in accordance with the accounting basis described in Note 2.

Corporate Centre of Blue Ash, 11117 Kenwood Road, Blue Ash, Ohio 45242

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**Accounting Basis**

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

**Other Matters**

*Supplemental Information*

Our audit was conducted to opine on the financial statements taken as a whole.

The Schedule of Federal Awards Expenditures presents additional analysis as required by Title 2 U.S. Code of Federal Regulations (CFR) Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards and is not a required part of the financial statements.

The schedule is management's responsibility, and derives from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. We subjected this schedule to the auditing procedures we applied to the basic financial statements. We also applied certain additional procedures, including comparing and reconciling this schedule directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and in accordance with auditing standards generally accepted in the United States of America. In our opinion, this schedule is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

**Other Reporting Required by Government Auditing Standards**

In accordance with *Government Auditing Standards*, we have also issued our report dated August 29, 2017, 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

August 29, 2017

**Ross County Health District**  
*Statement of Net Position - Cash Basis*  
*December 31, 2016*

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	<u>Governmental Activities</u>
Assets	
Cash	\$6,804
Equity in County Treasury	<u>529,368</u>
Total Assets	<u><u>\$536,172</u></u>
Net Position	
Restricted For:	
Other Purposes	\$360,095
Unrestricted	<u>176,077</u>
Total Net Position	<u><u>\$536,172</u></u>

See the accompanying notes to the basic financial statements.

**Ross County Health District**  
*Statement of Activities - Cash Basis*  
*For the Year Ended December 31, 2016*

	Program Cash Receipts			Net Receipts (Disbursements) and Changes in Net Position
	Cash Disbursements	Charges for Services	Operating Grants and Contributions	
Governmental Activities				
Current:				
Children's Health	\$788,892	\$0	\$834,684	\$45,792
Environmental Health	440,858	289,280	28,050	(123,528)
Community Health	936,742	293,677	225,420	(417,645)
Administrative Services	674,360	172,561	0	(501,799)
Home Health	2,422,596	2,462,138	0	39,542
Community Preparedness	126,825	0	161,891	35,066
Capital Outlay	42,878	0	0	(42,878)
Debt Service:				
Principal	71,342	0	0	(71,342)
Interest	22,797	0	0	(22,797)
<b>Total Governmental Activities</b>	<b>\$5,527,290</b>	<b>\$3,217,656</b>	<b>\$1,250,045</b>	<b>(1,059,589)</b>

General Receipts	
Property Taxes Levied for General Health District Purposes	1,043,886
Grants and Entitlements not Restricted to Specific Programs	223,925
Miscellaneous	420
<b>Total General Receipts</b>	<b>1,268,231</b>
Change in Net Position	208,642
Net Position Beginning of Year	327,530
Net Position End of Year	<b>\$536,172</b>

See the accompanying notes to the basic financial statements.



**Ross County Health District**  
*Statement of Cash Basis Assets and Fund Balances*  
 Governmental Funds  
 December 31, 2016

	General	MAC	Help Me Grow Home Visiting	Other Governmental Funds	Total Governmental Funds
<b>Assets</b>					
Cash	\$6,804	\$0	\$0	\$0	\$6,804
Equity in County Treasury	267,516	100,449	152,540	8,863	529,368
<b>Total Assets</b>	<b>\$274,320</b>	<b>\$100,449</b>	<b>\$152,540</b>	<b>\$8,863</b>	<b>\$536,172</b>
<b>Fund Balances</b>					
Restricted for:					
Children's Health	\$0	\$6,098	\$152,540	\$47,505	\$206,143
Environmental Health	0	0	0	5,253	5,253
Community Health	0	0	0	41,089	41,089
Community Preparedness	0	94,351	0	13,259	107,610
Capital Projects	0	0	0	0	0
Assigned for:					
Subsequent Year Appropriations in					
Excess of Estimated Receipts	274,320	0	0	0	274,320
Unassigned (Deficit)	0	0	0	(98,243)	(98,243)
<b>Total Fund Balances</b>	<b>\$274,320</b>	<b>\$100,449</b>	<b>\$152,540</b>	<b>\$8,863</b>	<b>\$536,172</b>

See the accompanying notes to the basic financial statements.

