



# SEVENTY-NINTH ANNUAL REPORT



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# **Frontier Nursing Service**

Born in 1881 into a prominent American family, Mary Breckinridge spent her early years in many parts of the world - Russia, France, Switzerland and the British Isles. After the death of her two children, she abandoned the homebound life expected of women of her class to devote herself to the service of others, particularly children.

Mrs. Breckinridge established the Frontier Nursing Service (FNS) in Leslie County, Kentucky in 1925, then one of the poorest and most inaccessible areas in the United States. Mrs. Breckinridge introduced the first nurse-midwives in this country. Riding their horses up mountains and across streams in blizzard, fog or flood, the FNS nurses brought modern healthcare to families throughout an area of 700 square miles.

Until her death in 1965, Mary Breckinridge was the driving force behind the work of the Service whose influence today extends far beyond eastern Kentucky. Through the Frontier School of Midwifery and Family Nursing, hundreds of nurses have been trained and this important concept of family healthcare has been carried throughout the world.

Today, FNS, Inc., is organized as a parent holding company for Mary Breckinridge Healthcare, Inc., Frontier Nursing Healthcare, Inc., which includes four rural healthcare clinics (Community Health Center, Beech Fork Clinic, Kate Ireland Healthcare Center and Dr. Anne Wasson Healthcare Center) and for the Frontier School of Midwifery and Family Nursing - the largest midwifery program in the United States. The Frontier School of Midwifery & Family Nursing also trains family nurse practitioners.

Remarkably, the purpose and philosophy of the FNS has remained constant since 1925

# The Journey

by W.W. Hall, Jr., President & CEO

We continue to travel ahead with great anticipation. Our Board of Governors, Chair and Tustees have contributed largely to the direction and focus we now share as an organization. I know the members of our management team are grateful for the leadership and contribution of our Board in their efforts to improve our school, clinics and hospital.



As we re-examine our basic principles of quality healthcare and education, then apply the right answers to the needs of our region and the larger challenges beyond the mountains, it becomes very simple to move quickly. The energy and talent of our staff fuel the successes you will see and hear. Now we are prepared to share our story with those who know our past as well as those we will reach out and touch. The next pathway we see for expansion is development.

Disciplined financial reporting combined with the proper restructuring of our healthcare focus has provided the integrity we seek to share with those who wish to assist our mission.

We have reviewed and expanded our trustee support which is a vital aspect of the future as it has been in the past. New development tools to assist in Planned Giving opportunities, internet accessibility and targeted grant writing, compliment the continuing support we receive from all those who share in the love of our work. Most importantly, we are focusing these efforts on measuring the outcomes which will illustrate the impact of our work and your support.

We appreciate your interest in this wonderful organization. Please come see us.

#### Wendover News

by Barb Gibson, Assistant to CEO

#### Guests

During the months of June, July and August, Wendover hosted 51 overnight guests at our Bed & Breakfast Inn and served lunch/dinner to 202 additional guests. Special guests included The Osborne Brothers who were in Hyden for their annual bluegrass festival. Tours have been few over the last three months as university students are out of the school for the summer. The Bed & Breakfast Inn guest numbers continue to increase.

# Maintenance Projects

A huge recent undertaking was the taking down of two huge trees upon the hill which had potential for falling on the Garden House. These were taken down by professionals and was a very dangerous job. Thanks to The Stone Foundation for funds to pay for this.

Another project this fall will be repair of the copper guttering on The Big House. The guttering has pulled apart in many places and will require new hangers, etc. We also have to do some guttering repair on the Garden House by putting on new screens, etc. Our maintenance foreman, Joey Roberts, continues to stay busy with general upkeep of Wendover.

# Renovation Project - The Livery

The main focus over the last several months has been the renovation of the "Hurricane Workshop". The idea originated not long after W.W. (Bill) Hall, Jr. was appointed CEO & President of FNS, Inc. The building has been renovated to enhance Wendover's Bed & Breakfast Inn, which is growing rapidly, to give guests a place for recreation. Also, Wendover has become a "conference center" with different groups requesting to meet here (I read somewhere recently that Wendover was actually designated as a "conference center" many years ago). The Frontier School of Midwifery and Family Nursing will use the building for their student

activities and special functions; The FNS Board of Governors will use the facility at times; it will also be used for company-wide picnics and employee in-services, etc; and the community will be encouraged to use the place for family reunions, wedding receptions, etc.

