

STATE OF MINNESOTA

Office of the State Auditor



Rebecca Otto
State Auditor

**CENTRAL MINNESOTA EMERGENCY
MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

FOR THE YEAR ENDED DECEMBER 31, 2007

Description of the Office of the State Auditor

The mission of the Office of the State Auditor is to oversee local government finances for Minnesota taxpayers by helping to ensure financial integrity and accountability in local governmental financial activities.

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

The State Auditor performs approximately 160 financial and compliance audits per year and has oversight responsibilities for over 3,300 local units of government throughout the state. The office currently maintains five divisions:

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

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

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

Pension - monitors investment, financial, and actuarial reporting for approximately 730 public pension funds; and

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

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

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**CENTRAL MINNESOTA EMERGENCY
MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

For the Year Ended December 31, 2007



**Audit Practice Division
Office of the State Auditor
State of Minnesota**

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**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

TABLE OF CONTENTS

| | <u>Reference</u> | <u>Page</u> |
|--|------------------|-------------|
| Introductory Section | | |
| Organization | | 1 |
| Financial Section | | |
| Independent Auditor's Report | | 2 |
| Management's Discussion and Analysis | | 4 |
| Basic Financial Statements | | |
| Statement of Net Assets of Governmental Activities and General Fund Balance Sheet | Statement 1 | 7 |
| Statement of Activities of Governmental Activities and General Fund Revenues, Expenditures, and Changes in Fund Balance | Statement 2 | 8 |
| Notes to the Financial Statements | | 9 |
| Management and Compliance Section | | |
| Schedule of Findings and Recommendations | | 17 |
| Report on Internal Control Over Financial Reporting and Minnesota Legal Compliance | | 19 |

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**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

**ORGANIZATION
DECEMBER 31, 2007**

| <u>Name</u> | <u>Representing</u> | <u>Position</u> |
|----------------------|---------------------|---------------------|
| Board Members | | |
| Jim McMahon | Benton County | Chair |
| Jeff Peterson | Cass County | |
| Ben Montzka | Chisago County | |
| Rachel Reabe Nystrom | Crow Wing County | |
| Tom Pagel | Isanti County | |
| Les Nielsen | Kanabec County | |
| Roger Tellinghuisen | Mille Lacs County | |
| Duane Johnson | Morrison County | |
| Ed Montbriand | Pine County | |
| John Riebel | Sherburne County | |
| Don Otte | Stearns County | |
| Mark Blessing | Todd County | Secretary/Treasurer |
| Orville Meyer | Wadena County | |
| Karla Heeter | Wright County | Vice Chair |
| Coordinator | | |
| Scott Miller | | |

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REBECCA OTTO
STATE AUDITOR

STATE OF MINNESOTA

OFFICE OF THE STATE AUDITOR

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INDEPENDENT AUDITOR'S REPORT

Joint Powers Board
Central Minnesota Emergency
Medical Services Region

We have audited the accompanying financial statements of the governmental activities and the General Fund of the Central Minnesota Emergency Medical Services Region as of and for the year ended December 31, 2007, which collectively comprise the Region's basic financial statements as listed in the table of contents. These financial statements are the responsibility of the Region's management. Our responsibility is to express opinions on these financial statements based on our audit.

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

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the governmental activities and the General Fund of the Central Minnesota Emergency Medical Services Region as of December 31, 2007, and the respective changes in financial position thereof for the year then ended in conformity with accounting principles generally accepted in the United States of America.

The Management's Discussion and Analysis is not a required part of the basic financial statements but is supplementary information required by the Governmental Accounting Standards Board. We have applied certain limited procedures, which consisted principally of

inquiries of management regarding the methods of measurement and presentation of the required supplementary information. However, we did not audit the information and express no opinion on it.

/s/Rebecca Otto

REBECCA OTTO
STATE AUDITOR

April 28, 2008

/s/Greg Hierlinger

GREG HIERLINGER, CPA
DEPUTY STATE AUDITOR

MANAGEMENT'S DISCUSSION AND ANALYSIS

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**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST CLOUD, MINNESOTA**

**MANAGEMENT'S DISCUSSION AND ANALYSIS
DECEMBER 31, 2007
(Unaudited)**

The Central Minnesota Emergency Medical Services Region's Management's Discussion and Analysis (MD&A) provides an overview of the Region's financial activities for the fiscal year ended December 31, 2007. Since this information is designed to focus on the current year's activities, resulting changes, and currently known facts, it should be read in conjunction with the Region's financial statements.

