FINANCIAL STATEMENTS AND INDEPENDENT AUDITORS' REPORT

For the Years Ended December 31, 2012 and 2011

CLUBINE AND RETTELE, CHARTERED Certified Public Accountants Salina, Kansas

CENTRAL KANSAS MENTAL HEALTH CENTER SALINA, KANSAS

For the Years Ended December 31, 2012 and 2011

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INDEPENDENT AUDITORS' REPORT



To the Board of Directors
and Management of
Central Kansas Mental Health Center
Salina, Kansas 67401



Robert I. Clubine, CPA David A. Rettele, CPA Jay D. Langley, CPA, CGMA Jon K. Bell, CPA Leslie M. Corbett, CPA Stacy J. Osner, CPA

Marci K. Fox, CPA Linda A. Suelter, CPA Johnna R. Vosseller, CPA Report on the Financial Statements

We have audited the accompanying financial statements of Central Kansas Mental Health Center, which comprise the statements of net position as of December, 31, 2012 and 2011, and the related statements of activities, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America, the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, and the *Kansas Municipal Audit and Accounting Guide*, prescribed by the Director of Accounts and Reports, Department of Administration of the State of Kansas. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement.

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

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

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net position of business-type activities of Central Kansas Mental Health Center as of December 31, 2012 and 2011, and the respective changes in its net position and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

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Other Matters

Required Supplementary Information

Accounting principles generally accepted in the United States of America require that management's discussion and analysis on pages 5-7 be presented to supplement the basic financial statements. Such information, although not a part of the basic financial statements, is required by the Governmental Accounting Standards Board who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic, or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of inquires of management about the methods of preparing the information and comparing the information for consistency with management's response to our inquires, the basic financial statements, and other knowledge we obtained during our audit of the basic financial statements. We do not express an opinion or provide any assurance on the information because the limited procedures do not provide us with sufficient evidence to express an opinion or provide any assurance.

Other Information

Our audits were conducted for the purpose of forming an opinion on the basic financial statements that collectively comprise the Central Kansas Mental Health Center's financial statements. The accompanying Schedules 1 through 5 are presented for purposes of additional analysis and are not a required part of the 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.

Other Reporting Required by Government Auditing Standards

In accordance with *Government Auditing Standards*, we have also issued our report dated May 7, 2013 on our consideration of the Central Kansas Mental Health's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreement 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* in considering the Central Kansas Mental Health Center's internal control over financial reporting and compliance.

Clubine & Rettele, Chartered

Salina, Kansas May 7, 2013



Certified Public Accountants



Robert I. Clubine, CPA David A. Rettele, CPA Jay D. Langley, CPA, CGMA Jon K. Bell, CPA Leslie M. Corbett, CPA Stacy J. Osner, CPA

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

To the Board of Directors Central Kansas Mental Health Center Salina, Kansas 67401

We have audited the financial statements of Central Kansas Mental Health Center, as of and for the years ended December 31, 2012 and 2011, and have issued our report thereon dated May 7, 2013. We conducted our audit 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 the *Kansas Municipal Audit and Accounting Guide*, prescribed by the Director of Accounts and Reports, Department of Administration of the State of Kansas.

Internal Control Over Financial Reporting

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

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility that a material misstatement of the entity's financial statement will not be prevented, or detected and corrected on a timely basis. A significant deficiency is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, vet important enough to merit attention by those charged with governance.

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

Compliance and Other Matters

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

Purpose of this Report

This report is intended solely for the information and use of the Board of Directors, management, federal and state awarding agencies and pass-through entities, and the Division of Accounts and Reports of the State of Kansas and is not intended to be and should not be used by anyone other than these specified parties.

Clubine and Rettele, Chartered

Salina, Kansas May 7, 2013

MANAGEMENT'S DISCUSSION AND ANALYSIS CENTRAL KANSAS MENTAL HEALTH CENTER

The management of CKMHC provides readers of the 2012 audited financial statement this narrative summary and analysis of the financial activities for the year ending December 31, 2012.

