Forrest County General Hospital A Component Unit of Forrest County, Mississippi

Independent Auditor's Reports, Financial Statements, and Supplementary Information

September 30, 2024 and 2023



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Independent Auditor's Report

Board of Trustees Forrest County General Hospital Hattiesburg, Mississippi

Report on the Audit of the Financial Statements

Opinions

We have audited the financial statements of the business-type activities and fiduciary activities of Forrest County General Hospital (Hospital), a component unit of Forrest County, Mississippi, as of and for the years ended September 30, 2024 and 2023, and the related notes to the financial statements, which collectively comprise the Hospital's basic financial statements as listed in the table of contents.

In our opinion, based on our audits and the report of other auditors, the accompanying financial statements referred to above present fairly, in all material respects, the respective financial position of the business-type activities and the fiduciary activities of the Hospital as of September 30, 2024 and 2023, and the respective changes in net position and, where applicable, cash flows thereof for the years then ended in accordance with accounting principles generally accepted in the United States of America.

We did not audit the financial statements of the Forrest County General Hospital Pension Plan (Pension Plan), a fiduciary component unit of the Hospital, which represent 96%, 96%, and 96%, respectively, and 96%, 96%, and 97%, respectively, of the assets, net position, and additions of the fiduciary activities as of June 30, 2024 and 2023, and the respective changes in net position for the years then ended. Those statements were audited by other auditors, whose report has been furnished to us, and our opinion, insofar as it relates to the amounts included for the Pension Plan, are based solely on the reports of the other auditors.

Basis for Opinions

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS) and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. Our responsibilities under those standards are further described in the "Auditor's Responsibilities for the Audit of the Financial Statements" section of our report. We are required to be independent of the Hospital and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinions.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for 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.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Hospital's ability to continue as a going concern for 12 months beyond the financial statement date, including any currently known information that may raise substantial doubt shortly thereafter.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinions. Reasonable assurance is a high level of assurance but is not absolute assurance and, therefore, is not a guarantee that an audit conducted in accordance with GAAS and *Government Auditing Standards* will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS and Government Auditing Standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to
 fraud or error, and design and perform audit procedures responsive to those risks. Such procedures
 include examining, on a test basis, evidence regarding the amounts and disclosures in the financial
 statements.
- Obtain an understanding of internal control relevant to the audit 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 Hospital's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Hospital's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Required Supplementary Information

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis, pension, and other postemployment benefit information be presented to supplement the basic financial statements. Such information is the responsibility of management and, 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 GAAS, which consisted of inquiries of management about the methods of preparing the information and comparing the information for consistency with management's responses to our inquiries, the basic financial statements, and other knowledge we obtained during our audits 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.

Supplementary Information

Our audits were conducted for the purpose of forming opinions on the financial statements that collectively comprise the Hospital's basic financial statements. The Schedule of Surety Bonds for Officials and Employees is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements.

The Schedule of Surety Bonds for Officials and Employees has not been subjected to the auditing procedures applied in the audits of the financial statements and, accordingly, we do not express an opinion or provide any assurance on it.

Other Reporting Required by *Government Auditing Standards*

In accordance with *Government Auditing Standards*, we have also issued our report dated November 22, 2024 on our consideration of the Hospital's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts and grant agreements, and other matters. The purpose of that report is solely 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 effectiveness of the Hospital's 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 Hospital's internal control over financial reporting and compliance.

Forvis Mazars, LLP

Jackson, Mississippi November 22, 2024

Introduction

This management's discussion and analysis of the financial performance of Forrest County General Hospital (the Hospital) provides an overview of the Hospital's financial activities for the fiscal years that ended on September 30, 2024 and 2023. It should be read in conjunction with the accompanying financial statements of the Hospital. Unless otherwise indicated, amounts are in millions.

Financial Highlights

<u>2024</u>

- Total operating revenues increased 19.0% between 2024 and 2023. Current year changes impacting operating revenues include:
 - The Hospital's admissions increased in 2024 as a result of an increased demand for services.
 - The Hospital received a significant increase in payments from the Mississippi Hospital Advocacy Program (MHAP), as the net benefit with this program increased approximately \$66,800,000.
- Total operating expenses increased 6.1%. Current year changes impacting operating expenses include:
 - Salaries, wages, and employee benefits and contractual services increased collectively by 9.8%, primarily due to an increase in paid full-time employees and a one-time incentive paid to employees.

<u>2023</u>

- Total operating revenues increased 10.3% between 2023 and 2022. Current year changes impacting operating revenues include:
 - The Hospital's admissions increased in 2023 as a result of the ability to fully staff the Hospital to keep all beds open.
- Operating expenses increased 7.7%. Current year changes impacting operating expenses include:
 - Salaries, wages and employee benefits and contractual services increased collectively by 9.7%, primarily due to increase in contract and agency nurses and retention incentive paid to nurses.

Using This Annual Report

The Hospital's financial statements consist of three statements—a balance sheet; a statement of revenues, expenses, and changes in net position; and a statement of cash flows. The Hospital's financial statements and the financial statements of the fiduciary funds, which are comprised of a statement of fiduciary net position and a statement of changes in fiduciary net position, provide information about the activities of the Hospital, including resources held by the Hospital but restricted for specific purposes by creditors, contributors, grantors, or enabling legislation. The Hospital is accounted for as a business-type activity and presents its financial statements using the economic resources measurement focus and the accrual basis of accounting.

The Balance Sheet and Statement of Revenues, Expenses, and Changes in Net Position

One of the most important questions asked about any Hospital's finances is "Is the Hospital as a whole better or worse off as a result of the year's activities?" The balance sheet and the statement of revenues, expenses, and changes in net position report information about the Hospital's resources and its activities in a way that helps answer this question. These statements include all restricted and unrestricted assets, all liabilities, and all deferred inflows and outflows of resources using the accrual basis of accounting. Using the accrual basis of accounting means that all of the current year's revenues and expenses are taken into account regardless of when cash is received or paid.

These two statements report the Hospital's net position and changes in it. The Hospital's total net position—the difference between assets, liabilities and deferred inflows and outflows of resources—is one measure of the Hospital's financial health or financial position. Over time, increases or decreases in the Hospital's net position are an indicator of whether its financial health is improving or deteriorating. Other nonfinancial factors, such as changes in the Hospital's patient base, changes in legislation and regulations, measures of the quantity and quality of services provided to its patients, and local economic factors should also be considered to assess the overall financial health of the Hospital.

The Statement of Cash Flows

The statement of cash flows reports cash receipts, cash payments, and net changes in cash and cash equivalents resulting from four defined types of activities. It provides answers to such questions as where did cash come from, what was cash used for, and what was the change in cash and cash equivalents during the reporting period.

The Hospital's Net Position

The Hospital's net position is the difference between its assets, liabilities, and deferred inflows and outflows of resources reported in the balance sheet. The Hospital's net position increased by approximately \$92,400,000 (19.2%) in 2024 over 2023 and decreased by approximately \$6,200,000 (1.3%) in 2023 over 2022, as shown in Table A-1 and Table A-2. This increase was primarily due to the significant increase in net patient service revenue in 2024 that came from increased admissions, as well as additional MHAP funding received during the year.

	:	2024	2023		Dollar 2023 Change		Percentage Change
ASSETS AND DEFERRED OUTFLOWS OF RESOURCES			1				
Cash and other current assets	\$	243.2	\$	154.4	\$	88.8	57.5%
Patient accounts receivable, net	Ψ	66.3	Ψ	66.6	Ψ	(0.3)	-0.5%
Total current assets		309.5		221.0		88.5	40.0%
Investments and other assets		260.8		243.8		17.0	7.0%
Capital assets, net		283.3		272.4		10.9	4.0%
Lease assets, net		18.8		33.4		(14.6)	-43.7%
Subscription assets, net		7.1		6.8		0.3	4.4%
Deferred outflows of resources		19.9		23.5		(3.6)	-15.3%
Total assets and deferred							
outflows of resources	\$	899.4	\$	800.9	\$	98.5	12.3%
LIABILITIES AND DEFERRED INFLOWS							
OF RESOURCES							
Current liabilities	\$	101.7	\$	89.3	\$	12.4	13.9%
Long-term liabilities		203.7		193.3		10.4	5.4%
Long-term lease liabilities		11.8		25.9		(14.1)	-54.4%
Long-term subscription liabilities		2.7		3.6		(0.9)	-25.0%
Deferred inflows of resources		4.6		6.3		(1.7)	-27.0%
Total liabilities and deferred							
inflows of resources		324.5		318.4	1	6.1	1.9%
NET POSITION							
Net investment in capital assets		134.4		132.6		1.8	1.4%
Restricted		5.9		9.7		(3.8)	-39.2%
Unrestricted		434.6		340.2		94.4	27.7%
Total net position		574.9		482.5		92.4	19.2%
Total liabilities, deferred inflows of resources, and net position	\$	899.4	\$	800.9	\$	98.5	12.3%

Table A-1 Condensed Balance Sheets (in millions of dollars)

Table A-1 above shows cash and other current assets increased by approximately \$88,800,000 from 2023 to 2024, primarily due to the Hospital having \$39.3 million in additional cash in 2024 and \$50.8 million in short-term investments over 2023. Investments and other assets increased by approximately \$17,000,000 from 2023 to 2024, mostly due to increased market values of their held investments.

Long-term lease liabilities decreased approximately \$14,100,000 and lease assets decreased approximately \$14,600,000, due primarily to the purchase of the Highland Community Hospital Medical Office Building and Medical Plaza through issuance of a \$19,000,000 note payable that increased long term liabilities.

	2023	22 (As stated)	ollar nange	Percentage Change
ASSETS AND DEFERRED OUTFLOWS OF RESOURCES				
Cash and other current assets	\$ 154.4	\$ 153.7	\$ 0.7	0.5%
Patient accounts receivable, net	 66.6	 67.2	 (0.6)	-0.9%
Total current assets	 221.0	 220.9	0.1	0.0%
Investments and other assets	243.8	227.2	16.6	7.3%
Capital assets, net	272.4	272.9	(0.5)	-0.2%
Lease assets, net	33.4	32.9	0.5	1.5%
Subscription assets, net	6.8	5.7	1.1	19.3%
Deferred outflows of resources	 23.5	 25.5	 (2.0)	-7.8%
Total assets and deferred outflows of resources	\$ 800.9	\$ 785.1	\$ 15.8	2.0%
LIABILITIES AND DEFERRED INFLOWS OF RESOURCES				
Current liabilities	\$ 89.3	\$ 84.7	\$ 4.6	5.4%
Long-term liabilities	193.3	176.1	17.2	9.8%
Long-term lease liabilities	25.9	23.9	2.0	8.4%
Long-term subscription liabilities	3.6	3.1	0.5	16.1%
Deferred inflows of resources	 6.3	 8.6	 (2.3)	-26.7%
Total liabilities and deferred				
inflows of resources	 318.4	 296.4	22.0	7.4%
NET POSITION				
Net investment in capital assets	132.6	145.9	(13.3)	-9.1%
Restricted	9.7	6.3	`3.4 [´]	54.0%
Unrestricted	 340.2	 336.5	 3.7	1.1%
Total net position	482.5	 488.7	 (6.2)	-1.3%
Total liabilities, deferred inflows of resources, and net position	\$ 800.9	\$ 785.1	\$ 15.8	2.0%

 Table A-2

 Condensed Balance Sheets (in millions of dollars)

Table A-2 above show investments and other assets increased by approximately \$16,600,000 from 2022 to 2023 due to issuance of a note receivable from Forrest General Pine Grove Investment Fund.

Long-term liabilities increased approximately \$17,200,000, due primarily to the new market tax credit transaction entered into used for financing the new Pine Grove building construction. The remaining difference is due to increase in lease and subscription liabilities related to new lease agreements entered into during the year.

Table A-3Condensed Statements of Revenues, Expenses, and
Changes in Net Position (in millions of dollars)

	2	2024	2023	0	Dollar	Percentage Change
Operating Revenues						
Net patient service revenue	\$	760.3	\$ 639.0	\$	121.3	19.0%
Other		18.6	 15.6		3.0	18.6%
Total operating revenues	1	778.9	 654.6		124.3	19.0%
Operating Expenses						
Salaries, wages, and employee benefits		378.0	344.1		33.9	9.8%
Supplies and other expenses		296.6	289.9		6.7	2.3%
Depreciation and amortization		42.8	 42.4		0.4	1.0%
Total operating expenses		717.4	 676.4		41.0	6.1%
Operating Income (Loss)		61.5	(21.8)		83.3	382.1%
Nonoperating Revenues (Expenses), Net		28.7	 8.1		20.6	254.3%
Income (Loss) Before Capital Grants and Gifts		90.2	(13.7)		103.9	758.0%
Capital Grants and Gifts		2.2	7.5		(5.3)	-70.7%
Increase (Decrease) in Net Position		92.4	(6.2)		98.6	1578.4%
Beginning Net Position		482.5	488.7		(6.2)	-1.3%
Ending Net Position	\$	574.9	\$ 482.5	\$	92.4	19.2%

Table A-3 above shows net patient service revenue increased 19.0% from 2023 to 2024, due to an approximate \$66,800,000 increase in MHAP funding in 2024 from 2023.

Salaries, wages, and employee benefits increased \$33,900,000, due primarily to increased full-time employees from 2023 and an incentive bonus paid to employees.

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Table A-4Condensed Statements of Revenues, Expenses, and
Changes in Net Position (in millions of dollars)

		2023	2022 (As Restated)				Percentage Change
Operating Revenues							
Net patient service revenue	\$	639.0	\$	579.4	\$	59.6	10.3%
Other		15.6		12.6		3.0	23.8%
Total operating revenues		654.6		592.0		62.6	10.6%
1 3							
Operating Expenses							
Salaries, wages and employee benefits		344.1		315.1		29.0	9.2%
Supplies and other expenses		289.9		269.6		20.3	7.5%
Depreciation and amortization		42.4		43.5		(1.1)	-2.5%
Depreciation and amonization		42.4		40.0		(1.1)	-2.570
Total operating expanses		676.4		628.2		48.2	7.7%
Total operating expenses		070.4		020.2		40.Z	1.170
Operating Loss		(21.8)		(36.2)		14.4	-39.8%
Operating Loss		(21.0)		(30.2)		14.4	-39.070
Nonoperating Revenues, Net		8.1		(6.6)		14.7	-222.7%
Nonoperating Nevenues, Net		0.1		(0.0)		17.7	-222.170
Loss Before Capital Grants and Gifts		(13.7)		(42.8)		29.1	-68.1%
Loss Delore Capital Grants and Gitts		(10.7)		(42.0)		23.1	-00.170
Capital Grants and Gifts		7.5		_		7.5	0.0%
Supital Stants and Sints		1.0				1.0	0.070
Decrease in Net Position		(6.2)		(42.8)		36.6	-85.5%
Decrease in Net 1 Usition		(0.2)		(42.0)		00.0	-00.070
Beginning Net Position, As Restated		488.7		531.5		(42.8)	-8.1%
Degining Net Position, As Restated		+00.1		001.0		(72.0)	-0.170
Ending Net Position	\$	482.5	\$	488.7	\$	(6.2)	-1.3%
	Ψ	702.0	Ψ	700.7	Ψ	(0.2)	-1.070

Table A-4 above shows net patient service revenue increased 10.3% consistent from 2022 to 2023 due to increased admissions and surgeries.

Salaries, wages, and employee benefits increased \$29,000,000, due primarily to additional seasonal nurses and increased pension expense. Supplies, contractual services, repairs and maintenance, and other expenses increased by approximately \$20,300,000, due primarily to increases in contractual services utilized by the Hospital in order to sustain appropriate staffing and increased admissions and surgeries.

Capital Assets and Debt Financing

Capital Assets

The Hospital's investment in a variety of net capital assets was approximately \$283,300,000 as of September 30, 2024 and approximately \$272,400,000 as of September 30, 2023, as shown in Table A-5 below.

Table A-5 Capital Assets (in millions of dollars)

	2024		2023		22 (As stated)
Land and land improvements	\$	34.4	\$	35.3	\$ 33.2
Buildings		375.6		353.2	350.9
Furniture, fixtures and equipment		333.7		354.2	 344.5
Total capital assets		743.7		742.7	728.6
Accumulated depreciation		(463.0)		(492.7)	(466.8)
Construction in progress		2.6		22.4	 11.1
Capital assets, net	\$	283.3	\$	272.4	\$ 272.9

Debt Financing

The Hospital executed a note payable for the acquisition of Highland Community Hospital Medical Office Building and Medical Plaza in the amount of \$19,000,000, which was recorded as a lease liability prior to purchase.

For more detailed information regarding the Hospital's capital assets and debt financing, please refer to the notes to financial statements that follow this section.

Next Year's Operating Plan

The Hospital's Board of Trustees adopted the fiscal year 2025 operating plan in August 2024. The operating plan for 2025 assumes that inpatient admissions will decrease slightly from 2024. The plan includes an increase in net position of approximately \$24,000,000.

Contacting the Hospital's Financial Management

This financial report is designed to provide our patients, suppliers, taxpayers, and creditors with a general overview of the Hospital's finances and to show the Hospital's accountability for the money it receives. Questions about this report and requests for additional financial information should be directed to Administration by telephone at 601.288.7000.

