

Financial Statements for the Years Ended September 30, 2007 and 2006 and Independent Auditors' Report



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INDEPENDENT AUDITORS' REPORT

The Board of Managers of Travis County Healthcare District:

We have audited the accompanying statements of net assets of Travis County Healthcare District (the "District"), a component unit of Travis County, Texas, as of September 30, 2007 and 2006, and the related statements of revenues, expenses, and changes in net assets and cash flows for the years then ended. These financial statements are the responsibility of the District's management. 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 and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States. 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 audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the respective financial position of the District, as of September 30, 2007 and 2006, and the respective changes in financial position and cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with *Government Auditing Standards*, we have also issued our report dated December 18, 2007, on our consideration of the District's internal control over financial reporting and on our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with *Government Auditing Standards* and should be considered in assessing the results of our audit.

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"A Registered Investment Advisor" This firm is not a CPA firm The management's discussion and analysis on pages 3 through 9, is not a required part of the financial statements but is supplementary information required by accounting principles generally accepted in the United States of America. 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.

maxwell Toche + Ritter LLP

December 18, 2007

YEARS ENDED SEPTEMBER 30, 2007 AND 2006

MANAGEMENT'S DISCUSSION AND ANALYSIS

This section of the Travis County Healthcare District's (the "District") (formerly the Travis County Hospital District) financial report presents background information and management's analysis of the District's financial results for the fiscal years ended September 30, 2007 and 2006. Please read this section in conjunction with the District's financial statements, which begin on page 10.

Background and Formation

In 2003, the 78th Session of the Texas Legislature amended Chapter 281 of the Texas Health and Safety Code to enable Travis County, Texas ("Travis County") to create a hospital district. For a copy of the code see: http://www.capitol.state.tx.us/statutes/hs.toc.htm. During fiscal year 2006, with the approval of Travis County Commissioners' Court, the District changed it name from Travis County Hospital District to Travis County Healthcare District to better reflect the activities of the District.

Chapter 281 states that a county may create a countywide hospital district to furnish medical aid and hospital care to indigent and needy persons residing in the district. The law stipulates that creation of the district is dependent upon approval by a majority of the qualified voters of the county. On May 15, 2004, Travis County held a countywide election to determine if the voters of the county supported the creation of a hospital district. The proposition passed with 54.73% of the voters (31,920 votes) supporting the creation of the District.

The formation of the District was in large part due to a collaborative campaign that focused on educating the voters about the healthcare issues facing the community. This campaign was led by a steering committee that included: physicians, healthcare advocates, the business community, elected officials, Grey Panthers and the Indigent Care Collaboration, among others.

The District may levy taxes to finance health care services and the levy may not exceed 25 cents on each \$100 of the taxable value of property taxable by the District. The 2007 tax levy for the District is \$0.0734 per \$100 valuation.

The law allows the District to create a health maintenance organization to provide or arrange for health care services. Additionally, the District may create a charitable organization to develop resources for the District or providing ancillary support. Under state law counties are required to provide medical services for indigent residents. In Texas, indigent is defined as an individual with net income at or below 21% of federal poverty income guidelines (Chapter 61 of the Texas Health and Safety Code).

Upon creation of the District, Travis County and the City of Austin, Texas ("City of Austin") transferred the portion of their tax bases dedicated to healthcare to the District. This change served to redistribute the cost of healthcare more equally across all residents of Travis County. Previously, City of Austin residents paid a higher percentage of their taxes for healthcare than did those residing within Travis County but outside the City of Austin's city limits. With the creation of the District, the tax burden was distributed equally across all residents.

In addition to the tax base, the District received ownership of and responsibility for Brackenridge/ Children's Hospital (leased to Seton Healthcare Network ("Seton") to operate), Austin Women's Hospital (leased to the University of Texas Medical Branch to operate) and the Austin/Travis County Community Health Centers (operated by the City of Austin). In June 2007, Seton opened the new Dell Children's Medical Center of Central Texas which is not owned by the District. The former Children's Hospital associated with Brackenridge Hospital will be converted into various other uses by Brackenridge Hospital.

Financial Highlights

- The District's net assets increased \$20.6 million which is a 13% increase over prior year.
- During the year, the District's total operating revenues were \$29.6 million and operating expenses were \$69.8 million. Nonoperating revenues, comprised primarily of property tax, were \$60.8 million, net of nonoperating expenses.
- To promote fiscal responsibility, the District made the decision to maintain reserve funds to protect its financial security and operational stability in consideration of the risks it faces. The District increased unallocated reserves to 150 days cash on hand and established a capital reserve equal to depreciation expense. The District's reserve policy will be reviewed annually in association with the budget process.
- > Services that were expanded or initiated:
 - The Community Health Centers treated more patients, increasing clinic visits by 11,951 over the previous year.
 - Increased enrollment in the medical assistance program by 6%.
 - Increased funding from 4 to 8 inpatient mental health beds to assist with over-utilization of the Austin State Hospital.
 - Supported People's Community Clinic, providing funding for 30,000 patient visits.
 - Supported Project Access, providing funding for specialty care for 315 individuals and primary care for 131 individuals.

Financial Statements

The District's financial statements are prepared on the accrual basis of accounting and present the District's operational activities in a manner similar to that of private sector companies. The financial statements consist of three statements: (1) statement of net assets, (2) statement of revenue, expenses, and changes in net assets, and (3) statement of cash flows.

The statement of net assets and the statement of revenue, expenses, and changes in net assets reflect the District's financial position at the end of the year and report the District's net assets and changes in them as a result of the District's revenues and expenses for the year. The term "net assets" represents the difference between assets, or the District's investment in resources, and liabilities, or the District's obligation to its creditors. Increases or decreases in net assets are an indicator of whether financial health is improving or deteriorating. Other nonfinancial factors should be considered, however, in evaluating financial health, such as changes in the District's patient base, changes in economic conditions, taxable property values and tax rates, and changes in government legislation.