Financial Highlights

Revenue

- CKMHC remained a "fee for service" health care provider in 2012 while participating in a capped agreement with the Kansas Medicaid managed care entity (Kansas Health Solutions). The statewide community mental health centers' management of care kept the total under the aggregate cap and all service was ultimately reimbursable. However, some of the revenue finally available in 2012 may have been generated in 2011. The Medicaid revenue is best understood by looking at 2011 and 2012 together. Medicaid is approximately 85% of the 2012 fee for service income as reported.
- Fees for service are generated as follows: 30% outpatient,
 psychiatric/medical and emergency services; 25% community based
 services for adults; 45% community based services for youth and families;
 and an immaterial amount for education and consultation. An explanation
 for this distribution includes that nearly all youth in Kansas who need
 community based services for their serious mental health conditions have
 a payer source, primarily Medicaid, which includes a federal waiver.
- Subsidy is most heavily required for outpatient, emergency and community based services for adults.
- The respective five counties aggregate contribution increased 1.4% over 2011 and is 4.6% of 2012 revenue. These funds are used as subsidy for a sliding fee schedule and permit all residents of each county access to the services which are provided by CKMHC. Residents are not denied medically necessary services because of inability to pay.
- The state subsidy through contract is 10.5% of revenue. The actual dollar amount was \$25,701 more than 2011 as the legislature approved a modest increase to replace previous cuts in "Mental Health Reform" dollars for fiscal year 2013 (July 2012 to June 2013).
- Overall, the reported revenue was 5.8% greater than expenses in 2012, \$362,427. This revenue was 1.4% greater than revenue in 2011.

Expenses:

Personnel costs constitute 82.3% of the total 2012 expenditure: wages equal 61.4% of total expense; health insurance 11.6%; payroll taxes 4.4%; and KPERS 4.8%. (Employer health insurance cost increased 5% in July 2012. Payroll taxes did not change. Unemployment rate was reduced from 0.23% in 2011 to 0.1% in 2012. Total benefit costs are

- subject to change as individual wages increase as employees come and go, or there are rate changes.)
- Total expenditures for 2012 were 0.9% over that of 2011 and were operationally 6.7% under budget, which contributed to the net income.
- Expenses are driven by an intention to never "waste", but to be resourceful, efficient and creative without being short sighted regarding needed purchases. The expense budget is prudent and conservative, and must at least match the market on personnel expenses. Retention of trained, experienced staff at all levels is paramount.

Assets:

 CKMHC has sufficient undesignated cash reserve to carry operations for over 6 months and has no capital debt.

2013 Future Opportunities

- CKMHC expects to transition to a new Executive Director with the retirement of the current director after 25 years (mid year 2013). This offers adjustment and opportunity.
- The continued theme of health care is one of partnership, integration, and connection. CKMHC remains open to opportunities of contracts, colocation, shared funding, new innovation, etc. when mutually beneficial, and improves client care and outcomes.
- Improved utilization and innovation of the use of technology in the provision of services and the measurement of outcomes is desired. This will include shared data with the Kansas Health Information Network, etc.
- Improved work with clients, families, staff and other resources to increase
 diversion from residential, hospital, emergency department levels of care,
 specifically reduce rapid readmission to facilities. Increasing access, crisis
 response and lower levels of intervention in order to provide care "sooner"
 will be desirable.
- To the extent resources permit, expand education and prevention efforts via Mental Health First Aid classes and other evidence based practices.

Condensed Financial Information Total Assets	2012 \$7,623,146	2011 \$7,459,750
Total Liabilities	\$373,444	\$520,125
Deferred Revenue	\$22,500	\$74,851
Total Fund Equity	7,227,202	6,864,774
Total Liabilities and Fund Equity	\$7,623,146	\$7,459,750
Revenues		
State Aid	\$299,404	\$299,404
County Tax	307,348	303,175
Grants	512,141	513,276
Fees for Service	5,438,051	5,340,923
Interest Income	18,126	21,416
Miscellaneous	52,316	56,707
Total Revenues	\$6,627,386	\$6,534,901
Expenses		
Personnel Services	\$5,268,454	\$5,154,030
Client Services	327,650	370,832
Other	668,855	684,696
Total Expenses	\$6,264,959	\$6,209,558
Excess of Revenues over Expenses	\$362,427	\$325,343