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Balance Sheets September 30, 2024 and 2023

	2024	2023
ASSETS AND DEFERRED OUTFLOWS OF RESOURCES		
Current Assets		
Cash and cash equivalents	\$ 162,268,806	\$ 122,967,633
Restricted cash	714,424	5,092,747
Funds held by trustee for self-insurance funding – current	576,433	461,909
Short-term investments	52,174,623	1,261,475
Patient accounts receivable, net of allowance for doubtful accounts of \$81,934,000 in 2024 and \$72,773,000 in 2023	66 245 502	66 614 270
Other receivables	66,345,503 5,024,299	66,614,279 5,462,283
Supplies	10,324,568	10,340,060
Prepaid expenses and other	12,057,730	8,769,546
	12,007,700	0,703,040
Total Current Assets	309,486,386	220,969,932
Noncurrent Cash and Investments		
Funds held by trustee for self-insurance funding	2,673,679	2,742,429
Funds designated by the Board for discretionary purposes	221,986,664	207,366,481
Total Noncurrent Cash and Investments	224,660,343	210,108,910
Capital Assets, Net	283,285,570	272,368,205
Lease Assets, Net	18,793,773	33,421,974
Subscription Assets, Net	7,062,380	6,798,351
Other Assets	34,438,927	31,855,895
Net Other Postemployment Benefit Asset	1,767,666	1,834,112
Deferred Outflows of Resources	19,894,605	23,490,666
Total Assets and Deferred Outflows of Resources	\$ 899,389,650	\$ 800,848,045

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Balance Sheets September 30, 2024 and 2023

(Continued)

	2024	2023
LIABILITIES, DEFERRED INFLOWS OF RESOURCES,		
AND NET POSITION		
Current Liabilities		
Current installments of long-term debt	\$ 7,911,955	\$ 6,222,756
Current installments of lease liabilities	4,645,732	5,134,514
Current installments of subscription liabilities	2,911,397	2,170,417
Accounts payable	26,406,324	23,196,242
Salaries and wages payable	31,889,804	20,844,439
Payroll taxes and withholdings	5,082,297	4,163,377
Due to third-party payors	11,608,181	12,382,726
Other accrued expenses	11,266,728	15,171,128
Total Current Liabilities	101,722,418	89,285,599
Long-term debt	145,270,653	137,348,867
Lease liabilities	11,778,590	
Subscription liabilities	2,749,484	
Estimated insurance reserves and other	4,156,524	
Net pension liability	54,257,279	
Total Liabilities	319,934,948	312,090,575
Deferred Inflows of Resources	4,613,018	6,278,407
Net Position		
Net investment in capital assets Restricted	134,382,151	132,559,557
Other postemployment benefits	1,767,666	1,834,112
Capital expenditures and other	4,131,225	
Unrestricted		
Offesticled	434,560,642	340,183,200
Total Net Position	574,841,684	482,479,063
Total Liabilities, Deferred Inflows of Resources,		
and Net Position	\$ 899,389,650	\$ 800,848,045

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Statements of Revenues, Expenses, and Changes in Net Position Years Ended September 30, 2024 and 2023

	2024	2023
Operating Revenues		
Net patient service revenue, net of provision for uncollectible	* 700 005 044	A 000 000 450
accounts of \$66,869,000 in 2024 and \$61,493,000 in 2023 Other	\$ 760,335,814	\$ 639,028,152
Other	18,565,186	15,574,429
Total Operating Revenues	778,901,000	654,602,581
Operating Expenses		
Salaries, wages, and employee benefits	378,017,780	344,121,620
Supplies	160,033,226	149,443,613
Contractual services	91,962,643	96,304,233
Repairs, maintenance, and other	38,184,089	36,423,204
Insurance	3,731,252	4,262,942
Lease and rentals	2,823,615	3,496,005
Depreciation and amortization	42,767,833	42,369,597
Total Operating Expenses	717,520,438	676,421,214
Operating Income (Loss)	61,380,562	(21,818,633)
Nonoperating Revenues (Expenses)		
Net investment income	25,590,568	9,228,657
Interest expense	(5,735,955)	(5,254,796)
Noncapital grants and gifts received and other	10,626,390	5,967,415
Noncapital grants and gifts paid to others	(2,015,185)	(1,577,748)
Other	277,277	(222,021)
Total Nonoperating Revenues (Expenses)	28,743,095	8,141,507
Income (Loss) Before Capital Grants and Gifts	90,123,657	(13,677,126)
Capital Grants and Gifts	2,238,964	7,481,174
Increase (Decrease) in Net Position	92,362,621	(6,195,952)
Net Position, Beginning of Year	482,479,063	488,675,015
Net Position, End of Year	\$ 574,841,684	\$ 482,479,063

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Statements of Cash Flows Years Ended September 30, 2024 and 2023

	2024	2023
Operating Activities	* 755 077 000	• • • • • • • • • • • • • • • • • • •
Receipts from and on behalf of patients	\$ 755,877,969	\$ 644,487,187
Other cash received	18,301,364	13,812,206
Cash paid to suppliers and others	(296,216,540)	(305,095,182)
Cash paid to or on behalf of employees	(363,810,727)	(337,474,179)
Net Cash Provided by Operating Activities	114,152,066	15,730,032
Noncapital Financing Activities		
Noncapital grants and gifts received and other	10,626,390	5,900,320
Noncapital grants and gifts paid to others	(2,015,185)	(1,577,748)
Net Cash Provided by Noncapital Financing Activities	8,611,205	4,322,572
Capital and Related Financing Activities		
Proceeds from issuance of long-term debt	19,000,000	27,258,394
Principal paid on long-term debt	(8,268,674)	(12,092,602)
Interest paid on long-term debt	(5,768,377)	(5,026,196)
Principal payments received on leases receivable	534,873	842,895
Interest payments received on leases receivable	101,935	123,410
Principal paid on lease liabilities	(5,307,717)	(6,604,207)
Interest paid on lease liabilities	(784,116)	(1,120,711)
Principal paid on subscription liabilities	(3,201,056)	(3,090,198)
Interest paid on subscription liabilities	(227,128)	(174,727)
Purchase of capital assets and lease assets	(44,588,701)	(31,429,387)
Proceeds from receipt of capital grants	2,238,964	7,481,174
Net Cash Used in Capital and Related Financing Activities	(46,269,997)	(23,832,155)
Investing Activities		
Interest and dividends on investments	11,321,388	6,939,708
Proceeds from sale of investments	239,780,831	167,390,221
Purchase of investments	(287,216,589)	(119,546,826)
Net Cash Provided by (Used in) Investing Activities	(36,114,370)	54,783,103
Increase in Cash and Cash Equivalents	40,378,904	51,003,552
Cash and Cash Equivalents, Beginning of Year	137,420,602	86,417,050
Cash and Cash Equivalents, End of Year	\$ 177,799,506	\$ 137,420,602

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Statements of Cash Flows Years Ended September 30, 2024 and 2023

(Continued)

		2024		2023
Reconciliation of Operating Income (Loss) to Net Cash				
Provided by Operating Activities				
Operating income (loss)	\$	61,380,562	\$	(21,818,633)
Items not requiring cash				
Depreciation and amortization		42,767,833		42,369,597
Provision for uncollectible accounts		66,869,218		61,493,490
Changes in				
Patient accounts receivable, net		(66,600,442)		(60,898,947)
Accounts payable and accrued liabilities		11,339,096		1,020,233
Amounts due to and from third-party payors		(774,545)		4,070,821
Net pension liability		2,517,389		3,560,407
Net other postemployment benefit asset		66,446		2,015,703
Deferred inflows of resources - pension and other				
postemployment benefits		(1,094,791)		(1,381,458)
Deferred outflows of resources - pension and other				
postemployment benefits		3,424,448		1,811,205
Other assets and liabilities		(5,743,148)		(16,512,386)
		(0,000,000)		(**;**=;***)
Net Cash Provided by Operating Activities	\$	114,152,066	\$	15,730,032
Reconciliation of Cash and Cash Equivalents to the Balance She	ote			
Cash and cash equivalents in current assets	eis \$	162,983,230	\$	128,060,380
•	φ	102,903,230	φ	120,000,300
Cash and cash equivalents in funds internally designated		44 566 464		C 1EE 004
and held by trustee for capital acquisition		11,566,164		6,155,884
Cash and cash equivalents in funds held by trustee for		0.050.440		0.004.000
self-insurance funding		3,250,112		3,204,338
Total Cook and Cook Envirolente	•		•	407 400 000
Total Cash and Cash Equivalents	\$	177,799,506	\$	137,420,602
New year to be an effective of the second strain and the second st				
Noncash Investing, Capital, and Financing Activities	•	775 000	•	007 500
Capital asset purchases included in accounts payable	\$	775,686	\$	807,586
Lease obligation for leased assets	\$	4,616,369	\$	8,101,968
Lease termination due to purchase of Highland Community	*	(40,000,040)	*	
Hospital Medical Office Building	\$	(13,896,616)	\$	-
Lease obligation for subscription assets	\$	3,108,155	\$	4,183,520

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Statements of Fiduciary Net Position Years Ended September 30, 2024 and 2023

_	2024 Pension and Other Employee Benefit Trust Funds	2023 Pension and Other Employee Benefit Trust Funds
ASSETS	431.060	\$ 580,878
Cash and cash equivalents\$	431,060	\$ 580,878
Investment income		
Accrued income	483,729	1,103,649
Investments at fair value		
Money market mutual funds	32,278,236	54,229,135
Treasury bills	2,001,071	1,879,497
Mutual funds		
Equities	127,957,344	99,413,106
Fixed income	46,944,029	39,608,661
Investments at contract value	3,862,687	3,752,139
Total investments	213,043,367	198,882,538
Total Assets	213,958,156	\$ 200,567,065
NET POSITION Restricted for		
Pensions \$, ,	\$ 193,458,867
Postemployment benefits other than pensions	7,587,725	7,108,198
Total Net Position	213,958,156	\$ 200,567,065

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Statements of Changes in Fiduciary Net Position Years Ended September 30, 2024 and 2023

	2024 Pension and Other Employee Benefit Trust Funds	2023 Pension and Other Employee Benefit Trust Funds		
Additions Contributions				
Members	\$ 6,876,108	\$ 6,102,252		
Investment earnings Net increase (decrease) in fair value of investments	20,273,274	13,494,110		
Total Additions	27,149,382	19,596,362		
Deductions Benefits paid to participants or beneficiaries Administrative expense	13,373,258 385,033	11,876,156 388,497		
Total Deductions	13,758,291	12,264,653		
Net Increase in Fiduciary Net Position	13,391,091	7,331,709		
Fiduciary Net Position, Beginning of Year	200,567,065	193,235,356		
Fiduciary Net Position, End of Year	<u>\$ 213,958,156</u>	\$ 200,567,065		

Note 1. Nature of Operations and Summary of Significant Accounting Policies

Nature of Operations and Reporting Entity

Forrest County General Hospital (Hospital) is an acute care hospital established by Forrest County, Mississippi (County) as a special purpose government entity under Mississippi Code Section 41-13-15. The Hospital is owned by the County and per Mississippi statute is governed by a Board of Trustees appointed by the County Board of Supervisors. The Hospital is a component unit of Forrest County, Mississippi.

In addition to the Hattiesburg, Mississippi campus, the Hospital also operates the following locations:

- Highland Community Hospital (HCH), an acute care hospital located in Picayune, Mississippi, over which the Hospital obtained control on May 1, 2006;
- Walthall General Hospital (WGH), a critical access hospital located in Tylertown, Mississippi, over which the Hospital obtained control on October 1, 2010;
- Jefferson Davis General Hospital (JDGH), a critical access hospital and 60-bed nursing home located in Prentiss, Mississippi, over which the Hospital obtained control on July 1, 2011;
- Marion General Hospital (MGH), a hospital located in Columbia, Mississippi, over which the Hospital obtained control on January 1, 2012;
- Pearl River County Hospital and Nursing Home (PRH), a critical access hospital and 120-bed nursing home located in Poplarville, Mississippi, over which the Hospital obtained control on February 1, 2020; and
- Perry County General Hospital (PCH), a critical access hospital located in Richton, Mississippi, over which the Hospital obtained control on December 31, 2021. In April 2024, this hospital was designated a rural emergency hospital.

The accompanying financial statements also include entities that are blended component units of the Hospital. Those entities are:

- AAA Ambulance Service, Inc. (AAA), a provider of medical and emergency transportation services;
- Forrest General Healthcare Foundation, Inc. (Foundation), which raises funds for the benefit of the Hospital;
- South Mississippi Health Services, Inc., a property management organization;
- Forrest General Health Services, Inc., a management and consulting organization;
- Clean Earth, Inc., a waste removal organization;
- Forrest General Managed Care Services, Inc., which owns a physical hospital organization and managed care contracting entity;
- Forrest General Occupational Medicine Services, Inc., which owns an occupational medicine provider; and
- Pine Grove Public Benefit Corporation (PGPB), a nonprofit corporation created as a part of the New Market Tax Credit transaction used to finance the Pine Grove building construction entered into on February 8, 2023.

All entities have the same fiscal year as the Hospital. All entities have been, with the exception of the Foundation, presented as a blended component unit, because the Hospital is the sole corporate member of the entity or the entities are operated by the same, or substantially the same, governing board as the Hospital, and management of the Hospital has operational responsibility of the entities. The Foundation has been presented as a blended component unit because it is operated for the primary benefit of the Hospital. AAA issues separate audited financial statements, which can be obtained by writing to AAA Ambulance Service, Inc., 100 Rawls Springs Loop Road, Hattiesburg, Mississippi 39402, or calling 601.264.2211. The Foundation also issues separate financial statements, which can be obtained from the Hospital's management.

Fiduciary Funds

The Forrest County General Hospital Pension Plan (Pension Plan) and the Forrest County General Hospital Employee Health Benefit Plan (OPEB Plan) are single-employer defined benefit plans included in the financial statements as a pension and OPEB trust fiduciary fund. The Board of Trustees of the Hospital performs the governing duties of the Pension Plan and the OPEB Plan, as the Pension Plan and the OPEB Plan do not have a separate board and are fiscally dependent on the Hospital. The fiduciary fund statements are presented as of June 30, 2024 and 2023 for the Pension Plan and September 30, 2024 and 2023 for the OPEB Plan, each plan's fiscal year-end.

Basis of Accounting and Presentation

The financial statements of the Hospital have been prepared on the accrual basis of accounting using the economic resources measurement focus. Revenues, expenses, gains, losses, assets, liabilities, and deferred inflows and outflows of resources from exchange and exchange-like transactions are recognized when the exchange transaction takes place, while those from government-mandated or voluntary nonexchange transactions (principally federal and state grants) are recognized when all applicable eligibility requirements are met. Operating revenues and expenses include exchange transactions and program-specific (such as county appropriations), government-mandated, or voluntary nonexchange transactions. Government-mandated or voluntary nonexchange transactions that are not program specific, investment income, and interest on capital assets-related debt are included in nonoperating revenues and expenses. The Hospital first applies restricted net position when an expense or outlay is incurred for purposes for which both restricted and unrestricted net position are available.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America (GAAP) requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, deferred outflows and inflows of resources, 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.

Cash Equivalents

The Hospital considers all liquid investments with original maturities of three months or less to be cash equivalents. The Hospital does consider uninvested cash held in investment accounts as cash or cash equivalents. At September 30, 2024, cash equivalents consisted primarily of money market accounts with brokers, IntraFi Cash Service, and U.S. Treasury bills.

Patient Accounts Receivable

The Hospital reports patient accounts receivable for services rendered at net realizable amounts from third-party payors, patients, and others. The Hospital provides an allowance for uncollectible accounts based upon a review of outstanding receivables, historical collection information, and existing economic conditions.

Notes Receivable

Notes receivable are stated at the outstanding principal amount, net of allowance for uncollectible notes. The Hospital provides an allowance for uncollectible notes, which is based on review of outstanding receivables, historical collection information, and existing economic conditions. No allowance was recorded in 2024. Outstanding notes accrue interest based on the terms of the respective note agreements. A note receivable is considered delinquent when the debtor has missed three or more payments. At that time, the note is placed on nonaccrual status and interest accrual ceases and does not resume until the note is no longer classified as delinquent. Delinquent notes are written off based on individual credit evaluation and specific circumstances of the borrower.

The Hospital did not have any notes receivable that were considered delinquent for 2024. See Note 3 for further information.

Supplies

Supply inventories are stated at the lower of cost, or market. Costs are determined using the first-in, first-out (FIFO) method.

Designated Funds and Funds Held by Trustees

Designated funds and funds held by trustees include: (1) assets set aside by the Board of Trustees (currently for future plant replacement, expansion, and infrastructure maintenance) over which the Board of Trustees retains control and may, at its discretion, subsequently use for other purposes and (2) assets held by trustee under the self-insurance trust agreement.

Investments and Investment Income

Investments in U.S. Treasury, agency, and instrumentality obligations with a remaining maturity of one-year or less at time of acquisition, and in nonnegotiable certificates of deposit are carried at amortized cost. All other investments are carried at fair value. Fair value is determined using quoted market prices.

Investment income includes dividend and interest income, realized gains and losses on investments carried at other than fair value, and the net change for the year in the fair value of investments carried at fair value.

Capital Assets

Capital assets are recorded at cost, if purchased or, if donated, at acquisition value at the date of receipt. Depreciation is provided over the estimated useful life of each class of depreciable asset using the straight-line method. Major renewals and betterments are capitalized. Costs for repairs and maintenance are expensed when incurred. When assets are retired or otherwise disposed of, the cost and accumulated depreciation are removed from the accounts, and the gain or loss, if any, is included in nonoperating revenues (expenses) in the accompanying statements of revenues, expenses, and changes in net position.

All capital assets other than land are depreciated using these asset lives:

Land improvements	10 – 20 years
Leasehold improvements	3 – 20 years
Building	10 – 40 years
Fixed equipment	5 – 20 years
Movable equipment	3 – 7 years
Automobile equipment	3 – 5 years

Lease Assets

Lease assets are initially recorded at the initial measurement period of the lease liability, plus lease payments made at or before the commencement of the lease term, less any lease incentive received form the lessor at or before commencement of the lease, plus initial direct costs that are ancillary to place the asset into service. Lease assets are amortized on a straight-line basis over the shorter of the lease term, or the useful life of the underlying asset.

Subscription Assets

Subscription assets are initially recorded at the initial measurement of the subscription liability, plus subscription payments made at or before the commencement of the subscription-based information technology arrangement (SBITA) term, less any SBITA vendor incentives received from the SBITA vendor at or before the commencement of the SBITA term, plus capitalizable initial implementation costs. Subscription assets are amortized on a straight-line basis over the shorter of the SBITA term, or the useful life of the underlying IT asset.

Capital, Lease, and Subscription Asset Impairment

The Hospital recognizes the impairment of capital, lease, and subscription assets when events or changes in circumstances suggest that the service utility of the capital and lease asset may have significantly and unexpectedly declined. If such assets are no longer used, they are reported at the lower of carrying value or fair value. If such assets will continue to be used, the impairment loss is measured using the method that best reflects the diminished utility of the capital and lease assets. No asset impairment was recognized during the years ended September 30, 2024 or 2023.

Compensated Absences

The Hospital's employees accumulate vacation, holiday, and sick leave at varying rates, depending upon their years of continuous service and their payroll classification, subject to maximum limitations. Upon termination of employment, employees are paid all unused accrued vacation and holiday time at their regular rate of pay up to a designated maximum number of days. Since the employees' vacation and holiday time both accumulate and vest, an accrual for this liability, plus an additional amount for compensation-related payments such as social security and Medicare taxes, are included in salaries and wages payable in the accompanying balance sheets.

