STATE OF MINNESOTA

Office of the State Auditor



Patricia Anderson State Auditor

MEEKER-MCLEOD-SIBLEY COMMUNITY HEALTH SERVICES HUTCHINSON, MINNESOTA

YEAR ENDED DECEMBER 31, 2005

Description of the Office of the State Auditor

The Office of the State Auditor serves as a watchdog for Minnesota taxpayers by helping to ensure financial integrity, accountability, and cost-effectiveness in local governments throughout the state.

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

The State Auditor performs approximately 250 financial and compliance audits per year and has oversight responsibilities for over 4,300 local units of government throughout the state. The office currently maintains five divisions:

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

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

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

Pension - monitors investment, financial, and actuarial reporting for over 700 public pension funds; and

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

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

Office of the State Auditor 525 Park Street, Suite 500 Saint Paul, Minnesota 55103 (651) 296-2551 state.auditor@state.mn.us www.auditor.state.mn.us

This document can be made available in alternative formats upon request. Call 651-296-2551 [voice] or 1-800-627-3529 [relay service] for assistance; or visit the State Auditor's web site: www.auditor.state.mn.us.

Year Ended December 31, 2005



Audit Practice Division Office of the State Auditor State of Minnesota



TABLE OF CONTENTS

	Reference	Page
Introductory Section Organization		1
Financial Section Independent Auditor's Report		2
Basic Financial Statements General Fund Balance Sheet and Governmental Activities – Statement of Net Assets with Adjustments to Convert Modified to Full Accrual General Fund Statement of Revenues, Expenditures, and Changes in Fund Balance and Governmental Activities –	Exhibit 1	4
Statement of Activities with Adjustments to Convert Modified to Full Accrual Notes to the Financial Statements	Exhibit 2	5 6
Required Supplementary Information Budgetary Comparison Schedule General Fund Notes to the Required Supplementary Information	Schedule 1	11 12
Other Schedule Schedule of Intergovernmental Revenue	Schedule 2	13
Management and Compliance Section Schedule of Findings and Questioned Costs	Schedule 3	14
Other Required Reports Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with Government Auditing Standards		16
Report on Compliance with Requirements Applicable to Each Major Program and Internal Control Over Compliance in Accordance with OMB Circular A-133		18
Schedule of Expenditures of Federal Awards	Schedule 4	20





ORGANIZATION 2005

Office	Name				
Board Members					
McLeod County Commissioners					
Member	Raymond Bayerl				
Member	Grant Knutson				
Secretary	Beverly Wangerin				
Member	Mel Dose				
Member	Sheldon Nies				
Meeker County Commissioners					
Chair	Amy Wilde				
Member	Ron Kutzke				
Member	Jim Swenson				
Member	Hugh Wagner				
Member	David Gabrielson				
Sibley County Commissioners					
Member	Harold Pettis				
Vice Chair	Charles Woehler				
Member	Leo Bauer				
Member	Lee Anderly				
Member	William Pinske				
Fiscal Officer	Cindy Schultz				
Management Team					
McLeod County Public Health Director	Becky Felling				
Meeker County Public Health Director	Diane Winter				
Sibley County Public Health Director	Allie Freidrichs				
Community Health Services Coordinator	Ann Bajari				







STATE OF MINNESOTA OFFICE OF THE STATE AUDITOR

SUITE 500 525 PARK STREET SAINT PAUL, MN 55103-2139

(651) 296-2551 (Voice) (651) 296-4755 (Fax) state.auditor@state.mn.us (E-mail) 1-800-627-3529 (Relay Service)

INDEPENDENT AUDITOR'S REPORT

Community Health Board Meeker-McLeod-Sibley Community Health Services

We have audited the accompanying financial statements of the governmental activities and the General Fund of the Meeker-McLeod-Sibley Community Health Services as of and for the year ended December 31, 2005, which collectively comprise the Health Services' basic financial statements as listed in the table of contents. These financial statements are the responsibility of the Health Services' management. Our responsibility is to express an opinion on these financial statements based on our audit.

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

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the governmental activities and the General Fund of the Meeker-McLeod-Sibley Community Health Services as of December 31, 2005, and the respective changes in financial position thereof for the year then ended in conformity with accounting principles generally accepted in the United States of America.

The Meeker-McLeod-Sibley Community Health Services has not presented a Management's Discussion and Analysis that the Governmental Accounting Standards Board has determined is necessary to supplement, although not required to be part of, the basic financial statements.