The newly renovated building originally built in the 60's, used as a cow barn and in later years a carpentry shop, has been re-named The Livery. A newly blazed trail from Pig Alley (the Wendover driveway) leads to The Livery to allow guests easy access to the site. The Livery sits at the bottom of the mountain and has a large field of grass in front, formerly used as a pasture. A view of the Middlefork of the Kentucky River on the right makes this place a beautiful little paradise, already loved by many staff and visitors who have seen it.

I want to take this opportunity to thank those who made the renovations possible through their kindness and their interest in sustaining our beautiful historical site. I extend special thanks to W.W. (Bill) Hall and his wife, Teresa, for their gift that started the project. To Monica Luke and The Thompson Foundation - thanks Monica for sharing our vision, to Miss Kate Ireland and to The Stone Foundation who provided funds not only for assistance with this renovation but also for several Wendover maintenance projects. Also, a very special thank you to John Foley, member of FNS Board of Governors, for his donation of fencing lumber and railroad ties for the beautiful flower beds, etc.

As part of the renovation project, the area next to the river was cleared to make the river more accessible for fishing. The area will be maintained by keeping the grass trimmed and the brush cut.

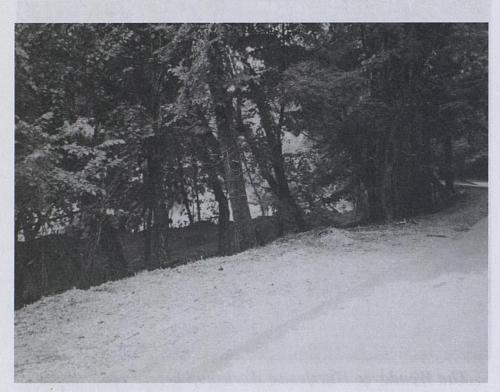
Funds are diminishing rapidly and we still need more fence posts, paint for the fence and funds for continued maintenance. If you wish to be a part of this project please do so by sending your gift marked "restricted for The Livery".



The Wendover Hurricane Workshop before renovations



The newly renovated Hurricane Workshop - The Livery



The Middlefork of the Kentucky River runs by The Livery



Hurricane Pasture in front of The Livery

# Mary Breckinridge Healthcare, Inc. News

by Mallie Noble, Administrator

#### Provider Recruitment

Greetings from Mary Breckinridge Healthcare staff! For several months a primary focus has been, and will continue to be, provider recruitment. Mr. W.W. Hall, Jr., CEO & President, and I have been meeting with local providers in an effort to improve relationships.



Ferdousis Begum, MD, joined our staff during July of this year. Dr. Begum graduated from medical school in Dhaha, Bangladesh, in 1982 and was a resident in Internal Medicine at Nassau University Medical Center during October 2000. After finishing her residency in Internal Medicine, she joined the University of Kentucky Family Practice as an Assistant Professor teaching and supervising medical students. Dr. Begum is married to Mohammed Q. Islam, MD. They have two children.



Dr. Ferdousis Begum, MD

Anita Cornett, MD, Internal Medicine, has helped us with Medicine Call during the summer months and has also been Acting Medical Director for Frontier Nursing Healthcare, Inc. healthcare centers. We appreciate Dr. Cornett.

# Quorum (QHR) Update

Jeff Taylor, Interim Controller associated with QHR, bid us farewell this month to pursue job opportunties in Mississippi. Jim Keeler, QHR representative, replaced Mr. Taylor as Interim Controller.

#### Health Fair

The ninth annual health fair was held at the Nixon Center in Hyden with forty vendors participating. Over 200 community members attended. Healthcare information was available and free blood pressure, glucose and cholesterol checks were given. Each year the health fair continues to grow, helping to build relationships with the community and the patients we serve.

# Mary Breckinridge Festival Committee

The Mary Breckinridge Festival Committee continues to meet each month in preparation for the Festival which is held the first week in October each year. Thanks to Chairman Rhonda Brashear and the other dedicated members who work hard all year long to make this event happen.

# HillRom Equipment Visit

During June, Nurse Managers, Plant Operations Manager, and I were guests of the HillRom Corporation, manufacturers of hospital equipment in Batesville, Indiana. We had the opportunity to board their jet and have a full day of guided tours by host, Mitchell Moore. We were impressed with their factory where we watched as skilled craftsmen completed the furnishings and equipment for hospital rooms and out patient needs. Thanks to HillRom and Mitchell Moore for their hospitality and for a very educational day.

