

Atikokan General Hospital
Financial Statements
March 31, 2021

Atikokan General Hospital
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Management's Responsibility for Financial Reporting

To the Board of Directors of Atikokan General Hospital:

The accompanying financial statements of the Atikokan General Hospital and all the information provided in the annual report are the responsibility of management and have been approved by the Board of Directors.

The financial statements have been prepared by management in accordance with Canadian public sector accounting standards. Financial statements are not precise since they include certain amounts based on estimates and judgements. When alternative accounting methods exist, management has chosen those it deems appropriate in the circumstances, in order to ensure their financial statements are presented fairly, in all material respects.

The Hospital maintains systems of internal accounting and administrative controls of high quality, consistent with reasonable cost. Such systems are designed to provide reasonable assurance that the financial information is relevant, reliable and accurate and the Hospital's assets are appropriately accounted for and adequately safeguarded.

The Board of Directors are responsible for ensuring that management fulfills its responsibilities for financial reporting and is ultimately responsible for reviewing and approving the financial statements.

The Board of Directors review the Hospital's financial statements and recommend their approval. The Board of Directors meet periodically with management, as well as the external auditors, to discuss internal controls over the financial reporting issues, to satisfy themselves that each party is properly discharging their responsibilities, and to review the annual report, the financial statements and the external auditor's report. The Board of Directors takes this information into consideration when approving the financial statements for issuance to the members. The Board of Directors also considers the engagement of the external auditors.

The financial statements have been audited by MNP LLP in accordance with Canadian generally accepted auditing standards on behalf of the members. MNP LLP has full access to the Board of Directors.


Board Chair


Chief Executive Officer

Independent Auditor's Report

To the Board of Directors of Atikokan General Hospital:

Opinion

We have audited the financial statements of Atikokan General Hospital (the "Hospital"), which comprise the statement of financial position as at March 31, 2021, and the statements of operations, changes in net assets, remeasurement gains and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Hospital as at March 31, 2021, and the results of its operations, its remeasurement gains and its cash flows for the year then ended in accordance with Canadian public sector accounting standards.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. 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 independent of the Hospital in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Matter

The supplementary information contained in the schedules is presented for the purpose of additional analysis and is not part of the basic audited financial statements. The information in the schedules was derived from the accounting records tested in forming an opinion on the financial statements as a whole.

Other Information

Management is responsible for the other information. The other information comprises the information included in the Annual Report, but does not include the financial statements and our auditor's report thereon.

Our opinion on the financial statements does not cover the other information and we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. We obtained the Annual Report prior to the date of this auditor's report. If, based on the work we have performed on this other information, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of Management and Those Charged with Governance for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian public sector accounting standards, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Hospital's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Hospital or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Hospital's financial reporting process.

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 opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. 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.
- 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.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Hospital's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Hospital to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Thunder Bay, Ontario

June 23, 2021

MNP LLP

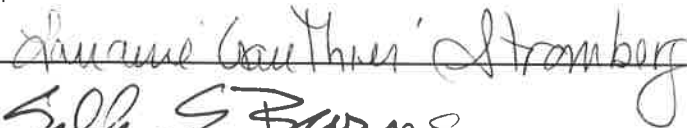
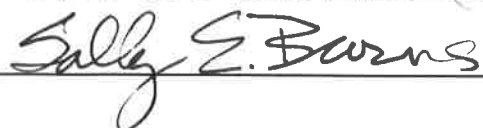
Chartered Professional Accountants

Licensed Public Accountants

**Atikokan General Hospital
Statement of Financial Position**

| As at March 31, | 2021 | 2020 |
|---|----------------------|----------------------|
| Current Assets | | |
| Cash (Note 2) | \$ 972,984 | \$ 343,505 |
| Short-Term Investments (Note 3) | 1,214,633 | 1,314,154 |
| Accounts Receivable (Note 4) | 1,172,596 | 592,046 |
| Inventories (Note 5) | 160,961 | 169,449 |
| Prepaid Expenses | 250,066 | 294,529 |
| Total Current Assets | 3,771,240 | 2,713,683 |
| Non-Current Assets | | |
| Long-Term Investments (Note 6) | 244,192 | 711,255 |
| Capital Assets (Note 7) | 15,279,933 | 15,522,048 |
| Total Non-Current Assets | 15,524,125 | 16,233,303 |
| Total Assets | \$ 19,295,365 | \$ 18,946,986 |
| Current Liabilities | | |
| Bank Loans (Note 2) | \$ - | \$ 330,000 |
| Accounts Payable (Note 8) | 1,636,682 | 1,507,980 |
| Other Liabilities | 20,000 | 4,905 |
| Total Current Liabilities | 1,656,682 | 1,842,885 |
| Long-Term Liabilities | | |
| Capital Reserve Deferred Revenue | 30,642 | 29,842 |
| Deferred Contributions (Note 9) | 1,103,591 | 1,103,591 |
| Deferred Capital Contributions (Note 10) | 13,057,089 | 12,767,243 |
| Post-Employment Benefits Liability (Note 13) | 858,100 | 863,900 |
| Total Long-Term Liabilities | 15,049,422 | 14,764,576 |
| Contingent Liabilities and Commitments (Note 11) | | |
| Net Assets | | |
| Invested in Capital Assets (Note 14) | 2,222,844 | 2,754,805 |
| Unrestricted | 264,352 | (465,264) |
| Accumulated Remeasurement Gains | 102,065 | 49,984 |
| Closing Net Assets Balance | 2,589,261 | 2,339,525 |
| Total Liabilities and Net Assets Balance | \$ 19,295,365 | \$ 18,946,986 |

Approved on behalf of the Board:


 _____ Director

 _____ Director

The accompanying notes are an integral part of these financial statements.