Patricia Murray, Executive Director

Sheila Srna, Director of Finance

Exhibit I

STATEMENTS OF NET POSITION

ASSETS

			December 31		
Current Assets		2012		•	2011
Cash on hand	\$	876	j	\$	676
Cash in banks	•	2,472,062		•	2,194,734
Certificates of Deposit		985,638			972,109
Certificates of Deposit - Designated for fixed assets		200,000			200,000
Accounts receivable		337,855			295,990
Prepaid expense		93,463			91,237
Beneficial interest in assets held by Greater Salina		00,100	'		01,201
Community Foundation		15,628	t		13,863
Interest receivable		2,531			2,888
			-		
Total Current Assets		4,108,053	-		3,771,497
Property and Equipment					
Land		645,481			645,481
Building and improvements		4,522,449			4,524,803
Furnishings and equipment		740,019			857,331
Technology		1,002,623			992,349
Landscaping		25,644			25,644
Landscaping		· · · · · · · · · · · · · · · · · · ·	_		
Lance Access Into Literate College		6,936,216			7,045,608
Less - Accumulated depreciation		3,421,124	-		3,357,355
Total Property and Equipment		3,515,092	<u>.</u>		3,688,253
Total Assets	\$	7,623,145	•	\$	7,459,750
	<u></u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	=	<u>-</u>	.,,
LIABILITIES AND NET POS	OITIE	N			
Current Liabilities					
Accounts payable	\$	54,159	ı	\$	88,521
Accrued payroll		319,284	, -		431,604
Total Current Liabilities		373,443	I -	_	520,125
Deferred Inflows of Resources					
Funds advanced for future restricted purposes		22,500	t -		74,851
Net Position					
Unrestricted					
Designated for fixed assets		200,000	1		200,000
Undesignated Undesignated		7,027,202			6,664,774
Ondesignated		1,021,202	=		0,004,774
Total Net Position		7,227,202	ı •		6,864,774
			•		
Total Liabilities and Net Position	\$	7,623,145	ı =	<u>\$</u>	7,459,750

Exhibit II

STATEMENTS OF REVENUES, EXPENDITURES, AND CHANGES IN NET POSITION

For the Year Ended December 31,

	2012	•
Revenues	<u>2012</u>	<u>2011</u>
Patient service revenue, net (Note 1)	\$ 5,438,051	\$ 5,340,923
	φ 3,430,031	ψ 3,340,923
Other Revenues	207.240	202.475
Payments from counties State aid	307,348	303,175
	299,404	299,404
Grants	512,141	513,276
Workshop/teaching revenue	14,785	15,439
Interest	18,126	21,416
Net unrealized gain (loss) on investment	1,764	(202)
Miscellaneous revenue	35,767	41,470
Total Other Revenues	1,189,335	1,193,978
Total Revenues	6,627,386	6,534,901
Expenditures		
Salaries	3,848,162	3,788,416
Salary benefit	729,056	696,724
Consultations	68,417	74,215
Payroll taxes	277,459	278,522
KPERS contribution	298,991	271,382
Rent	11,442	10,812
Repairs and maintenance	29,791	28,760
Computer costs	165,025	188,599
Copier maintenance and fees	8,087	8,333
Contracted services	24,504	26,010
Phone	19,314	23,333
Postage	9,229	9,687
Professional development	18,560	16,012
Professional licenses and dues	3,305	2,749
Mileage	133,680	135,061
Vehicle maintenance	6,597	4,122
Advertising	9,087	7,707
Office supplies	14,299	14,802
Program supplies	7,767	11,486
Audit and legal	8,523	7,150
Insurance	85,260	83,384
Utilities	55,541	57,220
Dues, subscriptions and licenses	19,758	19,355
Center business and meetings	7,829	9,502
Expenditures for clients	186,203	224,285
Depreciation	214,027	211,930
Other costs	5,045	
Total Expenditures	6,264,959	6,209,558
Excess Revenues over Expenditures	362,427	325,343
Net Position at Beginning of Year	6,864,774	6,539,431
Net Position at End of Year	<u>\$ 7,227,202</u>	\$ 6,864,774