FINANCIAL HIGHLIGHTS

- Total net assets are \$95,896. The net assets increased by \$7,042 for the year ended December 31, 2007.
- The Region applied for outside grants to support activities. The Region received two additional grants this reporting period totaling \$62,511: the HRSA Hospital Preparedness Program of \$55,000 and the Volunteer Reimbursement Carryover Funds of \$7,511. These grants will continue into 2008.
- In August 2007, an addendum to the EMS grant contract was completed to include additional funds awarded of \$100,000. These funds are to be expended by June 2009.

OVERVIEW OF THE FINANCIAL STATEMENTS

This discussion and analysis is intended to serve as an introduction to the basic financial statements. The Region's basic financial statements consist of two statements which combine government-wide financial statements and fund financial statements, and notes to the financial statements. The MD&A (this section) is required to accompany the basic financial statements and, therefore, is included as required supplementary information.

There are two financial statements. The first column of each statement presents governmental fund data, which focus on how money flows in and out and the balances left at year-end that are available for spending. These columns are reported using an accounting method called modified accrual accounting. This method measures cash and all other financial assets that can be readily converted to cash. This column provides a detailed short-term view of the Region's general government operations and the basic services it provides. Governmental fund information helps you determine

whether there are more or fewer financial resources that can be spent in the near future to finance the Region's programs. We reconcile the relationship (or differences) between governmental funds and governmental activities (reported in the third column) in the center column of each statement.

The third column in each statement presents the Statement of Net Assets and the Statement of Activities which provide information about the activities of the Region as a whole and present a longer-term view of the Region's finances. These columns tell how these services were financed in the short term as well as what remains for future spending.

The Region as a Whole

The Region's combined net assets increased from \$88,854 to \$95,896. Our analysis below focuses on the net assets (Table 1) and changes in net assets (Table 2) of the Region's governmental activities.

Table 1 - Net Assets

| | <u>2007</u> | <u>2006</u> |
|-----------------------------|-------------------|------------------|
| Cash and pooled investments | \$ 85,125 | \$ 82,474 |
| Due from other governments | 19,531 | 12,213 |
| | <u>\$ 104,656</u> | <u>\$ 94,687</u> |
| Total assets | | |
| Current liabilities | \$ 6,652 | \$ 5,030 |
| Noncurrent liabilities | 2,108 | 803 |
| | <u>\$ 8,760</u> | <u>\$ 5,833</u> |
| Total liabilities | | |
| Net Assets | | |
| Unrestricted | <u>\$ 95,896</u> | <u>\$ 88,854</u> |

Net assets of the Region increased by 7.9 percent. Unrestricted net assets--the part of net assets that can be used to finance day-to-day operations without constraints established by enabling legislation or other legal requirements--changed from an \$88,854 surplus at December 31, 2006, to \$95,896 at the end of this year.

Table 2 - Changes in Net Assets

| | <u>2007</u> | <u>2006</u> |
|------------------|-------------------|-------------------|
| Revenues | | |
| Program revenues | | |
| Operating grants | \$ 207,339 | \$ 167,875 |
| Fees and charges | 20,323 | 53,444 |
| | <u>\$ 227,662</u> | <u>\$ 221,319</u> |
| Total Revenues | | |

| | <u>2007</u> | <u>2006</u> |
|---------------------------------------|-------------------|-------------------|
| Program expenses | | |
| Health | | |
| EMS systems management | \$ 109,784 | \$ 74,212 |
| EMS personnel training | 63,861 | 56,383 |
| EMS devices and supplies | - | 20,571 |
| Public safety involvement | 18,029 | 367 |
| Patient/nonpatient care EMS equipment | 654 | 47 |
| Bioterrorism training and support | 18,389 | 55,377 |
| Volunteer EMT | <u>9,903</u> | <u>10,167</u> |
| Total Expenses | <u>\$ 220,620</u> | <u>\$ 217,124</u> |
| Increase (Decrease) in Net Assets | <u>\$ 7,042</u> | <u>\$ 4,195</u> |

The Region's General Fund

As the Region completed the year, its governmental fund (as presented in the first column of the statements) reported a fund balance of \$98,004, which is above last year's fund balance of \$89,657, an increase of 9.3 percent. The Region has adopted grant budgets for the various grant periods. These budgets may be amended or modified as additional grants are received. A comparison to budgeted revenues and expenditures to actual has not been presented in the financial statements because the budgets are not adopted on an annual fiscal-period basis.

