Independent Auditor's Report and Financial Statements
September 30, 2016 and 2015



Years Ended September 30, 2016 and 2015

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Independent Auditor's Report

Board of Managers Tarrant County Hospital District d/b/a JPS Health Network Fort Worth, Texas

We have audited the accompanying balance sheets of Tarrant County Hospital District d/b/a JPS Health Network (District), a component unit of Tarrant County, Texas, as of September 30, 2016 and 2015, and the related statements of revenues, expenses and changes in net position and cash flows for the years then ended, and the related notes to the financial statements, which collectively comprise the District's basic financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

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

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



Board of Managers Tarrant County Hospital District d/b/a JPS Health Network Page 2

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of the District as of September 30, 2016 and 2015, and the changes in its financial position and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Other Matters

Required Supplementary Information

Accounting principles generally accepted in the United States of America require that the management's discussion and analysis and pension information listed in the table of contents be presented to supplement the basic financial statements. Such information, although not part of the basic financial statements, is required by the Governmental Accounting Standards Board, who considers it to be an essential part of financial reporting for placing the basic financial statements in an appropriate operational, economic or historical context. We have applied certain limited procedures to the required supplementary information in accordance with auditing standards generally accepted in the United States of America, which consisted of 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.

Other Information

Our audits were conducted for the purpose of forming an opinion on the basic financial statements as a whole. The other balance sheet and statement of revenues, expenses and changes in net position information listed in the table of contents is presented for purposes of additional analysis and is not a required part of the financial statements. Such information has not been subjected to the auditing procedures applied in the audit of the basic financial statements, and accordingly, we do not express an opinion or provide any assurance on it.

Dallas, Texas

BKD,LLP

December 20, 2017

Management's Discussion and Analysis Years Ended September 30, 2016 and 2015

(In Thousands)

Introduction

This management's discussion and analysis of the financial performance of Tarrant County Hospital District d/b/a JPS Health Network (District) provides an overview of the District's financial activities for the years ended September 30, 2016 and 2015. It should be read in conjunction with the accompanying financial statements of the District. Unless otherwise indicated, amounts are in thousands.

Financial Highlights

- Cash, short-term investments and other noncurrent investments increased in 2016 by \$67,976 or 13.4% and increased in 2015 by \$85,140 or 20.1%.
- The District's net position increased in each of the past two years with a \$18,564 or 2.3% increase in 2016 and a \$51,763 or 6.8% increase in 2015.
- The District reported operating losses in both 2016 (\$313,269) and 2015 (\$266,599). The loss in 2016 increased by \$46,670 or 17.5%, as compared to the operating loss reported in 2015. The operating loss in 2015 decreased by \$7,931 or 2.9%, from the operating loss reported in 2014.
- Net nonoperating revenues increased by \$13,557 or 4.3% in 2016 compared to 2015 and increased by \$15,654 or 5.2% in 2015 compared to 2014.

Using This Annual Report

The District'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. These statements provide information about the activities of the District, including resources held by the District but restricted for specific purposes by creditors, contributors, grantors or enabling legislation. The District 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 District's resources and its activities in a way that helps answer this question. These statements include all restricted and unrestricted assets and all liabilities 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 District's net position and changes in them. The District's total net position—the difference between assets and liabilities—is one measure of the District's financial health or financial position. Over time, increases or decreases in the District's net position are an indicator of whether its financial health is improving or deteriorating. Other nonfinancial factors, such as changes in the District'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 District.

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 District's Net Position

The District's net position is the difference between its assets and liabilities reported in the balance sheets. The District's net position increased by \$18,564 (2.3%) in 2016 over 2015 and by \$51,763 (6.8%) in 2015 over 2014, as shown in *Table 1*:

Table 1: Assets, Deferred Outflows of Resources, Liabilities, Deferred Inflows of Resources and Net Position

	2016	2015	2014
Assets			
Cash and short-term investments	\$ 385,920	\$ 320,053	\$ 235,148
Patient accounts receivable, net	49,845	44,838	47,721
Other current assets	63,814	164,261	192,677
Capital assets, net	270,884	289,046	284,087
Other noncurrent assets	189,950	187,536	187,366
Total assets	960,413	1,005,734	946,999
Deferred Outflows of Resources	27,529	17,646	
Total assets and deferred			
ouflows of resources	\$ 987,942	\$ 1,023,380	\$ 946,999
Liabilities			
Long-term debt	\$ 40,092	\$ 43,307	\$ 46,045
Net pension liability	22,613	9,545	-
Other current and noncurrent liabilities	91,355	152,495	141,687
Total liabilities	154,060	205,347	187,732
Deferred Inflows of Resources	4,288	7,003	
Net Position			
Net investment in capital assets	227,824	239,983	233,599
Restricted expendable	2,008	1,646	1,735
Restricted nonexpendable	315	315	315
Unrestricted	599,447	569,086	523,618
Total net position	829,594	811,030	759,267
Total liabilities, deferred inflows of			
resources and net position	\$ 987,942	\$ 1,023,380	\$ 946,999

The most significant changes in the District's assets in 2016 is the increase in cash and investments and decrease in amounts due from the state of Texas under supplemental funding programs. Cash and investments increased by \$67,976 or 13.4% in 2016 over 2015. This is primarily due to timing of the funding payments from the Medicaid Disproportionate Share Program and the Medicaid Section 1115(a) demonstration (Waiver) funding pools, discussed more fully in *Note 3*. The related receivable decreased by \$99,551 or 72.6% in 2016 as compared to 2015.

Deferred outflows of resources increased \$9,883, or 56.0%, in 2016 as compared to 2015, primarily as a result of changes in actuarial assumptions and variances between expected and actual earnings on pension plan investments utilized in the valuation of the District's net pension liability as discussed more fully in *Note 13*.

The most significant change in the District's liabilities in 2016 is the decrease in other current and noncurrent liabilities. Other current liabilities decreased by \$60,812 or 40.6% in 2016 over 2015. This is primarily due to timing of the District's contributions to the pension plan and intergovernmental transfers related to the Medicaid Disproportionate Share Program and the Waiver funding pools, discussed more fully in *Note 13 and 3*, respectively.

The most significant change in the District's assets in 2015 was also an increase in cash and investments. Cash and investments increased by \$85,140 or 20.1% in 2015 over 2014. This was primarily due to a lower operating loss and increased property tax revenue. In addition, the District adopted GASB Statement No. 68 in 2015 which resulted in the recognition of a net pension liability and related deferred outflows and deferred inflows of resources. This is more fully described in *Note 13*.

Operating Results and Changes in the District's Net Position

In 2016, the District's net position increased by \$18,564 or 2.3%, as shown in *Table* 2. This increase is made up of several components and represents a decrease of 64.1% compared with the increase in net position for 2015 of \$51,656. The District's change in net position increased from \$28,371 in 2014 to \$51,656 in 2015.

Table 2: Operating Results and Changes in Net Position

	2016	2015	2014
Operating Revenues			
Net patient service revenue	\$ 368,255	\$ 337,394	\$ 299,019
Supplemental Medicaid funding	155,385	191,360	185,143
Other operating revenue	52,396	37,589	42,396
Total operating revenues	576,036	566,343	526,558
Operating Expenses			
Salaries and wages and employee benefits	492,324	443,293	408,976
Purchased services and professional fees	165,166	186,975	189,390
Supplies	151,182	126,017	124,201
Depreciation and amortization	39,715	38,817	40,084
Other operating expenses	40,918	37,840	38,437
Total operating expenses	889,305	832,942	801,088
Operating Loss	(313,269)	(266,599)	(274,530)
Nonoperating Revenues (Expenses)			
Property taxes	319,611	307,019	291,013
Contributed services	8,171	11,296	9,185
Investment return, interest expense and other	3,945	(145)	2,318
Total nonoperating revenues (expenses)	331,727	318,170	302,516
Excess of Revenues Over Expenses			
Before Capital Grants	18,458	51,571	27,986
Capital Grants	106	85	385
Increase in Net Position	\$ 18,564	\$ 51,656	\$ 28,371

Operating Losses

The first component of the overall change in the District's net position is its operating income or loss—generally, the difference between net patient service, supplemental Medicaid funding revenue and other operating revenues and the expenses incurred to perform those services. In each of the past three years, the District has reported an operating loss. This is consistent with the District's recent operating history as the District was formed and is operated primarily to serve lower income residents of Tarrant County. The District levies property taxes to provide sufficient resources to enable the facility to serve lower income and other residents.

The operating loss for 2016 increased by \$46,670 or 17.5% as compared to 2015. The primary components of the change are:

- An increase in net patient service revenue of \$30,861 or 9.1%
- A decrease in Medicaid supplemental funding of \$35,975 or 18.8%
- An increase in other operating revenue of \$14,807 or 39.4%
- A decrease in professional fees and purchased services of \$21,809 or 11.7%
- An increase in supplies expense of \$25,165 or 20.0%
- An increase in salary and related expenses of \$49,031 or 11.1%

The increase in net patient service revenue is primarily attributable to increases in volumes and the decrease in Medicaid supplemental funding revenue is primarily due to shifts in funding allocations and the impact of the overall planned decrease in Wavier funding pools for 2016.

The increase in other operating revenue is due in large part to increases in drug rebates associated with the pharmaceutical patient assistance program.

The decrease in professional fees and purchase services is primarily attributable to the reduction in intergovernmental transfers due to shifts in funding allocations and changes in costs associated with an indigent care affiliation agreement, discussed more fully in *Note 14*, in the current year.

The increase in supplies expense is primarily attributable to the costly drugs offered in the current year as well as increases in volumes. There are associated drug rebates received under the pharmaceutical patient assistance program to offset this expense.

The increase in salary and related expenses is due to wage increases resulting from the District's retention efforts and to the addition of full time equivalent employees to address increased volumes.

The operating loss for 2015 of \$266,599 was \$7,931 less than the operating loss of \$274,530 recognized in 2014. The District had an increase in net patient service revenue of \$38,375 and an increase in Texas Medicaid supplemental funding of \$6,217. Net patient service revenue increased as a result of changes in payer mix. The increase in Medicaid Supplemental Funding is due to the shifts in funding allocation methodology. Salaries and related expenses increased in 2015 by \$34,317 or 8.4%, as compared to 2014 due to retention efforts and the addition of full time equivalent employees. Other operating revenue decreased in 2015 by \$4,807 or 11.3% as compared to 2014, due to a decrease in funding from the Medicare and Medicaid Electronic Health Records Incentive Program.

Nonoperating Revenues and Expenses

Nonoperating revenues and expenses consist primarily of property taxes levied by the District, contributions and investment income and interest expense. The District held property tax rates steady in 2016, but an increase in overall property values as well as changes in estimated uncollectible property taxes resulted in a net increase in property tax revenue of \$12,592 or 4.1% from 2015 to 2016. Contributed services represent the difference between the value of services provided to the District's indigent patients by area physicians and the amount the District ultimately paid for those services. Contributed services decreased by \$3,125 or 27.7% in 2016 as compared to 2015. Contributed services fluctuate each year based on the costs associated with the physician services provided to the District's indigent patients.

Interest expense decreased by \$94 or 7.0% in 2016 as compared to 2015 due to a decrease in long-term debt and refinancing of the Series 2006 Bonds discussed in *Note 10*.