The statement of cash flows reports cash receipts, cash payments, and net changes in cash resulting from operations, investing, and financing activities. The statement explains where cash came from, how it was used, and the change in cash balance during the year.

Statement of Net Assets

The following table summarizes the District's assets, liabilities and net assets as of September 30, 2007 and 2006:

TABLE 1 Condensed Statement of Net Assets

	2007	2006	% Fluctuation
Current and other assets	\$ 97,853,947	66,392,700	47%
Capital assets	93,242,288	95,117,507	(2%)
Total assets	191,096,235	161,510,207	18%
Current liabilities	13,762,379	4,815,590	186%
Net assets:			
Invested in capital assets	93,242,288	95,117,507	(2%)
Unrestricted	84,091,568	61,577,110	37%
Total net assets	\$ 177,333,856	156,694,617	13%

As can be seen in Table 1, net assets were \$177.3 million at September 30, 2007 and \$156.7 million at September 30, 2006. The change in net assets of \$20.6 million is primarily the result of operations.

Statement of Revenues, Expenses, and Changes in Net Assets

The following table summarizes the District's revenues and expenses and changes in net assets during the years ended September 30, 2007 and 2006:

TABLE 2
Condensed Statement of Revenues, Expenses, and Changes in Net Assets

	 2007	2006	% Fluctuation
Operating revenues:			
DSH/UPL program	\$ 28,434,895	36,670,256	(22%)
Operating lease revenue	1,155,396	1,155,396	-
Total operating revenues	29,590,291	37,825,652	(22%)
Operating expenses:			
Health care delivery	65,957,969	63,669,603	4%
Salaries and benefits	1,028,780	568,980	81%
Other purchased goods and services	904,166	818,084	11%
Depreciation	1,889,419	1,892,495	-
Total operating expenses	69,780,334	66,949,162	4%
Operating loss	 (40,190,043)	(29,123,510)	38%
Nonoperating revenues, net:			
Net ad valorem tax revenue	54,461,216	49,533,162	10%
Net tobacco settlement revenue	2,280,598	2,489,720	(8%)
Investment income	4,087,153	2,803,272	46%
Other revenue	 315	820	(62%)
Total nonoperating revenues, net	 60,829,282	54,826,974	11%
Change in net assets	20,639,239	25,703,464	(20%)
Total net assets - beginning of year	 156,694,617	130,991,153	20%
Total net assets - end of year	\$ 177,333,856	156,694,617	13%

The District's operating revenues were \$29.6 million for the year ended September 30, 2007, comprised of \$28.4 million in Disproportionate Share III ("DSH") and Upper Payment Limit ("UPL") revenue and \$1.2 million in rent revenue relating to Brackenridge/Children's Hospital and Austin Women's Hospital.

The District's operating loss was \$40.2 million for the year ended September 30, 2007. The District receives property tax revenues to subsidize the cost of services provided to qualified uninsured patients. Although the costs incurred to provide these services are reflected above as operating expenses, the property tax revenues levied to subsidize those costs are required to be reported as nonoperating revenues.

Nonoperating revenues were \$60.8 million for the year ended September 30, 2007, comprised of net property taxes of \$54.4 million, net tobacco settlement revenue of \$2.3 million and investment income of \$4.1 million.

Capital Assets

With the creation of the District, the City of Austin conveyed ownership of assets associated with Brackenridge/Children's Hospital, the Austin Women's Hospital, and medical equipment used in the health care clinics to the District. Travis County conveyed medical equipment used in the health care clinics to the District. The City of Austin donated an office building to the District which the District uses for its headquarters. The conveyed and donated assets were recorded at fair market value at the date of receipt based on an independent third-party appraisal. The following table summarizes the District's capital assets at September 30, 2007 and 2006.

TABLE 3
Capital Assets

	 2007	2006	% Fluctuation
Land	\$ 8,497,335	8,497,335	-
Buildings and improvements	90,002,665	90,002,665	~
Equipment and furniture	 416,697	402,497	4%
Subtotal	98,916,697	98,902,497	-
Less accumulated depreciation	 (5,674,409)	(3,784,990)	50%
Total capital assets, net	\$ 93,242,288	95,117,507	(2%)

The District's budget for fiscal year 2007 included funds for equipment replacement in the Austin/Travis County Community Health Centers as a part of the interlocal agreement with the City of Austin to operate the clinics. These funds are budgeted as an operating expense and ownership of the assets will not convey to the District until the termination of the interlocal agreement.

Current Budget

Annually, the District prepares a budget for approval by the Board of Managers and for submission to the Travis County Commissioners' Court for approval prior to the beginning of the operating year. Table 4 presents the budget as compared to fiscal year 2007 actual amounts.

TABLE 4
Budget vs. Actual

Dunger	 		
	 Budget 2007	Actual 2007	Favorable (Unfavorable) Variance
Operating revenues:			
DSH/UPL program	\$ 15,154,950	28,434,895	13,279,945
Operating lease revenue	 1,155,396	1,155,396	-
Total operating revenues	 16,310,346	29,590,291	13,279,945
Other expenses:			
Health care delivery	72,539,274	65,957,969	6,581,305
Salaries and benefits	1,031,420	1,028,780	2,640
Other purchased goods and services	1,523,206	904,166	619,040
Depreciation	1,889,419	1,889,419	_
Total operating expenses	76,983,319	69,780,334	7,202,985
Operating loss	 (60,672,973)	(40,190,043)	20,482,930
Nonoperating revenues (expenses):			
Net ad valorem tax revenue	53,260,680	55,085,553	1,824,873
Tax assessment and collection expense	(625,752)	(624,337)	1,415
Tobacco settlement revenue	4,199,541	4,449,080	249,539
Tobacco settlement expense	(1,709,821)	(2,168,482)	(458,661)
Investment income	2,248,174	4,087,153	1,838,979
Other revenue	_	315	315
Total nonoperating revenues, net	 57,372,822	60,829,282	3,456,460
Change in net assets	\$ (3,300,151)	20,639,239	23,939,390

In comparing the current year's financial results to budget, the following items are noted.