ECONOMIC FACTORS AND NEXT YEAR'S GRANT BUDGETS AND RATES

The Region's officials considered many factors when planning for the calendar year ending December 31, 2008.

The Region continues to see a decline in the Seat Belt Relief grant. For 2008 budget purposes, the Region has taken a conservative approach in estimating the projected revenue to be received in 2008. The Region, however, continually reviews revenues and expenditures to determine if changes need to be made as the year progresses.

CONTACTING THE REGION'S FINANCIAL MANAGEMENT

This financial report is designed to provide our citizens, customers, investors, and creditors with a general overview of the Region's finances and to show the Region's accountability for the money it receives. If you have questions about this report, or need additional financial information, contact the Central Minnesota Emergency Medical Services Region Director, 705 Courthouse Square, P.O. Box 1107, St. Cloud, Minnesota 55302.

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BASIC FINANCIAL STATEMENTS

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**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

Statement 1

**STATEMENT OF NET ASSETS OF GOVERNMENTAL ACTIVITIES
AND GENERAL FUND BALANCE SHEET
DECEMBER 31, 2007**

| | General Fund | Reconciliation | Governmental Activities |
|--|-------------------------|-----------------------|------------------------------------|
| <u>Assets</u> | | | |
| Current assets | | | |
| Cash and investments pooled with Stearns County | \$ 85,125 | \$ - | \$ 85,125 |
| Due from other governments | 19,531 | - | 19,531 |
| Total Assets | \$ 104,656 | \$ - | \$ 104,656 |
| <u>Liabilities</u> | | | |
| Current liabilities | | | |
| Accounts payable | \$ 1,597 | \$ - | \$ 1,597 |
| Salaries payable | 5,055 | - | 5,055 |
| Total current liabilities | \$ 6,652 | \$ - | \$ 6,652 |
| Noncurrent liabilities | | | |
| Compensated absences - long-term | - | 2,108 | 2,108 |
| Total Liabilities | \$ 6,652 | \$ 2,108 | \$ 8,760 |
| <u>Fund Balance/Net Assets</u> | | | |
| Fund Balance | | | |
| Unreserved | | | |
| Undesignated | 98,004 | \$ (98,004) | |
| Total Liabilities and Fund Balance | \$ 104,656 | | |
| Net Assets | | | |
| Unrestricted | | \$ 95,896 | \$ 95,896 |
| Reconciliation of the General Fund Balance to Net Assets | | | |
| Fund Balance - General Fund | | | \$ 98,004 |
| Long-term liabilities are reported on the Statement of Net Assets but not on the Fund Balance Sheet. Compensated absences payable at year-end. | | | (2,108) |
| Net Assets - Governmental Activities | | | \$ 95,896 |

**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

Statement 2

**STATEMENT OF ACTIVITIES OF GOVERNMENTAL ACTIVITIES AND
GENERAL FUND REVENUES, EXPENDITURES, AND CHANGES IN FUND BALANCE
FOR THE YEAR ENDED DECEMBER 31, 2007**