The District's Cash Flows

Changes in the District's cash flows are consistent with changes in operating losses and nonoperating revenues and expenses for 2016, 2015 and 2014, as discussed previously.

Capital Asset and Debt Administration

Capital Assets

At the end of 2016, the District had \$270,884 invested in capital assets, net of accumulated depreciation, as detailed in *Note 7* to the financial statements. In 2016, the District purchased new capital assets costing \$22,193.

At the end of 2015, the District had \$289,046 invested in capital assets, net of accumulated depreciation. In 2015, the District purchased new capital assets costing \$43,942.

Debt

At September 30, 2016, the District had \$42,485 in revenue and general obligation refunding bonds outstanding. In 2016, the District issued the Series 2016 Bonds to refinance the outstanding Series 2006 Bonds obligation, as discussed in *Note 10*. The District issued no new debt in 2015. The District's formal debt issuances, revenue bonds, are subject to limitations imposed by state law. There have been no changes in the District's debt ratings in the past three years and Standard & Poor's reaffirmed the District's general obligation bonds in 2016. The District has a current Aa3 rating from Moody's, the District's general obligation bonds have a current AAA rating and the revenue bonds have a current AA-rating from Standard & Poor's.

Other Economic Factors

The District is the Anchor facility for the Region 10 Regional Healthcare Partnership (RHP) DSRIP program under the Medicaid Section 1115(a) demonstration. The Region 10 RHP is the result of a shared commitment by the region's providers to a community-oriented, regional health care delivery model focused on the triple aims of improving the experience of care for patients and their families, improving the health of the region, and reducing the cost of care without compromising quality. Region 10 RHP's DSRIP plan is the essential blueprint for improved individual and population health at a lower cost, delivered more efficiently.

The District is anticipating a small increase in volumes in fiscal year 2017 from growth in the county. Based on the recommendation of the District's Board of Managers (Board), the Tarrant County Commissioners Court set the property tax rate for fiscal year 2017 to \$0.227897 per \$100 valuation, which is consistent with the property tax rate for fiscal year 2016.

The Board and management continue to monitor and consider many factors that have direct or indirect impact on future operations. These include:

- The Medicaid Section 1115(a) demonstration project which could have a material impact on the District's funding for providing uncompensated care and provides funding for improvements in the design of the health care delivery system and associated outcomes, specifically shifting reimbursement systems from fee for service to value based payments
- The reimbursement impact of the *Patient Protection and Affordable Care Act*, Texas Medicaid DSH and other federal legislation
- Tarrant County's population growth, as well as continued growth in the number of uninsured, working poor and medically indigent
- Shifting of care trend from inpatient to outpatient settings
- Continued growth in medical and pharmaceutical costs, as well as advances in therapies
- Continued advances in health care medical equipment and computing technology

Significant Financial Practices

The District maintains several financial practices designed to maintain its credit-worthiness and to position the District to carry out its defined mission of providing health care to the residents of Tarrant County, as well as its fiduciary responsibility to the taxpayers of Tarrant County. Those practices are as follows:

Investments Internally Designated for Capital Acquisition and Operating Activities

The Board sets aside funds for both long-term stability and capital improvements.

Monthly Financial Reporting

The Board meets monthly and reviews the financial statements from the prior month. This information is presented to show actual monthly and year-to-date revenues, and expenses compared to budget and the prior year. Management provides explanation for significant variances.

Pay-As-You-Go Capital Funding

The District has maintained the practice to fund routine capital items under a pay-as-you-go basis. This has been done to minimize borrowing costs as well as maintain financial flexibility.

Budget Process

The operating and capital budgets are proposed by the District's management and endorsed by the Board. Final approval is obtained from the Court. The budget remains in effect for the entire fiscal year.

Operating Practices

 The District's adoption of LEAN and Six Sigma methodologies to improve efficiency and reduce outcome variation

Contacting the District's Financial Management

This financial report is designed to provide our readers with a general overview of the District's finances and to show the District's accountability for the money it receives. Questions about this report and requests for additional financial information should be directed to the District's Financial Offices at 1350 South Main Street, Suite 4000, Fort Worth, Texas 76104.

Balance Sheets September 30, 2016 and 2015

(In Thousands)

Assets and Deferred Outflows of Resources

	2016	2015		
Current Assets				
Cash and cash equivalents	\$ 181,308	\$ 205,072		
Short-term investments	204,612	114,981		
Patient accounts receivable, net	49,845	44,838		
Property taxes receivable, net	4,169	4,535		
Supplemental Medicaid funding receivable	37,531	137,082		
Internally designated for self-insurance, current portion	145	255		
Supplies inventory	10,446	8,287		
Prepaid expenses and other assets	11,523	14,102		
Total current assets	499,579	529,152		
Noncurrent Cash and Investments				
Internally designated for debt service	600	419		
Internally designated for self-insurance	11,807	11,587		
Restricted by donors for capital acquisitions and specific operating activities	1,947	1,991		
Internally designated for capital acquisitions and operating activities	175,401	173,539		
Total noncurrent cash and investments	189,755	187,536		
Other Assets	195			
Capital Assets, Net	270,884	289,046		
Total assets	960,413	1,005,734		
Deferred Outflows of Resources	27,529	17,646		
Total assets and deferred outflows of resources	\$ 987,942	\$ 1,023,380		

Liabilities, Deferred Inflows of Resources and Net Position

2016	2015		
· ·	\$ 80,186		
· ·	57,259		
· ·	4,257		
	5,481		
2,985	2,470		
88,841	149,653		
1,550	1,422		
40,092	43,307		
22,613	9,545		
964	1,420		
154,060	205,347		
4,288	7,003		
227,824	239,983		
2,008	1,646		
315	315		
599,447	569,086		
829,594	811,030		
\$ 987,942	\$ 1,023,380		
	\$ 37,129 38,918 4,569 5,240 2,985 88,841 1,550 40,092 22,613 964 154,060 4,288 227,824 2,008 315 599,447 829,594		

Statements of Revenues, Expenses and Changes in Net Position Years Ended September 30, 2016 and 2015

(In Thousands)

	2016	2015	
Operating Revenues			
Net patient service revenue, net of provision for			
uncollectible accounts; 2016 - \$307,925; 2015 - \$243,694	\$ 368,255	\$ 337,394	
Supplemental Medicaid funding	155,385	191,360	
Other operating revenue	52,396	37,589	
Total operating revenues	576,036	566,343	
Operating Expenses			
Salaries and related expenses	492,324	443,293	
Professional fees and purchased services	165,166	186,975	
Supplies	151,182	126,017	
Depreciation and amortization	39,715	38,817	
Other	40,918	37,840	
Total operating expenses	889,305	832,942	
Operating Loss	(313,269)	(266,599)	
Nonoperating Revenues (Expenses)			
Property tax revenue	319,611	307,019	
Contributed services	8,171	11,296	
Contribution revenue	1,305	1,064	
Contribution expense	-	(2,500)	
Interest expense	(1,430)	(1,336)	
Investment return and other	4,070	2,627	
Total nonoperating revenues (expenses)	331,727	318,170	
Excess of Revenues Over Expenses Before Capital Grants	18,458	51,571	
Capital Grants and Gifts	106	85	
Increase in Net Position	18,564	51,656	
Net Position, Beginning of Year	811,030	759,374	
Net Position, End of Year	\$ 829,594	\$ 811,030	

Statements of Cash Flows

Years Ended September 30, 2016 and 2015

(In Thousands)

	2016	2015
Operating Activities		
Receipts from and on behalf of patients	\$ 358,528	\$ 346,608
Receipts from supplemental Medicaid		
funding programs	254,936	219,383
Payments to suppliers and contractors	(382,952)	(358,380)
Payments to employees	(509,155)	(425,261)
Other receipts, net	50,731	37,962
Net cash used in operating activities	(227,912)	(179,688)
Noncapital Financing Activities		
Noncapital grants and gifts	1,305	1,064
Property taxes supporting operations	318,004	304,410
Net cash provided by noncapital financing activities	319,309	305,474
Capital and Related Financing Activities		
Proceeds from issuance of long-term debt	22,415	-
Principal paid on long-term debt	(24,965)	(2,405)
Interest paid on long-term debt	(1,670)	(1,960)
Property taxes supporting debt service	1,973	2,149
Capital grants and gifts	106	918
Proceeds from sale of capital assets	136	198
Purchase of capital assets	(25,301)	(42,260)
Net cash used in capital and related financing activities	(27,306)	(43,360)
Investing Activities		
Purchase of investments	(479,207)	(248,207)
Proceeds from the sale and maturities of		
short-term investments	386,561	221,426
Interest income and other	4,526	3,330
Net cash used in investing activities	(88,120)	(23,451)
Increase (Decrease) in Cash and Cash Equivalents	(24,029)	58,975
Cash and Cash Equivalents, Beginning of Year	206,909	147,934
Cash and Cash Equivalents, End of Year	\$ 182,880	\$ 206,909

Statements of Cash Flows (Continued)
Years Ended September 30, 2016 and 2015

(In Thousands)

		2016	2015		
Reconciliation of Cash and Cash Equivalents to the Balance Sheets Cash and cash equivalents in current assets Cash and cash equivalents in noncurrent cash and investments	\$	181,308 1,572	\$	205,072 1,837	
	\$	182,880	\$	206,909	
Reconciliation of Net Operating Revenues (Expenses) to					
Net Cash Used in Operating Activities	ф	(212.2(0)	Φ	(266,500)	
Operating loss	\$	(313,269)	\$	(266,599)	
Depreciation and amortization		39,715		38,817	
Loss (gain) on disposal of assets		504		(33)	
Provision for uncollectible accounts		307,925		243,694	
Contributed services expense		8,171		11,296	
Changes in operating assets and liabilities					
Patient accounts receivable		(312,932)		(240,811)	
Supplemental Medicaid funding receivable		99,551		28,023	
Estimated amounts due from and to third-party payers		312		823	
Accounts payable and accrued expenses		(58,200)		5,658	
Other assets and liabilities		311		(556)	
Net cash used in operating activities	\$	(227,912)	\$	(179,688)	
Supplemental Cash Flows Information					
Capital asset acquisitions included in accounts payable	\$	583	\$	3,705	
Contributed services revenue (<i>Note 14</i>)	\$	8,171	\$	11,296	
Amounts pledged to other entities included in accounts payable	\$	-	\$	2,500	

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

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

Nature of Operations and Reporting Entity

Tarrant County Hospital District d/b/a JPS Health Network (District) is a political subdivision of the state of Texas and operates a hospital, a psychiatric inpatient facility, a skilled nursing unit, 24 ambulatory health centers, a psychiatric emergency center, an emergency department and a designated Level 1 trauma center, three health centers for women, 20 school-based clinics and dental services at seven locations. Additionally, it manages medical care services at the Tarrant County correctional system's three locations. The District is under the supervision of the Tarrant County Commissioners Court (Court) and is governed by an 11 member Board of Managers (Board) appointed by the Court. For this reason, the District is considered to be a component unit of Tarrant County, Texas (County) and is included as a discretely presented component unit in the basic financial statements of the County.

Acclaim Physician Group (Acclaim) began operations on May 1, 2016, primarily for the purpose of providing physician services to District patients. The District is the sole corporate member of Acclaim and has the authority to exercise significant control over the financial operations of Acclaim. As such, Acclaim is presented as a blended component unit of the District. Separate financial statements of Acclaim can be obtained by contacting the District's management.