Exhibit III

STATEMENTS OF CASH FLOWS

	For the Year Ended I	December 31, <u>2011</u>
Cash Flows From Operating Activities Cash received for services Interest received	\$ 6,513,280 18,483	\$ 6,946,446 21,069
Cash paid to suppliers and employees	(6,194,795)	(5,925,790)
Net Cash Provided by Operating Activities	336,968	1,041,725
Cash Flows From Investing Activities	(45.040)	(47.005)
Purchase of property and equipment Purchase of Investments	(45,912) (13,529)	(47,925) (114,849)
Net Cash Used by Investing Activities	(59,441)	(162,774)
Net Increase in Cash	277,528	878,951
Cash at Beginning of Year	2,195,410	1,316,459
Cash at End of Year	\$ 2,472,938	\$ 2,195,410
RECONCILIATION OF EXCESS REVENUES OV NET CASH PROVIDED BY OPERATIN		
	IG ACTIVITIES	
Excess Revenues under Expenditures - Exhibit II	\$ 362,427	\$ 325,343
Adjustments to reconcile excess revenues over (under) expenditure	\$ 362,427	\$ 325,343
Adjustments to reconcile excess revenues over (under) expenditure cash used by operating activities Depreciation	\$ 362,427 es to net 214,027	211,930
Adjustments to reconcile excess revenues over (under) expenditure cash used by operating activities Depreciation Unrealized (gain) loss on investment	\$ 362,427 es to net 214,027 (1,764)	211,930 202
Adjustments to reconcile excess revenues over (under) expenditure cash used by operating activities Depreciation Unrealized (gain) loss on investment Decrease (Increase) in accounts receivable	\$ 362,427 es to net 214,027 (1,764) (41,865)	211,930 202 357,686
Adjustments to reconcile excess revenues over (under) expenditure cash used by operating activities Depreciation Unrealized (gain) loss on investment Decrease (Increase) in accounts receivable Increase in prepaid expenses	\$ 362,427 es to net 214,027 (1,764) (41,865) (2,226)	211,930 202 357,686 (13,033)
Adjustments to reconcile excess revenues over (under) expenditure cash used by operating activities Depreciation Unrealized (gain) loss on investment Decrease (Increase) in accounts receivable Increase in prepaid expenses Decrease (increase) in interest receivable	\$ 362,427 es to net 214,027 (1,764) (41,865) (2,226) 357	211,930 202 357,686 (13,033) (347)
Adjustments to reconcile excess revenues over (under) expenditure cash used by operating activities Depreciation Unrealized (gain) loss on investment Decrease (Increase) in accounts receivable Increase in prepaid expenses Decrease (increase) in interest receivable Loss on disposal of property and equipment	\$ 362,427 es to net 214,027 (1,764) (41,865) (2,226) 357 5,045	211,930 202 357,686 (13,033) (347) 222
Adjustments to reconcile excess revenues over (under) expenditure cash used by operating activities Depreciation Unrealized (gain) loss on investment Decrease (Increase) in accounts receivable Increase in prepaid expenses Decrease (increase) in interest receivable Loss on disposal of property and equipment Increase (Decrease) in accounts payable	\$ 362,427 es to net 214,027 (1,764) (41,865) (2,226) 357 5,045 (34,362)	211,930 202 357,686 (13,033) (347) 222 31,433
Adjustments to reconcile excess revenues over (under) expenditure cash used by operating activities Depreciation Unrealized (gain) loss on investment Decrease (Increase) in accounts receivable Increase in prepaid expenses Decrease (increase) in interest receivable Loss on disposal of property and equipment	\$ 362,427 es to net 214,027 (1,764) (41,865) (2,226) 357 5,045	211,930 202 357,686 (13,033) (347) 222
Adjustments to reconcile excess revenues over (under) expenditure cash used by operating activities Depreciation Unrealized (gain) loss on investment Decrease (Increase) in accounts receivable Increase in prepaid expenses Decrease (increase) in interest receivable Loss on disposal of property and equipment Increase (Decrease) in accounts payable Increase (Decrease) in accrued payroll	\$ 362,427 es to net 214,027 (1,764) (41,865) (2,226) 357 5,045 (34,362) (112,320)	211,930 202 357,686 (13,033) (347) 222 31,433 53,438