**Atikokan General Hospital
Statement of Operations**

| For the year ended March 31, | 2021 | 2020 |
|---|-------------------|---------------------|
| Revenue | | |
| Ministry of Health Base Allocation | \$ 8,282,748 | \$ 8,122,548 |
| Ministry of Health One-Time Payments (Note 19) | 1,059,614 | 71,340 |
| Hospital On-Call Coverage | 93,894 | 90,680 |
| Visiting Specialist Funding | 21,512 | - |
| Other Revenue (Schedule 1) | 1,518,644 | 1,460,838 |
| Amortization of Equipment Grants/Donations | 113,461 | 122,905 |
| Provision for Recoveries | (63,939) | - |
| Total Revenue | 11,025,934 | 9,868,311 |
| Expenses | | |
| Salaries and Wages (Schedule 2) | 6,258,685 | 5,701,253 |
| Employee Benefits (Schedule 3) | 1,577,326 | 1,619,976 |
| Employee Benefits Future Costs (Note 13) | (5,800) | (2,500) |
| Medical Staff Remuneration (Schedule 4) | 134,662 | 233,388 |
| Supplies and Other Expenses (Schedule 5) | 1,875,313 | 1,797,900 |
| Drugs and Medical Gases | 63,395 | 61,276 |
| Medical and Surgical Supplies | 443,416 | 207,810 |
| Bad Debts | 8,864 | 2,113 |
| Amortization of Software Licenses | 68,324 | - |
| Amortization of Equipment | 250,258 | 308,014 |
| Total Expenses | 10,674,443 | 9,929,230 |
| Surplus (Deficiency) of Revenue over Expenses from Hospital Operations | 351,491 | (60,919) |
| Other Items | | |
| Amortization of Building Grants/Donations | 411,295 | 392,402 |
| Amortization of Land Improvements and Building | (484,810) | (473,373) |
| Loss on Disposal of Capital Asset | (829) | (1,445) |
| | (74,344) | (82,416) |
| Other Votes and Programs - Revenues (Schedule 6) | 669,400 | 786,032 |
| Other Votes and Programs - Expenses (Schedule 6) | (607,529) | (801,291) |
| Other Votes and Programs - Provisions for Recovery (Schedule 6) | (141,363) | - |
| | (79,492) | (15,259) |
| Surplus (Deficiency) of Revenue over Expenses for the Year | \$ 197,655 | \$ (158,594) |

The accompanying notes are an integral part of these financial statements.

Atikokan General Hospital
Statement of Remeasurement Gains

| For the year ended March 31, | 2021 | 2020 |
|---|--------------------------|-------------------------|
| Accumulated remeasurement gains at the beginning of the year | \$ 49,984 | \$ 93,154 |
| Change in fair value attributable to: | | |
| Investments | 52,081 | (43,170) |
| Accumulated remeasurement gains at the end of the year | <u>\$ 102,065</u> | <u>\$ 49,984</u> |

The accompanying notes are an integral part of these financial statements.

Atikokan General Hospital
Statement of Changes in Net Assets

For the year ended March 31, 2021

| | Invested in Capital Assets | Unrestricted | 2021 Total |
|---|-------------------------------|-------------------|---------------------|
| Balance, beginning of year | \$ 2,754,805 | \$ (465,264) | \$ 2,289,541 |
| Excess (deficiency) of revenue over expenses for the year | (279,465) | 477,120 | 197,655 |
| Net changes in investment in capital assets (Note 14) | (252,496) | 252,496 | - |
| Balance, end of year | <u>\$ 2,222,844</u> | <u>\$ 264,352</u> | <u>\$ 2,487,196</u> |

For the year ended March 31, 2020

| | Invested in Capital Assets | Unrestricted | 2020 Total |
|---|-------------------------------|---------------------|---------------------|
| Balance, beginning of year | \$ 2,570,265 | \$ (122,130) | \$ 2,448,135 |
| Excess (deficiency) of revenue over expenses for the year | (267,525) | 108,931 | (158,594) |
| Net changes in investment in capital assets (Note 14) | 452,065 | (452,065) | - |
| Balance, end of year | <u>\$ 2,754,805</u> | <u>\$ (465,264)</u> | <u>\$ 2,289,541</u> |

The accompanying notes are an integral part of these financial statements.

Atikokan General Hospital
Statement of Cash Flows

For the year ended March 31,

2021

2020

Cash Provided By (Used In) Operating Activities

| | | | | |
|---|----|----------------|----|----------------|
| Excess (Deficiency) of Revenue over Expenses for the year | \$ | 197,655 | \$ | (158,594) |
| Items not involving cash | | | | |
| Amortization | | 803,392 | | 781,387 |
| Amortization of Deferred Capital Contributions | | (524,756) | | (515,307) |
| Amortization of Capital Reserve Fund | | - | | (3,549) |
| Loss on disposal of assets | | 829 | | 1,445 |
| | | <u>477,120</u> | | <u>105,382</u> |

Changes in Non-Cash Working Capital Balances

| | | | | |
|--------------------------|--|------------------|--|----------------|
| Accounts Receivable | | (580,550) | | 374,206 |
| Inventory | | 8,488 | | 11,707 |
| Prepaid Expenses | | 44,463 | | (15,613) |
| Accounts Payable | | 128,702 | | (247,980) |
| Other Liabilities | | 15,095 | | (30,180) |
| Deferred Contributions | | - | | 4,000 |
| Post-employment Benefits | | (5,800) | | (2,500) |
| | | <u>(389,602)</u> | | <u>93,640</u> |
| | | <u>87,518</u> | | <u>199,022</u> |

Financing Activities

| | | | | |
|-----------------------|--|------------------|--|---------|
| Short-Term Borrowings | | <u>(330,000)</u> | | 330,000 |
|-----------------------|--|------------------|--|---------|

Investing Activities

| | | | | |
|-------------------------|--|----------------|--|---------|
| Decrease in Investments | | <u>618,665</u> | | 123,837 |
|-------------------------|--|----------------|--|---------|

Capital Activities

| | | | | |
|---|--|----------------|--|------------------|
| Purchase of Capital Assets | | (562,957) | | (738,313) |
| Contributions Received for Capital Activities | | 814,601 | | 285,248 |
| Proceeds on disposal | | 852 | | 1,000 |
| Contribution of reserve fund | | 800 | | 800 |
| | | <u>253,296</u> | | <u>(451,265)</u> |

Increase in Cash and Equivalents

| | | | | |
|-------------------------|----|----------------|----|----------------|
| Cash, Beginning of year | | 343,505 | | 141,911 |
| Cash, End of year | \$ | <u>972,984</u> | \$ | <u>343,505</u> |

Supplemental Disclosure

| | | | | |
|-------------------|----|--------|----|-------|
| Interest Received | \$ | 46,138 | \$ | 6,271 |
|-------------------|----|--------|----|-------|

The accompanying notes are an integral part of these financial statements.

March 31, 2021

1. Significant Accounting Policies

Nature and Purpose of Organization

Atikokan General Hospital ("the Hospital") provides health care services to the residents of the Municipality of Atikokan and surrounding areas. The Hospital, incorporated without share capital under the Corporations Act of Ontario, is a charitable organization within the meaning of the Income Tax Act and, as such, is exempt from Income Taxes under the Income Tax Act.