Upon completion of the year, operating revenues exceeded budget by \$13.2 million and this increase is due to monies received related to the DSH and UPL programs.

Actual operating expenses were under budget by \$7.2 million primarily related to health care delivery costs associated with the operation of the community health care clinics and the Medical Assistance Program. The District was able to achieve income of \$23.9 million greater than planned.

Economic Conditions and Plan for Fiscal Year 2008

In planning for fiscal year 2008, of primary concern was the uncertain status of the economy at both the federal and state funding levels. Issues that need to be addressed on an ongoing basis throughout the year include the following:

- Continued progress based on the strategic plan for the District.
- An increasing number of uninsured and working poor, and the capacity of the District's system at both a physical plant capacity level and staffing availability level to serve this growing population.
- Reduction in Medicaid funds.
- Future funding available under the DSH and UPL programs.

The 2008 tax rate of \$0.0693 per \$100 valuation decreased from \$0.0734 in 2007.

Contacting District Financial Management

The financial report is designed to provide the taxpayers and the District's customers, creditors, and suppliers with a general overview of the District's finances and to demonstrate the District's accountability for the funds it receives. If you have questions about this report or need additional financial information, contact the District's financial offices as follows:

By mail: Travis County Healthcare District, 1111 E. Cesar Chavez, Austin, Texas 78702

Attention: Financial Manager

By fax: 512.978.8151, Travis County Healthcare District, Attention: Financial Manager

STATEMENTS OF NET ASSETS SEPTEMBER 30, 2007 AND 2006

	2007		2006
ASSETS		****	
Current assets:			
Cash and cash equivalents	\$ 34,681	\$	30,593
Restricted cash and cash equivalents	9,056,544		-
Short-term investments	86,056,633		54,599,411
Ad valorem taxes receivable, net of allowance for			
uncollectible taxes of \$95,458 and \$83,368	259,128		207,657
Due from other governments	2,327,558		10,467,562
Other receivables	52,892		1,023,488
Prepaid expenses	66,511		63,989
Total current assets	 97,853,947		66,392,700
Capital assets:			
Land	8,497,335		8,497,335
Buildings and improvements	90,002,665		90,002,665
Equipment and furniture	416,697		402,497
Less accumulated depreciation	(5,674,409)		(3,784,990)
Total capital assets, net	93,242,288		95,117,507
Total assets	 191,096,235		161,510,207
LIABILITIES			
Current liabilities:			
Accounts payable	4,464,150		4,680,457
Private UPL payable	9,056,544		-
Salaries and benefits payable	173,142		71,635
Due to other governments	68,543		63,498
Total current liabilities	 13,762,379		4,815,590
NET ASSETS			
Invested in capital assets	93,242,288		95,117,507
Unrestricted	84,091,568		61,577,110
Total net assets	\$ 177,333,856	\$	156,694,617

The notes to the financial statements are an integral part of these statements.

STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET ASSETS YEARS ENDED SEPTEMBER 30, 2007 AND 2006

	2007	2006
Operating revenues:		
DSH/UPL program	\$ 28,434,895	\$ 36,670,256
Operating lease revenue	1,155,396	1,155,396
Total operating revenues	29,590,291	37,825,652
Operating expenses:		
Health care delivery	65,957,969	63,669,603
Salaries and benefits	1,028,780	568,980
Other purchased goods and services	904,166	818,084
Depreciation	1,889,419	1,892,495
Total operating expenses	69,780,334	66,949,162
Operating loss	(40,190,043)	(29,123,510)
Nonoperating revenues (expenses):		
Ad valorem tax revenue	55,085,553	50,107,980
Tax assessment and collection expense	(624,337)	(574,818)
Tobacco settlement revenue	4,449,080	4,199,541
Tobacco settlement expense	(2,168,482)	(1,709,821)
Investment income	4,087,153	2,803,272
Other revenue	315	820
Total nonoperating revenues, net	60,829,282	54,826,974
Change in net assets	20,639,239	25,703,464
Total net assets - beginning of year	156,694,617	130,991,153
Total net assets - end of year	\$ 177,333,856	\$ 156,694,617

The notes to the financial statements are an integral part of these statements.

STATEMENTS OF CASH FLOWS YEARS ENDED SEPTEMBER 30, 2007 AND 2006

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	2007	2006
Cash flows from operating activities:		
Cash received from DSH/UPL program	\$ 99,940,274	\$ 77,655,270
Cash payments for DSH/UPL program	(63,237,809)	(55,234,803)
Cash payments for private UPL program	(16,172,293)	-
Cash received from operating leases	1,155,396	1,155,396
Cash payments for goods and services	(41,016,597)	(65,627,984)
Cash payments to employees	(927,273)	(520,877)
Net cash used in operating activities	(20,258,302)	(42,572,998)
Cash flows from noncapital financing activities:		
Ad valorem taxes received	55,034,082	50,063,731
Payments for tax assessment and collection	(624,337)	(574,818)
Tobacco settlement received	4,449,080	4,199,541
Tobacco settlement paid	(2,168,482)	(1,709,821)
Other nonoperating revenue received	315	820
Net cash provided by noncapital financing activities	56,690,658	51,979,453
Cash flows from investing activities:		
Receipts of interest income	3,259,382	2,561,876
Net sales (purchases) of investment pools	(19,480,667)	7,638,122
Purchase of investment securities	(43,136,239)	(22,614,192)
Proceeds from maturities of investment securities	32,000,000	3,000,000
Purchase of equipment	(14,200)	_
Net cash used in investing activities	(27,371,724)	(9,414,194)
Net increase (decrease) in cash and cash equivalents	9,060,632	(7,739)
Cash and cash equivalents - beginning of year	30,593	38,332
Cash and cash equivalents - end of year	\$ 9,091,225	\$ 30,593
Reconciliation of operating loss to		
net cash used in operating activities:	Φ (40 100 04 2)	Ф. (20.122.510)
Operating loss	\$ (40,190,043)	\$ (29,123,510)
Adjustments to reconcile operating		
loss to net cash used in operating activities:	1.000.410	1 002 405
Depreciation expense	1,889,419	1,892,495
Changes in operating assets and		
liabilities that provided (used) cash:	0.1.10.004	(# 500 001)
Due from other governments	8,140,004	(7,590,891)
Other receivables	958,051	(783,763)
Prepaid expenses	(2,522)	(62,504)
Accounts payable	(216,307)	(6,987,238)
Private UPL payable	9,056,544	<u>-</u>
Salaries and benefits payable	101,507	48,103
Due to other governments	5,045	34,310
Net cash used in operating activities	\$ (20,258,302)	\$ (42,572,998)