**Ross County Health District**  
*Statement of Cash Receipts, Disbursements and Changes in Cash Basis Fund Balances*  
 Governmental Funds  
 For the Year Ended December 31, 2016

	General	MAC	Help Me Grow Home Visiting	Other Governmental Funds	Total Governmental Funds
<b>Receipts</b>					
Property Taxes	\$1,043,886	\$0	\$0	\$0	\$1,043,886
Intergovernmental	223,925	66,215	139,185	1,044,645	1,473,970
Charges for Services	2,880,047	0	0	337,609	3,217,656
Miscellaneous	420	0	0	0	420
<b>Total Receipts</b>	<b>4,148,278</b>	<b>66,215</b>	<b>139,185</b>	<b>1,382,254</b>	<b>5,735,932</b>
<b>Disbursements</b>					
Current:					
Children's Health	0	32,347	79,892	676,653	788,892
Environmental Health	195,049	0	0	245,809	440,858
Community Health	589,407	0	0	347,335	936,742
Administrative Services	674,360	0	0	0	674,360
Home Health	2,422,596	0	0	0	2,422,596
Community Preparedness	0	11,392	0	115,433	126,825
Capital Outlay	30,960	4,347	0	7,571	42,878
Debt Service:					
Principal	54,660	0	0	16,682	71,342
Interest	17,468	0	0	5,329	22,797
<b>Total Disbursements</b>	<b>3,984,500</b>	<b>48,086</b>	<b>79,892</b>	<b>1,414,812</b>	<b>5,527,290</b>
Receipts Over (Under) Disbursements	163,778	18,129	59,293	(32,558)	208,642
<b>Other Financing Sources (Uses)</b>					
Transfers In	11,112	0	0	38,903	50,015
Transfers Out	(38,903)	0	0	(11,112)	(50,015)
<b>Total Other Financing Sources (Uses)</b>	<b>(27,791)</b>	<b>0</b>	<b>0</b>	<b>27,791</b>	<b>0</b>
<b>Net Change in Fund Balances</b>	<b>135,987</b>	<b>18,129</b>	<b>59,293</b>	<b>(4,767)</b>	<b>208,642</b>
Beginning Fund Balances, January 1	138,333	82,320	93,247	13,630	327,530
<b>Ending Fund Balances, December 31</b>	<b>\$274,320</b>	<b>\$100,449</b>	<b>\$152,540</b>	<b>\$8,863</b>	<b>\$536,172</b>

See the accompanying notes to the basic financial statements.

**Ross County Health District**  
*Statement of Receipts, Disbursements and*  
*Changes in Fund Balance - Budget and Actual - Budgetary Basis*  
*General Fund*  
*For the Year Ended December 31, 2016*

	Budgeted Amounts		Actual	Variance with Final Budget Positive (Negative)
	Original	Final		
Receipts				
Property Taxes	\$1,031,500	\$1,043,886	\$1,043,886	\$0
Intergovernmental	244,232	223,925	223,925	0
Charges for Services	160,000	172,561	172,561	0
Miscellaneous	0	420	420	0
<b>Total Receipts</b>	<b>1,435,732</b>	<b>1,440,792</b>	<b>1,440,792</b>	<b>0</b>
Disbursements				
Current:				
Administrative Services	733,719	674,360	674,360	0
Capital Outlay	20,000	11,901	11,901	0
Debt Service:				
Principal	46,500	26,253	26,253	0
Interest	0	8,390	8,390	0
<b>Total Disbursements</b>	<b>800,219</b>	<b>720,904</b>	<b>720,904</b>	<b>0</b>
Receipts Over Disbursements	635,513	719,888	719,888	0
Other Financing Sources (Uses)				
Transfers In	66,746	24,304	24,304	0
Transfers Out	(784,024)	(599,401)	(599,401)	0
<b>Total Other Financing Sources (Uses)</b>	<b>(717,278)</b>	<b>(575,097)</b>	<b>(575,097)</b>	<b>0</b>
Net Change in Fund Balances	(81,765)	144,791	144,791	0
Beginning Fund Balances, January 1	124,531	124,531	124,531	0
Ending Fund Balances, December 31	\$42,766	\$269,322	\$269,322	\$0

See the accompanying notes to the basic financial statements.

**Ross County Health District**  
*Statement of Receipts, Disbursements and*  
*Changes in Fund Balance - Budget and Actual - Budgetary Basis*  
*MAC Fund*  
*For the Year Ended December 31, 2016*

	Budgeted Amounts		Actual	Variance with Final Budget Positive (Negative)
	Original	Final		
Receipts				
Intergovernmental	\$52,192	\$66,215	\$66,215	\$0
Total Receipts	52,192	66,215	66,215	0
Disbursements				
Current:				
Children's Health	31,981	32,347	32,347	0
Community Preparedness	82,878	11,392	11,392	0
Capital Outlay	12,000	4,347	4,347	0
Total Disbursements	126,859	48,086	48,086	0
Net Change in Fund Balances	(74,667)	18,129	18,129	0
Beginning Fund Balances, January 1	82,320	82,320	82,320	0
Ending Fund Balances, December 31	\$7,653	\$100,449	\$100,449	\$0

See the accompanying notes to the basic financial statements.