The budgetary comparison in Schedule 1 is not a required part of the basic financial statements but is supplementary information required by the Governmental Accounting Standards Board. We have applied certain limited procedures, which consisted principally of inquiries of management regarding the methods of measurement and presentation of the required supplementary information. However, we did not audit the information and express no opinion on it.

Our audit was made for the purpose of forming an opinion on the financial statements that collectively comprise the Meeker-McLeod-Sibley Community Health Services' basic financial statements. The supplementary information listed in the table of contents is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

In accordance with *Government Auditing Standards*, we have also issued a report dated September 15, 2006, on our consideration of the Meeker-McLeod-Sibley Community Health Services' internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing, and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of our audit.

/s/Pat Anderson

/s/Greg Hierlinger

PATRICIA ANDERSON STATE AUDITOR GREG HIERLINGER, CPA DEPUTY STATE AUDITOR

End of Fieldwork: September 15, 2006





EXHIBIT 1

GENERAL FUND BALANCE SHEET AND GOVERNMENTAL ACTIVITIES STATEMENT OF NET ASSETS WITH ADJUSTMENTS TO CONVERT MODIFIED TO FULL ACCRUAL FOR THE YEAR ENDED DECEMBER 31, 2005

	General Fund		Adjustments		Governmental Activities	
<u>Assets</u>						
Cash and pooled investments Accounts receivable Due from other governments Capital assets	\$	211,276 80 194,402	\$	- - -	\$	211,276 80 194,402
Depreciable - net				1,345		1,345
Total Assets	\$	405,758	\$	1,345	\$	407,103
<u>Liabilities</u>						
Current liabilities Accounts payable Due to other governments	\$	4,041 251,927	\$	<u>-</u>	\$	4,041 251,927
Total Liabilities	\$	255,968	\$		\$	255,968
Fund Balance/Net Assets						
Fund Balance Unreserved Undesignated		149,790	\$	(149,790)		
Total Liabilities and Fund Balance	\$	405,758				
Net Assets Invested in capital assets Unrestricted			\$	1,345 149,790	\$	1,345 149,790
Total Net Assets			\$	151,135		151,135
Reconciliation of the General Fund Balance to Net Assets Fund Balance - General Fund Capital assets are reported in the Statement of Net Assets but	not in the	Fund Balance S	Sheet		\$	149,790 1,345
Net Assets - Governmental Activities					\$	151,135

EXHIBIT 2

GENERAL FUND STATEMENT OF REVENUES, EXPENDITURES, AND CHANGES IN FUND BALANCE AND GOVERNMENTAL ACTIVITIES STATEMENT OF ACTIVITIES WITH ADJUSTMENTS TO CONVERT MODIFIED TO FULL ACCRUAL FOR THE YEAR ENDED DECEMBER 31, 2005

	General Fund		Adj	Adjustments		vernmental Activities
Revenues						
Intergovernmental	\$	1,638,002	\$	-	\$	1,638,002
Charges for services		6,607		-		6,607
Miscellaneous		80		-		80
Total Revenues	\$	1,644,689	\$		\$	1,644,689
Expenditures/Expenses						
Health						
Current	\$	69,070	\$	1,357	\$	70,427
Intergovernmental		1,566,043		-		1,566,043
Total Expenditures/Expenses	\$	1,635,113	\$	1,357	\$	1,636,470
Net Change in Fund Balance/Net Assets	\$	9,576	\$	(1,357)	\$	8,219
Fund Balance/Net Assets - January 1		140,214		2,702		142,916
Fund Balance/Net Assets - December 31	\$	149,790	\$	1,345	\$	151,135
Reconciliation of the Statement of General Fund R to the Statement of Activities of Governmental Acti Net Change in Fund Balance	/	ditures, and Cha	anges in Fu	ınd Balance	\$	9,576
Governmental funds report capital outlays as expendi cost of those assets is allocated over their estimated to						
Depreciation expense						(1,357)
Change in Net Assets of Governmental Activities					\$	8,219

NOTES TO THE FINANCIAL STATEMENTS AS OF AND FOR THE YEAR ENDED DECEMBER 31, 2005

1. <u>Summary of Significant Accounting Policies</u>

The Meeker-McLeod-Sibley Community Health Services' financial statements are prepared in accordance with generally accepted accounting principles (GAAP) for the year ended December 31, 2005. The Governmental Accounting Standards Board (GASB) is responsible for establishing GAAP for state and local governments through its pronouncements (statements and interpretations). Governments are also required to follow the pronouncements of the Financial Accounting Standards Board issued through November 30, 1989, (when applicable) that do not conflict with or contradict GASB pronouncements. The more significant accounting policies established in GAAP and used by the Health Services are discussed below.