The notes to the financial statements are an integral part of this statement.

NOTES TO FINANCIAL STATEMENTS YEARS ENDED SEPTEMBER 30, 2007 AND 2006

1. ORGANIZATION AND MISSION

Travis County Healthcare District (the "District"), a component unit of Travis County, Texas ("Travis County"), was created by authorization of the legislature of the State of Texas and subsequent approval by the voters of Travis County, Texas, in May 2004.

In August 2004, Travis County and the City of Austin, Texas (the "City of Austin") appointed members to serve on the Board of Managers (the "Board") of the District, which is comprised of nine members. The Board consists of four appointees from Travis County, four from the City of Austin, and one selected jointly.

The District is presented as a discrete component unit of Travis County (legally separate from Travis County), as the Travis County Commissioners' Court approves the District's tax rate and annual budget. Additionally, the Travis County Commissioners' Court appoints four and one jointly appointed members of the District's governing board. Travis County does not provide any funding to the District, hold title to any of the District's assets, or have any rights to any surpluses of the District.

The District's primary responsibility is to provide quality preventive, medical, hospital, and emergency care to the indigent and needy of Travis County and to others with the ability to pay. All activities conducted by the District are directly associated with the furtherance of this mission and are, therefore, considered to be operating activities.

On October 1, 2004, the District began operations with the transfer of \$10,700,000 from the City of Austin. Thereafter, \$2,560,807 was transferred from Travis County. Effective October 1, 2004, certain assets, obligations and rights of the City of Austin transferred to the District, including title to the land and buildings of Brackenridge/Children's Hospital and Austin Women's Hospital. In addition, the responsibility, obligations and rights of the City of Austin and Travis County to provide health care to their respective indigent population transferred to the District. Certain assets associated with the Federally Qualified Health Centers ("health clinics") of the City of Austin and Travis County also transferred to the District.

The District provides patient care to the indigent population of Travis County and receives property taxes levied by Travis County for the provision of this care. The District has contracted with third-parties to operate the District's two acute care hospitals with a total of 399 licensed beds. Through an interlocal agreement with the City of Austin, the District also operates thirteen health clinics (including one specialty clinic providing HIV/AIDS treatment services and two clinics that provide services to the homeless populations), three dental clinics, and one mobile dental clinic. The District is exempt from federal income taxes.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting - The accompanying financial statements are prepared on the accrual basis of accounting.

Method of Accounting - Private-sector standards of accounting and financial reporting issued prior to December 1, 1989, generally are followed by the District to the extent that those standards do not conflict or contradict guidance of the Governmental Accounting Standards Board ("GASB") pronouncements.

In accordance with GASB Statement No. 34, *Basic Financial Statements - and Management's Discussion and Analysis - for State and Local Governments*, the District's financial statements include a statement of net assets, a statement of revenues, expenses, and changes in net assets, and a statement of cash flows.

The statement of net assets requires that total net assets be reported in three components: (a) invested in capital assets, net of related debt, (b) restricted, and (c) unrestricted.

- "Invested in capital assets, net of related debt" consists of capital assets, including restricted capital assets, net of accumulated depreciation, reduced by the amount outstanding for any bonds, notes, or other financing liabilities that were incurred related to the acquisition, construction, or improvement of the capital assets.
- "Restricted net assets" consists of assets that are restricted as to use by external factors such as debt covenants, grantors, contributors, or laws or regulations of other governments or legislation.
- "Unrestricted net assets" consists of net assets that do not meet the definitions above for "invested in capital assets, net of related debt" or "restricted net assets."

Cash and Cash Equivalents - The District defines cash and cash equivalents as cash and investments that are highly liquid with less than three-month maturities when purchased.

Capital Assets - Capital assets are carried at historical cost if purchased or fair market value at the time of donation. The District includes expenditures for new facilities and equipment and expenditures that substantially increase the useful life of existing capital assets which have an initial, individual cost of \$5,000 or more. Ordinary maintenance and repairs are charged to expense when incurred. Disposals are removed at carrying cost less accumulated depreciation, with any resulting gain or loss included in other nonoperating revenue or expense.

Depreciation is recorded on the straight-line method over the estimated useful lives of the assets. Estimated useful lives for buildings are 20 to 50 years and for equipment are 2 to 20 years.

Compensated Absences - The District maintains a paid-time-off plan for absences from work for illness or vacation. Under the plan, the cost of all compensated absences is accrued at the time the benefits are earned. At the time of termination, unused paid-time-off benefits may be paid up to a maximum of 1.5 times the annual maximum accrual.

Statements of Revenues, Expenses, and Changes in Net Assets - For purposes of display, transactions deemed by management to be ongoing, major, or central to the provision of health care services are reported as revenues and expenses. Operating revenues include those generated from direct patient care and related support services. Nonoperating revenues consist of those revenues that are related to financing and investing types of activities and result from nonexchange transactions or investment income.