**Ross County Health District**  
*Statement of Receipts, Disbursements and  
 Changes in Fund Balance - Budget and Actual - Budgetary Basis  
 Help Me Grow Home Visiting Fund  
 For the Year Ended December 31, 2016*

	Budgeted Amounts		Actual	Variance with Final Budget Positive (Negative)
	Original	Final		
Receipts				
Intergovernmental	\$95,635	\$139,185	\$139,185	\$0
Total Receipts	95,635	139,185	139,185	0
Disbursements				
Current:				
Children's Health	68,013	79,892	79,892	0
Total Disbursements	68,013	79,892	79,892	0
Net Change in Fund Balances	27,622	59,293	59,293	0
Beginning Fund Balances, January 1	93,247	93,247	93,247	0
Ending Fund Balances, December 31	\$120,869	\$152,540	\$152,540	\$0

See the accompanying notes to the basic financial statements.

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**Ross County Health District**  
*Notes to the Basic Financial Statements*  
*For the Year Ended December 31, 2016*

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**Note 1 – Reporting Entity**

The Ross County Health District, Ross County, Ohio, (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. The District is responsible for the administration of all health programs established by the Ohio Revised Code, the Ohio Department of Health, and the Public Health Council. Services provided by the District include, but are not limited to, the inspection and licensing of public health programs, community nursing activities, the control of communicable diseases, immunization clinics, environmental health programs, and home health activities.

By law, the Ross County Auditor is the fiscal agent of the District.

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

**Note 2 – Summary of Significant Account Policies**

As discussed further in this note, these financial statements are presented on the 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.

**Deposits and Investments**

As required by the Ohio Revised Code, the County Treasurer is custodian for the District's cash. The District's assets are held in the County's cash and investment pool, and are valued at the County Treasurer's reported carrying amount. As of December 31, 2016, the District's share of the County's cash and investment pool was \$529,368. All risks associated with deposits and investments held at the Treasurer's Office are the responsibility of Ross County. Deposit and investment disclosures for the County as a whole may be obtained from the Ross County Auditor's Office, 2 North Paint Street, Suite G, Chillicothe, Ohio 45601, (740) 702-3080.

The District maintains a bank account to hold District receipts during each month and then makes a monthly deposit to the County. The carrying amount of these deposits as of December 31, 2016 was \$6,804 and the bank balance was \$446,978. The entire balance was covered by federal depository insurance.

**Fund Accounting**

The District uses fund accounting 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. Funds are used to segregate resources that are restricted as to use. The funds of the District are presented in one category: governmental.

*Governmental Funds* – Governmental funds are those through which most governmental functions of the District are financed. The following are the District's major governmental funds:

*General Fund* – The General Fund is the general operating fund. It is used to account for all financial resources of the District, except for restricted resources requiring a separate accounting. The General Fund balance is available for any purpose provided it is disbursed or transferred according to Ohio laws.

*MAC Fund* – The MAC Fund accounts for grant receipts received from the Ohio Department of Health. This program provides funds that support efforts to identify and enroll eligible clients into Medicaid, to bring them services covered by Medicaid, to remove barriers to accessing Medicaid services, and to reduce gaps in Medicaid services.

**Ross County Health District**  
*Notes to the Basic Financial Statements*  
*For the Year Ended December 31, 2016*

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*Help Me Grow Home Visiting Fund* – The Help Me Grow Home Visiting Fund accounts for grant receipts received from the Ohio Department of Health. This program provides expectant or new parents with the information, support, and encouragement they need through voluntary, high-quality home visiting services. It aims to educate at-risk parents with the resources to understand and capitalize on the optimal early years of a child's life.

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

**Basis of Presentation**

The District uses the provisions of GASB 34 for financial reporting on the cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America, and GASB 38, for certain financial statement note disclosures. The District's basic financial statements consist of government-wide statements, including a statement of net position-cash basis and statement of activities-cash basis, 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.

The statement of net position-cash basis presents the cash basis financial condition of governmental activities of the District at year-end. The statement of activities-cash basis presents a comparison between direct cash disbursements and program cash receipts for each program or function of the District's governmental activities. Direct cash disbursements are those that are specifically associated with a service, program or department and therefore clearly identifiable to a particular function. Program cash receipts include charges paid by the recipient of the goods or services identifiable to a particular program and operating grants and contributions. Cash receipts which are not classified as program cash receipts are presented as general cash receipts of the District. The comparison of direct cash disbursements with program cash receipts identifies the extent to which each governmental function is self-financing or draws from the general cash 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 at a more detailed level. The focus of governmental fund financial statements is on major funds. Fund statements present each major fund in a separate column and aggregate non-major funds in a single column.

**Basis of Accounting**

The District prepares its financial statements and notes on the cash basis of accounting. Receipts are recognized when received in cash rather than when earned, and disbursements are recognized when paid rather than when a liability is incurred. Budgetary presentations report budgetary disbursements when a commitment is made (i.e., when an encumbrance is approved).

These statements include adequate disclosure of material matters, in accordance with the basis of accounting described in the preceding paragraph.