NOTES TO FINANCIAL STATEMENTS December 31, 2012 and 2011

1. Summary of significant accounting policies

A. Reporting Entity

The Central Kansas Mental Health Center is an agency of the board of county commissioners of Ellsworth, Dickinson, Lincoln, Ottawa and Saline Counties, Kansas, established for the purpose of furnishing mental health services to the five-county area under K.S.A. 19-4001 et. seq., and as such, is not a municipality subject to the cash basis law, K.S.A. 10-1011 et. seq. The Central Kansas Mental Health Center is a not-for-profit organization as described in Section 501 (c) (3) of the Internal Revenue Code. Application for tax-exempt status was approved July 29, 1993.

Serving on the Governing Board of the Central Kansas Mental Health Center, Salina, Kansas, for the year ended December 31, 2012, were the following:

Julie Lemmons - Chairperson
Jim Hughes - Vice Chairperson
Diana Shaft - Secretary
Doris White - Treasurer
Clara McCoy
Sheila Biggs
Bill Peterson
Glennace Kirn
Ruth McCurry
Randy Duncan
John Reynolds

Serving as employed administrator for the Governing Board during the year ended December 31, 2012, was the following:

Patricia Murray, ACSW - Executive Director

Serving on the Governing Board of the Central Kansas Mental Health Center, Salina, Kansas, for the year ended December 31, 2011, were the following:

Bill Peterson - Chairperson
Sheila Biggs - Vice Chairperson
Marge Mintun - Secretary
Doris White - Treasurer
Clara McCoy
Jim Hughes
Diana Shaft
Glennace Kirn
Ruth McCurry
Jerry Fowler
Julie Lemons

Serving as employed administrator for the Governing Board during the year ended December 31, 2011, was the following:

Patricia Murray, ACSW - Executive Director

NOTES TO FINANCIAL STATEMENTS (CONT.) December 31, 2012 and 2011

- B. Summary of significant accounting policies of the Central Kansas Mental Health Center are as follows:
 - 1. The Central Kansas Mental Health Center prepares its financial statements on the accrual method of accounting in accordance with generally accepted accounting principles.
 - 2. Cash on hand, in checking, and in money market accounts are considered to be cash and cash equivalents. The Central Kansas Mental Health Center considers these funds available for current operations. Investments are recorded at cost and are held in federally insured institutions with an original maturity date in excess of 3 months.
 - 3. Fixed assets are stated at cost. Fixed assets donated are valued at readily determinable fair values at their fair market value at the time of the donation. Depreciation is computed using the straight-line method based on estimated useful lives as follows:

Building and Improvements	5 - 40 years
Furnishings and Equipment	5 - 10 years
Technology	3 - 5 years
Landscaping	20 years

- 4. Patient service revenue is reported net of discounts, estimated based on aged trial balances, which are classified by the type of payer, historical collection trends, the current economic environment, other relevant factors and bad debts. Grant revenue is reported in the period of allotment by the State of Kansas.
- 5. An operating budget is not required, however yearly budgets are prepared and adopted by the Board of Directors.

2. Deposits and Investments

Cash and cash equivalents at December 31, were comprised of the following:

	2012			2011
Cash on hand First Bank Kansas, Salina, KS	\$	876	\$	676
Checking account (Payroll) - 10140		6,384		13,805
Checking account - 10108 Checking account - 7194951		24,646 36,848		15,084 34,704
First Bank Kansas, Salina, KS Money Market Account	2,	404,184		2,131,141
Totals	<u>\$ 2,</u>	472,938	<u>\$</u>	2,195,410

K.S.A. 9-1401 establishes the depositories which may be used by the Government. The statute requires banks eligible to hold the Government's fund have a main or branch bank in the county in which the Government is located, or in an adjoining county if such an institution has been designated as an official depository, and the banks provide an acceptable rate of return on funds. In addition K.S.A. 9-1402 requires the banks to pledge securities for deposits in excess of FDIC coverage. The Government has no other policies that would further limit interest rate risk.