A. Financial Reporting Entity

The Meeker-McLeod-Sibley Community Health Board was established pursuant to Minn. Stat. §§ 145A.09-145A.14 and a joint powers agreement as the Meeker-McLeod-Sibley Health Services Board effective April 1, 1980. This joint powers agreement was revised, effective April 19, 1990, and the Board was renamed the Meeker-McLeod-Sibley Community Health Board. The Community Health Board consists of 15 members, five each from Meeker, McLeod, and Sibley Counties. The primary function of the joint venture is to provide health services and to promote efficiency and economy in the delivery of health services.

McLeod County, in an agent capacity, reports the cash transactions of the Health Services as an agency fund on its annual financial statements.

B. Basic Financial Statements

Basic financial statements include information on the Meeker-McLeod-Sibley Community Health Services' activities as a whole and information on the General Fund of the Health Services. These separate presentations are reported in different columns on Exhibits 1 and 2. Each of the exhibits starts with a column of information based on activities of the General Fund and reconciles it to a column that reports the "governmental activities" of the Meeker-McLeod-Sibley Community Health Services as a whole.

1. Summary of Significant Accounting Policies

B. Basic Financial Statements (Continued)

The governmental activities columns are reported on a full accrual, economic resources basis, which recognizes all long-term assets and receivables as well as long-term debt and obligations. The Meeker-McLeod-Sibley Community Health Services' net assets are reported in two parts: invested in capital assets and unrestricted net assets. The statement of activities demonstrates the degree to which the expenses of the Meeker-McLeod-Sibley Community Health Services are offset by revenues.

The balance sheet and statement of revenues, expenditures, and changes in fund balance for the General Fund are presented on the modified accrual basis of accounting and report current financial resources.

C. Measurement Focus and Basis of Accounting

The government-wide financial statements are reported using the economic resources measurement focus and the accrual basis of accounting. Revenues are recorded when earned, and expenses are recorded when a liability is incurred, regardless of the timing of related cash flows. Grants and similar items are recognized as revenue as soon as all eligibility requirements imposed by the provider have been met.

Governmental fund financial statements are reported using the current financial resources measurement focus and the modified accrual basis of accounting. Revenues are recognized as soon as they are both measurable and available. Meeker-McLeod-Sibley Community Health Services considers all revenues to be available if collected within 90 days after the end of the current period. Charges for services are considered to be susceptible to accrual. Expenditures are recorded when the related fund liability is incurred.

D. Assets, Liabilities, and Net Assets or Equity

1. Capital Assets

Capital assets are recorded in the governmental activities column in the statement of net assets. Meeker-McLeod-Sibley Community Health Services defines capital assets as assets with an initial, individual cost of more than \$500 and an estimated useful life in excess of one year. Such assets are recorded at historical cost or estimated historical cost if purchased or constructed. Donated capital assets are recorded at estimated fair market value at the date of donation.

1. Summary of Significant Accounting Policies

D. Assets, Liabilities, and Net Assets or Equity

1. <u>Capital Assets</u> (Continued)

Capital assets of Meeker-McLeod-Sibley Community Health Services are depreciated using the straight-line method over an estimated five-year useful life.

2. Fund Equity

In the General Fund column of the financial statements, the Health Services reports fund balance. The unreserved, undesignated fund balance account indicates the portion of equity, which is available for budgeting and expending in future periods.

3. Budgetary Information

The Health Services adopts estimated revenue and expenditure budgets for the General Fund on the modified accrual basis. The legal level of budgetary control is the function level. Appropriations and encumbrances lapse at year-end. The budgets may be amended or modified at any time by the Community Health Board.

4. Excess of Expenditures over Budget

The General Fund has expenditures in excess of budget for the year ended December 31, 2005:

	 Expenditures								
	 Budget		Actual		Excess				
General Fund									
Health Current	\$ 64,536	\$	69,070	\$	(4,534)				
Intergovernmental	1,510,315		1,566,043		(55,728)				

2. Detailed Notes on All Funds

A. Assets

1. <u>Deposits and Investments</u>

Cash is on deposit with McLeod County. Cash transactions are administered by the McLeod County Treasurer who is, according to Minn. Stat. §§ 118A.02 and 118A.04, authorized to deposit cash in financial institutions designated by the County Board. Minnesota statutes require that all county deposits be covered by insurance, surety bond, or collateral, a requirement with which the County was in compliance at December 31, 2005.