**Ross County Health District**  
*Notes to the Basic Financial Statements*  
*For the Year Ended December 31, 2016*

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As a result of the use of the 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 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. Therefore, when reviewing the financial information and discussion within this annual report, the reader should keep in mind the limitations resulting from the use of the cash basis of accounting.

**Cash Receipts—Exchange and Non-exchange Transactions**

Cash receipts resulting from exchange transactions, in which each party gives and receives essentially equal value, is recorded on the cash basis when the exchange takes place. On the cash basis, receipts are recorded in the year in which the resources are received.

Non-exchange transactions, in which the District receives value without directly giving equal value in return, include property taxes, grants, entitlements and donations. On the cash basis, receipts from property taxes are recognized in the year in which the monies have been received. On the cash basis, receipts from grants, entitlements, and donations are recognized in the year in which the monies have been received.

**Cash Disbursements**

On the cash basis of accounting, disbursements are recognized at the time payments are made.

**Budgetary Process**

All 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 tax budget demonstrates a need for existing or increased tax rates. The certificate of estimated resources establishes a limit on the amount the District may appropriate. The appropriations resolution is the District's authorization to spend resources and sets annual limits on cash disbursements plus encumbrances at the level of control selected by the District's Board. The District uses the object level within each fund and function as its legal level of control.

Ohio Revised Code Section 5705.28(C)(1) requires the District to file an estimate of contemplated revenue and expenses with the municipalities and townships within the District by about June 1 (forty-five days prior to July 15). The County Auditor cannot allocate property taxes from the municipalities and townships within the District if the filing has not been made.

Ohio Revised Code Section 3709.28 establishes budgetary requirements for the District, which are similar to ORC Chapter 5705 budgetary requirements. On or about the first Monday of April, the District must adopt an itemized appropriation measure. The appropriations measure, together with an itemized estimate of revenues to be collected during the next fiscal year, shall be certified to the County Budget Commission. Subject to estimated resources, the District's Board may, by resolution, transfer appropriations from one appropriation item to another, reduce or increase any item, create new items, and make additional appropriations or reduce the total appropriation. Such appropriation modifications shall be certified to the County Budget Commission for approval.

The amounts reported as the original budgeted amounts on the budgetary statement reflect the amounts on the certificate of estimated resources in effect when the original appropriations were adopted. The amounts reported as the final budgeted amounts on the budgetary statement reflect the amounts in the amended certificate of estimated resources in effect at the time the final appropriations were passed by the District's Board.

**Ross County Health District**  
*Notes to the Basic Financial Statements*  
*For the Year Ended December 31, 2016*

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The appropriations resolution is subject to amendment throughout the year with the restriction that appropriations cannot exceed estimated resources. The amounts reported as the original budgeted amounts reflect the first appropriation resolution that covered the entire year, including amounts automatically carried forward from prior years. The amounts reported as the final budgeted amounts represent the final appropriations passed by the District's Board during the year.

**Capital Assets**

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

**Accumulated Leave**

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

**Net Position**

Under the District's cash basis of accounting, net position equal cash balances. Net position is reported as restricted when there are limitations imposed on its use either through the enabling legislation adopted by the District or through external restrictions imposed by creditors, grantors, or laws or regulations of other governments. Restricted for other purposes is comprised primarily of resources restricted for grants. The District applies restricted resources first when an expense is incurred for purposes for which both restricted and unrestricted resources are available. None of the District's restricted net position is restricted by enabling legislation.

**Interfund Transactions**

The statements report transfers between funds as receipts in the seller funds and as disbursements in the purchasing funds. Subsidies from one fund to another without requirement for repayment are reported as interfund transfers. Governmental funds report interfund transfers as other financing sources/uses. The statements do not report repayments from funds responsible for particular disbursements to the funds initially paying the costs. Transfers among governmental activities are eliminated in the government-wide statement of activities.

**Fund Balances**

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

*Nonspendable* – The District classifies assets as *nonspendable* when legally or contractually required to maintain the amounts intact. The District reported no nonspendable fund balances as of December 31, 2016.

*Restricted* – Fund balance is *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.

*Committed* – The Board can *commit* amounts via formal action (resolution). The District must adhere to these commitments unless the Board amends the resolution. Committed fund balance also incorporates contractual obligations to the extent that existing resources in the fund have been specifically committed to satisfy contractual requirements. The District reported no committed fund balances as of December 31, 2016.

**Ross County Health District**  
*Notes to the Basic Financial Statements*  
*For the Year Ended December 31, 2016*

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*Assigned* – Assigned fund balances are intended for specific purposes but do not meet the criteria to be classified as restricted or committed. Governmental funds other than the General Fund report all fund balances as assigned unless they are restricted or committed. In the General Fund, assigned amounts represent intended uses established by the Board or a District official delegated that authority by resolution, or by State statute.

*Unassigned* – Unassigned fund balance is the residual classification for the General Fund and includes amounts not included in the other classifications. In other governmental funds, the unassigned classification is used only to report a deficit balance.