NOTES TO FINANCIAL STATEMENTS (CONT.) December 31, 2012 and 2011

2. Deposits and Investments (Cont.)

K.S.A. 9-1401 limits the Government's investment of idle funds to time deposits, open accounts, and certificates of deposit with allowable financial institution; U.S. government securities; temporary notes; no-fund warrants; repurchase agreements; and the Kansas Municipal Investment Pool. The Government has no other policies that would further limit its investment choices.

Certificates of Deposit at December 31, were comprised of the following:

	2012	2011
First Bank Kansas, Salina, KS Certificates of deposit Bank of Tescott	\$ 1,085,638	\$ 972,083
Certificate of deposit	100,000	200,026
Totals	\$ 1,185,638	\$ 1,172,109
Undesignated Designated for fixed assets	\$ 985,638 200,000	\$ 972,109 200,000
Totals	\$ 1,185,638	\$ 1,172,109

Concentration of credit risk. State statutes place no limit on the amount of the Government may invest in any one issuer as long as the investments are adequately secured under K.S.A. 9-1402 and 9-1405.

Custodial credit risk - deposits. Custodial credit risk is the risk that in the event of a bank failure, the Government's deposits may not be returned to it. State Statues require the Government's deposits in financial institutions to be entirely covered by federal depository insurance or by collateral held under a joint custody receipt issued by a bank within the State of Kansas, the Federal Reserve Bank of Kansas City, or the Federal Home Loan Bank of Topeka, except during designated "peak periods" when required coverage is 50%. The Governments has not designated a "peak period." All deposits were legally secured at December 31, 2012.

Deposits. At year-end, the carrying amount of the Central Kansas Mental Health Center's deposits, including certificates of deposit, was \$3,658,376. The bank balance was \$3,659,505. The difference between the carrying amount and the bank balance is outstanding checks and deposits in transit. Of the bank balance, \$350,000 was covered by FDIC insurance, and \$3,309,505 was collateralized with pledged securities held by the pledging financial institutions agents in Central Kansas Mental Health Center's name.

3. Greater Salina Community Foundation

Central Kansas Mental Health Center transferred \$10,000 to the Greater Salina Community Foundation in 2000. Distributions from the Greater Salina Community Foundation will be made in the manner consistent with its policies and procedures. The Greater Salina Community Foundation was given variance power over the assets. The assets are recorded at fair market value at December 31, 2012 and 2011 as determined by the Greater Salina Community Foundation.

NOTES TO FINANCIAL STATEMENTS (CONT.) December 31, 2012 and 2011

4. Compensated Absences

As of December 31, 2012 and 2011, the following amounts had been accumulated and remain unpaid:

		2012		2011	
Paid Time-Off Leave Extended Leave	\$ 	\$ 137,877 568,556		\$ 142,083 526,626	
Totals	\$	706,433	\$	668,709	

Paid time-off leave has been accrued on the December 31, 2012 and 2011 financial statements. Extended leave is not reimbursed if an employee terminates for any reason other than retirement, and in the case of retirement, is reimbursed at a rate of \$15.00 per hour up to a limit of 600 hours.

5. Defined Benefit Pension Plan

Plan Description.

The Central Kansas Mental Health Center participates in the Kansas Public Employees Retirement System (KPERS), a cost-sharing multiple-employer defined benefit pension plan as provided by K.S.A. 74-4901, et seq. KPERS provides retirement benefits, life insurance, disability income benefits, and death benefits. Kansas law establishes and amends benefit provisions. KPERS issues a publicly available financial report that includes financial statements and required supplementary information. That report may be obtained by writing to KPERS (611 S. Kansas, Suite 100; Topeka, KS 66603) or by calling 1-888-275-5737.

Funding Policy.

K.S.A. 74-4919 establishes the KPERS member-employee contribution rate at 4% of covered salary for Tier I. As of December 31, 2012, the Center had 36 employees classified as Tier 2, contributing at a rate of 6%. The employer collects and remits member-employee contributions according to the provisions of section 414(h) of the Internal Revenue Code. State law provides that the employer contribution rate be determined annually based on the results of an annual actuarial valuation. KPERS is funded on an actuarial reserve basis. State law sets a limitation on annual increases in the contribution rates for KPERS employers. The employer rate established for calendar year 2012 was 7.34%. The Central Kansas Mental Health Center employer contributions to KPERS for the years ending December 31, 2012, 2011, and 2010 were \$298,991, \$271,382, and \$246,986, respectively, equal to the statutory required contributions for each year.