JPS Physician Group (JPSPG) began operations in July 2003, primarily for the purpose of providing physician services to District patients. The District is the sole corporate member of JPSPG and has the authority to exercise significant control over the financial operations of JPSPG. As such, JPSPG is presented as a blended component unit of the District. Separate financial statements of JPSPG can be obtained by contacting the District's management.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

As of May 1, 2016 when operations commenced at Acclaim, all previously employed physicians of JPSPG became employed physicians of Acclaim. As of October 1, 2015, the effective date of the transfer, all of JPSPG's assets, deferred outflows of resources, liabilities, deferred inflows of resources and net position as of the beginning of the period of approximately \$26,283 were transferred to the Hospital.

JPS Foundation (Foundation) was formed on August 4, 1997, solely to support and benefit scientific, educational and charitable activities conducted by the District. The Foundation is a non-profit organization whose purpose is to perform services on behalf of the District, including organizing fundraising activities, providing patient assistance programs, participating in recruiting functions and conducting administrative services. Because the Foundation operates primarily for the exclusive benefit of the District, it is also presented as a blended component unit of the District. Separate financial statements of the Foundation can be obtained by contacting the District's management.

The District's financial statements include the activities as set forth above. All material intercompany accounts and transactions have been eliminated in the financial statements.

Basis of Accounting and Presentation

The accompanying financial statements of the District have been prepared on the accrual basis of accounting using the economic resources measurement focus. Revenues, expenses, gains, losses, assets and liabilities from exchange and exchange-like transactions are recognized when the exchange transaction takes place, while those from government-mandated 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, government-mandated nonexchange transactions.

Government-mandated nonexchange transactions that are not program specific, property taxes, investment income and interest on capital assets-related debt are included in nonoperating revenues and expenses. The District first applies restricted net position when an expense or outlay is incurred for purposes for which both restricted and unrestricted net position is available.

Use of Estimates

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

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Cash and Cash Equivalents

The District considers all liquid investments with original maturities of three months or less to be cash equivalents. At September 30, 2016 and 2015, cash equivalents consisted primarily of money market accounts with brokers and state investment pools described more fully in *Note* 5.

Risk Management

The District 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; medical malpractice; and employee health, dental and accident benefits. Commercial insurance coverage is purchased for claims arising from such matters other than medical malpractice, employee health and workers' compensation claims. Settled claims have not exceeded this commercial coverage in any of the three preceding years.

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

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. Investments in external investment pools qualifying for amortized cost under GASB Statement No. 79, *Certain External Investment Pools and Pool Participants*, are carried at amortized cost per share. All other investments are carried at fair value.

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.

Patient Accounts Receivable

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

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Supplies

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

Capital Assets

Capital assets are recorded at cost at the date of acquisition, or acquisition value at the date of donation if acquired by gift. Depreciation is computed using the straight-line method over the estimated useful life of each asset. Assets under capital lease obligations and leasehold improvements are depreciated over the shorter of the lease term or their respective estimated useful lives. The following estimated useful lives are being used by the District:

Land improvements	10-20 years
Buildings and improvements	10-40 years
Equipment	3-20 years
Computer software	3-10 years

The District capitalizes interest costs as a component of construction in progress, based on the weighted-average rates paid for long-term borrowing. Total interest incurred was:

	 2016	2015		
Interest costs capitalized Interest costs charged to expense	\$ 14 1,430	\$	348 1,336	
Total interest incurred	\$ 1,444	\$	1,684	

Compensated Absences

District policies permit most employees to accumulate vacation and sick leave benefits that may be realized as paid time off or, in limited circumstances, as a cash payment. Expense and the related liability are recognized as benefits are earned whether the employee is expected to realize the benefit as time off or in cash. Compensated absence liabilities are computed using the regular pay and termination pay rates in effect at the balance sheet date, plus an additional amount for compensation-related payments such as social security and Medicare taxes computed using rates in effect at that date

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Defined Benefit Pension Plan

The District sponsors a defined benefit pension plan (Plan) as more fully described in *Note 13*. For purposes of measuring the net pension liability, deferred outflows of resources and deferred inflows of resources related to pensions, and pension expense, information about the fiduciary net position of the Plan and additions to and deductions from the Plan's fiduciary net position have been determined on the same basis as they are reported by the 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.

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 periods are reported as deferred outflows of resources and deferred inflows of resources. As of September 30, 2016 and 2015, the District's deferred outflows and deferred inflows of resources were related to the District's defined benefit pension plan as described more fully in *Note 13*.

Net Position

Net position of the District is classified in four components. Net investment in capital assets consists of capital assets net of accumulated depreciation and reduced by the outstanding balances of borrowings used to finance the purchase or construction of those assets. 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 District, including amounts deposited with trustees as required by bond indentures, reduced by the outstanding balances of any related borrowings. Restricted nonexpendable net position consists of noncapital assets that are required to be maintained in perpetuity as specified by parties external to the District, such as permanent endowments. Unrestricted net position is the remaining assets less remaining liabilities that do not meet the definition of net invested in capital assets or restricted net position.

Net Patient Service Revenue

The District has agreements with third-party payers that provide for payments to the District at amounts different from its established rates. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payers and others for services rendered and includes estimated retroactive revenue adjustments, and a provision for uncollectible accounts. Retroactive adjustments are considered in the recognition of revenue on an estimated basis in the period the related services are rendered and such estimated amounts are revised in future periods as adjustments become known.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Tobacco Settlement Revenue

The District receives revenue that is the result of a settlement between various counties and hospital districts in Texas and the tobacco industry for tobacco-related health care costs. The District received approximately \$4,680 and \$5,773 in revenue from this settlement for the years ended September 30, 2016 and 2015, respectively. This revenue is recognized as a component of other operating revenue in the accompanying statements of revenues, expenses and changes in net position.

Charity Care

The District provides care without charge or at amounts less than its established rates to patients meeting certain criteria under its charity care policy. Because the District does not pursue collection of amounts determined to qualify as charity care, these amounts are not reported as net patient service revenue.

Income Taxes

As an essential government function of the County, the District is generally exempt from federal and state income taxes under Section 115 of the Internal Revenue Code (IRC) and a similar provision of state law. The District, the Foundation, JPSPG and Acclaim and also carry an exemption from income taxes under IRC Section 501(c)(3). The District, the Foundation, JPSPG and Acclaim are all subject to federal income tax on any unrelated business taxable income.

Electronic Health Records Incentive Program

The Electronic Health Records Incentive Program, enacted as part of the *American Recovery and Reinvestment Act of 2009*, provides for one time incentive payments under both the Medicare and Medicaid programs to eligible hospitals that demonstrate meaningful use of certified electronic health records technology (EHR). Payments under the Medicare program are generally made for up to four years based on a statutory formula. Payments under the Medicaid program are generally made for up to four years based upon a statutory formula, as determined by the state, which is approved by the Centers for Medicare and Medicaid Services (CMS). Payments under both programs are contingent on the District continuing to meet escalating meaningful use criteria and any other specific requirements that are applicable for the reporting period. The final amount for any payment year is determined based upon an audit by the administrative contractor. JPSPG and Acclaim may also receive incentive payments of up to \$44 per eligible physician over five years for Medicare and \$64 per eligible physician over six years for Medicaid. Events could occur that would cause the final amounts to differ materially from the initial payments under the program.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

The District recognizes revenue under the grant accounting model using the cliff recognition approach. Under this approach, revenue is recognized once meaningful use status has been met for the full reporting period.

In 2016 and 2015, the District recorded revenue from the Medicare program of approximately \$1,085 and \$1,046, respectively. In 2016 and 2015, the District recorded revenue from the Medicaid program of approximately \$468 and \$400, respectively. The revenue earned from these programs is included as a component of other operating revenue in the accompanying statements of revenue, expenses and changes in net position.

Reclassifications

Certain reclassifications have been made to the 2015 financial statements to conform to the 2016 financial statement presentation. The reclassifications had no effect on the changes in financial position.

Note 2: Net Patient Service Revenue

The District has agreements with third-party payers that provide for payments to the District at amounts different from its established rates. These payment arrangements include:

Medicare. Inpatient acute care services and substantially all outpatient services rendered to Medicare program beneficiaries are paid at prospectively determined rates. These rates vary according to a patient classification system that is based on clinical, diagnostic and other factors. Certain inpatient nonacute services and defined medical education costs are paid based on a cost reimbursement methodology. The District is reimbursed for certain services at tentative rates with final settlement determined after submission of annual cost reports by the District and audits thereof by the Medicare administrative contractor. The District's Medicare cost reports have been audited by the Medicare administrative contractor through September 30, 2012.

Medicaid. Inpatient services rendered to Medicaid program beneficiaries are reimbursed under a prospective payment system. Inpatient reimbursement is inclusive of an add-on for trauma care that is based on the Medicaid Standards Dollar Amount. Outpatient and physician services are reimbursed under a mixture of fee schedules and cost reimbursement. The District is reimbursed for cost reimbursable services at tentative rates with final settlement determined after submission of annual cost reports by the District and audits thereof by the Medicaid administrative contractor. The District's Medicaid cost reports have been audited by the Medicaid administrative contractor through September 30, 2009.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Approximately 78% and 77% of net patient service revenue is from participation in the Medicare and state-sponsored Medicaid programs for the years ended September 30, 2016 and 2015, respectively. Settlements under reimbursement agreements with Medicare and Medicaid programs are estimated and recorded in the period the related services are rendered, and are adjusted in future periods as adjustments become known or as the service years are no longer subject to audit, review or investigation. Annual cost reports required under the Medicare and Medicaid programs are subject to routine audits, which may result in adjustments to the amounts ultimately determined to be due under the reimbursement programs. These audits often require several years to reach their financial determination of amounts earned under the programs. As a result, it is reasonably possible that recorded estimates will change materially in the near term. Net patient service revenue increased in 2016 by approximately \$4,885 and decreased in 2015 by approximately \$460, due to changes in previous estimates.

The District has also entered into payment agreements with certain commercial insurance carriers, HMOs and preferred provider organizations. The basis for payment to the District under these agreements includes prospectively determined rates per discharge, discounts from established charges and prospectively determined daily rates.

Note 3: Supplemental Medicaid Funding Revenue

Supplemental Medicaid funding revenue included in the statement of revenues, expenses and changes in net position includes revenue received from the Medicaid Disproportionate Share Program (DSH) of approximately \$34,489 and \$30,721 for the years ended September 30, 2016 and 2015, respectively. The amounts the District may expect to receive from this program in future years could be impacted by the Medicaid section 1115(a) demonstration program discussed below.

On December 12, 2011, the United States Department of Health and Human Services (HHSC) approved a new Medicaid section 1115(a) demonstration entitled "Texas Health Transformation and Quality Improvement Program" (Waiver). The Waiver expanded existing Medicaid managed care programs and established two funding pools that assists providers with uncompensated care costs (UC Pool) and promotes health system transformation (DSRIP Pool). The revenue from the two funding pools is recognized as earned throughout the related demonstration year. During 2016, the District recognized approximately \$65,034 and \$55,862 from the UC Pool and DSRIP Pool, respectively. During 2015, the District recognized approximately \$105,369 and \$55,270 from the UC Pool and DSRIP Pool, respectively. The funding the District has received is subject to audit and is not representative of funding to be received in future years.