The District applies restricted resources first when disbursements are 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 disbursements are incurred for purposes for which amounts in any of the unrestricted fund balance classifications could be used.

**Note 3 – Intergovernmental Receipts**

The County apportions the excess of the District’s appropriations over other estimated receipts among the townships and municipalities composing the District, based on their taxable property valuations. The County withholds the apportioned excess from property tax settlements and distributes it to the District. These amounts are included in intergovernmental receipts on the accompanying basic financial statements.

**Note 4 - Levies**

The County Commissioners serve as the taxing authority to levy a special levy outside the ten-mill limitation to provide the District with sufficient funds to carry out health programs. The levy generated \$1,043,886 in 2016. This amount is reflected as property tax receipts on the accompanying basic financial statements.

**Note 5 – Defined Benefit Pension Plan**

**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 Pension 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 ages and service requirements for retirement and the retirement formula applied to financial average salary (FAS) under the Traditional Plan as per the reduced benefits adopted by SB 343 for state and local government employers (see OPERS CAFR referenced above for additional information).

**Ross County Health District**  
*Notes to the Basic Financial Statements*  
*For the Year Ended December 31, 2016*

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Group A Eligible to retire prior to January 7, 2013 or five years after January 7, 2013	Group B 20 years of service credit prior to January 7, 2013 or eligible to retire ten years after January 7, 2013	Group C Members not in other Groups and members hired on or after January 7, 2013
<i>Age and Service Requirements</i> Age 60 with 60 months of service credit or age 55 with 25 years of service credit	<i>Age and Service Requirements</i> Age 60 with 60 months of service credit or age 55 with 25 years of service credit	<i>Age and Service Requirements</i> Age 57 with 25 years of service credit or age 62 with 5 years of service credit
<i>Formula</i> 2.2% of FAS multiplied by years of service for the first 30 years and 2.5% for service years in excess of 30	<i>Formula</i> 2.2% of FAS multiplied by years of service for the first 30 years and 2.5% for service years in excess of 30	<i>Formula</i> 2.2% of FAS multiplied by years of service for the first 35 years and 2.5% for service years in excess of 35

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 12 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:

	<u>State &amp; Local</u>
<i>2015 Statutory Maximum Contribution Rates</i>	
Employer	14%
Employee	10%
<i>2015 Actual Contribution Rates</i>	
Employer:	
Pension	12%
Post-Employment Health Care Benefits	<u>2%</u>
Total	<u>14%</u>
Employee	<u>10%</u>

Employer contribution rates are actuarially determined and are expressed as a percentage of covered payroll. The District's contractually required contribution to OPERS for pension was \$362,748 for 2016.

**Note 6 – Post-Employment Benefits**

**Plan Description**

Ohio Public Employees Retirement System (OPERS) administers three separate pension plans: the Traditional Pension 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 a cost-sharing, multiple-employer defined benefit post-employment health care plan, which includes a medical plan, prescription drug program, and Medicare Part B premium reimbursement, to qualifying benefit recipients of both the Traditional Pension and the Combined Plans. Members of the Member-Directed Plan do not qualify for ancillary benefits, including post-employment health care coverage.

In order to qualify for post-employment health care coverage, age-and-service retirees under the Traditional Pension and Combined Plans with an effective date of December 31, 2014 or earlier must have 10 or more years of qualifying Ohio service credit. For effective dates after December 31, 2014, retirees must be 60 with 20 years or qualifying service or may have 30 or more years of qualifying service at any age to be eligible for coverage. 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 Post-Employment Benefit (OPEB) as described in GASB Statement No. 45. OPERS' eligibility requirements for post-employment health care coverage changed for those retiring on and after January 1, 2015. Please see the Plan Statement in the OPERS 2015 CAFR (most recent information available) for details.

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

OPERS issues a stand-alone financial report. Interested parties may obtain a copy by visiting <https://www.opers.org/investments/cafr.shtml>, by writing to OPERS, 277 East Town Street, Columbus, Ohio 43215-4642, or by calling (614) 222-5601 or (800) 222-7377.

**Funding Policy**

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

Employer contribution rates are expressed as a percentage of the earnable salary of active members. In 2016, the District contributed at a rate of 14 percent of earnable salary. This is the maximum employer contribution rate permitted by the Ohio Revised Code. Active member contributions do not fund the OPEB Plan.

OPERS' Post Employment Health Care plan was established under, and is administrated in accordance with, Internal Revenue Code 401(h). Each year, the OPERS Board of Trustees determines the portion of the employer contribution rate that will be set aside for funding of post employment health care. The portion of employer contributions allocated to health care for members in the Traditional Pension Plan and Combined Plan was 2 percent during calendar year 2016. The OPERS Board of Trustees 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.

**Ross County Health District**  
*Notes to the Basic Financial Statements*  
*For the Year Ended December 31, 2016*

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The District's contributions to fund post-employment benefits for the years ended December 31, 2016, 2015, and 2014 were \$60,459, \$64,769, and \$61,038, respectively, which were equal to the required contributions for those years.