In addition to the Hospital's operating fund which reflects the activities of the day to day operations of the Hospital, the financial statements also include the activities of the following programs:

Ministry of Health

- Community Mental Health Program
- Community Addictions Program
- Community Problem Gambling Program
- Rent Supplement Program
- Case Management

The operating results of these programs are recorded in Schedule 6 to the financial statements and the assets and liabilities of these programs appear on the statement of financial position of the Hospital. Program surpluses and deficits are recorded as repayable or receivable in the year incurred and settlement adjustments by the Ministries or other funders are recorded when settled.

Basis of Accounting and Presentation

The financial statements of the Hospital have been prepared in accordance with Canadian public sector accounting standards for government not-for-profit organizations, including the 4200 series of standards, as issued by the Public Sector Accounting Board.

The Atikokan General Hospital Foundation is a separate entity whose financial information is reported separately from the Hospital.

Capital Assets

Purchased capital assets are recorded at cost less accumulated amortization. Contributed capital assets are recorded at fair value at the date of contribution. Repairs and maintenance costs are charged to expense. Betterments that extend the estimated useful life of an asset are capitalized.

Construction-in-progress is not amortized until construction is substantially complete and the assets are ready for use.

Capital assets are capitalized on acquisition and amortized on a straight-line basis over their useful lives, which has been estimated to be as follows:

| | |
|-------------------------------|----------------|
| Land Improvements | 10 years |
| Buildings | 10 to 40 years |
| Building Service Equipment | 10 years |
| Equipment | 5 to 10 years |
| Information Systems Equipment | 3 to 5 years |

Deferred Contributions Related to Capital Assets

Deferred contributions related to capital assets represent the unamortized portion of contributed capital assets and restricted contributions that were used to purchase the Hospital's capital assets. Recognition of these amounts as revenue is deferred to periods when the related capital assets are amortized.

March 31, 2021

1. Significant Accounting Policies (continued)

Revenue Recognition

The Hospital follows the deferral method of accounting for contributions, which include donations and government grants.

Under the Health Insurance Act and Regulations thereto, the Hospital is funded primarily by the Province of Ontario in accordance with accountability arrangements established by the Ministry of Health ("MOH"), and the Local Health Integration Network ("LHIN"). The Hospital has entered into a Hospital Service Accountability Agreement (the "H-SAA") for fiscal 2021 with the MOH and LHIN that sets out the rights and obligations of the parties to the H-SAA in respect of funding provided to the Hospital by the MOH/LHIN. The H-SAA also sets out the performance standards and obligations of the Hospital that establish acceptable results for the Hospital's performance in a number of areas.

If the Hospital does not meet its performance standards or obligations, the MOH/LHIN has the right to adjust funding received by the Hospital. The MOH/LHIN is not required to communicate certain funding adjustments until after the submission of year-end data. Since this data is not submitted until after the completion of the financial statements, the amount of MOH/LHIN funding received by the Hospital during the year may be increased or decreased subsequent to year-end.

Contributions approved but not received at year-end are accrued. Where a portion of a contribution relates to a future period, it is deferred and recognized in that subsequent period.

Unrestricted contributions are recognized as revenue in the year received or receivable if the amount can be reasonably estimated and collection is reasonably assured.

Restricted contributions related to general operations are recognized as revenue in the year in which the related expenses are incurred.

Restricted contributions for the acquisition of capital assets are deferred and amortized into revenue at a rate corresponding with the amortization rate for the related capital assets.

Unrestricted investment income is recognized when earned. Restricted investment income is recognized in the year in which the related expenses are recognized.

Patient related revenues are recognized as revenue when services are rendered and the amount to be received can be reasonably estimated and collection is reasonably assured.

Recoveries are recognized as revenue when the amount of the recovery can be reasonably estimated and collection is reasonably assured.

Contributed Services

There are a substantial number of volunteers who contribute a significant amount of their time each year to Atikokan General Hospital. The fair value of these contributed services is not readily determinable and, as such, is not reflected in these financial statements.

Cash and Cash Equivalents

Cash and cash equivalents include balances with a chartered bank and cash on hand. Cash subject to restrictions that prevent its use for current purposes is included in restricted.

Inventories

Inventories are stated at the lower of cost and net replacement value. Cost is determined on a First-In, First-Out basis. Inventories consist of medical and general supplies that are used in the Hospital's operations and not for resale purposes.

March 31, 2021

1. Significant Accounting Policies (continued)

Financial Instruments

The Hospital classifies its financial instruments as either fair value or amortized cost. The Hospital's accounting policy for each category is as follows:

Fair Value

This category includes cash and investments. Financial instruments in this category are initially recognized at cost and subsequently carried at fair value. Changes in fair value are recognized in the statement of remeasurement gains and losses until they are realized, when they are transferred to the statement of operations.

Transaction costs related to financial instruments in the fair value category are expensed as incurred.

Where a decline in fair value is determined to be other than temporary, the amount of the loss is removed from accumulated remeasurement gains and losses and recognized in the statement of operations. On sale, the amount held in accumulated remeasurement gains and losses associated with that instrument is removed from net assets and recognized in the statement of operations.

Amortized Cost

This category includes accounts receivable and accounts payable. They are initially recognized at cost and subsequently carried at amortized cost using the effective interest rate method, less any impairment losses on financial assets.

Transaction costs related to financial instruments in the amortized cost category are added to the carrying value of the instrument.

Write-downs on financial assets in the amortized cost category are recognized when the amount of a loss is known with sufficient precision, and there is no realistic prospect of recovery. Financial assets are then written down to net recoverable value with the write-down being recognized in the statement of operations.

Deferred Revenue

Deferred revenue is received from contributors who have restricted use of the funds for specific purposes. Recognition of these amounts as revenue is deferred to periods when the specific expenditures are made.

Retirement and Post-employment Benefits

The Hospital provides defined retirement and post-employment benefits to certain employee groups. These benefits include pension and health and dental. The Hospital has adopted the following policies with respect to accounting for these employee benefits:

- i) The costs of post-employment future benefits are actuarially determined using management's best estimate of health care costs, and discount rates. Adjustments to these costs arising from changes in estimates and experience gains and losses are amortized to income over the estimated average remaining service life of the employee groups on a straight-line basis. Plan amendments, including past service costs are recognized as an expense in the period of the plan amendment.
- ii) The costs of the multi-employer defined benefit pension plan are the employer's contributions due to the plan in the period.
- iii) The discount rate used in the determination of the above mentioned liabilities is equal to the Hospital's internal rate of borrowing.