Risk Management

The Hospital is exposed to various risks of loss from torts; theft of, damage to, and destruction of assets; business interruption; errors and omissions; employee injuries and illnesses; natural disasters; and employee health, dental, and accident benefits. Commercial insurance coverage is purchased for claims arising from such matters other than medical malpractice at the Hospital's main and HCH campuses, workers' compensation at the Hospital's main campus, and employee health claims. Settled claims have not exceeded this commercial coverage in any of the three preceding years.

The Hospital is self-insured for a portion of its exposure to risk of loss from medical malpractice, workers' compensation, and employee health claims. Annual estimated provisions are accrued for the self-insured portion of these risks, which include an estimate of the ultimate costs for both reported claims and claims incurred but not yet reported.

Deferred Outflows/Inflows of Resources

Transactions not meeting the definition of an asset or liability that result in the consumption or acquisition of net position in one period that are applicable to future reporting periods are reported as deferred outflows of resources and deferred inflows of resources. At September 30, 2024 and 2023, deferred outflows of resources and deferred inflows of resources were comprised of the following:

	Deferred Outflows of Resources			
	2024	2023		
Deferred loss on refunding (Note 5) Deferred outflow - acquisitions Pension plan (Note 12) OPEB Plan (Note 13)	\$ 1,313,146 1,094,829 15,575,532 1,911,098	\$ 1,436,198 1,143,390 18,639,917 2,271,161		
	\$ 19,894,605	\$ 23,490,666		
	Deferred Inflow	s of Resources		
	2024	2023		
Gain on debt refunding of 2019 bonds (Note 5) Pension plan (Note 12) OPEB Plan (Note 13) Leases	\$ 29,221 - 2,255,215 2,328,582	\$ 38,369 66,355 3,283,655 2,890,028		
	\$ 4,613,018	\$ 6,278,407		

Defined Benefit Pension Plan

The Hospital has a single-employer defined benefit pension plan, Forrest County General Hospital Pension Plan, (Pension Plan). For purposes of measuring the net pension liability, deferred outflows of resources and deferred inflows of resources related to pension and pension expense, information about the fiduciary net position of the Pension Plan, and additions to/deductions from the Pension Plan's fiduciary net position have been determined on the same basis as they are reported by the Pension Plan. For this purpose, benefit payments (including refunds of employee contributions) are recognized when due and payable in accordance with the benefit terms. Investments are reported at fair value.

Defined Benefit Other Postemployment Benefit Plan

The Hospital has a single-employer defined benefit other postemployment benefit (OPEB) plan, Forrest County General Hospital Employee Health Benefit Plan (OPEB Plan). For purposes of measuring the net OPEB asset/liability, deferred outflows of resources, and deferred inflows of resources related to OPEB and OPEB expense, information about the fiduciary net position of the OPEB Plan and additions to/deductions from the OPEB Plan's fiduciary net position have been determined on the same basis as they are reported by the OPEB Plan. For this purpose, benefit payments are recognized when due and payable in accordance with the benefit terms. Investments are reported at fair value.

Split-Dollar Life Insurance Plan

The Hospital has a split-dollar life insurance plan for specified executives and physicians. The premium paid by the Hospital into the split-dollar life insurance plan, pursuant to Treasury regulations, are treated for tax and accounting purposes as loans receivable that are secured by the insurance policies and included in other assets on the balance sheets.

Lease Receivable

The Hospital is a lessor for noncancellable leases of certain buildings and recognizes a related lease receivable and a deferred inflow of resources. At the commencement of a lease, the Hospital initially measures the lease receivable at the present value of payments expected to be received during the lease term. Subsequently, the lease receivable is reduced by the principal portion of lease payments received. The deferred inflow of resources is initially measured as the initial amount of the lease receivable, adjusted for lease payments received at or before the lease commencement date. Subsequently, the deferred inflow of resources is recognized as revenue over the life of the lease term.

The Hospital monitors changes in circumstances that would require a remeasurement of its leases and will remeasure the lease receivable and deferred inflow of resources if certain changes occur that are expected to significantly affect the amount of the lease receivable.

Lease Liability

The Hospital is a lessee for noncancellable leases. The Hospital recognizes a lease liability and an intangible rightto-use lease asset (lease asset) in the financial statements. At the commencement of a lease, the Hospital initially measures the lease liability at the present value of payments expected to be made during the lease term. Subsequently, the lease liability is reduced by the principal portion of lease payments made. The lease asset is initially measured as the initial amount of the lease liability, adjusted for lease payments made at or before the lease commencement date, plus certain initial direct costs. Subsequently, the lease asset is amortized on a straight-line basis over its useful life.

The Hospital monitors changes in circumstances that would require a remeasurement of its leases and will remeasure the lease asset and liability if certain changes occur that are expected to significantly affect the amount of the lease liability.

Subscription Liability

The Hospital has entered into noncancellable contracts for subscription based intangible assets. The Hospital recognizes a subscription liability and a SBITA asset in the financial statements. At the commencement of a SBITA, the Hospital initially measures the subscription liability at the present value of payments expected to be made during the subscription term. Subsequently, the subscription liability is reduced by the principal portion of subscription payments made. The SBITA asset is initially measured as the initial amount of the subscription liability, adjusted for subscription payments made at or before the subscription commencement date, plus certain initial direct costs. Subsequently, the SBITA asset is amortized on a straight-line basis over its useful life.

The Hospital monitors changes in circumstances that would require a remeasurement of its subscription and will remeasure the SBITA asset and liability if certain changes occur that are expected to significantly affect the amount of the subscription liability.

Net Position

The Hospital's net position is classified into the components on its balance sheets as shown below:

- Net investment in capital assets consists of capital assets net of accumulated depreciation or amortization and reduced by outstanding balances of any borrowings or lease and subscription liabilities incurred to finance the purchase, use, or construction of those assets and any unpaid capital asset related invoices.
- Restricted expendable net position is made up of noncapital assets that must be used for a particular purpose as specified by creditors, grantors, or donors external to the Hospital.
- Unrestricted net position is the remaining net position that does not meet the definition of net investment in capital assets, leases and subscriptions, or restricted net position.

Net Patient Service Revenue

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. Net patient service revenue is reported at estimated net realizable amounts from patients, third-party payors, and others for services rendered and includes estimated retroactive revenue adjustments due to future audits, reviews, and investigations.

Retroactive adjustments are considered in the recognition of revenue on an estimated basis in the period the related services are rendered, and such amounts are adjusted in future periods as adjustments become known or as years are no longer subject to such audits, reviews, and investigations.

Charity Care

The Hospital provides care to patients who meet certain criteria under its charity care policy, without charge or at amounts less than its established rates. Because the Hospital does not pursue collection of amounts determined to qualify as charity care, they are not reported as revenue.

Income Taxes

The Hospital, including HCH, WGH, JDGH, MGH, PRH, PCH, and PGPB, are classified as a governmental entity under the laws of Mississippi and is exempt from income taxes, but also carries an exemption from income taxes under Internal Revenue Code Section 501(c)(3). South Mississippi Health Services, Inc., Forrest General Health Services, Inc., Forrest General Healthcare Foundation, Inc., and AAA Ambulance Service, Inc. are tax-exempt organizations under Section 501(a) of the Internal Revenue Code as organizations described in Section 501(c)(3), whereby only unrelated business income is taxable. Forrest General Managed Care Services, Inc. and Forrest General Occupational Medicine Services, Inc. are nonprofit organizations subject to tax. Clean Earth, Inc. is subject to federal and state income taxes. Income taxes related to unrelated business income and the taxable entities are not significant to the Hospital.

Note 2. Deposits, Investments, and Investment Income

The Hospital's deposits and investments are summarized below as of September 30, 2024 and 2023:

	2024	2023
Cash and cash equivalents	\$ 137,667,868	\$ 88,083,812
Restricted cash	714,424	5,092,747
Money market mutual funds	24,600,938	34,883,821
Short-term investments		
U.S. Treasury securities	50,834,406	-
Certificates of deposit	1,340,217	1,261,475
Designated funds and funds held by trustees		
Cash and cash equivalents	14,816,276	9,360,222
U.S. agency securities	34,735,109	16,659,596
U.S. Treasury securities	24,379,931	34,677,925
State municipal securities	20,925,685	23,744,121
Corporate debt securities	38,991,362	39,517,873
Pooled investment securities	91,388,413	86,611,082
	225,236,776	210,570,819
	\$ 440,394,629	\$ 339,892,674

The Hospital is required to provide additional disclosures of investment risks related to credit risk, concentration of credit risk, custodial credit risk, and interest rate risk associated with cash deposits and investments. These disclosures are reflected below.

Credit Risk

Credit risk is the risk that an issuer of an investment will not fulfill its obligation to the holder of the investment. This is measured by the assignment of a rating by a nationally recognized statistical rating organization (NRSRO). The Hospital's investment policy, which conforms to Mississippi state law, does not specifically limit investment in securities based on an NRSRO credit rating, but the policy does designate authorized investments by type. These authorized investments, within established guidelines, are limited to securities of the U.S. government or its agencies, U.S. government obligations, U.S. and Mississippi municipal bonds, interest-bearing accounts and certificates of deposits of financial institutions, open-end or closed-end management type investment company or investment trust, and an investment trust consisting of pooled or commingled funds of other hospitals.

Unless there is information to the contrary, obligations of the U.S. government are not considered to have credit risk and do not require disclosure of credit quality.

A summary of cash and investments is as follows:

September 30, 2024	Fair Value	Percentage	Credit Rating
Cash and cash equivalents, operating funds Cash and cash equivalents, designated and	\$ 137,667,868	31.26%	Exempt from disclosure
held by trustee	14,816,276	3.36%	Exempt from disclosure
Restricted cash	714,424	0.16%	Exempt from disclosure
Money market mutual funds	24,600,938	5.59%	Exempt from disclosure
Certificates of deposit	1,340,217	0.30%	Exempt from disclosure
U.S. agency securities	34,735,109	7.89%	Exempt from disclosure
U.S. Treasury securities	75,214,337	17.08%	Exempt from disclosure
State municipal securities	20,925,685	4.75%	Exempt from disclosure
Corporate debt securities	38,991,362	8.85%	Aa1 - Ba2
Pooled investment securities	91,388,413	20.76%	**
	\$ 440,394,629	100.00%	
September 30, 2023	Fair Value	Percentage	Credit Rating
Cash and cash equivalents, operating funds	\$ 88,083,812	25.92%	Exempt from disclosure
Cash and cash equivalents, designated and			
held by trustee	9,360,222	2.75%	Exempt from disclosure
Restricted cash	5,092,747	1.50%	Exempt from disclosure
Money market mutual funds	34,883,821	10.26%	Aaa
Certificates of Deposit	1,261,475	0.37%	Exempt from disclosure
U.S. agency securities	16,659,596	4.90%	Exempt from disclosure
U.S. Treasury securities	34,677,925	10.20%	Exempt from disclosure
State municipal securities	23,744,121	6.99%	Exempt from disclosure
Corporate debt securities	39,517,873	11.63%	Aa1 - Ba2
Pooled investment securities	86,611,082	25.48%	**
	\$ 339,892,674	100.00%	

**The pooled investment securities represent the Hospital's investment in the Mississippi Hospital Association investment pool. Although open to all hospitals, the pool is structured to comply with the provisions of Section 27-105-365 of the Mississippi Code Annotated (1972), which establishes guidelines for depository and investment activity for all county and municipal hospital funds. Accordingly, the pooled investment securities are limited to U.S. government and U.S. agencies, certain investment and trust funds, and commercial paper and corporate notes and bonds that have an "A" rating or better.

Concentration of Credit Risk

The Hospital's investment policy, in accordance with state statute, restricts investments in U.S. agencies to 50% of total investments. Investments in open-end and closed-end management type investment companies and investment trusts are limited to 20% of total investments.

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Notes to Financial Statements September 30, 2024 and 2023

Concentration of credit risk is defined as the risk of loss attributed to the magnitude of a government's investment in a single issuer (an investment that represents more than 5% of the market value of the total investment portfolio). At September 30, 2024, approximately 6%, 9%, and 9% of the Hospital's investment portfolio concentrations were invested in Federal Home Loan Bank, bonds of the State of Mississippi, and Federal National Mortgage Association, respectively. At September 30, 2023, approximately 2%, 6%, and 4% of the Hospital's investment portfolio concentrations were invested in Federal Home Loan Bank, bonds of the State of Mississippi, and Federal National Mortgage Association, respectively.

Custodial Credit Risk

Custodial credit risk for deposits is the risk that, in the event of the failure of a depository financial institution, the Hospital will not be able to recover its deposits or will not be able to recover collateral securities that are in the possession of an outside party. The custodial credit risk for investments is the risk that, in the event of the failure of the counterparty to a transaction, the Hospital will not be able to recover the value of its investment or collateral securities that are in the possession of another party.

The Hospital's formal investment policy is governed by and in conformity with Section 27-105-365 of the Mississippi Code Annotated (1972), which establishes the following guidelines for depository and investment activity:

- In accordance with statutes of the State of Mississippi, the Hospital maintains its deposits at financial institutions authorized by the Board of Trustees.
- The collateral for public entity deposits in financial institutions is held in the name of the State Treasurer of Mississippi under a program established by the Mississippi State Legislature and is governed by Section 27-105-5 of the Mississippi Code Annotated (1972). Under this program, the Hospital's funds are protected through a collateral pool administered by the State Treasurer.
- Financial institutions holding deposits of public funds must pledge securities as collateral against these deposits.
- In the event of a financial institution's failure, securities pledged by that institution would be liquidated by the State Treasurer to replace the public deposits not covered by the Federal Deposit Insurance Corporation (FDIC).

Investments in external investment pools are not exposed to custodial credit risk because their existence is not evidenced by securities that exist in physical or book entry form. At September 30, 2024 and 2023, deposits and investments requiring custodial credit risk disclosure totaled approximately \$130,499,000 and \$120,672,000, respectively, and were exposed to credit risk by approximately \$2,456,000 and \$2,328,000, respectively.

Interest Rate Risk

Interest rate risk is the risk that changes in market interest rates will adversely affect the fair value of an investment. Generally, the longer the maturity of an investment the greater the sensitivity of its fair value to changes in market interest rates.

Interest rate risk inherent in the portfolio is measured by monitoring the segmented time distribution of the investments in the portfolio.

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Notes to Financial Statements September 30, 2024 and 2023

The following is a summary of the Hospital's segmented time distribution investment maturities in years by investment type as of September 30, 2024 and 2023.

				Ye	ars			
September 30, 2024	 Fair Value		< 1	 1 – 5		6 – 10	More	e than 10
Money market mutual funds	\$ 24,600,938	\$	24,600,938	\$ -	\$	-	\$	_
U.S. agency securities	34,735,109		4,173,300	29,065,844		1,495,965		-
U.S. Treasury securities	\$ 75,214,337		53,794,196	21,420,141		-		-
State municipal securities	20,925,686		4,377,654	10,018,963		6,529,069		-
Corporate debt securities	38,991,362		3,364,325	 26,708,002		8,919,035		-
	\$ 194,467,432	\$	90,310,413	\$ 87,212,950	\$	16,944,069	\$	_
				Vo	ars			
				le	ars			
September 30, 2023	 Fair Value	. <u> </u>	< 1	 1 – 5	ars 	6 – 10	More	e than 10
September 30, 2023 Money market mutual funds	\$ Fair Value 34,883,821	\$	< 1 34,883,821	\$ 	\$	6 – 10 -	More \$	e than 10
	\$ 	\$		\$ 		6 – 10 		e than 10 - -
Money market mutual funds	\$ 34,883,821	\$	34,883,821	\$ 1 – 5		-		e than 10 - - -
Money market mutual funds U.S. agency securities	\$ 34,883,821 16,659,596	\$	34,883,821 4,046,423	\$ 1 – 5 12,366,934		-		e than 10 - - - -
Money market mutual funds U.S. agency securities U.S. Treasury securities	\$ 34,883,821 16,659,596 34,677,925	\$	34,883,821 4,046,423 8,692,534	\$ 1 – 5 12,366,934 25,985,391		- 246,239 -		e than 10 - - - - -

The Hospital has \$91,388,413 and \$86,611,081 in 2024 and 2023, respectively, in pooled investment securities whose underlying investments are primarily U.S. government and U.S. agency debt securities with varying maturities as determined by the pool; however, the average maturity is less than five years.

Investment Income (Loss)

Investment income (loss) for the years ended September 30, 2024 and 2023 consisted of:

		2024	 2023
Interest and dividend income Realized losses on investments, net Unrealized gains on investments, net	\$	13,609,361 (625,337) 12,606,544	\$ 9,070,518 (1,558,125) 1,716,264
	_\$	25,590,568	\$ 9,228,657

Note 3. Notes Receivable

The Hospital entered into an agreement on February 8, 2023 to lend \$12,412,900 to Forrest General Pine Grove IF, LLC (Investment Fund). Interest of 1.0% is accrued on the note receivable balance from the date of issuance through maturity, with interest-only payments beginning March 2023 and paid quarterly through December 2030, then \$131,290 quarterly through maturity December 30, 2057. The note was secured by the Investments Fund's 99.9% membership in SCC Sub-CDE 18, LLC and PBCIF Sub-CDE8, LLC.

Note 4. Capital, Lease, and Subscription Assets

Capital assets and related activity for the year ended September 30, 2024 consist of the items shown below.