| | General Fund | Reconciliation | Governmental Activities |
|---|-------------------------|-----------------------|------------------------------------|
| Revenues | | | |
| State sources | | | |
| Emergency medical services (EMS) grant | \$ 117,898 | \$ - | \$ 117,898 |
| Seat belt grant | 79,538 | - | 79,538 |
| Volunteer emergency medical technician (EMT) | 9,903 | - | 9,903 |
| Charges for services | 20,323 | - | 20,323 |
| Total Revenues | \$ 227,662 | \$ - | \$ 227,662 |
| Expenditures/Expenses | | | |
| Current | | | |
| Health | | | |
| EMS systems management | \$ 108,479 | \$ 1,305 | \$ 109,784 |
| EMS personnel training | 63,861 | - | 63,861 |
| Public safety involvement | 18,029 | - | 18,029 |
| Patient/nonpatient care EMS equipment | 654 | - | 654 |
| Bioterrorism training and support | 18,389 | - | 18,389 |
| Volunteer EMT | 9,903 | - | 9,903 |
| Total Expenditures/Expenses | \$ 219,315 | \$ 1,305 | \$ 220,620 |
| Net Change in Fund Balance/Net Assets | \$ 8,347 | \$ (1,305) | \$ 7,042 |
| Fund Balance/Net Assets - January 1 | 89,657 | (803) | 88,854 |
| Fund Balance/Net Assets - December 31 | \$ 98,004 | \$ (2,108) | \$ 95,896 |
| Reconciliation of the Statement of General Fund Revenues, Expenditures, and Changes in Fund Balance to the Statement of Activities | | | |
| Net Change in Fund Balance | | | \$ 8,347 |
| Some expenses reported in the Statement of Activities do not require the use of current financial resources and, therefore, are not reported as expenditures in governmental funds, such as the increase in compensated absences payable. | | | (1,305) |
| Change in Net Assets of Governmental Activities | | | \$ 7,042 |

**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

**NOTES TO THE FINANCIAL STATEMENTS
AS OF AND FOR THE YEAR ENDED DECEMBER 31, 2007**

1. Summary of Significant Accounting Policies

The Central Minnesota Emergency Medical Services Region's financial statements are prepared in accordance with generally accepted accounting principles (GAAP) as of and for the year ended December 31, 2007. The Governmental Accounting Standards Board (GASB) is responsible for establishing GAAP for state and local governments through its pronouncements (statements and interpretations). Governments are also required to follow the pronouncements of the Financial Accounting Standards Board issued through November 30, 1989, (when applicable) that do not conflict with or contradict GASB pronouncements. The more significant accounting policies established in GAAP and used by the Region are discussed below.

A. Financial Reporting Entity

The Region was established in 2001 under Minn. Stat. § 471.59. It was established under a joint powers agreement between 14 counties in Central Minnesota to improve the planning, coordination, and implementation of emergency medical services within the member counties. The Region provides training primarily for policemen, firemen, and ambulance personnel in emergency medical procedures, and also assists in purchasing medical supplies.

The Region has established a Board which has general supervision over the Region's activities. The Board consists of 14 County Commissioners, one from each of the member counties. The Board elects a chair, vice chair, and secretary/treasurer from its members. The Board has adopted bylaws and operating rules and policies as it has deemed necessary.

The Region is a separate entity independent of the counties that formed it. In accordance with generally accepted accounting principles, the Region's financial statements are not included in any member county's financial statements. However, Stearns County, as fiscal agent, accounts for all transactions of the Region and reports the Region as an agency fund in its financial statements. No single member county retains control over the operations or is financially accountable for the Region.

**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

1. Summary of Significant Accounting Policies (Continued)

B. Basic Financial Statements

The financial statements combine fund level financial statements and government-wide financial statements (the governmental activities column). These statements include the financial activities of the overall Joint Powers Board.

The government-wide columns are reported on a full accrual, economic resource basis, which recognizes all long-term assets and receivables as well as long-term debt and obligations. The Region's net assets are unrestricted.

C. Measurement Focus and Basis of Accounting

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

Governmental fund columns (General Fund) are reported using the current financial resources measurement focus and the modified accrual basis of accounting. Revenues are recognized as soon as they are both measurable and available. The Region considers all revenues as available if collected within 60 days after the end of the current period. Expenditures are recorded when the related fund liability is incurred, except for compensated absences and claims and judgments, which are recognized as expenditures to the extent that they have matured. When both restricted and unrestricted resources are available for use, it is the Region's policy to use restricted resources first and then unrestricted resources as needed.

D. Assets, Liabilities, and Net Assets or Equity

1. Cash and Pooled Investments

The Region's cash and pooled investments include cash on hand, demand deposits, and cash on deposit with Stearns County. Custodial credit risk is the risk that in the event of a financial institution failure, the County's deposits will not be returned to it. To cover its custodial credit risk, the County obtains collateral to cover deposits in excess of insurance coverage.