March 31, 2021

1. Significant Accounting Policies (continued)

Use of Estimates

The preparation of financial statements in conformity with Canadian public sector accounting standards requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenue and expenses during the reporting period.

Accounts receivable are stated after evaluation as to their collectability and an appropriate allowance for doubtful accounts is provided where considered necessary.

Accounts payable and accruals are estimated based on historical charges for unbilled goods and services at year-end.

Deferred contributions related to capital assets and capital asset amortization are based on the estimated useful lives of capital assets.

Employee future benefits are based on actuarial valuations.

These estimates and assumptions are reviewed periodically and, as adjustments become necessary they are reported in excess of revenue over expenses in the periods in which they become known.

Long-lived Assets and Discontinued Operations

Long-lived assets consist of capital assets. Long-lived assets held for use are measured and amortized as described in the applicable accounting policies. When the Hospital determines that a long-lived asset no longer has any long-term service potential to the Hospital, the excess of its net carrying amount over any residual value is recognized as an expense in the statement of operations. Write-downs are not reversed.

2. Cash

The Hospital has an overall credit facility of \$400,000, including a revolving line of credit bearing interest at prime (2.45% at year-end), repayable on demand, and corporate Visas repayable on demand and in accordance with standard terms and conditions. As at March 31, 2021, \$Nil (2020 - \$330,000) has been drawn upon this operating line of credit.

3. Short-Term Investments

| | 2021 | 2020 |
|--|---------------------|---------------------|
| High Interest Savings Account | \$ 799,407 | \$ 70,109 |
| Guaranteed Investment Certificates (GICs) with interest rates ranging from 0.4% to 2.65% and maturity dates from August 2021 to January 2022 | 415,226 | 1,244,045 |
| | \$ 1,214,633 | \$ 1,314,154 |

4. Accounts Receivable

| | 2021 | 2020 |
|-------------------------------------|---------------------|-------------------|
| Ministry of Health | \$ 737,704 | \$ - |
| Insurers and Patients | 68,790 | 65,545 |
| Community-Based Laboratory Services | 87,647 | 170,000 |
| Physician Incentive Loans | 51,390 | 68,520 |
| HST Rebate | 161,256 | 212,784 |
| Other | 65,809 | 75,197 |
| | \$ 1,172,596 | \$ 592,046 |

**Atikokan General Hospital
Notes to Financial Statements**

March 31, 2021

| 5. Inventories | 2021 | 2020 |
|---------------------------|-------------------|-------------------|
| Opening Balance, April 1 | \$ 169,449 | \$ 181,156 |
| Purchases | 500,279 | 258,940 |
| Expensed | (508,767) | (270,647) |
| Closing Balance, March 31 | <u>\$ 160,961</u> | <u>\$ 169,449</u> |

| 6. Long-Term Investments | 2021 | 2020 |
|---|-------------------|-------------------|
| Pooled and mutual funds (cost - \$142,127) | \$ 244,192 | \$ 311,255 |
| Guaranteed Investment Certificates (GIC) with interest rate of 2.65% and a maturity date of September 2021. | - | 400,000 |
| | <u>\$ 244,192</u> | <u>\$ 711,255</u> |

| 7. Capital Assets | 2021 | | 2020 | |
|-------------------------------|----------------------|-----------------------------|----------------------|-----------------------------|
| | Cost | Accumulated Amortization | Cost | Accumulated Amortization |
| Land | \$ 25,234 | \$ - | \$ 25,234 | \$ - |
| Land Improvements | 316,966 | 213,256 | 312,750 | 192,237 |
| Buildings | 17,839,382 | 5,145,256 | 17,839,382 | 4,786,216 |
| Building Service Equipment | 1,947,735 | 757,104 | 1,728,919 | 652,353 |
| Work-in-Progress | 191,601 | - | 232,050 | - |
| Equipment | 4,211,510 | 3,136,879 | 4,054,490 | 3,043,814 |
| Information Systems Equipment | 326,038 | 326,038 | 261,557 | 257,714 |
| | <u>\$ 24,858,466</u> | <u>\$ 9,578,533</u> | <u>\$ 24,454,382</u> | <u>\$ 8,932,334</u> |
| Net Book Value | | <u>\$ 15,279,933</u> | | <u>\$ 15,522,048</u> |

During the year, capital assets were acquired with an aggregate cost of \$562,957 (2020 - \$738,313) using provincial grant funding of \$354,608, donations of \$31,806 and operating cash of \$176,543.

| 8. Accounts Payable | 2021 | 2020 |
|--------------------------------|---------------------|---------------------|
| Trade | \$ 476,859 | \$ 484,518 |
| Accrued Salaries and Benefits | 728,876 | 724,694 |
| Other | 21,067 | 48,584 |
| Ministry of Health | | |
| Community Counselling Services | 208,616 | 67,258 |
| Visiting Specialist Program | 61,512 | 40,000 |
| Episode of Care | 107,952 | 65,520 |
| Hospital On Call Coverage | - | 45,336 |
| Other | 31,800 | 32,070 |
| | <u>\$ 1,636,682</u> | <u>\$ 1,507,980</u> |

March 31, 2021

9. Deferred Contributions

Deferred contributions represent unspent externally restricted funding that has been received and relates to a subsequent year. Changes in the contributions deferred to future periods are as follows:

| | 2021 | 2020 |
|--|--------------|--------------|
| Balance, beginning of year | \$ 1,103,591 | \$ 1,099,591 |
| Contributions received during the year | - | 4,000 |
| Amounts recognised as revenue | - | - |
| Balance, end of year | \$ 1,103,591 | \$ 1,103,591 |

Deferred contributions are comprised of:

| | 2021 | 2020 |
|----------------------------|--------------|--------------|
| General Donations | \$ 10,129 | \$ 10,129 |
| Deferred provincial grants | 32,039 | 32,039 |
| Rainycrest Long-Term Care | 1,061,423 | 1,061,423 |
| | \$ 1,103,591 | \$ 1,103,591 |

10. Deferred Capital Contributions

Deferred capital contributions represent the unamortized amount and unspent amount of donations and grants received for the purchase of capital assets. The amortization of capital contributions is recorded as revenue in the statement of operations. Changes in the contributions capital deferred to future periods are as follows:

| | 2021 | 2020 |
|---------------------------------|---------------|---------------|
| Balance, beginning of year | \$ 12,767,243 | \$ 12,997,302 |
| Grants received during the year | 814,601 | 285,248 |
| Amortization | (524,755) | (515,307) |
| Balance, end of year | \$ 13,057,089 | \$ 12,767,243 |

As at March 31, 2021 there was \$205,000 (2020 - \$205,000) of deferred capital contributions received which were not yet utilized.