	Balance October 1, 2023	ransfers in and Additions		ansfers Out and etirements	Se	Balance ptember 30, 2024
Capital assets not being depreciated Land Construction in progress	\$ 18,415,461 22,441,248	\$ 371,327 41,825,259	\$	- (61,649,092)	\$	18,786,788 2,617,415
Total book value of capital assets						
not being depreciated	 40,856,709	 42,196,586		(61,649,092)		21,404,203
Capital assets being depreciated						
Land improvements	16,871,110	495,942		(1,797,617)		15,569,435
Leasehold improvements	6,476,348	-		(72,845)		6,403,503
Buildings	353,187,458	45,534,926		(23,171,394)		375,550,990
Fixed equipment	57,074,315	3,410,754		(1,926,533)		58,558,536
Movable equipment	284,437,089	13,116,890		(35,934,273)		261,619,706
Automotive equipment	 6,193,469	 1,526,397		(524,476)		7,195,390
Total book value of capital assets						
being depreciated	 724,239,789	 64,084,909		(63,427,138)		724,897,560
Less accumulated depreciation for						
Land improvements	12,690,961	701,794		(1,797,617)		11,595,138
Leasehold improvements	4,600,681	232,585		(72,845)		4,760,421
Buildings	205,443,881	13,647,229		(23,171,394)		195,919,716
Fixed equipment	40,124,443	3,096,275		(1,926,533)		41,294,185
Movable equipment	225,068,783	15,468,539		(35,928,165)		204,609,157
Automotive equipment	 4,799,544	 562,508	1	(524,476)		4,837,576
Total accumulated depreciation	 492,728,293	 33,708,930		(63,421,030)		463,016,193
Capital assets being depreciated,						
net	 231,511,496	 30,375,979		(6,108)		261,881,367
Capital assets, net	\$ 272,368,205	\$ 72,572,565	\$	(61.655,200)	\$	283,285,570

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Notes to Financial Statements September 30, 2024 and 2023

Capital assets and related activity for the year ended September 30, 2023 consist of the items shown below:

		Balance October 1, 2022	٦	Fransfers in and Additions		ransfers Out and Retirements	S	Balance eptember 30, 2023
Capital assets not being depreciated Land	\$	16,539,222	\$	1,876,239	\$		\$	18,415,461
Construction in progress	Ψ	11,048,604	Ψ	30,207,598	Ψ	(18,814,954)	Ψ	22,441,248
Total book value of capital assets								
not being depreciated		27,587,826		32,083,837		(18,814,954)		40,856,709
Capital assets being depreciated								
Land improvements		16,692,044		179,066		-		16,871,110
Leasehold improvements		5,506,513		969,835		-		6,476,348
Buildings		350,937,188		2,286,148		(35,878)		353,187,458
Fixed equipment		55,236,267		1,838,048		-		57,074,315
Movable equipment		277,932,572		12,321,080		(5,816,563)		284,437,089
Automotive equipment		5,752,092		641,912		(200,535)		6,193,469
Total book value of capital assets								
being depreciated		712,056,676		18,236,089		(6,052,976)		724,239,789
Less accumulated depreciation for								
Land improvements		11,992,488		698,473		-		12,690,961
Leasehold improvements		4,404,489		196,192		-		4,600,681
Buildings		193,127,154		12,352,605		(35,878)		205,443,881
Fixed equipment		37,028,177		3,096,266		-		40,124,443
Movable equipment		215,781,123		15,104,223		(5,816,563)		225,068,783
Automotive equipment		4,446,002		554,077		(200,535)		4,799,544
Total accumulated depreciation		466,779,433		32,001,836		(6,052,976)		492,728,293
Capital assets being depreciated,								
net		245,277,243		(13,765,747)		-		231,511,496
Capital assets, net	\$	272,865,069	\$	18,318,090	\$	(18,814,954)	\$	272,368,205

	Balance October 1, 2023	Additions	Terminations	Balance September 30, 2024
Lease assets being amortized				
Building	\$ 32,212,069	\$ 324,693	\$ (18,012,911)	\$ 14,523,851
Equipment	12,048,458	2,826,518	(1,499,578)	13,375,398
Vehicles	1,152,929	1,465,158	(301,514)	2,316,573
	45,413,456	4,616,369	(19,814,003)	30,215,822
Accumulated amortization				
Building	8,073,449	2,190,103	(4,572,245)	5,691,307
Equipment	3,168,158	2,823,637	(1,499,578)	4,492,217
Vehicles	749,875	790,164	(301,514)	1,238,525
	11,991,482	5,803,904	(6,373,337)	11,422,049
Lease assets, net	\$ 33,421,974	\$ (1,187,535)	\$ (13,440,666)	\$ 18,793,773

Lease assets activity for the year ended September 30, 2024 follows:

Lease assets activity for the year ended September 30, 2023 follows:

	Balance October 1, 2022	Additions	Terminations	Balance September 30, 2023
Lease assets being amortized	¢ 00.000.044	¢ 0.470.700	¢ (0.070.005)	¢ 00.040.000
Building	\$ 32,302,644	\$ 2,179,720	\$ (2,270,295)	\$ 32,212,069
Equipment	9,049,633	5,922,248	(2,923,423)	12,048,458
Vehicles	1,656,278		(503,349)	1,152,929
	43,008,555	8,101,968	(5,697,067)	45,413,456
Accumulated amortization				
Building	6,480,252	3,863,492	(2,270,295)	8,073,449
Equipment	2,913,510	3,178,071	(2,923,423)	3,168,158
Vehicles	729,204	524,020	(503,349)	749,875
			<u>.</u>	
	10,122,966	7,565,583	(5,697,067)	11,991,482
Lease assets, net	\$ 32,885,589	\$ 536,385	<u>\$ </u>	\$ 33,421,974

Subscription assets activity for the year ended September 30, 2024 was:

	2024					
	Beginning Balance	Additions	Disposals	Ending Balance		
Subscription assets	\$ 11,116,901	\$ 3,470,459	\$ (1,763,944)	\$ 12,823,416		
Less accumulated amortization Subscription assets	4,318,550	3,206,430	(1,763,944)	5,761,036		
Subscription assets, net	\$ 6,798,351	\$ 264,029	\$-	\$ 7,062,380		

Subscription assets activity for the year ended September 30, 2023 was:

	2023									
	Beginning Balance	Additions	Disposals	Ending Balance						
Subscription assets	\$ 8,627,705	\$ 4,183,520	\$ (1,694,324)	\$ 11,116,901						
Less accumulated amortization Subscription assets	2,886,440	3,126,434	(1,694,324)	4,318,550						
Subscription assets, net	\$ 5,741,265	\$ 1,057,086	<u>\$ -</u>	\$ 6,798,351						

Note 5. Long-term Debt

A summary of long-term obligation transactions for the Hospital for the years ended September 30, 2024 and 2023 follows:

Description	Balance October 1, 2023		Additions		Retired		Amortization		Balance September 30, 2024		Due Within One Year	
Series 2019A (A)	\$	63,530,000	\$	-	S	\$-	\$	-	\$	63,530,000	\$	-
Series 2019B (B)		21,790,000		-		(2,000,000)		-		19,790,000		2,105,000
BancorpSouth (C)		14,888,703		-		(1,408,176)		-		13,480,527		1,444,391
BancorpSouth (D)		6,543,086		-		(1,353,206)		-		5,189,880		1,390,179
BancorpSouth (E)		4,902,350		-		(1,202,371)		-		3,699,979		1,235,164
Trustmark (F)		537,512		-		(264,464)		-		273,048		273,048
Trustmark (G)		5,734,254		-		(1,470,457)		-		4,263,797		704,173
NMTC debt (H)		16,570,000		-		-		-		16,570,000		-
Trustmark (I)		-		19,000,000		(570,000)		-		18,430,000		760,000
Unamortized bond												
premium		9,075,718		-		-		(1,120,341)		7,955,377		-
	\$	143,571,623	\$	19,000,000	\$	(8,268,674)	\$	(1,120,341)	\$	153,182,608	\$	7,911,955

Description	Balance October 1, 2022		October 1,		 Retired		Amortization		Balance September 30, 2023		Due Within One Year	
Series 2019A (A)	\$	63,530,000	\$	-	\$ -	\$	-	\$	63,530,000	\$	-	
Series 2019B (B)		23,505,000		-	(1,715,000)		-		21,790,000		2,000,000	
BancorpSouth (C)		16,254,571		-	(1,365,868)		-		14,888,703		1,401,801	
BancorpSouth (D)		7,861,157		-	(1,318,071)		-		6,543,086		1,353,206	
BancorpSouth (E)		6,073,446		-	(1,171,096)		-		4,902,350		1,202,374	
Trustmark (F)		794,933		-	(257,421)		-		537,512		265,375	
Trustmark (G)		1,311,006		10,688,394	(6,265,146)		-		5,734,254		-	
NMTC debt (H)		-		16,570,000	-		-		16,570,000		-	
Unamortized bond												
premium		10,249,225		-	 -		(1,173,507)		9,075,718		-	
	\$	129,579,338	\$	27,258,394	\$ (12,092,602)	\$	(1,173,507)	\$	143,571,623	\$	6,222,756	

(A) On July 25, 2019, the Hospital issued \$63,530,000 in Series 2019A Revenue Refunding Bonds bearing interest at 3.00% to 5.00% to advance refund \$70,000,000 of Series 2010 Build America Revenue Bonds and to pay certain expenses incurred in connection with the issuance of the bonds. The total bond proceeds were \$72,786,065, resulting in an issuance premium of \$9,256,065. The net proceeds of \$71,950,737 (after payment of \$835,328 in underwriting fees, insurance, and other issuance costs) were used to purchase U.S. government securities. Those securities were deposited in an irrevocable trust with an escrow agent to provide for all future debt service payments on the Series 2010 Build America Revenue Bonds. As a result, the 2010 Series Bonds are considered to be defeased, and the liability for those bonds has been removed from the Hospital's balance sheets.

The advance refunding resulted in a difference between the reacquisition price and the net carrying amount of the old debt of \$1,950,737. This difference, reported in the accompanying financial statements as a deferred outflow of resources, is being charged to interest expense through the year

2039 using the effective interest method. The Hospital completed the advance refunding to reduce its total debt service payments over the next 20 years by \$18,442,057 and to obtain an economic gain between the present values of the old and new debt service payments of \$12,081,158. The unamortized loss on refinancing of the debt was \$1,313,146 and \$1,436,198 at September 30, 2024 and 2023, respectively, and is included in the balance sheets as a deferred outflow of resources.

(B) On October 3, 2019, the Hospital issued \$26,365,000 in Series 2019B Revenue Refunding Bonds bearing interest at 5.00% to advance refund \$30,155,000 of Series 2009 Revenue Refunding Bonds (Series 2009 Bonds) and to pay certain expenses incurred in connection with the issuance of the bonds. The total bond proceeds were \$31,080,518, resulting in an issuance premium of \$4,853,935. The net proceeds of \$30,826,061 (after payment of \$392,875 in underwriting fees, insurance, and other issuance costs) were used to purchase U.S. government securities. Those securities were deposited in an irrevocable trust with an escrow agent to provide for all future debt service payments on the Series 2009 Bonds. As a result, the Series 2009 Bonds are considered to be defeased, and the liability for those bonds has been removed from the Hospital's balance sheets. The unamortized gain on refunding of the debt was \$29,221 and \$38,369 at September 30, 2024 and 2023, respectively, and is included in the balance sheets as a deferred inflow of resources.

The advance refunding resulted in a difference between the reacquisition price and the net carrying amount of the old debt of \$82,519. This difference, reported in the accompanying financial statements as a deferred inflow of resources, is being charged to interest expense through the year 2029 using the effective interest method. The Hospital completed the advance refunding to reduce its total debt service payments over the next 10 years by \$4,090,717 and to obtain an economic gain between the present values of the old and new debt service payments of \$4,455,890.

- (C) Promissory note dated January 25, 2018, bearing interest at 3.55%; collateralized by Hospital revenues; due from February 20, 2018 to January, 20, 2033. On May 3, 2021, this note was refinanced, changing the interest rate to 2.87%. The current principal balance at the time of refinancing and maturity date remain the same as stated in the original note.
- (D) Promissory note dated April 9, 2018, bearing interest at 4.17%; collateralized by real property; due from May 9, 2018 to April 9, 2028. On May 3, 2021, this note was refinanced, changing the interest rate to 2.63%. The current principal balance at the time of refinancing and maturity date remain the same as stated in the original note.
- (E) Promissory note dated August 31, 2018, bearing interest at 4.57%; collateralized by real property; due from September 30, 2018 to August 31, 2027. On May 3, 2021, this note was refinanced, changing the interest rate to 2.63%. The current principal balance at the time of refinancing and maturity date remain the same as stated in the original note.
- (F) Promissory note dated September 17, 2020, bearing interest at 3.05%; collateralized by real property; due from September 17, 2020 to September 17, 2025.
- (G) Promissory note for construction of Pine Grove building which can be drawn up to \$12,000,000 dated June 13, 2022, bearing interest at 3.64%; collateralized by real property; due from June 15, 2024 to June 13, 2029.
- (H) The Hospital executed loan agreements on February 8, 2023 that provide borrowings of \$8,730,000 from SCC Sub-CDE 18, LLC and \$7,840,000 from PBCIF Sub-CDE 8, LLC. The loans financed the construction of a new Pine Grove medical office building. The notes were secured by security interest and lien on the property.

Under the terms of the loan agreements, the loans had an interest rate of 1.18614%, payable quarterly in arrears to the lenders. The Hospital is not permitted to prepay any portion of the principal of the loans until the seventh anniversary date.

Under the terms of the loan agreements, the Hospital had certain compliance requirements, including compliance reporting and maintaining its status as a qualified active low-income community business (QALICB), as defined by the Internal Revenue Code. After seven years, the Investment Fund owner can execute its put option to have the Hospital acquire its interest in the Investment Fund, as defined in the put/call agreement.

(I) On December 21, 2023, the Hospital executed a loan agreement for the Highland Community Hospital Medical Office Building and Medical Plaza for \$19,000,000, which was previously leased by the Hospital. The loan has an interest rate of 6.35%; collateralized by real property; due from December 21, 2023 to December 21, 2028.

The loan agreements for the Series 2019 Bonds contain certain terms and restrictive covenants typical of such agreements, including maintenance of certain debt service coverage and liquidity levels and limitations on additional indebtedness. The agreements also contain provisions that, in the event of default, allow the trustee to accelerate payments of the entire principal amount to be immediately due and payable.

Debt service requirements associated with the Hospital's long-term debt, excluding unamortized premiums, are shown below.

Years Ending September 30	Principal	Interest	Total
2025	\$ 7,911,955	\$ 5,785,901	\$ 13,697,856
2026	7,892,083	5,483,071	13,375,154
2027	8,156,343	5,170,606	13,326,949
2028	8,600,842	4,796,567	13,397,409
2029	23,592,016	3,496,229	27,088,245
2030 - 2034	35,942,394	12,024,943	47,967,337
2035 - 2039	34,484,470	4,877,795	39,362,265
2040 - 2044	9,854,194	683,750	10,537,944
Thereafter	8,792,934	772,063	9,564,997
	\$ 145,227,231	\$ 43,090,925	\$ 188,318,156

Note 6. Leases Receivable

The Hospital leases a portion of its office space to various third parties, the terms of which expire 2024 through 2037. Revenue recognized under lease contracts during the years ended September 30, 2024 and 2023 was \$1,280,061 and \$1,500,378, respectively, which includes both lease revenue and interest. The Hospital's current and noncurrent lease receivable are included on the accompanying balance sheets in other receivables and other assets, respectively, for the years ended 2024 and 2023.

The following is a schedule by year of receipts under the leases as of September 30, 2024:

	P	rincipal	 Interest
2025	\$	521,858	\$ 81,858
2026		526,784	62,671
2027		544,027	43,256
2028		357,776	25,919
2029		404,041	46,781
2030-2034		130,217	 9,669
	<u>\$</u>	2,484,703	\$ 270,154

Note 7. Lease Liabilities

The Hospital leases equipment, office, and clinic space, the terms of which expire in various years through 2034. Variable payments based upon the use of the underlying asset are not included in the lease liability because they are not fixed in substance.

During the years ended September 30, 2024 and 2023, the Hospital recognized approximately \$2,823,615 and \$3,496,005, respectively, of rental expense for variable payments not previously included in the measurement of the lease liability.

The following is a schedule by year of payments under the leases as of September 30, 2024.

Year Ending September 30,	ı (Fotal to be Paid	 Principal	 Interest
2025 2026	\$	5,294,189 4,380,895	\$ 4,645,732 3,919,825	\$ 648,457 461,070
2027		2,871,704	2,559,837	311,867
2028 2029		2,144,154 1,563,267	1,937,124 1,437,858	207,030 125,409
2030 - 2034		2,017,968	 1,923,946	 94,022
	\$	18,272,177	\$ 16,424,322	\$ 1,847,855

Asset Type	Balance October 1, 2023	Additions	Payments	Balance September 30, 2024
Building Equipment Vehicles	\$ 22,018,670 8,578,904 414,712	\$	\$ (15,610,235) (2,680,801) (913,297)	\$ 6,733,128 8,724,621 966,573
Total lease liability	\$ 31,012,286	\$ 4,616,369	\$ (19,204,333)	\$ 16,424,322
	Balance			Balance September 30,
Asset Type	October 1, 2022	Additions	Payments	2023
Asset Type Building Equipment Vehicles	October 1, 2022 \$ 22,861,016 5,709,895 943,614	Additions \$ 2,179,720 5,922,248 -	Payments \$ (3,022,066) (3,053,239) (528,902)	•

Lease liabilities activity for the years ended September 30 was:

The Hospital terminated approximately \$13,897,000 of lease liabilities due to acquisition of the HCH Medical Office Building and Medical Plaza.

Note 8. Subscription Liabilities

The Hospital has various SBITAs, the terms of which expire in various years through 2028. Variable payments of certain subscriptions are based upon the Consumer Price Index (Index). The subscriptions were measured based upon the Index at commencement of the SBITA term. Variable payments based upon the use of the underlying asset are not included in the subscription liabilities because they are not fixed in substance.

The following is a schedule by year of payments under the SBITAs as of September 30, 2024:

Year Ending	ı و	otal to Be Paid	 Principal	 Interest
2025	\$	3,081,071	\$ 2,911,397	\$ 169,674
2026 2027		2,042,985 706,705	1,972,147 679,734	70,838 26,971
2028		103,284	 97,603	 5,681
	\$	5,934,045	\$ 5,660,881	\$ 273,164

Subscription liabilities activity for the years ended September 30 was:

Asset Type	Balance October 1, 2023	Additions	Payments	Balance September 30, 2024
Subscription liabilities	\$ 5,753,782	\$ 3,108,155	\$ (3,201,056)	\$ 5,660,881
Asset Type	Balance October 1, 2022	Additions	Payments	Balance September 30, 2023
Subscription liabilities	\$ 5,271,725	\$ 3,572,255	\$ (3,090,198)	\$ 5,753,782

Note 9. Other Accrued Expenses

Other accrued expenses consist of the following:

	 2024	 2023
Patient credit balances	\$ 5,226,948	\$ 9,131,213
Reserve for incurred but not reported employee health claims	1,730,000	1,183,000
Malpractice - current	576,433	461,909
Workers' compensation - current	830,000	1,090,000
Revenue received in advance	613,037	660,848
Accrued interest expense	1,104,657	1,141,886
Other	 1,185,653	1,502,272
	\$ 11,266,728	\$ 15,171,128

Note 10. Net Patient Service Revenue

The Hospital has agreements with governmental and other third-party payors that provide for reimbursement to the Hospital at amounts different from its established rates. Contractual adjustments under third-party reimbursement programs represent the difference between the Hospital's billings at established rates for services and amounts reimbursed by third-party payors. A summary of the basis for reimbursement with major third-party payors follows.