6. Employee Benefits

The Central Kansas Mental Health Center adopted a cafeteria plan which covers employees upon employment. Ongoing employees declare intent to participate in the plan before January 1 of each year. The benefits that are available include health care reimbursement, dependent care assistance and insurance premium expense. This plan is administered by an outside entity.

The Central Kansas Mental Health Center offers its employees a 403b plan. Participation is voluntary. The Center does not match any contributions.

NOTES TO FINANCIAL STATEMENTS (CONT.) December 31, 2012 and 2011

7. Other Post Employment Benefits

Under the Consolidated Omnibus Budget Reconciliation Act (COBRA), the Center makes health care benefits available to eligible former employees and eligible dependents. Certain requirements are outlined by the federal government for this coverage. While the insured pays the full amount of the applicable premium, conceptually, the Center is subsidizing the insured because each participant is charged a level premium regardless of age. However, the cost of this subsidy has not been quantified in these financial statements.

8. Financial Statement Reporting

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

9. Deferred Revenue

The Central Kansas Mental Health Center periodically receives payments from grants and other governmental aid in advance for reimbursement to finance expenditures incurred in administering programs and services.

10. Subsequent Events

The Center's management has evaluated events and transactions occurring after December 31, 2012 through May 7, 2013. The aforementioned date represents the date the financial statements were available to be issued.

Schedule 1

GRANT STATEMENTS OF REVENUES AND EXPENDITURES

For the Year Ended December 31, 2012

Award Number		Revenues		Ex	penditures
Kansas Department of Social ar	nd Rehabilitation				
Award Number DBHS-SA-11-04/12-04	<u>Program</u> SAMHDD	\$	299,404	\$	299,404
MHCC 003	SAMHDD		164,762		164,762
MHCC	SAMHDD		230,571		230,571
SHF-DBHS 47347-2012	SAMHDD		21,425		21,425
PATH-11-003	SAMHDD		20,395		20,395
PATH KDADS 47347-2013	SAMHDD	_	14,842	_	14,842
TOTALS		\$	751,399	\$	751,399

Schedule 2

STATEMENTS OF REVENUES, EXPENDITURES AND BUDGET

For the Year Ended December 31, 2012

(With Comparative Actual Totals for the Prior Year Ended December 31, 2011)

(vvidi Comparative Ac	idai Totais ioi tije	Filor Tear Ended	Current Year	11)
	Prior Year Actual	Actual	Budget	Variance Over (Under)
Revenues				
Patient Service Revenue, Net	\$ 5,340,923	\$ 5,438,051	\$ 5,320,000	<u>\$ 118,051</u>
Other Revenues				
Payments from counties	303,175	307,348	307,347	1
State aid	299,404	299,404	299,404	-
Grants	513,276	512,141	526,134	(13,993)
Workshop/teaching revenue	15,439	14,785	16,000	(1,215)
Interest	21,416	18,126	23,000	(4,874)
Net unrealized gain (loss) on investment	(202)	1,764	-	1,764
Miscellaneous revenue	41,470	35,767	41,500	(5,733)
Total Other Revenues	1,193,978	1,189,335	1,213,385	(24,050)
Total Revenues	6,534,901	6,627,386	6,533,385	94,001
Operating Expenditures				
Salaries	3,788,416	3,848,162	3,898,090	(49,928)
Consultations	74,215	68,417	75,000	(6,583)
Payroll taxes, KPERS, and benefits	1,246,628	1,305,506	1,523,135	(217,629)
Rent	10,812	11,442	13,000	(1,558)
Repairs and maintenance	28,760	29,791	35,000	(5,209)
Computer costs	188,599	165,025	200,000	(34,975)
Copier maintenance and fees	8,333	8,087	10,000	(1,913)
Contracted services	26,010	24,504	27,000	(2,496)
Phone	23,333	19,314	25,000	(5,686)
Postage	9,687	9,229	14,000	(4,771)
Professional development	16,012	18,560	20,000	(1,440)
Professional licenses and dues	2,749	3,305	3,000	305
Mileage	135,061	133,680	138,000	(4,320)
Vehicle maintenance	4,122	6,597	6,000	597
Advertising	7,707	9,087	13,000	(3,913)
Office supplies	14,802	14,299	21,000	(6,701)
Program supplies	11,486	7,767	14,000	(6,233)
Audit and legal	7,150	8,523	8,500	23
Insurance	83,384	85,260	90,000	(4,740)
Utilities	57,220	55,541	65,000	(9,459)
Dues, subscriptions and licenses	19,355	19,758	22,000	(2,242)
Center business and meetings	9,502	7,829	12,300	(4,471)
Expenditures for clients	224,285	186,203	228,630	(42,427)
Depreciation	211,930	214,027	250,000	(35,973)
Other costs	-	5,045		5,045
Total Operating Expenditures	6,209,558	6,264,959	6,711,655	(446,697)
Excess Revenues Under Expenditures	\$ 325,343	\$ 362,427	\$ (178,270)	\$ 540,698