# Bioterrorism Updates

Bioterrorism updates provided by the Kentucky Hospital Association (KHA) continues to be an on-going educational part of our staff training. We received another grant for \$43,000 to be used for purchasing items to update our facility to be prepared in the event of smallpox exposure or any other airborne disease. I want to thank KHA for the work they have done to help Kentucky to be prepared for a national threat.

KHA has also been instrumental in the purchase of an on-line program which allows all the hospitals in our district to view the number of beds available in our area. Any type of disaster, whether it is bioterrorism, weather related, or any other event which may require an influx of patients or the information for available holding beds will be available at a glance. This communication center will assist all the facilities in our district if we need to communicate quickly without the use of telephones. We are in the testing phase for use and will "go live" in September.

# New Equipment

The Radiology Department received a new state-of-the art General Electric Lunar DEXA scanner. The scanner measures bone density, detects osteoporosis, and calculates the risk of fractures, all in a matter of minutes. This will be a very valuable service for preventive measures.

A new 12-bed telemetry system is now in place on the medical surgical ward. Phillips completed installation in June. The new system is an asset to our facility. We recently had several patients transferred from one of the larger hospitals due to the availability of our telemetry unit.

#### **Medical Students**

Three medical students from India were here from June through August. Dr. Suja Bala Vinod, Dr. Priya A. Ashok and Dr. Asha Kurunthottical spent the majority of their time here on the medical surgical unit. The staff at MBHC embraced these students as their own and helped each other understand and accept our cultural differences. These three medical students became a part of our "FNS Family" and we were sad to see them leave as they were a valuable addition to our healthcare team.

# **Educational Training**

Edith Hensley, ER Manager, and Marlene Maggard, RN, completed primary training to become SANE (Sexual Assault Nurse Examiner) certified. They will complete prerequisites by the end of September. They will then apply for certification through the Kentucky Board of Nursing. This will be an asset to our facility and to the community.

The University of Kentucky Aeromedical Team came to MBHC to teach Neonatal Advanced Life Support classes to our staff. Many thanks to the Team for assisting our staff with this certification as we continue to focus on providing quality healthcare to our pediatric patients.

MBHC is in the process of software conversion with Dairyland Healthcare Solutions. Registration, billing, material management, medical records and Home Health will be converted.

# Employee Picnic

An employee and community picnic has been scheduled for October 1 in conjunction with the Mary Breckinridge Festival.

# **New Appointments**

by Barb Gibson, Assistant to CEO

The FNS Board of Governors is pleased to introduce Mary Ethel Wooton as a member of the Mary Breckinridge Healthcare and Frontier Nursing Healthcare, Inc., Boards of Directors and Rhonda Brashear, as a member of Mary Breckinridge Healthcare and the Frontier School of Midwifery and Family Nursing Boards of Directors. They were appointed during the April 2004 Board Meeting.

Mary Ethel Wooton is a native of Leslie County and an FNS baby, delivered by by nurse midwife Helen Browne. Mary Ethel graduated from the Leslie County High School in 1962 and from the University of Kentucky in 1966 with double majors in English and History and a degree in Education Mary Ethel worked



gree in Education. Mary Ethel worked *Mary Ethel Wooton* as a teacher in Atlanta, Georgia; Memphis, Tennessee and Louisville, Kentucky, and moved back to Leslie County in 1998 upon retirement.

Mary Ethel also serves on the Hazard Appalachian Regional Hospital Advisory Board, Leslie County Family & Consumer Sciences Council and Leslie County Parks Board. She also performs volunteer activities with American Cancer Society Relay for Life Committee, Community Scholar for the Kentucky Arts Council, Daniel Boone Habitat for Humanity, Kentucky Folklife Festival in Frankfort, Leslie County Arts & Crafts Council, Mary Breckinridge Festival Committee and Parade of Lights Committee and is a member of the Hyden City Council.

Mary Ethel states her goals as follows: to work for the improvement of health services delivered to the people of Leslie County, particularly through the Mary Breckinridge Hospital and FNS clinics; to partner with the Leslie County 4-H program and the staff from FNS clinics to teach the story of Mrs. Breckinridge and the FNS to the elementary students in our county.

Rhonda Brashear was born in Hazard, Kentucky, but has spent her entire life living and working in Leslie County. Rhonda worked in banking for twenty-seven years, where she gained the respect and confidence of her customers and co-workers, and was rewarded with a wealth of knowledge about the people of Leslie County.