2. <u>Capital Assets</u>

Capital asset activity for the year ended December 31, 2005, was as follows:

	Beginning Balance Increa		ncrease	Dec	crease	Ending Balance		
Capital assets depreciated Office equipment	\$	8,460	\$	-	\$	-	\$	8,460
Less: accumulated depreciation for Office equipment		5,758		1,357				7,115
Total capital assets depreciated, net	\$	2,702	\$	(1,357)	\$	-	\$	1,345

Depreciation expense was charged to current heath expenditures in the amount of \$1,357.

3. Receivables

The Health Services did not have any receivables scheduled to be collected beyond one year as of December 31, 2005.

3. Summary of Significant Contingencies and Other Items

A. Risk Management

Meeker-McLeod-Sibley Community Health Services is exposed to various risks of loss related to torts; theft of, damage to, or destruction of assets; errors or omissions; injuries to employees; or natural disasters. The Health Services has entered into a joint powers agreement with Minnesota counties to form the Minnesota Counties Insurance Trust (MCIT) to cover its property and casualty liabilities. There were no significant reductions in insurance from the previous year or settlements in excess of insurance for any of the past three years.

The Property and Casualty Division of MCIT is self-sustaining and the Health Services pays an annual premium to cover current and future losses. The MCIT carries reinsurance for its property lines to protect against catastrophic losses. Should the MCIT Property and Casualty Division liabilities exceed assets, MCIT may assess the Health Services in a method and amount to be determined by MCIT.







Schedule 1

BUDGETARY COMPARISON SCHEDULE GENERAL FUND FOR THE YEAR ENDED DECEMBER 31, 2005

	Budgeted Amounts			Actual		Variance with		
		Original		Final	Amounts		Final Budget	
Revenues								
Intergovernmental	\$	1,574,851	\$	1,574,851	\$	1,638,002	\$	63,151
Charges for services		-		-		6,607		6,607
Miscellaneous		-		-		80		80
Total Revenues	\$	1,574,851	\$	1,574,851	\$	1,644,689	\$	69,838
Expenditures								
Health								
Current								
Community Health	\$	64,536	\$	64,536	\$	69,070	\$	(4,534)
Intergovernmental								
CHS Grant	\$	287,870	\$	287,870	\$	246,256	\$	41,614
Centers for Disease Control and								
Prevention		90,773		90,773		91,699		(926)
WIC		257,000		257,000		310,843		(53,843)
MCH Grant		89,313		89,313		75,484		13,829
FPSP Grant		136,249		136,249		137,881		(1,632)
Tobacco Free Communities		177,320		177,320		260,197		(82,877)
Healthy Communities Activities		5,000		5,000		4,407		593
State Indoor Radon Grant		-		-		8,126		(8,126)
Home Visiting - TANF		48,724		48,724		41,163		7,561
Drug Free Communities - Department								
of Justice		100,000		100,000		103,123		(3,123)
Fetal Alcohol Program		133,741		133,741		107,941		25,800
Child and Teen Checkups MA		159,325		159,325		156,789		2,536
HRSA Grant		25,000		25,000		22,134		2,866
Total intergovernmental	\$	1,510,315	\$	1,510,315	\$	1,566,043	\$	(55,728)
Total Expenditures	\$	1,574,851	\$	1,574,851	\$	1,635,113	\$	(60,262)
Net Change in Fund Balance	\$	-	\$	-	\$	9,576	\$	9,576
Fund Balance - January 1		140,214		140,214		140,214		
Fund Balance - December 31	\$	140,214	\$	140,214	\$	149,790	\$	9,576



NOTES TO THE REQUIRED SUPPLEMENTARY INFORMATION FOR THE YEAR ENDED DECEMBER 31, 2005

1. <u>Budgetary Information</u>

The Meeker-McLeod-Sibley Community Health Services adopts estimated revenue and expenditure budgets for the General Fund on the modified accrual basis. The legal level of budgetary control is the function level. Appropriations and encumbrances lapse at year-end. The budgets may be amended or modified at any time by the Community Health Board.