Ad Valorem Tax Revenue - Ad valorem tax revenue is recorded in the year for which the taxes are levied, net of provisions for uncollectible amounts, collection expenses, and appraisal fees. The District levies a tax as provided under state law with the approval of Travis County Commissioners' Court. The taxes are collected by the Travis County Tax Assessor-Collector and are remitted to the District as received. Taxes are levied and become collectible from October 1 to January 31 of the succeeding year. Subsequent adjustments to the tax rolls, made by the Travis Central Appraisal District ("Appraisal District"), are included in revenues in the period such adjustments are made by the Appraisal District.

Tobacco Settlement Revenue - Tobacco settlement revenue is the result of a settlement between various counties and hospital districts in Texas and the tobacco industry for tobacco-related health care cost. The District recognized \$4,449,080 and \$4,199,541 associated with the settlement in the years ended September 30, 2007 and 2006, respectively. Settlement revenues for fiscal year 2008 and beyond will be based on the investment earnings of the tobacco settlement fund as administered by the Comptroller's Office of the State of Texas. The District is unable to estimate the continuance or level of future distributions.

During the year ended September 30, 2007, the District paid \$1,625,249 of the tobacco settlement revenue to the Daughters of Charity Health Services of Austin ("Seton") and \$543,233 to Travis County which represents their respective share of healthcare expenditures claimed. During the year ended September 30, 2006, the District paid \$1,310,484 of the tobacco settlement revenue to Seton and \$399,337 to Travis County which represents their respective share of healthcare expenditures claimed.

Use of Estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States 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 reported period. Actual results could differ from those estimates.

3. DEPOSITS AND INVESTMENTS

The District has developed a formal investment policy for the District that is consistent with State statutes. The policy states the District will use the "prudent person rule" in investment decisions. The objectives of the District policy are to ensure the safety of the principal, maintain adequate liquidity, and yield to the highest possible return subject to the first two principles.

The District's depository agreement with JPMorgan Chase Bank requires collateralization with a fair market value equal to at least 102% of District funds in excess of \$100,000 on deposit in the bank. All of the pledged collateral for the District's demand deposits and time deposits are U.S. Treasury securities or U.S. Government agency securities. The depository agreement states that collateral shall consist of one or more of the following: U.S. Treasury securities, Federal National Mortgage Association ("FNMA") securities, pools or REMIC CMO's, Federal Farm Credit Bank ("FFCB") securities, Federal Home Loan Bank ("FHLB") agencies, Federal Home Loan Mortgage Corporation ("FHLMC") pools or REMIC CMO's, Government National Mortgage Association (GNMA) pools, obligations of states, agencies, counties, cities, and other political subdivisions of any state that are rated not less than "A" or its equivalent. The REMIC CMO's must not have variable rates or original maturities longer than ten years.

This collateral is held by the Federal Reserve Bank of New York which in the case of default by JPMorgan Chase will act as agent for the District, in a fiduciary account held in the name of JPMorgan Chase and the District and pledged to the District. During fiscal year 2007, there was one instance in March 2007 where the bank balances were not fully collateralized at all times. As of September 30, 2007, the District's bank balances in excess of federal depository insurance were fully collateralized.

Deposits are stated at cost plus accrued interest, if any, and the carrying amounts are displayed on the balance sheet as cash and cash equivalents

The District is authorized to purchase, sell, and invest its funds and funds under its control in accordance with the Texas Public Funds Investment Act, Government Code Chapter 2256 and its subsequent amendments. During the fiscal period, investments consisted of U.S. government treasury securities, U.S. government agencies securities, commercial paper and participation in two local government investment pools (TexPool and TexasTERM). The carrying amount of investments as of September 30, 2007, is displayed on the balance sheet as short-term investments.

The District's adoption of GASB Statement No. 31 requires some investments be reported at fair value. Money market investments and participating interest-earning investment contracts with a remaining maturity at the time of purchase of one year or less are reported at amortized cost. TexPool operates in a manner consistent with the SEC's Rule 2a7 of the Investment Company Act of 1940. TexPool uses amortized cost rather than market value to report net assets to compute share prices. Accordingly, the fair value of the position in TexPool is the same as the value of TexPool shares. The State Comptroller of Public Accounts exercises oversight responsibility over TexPool. Oversight includes the ability to significantly influence operations, designation of management and accountability for fiscal matters. Additionally, the State Comptroller has established an advisory board composed of both participants in TexPool and other persons who do not have a business relationship with TexPool. The advisory board members review the investment policy and management fee structure.

TexasTERM is organized in conformity with the Texas Public Funds Investment Act of the Texas Government Code. It provides for a fixed-rate, fixed-term investment for a period of 60 days to one year and includes TexasDAILY, a portfolio of the Local Government Pool, providing daily access to funds. An advisory board, composed of participants in TexasTERM and other parties who do not participate in the pool, has responsibility for the overall management of the pool, including formulation and implementation of its investment and operating policies. PFM Asset Management LLC, a leading national financial and investment advisory firm, is the investment advisor to the pool.

TexPool and TexasTERM are both rated AAAm by Standard & Poor's. As a requirement to maintain the rating, weekly portfolio information must be submitted to Standard & Poor's, as well as the office of the Comptroller of Public Accounts, for review.

As of September 30, 2007, the District had the following investments:

Туре	Fair Value	Weighted Average Maturity (Days)
Local government investment pools	\$ 54,289,926	1
U.S. government agencies	26,820,149	80
U.S. government treasuries	2,976,577	228
Commerical paper	1,969,981	105
Total fair value	\$ 86,056,633	
Portfolio weighted average maturity		43

Interest Rate Risk - In accordance with its investment policy, the District manages its exposure to declines in fair values by limiting the weighted average maturity of its investment portfolio to one year or less. Individual security types are limited as well, with the longest permitted maturity of three years for government treasuries and government agencies.