**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

1. Summary of Significant Accounting Policies

D. Assets, Liabilities, and Net Assets or Equity (Continued)

2. Receivables

All receivables are shown net of an allowance for uncollectibles.

3. Capital Assets

The Region defines capital assets as assets with an initial, individual cost of more than \$5,000 and an estimated useful life in excess of two years. Such assets are recorded at historical cost or estimated historical cost if purchased. Donated capital assets are recorded at estimated fair market value at the date of donation. The Region currently holds no capital assets over the \$5,000 capitalization threshold.

4. 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.

2. Detailed Notes

A. Assets

1. Deposits

As of December 31, 2007, the Region had \$85,125 on deposit with Stearns County. Authorization to deposit cash in financial institutions is provided by Minn. Stat. § 118A.02. Minn. Stat. §§ 118A.04 and 118A.05 authorize the types of investments available. Minnesota statutes require that all County deposits be covered by insurance, surety bond, or collateral.

**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

2. Detailed Notes

A. Assets (Continued)

2. Due From Other Governments

At December 31, 2007, the Region had \$19,531 due from other governments. This represents amounts due from the State of Minnesota for the Emergency Medical Services Grant.

B. Liabilities

1. Deferred Revenue

The Region defers revenue for resources that have been received, but not yet earned. Governmental funds also defer revenue in connection with receivables for revenues not considered to be available to liquidate liabilities of the current period.

2. Compensated Absences

The Region has adopted Stearns County's non-union personnel policies regarding vacation and sick leave. Under these policies, employees are granted vacation in varying amounts based on their length of service. All employees accumulate one day of sick leave per month.

The liability for compensated absences reported in the financial statements consists of unused, accumulated vacation and vested sick leave balances. The liability has been calculated using the vesting method outlined in the personnel policies. Sick leave is available to employees in the case of illness-related absences. Unvested sick leave is not paid to employees at termination. Unused accumulated vacation, vested sick leave, and sick leave expected to vest are accrued as compensated absences when incurred in the government-wide financial statements.

Changes in the Region's compensated absences balances are:

| | |
|------------------------------------|------------------------|
| Payable - January 1, 2007 | \$ 803 |
| Net change in compensated absences | <u>1,305</u> |
| Payable - December 31, 2007 | <u><u>\$ 2,108</u></u> |

**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

2. Detailed Notes (Continued)

C. Expenditures

EMS Devices and Supplies

The Region funds expenditures for the purchase of emergency medical equipment and supplies, such as defibrillators and computers, provided largely to other agencies.

3. Employee Retirement Systems and Pension Plans

A. Plan Description

All full-time and certain part-time employees of the Central Minnesota Emergency Medical Services Region are covered by defined benefit plans administered by the Public Employees Retirement Association of Minnesota (PERA). The PERA administers the Public Employees Retirement Fund, which is a cost-sharing, multiple-employer retirement plan. The plan is established and administered in accordance with Minn. Stat. chs. 353 and 356.

Public Employees Retirement Fund members belong to either the Coordinated Plan or the Basic Plan. Coordinated Plan members are covered by Social Security, and Basic Plan members are not. All new members must participate in the Coordinated Plan.

The PERA provides retirement benefits as well as disability benefits to members and benefits to survivors upon death of eligible members. Benefits are established by state statute and vest after three years of credited service. The retirement benefits are based on a member's highest average salary for any five successive years of allowable service, age, and years of credit at termination of service.

Two methods are used to compute benefits for Coordinated and Basic Plan members. The retiring member receives the higher of a step-rate benefit accrual formula (Method 1) or a level accrual formula (Method 2). Under Method 1, the annuity accrual rate for a Basic Plan member is 2.2 percent of average salary for each of the first ten years of service and 2.7 percent for each year thereafter. For a Coordinated Plan member, the annuity accrual rate is 1.2 percent of average salary for each of the first ten years and 1.7 percent for each successive year. Using Method 2, the annuity accrual rate is 2.7 percent of average salary for Basic Plan members and 1.7 percent for Coordinated Plan members for each year of service.