2. Excess of Expenditures over Budget

The General Fund has expenditures in excess of budget for the year ended December 31, 2005:

		Expenditures							
	Budget		Actual			Excess			
General Fund									
Health									
Current	\$	64,536	\$	69,070	\$	(4,534)			
Intergovernmental		1,510,315		1,566,043		(55,728)			







Schedule 2

SCHEDULE OF INTERGOVERNMENTAL REVENUE FOR THE YEAR ENDED DECEMBER 31, 2005

Grants		
State Missessta Department of		
Minnesota Department of Health	\$	657 602
Human Services	Ф	657,603
numan services		142,600
Total State	\$	800,203
Federal		
Special Supplemental Nutrition Program (WIC)	\$	279,914
Drug Free Communities Support Program Grant		100,000
State Indoor Radon Grant		8,126
Centers for Disease Control and Prevention		91,281
Temporary Assistance for Needy Families - Home Visiting		48,720
Child and Teen Checkups MA		124,769
Rural Health Care Services		24,608
Block Grant for Prevention and Treatment of Substance Abuse		71,039
Maternal and Child Health Services Block Grant		89,342
Total Federal	\$	837,799
Total Intergovernmental Revenue	<u>\$</u>	1,638,002





Schedule 3

SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED DECEMBER 31, 2005

I. SUMMARY OF AUDITOR'S RESULTS

- A. Our report expresses an unqualified opinion on the basic financial statements of Meeker-McLeod-Sibley Community Health Services.
- B. No matters involving internal control over financial reporting were reported in the "Report on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*."
- C. No instances of noncompliance material to the financial statements of Meeker-McLeod-Sibley Community Health Services were disclosed during the audit.
- D. No matters involving internal control over compliance relating to the audit of the major federal award program were reported in the "Report on Compliance with Requirements Applicable to Each Major Program and Internal Control Over Compliance in Accordance with OMB Circular A-133."
- E. The Auditor's Report on Compliance for the major federal award program for Meeker-McLeod-Sibley Community Health Services expresses an unqualified opinion.
- F. No findings were disclosed that are required to be reported in accordance with Section 510(a) of OMB Circular A-133.
- G. The major program is:

Special Supplemental Food Program for Women, Infants, and Children

CFDA #10.557

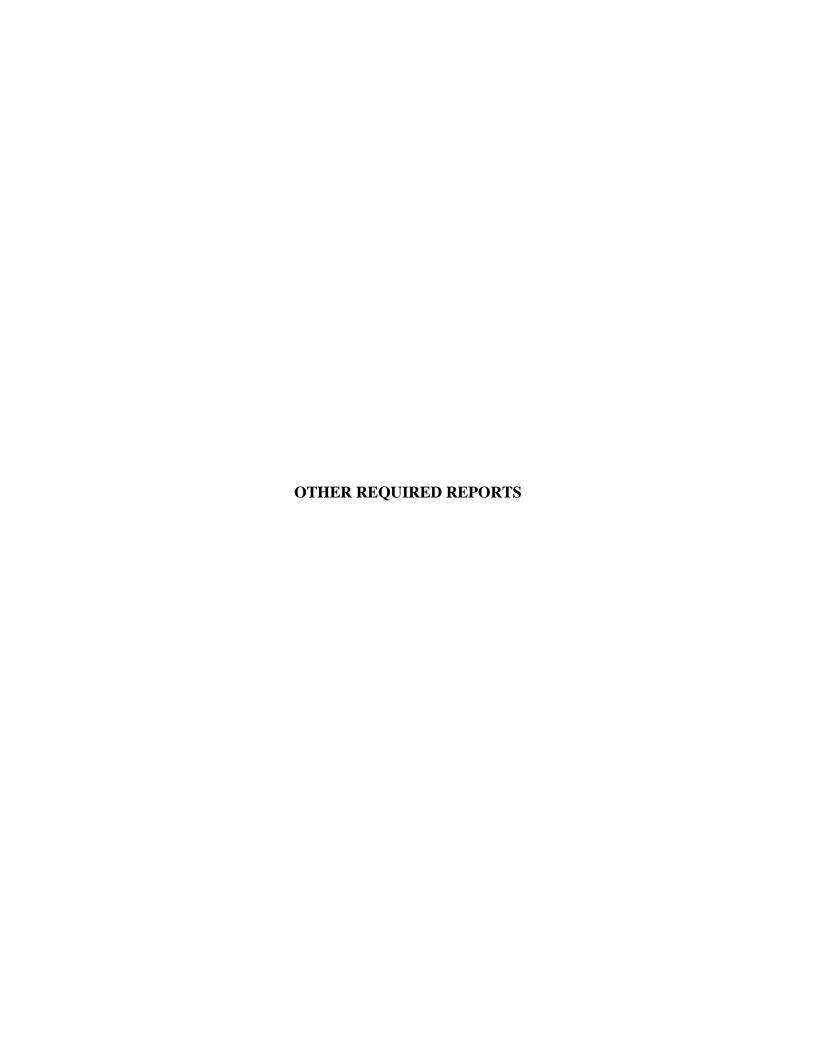
- H. The threshold for distinguishing between Types A and B programs was \$300,000.
- I. Meeker-McLeod-Sibley Community Health Services was determined to be a low-risk auditee.