Medicare

Substantially all acute care services rendered to Medicare program beneficiaries are paid at prospectively determined rates. These rates vary according to patient classification systems that are based on clinical, diagnostic, and other factors. Certain other Medicare reimbursement items are paid based on other retroactive-determination methodologies. WGH, JDGH, PRH, and PCH are classified as critical access hospitals and are reimbursed based on the reasonable costs of providing care to Medicare program beneficiaries. Effective April

2024, PCH became classified as a Rural Emergency Hospital (REH). As an REH, PCH will receive a fixed monthly payment and 5% add-on for outpatient services. PCH will no longer provide inpatient services. MGH and HCH are not classified as critical access hospitals but are receiving payments based on reasonable costs through the Rural Community Hospital Demonstration Project. The demonstration project ends on September 30, 2027 for HCH and September 30, 2026 for MGH. The Hospital is reimbursed for retroactively determined items at tentative rates, with final settlement determined after submission of annual cost reports by the Hospital and audits by the Medicare fiscal intermediary. Revenue from the Medicare program (including Medicare managed care) accounted for approximately 49% and 55% of the Hospital's net patient service revenue for the years ended September 30, 2024 and 2023, respectively.

Medicaid

Inpatient and certain outpatient services rendered to Medicaid program beneficiaries are generally paid based upon prospective reimbursement methodologies established by the State of Mississippi. Inpatient services are reimbursed using a prospective-payment system based on All Patient Refined Diagnosis Related Groups (APR-DRG). Outpatient services are reimbursed using an Ambulatory Payment Classification (APC) methodology, similar to the Medicare payment model. The Hospital is reimbursed for retroactively determined items at tentative rates, with final settlement determined after submission of annual cost reports by the Hospital and audits by the State of Mississippi Medicaid Program. Revenue from the Medicaid program (including Medicaid managed care) accounted for approximately 26% and 22% of the Hospital's net patient service revenue for the years ended September 30, 2024 and 2023, respectively. This includes revenue from the programs described below.

Beginning July 1, 2015, Upper Payment Limit (UPL) payments were phased out, and the Division of Medicaid (DOM) implemented the Mississippi Hospital Access Payment (MHAP) program. The program is administered by DOM through the Mississippi CAN coordinated care organizations (CCOs). The CCOs subcontract with hospitals throughout the state for distribution of MHAP for the purpose of protecting patient access to hospital care. In December 2023, The Centers for Medicare and Medicaid Services (CMS) approved an amendment to the existing MHAP program, whereby hospitals would be reimbursed near the average commercial rate for Medicaid managed care reimbursement retroactive to July 1, 2023, the beginning of the state fiscal year. The net benefit recognized for the Hospital associated with the MHAP program was approximately \$104,500,000 and \$37,700,000 for the years ended September 30, 2024 and 2023, respectively. The Hospital also participates in a voluntary disproportionate share program (DSH) available to certain qualifying hospitals in the state Medicaid program. The net program cost for the Hospital was approximately \$2,006,000 in 2024 due to estimated recoupment liabilities related to the 2021-2023 state DSH audits, and a net benefit of \$4,266,000 in 2023. Both MHAP and DSH are recognized as net patient service revenue in the accompanying statements of revenues, expenses, and changes in net position.

The Medicaid programs described above are subject to review and scrutiny by both the Mississippi legislation and CMS, and the programs could be modified or terminated based on new legislation or regulation in future periods.

The Hospital has also entered into other reimbursement arrangements with third-party payors that provide for payments under various methodologies, including prospectively determined rates per discharge, per diem amounts, and discounts from established charges.

The composition of net patient service revenue follows:

	2024	2023
Gross patient service revenue Provisions for	\$ 2,349,743,618	\$ 2,213,417,407
Contractual, charity, and other adjustments Bad debts	(1,522,538,586) (66,869,218)	(1,512,895,765) (61,493,490)
Net patient service revenue	\$ 760,335,814	\$ 639,028,152

Note 11. Charity Care

The Hospital maintains records to identify and monitor the level of charity care it provides. These records include the amount of charges foregone for services and supplies furnished under its charity care policy, the estimated cost of those services and supplies, and equivalent service statistics. The level of charity care provided for 2024 and 2023 is shown in the table below.

The estimated cost to provide charity care is based on a ratio of overall operating expenses to gross patient service revenue applied to charges foregone under established rates.

	 2024	 2023
Charges foregone, based on established rates Estimated costs and expenses incurred to provide	\$ 28,309,466	\$ 30,915,318
charity care	\$ 8,387,590	\$ 9,177,412
Equivalent percentage of charity care patients to all patients served	1.20%	1.40%

Note 12. Pension Plans

Defined Contribution Pension Plan

The Hospital has a defined contribution pension plan that allows for employee and employer contributions. The plan was established on July 1, 2011, and only full-time employees hired after that date are eligible to receive Hospital contributions to the plan. Hospital contributions were approximately \$2,785,000 and \$2,402,000 during 2024 and 2023, respectively. The Hospital's contributions are vested after five years of service. Forfeitures are used to offset future employer contributions. At September 30, 2024 and 2023, forfeitures were approximately \$438,000 and \$244,000, respectively. Employee contributions were approximately \$6,382,000 and \$5,671,000 during 2024 and 2023, respectively.

Defined Benefit Pension Plan

The Hospital contributes to the Forrest County General Hospital Pension Plan (Pension Plan), a single-employer defined benefit pension plan, which was frozen effective July 1, 2011, thereby excluding new entrants into the Pension Plan. The Pension Plan's fiscal year ends June 30. Actuarial valuations are performed annually on July 1.

The Pension Plan is administered by the Hospital's Human Resources Support Department, whose work on the Pension Plan is overseen by the Pension Committee of the Hospital's Board of Trustees. The Hospital retains Capital Research and Planning in an advisory capacity for the Pension Plan's matters. The Pension Plan issues a financial report available for all participants that includes financial statements and required supplementary information. The report may be obtained at www.mshospitaltransparency.com when issued or by writing the administration of the Hospital at P. O. Box 16389, Hattiesburg, MS 39404 or calling 601.288.7000.

Benefits Provided

The Pension Plan provides retirement and disability benefits and death benefits to plan members and beneficiaries. Benefit provisions are established by the Hospital's Board of Trustees. Retirement benefits for employees are calculated at 1.5% times average monthly compensation times years of service. Death benefits are equal to the single sum present value of the vested accrued benefit otherwise payable at the normal retirement date. Disability benefits are equal to the vested accrued benefit payable at normal retirement age or an actuarially reduced benefit paid immediately.

The terms of the Pension Plan provide for annual cost-of-living adjustments to each employee's retirement allowance subsequent to the employee's retirement date. The annual adjustments for cost-of-living are 2.5% per year.

The employees covered by the Pension Plan at June 30, 2024 and 2023 follow:

	2024	2023
Active participants	656	715
Vested former employees	454	453
Retirees and beneficiaries	712	670
	1,822	1,838

Contributions

The Hospital's Board of Trustees has the authority to establish and amend the contribution requirements of the Hospital. The Board of Trustees establishes rates based on an actuarially determined rate recommended by an independent actuary. The actuarially determined rate is the estimated amount necessary to finance the costs of benefits earned by employees during the year, with an additional amount to finance any unfunded accrued liability. Pension Plan members are not required or permitted to contribute any portion of their salary to fund the Pension Plan. The Hospital is required to contribute to the Pension Plan at actuarially determined rates at a percentage of annual covered payroll. For the fiscal year ended September 30, 2024, the Hospital contributed \$6,876,110 (or 14% of covered payroll) to the Pension Plan. For the fiscal year ended September 30, 2023, the Hospital contributed \$6,102,252 (or 12% of covered payroll) to the Pension Plan.

Net Pension Liability

The Hospital's net pension liability was measured as of June 30, 2024 and 2023, as reported as of September 30, 2024 and 2023, respectively, and the total pension liability used to calculate the net pension liability was determined by an actuarial valuation as of July 1, 2024 and 2023, respectively.

The total pension liability in the June 30, 2024 and 2023 actuarial valuations was determined using the following actuarial assumptions, applied to all periods included in the measurement:

Inflation	2.5%
Salary increases	2.5% - 5.0% for 2024, based on age, including inflation
	1.5% - 4.0% for 2023, based on age, including inflation
Ad hoc cost-of-living adjustments	2.5% per year
Investment rate of return	7.25%, net of pension plan investment expense, including inflation

In 2024 and 2023, mortality rates were based on 125% of the PubG-2010 Total Dataset Mortality Table, adjusted with the MP-2021 Improvement Scale.

The Hospital has not performed a recent experience study. Due to the frozen nature of the Pension Plan, the benefits of an experience study are estimated by the actuary to be minimal.

The long-term expected rate of return on pension plan investments was based primarily on historical returns on pension plan assets, adjusted for changes in target portfolio allocations, and recent changes in long-term interest rates based on publicly available information.

The target allocation and best estimates of rates of return for each major asset class are summarized in the following table.

	Target Allocations				
Asset Class	Tier One Near-Term Sub Portfolio	Tier Two Mid-Term Sub Portfolio	Tier Three Long-term Sub Portfolio	Tactical Asset Allocation Portfolio	
Cash/fixed income Equities	60.00% 40.00%	40.00% 60.00%	0.00% 100.00%	40.00% 60.00%	
Total	100.00%	100.00%	100.00%	100.00%	

Asset Class	Long-Term Expected Rate of Return (Arithmetic Mean)
	June 30, 2024 and 2023
Cash/fixed income	5.00% - 5.50%
Equities	7.00% - 10.00%

Discount Rate

The discount rate used to measure the total pension liability was 7.25% for both years ended June 30, 2024 and 2023. The projection of cash flows used to determine the discount rate assumed that Hospital contributions will be made at rates equal to the actuarially determined contribution rates. Based on those assumptions, the Pension Plan's fiduciary net position was projected to be available to make all projected future benefit payments of current active and inactive employees. Therefore, the long-term expected rate of return on pension plan investments was applied to all periods of projected benefit payments to determine the total pension liability.

Changes in the total pension liability, plan fiduciary net position, and the net pension liability follow:

	2024		
	Total Pension Liability (a)	Plan Fiduciary Net Position (b)	Net Pension Liability (a) - (b)
Balance, beginning of year	\$ 245,198,757	\$ 193,458,867	\$ 51,739,890
Changes for the year			
Service cost	1,461,633	-	1,461,633
Interest	17,421,912	-	17,421,912
Experience gains	3,546,588	-	3,546,588
Change in assumptions	5,715,132	-	5,715,132
Contributions	-	6,876,108	(6,876,108)
Net investment loss	-	13,803,295	(13,803,295)
Difference between expected and actual returns	-	5,308,558	(5,308,558)
Benefit payments	(12,716,312)	(12,716,312)	-
Administrative expense		(360,085)	360,085
Net changes	15,428,953	12,911,564	2,517,389
Balance, end of year	\$ 260,627,710	\$ 206,370,431	\$ 54,257,279

	Total Pension Liability (a)	2023 Plan Fiduciary Net Position (b)	Net Pension Liability (a) - (b)
Balance, beginning of year	\$ 234,567,878	\$ 186,388,395	\$ 48,179,483
Changes for the year Service cost Interest Experience gains Contributions Net investment income Benefit payments Administrative expense	1,593,431 16,705,067 3,825,557 - - (11,493,176) -	- - - 12,825,954 (11,493,176) (364,558)	1,593,431 16,705,067 3,825,557 (6,102,252) (12,825,954) - 364,558
Net changes	10,630,879	7,070,472	3,560,407
Balance, end of year	\$ 245,198,757	\$ 193,458,867	<u>\$ 51,739,890</u>

The net pension liability of the Hospital has been calculated using a discount rate of 7.25%. The following presents the net pension liability using a discount rate 1% higher and 1% lower than the current rate:

		Current Discount Rate		
	1% Decrease 7.25% 1% Increas			
Hospital's net pension liability	\$ 83,851,875	\$ 54,257,279	\$ 29,169,219	

Pension Expense and Deferred Outflows of Resources and Deferred Inflows of Resources Related to Pensions

For the years ended September 30, 2024 and 2023, the Hospital recognized pension expense of \$12,391,525 and \$13,050,790, respectively. At September 30, 2024 and 2023, the Hospital reported deferred outflows of resources and deferred inflows of resources related to pensions from the following sources:

	2024			
	0	Deferred outflows of Resources	Defe Inflov Resou	vs of
Differences between expected and actual experience Changes in assumptions	\$	4,805,876 3,925,372	\$	-
Net difference between projected and actual earnings on pension plan investments Hospital's contributions made subsequent to the		5,276,349		-
measurement date of the net pension liability		1,567,935		
	\$	15,575,532	\$	

	2023		
	Deferred Outflows of Resources	Deferred Inflows of Resources	
Differences between expected and actual experience Changes in assumptions Net difference between projected and actual	\$ 4,490,079 192,139	\$ - 66,355	
earnings on pension plan investments Hospital's contributions made subsequent to the	12,389,764	-	
measurement date of the net pension liability	1,567,935		
	\$ 18,639,917	\$ 66,355	

At both September 30, 2024 and 2023, the Hospital reported \$1,567,935 as deferred outflows of resources related to pensions resulting from Hospital contributions subsequent to the measurement date and prior to year-end that will be recognized as a reduction of the net pension liability in future periods. Other amounts reported as deferred

outflows of resources and deferred inflows of resources at September 30, 2024 related to pensions will be recognized in pension expense as follows:

2025 2026 2027 2028	1	4,830,781 1,203,312 (964,782) (1,061,714)
	<u>\$ 1</u>	4,007,597

Note 13. Other Postemployment Benefit Plan

Plan Description

The Hospital contributes to the Forrest County General Hospital Employee Health Benefit Plan (OPEB Plan), a single-employer defined benefit other postemployment benefit (OPEB) plan sponsored and administered by the Hospital. The OPEB Plan provides medical and drug benefits to eligible retirees and their dependents. Benefit provisions are contained in the Plan Document and were established and can be amended by action of the Hospital's governing body. The Hospital does not issue a publicly available financial report that includes financial statements and required supplementary information for the OPEB Plan.

Benefits Provided

The OPEB Plan provides medical and drug benefits to eligible retirees and their dependents. Benefits are provided through a third-party insurer. Monthly contributions are required by retirees who are eligible for coverage. The Hospital pays for costs in excess of required retiree contributions.

Monthly contributions required by retirees depend on the service period at time of retirement and the type of coverage (single or family). Employees are eligible to retire and receive medical benefits under the OPEB Plan if their age plus years of service are greater than or equal to 70 (Rule of 70). Qualifying retirees may only participate in the medical plans offered to active employees until the earlier of age 65, or the date the retiree becomes Medicare eligible. Employees covered by the benefit terms as of the measurement date of September 30, 2024 and 2023 were as follows:

	2024	2023
Actives (covered)	647	699
Retirees (covered)	43	41

The following table summarizes the monthly contribution rates for employees retiring on or after January 1, 2024:

2024 Coverage Options	Pla	an A	Pla	an B	Pla	n C
Single	\$	208	\$	282	\$	329
Retiree + 1 child	\$	313	\$	427	\$	510
Retiree + 2 children	\$	383	\$	536	\$	654
Retiree + spouse	\$	385	\$	516	\$	641
Family	\$	444	\$	591	\$	743

Plans A, B, and C represent three health plan options available to all Hospital employees and vary based on the amount of deductibles and copays required for covered services.

Only employees retiring before calendar year 2010 are eligible to receive the reduced retiree rates if they qualify under the Rule of 70. Effective January 1, 2010, only those employees aged 59 or older with 30 years of service with the Hospital (the 59 and 30 eligibility requirement) will be offered health coverage at the reduced retiree rates. Retirees that do not meet the 59 and 30 eligibility requirement may participate in the OPEB Plan, but must pay the COBRA rate.

Contributions

The Hospital's governing body has the authority to establish and amend the contribution requirements of the Hospital and active employees. The governing body establishes rates based on an actuarially determined rate recommended by an independent actuary. The actuarially determined rate is the estimated amount necessary to finance the costs of benefits earned by employees during the year, with an additional amount to finance any unfunded accrued liability. For the years ended September 30, 2024 and 2023, the Hospital contributed \$0 to the OPEB Plan.

Net OPEB Assets

The Hospital's net OPEB assets of \$1,767,666 and \$1,834,112 were measured as of September 30, 2023 and 2022, respectively, for the years ended September 30, 2024 and 2023, respectively, and the total OPEB asset used to calculate the net OPEB asset was determined by actuarial valuations as of October 1, 2023 and 2022. Due to the significance of favorable claims activity and changes in actuarial assumptions, management had an actuarial valuation completed as of October 1, 2023. There were no other changes between the measurement date of the net OPEB asset and the Hospital's reporting date that are expected to have a significant effect on the net OPEB asset.

Given that the actuarial valuation and the measurement date are different, the total OPEB asset was rolled forward using generally accepted actuarial roll forward methods, including entry age liability adjusted for excise tax, plus entry age normal cost and reduced by expected benefit payments. All amounts were adjusted for interest.

The total OPEB asset in the October 1, 2022 and 2023 actuarial valuations was determined using the following actuarial assumptions, applied to all periods included in the measurement, unless otherwise specified:

Inflation	2.5%
Salary increases	3.0%
Healthcare cost trend rates	6.50% for 2022, decreasing uniformly to 5.20% over 3 years, to an ultimate rate of 3.94%
	7.00% for 2023, decreasing uniformly to 5.60% over 3 years, to an ultimate rate of 4.04%
Investment rate of return	6.0%, net of OPEB Plan investment expense, including inflation
Retirees' share of benefit-related costs	Retirees meet the requirement for enhanced retirement in the retiree medical plan if retiring on or after age 59 with 30 years of service. These retirees pay a monthly premium that is estimated to be 22% (Plan A), 29% (Plan B), or 34% (Plan C) of the expected claims paid under the plan.

Mortality rates were based on 125% of the PubG-2010 Total Dataset Mortality Table, with Mortality Improvement Scale MP-2021.

The Hospital has not performed a recent experience study. Due to the small number of retirees within the OPEB Plan, the benefits of an experience study are estimated by the actuary to be minimal.