11. Contingent Liabilities and Commitments

Atikokan General Hospital is a member of Health Care Insurance Reciprocal of Canada ("HIROC"). HIROC is a pooling of the public liability insurance risks of its members. All members of the pool pay annual premiums which are actuarially determined. All members are subject to reassessment for losses, if any, experienced by the pool for the years in which they are members and losses could be material. The Hospital joined HIROC in 1998 and no reassessments have been made to March 31, 2021.

The outcome of claims now pending is not determinable and is not expected to be material.

12. Economic Dependence

The Hospital receives the majority of its funding from the Ministry of Health and is therefore economically dependent on its government department.

March 31, 2021

13. Post-Employment Benefits Liability

The following tables outline the components of the Hospital's post-employment benefits and the related expenses.

| | 2021 | 2020 |
|----------------------------|------------|------------|
| Accrued benefit obligation | \$ 644,200 | \$ 576,100 |
| Unamortized actuarial gain | 213,900 | 287,800 |
| Total Liability | \$ 858,100 | \$ 863,900 |

| | 2021 | 2020 |
|---|------------|------------|
| Current year benefits costs | \$ 35,600 | \$ 36,900 |
| Amortized actuarial gains | (23,100) | (20,100) |
| Interest on accrued benefit obligation | 22,200 | 19,800 |
| Reconciliation of plan funds (benefit payments) | (40,500) | (39,100) |
| | \$ (5,800) | \$ (2,500) |

Above amounts exclude pension contributions to the Hospitals of Ontario Pension Plan ("HOOPP"), a multi-employer plan, described below.

Retirement Benefits

Substantially all of the full-time employees and some of the part-time employees are members of HOOPP. The plan is a multi-employer plan and therefore the Hospital's contributions are accounted for as if the plan were a defined contribution plan with the Hospital's contributions being expensed in the period they become due. Contributions made to the plan during the year by the Hospital amounted to \$520,607 (2020 - \$494,835).

Post-employment Benefits

The Hospital extends post-employment life insurance, health and dental benefits to certain employee groups subsequent to their retirement. The Hospital recognizes these benefits as they are earned during the employee's tenure of service. The related benefit liability was determined by an actuarial valuation study.

The major assumptions employed for the valuations are as follows:

a) Discount Rate

The present value as at March 31, 2021 of the future benefits was determined using a discount rate of 3.0% (2020 - 3.75%).

b) Extended Health Care Trend Rates

Extended health care costs were assumed to increase at 7.0% per annum in 2020 and decrease by 0.25% per annum thereafter to an ultimate rate of 5.0%.

c) Dental Costs

Dental costs were assumed to increase at 4.0% per annum.

**Atikokan General Hospital
Notes to Financial Statements**

March 31, 2021

14. Net Assets Invested in Capital Assets

a) Investment in capital assets is calculated as follows:

| | 2021 | 2020 |
|--|---------------|---------------|
| Capital Assets | \$ 15,279,933 | \$ 15,522,048 |
| Amounts financed by Deferred Contributions | (13,057,089) | (12,767,243) |
| | \$ 2,222,844 | \$ 2,754,805 |

b) The change in net assets invested in capital assets is calculated as follows:

| | 2021 | 2020 |
|---|--------------|--------------|
| Excess (deficiency) of revenue over expenses: | | |
| Amortization of Deferred Grants and Donations related to: | | |
| Equipment/Software Licenses | \$ 113,461 | \$ 122,905 |
| Buildings | 411,295 | 392,402 |
| Amortization related to: | | |
| Equipment/Software Licenses | (318,582) | (308,014) |
| Buildings | (484,810) | (473,373) |
| Loss on Disposal of Capital Assets | (829) | (1,445) |
| | \$ (279,465) | \$ (267,525) |

Net change in investment in capital assets:

| | 2021 | 2020 |
|---|--------------|------------|
| Purchase of Capital Assets | \$ 562,957 | \$ 738,313 |
| Amounts funded by Deferred Grants and Donations | (814,601) | (285,248) |
| Proceeds of Capital Asset Disposal | (852) | (1,000) |
| | \$ (252,496) | \$ 452,065 |
| | \$ (531,961) | \$ 184,540 |

15. Related Entity

Atikokan General Hospital Foundation (the "Foundation") is an independent corporation incorporated without share capital which has its own independent Board of Directors and is a registered charity under the Income Tax Act. The Foundation receives and maintains funds for charitable purposes, which it donates to the Hospital for use in operations, renovations, maintenance and equipment purchases of the Hospital.

The Foundation holds funds of approximately \$473,311, the benefit of which is to be used for capital projects or capital asset purchases of the Hospital. During the year, the Foundation contributed \$31,806 to the Hospital.

16. Financial Instrument Classification

The following table provides cost and fair value information of financial instruments by category. The maximum exposure to credit risk would be the carrying value as shown below.

| | 2021 | | |
|---------------------|--------------|-------------------|--------------|
| | Fair Value | Amortized Cost | Total |
| Cash | \$ 972,984 | \$ - | \$ 972,984 |
| Accounts Receivable | - | 1,172,596 | 1,172,596 |
| Investments | 1,458,825 | - | 1,458,825 |
| Accounts Payable | - | (1,636,682) | (1,636,682) |
| Other Liabilities | - | (20,000) | (20,000) |
| | \$ 2,431,809 | \$ (484,086) | \$ 1,947,723 |

**Atikokan General Hospital
Notes to Financial Statements**

March 31, 2021

16. Financial Instrument Classification (continued)

| | 2020 | | |
|---------------------|---------------------|---------------------|---------------------|
| | Fair Value | Amortized Cost | Total |
| Cash | \$ 343,505 | \$ - | \$ 343,505 |
| Accounts Receivable | - | 592,046 | 592,046 |
| Investments | 2,025,409 | - | 2,025,409 |
| Bank Loan | 330,000 | - | 330,000 |
| Accounts Payable | - | (1,507,980) | (1,507,980) |
| Other Liabilities | - | (4,905) | (4,905) |
| | <u>\$ 2,698,914</u> | <u>\$ (920,839)</u> | <u>\$ 1,778,075</u> |