The Waiver was effective from December 12, 2011 to September 30, 2016. On May 2, 2016, HHSC announced that CMS agreed to extend the Waiver through December 2017, at current funding levels. During the extension period, HHSC and CMS will continue negotiating a longer term extension.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

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

Note 4: Property Tax Revenue

The District received approximately 35% of its support from property taxes in both years ended September 30, 2016 and 2015, respectively. Property taxes are levied by the District on October 1, of each year based on the preceding January 1, assessed property values. To secure payment, an enforceable lien attaches to the property on January 1, when the value is assessed. Property taxes become due and payable when levied on October 1. This is the date on which an enforceable legal claim arises and the District records a receivable for the property tax assessment, less an allowance for uncollectible taxes. Property taxes are considered delinquent after January 31, of the following year. The District recorded an allowance for uncollectible property taxes of approximately \$9,212 and \$9,341 at September 30, 2016 and 2015, respectively.

The District's property tax rate was \$0.226491 and \$0.226300 per \$100 valuation for 2016 and 2015, respectively, for the maintenance and operation fund and property tax revenue for this fund was \$317,640 and \$304,867 for 2016 and 2015, respectively. The District's property tax rate was \$0.001406 and \$0.001597 per \$100 valuation for 2016 and 2015, respectively, for the interest and sinking fund and property tax revenue for this fund was \$1,971 and \$2,152 for 2016 and 2015, respectively.

Note 5: Deposits, Investments and Investment Income

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 District'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 or other qualified investments. At September 30, 2016 and 2015, the District's deposits were either insured or collateralized in accordance with state law

At September 30, 2016, the Foundation's cash accounts exceeded federally insured limits by \$2,185.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Investments

The District may legally invest direct obligations of and other obligations guaranteed as to principal by the U.S. Treasury and U.S. agencies and instrumentalities and in bank repurchase agreements. It may also invest to a limited extent in corporate bonds and equity securities.

At September 30, 2016 and 2015, the District had the following investments and maturities as:

						er 30, 2016 s in Years					
Investment pools U.S. Treasury obligations U.S. agencies obligations Municipal bonds Commercial paper	F	air Value	Less Than 1	1-5		6-10		More Than 10			
	\$	105,728 30,712 38,085 5,564 180,391	\$ 105,728 30,712 24,116 - 180,391	\$	- 13,969 5,564	\$	- - - - -	\$	- - - - -		
Mutual funds	\$	375 360,855	\$ 340,947	\$	19,533	\$		\$	<u> </u>		

						Septembe	er 30, 2015	;		
				Maturities in Years						
			Less						More	
Туре	Fai	Fair Value		Than 1		1-5		10	Than 10	
Money market mutual funds	\$	37	\$	37	\$	_	\$	_	\$	_
Investment pools	Ψ	110,841	Ψ	110,841	Ψ	_	Ψ	_	Ψ	_
U.S. Treasury obligations		716		_		716		-		-
U.S. agencies obligations		45,540		7,982		37,558		-		-
Municipal bonds		5,674		102		5,572		-		-
Commercial paper		29,944		29,944						
			\$	148,906	\$	43,846	\$	-	\$	_
Mutual funds		528								
	\$	193,280								

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Interest Rate Risk — As a means of limiting its exposure to fair value losses arising from rising interest rates, the District investment policy requires that total investments have a weighted-average maturity of five years or less. The District's investments in U.S. Treasury and agency obligations include fixed-rate notes and bonds with a weighted-average maturity of three years. The longer the maturity of a fixed-rate obligation, the greater the impact a change in interest rates will have on its fair value. As interest rates increase, the fair value of the obligations decrease. Likewise, when interest rates decrease, the fair value of the obligations increase. The money market mutual funds are presented as an investment with a maturity of less than one-year because they are redeemable in full immediately.

Credit Risk – Credit risk is the risk that the issuer or other counterparty to an investment will not fulfill its obligations. It is the District's policy to limit its investments to U.S. Treasury and agency obligations or otherwise follow the restriction of the Texas Public Funds Investment Act. The District's investment in U.S. Treasury obligations carry the explicit guarantee of the U.S. government. The debt securities of the U.S. agencies are rated Aa1 to AAA by Moody's rating agency. The District's investments in municipal bonds were rated AA by Standard & Poor's rating agency.

The District also invests in TexPool and TexSTAR, state investment pools (Pools), which are considered investments for financial reporting. The Texas State Comptroller of Public Accounts oversees TexPool. Federated Investors provides asset management and participant services for TexPool's operations under a contract with the Comptroller. TexSTAR is a local government investment pool offering professionally managed portfolios to government entities in the state of Texas. The governing board of directors selects co-administrators for TexSTAR that provide fund management. The District has an undivided beneficial interest in the pool of assets held by the Pools. Investments must be in compliance with the *Texas Public Fund Investment Act* and include obligations of the United States or its agencies, direct obligation of the state of Texas or its agencies, certificates of deposit and repurchase agreements. The fair value of the position in these pools is the same as the value of the shares in each pool.

The Pools, as well as the money market mutual funds invested in by the District, are rated as AAAm by Standard & Poor's. The District's investments in commercial paper was rated A- to AA- by Standard & Poor's rating agency.

The District also invests in certificates of deposit, which are classified as deposits for financial reporting purposes. These certificates of deposit are fully collateralized by the various financial institutions.

Custodial Credit Risk – For an investment, custodial credit risk is the risk that, in the event of the failure of the counterparty, the District will not be able to recover the value of its investment or collateral securities that are in the possession of an outside party. All of the District's investments are held in safekeeping or trust accounts.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Concentration of Credit Risk – The District places no limit on the amount that may be invested in any one issuer as long as the restrictions of the Texas Public Funds Investment Act are followed.

The following table reflects the District's investments in single issuers that represent more than 5% of total investments:

	2016	2015
	4.407	
Federal Farm Credit Bank	1.4%	5.3%
Federal Home Loan Mortgage Association	5.8%	10.4%
Toyota Motor Credit Commercial Paper	8.2%	7.8%
JP Morgan Securities Commercial Paper	14.0%	7.7%
Kaiser Foundation Hospital Commercial Paper	12.4%	0.0%
Nestle Finance Int'l Commercial Paper	8.3%	0.0%
Philadelphia, PA - Airport Revenue Commercial Paper	6.9%	0.0%

Summary of Carrying Values

The carrying values of deposits and investments shown previously are included in the balance sheets as follows:

	 2016	2015
Carrying value		
Deposits	\$ 214,965	\$ 314,564
Investments	 360,855	193,280
	\$ 575,820	\$ 507,844
Included in the following balance sheet captions		
Cash and cash equivalents	\$ 181,308	\$ 205,072
Short-term investments	204,612	114,981
Internally designated for self-insurance, current portion	145	255
Noncurrent cash and investments	 189,755	 187,536
	\$ 575,820	\$ 507,844

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Investment Income

Investment income for the years ended September 30, consisted of:

Interest and dividend income Net decrease in fair value of investments	 2016	2015		
	\$ 4,594 (641)	\$	2,994 (616)	
	\$ 3,953	\$	2,378	

Note 6: Patient Accounts Receivable

The District grants credit without collateral to its patients, many of whom are area residents and are insured under third-party payer agreements. Patient accounts receivable at September 30, consisted of:

	 2016	2015
Medicare	\$ 16,559	\$ 13,911
Medicaid	17,768	17,078
Other third-party payers	30,126	28,179
Patients	92,821	70,476
	 157,274	129,644
Less allowance for uncollectible accounts	 107,429	84,806
	\$ 49,845	\$ 44,838

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Note 7: Capital Assets

Capital assets activity for the years ended September 30, were:

						2016			
		eginning Balance	Α	dditions	Dis	sposals		ansfers d Other	Ending Balance
Land and improvements Buildings and improvements Equipment Construction in progress	\$	54,510 247,538 430,640 2,025	\$	17,512 4,681	\$	(9,211)	\$	46 2,305 3,993 (6,344)	\$ 54,556 249,843 442,934 362
Less accumulated depreciation	_	734,713 445,667	_	22,193 39,715		(9,211) (8,571)	_	<u>-</u>	747,695 476,811
Capital assets, net	\$	289,046	\$	(17,522)	\$	(640)	\$	_	\$ 270,884

	2015										
		eginning Balance	Ad	ditions	Dis	sposals		ransfers nd Other		Ending Balance	
Land and improvements	\$	52,618	\$	1,892	\$	-	\$	-	\$	54,510	
Buildings and improvements		241,353		325		(4,775)		10,635		247,538	
Equipment		395,687		16,396		(2,608)		21,165		430,640	
Construction in progress		8,496		25,329				(31,800)		2,025	
		698,154		43,942		(7,383)		-		734,713	
Less accumulated depreciation		414,067		38,817		(7,217)				445,667	
Capital assets, net	\$	284,087	\$	5,125	\$	(166)	\$		\$	289,046	

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Note 8: Accounts Payable and Accrued Expenses

Accounts payable and accrued expenses included in current liabilities at September 30, consisted of:

	2016	2015		
Payable to suppliers and contractors Payable to employees (including payroll taxes	\$ 34,641	\$ 38,006		
and benefits)	38,757	44,709		
Payable to TCICC (Note 14)	-	34,736		
Payable to the Plan (<i>Note 13</i>)	-	12,313		
Patient credit balances	2,649	7,681		
	\$ 76,047	\$ 137,445		

Note 9: Risk Management

Medical Malpractice and General Liability Risks

The District is self-insured for medical malpractice and general liability claims. The District's maximum liability for professional and general liability claims as a governmental unit under the *Tort Claims Act* is generally \$100,000 per individual and \$300,000 per occurrence.

Losses from asserted and unasserted claims identified under the District's incident reporting system are accrued based on estimates that incorporate the District's past experience, as well as other considerations, including the nature of each claim or incident and relevant trend factors. It is reasonably possible that the District's estimate of losses will change by a material amount in the near term.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Activity in the District's accrued medical malpractice claims liability during 2016 and 2015, is summarized as follows:

Balance, beginning of year Current year claims incurred and changes in estimates for claims incurred in prior years Claims and expenses paid	2	016	2015		
Balance, beginning of year	\$	590	\$	485	
ş		226		254	
Claims and expenses paid		(255)		(149)	
Balance, end of year	\$	561	\$	590	

Employee Health Claims

Substantially all of the District's employees and their dependents are eligible to participate in the District's employee health insurance plan. Commercial stop-loss insurance coverage is purchased for claims in excess of \$500,000. A provision is accrued for self-insured employee health claims including both claims reported and claims incurred but not yet reported. The accrual is estimated based on consideration of prior claims experience, recently settled claims, frequency of claims and other economic and social factors. It is reasonably possible that the District's estimate will change by a material amount in the near term.

Activity in the District's accrued employee health claims liability during 2016 and 2015, is summarized as follows:

	 2016	2015		
Balance, beginning of year	\$ 4,050	\$	4,260	
Current year claims incurred and changes in estimates for claims incurred in prior years	44,228		38,434	
Claims and expenses paid	 (44,238)		(38,644)	
Balance, end of year	\$ 4,040	\$	4,050	

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Workers' Compensation Claims

The District is self-insured for workers' compensation claims. A provision is accrued for self-insured worker's compensation claims including both claims reported and claims incurred but not yet reported. The accrual is estimated based on consideration of prior claims experience, recently settled claims, frequency of claims and other economic and social factors. It is reasonably possible that the District's estimate will change by a material amount in the near term.