Schedule 3

45,911

CAPITAL EXPENDITURES	_	
For the Year Ended December 31, 2012		
Furnishings and Equipment		
Commercial Water Heater for Crossroads Building	\$	4,288
18" Poulan Gas Hedge Trimmer		144
Lateral 5-drawer File Cabinet		150
Toshiba Phone		475
Toshiba Phone Expansion Module		165
Blower 27.2CC		150
Bissell Vacuum Sweeper		99
Two HVAC Systems for the Martin Building		7,678
Total Furnishings and Equipment	Maydenshaphaphapa	13,149
Technology		
Netstandard		252
Dell R710 Server Upgrades with Warranty		8,625
Laptop with webcam and Headset		971
Fortigate 110C Firewall and Web Filter with 3 Year Support		4,402
Professional Service for Server Installation		2,450
Firewall Installation		908
5 - Acer Widescreen LCD Monitors		400
Proofpoint Spam Detection Software		2,802
Computer Interface Module		225
Copier, Scanner and Fax Machine		9,217
5 - Acer 20" Widescreen LCD Monitors		500
Procurve Switch		223
Total Technology		30,975
Buildings		
New Shingles on Outpatient Building		1,787

Total Capital Expenditures

	Schedule 4
CAPITAL EXPENDITURES	
For the Year Ended December 31, 2011	
Furnishings and Equipment Installation of New Zone Control System	\$ 4,899
Phone System Upgrade	12,630
40 Gallon Water Heater	714
Wii System - CBS Programs	805
10 Loveseats for Outpatient Offices	4,029
Total Furnishings and Equipment	23,077
Technology	
Conversion Time	3,240
Database Licenses	8,940
1 - Acer Black 21.5" Widescreen LCD Monitor	575
1 - Acer Black 23" Backlight LCD Monitor	150
8 - Acer 20" Backlight LCD Monitors	800
Proofpoint Encrytion Software	10,785
3 - Acer 20" Widescreen LCD Monitor	357
Total Technology	24,847
Total Capital Expenditures	<u>\$ 47,924</u>

Schedule 5

INSURANCE AND FIDELITY BOND COVERAGE December 31, 2012

		Amount of Coverage	Co-Insurance Percentage
Employee Dishonesty Coverage Forgery		\$ 50,000 50,000	
Professional Liability			
	Each claim Total limit	1,000,000 3,000,000	
Commercial General Liability			
Mental Health Professional Liability	Each claim	1,000,000	
	Total limit	3,000,000	
Commercial General Liability Bodily Injury or Property Damage	Each claim	1,000,000	
Personal Injury/Advertising Injury	Total limit	3,000,000	
Fire Legal Liability	Each claim	50,000	
Umbrella coverage	Each claim	2,000,000	
	Total limit	2,000,000	
Worker's Compensation and Employer's	liability		
Bodily injury - Accident		500,000	
Bodily injury - Disease/limit		500,000	
Bodily injury - Disease/employee		500,000	
Commercial Property			
Buildings		4,577,267	100%
Personal Property		312,422	100%
Business Income - Basic		2,500,000	
Business Auto			
Liability		1,000,000	
Uninsured motorist		1,000,000	