The long-term expected rate of return on the OPEB Plan investments was based primarily on historical returns on OPEB Plan assets, adjusted for changes in target portfolio allocations and recent changes in long-term interest rates based on publicly available information. The target allocation for each major asset class is 60% equities and 40% fixed income. The beginning estimate of rates of return for each major asset class is 7.00% to 8.00% annually for equities and 5.00% for fixed income.

Discount Rate

The discount rate used to measure the total OPEB liability was 6.0% at October 1, 2022 and 2023. The projection of cash flows used to determine the discount rate assumed that Hospital contributions will be made at rates equal to the actuarially determined contribution rates. Based on those assumptions, the OPEB Plan's fiduciary net position was projected to be available to make all projected OPEB payments for current active and inactive employees. Therefore, the long-term expected rate of return on OPEB Plan investments was applied to all periods of projected benefit payments to determine the total OPEB liability.

Changes in the Net OPEB Asset/Liability

Changes in the total OPEB liability, OPEB Plan fiduciary net position, and the net OPEB asset/liability are:

	2024			
	Total OPEB Fiduciary Liability Net Position (a) (b)		Net OPEB Asset/Liability (a) - (b)	
Balance, beginning of year	\$ 5,012,849	\$ 6,846,961	\$ (1,834,112)	
Changes for the year				
Service cost	26,039	-	26,039	
Interest	279,354	-	279,354	
Difference between expected and				
actual experience	200,311	-	200,311	
Change in actuarial assumptions	204,960	-	204,960	
Net investment income	-	668,157	(668,157)	
Benefit payments	(382,981)	(382,981)	-	
Plan administrative expenses	<u> </u>	(23,939)	23,939	
Net changes	327,683	261,237	66,446	
Balance, end of year	\$ 5,340,532	\$ 7,108,198	\$ (1,767,666)	

	Total OPEB Liability (a)	Liability Net Position		
Balance, beginning of year	\$ 4,571,729	\$ 8,421,544	\$ (3,849,815)	
Changes for the year				
Service cost	27,441	-	27,441	
Interest	250,383	-	250,383	
Difference between expected and				
actual experience	577,590	-	577,590	
Change in actuarial assumptions	11,828	-	11,828	
Net investment income	-	(1,142,673)	1,142,673	
Benefit payments	(426,122)	(426,122)	-	
Plan administrative expenses		(5,788)	5,788	
Net changes	441,120	(1,574,583)	2,015,703	
Balance, end of year	\$ 5,012,849	\$ 6,846,961	\$ (1,834,112)	

Sensitivity of the Net OPEB Asset to Changes in the Discount Rate and Healthcare Cost Trend Rates

The net OPEB asset of the Hospital has been calculated using a discount rate of 6.0%. The following presents the net OPEB asset using a discount rate 1% higher and 1% lower than the current discount rate.

	1% Decrease		Current Trend		1% Increase	
	5.00%		6.00%		7.00%	
Hospital's net OPEB asset	\$	(1,230,668)	\$	(1,767,666)	\$	(2,241,703)

The net OPEB asset of the Hospital has been calculated using healthcare cost trend rates of 6.50% to grade uniformly to 5.20% over a three-year period. The following presents the net OPEB asset using healthcare cost trend rates 1% higher and 1% lower than the current healthcare cost trend rates:

	6.00% to	7.00% to	8.00% to
	4.60% Over 3	5.60% Over 3	6.60% Over 3
	Years and	Years and	Years and
	Following the	Following the	Following the
	Getzen Model	Getzen Model	Getzen Model
	Thereafter	Thereafter	Thereafter
Hospital's net OPEB asset	\$ (2,314,064)	\$ (1,767,666)	\$ (1,145,601)

OPEB Credit and Deferred Outflows of Resources and Deferred Inflows of Resources Related to OPEB

For the years ended September 30, 2024 and 2023, the Hospital recognized OPEB credit of \$601,996 and \$773,196, respectively. At September 30, 2024 and 2023, the Hospital reported deferred outflows of resources and deferred inflows of resources related to OPEB from the following sources:

	20	24
	Deferred Outflows of Resources	Deferred Inflows of Resources
 Net difference between projected and actual earnings on OPEB Plan investments Difference between expected and actual experience Change in assumptions Hospital's contributions made subsequent to the measurement date of the net OPEB liability 	\$ 981,004 506,803 423,291 - <u>\$ 1,911,098</u>	\$ 626,027 1,607,288 21,900 - \$ 2,255,215
	20	23
	Deferred Outflows of Resources	Deferred Inflows of Resources
Net difference between projected and actual earnings on OPEB Plan investments Difference between expected and actual experience Change in actuarial assumptions Hospital's contributions made subsequent to the measurement date of the net OPEB liability	\$ 1,344,100 462,072 464,989 -	\$ 619,136 2,635,319 29,200 -

At both September 30, 2024 and 2023, the Hospital reported \$0 as deferred outflows of resources related to OPEB resulting from Hospital contributions subsequent to the measurement date and prior to year-end that will be recognized as a reduction of the net OPEB asset/liability at both October 1, 2023 and 2022. Other amounts reported as deferred outflows of resources and deferred inflows of resources at September 30, 2024 related to OPEB will be recognized in OPEB expense as follows:

2025 2026 2027 2028		\$ (568,741) (143,658) 341,138 27,144
2020	-	\$ (344,117)

OPEB Plan's Fiduciary Net Position

At the September 30, 2023 and 2022 measurement dates, trust assets were comprised of the following:

		2023	 2022
Cash and cash equivalents	\$	2,571,379	\$ 476,483
Tweedy Browne Global Value		1,107,069	998,405
Vanguard Total International Stock Index Fund		391,675	-
Vanguard Russell 2000 Index Fund		512,165	601,178
Vanguard Russell 1000 Index Fund		1,056,347	1,111,927
Vanguard Value Index Fund		635,313	557,306
PIMCO Foreign Bond Funds		-	878,216
American Funds Emerging Markets Bond Fund		233,165	-
Vanguard Total Bond Market Index Fund		539,725	2,216,769
Accrued income		61,360	 6,677
	_\$	7,108,198	\$ 6,846,961

Note 14. Pension and Other Postemployment Benefit Plan Financial Statements

The following tables include financial information for the Pension and OPEB Plans as of June 30, 2024 and 2023, and September 30, 2024 and 2023, respectively.

Fiduciary Activities – Statements of Fiduciary Net Position

			2024		
	 Pension June 30				Pension and her Employee enefit Trust Funds
ASSETS					
Cash and cash equivalents	\$ -	\$	431,060	\$	431,060
Investment income					
Accrued income	 437,291		46,438		483,729
Investments at fair value					
Money market mutual funds	32,219,818		58,418		32,278,236
Treasury bills	-		2,001,071		2,001,071
Mutual funds Equities	123,897,289		4,060,055		127,957,344
Fixed income	45,953,346		990,683		46,944,029
Investments at contract value	 3,862,687		-		3,862,687
Total investments	 205,933,140		7,110,227		213,043,367
Total Assets	\$ 206,370,431	\$	7,587,725	\$	213,958,156
NET POSITION					
Restricted for					
Pensions	\$ 206,370,431	\$	-	\$	206,370,431
Postemployment benefits other than pension	 -		7,587,725		7,587,725
Total Net Position	\$ 206,370,431	\$	7,587,725	\$	213,958,156

			2023		
	 Pension OPEB June 30 September 30		Pension and Other Employee Benefit Trust Funds		
ASSETS					
Cash and cash equivalents	\$ -	\$	580,878	\$	580,878
Investment income					
Accrued income	 1,042,289		61,360		1,103,649
Investments at fair value Money market mutual funds Treasury bills Mutual funds Equities Fixed income	54,118,131 - 95,710,537 38,835,771		111,004 1,879,497 3,702,569 772,890		54,229,135 1,879,497 99,413,106 39,608,661
Investments at contract value	 3,752,139				3,752,139
Total investments	 192,416,578		6,465,960		198,882,538
Total Assets	\$ 193,458,867	\$	7,108,198	\$	200,567,065
NET POSITION Restricted for Pensions Postemployment benefits other than pension	\$ 193,458,867 -	\$	7,108,198	\$	193,458,867 7,108,198
Total Net Position	\$ 193,458,867	\$	7,108,198	\$	200,567,065

		2024			
	Pension June 30	OPEB September 30	Pension and Other Employee Benefit Trust Funds		
Additions					
Contributions Members Investment earnings	\$ 6,876,108	\$-	\$ 6,876,108		
Net increase in fair value of investments	19,111,853	1,161,421	20,273,274		
Total additions	25,987,961	1,161,421	27,149,382		
Deductions Benefits paid to participants or beneficiaries Administrative expense	12,716,312 	656,946 24,948	13,373,258 385,033		
Total deductions	13,076,397	681,894	13,758,291		
Net Increase in Fiduciary Net Position	12,911,564	479,527	13,391,091		
Fiduciary Net Position, Beginning of Year	193,458,867	7,108,198	200,567,065		
Fiduciary Net Position, End of Year	\$ 206,370,431	\$ 7,587,725	\$ 213,958,156		

Fiduciary Activities – Statements of Changes in Fiduciary Net Position

		2023	
	Pension June 30	OPEB September 30	Pension and Other Employee Benefit Trust Funds
Additions			
Contributions Members Investment earnings	\$ 6,102,252	\$-	\$ 6,102,252
Net decrease in fair value of investments	12,825,954	668,156	13,494,110
Total additions	18,928,206	668,156	19,596,362
Deductions Benefits paid to participants or beneficiaries Administrative expense	11,493,176 364,558	382,980 23,939	11,876,156 388,497
Total deductions	11,857,734	406,919	12,264,653
Net Increase in Fiduciary Net Position	7,070,472	261,237	7,331,709
Fiduciary Net Position, Beginning of Year	186,388,395	6,846,961	193,235,356
Fiduciary Net Position, End of Year	\$ 193,458,867	\$ 7,108,198	\$ 200,567,065

Note 15. Fiduciary Activities

Pension Plan

The Pension Plan issues a financial report available for all participants that includes financial statements and required supplementary information. The report may be obtained at <u>www.mshospitaltransparency.com</u> when issued or by writing the administration of the Hospital at P. O. Box 16389, Hattiesburg, Mississippi 39404 or calling 601.288.7000.

Other Postemployment Benefit Plan

Deposits

Custodial credit risk is the risk that in the event of a bank failure, a government's deposits may not be returned to it. The OPEB Plan's deposit policy for custodial credit risk requires compliance with the provisions of state law.

State law requires collateralization of all deposits with federal depository insurance; bonds and other obligations of the U.S. Treasury, U.S. agencies or instrumentalities, or the State of Mississippi; bonds of any city, county, school district, or special road district of the State of Mississippi; bonds of any state; or a surety bond having an aggregate value at least equal to the amount of the deposits.

At September 30, 2024 and 2023, none of the OPEB Plan's deposits were exposed to custodial credit risk.

Investments

Investment policy decisions are established and maintained by the Retirement Committee charged with overseeing the OPEB Plan, as authorized by the Hospital's Board of Trustees. The OPEB Plan relies on the Pension Plan investment policy, as it does not have a separate investment policy. The Retirement Committee is responsible for the administration and supervision of the OPEB Plan and its investments.

Interest Rate Risk

Interest rate risk is the risk that changes in market interest rates and will adversely affect the fair value of an investment. Generally, the longer the maturity of an investment the greater the sensitivity of its fair value to changes in market interest rates.

Interest rate risk inherent in the portfolio is measured by monitoring the segment time distribution of the investments in the portfolio. The weighted average maturity for fixed income mutual funds is approximately eight years for both 2024 and 2023.

Credit Risk

Credit risk is the risk that the issuer or other counterparty to an investment will not fulfill its obligations. It is the OPEB Plan's policy to limit its investments in corporate bonds to investment grade fixed income securities rated at least BBB-/Baa3 by Standard & Poor's and Moody's Investors Service.

Custodial Credit Risk

For an investment, custodial credit risk is the risk that, in the event of the failure of the counterparty, the OPEB Plan will not be able to recover the value of its investment or collateral securities that are in the possession of an outside party. The investment policy does not address how investments are to be held.

Concentration of Credit Risk

The OPEB Plan does not have a policy to limit its holdings in any one issuer. At September 30, 2023 and 2022, all the OPEB Plan's investments were held through its trustee and custodian.

Disclosures About Fair Value of Assets

Fair value is the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date. Fair value measurements must maximize the use of observable inputs and minimize the use of unobservable inputs. There is a hierarchy of three levels of inputs that may be used to measure fair value:

- Level 1 Quoted prices in active markets for identical assets
- Level 2 Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets
- Level 3 Unobservable inputs supported by little or no market activity and are significant to the fair value of the assets

Recurring Measurements

The following table presents the fair value measurements of assets recognized in the accompanying fiduciary financial statements measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at September 30, 2024 and 2023:

					20 Value M)24 easuren	nents	
Asset Class		Total Fair Value		oted Prices in Active larkets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)		Significant Unobservable Inputs (Level 3)	
Money market mutual funds Treasury bills Mutual funds Fixed income Equities	\$	58,418 2,001,071 990,683 4,060,055	\$	58,418 2,001,071 990,683 4,060,055	\$	-	\$	-
цишео	\$	7,110,227	\$	7,110,227	\$		\$	

			2023 Fair Value Measurements						
Asset Class		Total Fair Value		Quoted Prices in Active Markets for Identical Assets (Level 1)		Significant Other Observable Inputs (Level 2)		nificant servable iputs evel 3)	
Money market mutual funds Treasury bills Mutual funds Fixed income Equities	\$	111,004 1,879,497 772,890 3,702,569	\$	111,004 1,879,497 772,890 3,702,569	\$	- - -	\$	- - -	
	\$	6,465,960	\$	6,465,960	\$	-	\$	-	

Investments

Where quoted market prices are available in an active market, securities are classified within Level 1 of the valuation hierarchy. If quoted market prices are not available, then fair values are estimated by using quoted prices of securities with similar characteristics or independent asset pricing services and pricing models, the inputs of which are market-based or independently sourced market parameters, including, but not limited to, yield curves, interest

rates, volatilities, prepayments, defaults, cumulative loss projections, and cash flows. Such securities are classified in Level 2 of the valuation hierarchy. In certain cases where Level 1 or Level 2 inputs are not available, securities are classified within Level 3 of the hierarchy. The Hospital holds no Level 2 or 3 investments.

Note 16. Concentrations of Credit Risk

The Hospital grants credit to patients, substantially all of whom are Hospital service area residents. The Hospital generally does not require collateral or other security in extending credit to patients; however, it routinely obtains assignment of (or is otherwise entitled to receive) patients' benefits payable under their health insurance programs, plans, or policies (*e.g.*, Medicare, Medicaid, Blue Cross, and commercial insurance policies).

The mix of receivables from patients and third-party payors as of each fiscal year-end follows:

	 2024		2023			
Medicare	\$ 46,116,802	31.1%	\$	41,971,002	30.1%	
Medicaid	13,857,134	9.3%		15,650,897	11.2%	
Other third-party payors	43,520,018	29.4%		38,586,423	27.7%	
Patients	44,785,826	30.2%		43,179,233	31.0%	
Less allowance for uncollectible	148,279,780	100.0%		139,387,555	100.0%	
accounts	81,934,277	55.3%		72,773,276	52.2%	
	\$ 66,345,503	44.7%	\$	66,614,279	47.8%	

Note 17. Risk Management

Medical Malpractice and General Liability Risks

Annual estimated provisions are accrued based on actuarially determined amounts for the self-insured portion of medical malpractice and general liability claims, including an estimate of the ultimate costs for both reported claims and claims incurred but not yet reported, and is included in other accrued expenses and estimated insurance reserves and other on the accompanying balance sheets.

Effective March 1, 2003, the Hospital became self-insured at its Hattiesburg campus for all medical malpractice claims incurred on or after that date. In accordance with the provisions of Title 11, Chapter 46 of the Mississippi Code, a trust fund was established based on an actuarially determined funding level. Effective July 1, 2001, Code 11-46-15 of the Mississippi Code established that the liability for public entities falling under the State Tort Act would not exceed \$500,000 for all single occurrence claims. Effective May 1, 2014, HCH became self-insured under the Hospital's self-insured program.

The following is a summary of changes in the Hospital's self-insurance liability for professional and general liability costs for fiscal 2024 and 2023:

	 2024	 2023
Balance, October 1	\$ 3,231,163	\$ 2,732,894
Provisions for claims reported and claims incurred but not reported	351,635	887,001
Claims and related expenses paid	 (633,162)	 (388,732)
Balance, September 30	\$ 2,949,636	\$ 3,231,163

The Hospital purchases medical malpractice insurance under a claims-made policy on a fixed premium basis for PRH, WGH, JDGH, MGH, PCH, and AAA. Accounting principles generally accepted in the United States of America require a healthcare provider to accrue the expense of its share of malpractice claim costs, if any, for any reported and unreported incidents of potential improper professional service occurring during the year by estimating the probable ultimate costs of the incidents. Based upon the Hospital's claims experience at these locations, no such accrual has been made. It is reasonably possible that this estimate could change materially in the near term.

Employee Health Insurance

The Hospital has an agreement with a third-party administrator to administer the Hospital's group health plan and to manage employee medical benefits and claims. The Hospital plan is funded by the Hospital and by contributions of employees.

A summary of changes in the Hospital's self-insurance liability for employee health coverage (included in other accrued expenses in the accompanying balance sheets) for fiscal 2024 and 2023 follows:

	2024	2023
Balance, October 1	\$ 1,183,000	\$ 1,204,000
Provisions for claims reported and		
claims incurred but not reported	16,769,537	12,934,723
Claims paid	(16,222,537)	(12,955,723)
Balance, September 30	\$ 1,730,000	\$ 1,183,000

Workers' Compensation

The Hospital is self-insured for a workers' compensation plan with a stop loss binder limit of \$700,000.