Rhonda Brashear

Rhonda's passion in life is economic development for Hyden and Leslie County. It is her life long dream to see jobs and opportunities developed to keep "our brightest and best" young people here in the mountains, rather than see them move out of the region to seek a fortune. Rhonda is also very interested in preserving and promoting the local history and culture of Hyden and Leslie County and is aware of the role that Mary Breckinridge and Frontier Nursing Service has played over the years.

Rhonda is currently employed with Hazard Community and Technical College (HCTC) and works at the Leslie County Center, a branch of HCTC. Rhonda and her husband, Fred, have a son and a daughter, Joel and Rachel, both delivered by FNS midwives. Rhonda enjoys gardening, attending Broadway shows and loves music of all types.

# Frontier Nursing Clinics Update by Dr. Julie Marfell, Executive Director

## Campaign for Kids

The FNS Campaign for Safe Kids was held in July. Each week we focused on a safety issue and held a program at the park behind the pool in Hyden. Our first session was car safety and included helmet use and how to ride a bike safely. Swimming safety was the next session.



Our final session was held in conjunction with the Mary Breckinridge Hospital Health Fair and the children made magnets that included emergency and clinic numbers on them for their refrigerators at home. All participants were given vouchers for free safety supplies, i.e. bike helmets, car seats and swimming lessons. The attendance improved every week and we plan to continue to focus on safety issues for children.

We were fortunate to have the help of the Couriers for the Safe Kids project. They organized and participated in the entire event and came up with excellent, creative activities for the kids to participate in. We would like to extend another big thank you to all of them for their hard work.

# Reach Out and Read Program

The staff is being trained on the Reach Out and Read Program and we plan to be distributing books and well child visits for children six months to five years old this fall. All summer the staff at the Beech Fork Clinic has sponsored a story hour at the old Beech Fork Center building. The children participating in "story hour" have enjoyed it and the community has voiced support for our effort. A thank you is extended again to the Couriers for helping us out as well with this project.

## Scholarships

As part of our community outreach effort, three students have been selected to receive \$250 scholarships sponsored by the rural health clinics. These students graduated from high school this year and are entering college this fall. The students are Marvin Amos, Noah Lewis and Shelli Hoskins. All of these students are followed at the Beech Fork Clinic.

# Angela Mitchell, FNP, receives Doctor of Nursing

Angela Mitchell, FNP at the Kate Ireland Healthcare Center in Manchester, is now Dr. Angela Mitchell. Angie completed her Doctor of Nursing at Case Western Reserve, Frances Payne Bolton School of Nursing in July. Her research focuses on the use of healthcare services by adolescents living in rural areas. Congratulations to Angie!



Angela Mitchell, FNP

#### Other

The Kate Ireland Healthcare Center has completely converted to the electronic medical record. It is the first of our clinics to be paperless. All of the other clinics are using the computer for their documentation and hope to convert to paperless in the near future.

Laura Mann-James, CNM, joined the midwifery service in March. She joins Lynn Wilkening, CNM, and Debi Karsnitz, CNM, as the third FSMFN graduate in our service. Our nurse-midwives are working with Dr. Faye Whiting to cover her practice and first call as well as building our own midwifery service in both Leslie and Clay Counties.

# Community Health Center (CHC) Anniversary

This September, Community Health Center (CHC) celebrates its twenty-fifth anniversary. The staff has planned an Open House to mark the event. The Open House will be Monday, September 20, 2 pm - 4pm. Linda Arhens, FNP at CHC, will also be doing an education session for the Peabody Forest Rangers on October 18 on Blood-borne Pathogens.

# WEBSITES

Frontier Nursing Service - www.frontiernursing.org

FSMFN Community Based Nurse Midwifery Education Program (CNEP) - <a href="https://www.midwives.org">www.midwives.org</a>

FSMFN Community Based Nurse Practitioner Program (CFNP) - www.frontierfnp.org

# Frontier School of Midwifery and Family Nursing News

by Dr. Susan Stone, President & Dean

# Accreditation Preparation

The long awaited site visit from the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) occurred July 25 through July 28, 2004. The purpose of this semiannual event was to conduct the final evaluation of our School to determine whether full accreditation in the SACSCOC would be granted.