Credit Risk - State law limits investment in municipal bonds to an A rating or its equivalent by a nationally recognized investment rating firm. However, the District requires AA by Moody's Investors Service or Standard & Poor's Corporation. For commercial paper, state law limits investments to a rating not less than A-1 by Standard & Poor's or P-1 by at least two nationally recognized credit rating agencies. The District's investment policy limits commercial paper to a rating not less than A-1 by Standard & Poor's and P-1 by Moody's Investors Service. The District does not have credit limits on government agency securities. The District's investments in government agencies carry the implicit guarantee of the U.S. government. The District's investment policy requires that certificates of deposits be either federally insured or collateralized.

Investments at September 30, 2007	Standard & Poor's Rating
Local government investment pools	AAAm
Federal National Mortgage Association	AAA
Federal Home Loan Mortgage Corporation	AAA
Federal Home Loan Bank	AAA
Citigroup Funding Inc.	A-1+
Toyota Motor Credit	A-1+

Concentration of Credit Risk - Concentration of credit risk is the risk of loss attributable to the magnitude of investments in a single issuer. The District's investment policy limits the percentage of the combined portfolios for each type of eligible investment to reduce the risk of principal loss.

	Percentage of Portfolio	Portfolio Limit
Investments at September 30, 2007:		
Local government investment pools	63%	70%
U.S. government agencies	31%	75%
U.S. government treasuries	4%	100%
Commercial paper	2%	20%

Information regarding investments in any one issuer that represents five percent or more of the District total investments must be disclosed under GASB Statement No. 40, excluding investments issued or explicitly guaranteed by the U.S. government. At September 30, 2007, the District's investments which require disclosure are as follows:

	Fair Value	Percentage of Portfolio
Investments at September 30, 2007:		
Federal National Mortgage Association	\$ 11,929,962	14%
Federal Home Loan Mortgage Corporation	5,906,667	7%
Federal Home Loan Bank	8,983,520	10%

4. DISAGGREGATION OF RECEIVABLE BALANCES

The District's receivables, including the applicable allowances, are comprised of the following as of September 30, 2007:

	Taxes	Due from Other Governments	Other	Total
Total	\$ 954,277	2,327,558	52,892	3,334,727
Less: Allowance for uncollectibles Allowance for long-term collections	 (95,458) (599,691)	-	-	(95,458) (599,691)
Total, net	\$ 259,128	2,327,558	52,892	2,639,578
Amounts not scheduled for collection during the subsequent year	\$ 371,954		-	371,954

At September 30, 2007, due from other governments balance is comprised of \$2,322,663 due from the City of Austin (see Note 10) and \$4,895 related to the UTMB lease of Austin Women's Hospital (see Note 7). At September 30, 2007, other receivables balance is comprised of \$52,892 of accrued interest on investments.

The District's receivables, including the applicable allowances, are comprised of the following as of September 30, 2006:

	 Taxes	Due from Other Governments	Other	Total
Total	\$ 833,676	10,467,562	1,023,488	12,324,726
Less: Allowance for uncollectibles Allowance for long-term collections	 (83,368) (542,651)	<u> </u>		(83,368) (542,651)
Total, net	\$ 207,657	10,467,562	1,023,488	11,698,707
Amounts not scheduled for collection during the subsequent year	\$ 397,138	-	-	397,138

At September 30, 2006, due from other governments balance is comprised of \$7,995,154 related to the Upper Payment Limit program (see Note 8), \$2,204,513 due from the City of Austin (see Note 10), \$4,895 related to the UTMB lease of Austin Women's Hospital (see Note 7), and \$263,000 related to the charity care provided by UTMB at Austin Women's Hospital (see Note 7).

At September 30, 2006, other receivables balance is comprised of \$958,051 due from Seton (see Note 6) and \$65,437 of accrued interest on investments.

5. CAPITAL ASSETS

The District's capital assets are comprised of the following as of September 30, 2007:

	Beginning Balance	Increases	Decreases	Ending Balance
Capital assets not being depreciated-				
Land	\$ 8,497,335	-	-	8,497,335
Capital assets being depreciated:				
Building and improvements	90,002,665	-	-	90,002,665
Equipment and furniture	402,497	14,200		416,697
Total capital assets being depreciated	90,405,162	14,200		90,419,362
Less accumulated depreciation for:				
Building and improvements	(3,649,086)	(1,824,543)	-	(5,473,629)
Equipment and furniture	(135,904)	(64,876)	***	(200,780)
Total accumulated depreciation	(3,784,990)	(1,889,419)		(5,674,409)
Total capital assets being depreciated	86,620,172	(1,875,219)		84,744,953
Capital assets, net	\$ 95,117,507	(1,875,219)	-	93,242,288

With the creation of the District, the City of Austin conveyed ownership of assets associated with Brackenridge/Children's Hospital, the Austin Women's Hospital, and medical equipment used in the health care clinics to the District. Travis County conveyed medical equipment used in the health care clinics to the District. The City of Austin also donated an office building to the District. The conveyed and donated assets were recorded at fair market value at the date of receipt.

6. OPERATING LEASE WITH SETON

Effective October 1, 2004, the District assumed the rights and obligation from the City of Austin related to a long-term lease agreement with Seton. Under the terms of the lease, Seton will operate Brackenridge/Children's Hospital and will provide all necessary medical services for residents of Travis County regardless of their ability to pay. The lease term is for 60 years through September 2055 with an optional 30 year extension. The breach of contract penalty is \$50 million and Seton is required to spend a minimum of \$50 million for capital improvements at Brackenridge/Children's Hospital by 2023; of which \$30 million must be spent by 2013. In June 2007, Seton opened the new Dell Children's Medical Center of Central Texas which is not owned by the District.