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

None.

III. FINDINGS AND QUESTIONED COSTS FOR FEDERAL AWARD PROGRAMS

None.







STATE OF MINNESOTA OFFICE OF THE STATE AUDITOR

SUITE 500 525 PARK STREET SAINT PAUL, MN 55103-2139

(651) 296-2551 (Voice) (651) 296-4755 (Fax) state.auditor@state.mn.us (E-mail) 1-800-627-3529 (Relay Service)

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

Community Health Board Meeker-McLeod-Sibley Community Health Services

We have audited the financial statements of the governmental activities and the General Fund of Meeker-McLeod-Sibley Community Health Services as of and for the year ended December 31, 2005, which collectively comprise the Health Services' basic financial statements, and have issued our report thereon dated September 15, 2006. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States.

Internal Control Over Financial Reporting

In planning and performing our audit, we considered Meeker-McLeod-Sibley Community Health Services' internal control over financial reporting in order to determine our auditing procedures for the purpose of expressing our opinions on the financial statements and not to provide an opinion on the internal control over financial reporting. Our consideration of the internal control over financial reporting would not necessarily disclose all matters in the internal control over financial reporting that might be material weaknesses. A material weakness is a condition in which the design or operation of one or more of the internal control components does not reduce to a relatively low level the risk that misstatements in amounts that would be material in relation to the financial statements being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions. We noted no matters involving the internal control over financial reporting and its operation that we consider to be material weaknesses.

Compliance and Other Matters

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

Minnesota Legal Compliance

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

The Minnesota Legal Compliance Audit Guide for Local Government contains six categories of compliance to be tested: contracting and bidding, deposits and investments, conflicts of interest, public indebtedness, claims and disbursements, and miscellaneous provisions. Our study included all of the listed categories, except that we did not test for compliance in public indebtedness because no debt has been issued by Meeker-McLeod-Sibley Community Health Services, deposits and investments because the Health Services' funds are held by the fiscal agent, contracting and bidding as no contracts were noted, and miscellaneous provisions as none of the provisions are applicable to the Health Services.

The results of our tests indicate that, for the items tested, Meeker-McLeod-Sibley Community Health Services complied with the material terms and conditions of applicable legal provisions.

This report is intended solely for the information and use of the Community Health Board, management, and federal awarding agencies and pass-through entities and is not intended to be, and should not be, used by anyone other than those specified parties.

/s/Pat Anderson

/s/Greg Hierlinger

PATRICIA ANDERSON STATE AUDITOR GREG HIERLINGER, CPA DEPUTY STATE AUDITOR

End of Fieldwork: September 15, 2006



STATE OF MINNESOTA OFFICE OF THE STATE AUDITOR

SUITE 500 525 PARK STREET SAINT PAUL, MN 55103-2139

(651) 296-2551 (Voice) (651) 296-4755 (Fax) state.auditor@state.mn.us (E-mail) 1-800-627-3529 (Relay Service)

REPORT ON COMPLIANCE WITH REQUIREMENTS APPLICABLE TO EACH MAJOR PROGRAM AND INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH OMB CIRCULAR A-133

Community Health Board Meeker-McLeod-Sibley Community Health Services

Compliance

We have audited the compliance of Meeker-McLeod-Sibley Community Health Services with the types of compliance requirements described in the *U.S. Office of Management and Budget (OMB) Circular A-133 Compliance Supplement* that are applicable to its major federal program for the year ended December 31, 2005. The Health Services' major federal program is identified in the Summary of Auditor's Results section of the accompanying Schedule of Findings and Questioned Costs. Compliance with the requirements of laws, regulations, contracts, and grants applicable to its major federal program is the responsibility of the Health Services' management. Our responsibility is to express an opinion on Meeker-McLeod-Sibley Community Health Services' compliance based on our audit.