Activity in the District's accrued workers' compensation claims liability during 2016 and 2015, is summarized as follows:

	 2016	2015		
Balance, beginning of year	\$ 2,263	\$ 1,982		
Current year claims incurred and changes in estimates for claims incurred in prior years	1,870	2,027		
Claims and expenses paid	 (1,944)	 (1,746)		
Balance, end of year	\$ 2,189	\$ 2,263		

Note 10: Long-term Debt

A summary of long-term debt is as follows:

		2016	2015		
General obligation refunding bonds, Series 2016	\$	22,335	\$	_	
Revenue bonds, Series 2012		20,150		21,595	
Certificates of obligation, Series 2006	<u></u>			23,440	
	' <u></u>	42,485		45,035	
Bond premium (discount), net		592		742	
	\$	43,077	\$	45,777	

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

General Obligation Refunding Bonds - Series 2016

The Series 2016 general obligation refunding bonds consist of Tarrant County Hospital District Limited Tax Refunding Bonds, Series 2016 (Series 2016 Bonds) in the original amount of \$22,415 dated January 1, 2016, which bear interest at 2.24%. The Series 2016 Bonds are payable in annual installments of \$1,500 to \$1,955 through February 15, 2029. The Series 2016 Bonds are secured by ad valorem tax revenues. The proceeds from the Series 2016 Bonds were used to advance refund the Series 2006 Bonds.

Revenue Bonds – Series 2012

The Series 2012 revenue bonds consist of Tarrant County Hospital District Senior Lien Revenue Refunding Bonds, Series 2012 (Series 2012 Bonds) in the original amount of \$25,890 dated September 1, 2012, which bear interest at 3.0% to 5.0%. The Series 2012 Bonds are payable in annual installments of \$1,485 to \$2,205 through August 15, 2027. The Series 2012 Bonds are secured by revenues of the District, exclusive of ad valorem tax revenue. All of the Series 2012 Bonds still outstanding may be redeemed at the District's option on or after August 15, 2023, at par value plus accrued interest. The proceeds from the Series 2012 Bonds were used to advance refund the Series 2002 Bonds.

Certificates of Obligation - Series 2006

The Series 2006 certificates of obligation consisted of Tarrant County Hospital District Certificates of Obligation, Series 2006 (Certificates) in the original amount of \$30,330 dated March 1, 2006, which bore interest at 4.0% to 5.0%. The Certificates were secured by the net revenues of the District, including ad valorem revenue. All of the Certificates still outstanding could be redeemed at the District's option on or after February 15, 2016, at par value plus accrued interest. The District advance refunded the outstanding obligation on the Series 2006 Bonds with proceeds from the Series 2016 Bonds. The loss on the advance refunding was approximately \$70. The present value of cash flow savings from the advanced refunding is approximately \$3,960.

The indenture agreements require the District to comply with certain restrictive covenants including minimum insurance coverage and debt service requirements.

The District has a current Aa3 rating from Moody's and a current AAA rating from Standard & Poor's.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

The following is a summary of long-term debt transactions for the District for the years ended September 30:

				2016				
	Ac	lditions	Dec	ductions				urrent ortion
\$ -	\$	22,415	\$	80	\$	22,335	\$	1,500
21,595		-		1,445		20,150		1,485
 23,440				23,440				
\$ 45,035	\$	22,415	\$	24,965	\$	42,485	\$	2,985
				2015				
	Ac	lditions	Dec	ductions		-		urrent ortion
\$ 23,015	\$	-	\$	1,420	\$	21,595	\$	1,445
 24,425				985		23,440		1,025
\$ 47,440	\$		\$	2,405	\$	45,035	\$	2,470
\$ \$ Bee	21,595 23,440 \$ 45,035 Beginning Balance \$ 23,015 24,425	Balance Ac \$ - \$ 21,595 23,440 \$ 45,035 \$ 45,035 \$ 45,035	Seginning Balance Additions	Beginning Balance Additions Dec \$ - \$ 22,415 \$ 21,595	Balance Additions Deductions \$ - \$ 22,415 \$ 80 21,595 - 1,445 23,440 - 23,440 \$ 45,035 \$ 22,415 \$ 24,965 Beginning Balance Additions Deductions \$ 23,015 \$ - \$ 1,420 24,425 - 985	Beginning Balance Additions Deductions B \$ - \$ 22,415 \$ 80 \$ 1,445 \$ 23,440 \$ 23,440 \$ 23,440 \$ 23,440 \$ 24,965	Beginning Balance Additions Deductions Ending Balance \$ - \$ 22,415 \$ 80 \$ 22,335 21,595 - \$ 1,445 20,150 23,440 - 23,440 - \$ 45,035 \$ 22,415 \$ 24,965 \$ 42,485 Beginning Balance Additions Deductions Ending Balance \$ 23,015 \$ - \$ 1,420 \$ 21,595 24,425 - 985 23,440	Beginning Balance Additions Deductions Ending Balance Composition \$ - \$ 22,415 \$ 80 \$ 22,335 \$ 21,595 - 1,445 20,150 - 23,440 - 23,440 - 23,440 - 23,440 - 23,440 - 23,445 \$ 24,965 \$ 42,485 \$ 24,485 </td

The debt service requirements as of September 30, 2016, are as follows:

Year Ending September 30, 2016	Principal		Interest		Total	
2017	\$	2,985	\$	1,270	\$	4,255
2018	*	3,070	*	1,192	7	4,262
2019		3,140		1,111		4,251
2020		3,255		997		4,252
2021		3,375		878		4,253
2022-2026		18,710		2,547		21,257
2027-2029		7,950		267		8,217
	\$	42,485	\$	8,262	\$	50,747

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Note 11: Restricted and Designated Net Position

At September 30, 2016 and 2015, \$2,008 and \$1,646, respectively, of net position were restricted by donors for capital and operating activities.

At September 30, 2016 and 2015, \$175,401 and \$173,539, respectively, of unrestricted net position has been designated by the Board for future operating needs and capital acquisitions. Designated assets remain under the control of the Board, which may, at its discretion, later use these assets for other purposes.

At September 30, 2016 and 2015, the District had \$315 of restricted nonexpendable net position which is a general endowment for the Foundation.

Note 12: Uncompensated Care

In support of its mission, the District voluntarily provides free care to patients who lack financial resources and are deemed to be medically indigent. The costs of charity care provided under the District's charity care policy were \$141,344 and \$126,033 for 2016 and 2015, respectively. The cost of charity care is estimated by applying the ratio of cost to gross charges to the gross charity care charges. The increase in uncompensated care cost in 2016 as compared to 2015 is primarily attributable to increases in volumes in 2016.

Note 13: Pension Plan

Plan Description

The District sponsors an agent multiple-employer defined benefit pension plan for eligible employees within a multiemployer retirement program sponsored for member hospitals by the Texas Hospital Association (THA). HealthShare/THA, a wholly owned subsidiary of THA, is the plan administrator of the pension plan. The Plan's assets are invested as a portion of the THA's master pension trust fund. The Plan provides retirement, death and disability benefits. Amendments to the plan are made only with the authority of the District's Board.

The Plan does not issue a stand-alone financial report. However, an annual actuarial valuation report is available from the District or HealthShare/THA. That report may be obtained by writing HealthShare/THA at 1108 Lavaca, Suite 700, Austin, Texas 78701.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Benefits Provided

The Plan provides retirement, disability, and death benefits. Retirement benefits for eligible employees are calculated as 1.4% of the employee's final 5-year average compensation plus 0.7% of the employee's final 5-year average compensation, if any, that exceeds \$75,000, with the sum multiplied times the employee's years of service.

Participants with 5 years of participation service are eligible to retire at age 65. Participants may retire at any age after 55 if they have 10 years or vesting service. Disability retirement benefits are determined in the same manner as retirement benefits but are payable immediately with an actuarial reduction. Death benefits are determined in the same manner as retirement benefits but are payable immediately with an actuarial reduction. An employee who leaves the employer's service may withdraw his or her contributions, plus any accumulated interest.

Effective October 1, 2006, participation in the pension plan became mandatory for full-time employees completing one-year of service on or after October 1, 2006. An amendment effective October 1, 2011, made plan participation voluntary for employees hired after that date.

The employees covered by the Plan at October 1, 2015 and 2014 (measurement date), are:

	2015	2014
Inactive employees or beneficiaries currently		
receiving benefits	269	246
Inactive employees entitled to but not yet		
receiving benefits	1,020	930
Active employees	3,014	2,950
	4,303	4,126

Contributions

The District's Board has the sole authority to establish and amend the contribution requirements of the active employees. The District's contributions are based on an actuarially determined rate recommended by an independent actuary. The actuarial determined rate is the established amount necessary to finance the costs of benefits earned by employees during the year, with an additional amount to finance any unfunded accrued liability. The District is required to contribute the difference between the actuarially determined rate and the contribution rate of employees. For the District's fiscal year ended September 30, 2016, the average active employee contribution rate (for the period between the two most recent measurement dates) was 1.00% of annual pay, and the District's average contribution rate was 6.75% of annual payroll.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

The District's contribution is set to be 6.75% of participant payroll effective October 1, 2015, and will remain at that level as long as the amount thus determined is sufficient to pay the Employer Normal Cost and amortize the Unfunded Actuarial Liability (Net Pension Liability) over a period of not more than 25 years.

The employer contributions were 6.75% of estimated participant compensation for the year ended September 30, 2016. The costs of administering the plan are paid by the plan and are considered in the determination of the employer contribution rate.

Net Pension Liability

The District's net pension liability was measured as of October 1, 2015 and 2014, and the total pension liability used to calculate the net pension liability was determined by an actuarial valuation as of that date.

The total pension liability in the October 1, 2015, actuarial valuation was determined using the following actuarial assumptions, applied to all periods included in the measurement:

Inflation 3.25%

Salary increases 5.0%, average, including inflation

Ad hoc cost of living adjustments Not included

Investment rate of return 7.25%, net of pension plan

investment expense, including inflations

Mortality rates were based on the Society of Actuaries RP-2014 Mortality Table with Projection Scale MP-2015.

The actuarial assumptions used in the October 1, 2015, valuation were based on the results of an actuarial experience study for the period 2010-2015.

The long-term expected rate of return used in the October 1, 2015, valuation on pension plan investments was determined using a building-block method in which expected future real rates of return (expected returns, net of pension plan investment expense and inflation) are developed for each major asset class. These components are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by the target asset allocation percentage and by adding expected inflation (3.25%). In addition, the final 7.25% assumption reflected a reduction of 0.08% for adverse deviation.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

The total pension liability in the October 1, 2014, actuarial valuation was determined using the following actuarial assumptions, applied to all periods included in the measurement:

Inflation 3.00%

Salary increases 5.0%, average, including inflation

Ad hoc cost of living adjustments Not included

Investment rate of return 7.75%, net of pension plan

investment expense, including inflations

Mortality rates were based on the Society of Actuaries RP-2014 Mortality Table with Projection Scale MP-2014.

The actuarial assumptions used in the October 1, 2014, valuation were based on the results of an actuarial experience study for the period 2005-2013.

The long-term expected rate of return used in the October 1, 2014, valuation on pension plan investments was determined using a building-block method in which expected future real rates of return (expected returns, net of pension plan investment expense and inflation) are developed for each major asset class. These components are combined to produce the long-term expected rate of return by weighting the expected future real rates of return by the target asset allocation percentage and by adding expected inflation (3.00%). In addition, the final 7.75% assumption reflected a reduction of 0.10% for adverse deviation.