The following is a summary of changes in the Hospital's actuarially determined self-insurance liability for workers' compensation coverage for fiscal 2024 and 2023:

		2024	 2023
Balance, October 1 Provisions for claims reported and	\$	2,583,830	\$ 2,867,791
claims incurred but not reported Claims paid	_	530,657 (441,168)	 747,828 (1,031,789)
Balance, September 30	\$	2,673,319	\$ 2,583,830

Note 18. Disclosures About Fair Value of Assets and Liabilities

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Fair value measurements must maximize the use of observable inputs and minimize the use of unobservable inputs. There is a hierarchy of three levels of inputs that may be used to measure fair value:

- Level 1 Quoted prices in active markets for identical assets or liabilities
- Level 2 Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities
- Level 3 Unobservable inputs supported by little or no market activity and are significant to the fair value of the assets or liabilities

The following table presents the fair value measurements of assets and liabilities recognized in the accompanying financial statements measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at September 30, 2024 and 2023:

		2024								
		Fair Va	lue Measurement	s Using						
Asset Class	Total Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)						
		<u>.</u>		<u> </u>						
Investments Money market mutual funds U.S. agency securities U.S. Treasury securities State municipal securities Corporate debt securities	<pre>\$ 24,600,938 34,735,109 75,214,337 20,925,685 38,991,362</pre>	\$ 24,600,938 - - - - -	\$	\$ - - - -						
Pooled investment securities	91,388,413		91,388,413							
Total investments by fair value level	\$ 285,855,844	\$ 24,600,938	\$ 261,254,906	<u>\$ </u>						
Derivative Instrument Interest rate swap	\$ 59,048	\$	\$ 59,048	<u>\$ </u>						
			2023							
			lue Measurement	s Using						
Asset Class	Total Fair Value	Fair Va Quoted Prices in Active Markets for Identical Assets (Level 1)		s Using Significant Unobservable Inputs (Level 3)						
Investments Money market mutual funds U.S. agency securities U.S. Treasury securities	Fair Value \$ 34,883,821 16,659,596 34,677,925	Quoted Prices in Active Markets for Identical Assets	lue Measurements Significant Other Observable Inputs (Level 2) \$ - 16,659,596 34,677,925	Significant Unobservable Inputs						
Investments Money market mutual funds U.S. agency securities	Fair Value \$ 34,883,821 16,659,596	Quoted Prices in Active Markets for Identical Assets (Level 1)	lue Measurements Significant Other Observable Inputs (Level 2) \$ - 16,659,596	Significant Unobservable Inputs (Level 3)						
Investments Money market mutual funds U.S. agency securities U.S. Treasury securities State municipal securities Corporate debt securities	Fair Value \$ 34,883,821 16,659,596 34,677,925 23,744,121 39,517,873	Quoted Prices in Active Markets for Identical Assets (Level 1)	lue Measurements Significant Other Observable Inputs (Level 2) \$ - 16,659,596 34,677,925 23,744,121 39,517,873	Significant Unobservable Inputs (Level 3)						

Investments

Where quoted market prices are available in an active market, securities are classified within Level 1 of the valuation hierarchy. If quoted market prices are not available, then fair values are estimated by using quoted prices of securities with similar characteristics or independent asset pricing services and pricing models, the inputs of which are market-based or independently sourced market parameters, including, but not limited to, yield curves, interest rates, volatilities, prepayments, defaults, cumulative loss projections, and cash flows. Such securities are classified in Level 2 of the valuation hierarchy. In certain cases where Level 1 or Level 2 inputs are not available, securities are classified within Level 3 of the hierarchy. The Hospital holds no Level 3 investments.

Interest Rate Swap Agreement

The fair value is estimated using forward-looking interest rate curves and discounted cash flows that are observable or can be corroborated by observable market data and, therefore, are classified within Level 2 of the valuation hierarchy.

Note 19. Contingencies

Medical Malpractice Claims

Estimates related to the accrual for medical malpractice claims are described in Note 17.

Admitting Physicians

For the years ended September 30, 2024 and 2023, admissions by physicians employed by a large, multi-specialty physician practice located adjacent to the Hospital accounted for approximately 71% and 79%, respectively, of the Hospital's gross revenues.

General Litigation

The Hospital is subject to claims and lawsuits that arose primarily in the ordinary course of its activities. Some of these allegations are in areas not covered by the Hospital's self-insurance program (discussed elsewhere in these notes) or by commercial insurance, for example, allegations regarding employment practices or performance of contracts. The Hospital evaluates such allegations by conducting investigations to determine the validity of each potential claim. It is the opinion of management the disposition or ultimate resolution of such claims and lawsuits will not have a material adverse effect on the balance sheets, change in net position, and cash flows of the Hospital. Events could occur that would change this estimate materially in the near term.

Pension and Other Postretirement Benefit Obligations

The Hospital has a noncontributory defined benefit pension and postretirement healthcare plan, whereby it agrees to provide certain postretirement benefits to eligible employees. The benefit obligation is the actuarial present value of all benefits attributed to service rendered prior to the valuation date based on the projected unit credit cost method. It is reasonably possible that events could occur that would change the estimated amount of this liability materially in the near term.

Investments

The Hospital invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term, and that such changes could materially affect the amounts reported in the accompanying balance sheets.

Note 20. Condensed Combining Information

The following tables include condensed balance sheets information for the Hospital and its blended component units as of September 30, 2024 and 2023.

					Septemb	er 30. 2024				
	Forrest County General Hospital	South Mississippi Health Services, Inc.	Forrest General Health Services, Inc.	Clean Earth, Inc.	Forrest General Managed Care Services, Inc.	AAA Ambulance Service, Inc.	Forrest General Healthcare Foundation, Inc.	Pine Grove Public Benefit Corporation	Eliminations	Total
Assets and Deferred Outflows of Resources										
Current assets	\$ 281,029,210	\$ 954,211	\$ 9,265	\$ 2,059,205	\$-	\$ 19,338,340	\$ 4,972,063	\$ 1,124,092	\$-	\$ 309,486,386
Noncurrent cash and investments	222,349,226	-	-	-	-	2,311,117	-	-	-	224,660,343
Capital assets, net	258,835,266	1,325,217	-	416,348	-	7,067,355	-	15,641,384	-	283,285,570
Lease assets, net	18,609,452	-	-	-	-	184,321	-	-	-	18,793,773
Subscription assets, net	6,964,002	-	-	-	-	98,378	-	-	-	7,062,380
Other assets	35,551,804	580,469	-	-	62,294	12,026	-	-	-	36,206,593
Intercompany receivables	201,756,906	-	203,967	-	1,439,273	-	-	-	(203,400,146)	-
Deferred outflows of resources	19,894,605									19,894,605
Total assets and deferred outflows of resources	\$1,044,990,471	\$ 2,859,897	\$ 213,232	\$ 2,475,553	\$ 1,501,567	\$ 29,011,537	\$ 4,972,063	\$ 16,765,476	\$ (203,400,146)	\$ 899,389,650
Liabilities and Deferred Inflows of Resources										
Current liabilities	\$ 99,830,470	\$ 4,533	\$-	\$ 49,191	\$-	\$ 1,838,224	\$-	\$-	\$-	\$ 101,722,418
Intercompany payables	196,486,561	265,238	-	5,337,390	-	-	-	1,310,957	(203,400,146)	-
Long-term liabilities	201,534,808	-	-	-	-	107,722	-	16,570,000	-	218,212,530
Deferred inflows of resources	4,613,018									4,613,018
Total liabilities and deferred inflows of resources	502,464,857	269,771		5,386,581	<u> </u>	1,945,946		17,880,957	(203,400,146)	324,547,966
Net Position										
Net investment in capital assets	126.705.456	1,325,217	-	416,348		6,863,746		(928,616)		134,382,151
Restricted	1.767.666	-	-			-	3,416,801	714,424		5,898,891
Unrestricted	414,052,492	1,264,909	213,232	(3,327,376)	1,501,567	20,201,845	1,555,262	(901,289)		434,560,642
		1,204,000	210,202	(0,021,010)	1,001,007	20,201,040	1,000,202	(001,200)		-0-,000,042
Total net position	542,525,614	2,590,126	213,232	(2,911,028)	1,501,567	27,065,591	4,972,063	(1,115,481)		574,841,684
Total liabilities, deferred inflows of										
resources and net position	\$1,044,990,471	\$ 2,859,897	\$ 213,232	\$ 2,475,553	\$ 1,501,567	\$ 29,011,537	\$ 4,972,063	\$ 16,765,476	\$ (203,400,146)	\$ 899,389,650

	September 30, 2023									
	Forrest County	South Mississippi	Forrest General		Forrest General	AAA	Forrest General	Pine Grove		
	General Hospital	Health Services, Inc.	Health Services, Inc.	Clean Earth, Inc.	Managed Care Services, Inc.	Ambulance Service, Inc.	Healthcare Foundation, Inc.	Public Benefit Corporation	Eliminations	Total
Assets and Deferred Outflows of Resources										
Current assets	\$ 197,998,370	\$ 933,665	\$ 9,091	\$ 1,826,426	\$-	\$ 11,132,034	\$ 3,972,742	\$ 5,097,604	\$-	\$ 220,969,932
Noncurrent cash and investments	207,962,019	-	-	-	-	2,146,891	-	-	-	210,108,910
Capital assets, net	253,687,008	1,434,290	-	554,705	-	6,191,894	-	10,500,308	-	272,368,205
Lease assets, net	33,181,403	-	-	-	-	240,571	-	-	-	33,421,974
Subscription assets, net	6,549,577	-	-	-	-	248,774	-	-	-	6,798,351
Other assets	33,247,321	327,073	-	-	103,587	12,026	-	-	-	33,690,007
Intercompany receivables	192,606,075	-	204,941	-	1,334,370	-	-	-	(194,145,386)	-
Deferred outflows of resources	23,490,666									23,490,666
Total assets and deferred outflows of resources	\$ 948,722,439	\$ 2,695,028	\$ 214,032	\$ 2,381,131	\$ 1,437,957	\$ 19,972,190	\$ 3,972,742	\$ 15,597,912	\$ (194,145,386)	\$ 800,848,045
Liabilities and Deferred Inflows of Resources										
Current liabilities	\$ 87,737,764	\$ 4,416	\$ -	\$ 46,620	\$-	\$ 1,496,799	\$ -	\$-	\$-	\$ 89,285,599
Intercompany payables	188,597,237	443,746	-	5,087,833	-	-	-	16,570	(194,145,386)	-
Long-term liabilities	205,769,011	-	-	-	-	465,965	-	16,570,000	-	222,804,976
Deferred inflows of resources	6,278,407									6,278,407
Total liabilities and deferred inflows of resources	488,382,419	448,162		5,134,453		1,962,764		16,586,570	(194,145,386)	318,368,982
Net Position										
Net investment in capital assets	137.150.384	1,434,290	-	554,705	-	5,755,016	-	(12,334,838)	-	132,559,557
Restricted	1.834.112	-	-	-	-	-	2,809,447	5,092,747	-	9,736,306
Unrestricted	321.355.524	812.576	214,032	(3,308,027)	1,437,957	12,254,410	1,163,295	6,253,433		340,183,200
omodulotod	021,000,024	012,010	214,002	(0,000,021)	1,401,001	12,204,410	1,100,200	0,200,400		040,100,200
Total net position	460,340,020	2,246,866	214,032	(2,753,322)	1,437,957	18,009,426	3,972,742	(988,658)		482,479,063
Total liabilities, deferred inflows of resources										
and net position	\$ 948,722,439	\$ 2,695,028	\$ 214,032	\$ 2,381,131	\$ 1,437,957	\$ 19,972,190	\$ 3,972,742	\$ 15,597,912	\$ (194,145,386)	\$ 800,848,045

The following tables include condensed combining statements of revenues, expenses, and changes in net position information for the Hospital and its blended component units for the years ended September 30, 2024 and 2023:

	September 30, 2024										
	Forrest County General Hospital	South Mississippi Health Services, Inc.	Forrest General Health Services, Inc.	Clean Earth, Inc.	Forrest General Managed Care Services, Inc.	AAA Ambulance Service, Inc.	Forrest General Healthcare Foundation, Inc.	Pine Grove Public Benefit Corporation	Eliminations	Total	
Operating Revenues											
Net patient service revenue Other	\$ 735,997,425 14,130,227	\$- 186,000	\$ - -	\$- 866,550	\$ - -	\$ 25,942,209 2,441,490	\$- 1,415,146	\$ - 447,680	\$ (1,603,820) (921,907)	\$ 760,335,814 18,565,186	
Total Operating Revenues	750,127,652	186,000	<u> </u>	866,550	<u> </u>	28,383,699	1,415,146	447,680	(2,525,727)	778,901,000	
Operating Expenses											
Other operating expenses	655,649,439	7,634	1,000	927,813	57,598	19,953,933	616,340	64,575	(2,525,727)	674,752,605	
Depreciation and amortization	41,037,584	109,073		138,357		1,169,435		313,384		42,767,833	
Total Operating Expenses	696,687,023	116,707	1,000	1,066,170	57,598	21,123,368	616,340	377,959	(2,525,727)	717,520,438	
Operating Income (Loss)	53,440,629	69,293	(1,000)	(199,620)	(57,598)	7,260,331	798,806	69,721		61,380,562	
Nonoperating Revenues (Expenses) Net investment income Interest expense Other	24,709,237 (5,515,889) 7,312,653	20,571 - 253,396	200	41,914 - -	- - 121,208	618,131 (23,522) 1,201,225	200,515 - -	- (196,544) -	- - -	25,590,568 (5,735,955) 8,888,482	
Total Nonoperating Revenues (Expenses)	26,506,001	273,967	200	41,914	121,208	1,795,834	200,515	(196,544)		28,743,095	
Income (Loss) Before Capital Grants and Gifts	79,946,630	343,260	(800)	(157,706)	63,610	9,056,165	999,321	(126,823)	-	90,123,657	
Capital Grants and Gifts	2,238,964									2,238,964	
Increase (Decrease) in Net Position	82,185,594	343,260	(800)	(157,706)	63,610	9,056,165	999,321	(126,823)	-	92,362,621	
Net Position, Beginning of Year	460,340,020	2,246,866	214,032	(2,753,322)	1,437,957	18,009,426	3,972,742	(988,658)		482,479,063	
Net Position, End of Year	\$ 542,525,614	\$ 2,590,126	\$ 213,232	\$ (2,911,028)	\$ 1,501,567	\$ 27,065,591	\$ 4,972,063	\$ (1,115,481)	\$-	\$ 574,841,684	

	September 30, 2023									
	Forrest County General Hospital	South Mississippi Health Services, Inc.	Forrest General Health Services, Inc.	Clean Earth, Inc.	Forrest General Managed Care Services, Inc.	AAA Ambulance Service, Inc.	Forrest General Healthcare Foundation, Inc.	Pine Grove Public Benefit Corporation	Eliminations	Total
Operating Revenues Net patient service revenue Other	\$ 620,315,469 11,619,471	\$- 186,000	\$ - -	\$ - 920,704	\$ - -	\$ 20,338,874 2,187,728	\$- 1,184,352	\$ - -	\$ (1,626,191) (523,826)	\$ 639,028,152 15,574,429
Total Operating Revenues	631,934,940	186,000		920,704		22,526,602	1,184,352		(2,150,017)	654,602,581
Operating Expenses Other operating expenses Depreciation and amortization	615,208,169 41,051,667	6,195 109,072	1,050	970,558 138,355	71,091	18,371,121 1,070,503	712,000	861,450	(2,150,017)	634,051,617 42,369,597
Total Operating Expenses	656,259,836	115,267	1,050	1,108,913	71,091	19,441,624	712,000	861,450	(2,150,017)	676,421,214
Operating Income (Loss)	(24,324,896)	70,733	(1,050)	(188,209)	(71,091)	3,084,978	472,352	(861,450)		(21,818,633)
Nonoperating Revenues (Expenses) Net investment income Interest expense Other	8,974,625 (5,089,458) 3,092,232	3,262 - (228,907)	34	5,245 - -	- - 158,019	243,655 (38,130) 1,146,302	1,836 - -	- (127,208) -	-	9,228,657 (5,254,796) 4,167,646
Total Nonoperating Revenues (Expenses)	6,977,399	(225,645)	34	5,245	158,019	1,351,827	1,836	(127,208)		8,141,507
Income (Loss) Before Capital Grants and Gifts	(17,347,497)	(154,912)	(1,016)	(182,964)	86,928	4,436,805	474,188	(988,658)	-	(13,677,126)
Capital Grants and Gifts	7,481,174									7,481,174
Increase (Decrease) in Net Position	(9,866,323)	(154,912)	(1,016)	(182,964)	86,928	4,436,805	474,188	(988,658)	-	(6,195,952)
Net Position, Beginning of Year	470,206,343	2,401,778	215,048	(2,570,358)	1,351,029	13,572,621	3,498,554			488,675,015
Net Position, End of Year	\$ 460,340,020	\$ 2,246,866	\$ 214,032	\$ (2,753,322)	\$ 1,437,957	\$ 18,009,426	\$ 3,972,742	\$ (988,658)	\$-	\$ 482,479,063

The following tables include condensed combining statements of cash flows information for the Hospital and its blended component units for the years ended September 30, 2024 and 2023:

	September 30, 2024									
	Forrest County General Hospital	South Mississippi Health Services, Inc.	Forrest General Health Services, Inc.	Clean Earth, Inc.	Forrest General Managed Care Services, Inc.	AAA Ambulance Service, Inc.	Forrest General Healthcare Foundation, Inc.	Pine Grove Public Benefit Corporation	Eliminations	Total
Net Cash Provided by (Used in) Operating Activities	\$ 104,001,243	\$ (25)	\$ (26)	\$ 367,974	\$ (121,208)	\$ 7,422,953	\$ 798,806	\$ 1,682,349	\$ -	\$ 114,152,066
Net Cash Provided by Noncapital Financing Activities	8,611,205	-	-	-	-	-	-	-	-	8,611,205
Net Cash Used in Capital and Related Financing Activities	(39,343,312)	-	-	-	-	(1,275,681)	-	(5,651,004)	-	(46,269,997)
Net Cash Provided by (Used in) Investing Activities	(37,673,727)	20,571	200	41,914	121,208	1,174,949	200,515			(36,114,370)
Increase (Decrease) in Cash and Cash Equivalents	35,595,409	20,546	174	409,888	-	7,322,221	999,321	(3,968,655)	-	40,378,904
Cash and Cash Equivalents, Beginning of Year	118,934,528	933,665	9,091	1,649,317		6,828,512	3,972,742	5,092,747		137,420,602
Cash and Cash Equivalents, End of Year	\$ 154,529,937	\$ 954,211	\$ 9,265	\$ 2,059,205	\$	\$ 14,150,733	\$ 4,972,063	\$ 1,124,092	<u>\$ </u>	\$ 177,799,506
						er 30, 2023				
	Forrest County General Hospital	South Mississippi Health Services, Inc.	Forrest General Health Services, Inc.	Clean Earth, Inc.	Forrest General Managed Care Services, Inc.	AAA Ambulance Service, Inc.	Forrest General Healthcare Foundation, Inc.	Pine Grove Public Benefit Corporation	Eliminations	Total
Net Cash Provided by (Used in) Operating Activities	\$ 13,246,217	\$ 588,000	\$ (1,075)	\$ 304,661	\$ (158,019)		\$ 472,353	\$ (849,737)	\$-	\$ 15,730,032
Net Cash Provided by Noncapital Financing Activities	823,996	-	-	-	-	3,498,576	-	-	-	4,322,572
Net Cash Used in Capital and Related Financing Activities	(27,507,719)	-	-	-	-	(2,266,920)	-	5,942,484	-	(23,832,155)
Net Cash Provided by (Used in) Investing Activities	56,393,472	(584,739)	34	5,245	158,019	(1,190,763)	1,835			54,783,103
Increase (Decrease) in Cash and Cash Equivalents	42,955,966	3,261	(1,041)	309,906	-	2,168,525	474,188	5,092,747	-	51,003,552
Cash and Cash Equivalents, Beginning of Year	75,978,562	930,404	10,132	1,339,411		4,659,987	3,498,554		<u> </u>	86,417,050
Cash and Cash Equivalents, End of Year	\$ 118,934,528	\$ 933,665	\$ 9,091	\$ 1,649,317	<u>\$</u> -	\$ 6,828,512	\$ 3,972,742	\$ 5,092,747	\$-	\$ 137,420,602