Changes to the health care plan were adopted by the OEPRS Board of Trustees on September 19, 2012, with a transition plan commencing January 1, 2014. With the passage of pension legislation under SB 343 and the approved health care changes, OPERS expects to be able to consistently allocate 4 percent of the employer contributions toward the health care fund after the end of the transition period.

**Note 7 – 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 coverage for its members. American Risk Pooling Consultants, Inc. (ARPCO), a division of York Insurance Services Group, 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 ARPCO. 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 Insurance**

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 (the latest information available), 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 net position at December 31, 2015 and 2014 (the latest information available):

	2015	2014
Assets	\$38,307,677	\$35,402,177
Liabilities	(12,759,127)	(12,363,257)
Net Position	\$25,548,550	\$23,038,920

As of December 31, 2015 and 2014, respectively, the liabilities above include approximately \$11.5 million and \$11.1 million of estimated incurred claims payable. The assets above also include approximately \$11.0 million and \$10.8 million of unpaid claims to be billed. The Pool's membership increased from 488 members in 2014 to 499 members in 2015. These amounts will be included in future contributions from members when the related claims are due for payment. As of December 31, 2015, the District's share of these unpaid claims collectible in future years is approximately \$12,000.

**Ross County Health District**  
*Notes to the Basic Financial Statements*  
*For the Year Ended December 31, 2016*

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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>	
2014	\$15,202
2015	15,538
2016	19,047

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 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 8 – Contingent Liabilities**

**Grants**

Amounts received from grantor agencies are subject to audit and adjustment by the grantor, principally the federal government. Any disallowed costs may require refunding to the grantor. Amounts which may be disallowed, if any, are not presently determinable. However, based on prior experience, management believes such refunds, if any, would not be material.

**Litigation**

The District is not currently party to legal proceedings.

**Note 9 – Budgetary Basis of Accounting**

As part of Governmental Accounting Standards Board Statement No. 54, "Fund Balance Reporting and Governmental Fund Type Definitions", certain funds that are legally budgeted in separate special revenue funds are considered part of the General Fund on a financial reporting basis. This includes the Home Health Fund, the Environmental Health Fund, and the Public Health Fund. Since these funds are budgeted separately, they are not included in the budgetary presentation for the General Fund.

	<u>General Fund</u>
Budgetary basis fund balance	\$269,322
Fund balance of funds combined with general fund for reporting purposes	<u>4,998</u>
Cash basis fund balance	<u>\$274,320</u>

**Ross County Health District**  
*Notes to the Basic Financial Statements*  
*For the Year Ended December 31, 2016*

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**Note 10 – Interfund Transfers**

The District had the following interfund transfers for the year ended December 31, 2016:

	Transfers In	Transfers Out
Major Fund:		
General Fund	\$11,112	\$38,903
Non-Major Funds:		
Camp/Rec Parks Fund	0	774
Food Service Fund	0	10,338
Water Systems Fund	6,016	0
Swimming Pools/Bathing Fund	66	0
Sewage Program Fund	13,211	0
Vivitrol Program Fund	16,904	0
SOWCP Program Fund	413	0
Epidemiology Fund	2,293	0
Total Non-Major Funds	38,903	11,112
Total All Funds	\$50,015	\$50,015

Transfers were made from the General Fund to other governmental funds to subsidize operations. Transfers were made from the Camp/Rec Parks Fund and Food Service Fund to the General Fund to close out programs or in accordance with budgetary authorizations.

**Note 11 – Long-Term Obligations**

Changes in the long-term obligations of the District during 2016 were as follows:

	Principal Outstanding at 1/1/16	Additions	Deletions	Principal Outstanding at 12/31/16	Amount Due in One Year
Governmental Activities:					
Capital Leases	\$1,495,777	\$0	\$71,342	\$1,424,435	\$97,030

The capital lease will be paid from the General Fund, the Home Health Fund, Community Health Funds, Environmental Funds, the Public Health Fund, and the Ross County WIC Fund.

**Note 12 – Capital Leases – Lessee Disclosure**

In 2014, the District entered into a capitalized lease for the purchase of a building and for additional funds to renovate the building. Capital lease payments have been reclassified and reflected as debt service disbursements in the basic financial statements.



**Ross County Health District**  
*Notes to the Basic Financial Statements*  
*For the Year Ended December 31, 2016*

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At December 31, 2016, principal and interest requirements to retire the capital lease are as follows:

Year Ending December 31,	Capital Leases
2017	\$125,519
2018	125,519
2019	125,519
2020	125,519
2021	125,519
Thereafter	<u>1,004,151</u>
Total Debt Payments	1,631,746
Less: Interest	<u>(207,311)</u>
Total Principal	<u>\$1,424,435</u>

**Note 13 – Financial Condition**

The District ran a replacement levy on the November 2016 ballot, but it did not pass. As such, the District has made significant budget cuts to scale back to support primarily mandated services. The District has also made adjustments to fee schedules to increase revenues where possible. The District plans to run another levy on the May 2017 ballot to reinstitute its previous services.