The target allocation and expected arithmetic real rates of return for each major asset class are summarized in the following table:

Asset Class	Target Allocation	2015 Long-Term Expected Real Rate of Return	2014 Long-Term Expected Real Rate of Return	
Domestic equity	65%	5.2%	5.8%	
International equity	10%	5.5%	6.2%	
Fixed income	25%	1.7%	1.7%	
Total	100%	_		

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Discount Rate

The discount rate used to measure the total pension liability was 7.25% and 7.75% at October 1, 2015 and 2014, respectively. The projection of cash flows used to determine the discount rate assumed that employee contributions will be made at the current contribution rate and that employer contributions will be made at rates equal to the difference between actuarially determined contribution rates and the employee rate. 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 are:

2016					
		Plan Fiduciary Net Position (b)		Net Pension Liability (Asset) (a) - (b)	
\$	194,004	\$	184,459	\$	9,545
	12,181		-		12,181
	14,805		-		14,805
	1,720		-		1,720
	-		1,641		(1,641)
	-		12,313		(12,313)
	-		(2,629)		2,629
	(6,069)		(6,069)		-
	-		(587)		587
	(4,900)				(4,900)
	17,737		4,669		13,068
\$	211,741	\$	189,128	\$	22,613
		Pension Liability (a) \$ 194,004 12,181 14,805 1,720 (6,069) - (4,900) 17,737	Pension Liability (a) \$ 194,004 \$ 12,181	Pension Liability (a) Fiduciary Net Position (b) \$ 194,004 \$ 184,459 \$ 12,181 - 14,805 - 14,805 - 14,805 - 14,805 - 14,641 - 12,313 - 1	Total Plan Fiduciary Net Position (b) Liability (a) 184,459 \$ 12,181 - 14,805 - 1,720 - 1,641 - 12,313 - (2,629) (6,069) - (587) (4,900) - 17,737 4,669

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

			2015		
	Total Plan Pension Fiduciary Liability Net Position (a) (b)		iduciary t Position	Net Pension Liability (Asset) (a) - (b)	
Balances at September 30, 2014	\$ 170,583	\$	158,554	\$	12,029
Changes for the year					
Service cost	11,556		-		11,556
Interest on total pension liability	12,953		-		12,953
Differences between expected					
and actual experience	(717)		-		(717)
Contributions - employee	_		1,574		(1,574)
Contributions - employer	-		11,625		(11,625)
Net investment income	-		20,134		(20,134)
Benefit payments, including refunds					
of employee contributions	(7,021)		(7,021)		-
Administrative expenses	-		(407)		407
Assumption changes	 6,650		-		6,650
Net changes	 23,421		25,905		(2,484)
Balances at September 30, 2015	\$ 194,004	\$	184,459	\$	9,545

The net pension liability of the District has been calculated using a discount rate of 7.25% and 7.75% at October 1, 2015 and 2014, respectively. The following presents the net pension liability using a discount rate 1% higher and 1% lower than the current rate as of September 30, 2016 and 2015.

Current Discount						
1% Decrease 6.25 %			Rate 7.25 %		1% Increase 8.25 %	
\$	49,486	\$	22,613	\$	424	
		6.25 %	1% Decrease 6.25 %	6.25 % 7.25 %	1% Decrease Rate 1% 6.25 % 7.25 %	

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

	Prior					
	1% Decrease 6.75 %		Discount Rate 7.75 %		1% Increase 8.75 %	
District's net pension liability						
as of September 30, 2015	\$	35,635	\$	9,545	\$	(11,931)

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

For the year ended September 30, 2016 and 2015, the District recognized pension expense of \$14,048 and \$10,810, respectively. At September 30, 2016 and 2015, the District reported deferred outflows of resources and deferred inflows of resources related to pensions from the following sources:

2016						
	Deferred	Deferred				
Outflows of Resources			Inflows of Resources			
\$	1,353	\$	433			
	13,579		-			
	4,016		3,855			
	8,581		-			
\$	27,529	\$	4,288			

Differences between expected and actual experience
Employer contributions subsequent to the measurement date
Changes of assumptions
Net difference between projected and
actual earnings on plan investments

	2015					
	Deferred		Deferred			
_	Outflows of Resources	Inflows of Resources				
\$	-	\$	575			
	12,313		-			
	5,333		-			
	-		6,428			
\$	17,646	\$	7,003			

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

At September 30, 2016 and 2015, the District reported \$13,579 and \$12,313, respectively, as deferred outflows of resources related to pensions resulting from District contributions subsequent to the measurement date that will be recognized as a reduction of the net pension liability at September 30, 2017 and 2016.

Other amounts reported as deferred outflows of resources and deferred inflows of resources at September 30, 2016, related to pensions will be recognized in pension expense as follows:

Year ending September 30	
2017	\$ 2,240
2018	2,240
2019	2,240
2020	 2,942
	\$ 9,662

Pension Plan Fiduciary Net Position

As of October 1, 2015 and 2014, the Plan's fiduciary net position was comprised of the following:

	2015		2014	
Cash and cash equivalents	_\$	274_	\$	77_
Investments, at fair value		<u> </u>		
Common stocks		75,508		72,370
Mutual funds		316,089		250,081
Common/collective trust funds		243,276		208,347
103-12 investment fund		28,283		25,816
Government securities		103		
Total investments at fair value	\$	663,259	\$	556,614
Total Plan Fiduciary Net Pension	\$	663,533	\$	556,691

The District's interest in the Plan net position as of the measurement date of October 1, 2015 and 2014, was \$189,128 and \$184,459, respectively.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Investment Policy – Investment policy decisions are established and maintained by the Trustees of the THA Retirement Plan for Member Hospitals. The Trustees have several asset mix alternatives from which participating employers may choose in order to control risk. The Trustees employ and select investment managers with the advice of investment counsel which is completely independent of the investment managers.

The primary goal of a pension fund is to help pay the cost of the pension plan while providing adequate security to meet the benefits promised under the plan. As a consequence, two important dimensions of a pension plan's investment program are expected return and expected risk.

The plan trustees diversify plan investments among asset classes, recognizing that there is a relationship between the level of risk assumed in an investment program and the level of return that should be expected. Appropriate diversification better enables to balance risk and return. The fund's diversification guidelines are set forth below:

Asset Class/Style	Target Asset Mix
Large Cap U.S Equities	50%
Small Cap U.S. Equities	15%
International Equities	10%
Total Equities	75%
Intermediate fixed income	25%
Long duration fixed income	0%
Total fixed income	25%

The Trustees maintain a portfolio structure that may combine active and passive management in order to balance the objectives of enhanced return and cost control.

Passive equity and fixed income portfolios invest in a substantially similar manner as that of the underlying benchmark.

Active equity managers have the following requirements:

- The equity portion of the portfolio should not be less that 90 percent of the portfolio, measured at market value.
- Equity holdings in any one economic sector should not exceed the greater of 30 percent of the portfolio or 10 percentage points above the sector weight in the benchmark.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

• Equity holdings in any single company (including common stock and convertible securities) should not exceed 10 percent of the portfolio.

Active Fixed Income managers have the following requirements:

- The primary investments should be government, corporate and mortgage securities.
- Holdings in obligations of any single entity (with the exception of the U.S. government and/or its agencies) should not exceed 5 percent of the portfolio.

The common collective trust fund investment objective is to approximate as closely as practicable, before expenses, to the performance of the S&P 500 Index over the long term.

The 103-12 investment fund objective is to approximate as closely as practicable to the performance of the MSCI EAFE Index.

Investment Rate of Return – The annual money-weighted rate of return on pension plan investments, net of expenses, which expresses net investment performance adjusted for changing amounts actually invested each month was (1.8%) for the 12 months ended October 1, 2015.

Credit Risk – Credit risk is the risk that the issuer or other counterparty to an investment will not fulfill its obligations. It is the Plan's policy to limit its holdings in obligations of any single entity, excluding U.S. government and its agencies, to 5% of the portfolio.

Custodial Credit Risk – For an investment, custodial credit risk is the risk that, in the event of the failure of the counterparty, the Plan will not be able to recover the value of its investment or collateral securities that are in the possession of an outside party. All of the Plan's investments are held in trust accounts.

Concentration of Credit Risk – It is the Plan's policy to limit equity holdings in any one economic sector to the greater of 30% of the portfolio or 10% above the sector weight in the benchmark and limit equity holdings in any single company to 10% of the portfolio. Additionally, the Plan's policy limits holdings in fixed income obligations of any single entity, excluding U.S. government and its agencies, to 5% of the portfolio.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

The following table reflects the Plan's investments in single issuers that represent more than 5% of total investments:

	2015	2014
		_
State Street S&P 500 Index NL Fund	36.7%	37.4%
Vanguard Small Cap Index	14.4%	14.8%
Dodge & Cox International Stock	4.2%	5.2%
State Street Aggregate Bond Index NL Fund	13.8%	10.7%
PIMCO Total Return	14.9%	10.7%

Following is a description of the valuation methodologies and inputs used for pension plan assets measured at fair value on a recurring basis, as well as the general classification of pension plan assets pursuant to the valuation hierarchy.

The fair value of the pension plan assets at October 1, 2015 and 2014, were as follows:

			Fair Va	alue Mea	surements	ıts Using				
	Carrying Amount	Quoted Prices in Active Markets for Identical Assets (Level 1)		Significant Other Observable Inputs (Level 2)						
October 1, 2015										
Investments by fair value level										
Common stocks	\$ 75,508	\$	75,508	\$	-	\$	-			
Mutual funds	316,089		316,089		-		-			
Government securities	 103				103	-				
Total investments by fair value level	 391,700	\$	391,597	\$	103	\$				
Investments measured at the net asset value (NAV) (A)										
Common/collective trust fund	243,276									
103-12 investment fund	28,283									
Total investments measured at the NAV	 271,559									
Total investments measured at fair value	\$ 663,259									

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

		Fair Value Measurements Using									
	Carrying Amount	Acti for	Quoted Prices in ve Markets Identical Assets Level 1)	Significant Other Observable Inputs (Level 2)		Signif Unobse Inp (Lev	ervable uts				
October 1, 2014											
Investments by fair value level											
Common stocks	\$ 72,370	\$	72,370	\$	-	\$	-				
Mutual funds	 250,081		250,081								
Total investments by fair value level	 322,451	\$	322,451	\$	_	\$					
Investments measured at the											
net asset value (NAV) (A)											
Common/collective trust fund	208,347										
103-12 investment fund	 25,816										
Total investments measured at the NAV	234,163										
Total investments measured at fair value	\$ 556,614										

(A) Certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts included above are intended to permit reconciliation of the fair value hierarchy to the amounts disclosed for total plan investments at fair value.

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 Plan did not hold any Level 3 securities at October 1, 2015 or 2014.

The valuation method for investments measured at the net asset value (NAV) per share (or its equivalent) are presented as above. There were no unfunded commitments or redemption restrictions for these funds.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Other Benefit Plans

The District has an IRC Section 401(a) plan that includes an employer match calculated as 50% of an employee's contribution to the IRC Section 403(b) plan discussed below, up to 4% of pay. The contributions for the employer match on the plan were approximately \$4,314 and \$3,925 for the years ended September 30, 2016 and 2015, respectively.