**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

3. Employee Retirement Systems and Pension Plans

A. Plan Description (Continued)

For Public Employees Retirement Fund members whose annuity is calculated using Method 1, a full annuity is available when age plus years of service equal 90. A reduced retirement annuity is also available to eligible members seeking early retirement.

The benefit provisions stated in the previous paragraphs of this section are current provisions and apply to active plan participants. Vested, terminated employees who are entitled to benefits but are not yet receiving them are bound by the provisions in effect at the time they last terminated public service.

The PERA issues a publicly available financial report that includes financial statements and required supplementary information for the Public Employees Retirement Fund. That report may be obtained on the internet at www.mnpera.org; by writing to PERA at 60 Empire Drive, Suite 200, Saint Paul, Minnesota 55103-2088; or by calling 651-296-7460 or 1-800-652-9026.

B. Funding Policy

Pension benefits are funded from member and employer contributions and income from the investment of fund assets. Minn. Stat. ch. 353 sets the rates for employer and employee contributions. These statutes are established and amended by the State Legislature. The Region makes annual contributions to the pension plans equal to the amount required by state statutes. Public Employees Retirement Fund Basic Plan members and Coordinated Plan members were required to contribute 9.10 and 5.75 percent, respectively, of their annual covered salary in 2007. Contribution rates in the Coordinated Plan increased in 2008 to 6.00 percent.

The Region is required to contribute the following percentages of annual covered payroll in 2007 and 2008:

| | <u>2007</u> | <u>2008</u> |
|----------------------------------|-------------|-------------|
| Public Employees Retirement Fund | | |
| Basic Plan members | 11.78% | 11.78% |
| Coordinated Plan members | 6.25 | 6.50 |

**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

3. Employee Retirement Systems and Pension Plans

B. Funding Policy (Continued)

The Region's contributions for the years ending December 31, 2007, 2006, and 2005, for the Public Employees Retirement Fund were:

| <u>2007</u> | <u>2006</u> | <u>2005</u> |
|-------------|-------------|-------------|
| \$ 3,930 | \$ 2,003 | \$ 3,469 |

These contribution amounts are equal to the contractually required contributions for each year as set by state statute.

4. Risk Management

The Region is exposed to various risks of loss related to torts; theft of, damage to, or destruction of assets; errors or omissions; injuries to employees; or natural disasters. The Region has entered into a joint powers agreement with other Minnesota counties to form the Minnesota Counties Insurance Trust (MCIT) to protect against liabilities from workers' compensation and property and casualty. There were no significant reductions in insurance from the prior year or settlements in excess of insurance coverage for the past three years.

The Workers' Compensation Division of MCIT is self-sustaining based on the contributions charged, so that total contributions plus compounded earnings on these contributions will equal the amount needed to satisfy claims liabilities and other expenses. MCIT participates in the Workers' Compensation Reinsurance Association with coverage at \$400,000 per claim in 2007. Should MCIT Workers' Compensation Division liabilities exceed assets, the MCIT may assess the Region, through Stearns County, in a method and amount to be determined by MCIT.

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

**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

5. Summary of Significant Contingencies and Other Items

Contingent Liabilities

Amounts received or receivable from grant agencies are subject to audit and adjustment by grantor agencies, principally the federal government. Any disallowed claims, including amounts already collected, may constitute a liability of the applicable funds. The amount, if any, of the expenditures that may be disallowed by the grantor cannot be determined at this time, although the Region expects such amounts, if any, to be immaterial.

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**CENTRAL MINNESOTA EMERGENCY MEDICAL SERVICES REGION
ST. CLOUD, MINNESOTA**

**SCHEDULE OF FINDINGS AND RECOMMENDATIONS
FOR THE YEAR ENDED DECEMBER 31, 2007**

INTERNAL CONTROL OVER FINANCIAL REPORTING

ITEM ARISING THIS YEAR

07-1 Financial Statement Preparation

The Central Minnesota Emergency Medical Services Region is required to prepare financial statements in accordance with generally accepted accounting principles (GAAP). The preparation of the financial statements is the responsibility of the Region's management. Financial statement preparation in accordance with GAAP requires internal control over both: (1) recording, processing, and summarizing accounting data (maintaining internal books and records); and (2) preparing and reporting appropriate financial statements, including the related notes to the financial statements.