**Note 14 – Subsequent Events**

On January 23, 2017, the original lease to purchase agreement was amended to reflect the remainder of 2016, all of 2017 and the first quarter of 2018 quarterly rent installments would be deferred, and the lease purchase agreement be extended to December 31, 2030, at which time all payments to the Ross County Commissioners should be paid in full.

On February 3, 2017, the District sold the Home Health department to Ross County Home Health LLC for \$250,000.

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**ROSS COUNTY HEALTH DISTRICT**  
**Schedule of Federal Awards Expenditures**  
**FOR THE YEAR ENDED DECEMBER 31, 2016**

Federal Grantor/ Pass Through Grantor Program Title	Pass Through Entity Number	Federal CFDA Number	Disbursements
<b><u>U.S. DEPARTMENT OF AGRICULTURE</u></b>			
Passed Through Ohio Department of Health			
Special Supplemental Nutrition Program for Women, Infants, and Children (W.I.C. Administration)	ODH=07110011WA0916	10.557	\$ 428,654
	ODH=07110011WA1017	10.557	<u>123,380</u>
Total Special Supplemental Nutrition Program for Women, Infants, and Children			<u>552,034</u>
Total U.S. Department of Agriculture			<u>552,034</u>
<b><u>U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES</u></b>			
Passed Through Ohio Department of Health			
Centers for Disease Control and Prevention Investigations and Technical Assistance (Public Health Emergency Preparedness PHEP)	ODH=07110012PH0716	93.074	39,840
	ODH=07110012PH0817	93.074	<u>37,162</u>
Total Public Health Emergency Preparedness			<u>77,002</u>
Cooperative Agreements for State-Based Comprehensive Breast & and Cervical Cancer Early Detection Programs (BCCP/SOWCP)	ODH=07110014BC0916	93.919	49,462
Total BCCP/SOWCP			<u>49,462</u>
Maternal, Infant, and Early Childhood Home Visiting Program	ODH-07110011MV0516	93.505	76,508
	ODH-07110011MH0117	93.870	<u>23,818</u>
Total Maternal, Infant and Early Childhood Home Visiting Program			<u>100,326</u>
Maternal and Child Health Services Block Grant	ODH-07110011MC0216	93.994	21,758
	ODH-07110011MP0117	93.994	<u>527</u>
Total Maternal and Child Health Services Block Grant			<u>22,285</u>
Prescription Drug Overdose Prevention	ODH=07110014PD0117	93.136	<u>19,488</u>
Total Prescription Drug Overdoes Prevention			<u>19,488</u>
Total Passed through Ohio Department of Health			<u>268,563</u>
Total Federal Awards Expenditures			<u>\$ 820,597</u>

The accompanying notes to this schedule are an integral part of this schedule.

.....ROSS COUNTY HEALTH DISTRICT  
ROSS COUNTY

**NOTES TO THE SCHEDULE OF FEDERAL AWARDS EXPENDITURES  
2 CFR 200.510(b)(6)  
FOR THE YEAR ENDED DECEMBER 31, 2016**

**NOTE A – BASIS OF PRESENTATION**

The accompanying Schedule of Expenditures of Federal Awards (the Schedule) includes the federal award activity of Ross County General Health District (the District's) under programs of the federal government for the year ended December 31, 2016. The information on this Schedule is prepared in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Because the Schedule presents only a selected portion of the operations of the District, it is not intended to and does not present the financial position, changes in net assets, or cash flows of the District.

**NOTE B – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Expenditures reported on the Schedule are reported on the cash basis of accounting. Such expenditures are recognized following the cost principles contained in Title 2 U.S. Code of Federal Regulations Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards*, wherein certain types of expenditures may or may not be allowable or may be limited as to reimbursement. The District has elected not to use the 10-percent de minimis indirect cost rate as allowed under the Uniform Guidance.

**NOTE C - MATCHING REQUIREMENTS**

Certain Federal programs require the District to contribute non-Federal funds (matching funds) to support the Federally-funded programs. The District has met its matching requirements. The Schedule does not include the expenditure of non-Federal matching funds.



# 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

Ross County Health District  
Ross County  
150 E Second St  
Chillicothe, Ohio 45601

To the Board of Trustees:

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 cash-basis financial statements of the governmental activities, each major fund, and the aggregate remaining fund information of the Ross County Health District, Ross County, (the District) as of and for the year ended December 31, 2016, and the related notes to the financial statements, which collectively comprise the District's basic financial statements and have issued our report thereon dated August 29, 2017, wherein we noted the District uses a special purpose framework other than generally accepted accounting principles.