In addition, the District offers its employees a tax-deferred annuity plan created in accordance with IRC Section 457. The Plan, available to all District employees, permits them to defer a portion of their salary until future years. All amounts of compensation deferred under the Plan and income attributable to those amounts are solely the property of the employee. Thus, the Plan amounts are not reported in the accompanying financial statements.

The District also offers its employees a tax-deferred annuity plan created in accordance with IRC Section 403(b). The Plan, available to all District employees, permits them to defer a portion of their salary until future years. All amounts of compensation deferred under the Plan and income attributable to those amounts are solely the property of the employee. Thus, the Plan amounts are not reported in the financial statements. Employee contributions were \$11,326 and \$10,162 for the years ended September 30, 2016 and 2015, respectively.

The District has a Governmental Excess Benefit Arrangement Plan for executives approved by the Board. This plan is to provide participants in the defined benefit plan that portion of the participant's benefits that would otherwise be payable under the terms of the defined benefit plan, except for the limitations on benefits imposed by Section 415(b) of the IRC. Contributions to this plan are included in noncurrent cash and investments and the plan liability is recorded in other long-term liabilities in the balance sheets. As of September 30, 2016 and 2015, \$824 and \$345, respectively, in contributions are included in noncurrent cash and investments and \$877 and \$477, respectively, was due under this plan. Approximately \$478 and \$150 of benefit expense was recognized in 2016 and 2015, respectively.

Note 14: Related Party Transactions

The District is party to an indigent care affiliation agreement with the Tarrant County Indigent Care Corporation (TCICC), a non-profit corporation comprised of affiliated Tarrant County hospitals. This agreement was intended to increase funding for the Medicaid population and to access federal funding for the indigent population of Tarrant County through the Texas Medicaid Supplemental Payment Program also known as the Private Upper Payment Limit Program (UPL). During 2012, funding through the UPL program was largely replaced with funding from the Waiver. This program allows for continued funding under the current TCICC agreement.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Under this program, the District contributes certain government funds to the state of Texas, limited to the amount allowed based on aggregate statewide funding caps. TCICC uses the funds received for medical direction and indigent care for services to the Tarrant County indigent care population provided at the District's facilities. Prior to this agreement, the medical direction and indigent care services were funded by the District.

Services provided by TCICC were valued at approximately \$33,721 and \$45,308 for the years ended September 30, 2016 and 2015, respectively. As part of the affiliation agreement, the District provided \$25,549 and \$34,012 in funding to the program for the years ended September 30, 2016 and 2015, respectively. The District recognizes revenue from contributed services equal to the difference in the value of the services provided by TCICC and the program funding provided by the District. Contributed services revenue was \$8,171 and \$11,296 for 2016 and 2015, respectively.

Should TCICC cease providing these services, the District has entered a standby agreement with physicians participating in this program under which the District would assume the payment obligations of TCICC.

Note 15: 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

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Recurring Measurements

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:

		Fair Value Measurements Using								
	Carrying Amount	Pric Active for Id	oted ces in Markets dentical ssets evel 1)	Ob	gnificant Other oservable Inputs Level 2)	Signif Unobse Inp (Lev	ervable uts			
September 30, 2016										
Investments by fair value level										
U.S. Treasury obligations	\$ 30,712	\$	-	\$	30,712	\$	-			
U.S. agency obligations	38,085		=		38,085		-			
Investment pool	104,610		-		104,610		-			
Municipal bonds	5,564		-		5,564		-			
Commercial paper	180,391		-		180,391		-			
Mutual funds	 375		375							
Total investments by fair value level	359,737	\$	375	\$	359,362	\$				
Investment pool carried at										
amortized cost	 1,118									
Total investments	\$ 360,855									

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

			Fair Value Measurements Using									
		carrying Amount	Pric Active for Ic	oted ces in Markets dentical ssets evel 1)	Ob	gnificant Other oservable Inputs Level 2)	Unobs Inp	ficant ervable outs /el 3)				
September 30, 2015												
Investments by fair value level												
U.S. Treasury obligations	\$	716	\$	-	\$	716	\$	-				
U.S. agency obligations		45,540		-		45,540		-				
Investment pool		109,378		-		109,378		-				
Municipal bonds		5,674		-		5,674		-				
Commercial paper		29,944		-		29,944		-				
Money market mutual funds		37		-		37		-				
Mutual funds		528		528								
Total investments by fair value level		191,817	\$	528	\$	191,289	\$					
Investment pool carried at		1.462										
amortized cost	-	1,463										
Total investments	\$	193,280										

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 District held no Level 3 investments as of September 30, 2016 or 2015.

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

Note 16: Condensed Combining Information

The following tables include condensed combining balance sheet information for the District and its blended component units as of September 30, 2016 and 2015:

	September 30, 2016												
		Hospital	Α	cclaim	Fou	undation	Eli	minations		Total			
Assets and Deferred Outflows of Resources													
Current assets	\$	494,078	\$	7,204	\$	1,160	\$	(2,863)	\$	499,579			
Due from affiliates		14,164		7,608		27		(21,799)		-			
Noncurrent cash and investments		187,808		-		1,947		-		189,755			
Capital assets, net		270,883		-		1		-		270,884			
Other noncurrent assets						195				195			
Total assets		966,933		14,812		3,330		(24,662)		960,413			
Deferred outflows of resources		27,529								27,529			
Total assets and deferred outflows													
of resources	\$	994,462	\$	14,812	\$	3,330	\$	(24,662)	\$	987,942			
Liabilities, Deferred Inflows of Resources and I	Net Posi	tion											
Current liabilities	\$	85,767	\$	5,920	\$	17	\$	(2,863)	\$	88,841			
Due to affiliates		7,635		14,086		78		(21,799)		-			
Estimated self-insurance costs		1,550		-		-		-		1,550			
Long-term debt		40,092		-		-		-		40,092			
Net pension liability		22,613		-		-		-		22,613			
Other long-term liabilities		964		-		-		-		964			
Total liabilities		158,621		20,006		95		(24,662)		154,060			
Deferred inflows of resources Net Position		4,288								4,288			
Net investment in capital assets		227,823		_		1		_		227,824			
Restricted expendable		-		_		2,008		_		2,008			
Restricted nonexpendable		-		_		315		-		315			
Unrestricted		603,730		(5,194)		911		-		599,447			
Total net position	-	831,553	-	(5,194)		3,235		_		829,594			
Total liabilities, deferred inflows of	-									,			
resources and net position	\$	994,462	\$	14,812	\$	3,330	\$	(24,662)	\$	987,942			

Notes to Financial Statements September 30, 2016 and 2015

(In Thousands)

	September 30, 2015									
		Hospital	,	JPSPG	Fot	undation	Elir	minations		Total
Assets										
Current assets	\$	499,808	\$	30,266	\$	529	\$	(1,451)	\$	529,152
Due from affiliates		889		2,225		25		(3,139)		-
Noncurrent cash and investments		185,377		-		2,159		-		187,536
Capital assets, net		287,773		1,271		2				289,046
Total assets		973,847		33,762		2,715		(4,590)		1,005,734
Deferred outflows of resources		17,646								17,646
Total assets and deferred outflows										
of resources	\$	991,493	\$	33,762	\$	2,715	\$	(4,590)	\$	1,023,380
Liabilities and Net Position										
Current liabilities	\$	145,381	\$	5,687	\$	36	\$	(1,451)	\$	149,653
Due to affiliates		2,250		855		34		(3,139)		-
Estimated self-insurance costs		1,422		-		-		-		1,422
Long-term debt		43,307		-		-		_		43,307
Net pension liabilities		9,545		-		-		_		9,545
Other long-term liabilities		483		937		-		_		1,420
Total liabilities		202,388		7,479		70		(4,590)		205,347
Deferred inflows of resources Net Position		7,003	_				_			7,003
Net investment in capital assets		238,710		1,271		2		_		239,983
Restricted expendable		230,710		1,271		1,646		_		1,646
Restricted nonexpendable		_		_		315		_		315
Unrestricted		543,392		25,012		682				569,086
Total net position		782,102		26,283		2,645				811,030
Total liabilities, deferred inflows of resources and net position	\$	991,493	\$	33,762	\$	2,715	\$	(4,590)	\$	1,023,380

The following tables include condensed combining statements of revenues, expenses and changes in net position information for the District and its blended component units for the years ended September 30, 2016 and 2015:

	September 30, 2016												
	Hospital		JP	JPSPG		Acclaim		Foundation		Eliminations		Total	
Operating revenues	\$	571,852	\$	-	\$	18,591	\$	130	\$	(14,537)	\$	576,036	
Operating expenses		879,287				23,789		2,512		(16,283)		889,305	
Operating income (loss)		(307,435)		-		(5,198)		(2,382)		1,746		(313,269)	
Nonoperating revenues (expenses)		330,497		-		4		2,972		(1,746)		331,727	
Capital grants		106		-		-		-		-		106	
Transfer of JPSPG net position		26,283		(26,283)									
Increase (decrease) in net position		49,451		(26,283)		(5,194)		590		-		18,564	
Net position, beginning of year		782,102		26,283				2,645				811,030	
Net position, end of year	\$	831,553	\$		\$	(5,194)	\$	3,235	\$		\$	829,594	

Notes to Financial Statements September 30, 2016 and 2015

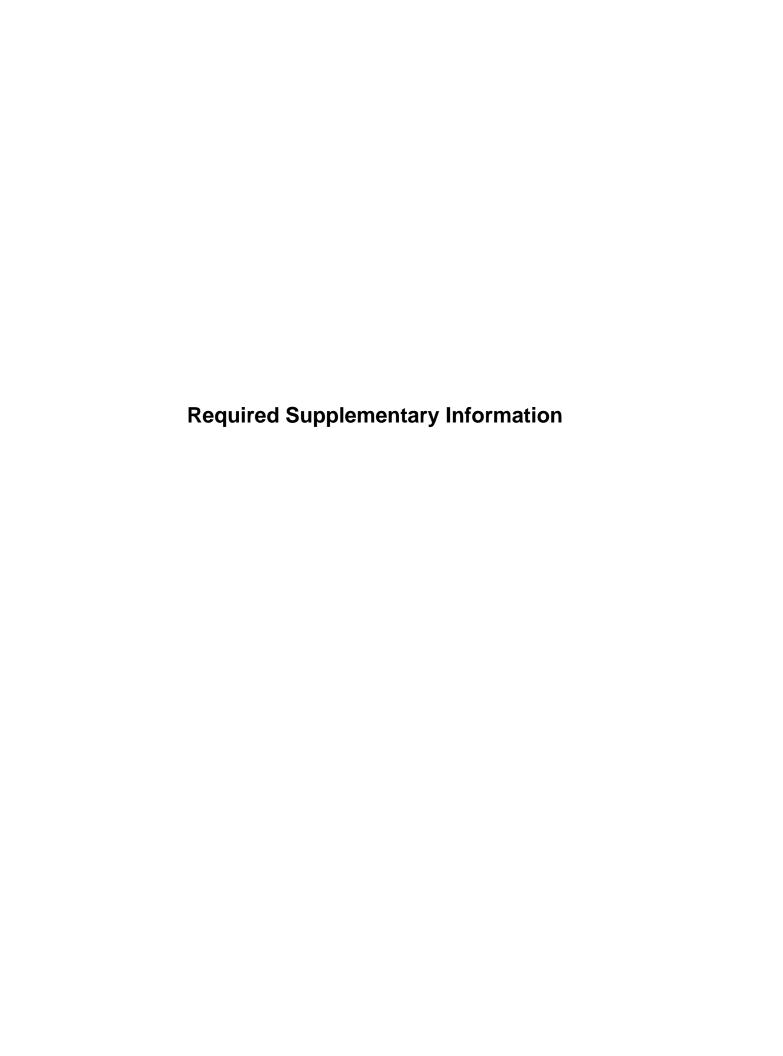
(In Thousands)