At September 30, 2007, the District's investment in Brackenridge consists of land valued at \$8,013,662 and buildings and improvements valued at \$85,786,338 less accumulated depreciation of \$5,147,180. For the years ended September 30, 2007 and 2006, lease revenue of \$1,096,656 was recognized under this lease.

Pursuant to the revised terms of the lease, the District will reimburse Seton for services provided through three programs. Under the Charity Care Program, the District will reimburse Seton a maximum of \$3,651,350 annually for providing medical care to the medically indigent; provided however, that Seton must first provide charity care in the amount of 4% of net revenues as required by State law.

Under the Physicians Services Program, the District paid Seton \$506,261 and \$5,898,192 for the years ended September 30, 2007 and 2006, respectively, for providing physician services to patients in the first two programs.

Under the Home Health Services Program, the District paid Seton \$250,000 for the years ended September 30, 2007 and 2006, for home health services for the medically indigent of Travis County.

Under the Medical Assistance Program ("MAP"), the District paid Seton \$1,781,336 and \$18,717,918 for the years ended September 30, 2007 and 2006, respectively, for patients enrolled in this program. The payments through February 2006 were made through the interlocal agreement with the City of Austin discussed in Note 10 as the City of Austin was the party responsible for the MAP contract with Seton until that time. At the end of that contract period, the District assumed responsibility for MAP payments, contracted with and made payments to Seton directly.

Under the terms of the letter agreement effective November 2006, the lease agreement with Seton was amended and the District no longer has responsibility for funding the Physician Services Program and the MAP program. Instead the District paid \$25,228,837 into the escrow account for the private Upper Payment Limit program (see Note 9).

The future minimum lease payments to be received from Seton are as follows:

2008	\$ 1,096,656
2009	1,096,656
2010	1,096,656
2011	1,096,656
2012	1,096,656
Thereafter	 14,556,528
Total	\$ 20,039,808

7. LEASE AGREEMENT WITH THE UNIVERSITY OF TEXAS MEDICAL BRANCH AT GALVESTON ("UTMB")

Effective October 1, 2004, the District assumed the rights and obligation from the City of Austin related to the lease agreement with UTMB. Under the terms of the agreement, UTMB will operate Austin Women's Hospital for an initial term of five years through January 2009 with an option to renew. For the years ended September 30, 2007 and 2006, lease revenue of \$58,740 was recognized under this lease. Pursuant to the terms of the lease, the District paid UTMB \$3,876,838 and \$3,877,048 for the years ended September 30, 2007 and 2006, for charity care provided at Austin Women's Hospital.

At September 30, 2007, the District's investment in Austin Women's Hospital consists of buildings and improvements valued at \$3,400,000 less accumulated depreciation of \$204,000.

The future minimum lease payments to be received from UTMB are as follows:

Total	\$ 78,320
2009	19,580
2008	\$ 58,740

8. DISPROPORTIONATE SHARE III AND UPPER PAYMENT LIMIT PROGRAMS

The Disproportionate Share III ("DSH") program was created in fiscal year 1992 by the State of Texas to access additional federal matching funds. These funds are distributed to selected hospitals that provide services to low-income and uninsured patients. According to the DSH program guidelines, the District may use the funds for the benefit of the indigent in either the immediate period or future periods.

The Upper Payment Limit ("UPL") program was created in May 2002 with an effective date of July 2001. The UPL program uses federal matching funds to raise state Medicaid reimbursement rates to 100% of equivalent Medicare rates for certain public hospital systems.

The District recognizes all funds received under the DSH and UPL programs as operating revenues in the period of receipt of the funds. A portion of the DSH and UPL payments received are due to Seton under the operating lease discussed in Note 6. This payment is to be reduced by the charity care payment to UTMB.

During the year ended September 30, 2007, the District paid \$16,909,707 to Seton. The DSH/UPL program revenue of \$28,434,895 is netted by the \$16,909,707 paid to Seton. During the year ended September 30, 2006, the District paid \$15,700,205 to Seton which is net of the \$3,877,048 paid to UTMB discussed in Note 7. The DSH/UPL program revenue of \$36,670,256 is netted by the \$15,700,205 paid to Seton.

9. PRIVATE UPPER PAYMENT LIMIT PROGRAM

The private Upper Payment Limit ("Private UPL") program was implemented in April 2007, with an effective date of June 11, 2005. The Private UPL program uses federal matching funds to raise state Medicaid reimbursement rate to 100% of equivalent Medicare rates for certain private hospitals. The District funds the intergovernmental transfer ("IGT"), which the federal government matches. The entire amount (the IGT and the matching funds) is then paid to six private hospitals in Travis County. These hospitals agreed to use their best efforts to reduce uninsured care in Travis County by qualified eligible individuals for Medicaid coverage and services. During the year ended September 30, 2007, the District expensed \$25,228,837 for payments under the Private UPL program which is included in health care delivery expense. As of September 30, 2007, \$9,056,544 is included in private UPL payable.

10. INTERLOCAL AGREEMENT WITH THE CITY OF AUSTIN

Effective October 1, 2004, the District entered into an agreement with the City of Austin to operate the Federally Qualified Health Centers and administer MAP which were previously the responsibility of the City of Austin and Travis County. The agreement term is for one year with annual renewal possibility for four years. Under the agreement, payments are due monthly from the District. For the years ended September 30, 2007 and 2006, the District recorded \$24,743,418 and \$32,467,892, respectively, of health care delivery expense related to this agreement. Any excess of revenues over expenses of the clinic operations is due to the District at the end of the agreement term. At September 30, 2007, the District has recorded a receivable from the City of Austin of \$2,322,663 related to this excess although this amount will remain with the City of Austin and offset payments from the District to the City of Austin in the following year.