The Region, through its fiscal agent relationship with Stearns County, has established controls and procedures for recording, processing, and summarizing its accounting data used in the preparation of its financial statements.

As is the case with many small and medium-sized entities, the Region has relied on its independent external auditors to assist in the preparation of the basic financial statements, including notes to the financial statements, as part of its external financial reporting process. Accordingly, the Region's ability to prepare financial statements in accordance with GAAP is based, at least in part, on its reliance on its external auditors, who cannot by definition be considered part of the government's internal control. This condition was caused by the Region's decision that it is more cost effective to have its auditors prepare its annual basic financial statements than to incur the time and expense of obtaining the necessary training and expertise required to prepare the financial statements internally. As a result of this condition, the government lacks internal control over the preparation and reporting of financial statements in accordance with GAAP.

We recommend the Region obtain the training and expertise to internally prepare its annual financial statements in accordance with GAAP. If the Region still intends to have staff from the Office of the State Auditor assist in preparation, then at a minimum, it must identify and train individuals to obtain the expertise that can sufficiently review, understand, and approve the Region's financial statements, including notes. As an alternative, the Region could consider hiring an outside consultant to assist in preparing its basic financial statements.

Client's Response:

The Region intends to work with Stearns County to prepare annual basic financial statements. This will be accomplished by Stearns County Human Services acting as fiscal agent or via an outside party as determined by the Board.



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REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND MINNESOTA LEGAL COMPLIANCE

Joint Powers Board
Central Minnesota Emergency
Medical Services Region

We have audited the financial statements of the governmental activities and the General Fund of the Central Minnesota Emergency Medical Services Region as of and for the year ended December 31, 2007, and have issued our report thereon dated April 28, 2008. We conducted our audit in accordance with auditing standards generally accepted in the United States of America.

Internal Control Over Financial Reporting

In planning and performing our audit, we considered the Region's internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Region's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the Region's internal control over financial reporting.

Our consideration of internal control over financial reporting was for the limited purpose described in the preceding paragraph and would not necessarily identify all deficiencies in internal control over financial reporting that might be significant deficiencies or material weaknesses. However, as discussed below, we identified certain deficiencies in internal control over financial reporting that we consider to be significant deficiencies.

A control deficiency exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect misstatements on a timely basis. A significant deficiency is a control deficiency, or combination of control deficiencies, that adversely affects the Region's ability to initiate, authorize, record, process, or report financial data reliably in accordance with generally accepted accounting

principles such that there is more than a remote likelihood that a misstatement of the Region's financial statements that is more than inconsequential will not be prevented or detected by the Region's internal control over financial reporting. We considered the deficiency described in the accompanying Schedule of Findings and Recommendations as item 07-1 to be a significant deficiency in internal control over financial reporting.

A material weakness is a significant deficiency, or combination of significant deficiencies, that results in more than a remote likelihood that a material misstatement of the financial statements will not be prevented or detected by the Region's internal control over financial reporting.

Our consideration of internal control over financial reporting was for the limited purpose described in the first paragraph of this section and would not necessarily identify all deficiencies in internal control that might be significant deficiencies and, accordingly, would not disclose all significant deficiencies that are also considered to be material weaknesses. However, we believe the significant deficiency described above is not a material weakness.

Minnesota Legal Compliance

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

The *Minnesota Legal Compliance Audit Guide for Local Government* contains five categories of compliance to be tested: contracting and bidding, deposits and investments, conflicts of interest, public indebtedness, and claims and disbursements. Our study included all of the listed categories, except that we did not test for compliance in contracting and bidding since those transactions are handled by Stearns County. In addition, we did not test for compliance in public indebtedness, because the Region has no long-term debt.

The results of our tests indicate that, for the items tested, the Region complied with the material terms and conditions of applicable legal provisions.

The Region's written response to the significant deficiency identified in our audit has not been subjected to any auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on it.

This report is intended solely for the information and use of the Joint Powers Board, management, and others within the Central Minnesota Emergency Medical Services Region and is not intended to be, and should not be, used by anyone other than those specified parties.

/s/Rebecca Otto

REBECCA OTTO
STATE AUDITOR

/s/Greg Hierlinger

GREG HIERLINGER, CPA
DEPUTY STATE AUDITOR

April 28, 2008