	September 30, 2015												
	Hospital		,	JPSPG		undation	Eli	minations		Total			
Operating revenues Operating expenses	\$	535,774 808,330	\$	49,627 42,894	\$	161 2,394	\$	(19,219) (20,676)	\$	566,343 832,942			
Operating income (loss) Nonoperating revenues (expenses) Capital grants		(272,556) 317,163 85		6,733 58		(2,233) 2,406		1,457 (1,457)		(266,599) 318,170 85			
Increase in net position		44,692		6,791		173		-		51,656			
Net position, beginning of year		737,410		19,492		2,472				759,374			
Net position, end of year	\$	782,102	\$	26,283	\$	2,645	\$		\$	811,030			

The following tables include condensed combining statements of cash flows information for the District and its blended component units for the years ended September 30, 2016 and 2015:

	September 30, 2016												
	Hospital		JPSPG		Acclaim		Foundation		Eliminations		Total		
Net cash provided by (used in)													
Operating activities	\$ (229,171)	\$	-	\$	1,065	\$	194	\$	-	\$	(227,912)		
Noncapital financing activities	338,984		(19,675)		-		-		-		319,309		
Capital and related financing activities	(27,306)		-		-		-		-		(27,306)		
Investing activities	(88,166)		-		4		42		-		(88,120)		
Increase in cash and cash equivalents	(5,659)		(19,675)		1,069		236		-		(24,029)		
Cash and cash equivalents, beginning of year	 184,969		19,675				2,265				206,909		
Cash and cash equivalents, end of year	\$ 179,310	\$		\$	1,069	\$	2,501	\$		\$	182,880		

	September 30, 2015												
		Hospital		JPSPG		Foundation		Eliminations		Total			
Net cash provided by (used in)													
Operating activities	\$	(181,174)	\$	1,312	\$	174	\$	-	\$	(179,688)			
Noncapital financing activities		305,474		-		-		-		305,474			
Capital and related financing activities		(43,360)		-		-		-		(43,360)			
Investing activities		(23,519)		58		10		-		(23,451)			
Increase in cash and cash equivalents		57,421		1,370		184		-		58,975			
Cash and cash equivalents, beginning of year		127,548		18,305		2,081				147,934			
Cash and cash equivalents, end of year	\$	184,969	\$	19,675	\$	2,265	\$	_	\$	206,909			



Schedule of Changes in District's Net Position Liability and Related Ratios Year Ending September 30,

(In Thousands)

	 2016	2015	
Total pension liability Service cost Interest on total pension liability Differences between expected and actual experiend Changes of assumptions Benefit payments, including refunds of employee contributions	\$ 12,181 14,805 1,720 (4,900) (6,069)	\$	11,556 12,953 (717) 6,650 (7,021)
Net change in total pension liability	17,737		23,421
Total pension liability—beginning	 194,004		170,583
Total pension liability—ending (a)	\$ 211,741	\$	194,004
Plan fiduciary net position Contributions—employer Contributions—employee Net investment income (loss) Benefit payments, including refunds of employee contributions Administrative expense	\$ 12,313 1,641 (2,629) (6,069) (587)	\$	11,625 1,574 20,134 (7,021) (407)
Net change in plan fiduciary net position	4,669		25,905
Plan fiduciary net position—beginning	 184,459		158,554
Plan fiduciary net position—ending (b)	\$ 189,128	\$	184,459
District's net pension liability—ending (a) – (b)	\$ 22,613	\$	9,545
Plan fiduciary net position as a percentage of the total pension liability Covered-employee payroll District's net pension liability as a percentage of covered-employee payroll	\$ 89.32% 182,418 12.40%	\$	95.08% 178,847 5.34%

Notes to Schedule:

Changes of assumptions:

- 1) Investment return reduced to 7.25%
- 2) Mortality updated to RP-2014 projected from 2006 base year using MP-2015
- 3) Withdrawal/Termination and Retirement Rates changed to reflect recent experience
- 4) Aggregate Payroll Growth Assumption and Form of Payment Assumption change to reflect recent experience.

This schedule is presented as of October 1, which is the measurement date.

This schedule is presented to illustrate the requirement to show information for 10 years. However, until a full 10-year trend is compiled, the District will present information for those years for which information is available. All amounts are in thousands, unless otherwise indicated.

Schedule of District Contributions Year Ending September 30,

(In Thousands)

Year Ending September 30,	det	tuarially termined stribution	Contributions in relation to the actuarially determined contribution		Contribution deficiency (excess)		Covered- employee payroll		Contributions as a percentage of covered- employee payroll	
2016	\$	13,579	\$	13,579	\$	-	\$	201,170	6.75%	
2015	\$	12,313	\$	12,313	\$	-	\$	182,418	6.75%	

Notes to Schedule:

Valuation date: October 1, 2015

Actuarially determined contribution rates are calculated as of October 1, which is the most recent valuation date prior to the end of the fiscal year in which contributions are reported.

Methods and assumptions used to determine contribution rates:

Actuarial cost method Entry age

Amortization method Level percentage of payroll, open

Remaining amortization period 9 years at October 1, 2015; recalculated annually; employer contribution rate

constant unless amortization period > 25 years or ≤ 0 years

Asset valuation method 5-year smoothed market

Inflation 3.25%

Salary increases 5.0%, average, including inflation

Investment rate of return 7.25%, net of pension plan investment expense, including inflation

Retirement age 60

Mortality RP-2014 Total Employee Mortality Table, Projected from 2006 base year with Scale

MP-2015 mortality improvement scale

This schedule is presented to illustrate the requirement to show information for 10 years. However, until a full 10-year trend is compiled, the District will present information for those years for which information is available. All amounts are in thousands unless otherwise indicated.



Balance Sheet Information September 30, 2016

(In Thousands)

Assets and Deferred Outflow of Resources

	Hospital	Acclaim	Foundation	Eliminations	Total	
Current Assets						
Cash and cash equivalents	\$ 179,227	\$ 1,212	\$ 869	\$ -	\$ 181,308	
Short-term investments	204,612	-	-	-	204,612	
Patient accounts receivable, net	48,064	2,733	-	(952)	49,845	
Property taxes receivable, net	4,169	-	-	-	4,169	
Supplemental Medicaid funding receivable	36,178	1,353	-	-	37,531	
Internally designated for self-insurance, current portion	145	-	-	-	145	
Supplies inventory	10,446	-	-	-	10,446	
Prepaid expenses and other assets	11,237	1,906	291	(1,911)	11,523	
Total current assets	494,078	7,204	1,160	(2,863)	499,579	
Due from Affiliates	14,164	7,608	27	(21,799)		
Noncurrent Cash and Investments						
Internally designated for debt service	600	-	-	-	600	
Internally designated for self-insurance	11,807	-	-	-	11,807	
Restricted by donors for capital acquisitions and						
specific operating activities	-	-	1,947	-	1,947	
Internally designated for capital acquisitions and						
operating activities	175,401				175,401	
Total noncurrent cash and investments	187,808		1,947		189,755	
Other Assets			195		195	
Capital Assets, Net	270,883		1		270,884	
Total assets	966,933	14,812	3,330	(24,662)	960,413	
Deferred Outflows of Resources	27,529				27,529	
Total assets and deferred						
outflows of resources	\$ 994,462	\$ 14,812	\$ 3,330	\$ (24,662)	\$ 987,942	

Liabilities, Deferred Inflows of Resources and Net Position

	Hospital Acclaim		Foundation	Eliminations	Total	
Current Liabilities Accounts payable Accrued expenses Due to third-party payers	\$ 39,214 33,866 4,569	\$ 761 5,052	\$ 17 -	\$ (2,863)	\$ 37,129 38,918 4,569	
Current portion of self-insurance costs Current maturities of long-term debt	5,133 2,985	107			5,240 2,985	
Total current liabilities Due to Affiliates	85,767 7,635	5,920 14,086	17 78	(2,863) (21,799)	88,841	
Estimated Self-insurance Costs	1,550	-	-	-	1,550	
Long-term Debt	40,092	-	-	-	40,092	
Net Pension Liability	22,613	-	-	-	22,613	
Other Long-term Liabilities	964			<u> </u>	964	
Total liabilities	158,621	20,006	95	(24,662)	154,060	
Deferred Inflows of Resources	4,288				4,288	
Net Position Net investment in capital assets Restricted expendable Restricted nonexpendable Unrestricted	227,823 - - 603,730	(5,194)	2,008 315 911	- - -	227,824 2,008 315 599,447	
Total net position	831,553	(5,194)	3,235		829,594	
Total liabilities, deferred inflows of resources and net position	\$ 994,462	\$ 14,812	\$ 3,330	\$ (24,662)	\$ 987,942	

Statement of Revenues, Expenses and Changes in Net Position Information Year Ended September 30, 2016

(In Thousands)

	Hospital	JPSPG	Acclaim	Foundation	Eliminations	Total
Operating Revenues						
Net patient service revenue	\$ 366,553	\$ -	\$ 4,173	\$ -	\$ (2,471)	\$ 368,255
Supplemental Medicaid funding	154,032	-	1,353	-	-	155,385
Other operating revenue	51,267		13,065	130	(12,066)	52,396
Total operating revenues	571,852		18,591	130	(14,537)	576,036
Operating Expenses						
Salaries and related expenses	470,077	-	21,620	627	-	492,324
Professional fees and purchased services	178,801	-	1,243	705	(15,583)	165,166
Supplies	150,499	-	517	251	(85)	151,182
Depreciation and amortization	39,715	-	-	-	-	39,715
Other	40,195		409	929	(615)	40,918
Total operating expenses	879,287		23,789	2,512	(16,283)	889,305
Operating Income (Loss)	(307,435)		(5,198)	(2,382)	1,746	(313,269)
Nonoperating Revenues (Expenses)						
Property tax revenue	319,611	_	_	-	-	319,611
Contributed services	8,171	_	_	_	_	8,171
Contribution revenue	222	_	_	2,939	(1,856)	1,305
Interest expense	(1,430)	_	_	, <u>-</u>	-	(1,430)
Investment return and other	3,923		4	33	110	4,070
Total nonoperating revenues (expenses)	330,497		4	2,972	(1,746)	331,727
Excess (Deficiency) of Revenues Over Expenses						
Before Capital Grants and Gifts	23,062	-	(5,194)	590	-	18,458
Capital Grants and Gifts	106	-	-	-	-	106
Transfer of JPSPG Net Position	26,283	(26,283)				
Increase (Decrease) in Net Position	49,451	(26,283)	(5,194)	590	<u>-</u>	18,564
Net Position, Beginning of Year	782,102	26,283		2,645		811,030
Net Position, End of Year	\$ 831,553	\$ -	\$ (5,194)	\$ 3,235	\$ -	\$ 829,594