The commission on Colleges for the Southern Association of Colleges and Schools is the regional body for the accreditation of higher education institutions in the Southern states (Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, and Virginia) and Latin America that award associate, baccalaureate, master's or doctoral degrees. Accreditaion by the Commission on Colleges signifies that an institution has a purpose appropriate to higher education and has resources, programs, and services sufficient to accomplish and sustain that purpose. Accreditation indicates that an institution maintains clearly specified educational objectives that are consistent with its mission and appropriate to the degrees it offers, and that is successful in achieving its stated objectives.

SACS Principles of Accreditation: Foundation for Quality Enhancement December 2001 www.sacscoc.org

The team who came to visit our School included Dr. Susan S. Gunby, Dean & Professor, Mercer University, Atlanta, Georgia; Dr. Gerard A. Dizinno, Assistant to the President for Planning & Institutional Research, St. Mary's University, San Antonio, Texas; Ms. Leonora (Lee) S. Horton, Program Director, Nurse-Midwifery Program, Medical University of South Carolina College of Nursing, Charleston, South Carolina; Ms. Jackie Hutcherson, Interim

Director, Nurse Midwifery Education Program, East Carolina University School of Nursing, Greenville, North Carolina; Mr. Steve Lee, Vice-President for Business Affairs, University of Mobile, Alabama; Dr. Rose Y. Temple, President, Baptist Memorial College of Health Sciences, Memphis, Tennessee, and Dr. Ann B. Chard, Associate Executive Director, Commission on College, Southern Association of Colleges and Schools, Decatur, Georgia.



Dr. Susan Stone and SACS Site Visitors

The Team stayed at Wendover and visited the School during the day. They examined all areas of our School operations interviewing Board members (John Foley and Dr. Michael Carter), administration, faculty, staff and students. They toured the facility. At the conclusion of the visit, we held a meeting in the Mardi Cottage Classroom. All students, faculty, staff and Board member, Dr. Michael Carter, were present. Each team visitor gave a report on the specific areas they had examined. The conclusion was that we had met all the specified criteria and they had no recommendations. There was much cheering and clapping at the result. In fact, we even walked down to the Chapel and rang the bell so that all of Hyden would know we were celebrating.

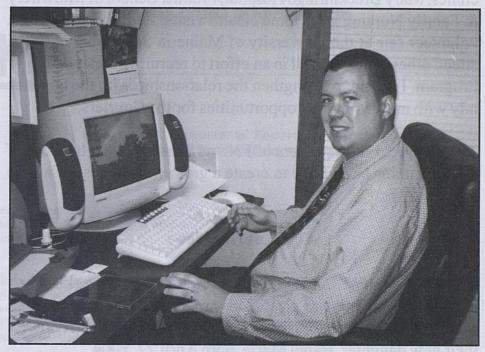
The next step is for review to be presented to the Commission at its meeting on December 6, 2004. The final decision will be made at that meeting. I want to extend my greatest appreciation to everyone who worked so hard to make this a successful visit.

The work is not finished yet. We are currently preparing our self-studies for the National League for Nursing Accreditation Commission (NLNAC) and the American College of Nurse-Midwives Division of Accreditation (ACNM DOA). These organizations will be doing focused reviews of our programs. A collaborative site visit is scheduled for October 4-6, 2004. Two site visitors from NLNAC and three site visitors from ACNM DOA will be visiting. We are seeking NLN accreditation for our Master of Science in Nursing Degree, which will cover both tracks, the CNEP and CFNP. CNEP has been accredited by the ACNM since 1990; this is a scheduled re-accreditation site visit.

As part of ongoing efforts to make the accreditation process responsive to a broad range of constituents, the National League for Nursing Accrediting Commission invites third party comments on programs being reviewed for initial accreditation. This means that anyone who is reading this article is invited to submit any comments about the FSMFN Master of Science in Nursing Program. These comments may be submitted either directly to the National League for Nursing Accrediting Commission at 61 Broadway, 33rd Floor, New York, NY 10006 or they may be submitted directly to Dr. Susan Stone, President & Dean of FSMFN, 195 School Street, Hyden, Kentucky 41749. Any comments submitted directly to me will be shared with the program evaluators. We will also set aside time during the site visit for anyone who would like to come and meet with the site visitors to provide comments about the Master of Science in Nursing Program. The time for this meeting will be Tuesday afternoon October 5, 2004, at 3 pm at the Morton Gill Building on campus. Thanks to everyone for all of their assistance and support as we go through this accreditation process. I know that the quality of the education that we provide at FSMFN is better than ever as a result of all of our work.