Required Supplementary Information (Unaudited)

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Schedules of Changes in the Hospital's Net Pension Liability and Related Ratios Years Ended September 30

	2024	2023	2022	2021	2020	2019	2018	2017	2016	2015
Total Pension Liability Service cost Interest Experience gains Change in assumptions	\$ 1,461,633 17,421,912 3,546,588 5,715,132	\$ 1,593,431 16,705,067 3,825,557	\$ 1,825,614 16,094,628 1,586,118 345,849	\$ 2,051,672 16,488,559 5,803,314 (464,488)	\$ 2,617,170 16,327,946 3,502,267 8,502,729	\$ 2,802,670 15,507,856 1,514,956	\$ 3,091,562 14,823,878 (587,916) -	\$ 3,302,712 14,098,001 (165,919)	\$ 3,530,410 13,267,635 1,186,135	\$ 3,740,713 12,440,681 1,333,643
Benefit payments	(12,716,312)	(11,493,176)	(10,907,180)	(47,265,882)	(9,072,621)	(7,584,183)	(7,624,734)	(6,398,362)	(6,207,933)	(5,589,011)
Net change in total pension liability	15,428,953	10,630,879	8,945,029	(23,386,825)	21,877,491	12,241,299	9,702,790	10,836,432	11,776,247	11,926,026
Total pension liability - beginning	245,198,757	234,567,878	225,622,849	249,009,674	227,132,183	214,890,884	205,188,094	194,351,662	182,575,415	170,649,389
Total pension liability - ending (a)	\$ 260,627,710	\$ 245,198,757	\$ 234,567,878	\$ 225,622,849	\$ 249,009,674	\$ 227,132,183	\$ 214,890,884	\$ 205,188,094	\$ 194,351,662	\$ 182,575,415
Plan Fiduciary Net Position Contributions Net investment income (loss) Benefit payments Administrative expense	\$ 6,876,108 19,111,853 (12,716,312) (360,085)	\$ 6,102,252 12,825,954 (11,493,176) (364,558)	\$ 5,718,915 (24,074,437) (10,907,180) (398,002)	\$ 6,094,296 46,732,309 (47,265,882) (713,260)	\$ 4,997,214 7,731,083 (9,072,622) (374,856)	\$ 10,063,476 11,120,790 (7,584,183) (364,184)	\$ 10,063,476 14,722,571 (7,624,734) (352,565)	\$ 30,063,476 18,424,809 (6,398,362) (317,168)	\$ 10,063,476 (2,210,133) (6,207,933) (295,012)	\$ 9,782,490 5,766,222 (5,589,011) (338,826)
Net change in plan fiduciary net position	12,911,564	7,070,472	(29,660,704)	4,847,463	3,280,819	13,235,899	16,808,748	41,772,755	1,350,398	9,620,875
Plan fiduciary net position - beginning	193,458,867	186,388,395	216,049,099	211,201,636	207,920,817	194,684,918	177,876,170	136,103,415	134,753,017	125,132,142
Plan fiduciary net position - ending (b)	\$ 206,370,431	\$ 193,458,867	\$ 186,388,395	\$ 216,049,099	\$ 211,201,636	\$ 207,920,817	\$ 194,684,918	\$ 177,876,170	\$ 136,103,415	\$ 134,753,017
Net pension liability - ending (a) - (b)	\$ 54,257,279	\$ 51,739,890	\$ 48,179,483	\$ 9,573,750	\$ 37,808,038	\$ 19,211,366	\$ 20,205,966	\$ 27,311,924	\$ 58,248,247	\$ 47,822,398
Plan Fiduciary Net Position as a Percentage of the Total Pension Liability	79%	79%	79%	96%	85%	92%	91%	87%	70%	74%
Covered Payroll	\$ 50,147,681	\$ 52,800,621	\$ 58,524,431	\$ 62,473,412	\$ 63,499,147	\$ 66,860,831	\$ 72,436,009	\$ 76,926,859	\$ 80,727,008	\$ 84,626,337
Net Pension Liability as a Percentage of Covered Payroll	108%	98%	82%	15%	60%	29%	28%	36%	72%	57%

Note: This schedule is reported as of the plan fiscal year of June 30.

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Schedules of the Hospital's Pension Contributions Years Ended September 30

	2024	2023	2022	2021	2020	2019	2018	2017	2016	2015
Actuarially determined contribution Contributions in relation to the	\$ 6,876,110	\$ 6,102,250	\$ 5,718,916	\$ 6,094,298	\$ 4,997,212	\$ 5,758,919	\$ 6,397,344	\$ 8,516,539	\$ 8,562,658	\$ 8,939,534
actuarially determined contribution	6,876,108	6,102,252	5,718,915	6,094,296	4,997,214	10,063,476	10,063,476	30,063,476	10,063,476	9,782,490
Contribution (excess) deficiency	\$2	\$ (2)	\$ 1	\$ 2	\$ (2)	\$ (4,304,557)	\$ (3,666,132)	\$ (21,546,937)	\$ (1,500,818)	\$ (842,956)
Covered payroll	\$ 50,147,681	\$52,800,621	\$58,524,431	\$62,473,412	\$63,499,147	\$66,860,831	\$72,436,009	\$ 76,926,859	\$80,727,008	\$84,626,337
Contributions as a percentage of covered payroll	13.71%	11.56%	9.77%	9.76%	7.87%	15.05%	13.89%	39.08%	12.47%	11.56%

Note: This schedule is reported as of the plan fiscal year-end of June 30.

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Schedules of the Hospital's Pension Contributions Years Ended September 30

Methods and assumptions used to determine contribution rates: Valuation date: July 1, 2024 Remaining amortization period: 10 years

	2024	2023	2022	2021	2020	2019	2018	2017	2016	2015
Actuarial cost method	Entry age	Entry age	Entry age	Entry age	Entry age	Entry age				
	method	method	method	method	method	method	method	method	method	method
Amortization method	Level dollar	Level dollar	Level dollar	Level dollar	Level dollar	Level dollar				
	amount; closed	amount; closed	amount; closed	amount; closed	amount; closed	amount; closed				
	method	method	method	method	method	method	method	method	method	method
Asset valuation method	Fair market	Fair market	Fair market	Fair market	Fair market	Fair market				
	value	value	value	value	value	value	value	value	value	value
Inflation	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%	2.50%
Salary increases	2.5% - 5.0%,	1.5% - 4.0%,	1.5% - 4.0%,	1.5% - 4.0%,	1.5% - 4.0%,	2.0% - 4.5%,	2.0% - 4.5%,	2.0% - 4.5%,	2.0% - 4.5%,	2.0% - 4.5%,
	based on age,	based on age,	based on age,	based on age,	based on age,	based on age,				
	including	including	including	including	including	including	including	including	including	including
	inflation	inflation	inflation	inflation	inflation	inflation	inflation	inflation	inflation	inflation
Investment rate of return	7.25%, net of	7.25%, net of	7.25%, net of	7.25%, net of	7.25%, net of	7.25%, net of				
	pension plan	pension plan	pension plan	pension plan	pension plan	pension plan				
	investment	investment	investment	investment	investment	investment	investment	investment	investment	investment
	expense,	expense,	expense,	expense,	expense,	expense,	expense,	expense,	expense,	expense,
	including	including	including	including	including	including	including	including	including	including
	inflation	inflation	inflation	inflation	inflation	inflation	inflation	inflation	inflation	inflation
Retirement Age	65	65	65	65	65	65	65	65	65	65
Mortality	125% of the PubG-2010 Total Dataset Mortality Table, with Mortality Improvement Scale MP-2021	125% of the PubG-2010 Total Dataset Mortality Table, with Mortality Improvement Scale MP-2021	125% of the PubG-2010 Total Dataset Mortality Table, with Mortality Improvement Scale MP-2021	125% of the PubG-2010 Total Dataset Mortality Table, with Mortality Improvement Scale MP-2020	125% of the PubG-2010 Total Dataset Mortality Table, with Mortality Improvement Scale MP-2019	RP-2000 Combined Healthy Mortality Table projected using Scale AA				

Other information: Plan was frozen to new participants effective July 1, 2011

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Schedules of Changes in the Hospital's Net OPEB Asset/Liability and Related Ratios Years Ended September 30

	2024	2023	2022	2021	2020	2019	2018	2017
Total OPEB Asset/Liability	 		 	 	 	 		
Service cost	\$ 26,039	\$ 27,441	\$ 30,788	\$ 32,635	\$ 302,061	\$ 347,946	\$ 410,388	\$ 390,846
Interest	279,354	250,383	314,975	387,273	372,639	386,399	519,745	497,299
Differences between expected and actual								
experience	200,311	577,590	(741,519)	(1,503,937)	(569,984)	(4,006,538)	-	-
Change in actuarial assumptions	204,960	11,828	(43,800)	293,544	-	1,080,635	-	-
Benefit payments	 (382,981)	 (426,122)	 (415,016)	 (366,510)	 (347,803)	 (218,518)	 (574,046)	 (592,057)
Net change in total OPEB asset/liability	327,683	441,120	(854,572)	(1,156,995)	(243,087)	(2,410,076)	356,087	296,088
Total OPEB asset/liability - beginning	 5,012,849	 4,571,729	 5,426,301	 6,583,296	 6,826,383	 9,236,459	 8,880,372	 8,584,284
Total OPEB asset/liability - ending (a)	\$ 5,340,532	\$ 5,012,849	\$ 4,571,729	\$ 5,426,301	\$ 6,583,296	\$ 6,826,383	\$ 9,236,459	\$ 8,880,372
Plan Fiduciary Net Position								
Contributions	\$ -	\$ -	\$ 294,905	\$ 366,510	\$ 2,603,916	\$ 711,140	\$ 1,493,458	\$ 1,595,051
Net investment income (loss)	668,157	(1,142,673)	1,431,997	437,465	221,483	318,959	269,922	240,612
Benefit payments	(382,981)	(426,122)	(415,016)	(366,510)	(347,803)	(218,518)	(574,046)	(592,057)
Other	 (23,939)	 (5,788)	 (26,885)	 -	 	 -	 -	 -
Net change in plan fiduciary net position	261,237	(1,574,583)	1,285,001	437,465	2,477,596	811,581	1,189,334	1,243,606
Plan fiduciary net position - beginning	 6,846,961	 8,421,544	 7,136,543	 6,699,078	 4,221,482	 3,409,901	 2,220,567	 976,961
Plan fiduciary net position - ending (b)	\$ 7,108,198	\$ 6,846,961	\$ 8,421,544	\$ 7,136,543	\$ 6,699,078	\$ 4,221,482	\$ 3,409,901	\$ 2,220,567
Net OPEB asset/liability - ending (a) - (b)	\$ (1,767,666)	\$ (1,834,112)	\$ (3,849,815)	\$ (1,710,242)	\$ (115,782)	\$ 2,604,901	\$ 5,826,558	\$ 6,659,805
Plan Fiduciary Net Position as a Percentage of the Total OPEB Asset/Liability	133%	137%	184%	132%	102%	62%	37%	25%
Covered Payroll	\$ 42,670,479	\$ 45,121,715	\$ 48,530,578	\$ 52,963,804	\$ 60,290,013	\$ 61,707,726	\$ 65,964,267	\$ 75,249,772
Net OPEB Asset/Liability as a Percentage of Covered Payroll	-4.14%	-4.06%	-7.93%	-3.23%	-0.19%	4.22%	8.83%	8.85%

This schedule is presented as of the measurement date for the fiscal year (e.g., September 30, 2023 measurement date information for September 30, 2024 fiscal year.)

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Schedules of the Hospital's OPEB Contributions Years Ended September 30

	2023	2022	2021	2020	2019	2018	2017	2016
Actuarially determined contribution	\$	- \$ -	\$ -	\$ 23,795	\$ 519,112	\$ 937,045	\$ 1,007,606	\$ 1,066,717
Contributions in relation to the actuarially determined contribution			294,905	366,510	2,603,916	711,140	1,493,457	1,595,051
Contribution (excess) deficiency	\$	\$	\$ (294,905)	\$ (342,715)	\$ (2,084,804)	\$ 225,905	\$ (485,851)	\$ (528,334)
Covered payroll	\$ 42,670,47	9 \$ 45,121,715	\$ 48,530,578	\$ 52,963,804	\$ 131,576,632	\$ 129,156,605	\$ 146,557,573	\$ 142,288,906
Contributions as a percentage of covered payroll	0	% 0%	1%	1%	2%	1%	1%	1%

This schedule is presented on a fiscal year-end basis.

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Schedules of the Hospital's OPEB Contributions Years Ended September 30

Methods and assumptions used to determine contribution rates: Valuation date: October 1, 2023

Remaining amortization period: 20 years (open)

	2024	2023	2022	2021	2020	2019	2018	2017	2016
Actuarial cost method	Entry age method	Entry age method	Entry age method	Entry age method	Entry age method	Entry age method	Entry age method	Entry age method	Entry age method
Amortization method	Level percentage of pay, closed method	Level percentage of pay, closed method	Level percentage of pay, closed method	Level percentage of pay, closed method	Level percentage of pay, closed method				
Asset valuation method	Fair market value	Fair market value	Fair market value	Fair market value	Fair market value				
Inflation	2.5%	2.5%	2.5%	2.5%	2.5%	2.5%	2.5%	2.5%	2.5%
Healthcare cost trend rates	7.0% to grade uniformly to 5.6% over a 3-year period, to ultimate rate of 4.04% in 2075	6.5% to grade uniformly to 5.2% over a 3-year period, to ultimate rate of 3.94% in 2075	6.0% to grade uniformly to 5.5% over a 2-year period, to ultimate rate of 4.04% in 2075	8.0% to grade uniformly to 3.5% over a 3-year period, to ultimate rate of 3.94% in 2075	8.0% to grade uniformly to 3.5% over a 3-year period, to ultimate rate of 3.94% in 2075	8.0% to grade uniformly to 3.5% over a 3-year period, to ultimate rate of 3.94% in 2075	8.0% to grade uniformly to 5.0% over a 12-year period	8.0% to grade uniformly to 5.0% over a 12-year period	8.0% to grade uniformly to 5.0% over a 12-year period
Salary increases	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%	3.0%
Investment rate of return	6.0%, net of investment expense, including inflation	6.0%, net of investment expense, including inflation	6.0%, net of investment expense, including inflation	6.0%, net of investment expense, including inflation	6.0%, net of investment expense, including inflation				
Retirement Age	65	65	65	65	65	65	65	65	65
Mortality	125% of the PubG- 2010 Total Dataset Mortality Table, with Mortality Improvement Scale MP-2021	125% of the PubG- 2010 Total Dataset Mortality Table, with Mortality Improvement Scale MP-2021	125% of the PubG- 2010 Total Dataset Mortality Table, with Mortality Improvement Scale MP-2020	125% of the PubG- 2010 Total Dataset Mortality Table, with Mortality Improvement Scale MP-2019	RP-2000 Mortality Table, projected from the base year to the valuation year between 7 and 15 years beyond the valuation year under scale AA	IRS Static Mortality Table for the Year of Valuation (Separate Male/Female Tables)	IRS Static Mortality Table for the Year of Valuation (Separate Male/Female Tables)	IRS Static Mortality Table for the Year of Valuation (Separate Male/Female Tables)	IRS Static Mortality Table for the Year of Valuation (Separate Male/Female Tables)

Supplementary Information

Forrest County General Hospital A Component Unit of Forrest County, Mississippi Schedule of Surety Bonds for Official and Employees September 30, 2024

Name	Position	Company	Amount of Bond		
Jana Causey	Board Chairman	Travelers Casualty & Surety	\$	100,000	
Eric K. Steele	Board Vice Chairman	Travelers Casualty & Surety	\$	100,000	
Peggy Answorth	Board Secretary	Travelers Casualty & Surety	\$	100,000	
Andy Mercier	Board Member	Travelers Casualty & Surety	\$	100,000	
Dr. Marcus L. Hogan	Board Member	Travelers Casualty & Surety	\$	100,000	
Shea McNease	Board Member	Travelers Casualty & Surety	\$	100,000	
Chip McArthur	Board Member	Travelers Casualty & Surety	\$	100,000	
Employee Blanket Bond	All Others	Travelers Casualty & Surety	\$	100,000	

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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* – Independent Auditor's Report

Board of Trustees Forrest County General Hospital Hattiesburg, Mississippi

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States, the financial statements of the business-type activities and the fiduciary activities of Forrest County General Hospital (the Hospital) as of and for the year ended September 30, 2024, and the related notes to the financial statements, which collectively comprise the Hospital's basic financial statements, and have issued our report thereon dated November 22, 2024. Our report includes a reference to other auditors who audited the financial statements of the Forrest County General Hospital Pension Plan, a fiduciary component unit of the Hospital, as described in our report on the Hospital's financial statements. This report does not include the results of the other auditors' testing of internal control over financial reporting or compliance and other matters that are reported on separately by those auditors.

Report on Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered the Hospital's internal control over financial reporting (internal control) as a basis for designing 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 an opinion on the effectiveness of the Hospital's internal control. Accordingly, we do not express an opinion on the effectiveness of the Hospital'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 Hospital's financial statements will not be prevented, or detected and corrected, on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control 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 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 or significant deficiencies may exist that were not identified.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Hospital's financial statements are free from material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect on the financial statements. 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

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

Forvis Mazars, LLP

Jackson, Mississippi November 22, 2024