### ***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 any 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

August 29, 2017



# Dave Yost • Auditor of State

## INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE WITH REQUIREMENTS APPLICABLE TO THE MAJOR FEDERAL PROGRAM AND ON INTERNAL CONTROL OVER COMPLIANCE REQUIRED BY THE UNIFORM GUIDANCE

Ross County Health District  
Ross County  
150 E Second St  
Chillicothe, Ohio 45601

To the Board of Trustees:

### ***Report on Compliance for the Major Federal Program***

We have audited the Ross County Health District's, Ross County, Ohio (the District) compliance with the applicable requirements described in the U.S. Office of Management and Budget (OMB) *Compliance Supplement* that could directly and materially affect the major federal program for the year ended December 31, 2016. The *Summary of Auditor's Results* in the accompanying schedule of findings identifies the District's major federal program.

### ***Management's Responsibility***

The District's Management is responsible for complying with federal statutes, regulations, and the terms and conditions of its federal awards applicable to its federal program.

### ***Auditor's Responsibility***

Our responsibility is to opine on the District's compliance for the District's major federal program based on our audit of the applicable compliance requirements referred to above. Our compliance audit followed auditing standards generally accepted in the United States of America; the standards for financial audits included in the Comptroller General of the United States' *Government Auditing Standards*; and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). These standards and the Uniform Guidance require us to plan and perform the audit to reasonably assure whether noncompliance with the applicable compliance requirements referred to above that could directly and materially affect a major federal program occurred. An audit includes examining, on a test basis, evidence about the District's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe our audit provides a reasonable basis for our compliance opinion on the District's major program. However, our audit does not provide a legal determination of the District's compliance.

### ***Opinion on the Major Federal Program***

In our opinion, the Ross County Health District complied, in all material respects with the compliance requirements referred to above that could directly and materially affect its major federal program for the year ended December 31, 2016.

***Report on Internal Control Over Compliance***

The District's management is responsible for establishing and maintaining effective internal control over compliance with the applicable compliance requirements referred to above. In planning and performing our compliance audit, we considered the District's internal control over compliance with the applicable requirements that could directly and materially affect a major federal program, to determine our auditing procedures appropriate for opining on each major federal program's compliance and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not to the extent needed to opine on the effectiveness of internal control over compliance. Accordingly, we have not opined on the effectiveness of the District'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, when performing their assigned functions, to prevent, or to timely detect and correct, noncompliance with a federal program's applicable compliance requirement. *A material weakness in internal control over compliance* is a deficiency, or combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a federal program compliance requirement will not be prevented, or timely detected and corrected. *A significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with federal program's applicable compliance requirement 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 would not necessarily 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.

This report only describes the scope of our internal control over compliance tests and the results of this testing based on Uniform Guidance requirements. Accordingly, this report is not suitable for any other purpose.



**Dave Yost**  
Auditor of State

Columbus, Ohio

August 29, 2017



**ROSS COUNTY HEALTH DISTRICT  
ROSS COUNTY**

**SCHEDULE OF FINDINGS  
2 CFR § 200.515  
DECEMBER 31, 2016**

**1. SUMMARY OF AUDITOR'S RESULTS**

<i>(d)(1)(i)</i>	Type of Financial Statement Opinion	Unmodified
<i>(d)(1)(ii)</i>	Were there any material weaknesses in internal control reported at the financial statement level (GAGAS)?	No
<i>(d)(1)(ii)</i>	Were there any significant deficiencies in internal control reported at the financial statement level (GAGAS)?	No
<i>(d)(1)(iii)</i>	Was there any reported material noncompliance at the financial statement level (GAGAS)?	No
<i>(d)(1)(iv)</i>	Were there any material weaknesses in internal control reported for major federal programs?	No
<i>(d)(1)(iv)</i>	Were there any significant deficiencies in internal control reported for major federal programs?	No
<i>(d)(1)(v)</i>	Type of Major Programs' Compliance Opinion	Unmodified
<i>(d)(1)(vi)</i>	Are there any reportable findings under 2 CFR § 200.516(a)?	No
<i>(d)(1)(vii)</i>	Major Programs (list):	CFDA #10.557 – Special Supplemental Nutrition Program Women, Infants, and Children
<i>(d)(1)(viii)</i>	Dollar Threshold: Type A/B Programs	Type A: > \$ 750,000 Type B: all others
<i>(d)(1)(ix)</i>	Low Risk Auditee under 2 CFR §200.520?	No

**2. FINDINGS RELATED TO THE FINANCIAL STATEMENTS  
REQUIRED TO BE REPORTED IN ACCORDANCE WITH GAGAS**

None.

**3. FINDINGS AND QUESTIONED COSTS FOR FEDERAL AWARDS**

None.

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# Dave Yost • Auditor of State

**ROSS COUNTY HEALTH DISTRICT**

**ROSS 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  
SEPTEMBER 12, 2017**