The receivable from the City of Austin is comprised of the following at September 30, 2007 and 2006:

	2007		2006	
Excess of revenues over expenses from prior year	\$	2,204,513	\$	2,871,776
Operating revenues:				
Medicare		1,053,614		1,288,899
Medicaid		5,932,865		5,397,685
CHIP		36,445		72,898
Net patient service revenue		897,459		731,093
Grant revenue		1,169,166		912,007
Interest income		429,308		332,773
Total operating revenues		9,518,857		8,735,355
Operating expenses:				
Salaries and benefits		23,968,083		20,911,762
Contracted services		7,208,262		15,562,057
Purchased goods		2,935,844		2,997,259
Total operating expenses		34,112,189		39,471,078
Other revenues (expenses):				
Payments received from the District		25,911,482		31,268,460
Construction in progress payment		(1,200,000)		(1,200,000)
Total other revenues, net		24,711,482		30,068,460
Excess of revenues over expenses	\$	2,322,663	\$	2,204,513

11. APPRAISAL DISTRICT AND AD VALOREM TAXES

The Texas Legislature in 1979 adopted a comprehensive Property Tax Code (the "Code") which established a county-wide appraisal district and an appraisal review board in each county in the State. The Appraisal District is responsible for the recording and appraisal of all property in the District. Under the Code, the District sets the tax rates on property with the approval of the Travis County Commissioner's Court. The Travis County Tax Assessor-Collector provides tax collection services. The Appraisal District is required under the Code to assess property at 100% of its appraised value. Further, real property must be reappraised at least every three years. Under certain circumstances, taxpayers and taxing units, including the District, may challenge orders of the Appraisal District's review board through various appeals and, if necessary, legal action.

Property taxes are levied as of October 1 in conformity with Subtitle E, Texas Property Tax Code. Taxes are due on receipt of the tax bill and are delinquent if not paid before February 1 of the year following the year in which imposed. On January 1 of each year, a tax lien attaches to property to secure the payment of all taxes and penalties and interest that are ultimately imposed.

The assessed value at January 1, 2006, upon which the October 2006 levy was based was \$74,318,915,991. The District levied taxes based on a tax rate of \$0.0734 per \$100 of assessed valuation. The assessed value at January 1, 2005, upon which the October 2005 levy was based was \$63,484,891,844. The District levied taxes based on a tax rate of \$0.0779 per \$100 of assessed valuation.

12. INTERLOCAL AGREEMENTS WITH TRAVIS COUNTY

The District entered into an interlocal agreement with Travis County in which Travis County provides legal and other services for the District along with the tax collections services discussed in Note 11. For the years ended September 30, 2007 and 2006, \$256,244 and \$331,342, respectively, is included in other purchased goods and services for the legal and other services. For the years ended September 30, 2007 and 2006, \$365,570 and \$332,904, respectively, is included in tax assessment and collection expense for the tax collections services. At September 30, 2007 and 2006, \$68,543 and \$63,498, respectively, is included in due to other governments related to this agreement.

During fiscal year 2006, the District entered into an interlocal agreement with Travis County in which Travis County provides supplemental dental, life, and disability insurance. For the years ended September 30, 2007 and 2006, fees of \$5,726 and \$3,844 were included in other purchased goods and services related to this agreement.

13. DEFERRED COMPENSATION PLAN

The District offers its employees a deferred compensation plan established in accordance with Internal Revenue Code Section 457. Assets and income of the District's plan are administered by a private corporation under contract with the District and are held for the exclusive benefit of the participants and their beneficiaries. Accordingly, the plan's assets and liabilities are not recorded in the District's basic financial statements. The District contributed \$50,099 and \$29,065 to the plan during the years ended September 30, 2007 and 2006, respectively.

14. HEALTH CARE COVERAGE

During the years ended September 30, 2007 and 2006, employees of the District were covered by a health insurance plan. The District contributed \$493 per month per employee to the plan as well as half of the cost of family coverage if applicable, and employees, at their option, authorized payroll withholdings to pay contributions or premiums for dependents. All contributions were paid to a licensed insurer. The plan was documented by a contractual agreement.

15. RISK MANAGEMENT

The District's risk management program includes coverage through third party insurance providers for officers' professional liability and workers compensation. During the years ended September 30, 2007 there were no reductions in insurance coverage from coverage in the prior year and there have been no claims.

16. NEW ACCOUNTING STANDARDS

The GASB Statement No. 43, Financial Reporting for Post-employment Benefit Plans Other than Pension Plans, became effective for the District in the fiscal year ending September 30, 2007. It establishes uniform financial reporting standards for other post-employment benefit ("OPEB") plans and supersedes the interim guidance included in GASB Statement No. 26, Financial Reporting for Post-employment Healthcare Plans Administered by Defined Benefit Pension Plans.

The GASB issued Statement No. 45, Accounting and Financial Reporting by Employers for Postemployment Benefits Other Than Pensions, which will be effective for the District in the fiscal year ending September 30, 2008. GASB Statement No. 45 requires state and local governments to establish standards for the measurement, recognition, and display of other post employment benefits expense/expenditures, related liabilities and note disclosures in the financial statements.

The District currently does not provide post-employment benefits for its employees and therefore GASB Statement No. 43 does not have an effect on the District's financial statements. The District does not believe that GASB Statement No. 45 will have a significant impact on the District's financial statements.





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

The Board of Managers of Travis County Healthcare District:

We have audited the financial statements of the Travis County Healthcare District (the "District"), a component unit of Travis County, Texas, as of and for the year ended September 30, 2007, which collectively comprise the District's financial statements and have issued our report thereon dated December 18, 2007. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States.

Internal Control Over Financial Reporting

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

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 District'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 District's financial statements that is more than inconsequential will not be prevented or detected by the District's internal control.

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 District's internal control.

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This firm is not a CPA firm

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 or material weaknesses. We did not identify any deficiencies in internal control over financial reporting that we consider to be material weaknesses, as defined above.

Compliance and Other Matters

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

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

maxwell Tocke + Ritter LLP

December 18, 2007