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; and OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Those standards and OMB Circular A-133 require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about Meeker-McLeod-Sibley Community Health Services' compliance with those requirements and performing such other procedures as we considered necessary in the circumstances. We believe that our audit provides a reasonable basis for our opinion. Our audit does not provide a legal determination on the Health Services' compliance with those requirements.

In our opinion, Meeker-McLeod-Sibley Community Health Services complied, in all material respects, with the requirements referred to above that are applicable to its major federal program for the year ended December 31, 2005.

Internal Control Over Compliance

The management of Meeker-McLeod-Sibley Community Health Services is responsible for establishing and maintaining effective internal control over compliance with requirements of laws, regulations, contracts, and grants applicable to federal programs. In planning and performing our audit, we considered the Health Services' internal control over compliance with requirements that could have a direct and material effect on a major federal program in order to determine our auditing procedures for the purpose of expressing our opinion on compliance and to test and report on the internal control over compliance in accordance with OMB Circular A-133.

Our consideration of the internal control over compliance would not necessarily disclose all matters in the internal control that might be material weaknesses. A material weakness is a condition in which the design or operation of one or more of the internal control components does not reduce to a relatively low level the risk that noncompliance with applicable requirements of laws, regulations, contracts, and grants that would be material in relation to a major federal program being audited may occur and not be detected within a timely period by employees in the normal course of performing their assigned functions. We noted no matters involving the internal control over compliance and its operation that we consider to be material weaknesses.

Schedule of Expenditures of Federal Awards

We have audited the financial statements of the governmental activities and the General Fund of Meeker-McLeod-Sibley Community Health Services as of and for the year ended December 31, 2005, and have issued our report thereon dated September 15, 2006. Our audit was performed for the purpose of forming opinions on the basic financial statements. The accompanying Schedule of Expenditures of Federal Awards is presented for purposes of additional analysis as required by OMB Circular A-133 and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

This report is intended solely for the information and use of the Community Health Board, management, and federal awarding agencies and pass-through entities and is not intended to be, and should not be, used by anyone other than those specified parties.

/s/Pat Anderson

/s/Greg Hierlinger

PATRICIA ANDERSON STATE AUDITOR GREG HIERLINGER, CPA DEPUTY STATE AUDITOR

End of Fieldwork: September 15, 2006

Schedule 4

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS FOR THE YEAR ENDED DECEMBER 31, 2005

Federal Grantor Pass Through Agency Grant Program Title	Federal CFDA Number	Expenditures		Passed Through to Subrecipients	
U.S. Department of Agriculture					
Passed Through Minnesota Department of Health					
Special Supplemental Nutrition Program (WIC)	10.557	\$	279,914	\$	279,914
U.S. Department of Justice					
Direct					
Drug Free Communities Support Program Grant	16.729	\$	100,000	\$	100,000
U.S. Environmental Protection Agency					
Passed Through Minnesota Department of Health					
State Indoor Radon Grant	66.032	\$	8,126	\$	8,126
U.S. Department of Health and Human Services					
Passed through Minnesota Department of Health					
Centers for Disease Control and Prevention - Investigations and					
Technical Assistance	93.283	\$	91,281	\$	91,281
Temporary Assistance for Needy Families	93.558		48,720		48,720
Medical Assistance Program	93.778		124,769		124,769
Rural Health Care Services Outreach and Rural Health Network					
Development Program	93.912		24,608		24,608
Block Grant for Prevention and Treatment of Substance Abuse	93.959		71,039		71,039
Maternal and Child Health Services Block Grant	93.994		89,342		89,342
Total U.S. Department of Health and Human Services		\$	449,759	\$	449,759
Total Federal Awards		\$	837,799	\$	837,799

Notes to Schedule of Expenditures of Federal Awards

- 1. The Schedule of Expenditures of Federal Awards presents the activity of federal award programs expended by the Meeker-McLeod-Sibley Community Health Services. The Health Services' reporting entity is defined in Note 1 to the financial statements.
- 2. The expenditures on this schedule are on the full accrual basis of accounting.
- 3. Pass-through grant numbers were not assigned by the pass-through agencies.