The following table provides an analysis of financial instruments that are measured subsequent to initial recognition at fair value, grouped into Level 1 to Level 3 based on the degree to which the fair value is observable:

Level 1 fair value measurements are those derived from quoted prices (unadjusted) in active markets for identical assets or liabilities using the last bid price;

Level 2 fair value measurements are those derived from inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly (i.e. as prices) or indirectly (i.e. derived from prices); and

Level 3 fair value measurements are those derived from valuation techniques that include inputs for the asset or liability that are not based on observable market data (unobservable inputs).

| | 2021 | | | |
|-------------|---------------------|---------------------|-------------|---------------------|
| | Level 1 | Level 2 | Level 3 | Total |
| Cash | \$ 972,984 | \$ - | \$ - | \$ 972,984 |
| Investments | 244,192 | 1,214,633 | - | 1,458,825 |
| Total | <u>\$ 1,217,176</u> | <u>\$ 1,214,633</u> | <u>\$ -</u> | <u>\$ 2,431,809</u> |

| | 2020 | | | |
|-------------|-------------------|---------------------|-------------|---------------------|
| | Level 1 | Level 2 | Level 3 | Total |
| Cash | \$ 343,505 | \$ - | \$ - | \$ 343,505 |
| Investments | 311,255 | 1,714,154 | - | 2,025,409 |
| Total | <u>\$ 654,760</u> | <u>\$ 1,714,154</u> | <u>\$ -</u> | <u>\$ 2,368,914</u> |

There were no transfers between Level 1 and Level 2 for the years ended March 31, 2021 and 2020. There were also no transfers in or out of Level 3.

March 31, 2021

17. Financial Instrument Risk

Credit Risk

Credit risk is the risk of financial loss to the Hospital if a debtor fails to make payments of interest and principal when due. The Hospital is exposed to this risk relating to its cash, debt holdings in its investment portfolio and accounts receivable. The Hospital holds its cash accounts with a federally regulated chartered bank which is insured by the Canadian Deposit Insurance Corporation. In the event of default, the Hospital's cash accounts are insured up to \$100,000.

The Hospital's investment policy operates within the constraints of the investment guidelines issued by the MOH in relation to the funding agreements and puts limits on the investment portfolio including portfolio composition limits, issuer type limits, bond quality limits, aggregate issuer limits, corporate sector limits and general guidelines for geographic exposure.

The maximum exposure to investment credit risk is outlined in Notes 4 and 16.

Accounts receivable are primarily due from OHIP, the Ministry of Health and patients. Credit risk is mitigated by the financial solvency of the provincial government and the highly diversified nature of the patient population.

The Hospital measures its exposure to credit risk based on how long the amounts have been outstanding. Accounts received that are not considered to be collectible are written off at year-end based on the Hospital's historical experience regarding collections. The amounts outstanding at year-end were as follows:

| | 2021 | | Past Due | | | |
|-----------------------|---------------------|-------------------|-------------------|------------------|------------------|-------------------|
| | Total | Current | 1-30 | 31-60 | 61-90 | 91 + |
| MOH/LHIN | \$ 737,704 | \$ 737,704 | \$ - | \$ - | \$ - | \$ - |
| Insurers and Patients | 68,790 | - | 57,959 | 8,471 | 635 | 1,725 |
| Other | 366,102 | 121,116 | 43,904 | 38,415 | 10,000 | 152,667 |
| | <u>\$ 1,172,596</u> | <u>\$ 858,820</u> | <u>\$ 101,863</u> | <u>\$ 46,886</u> | <u>\$ 10,635</u> | <u>\$ 154,392</u> |

| | 2020 | | Past Due | | | |
|-----------------------|-------------------|-------------------|------------------|------------------|--------------|-------------------|
| | Total | Current | 1-30 | 31-60 | 61-90 | 91 + |
| MOH/LHIN | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| Insurers and Patients | 65,545 | - | 58,467 | 5,668 | 90 | 1,320 |
| Other | 526,501 | 254,125 | 32,046 | 31,810 | - | 208,520 |
| | <u>\$ 592,046</u> | <u>\$ 254,125</u> | <u>\$ 90,513</u> | <u>\$ 37,478</u> | <u>\$ 90</u> | <u>\$ 209,840</u> |

The amounts aged greater than 90 days owing from patients that have not had a corresponding impairment allowance setup against them are collectible based on the Hospital's past experience. Management has reviewed the individual balances and based on the credit quality of the debtors and their past history of payment. There have been no significant changes from the previous year in the exposure to risk or policies, procedures and methods used to measure the risk.

Market Risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate as a result of market factors. Market factors include three types of risk: interest rate risk, currency risk and equity risk. The Hospital is not exposed to significant currency risk as it does not transact materially in foreign currency. The Hospital is exposed to equity risks with regards to its investments in pooled and mutual funds and interest risk with its investments in bonds.

March 31, 2021

17. Financial Instrument Risk (continued)

Market Risk (continued)

There have been no significant changes from the previous year in the exposure to risk or policies, procedures and methods used to measure the risk.

Interest Rate Risk

Interest rate risk is the potential for financial loss caused by fluctuations in fair value or future cash flows of financial instruments because of changes in market interest rates. The Hospital is exposed to this risk through its interest bearing investments included in long-term investments.

There have been no significant changes from the previous year in the exposure to risk or policies, procedures and methods used to measure the risk.

Liquidity Risk

Liquidity risk is the risk that the Hospital will not be able to meet all cash outflow obligations as they come due. The Hospital mitigates this risk by monitoring cash activities and expected outflows through extensive budgeting and maintaining investments that may be converted to cash in the near-term if unexpected cash outflows arise. The follow table sets out the contractual maturities (representing undiscounted contractual cash-flows of financial liabilities):

| | 2021 | | | |
|-------------------------|---------------------|-----------------------|-------------|-------------|
| | Within 6 months | 6 months to 1 year | 1-5 years | > 5 years |
| Accounts payable | \$ 1,636,682 | \$ - | \$ - | \$ - |

| | 2020 | | | |
|------------------|--------------------|-----------------------|-----------|-----------|
| | Within 6 months | 6 months to 1 year | 1-5 years | > 5 years |
| Accounts payable | \$ 1,507,980 | \$ - | \$ - | \$ - |

There have been no significant changes from the previous year in the exposure to risk or policies, procedures and methods used to measure the risk.

18. COVID-19 Impacts

In response to COVID-19 and consistent with guidance provided by the MOH and other government agencies, the Hospital has implemented a number of measures to protect patients and staff from COVID-19. In addition, the Hospital has actively contributed towards the care of COVID-19 patients and the delivery of programs that protect public health.

The Hospital continues to respond to the pandemic and plans for continued operational and financial impacts during the 2022 fiscal year and beyond. Management has assessed the impact of COVID-19 and believes there are no significant financial issues that compromise its ongoing operations. The outcome and timeframe to a recovery from the current pandemic is highly unpredictable, thus it is not practicable to estimate and disclose its effect on future operations at this time.

March 31, 2021

19. Ministry of Health Pandemic Funding

In connection with the ongoing coronavirus pandemic (COVID-19), the MOH has announced a number of funding programs intended to assist hospitals with incremental operating and capital costs and revenue decreases resulting from COVID-19. In addition to these funding programs, the MOH is also permitting hospitals to redirect unused funding from certain programs towards COVID-19 costs, revenue losses and other budgetary pressures through a broad-based funding reconciliation.

While the MOH has provided guidance with respect to the maximum amount of funding potentially available to the Hospital, as well as criteria for eligibility and revenue recognition, this guidance continues to evolve and is subject to revision and clarification subsequent to the time of approval of these financial statements. The MOH has also indicated that all funding related to COVID-19 is subject to review and reconciliation, with the potential for adjustments during the subsequent fiscal year.

Management's estimate of MOH revenue for COVID-19 is based on the most recent guidance provided by MOH and the impacts of COVID-19 on the Hospital's operations, revenues and expenses. As a result of Management's estimation process, the Hospital has determined a range of reasonably possible amounts that are considered by Management to be realistic, supportable and consistent with the guidance provided by the MOH. However, given the potential for future changes to funding programs that could be announced by the MOH, the Hospital has recognized revenue related to COVID-19 based on the lower end of the range. Any adjustments to Management's estimate of MOH revenues will be reflected in the Hospital's financial statements in the year of settlement.

Details of the MOH funding for COVID-19 recognized as revenue in the current year are summarized below:

| | 2021 |
|---|---------------------|
| Funding for incremental COVID-19 operating expenses | \$ 531,439 |
| COVID-19 assessment centre funding | 197,615 |
| Pandemic pay funding | 241,639 |
| Other pandemic funding | 79,721 |
| Funding for revenue losses resulting from COVID-19 | 9,200 |
| | \$ 1,059,614 |

Details of MOH funding for COVID-19 recognized as revenue with Other Votes and Programs in the current year are summarized below:

| | |
|----------------------------|------------------|
| Mental health & addictions | \$ 10,000 |
|----------------------------|------------------|

In addition to the above, the Hospital has also recognized \$150,165 in MOH funding for COVID-19 related capital expenditures, which has been recorded as an addition to deferred capital contributions during the year.

Atikokan General Hospital
Schedule 1 - Other Revenue
(Unaudited)

| For the year ended March 31, | 2021 | 2020 |
|--|---------------------|---------------------|
| Inpatient Revenue | | |
| Non-Residents of Canada | \$ - | \$ 5,875 |
| Outpatient Revenue | | |
| Ontario Health Insurance Plan | \$ 113,120 | \$ 107,708 |
| Non-Residents of the Province and Canada | 73,836 | 45,234 |
| Workplace Safety & Insurance Board | 13,133 | 8,939 |
| Ambulance | 7,860 | 6,410 |
| | <u>\$ 207,949</u> | <u>\$ 168,291</u> |
| Co-Payment Revenue | | |
| ALC Patients | \$ 68,739 | \$ 63,471 |
| Extended Care Patients | 537,449 | 526,594 |
| | <u>\$ 606,188</u> | <u>\$ 590,065</u> |
| Differential Revenue | | |
| Acute Care Patients | \$ 21,096 | \$ 15,020 |
| Extended Care Patients | 49,351 | 42,979 |
| | <u>\$ 70,447</u> | <u>\$ 57,999</u> |
| Recoveries | | |
| Non-Patient Food Services | \$ 33,067 | \$ 32,801 |
| CCAC Recoveries | 15,770 | 15,393 |
| Compensation and Services | 453,339 | 440,633 |
| Donations | - | 400 |
| Municipal Government | 20,000 | 35,000 |
| Materials | 28,467 | 15,242 |
| Rentals | - | 5,770 |
| Miscellaneous | 83,417 | 93,369 |
| | <u>\$ 634,060</u> | <u>\$ 638,608</u> |
| Total Other Revenue | <u>\$ 1,518,644</u> | <u>\$ 1,460,838</u> |

Atikokan General Hospital
Schedule 2 - Salaries and Wages
(Unaudited)

| For the year ended March 31, | 2021 | 2020 |
|---------------------------------------|---------------------|---------------------|
| Patient Care | | |
| Inpatient Wards | \$ 1,339,148 | \$ 1,278,169 |
| Extended Care | 953,826 | 982,830 |
| Diabetes Education | 15,691 | 15,516 |
| Ambulatory Care | 729,947 | 532,161 |
| Laboratory | 347,919 | 344,845 |
| Diagnostic Imaging | 192,709 | 181,901 |
| Pharmacy | 67,804 | 67,353 |
| Clinical Nutrition | 61,276 | 57,377 |
| Therapeutic Services | 281,511 | 269,569 |
| Total Patient Care | \$ 3,989,831 | \$ 3,729,721 |
| Support Services | | |
| General Administration | \$ 812,111 | \$ 647,987 |
| Information System Support | 38,254 | 36,822 |
| Human Resources and Recruitment | 30,419 | 43,088 |
| Physical Plant | 220,891 | 222,727 |
| Environmental Services | 437,586 | 362,603 |
| Food Services | 394,802 | 384,430 |
| Patient Information | 147,822 | 150,694 |
| Marketed Services | 48,796 | 11,098 |
| Materials Management and Reprocessing | 138,173 | 112,083 |
| Total Support Services | \$ 2,268,854 | \$ 1,971,532 |
| Total Salaries and Wages | \$ 6,258,685 | \$ 5,701,253 |

Atikokan General Hospital
Schedule 3 - Employee Benefits
(Unaudited)

| For the year ended March 31, | 2021 | 2020 |
|---|---------------------|---------------------|
| Canada Pension Plan | \$ 256,348 | \$ 232,301 |
| Hospital Pension Plan | 483,075 | 454,595 |
| Employment Insurance | 97,879 | 94,753 |
| Workplace Safety & Insurance Board | 73,967 | 83,757 |
| Long-Term Disability Insurance | 86,102 | 79,678 |
| Employer Health Tax | 121,742 | 113,789 |
| Extended Health Care Insurance | 106,192 | 111,269 |
| Dental Insurance | 74,461 | 76,923 |
| Group Life and Accidental Death & Dismemberment | 23,314 | 23,478 |
| Termination Benefits | 82,482 | 183,464 |
| Benefit and Vacation % in Lieu | 171,764 | 165,969 |
| Total Employee Benefits | \$ 1,577,326 | \$ 1,619,976 |

Atikokan General Hospital
Schedule 4 - Medical Staff Remuneration
(Unaudited)

| For the year ended March 31, | 2021 | 2020 |
|---|-------------------|-------------------|
| Honorariums | \$ 25,276 | \$ 25,000 |
| Hospital On Call Coverage | 48,558 | 136,016 |
| Clinical Laboratory | 18,357 | 21,136 |
| Imaging | 42,471 | 51,236 |
| Total Medical Staff Remuneration | \$ 134,662 | \$ 233,388 |

Atikokan General Hospital
Schedule 5 - Supplies and Other Expenses
(Unaudited)

| For the year ended March 31, | 2021 | 2020 |
|--|---------------------|---------------------|
| Patient Care | | |
| Inpatient Wards | \$ 68,258 | \$ 85,083 |
| Extended Care | 127,721 | 113,167 |
| Diabetes Education | 4,477 | 10,000 |
| Ambulatory Care | 35,188 | 40,790 |
| Laboratory | 142,668 | 141,076 |
| Diagnostic Imaging | 77,559 | 87,946 |
| Pharmacy | 14,925 | 10,844 |
| Clinical Nutrition | 920 | 1,873 |
| Therapeutic Services | 26,961 | 17,432 |
| Total Patient Care | \$ 498,677 | \$ 508,211 |
| Support Services | | |
| General Administration | \$ 307,709 | \$ 320,748 |
| Information System Support | 243,816 | 238,594 |
| Human Resources and Recruitment | 3,900 | 59,335 |
| Physical Plant | 436,638 | 363,059 |
| Environmental Services | 56,059 | 52,043 |
| Food Services | 151,906 | 163,516 |
| Patient Information | 2,695 | 3,595 |
| Health System Development | 144,538 | 17,275 |
| Marketed Services | 18,406 | 59,474 |
| Materials Management | 10,969 | 12,050 |
| Total Support Services | \$ 1,376,636 | \$ 1,289,689 |
| Total Supplies and Other Expenses | \$ 1,875,313 | \$ 1,797,900 |

Atikokan General Hospital
Schedule 6 - Other Votes and Programs
(Unaudited)

| | Substance Abuse | Problem Gambling | Community Mental Health Program | Administration | Rent Supplement | Municipal Taxes | For the year ended March 31, 2021 | For the year ended March 31, 2020 |
|--|--------------------|------------------|---------------------------------|---------------------|------------------|-----------------|-----------------------------------|-----------------------------------|
| Revenue | | | | | | | | |
| MOH/LHIN Funding | \$ 69,421 | \$ 92,963 | \$ 477,407 | \$ - | \$ 11,772 | \$ 3,075 | \$ 654,638 | \$ 750,062 |
| MOH/LHIN One-Time Funding | - | - | 10,000 | - | - | - | 10,000 | 15,000 |
| Other Revenue and Recoveries | - | - | 4,762 | - | - | - | 4,762 | 20,970 |
| Total Revenue | \$ 69,421 | \$ 92,963 | \$ 492,169 | \$ - | \$ 11,772 | \$ 3,075 | \$ 669,400 | \$ 786,032 |
| Operating Expenses | | | | | | | | |
| Salaries and Wages | \$ 107,085 | \$ 42,668 | \$ 174,260 | \$ 96,398 | \$ - | \$ - | \$ 420,411 | \$ 442,649 |
| Employee Benefits | 22,462 | 10,465 | 43,543 | 25,391 | - | - | 101,861 | 112,269 |
| Purchased Services | - | - | - | - | - | - | - | 71,150 |
| Medical Staff Remuneration | - | - | 4,985 | - | - | - | 4,985 | 23,770 |
| Supplies and Other Expenses | 640 | - | 13,823 | 24,674 | 8,072 | - | 47,209 | 141,231 |
| Buildings & Grounds | - | - | 6,210 | 23,778 | - | 3,075 | 33,063 | 10,222 |
| Total Operating Expenses | \$ 130,187 | \$ 53,133 | \$ 242,821 | \$ 170,241 | \$ 8,072 | \$ 3,075 | \$ 607,529 | \$ 801,291 |
| Net Revenue (Expense) | \$ (60,766) | \$ 39,830 | \$ 249,348 | \$ (170,241) | \$ 3,700 | \$ - | \$ 61,871 | \$ (15,259) |
| Administration Allocation | (18,726) | (25,536) | (125,979) | 170,241 | - | - | - | - |
| Net Revenue (Expense) Before Amount Repayable | (79,492) | 14,294 | 123,369 | - | 3,700 | - | 61,871 | (15,259) |
| Amount Repayable to Ministry of Health | - | (14,294) | (123,369) | - | (3,700) | - | (141,363) | - |
| Net Revenue (Expense) | \$ (79,492) | \$ - | \$ - | \$ - | \$ - | \$ - | \$ (79,492) | \$ (15,259) |

Atikokan General Hospital
Schedule 7 - Diabetes Education Program
(Unaudited)

| For the year ended March 31, | 2021 | 2020 |
|-------------------------------------|-------------------|------------------|
| Revenue | | |
| Ministry of Health Base Allocation | \$ 22,454 | \$ 31,375 |
| Operating Expenses | | |
| Salaries and Wages | \$ 15,691 | \$ 15,516 |
| Employee Benefits | 3,769 | 3,534 |
| Supplies and Other Expenses | 4,477 | 10,000 |
| Total Operating Expenses | \$ 23,937 | \$ 29,050 |
| Net Revenue (Expense) | \$ (1,483) | \$ 2,325 |