# **Courier Program News**

by Michael Claussen, Assistant Courier Program Coordinator



Michael J. Claussen, Assistant Courier Coordinator

My name is Michael J. Claussen and during July 2004, I accepted the position of Tour Guide/Assistant Courier Program Coordinator for the FNS. I am originally from the flatlands of Bourbonnais, Illinois, and moved to Kentucky a year ago. I come to FNS from a rewarding experience as a substitute teacher for the Perry County Public Schools. I live near Hazard, Kentucky, with my wife, Melody, and our three children, Brittney, Hannah and Frank.

Upon my arrival at FNS, two couriers, Julie Voelker, Aurora, Illinois, and Chelsa Gifford, Louisville, Kentucky, were ending their internship with the Courier Program. They were both active participants in the shadowing opportunities at the clinics and home health. They also volunteered their time within the community with Habitat for Humanity and Campaign for Safe Kids which was a series of programs on car, bike, water and fire safety.

I am excited about the future of the Courier Program. We will continue to offer the outstanding shadowing opportunities at our clinics, Mary Breckinridge Hospital, Frontier School of Midwifery & Family Nursing and Home Health visits. I will be attending a volunteer fair at the University of Maine in September and will attend others later this fall in an effort to recruit volunteers for our Program. I intend to strengthen the relationship with the community with more volunteer opportunities for the Couriers.

The historical headquarters of FNS at Wendover is a treasure of the mountains and I hope to create a greater awareness of all we have to offer.

#### **Old Courier News**

Danielle (Stanko) Godinez ('95) wrote that she is working in her hometown with two physicians as a Family Practice physician. Danielle and her husband, Lucas, announce the arrival of their new daughter, Isabel Marie, born April 27, 2004.

Former Couriers Celeste Lindahl ('04) and Vanessa Guy ('04) returned for a visit during the week of The Osborne Brothers Festival. Also, former Courier, Kate Fox ('02) came to visit with her Mom. We encourage all past Couriers to come back and visit us.

# SEVENTY-NINTH ANNUAL REPORT OF THE FRONTIER NURSING SERVICE For the Fiscal Year May 1, 2003 to April 30, 2004



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bkd.com

# Independent Accountants' Report on Financial Statements and Supplementary Information

Board of Governors Frontier Nursing Service, Inc. and Affiliates Lexington, Kentucky

We have audited the accompanying consolidated statement of financial position of Frontier Nursing Service, Inc. and Affiliates (FNS) as of April 30, 2004, and the related consolidated statements of activities and cash flows for the year then ended. These financial statements are the responsibility of FNS's management. Our responsibility is to express an opinion 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 opinion.

In our opinion, the consolidated financial statements referred to above present fairly, in all material respects, the financial position of FNS as of April 30, 2004, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Our audit was made for the purpose of forming an opinion on the basic financial statements taken as a whole. The accompanying supplementary information is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information has been subjected to the procedures applied in the audit of the basic financial statements and, in our opinion, is fairly stated, in all material respects, in relation to the basic financial statements taken as a whole.

Solutions for Success

July 8, 2004

Consolidated Statement of Financial Position April 30, 2004

A	S	s	e	t	S

Current Assets		
Cash and cash equivalents	\$	74,501
Receivables		
Patient, less allowance for uncollectible accounts of approximately \$558,200		1,522,450
Student tuition, less allowance for uncollectible accounts of		514 407
approximately \$15,000		516,607
Other		22,006
Investments		17.332,957
Supply inventories		205,962 258,140
Estimated third-party payor settlements		
Prepaid expenses and other assets		312,979
Total current assets	_	20,245,602
Property and Equipment, Net	_	2,882,030
Other Assets		
Beneficial interest in outside trusts		1.775.897
Investments held in perpetuity		3,956,521
investments neight in perpetuity		3,930,321
Total other assets		5,732,418
Total assets	\$_	28,860,050
Liabilities and Net Assets		
Current Liabilities		
Accounts payable	\$	923,506
Accrued expenses	News	1.827.300
Deferred tuition, students		744.297
Current maturities of long-term obligations		410,422
and an area of the second of t		mit oal, doog.
Total current liabilities	PV A	3,905,525
Long-term Liabilities		
Long-term obligations, net of current portion		483,559
A 18 hours absolutely havelets seem to common as simplest to seconds self-tol	S) III	OF PARTY DE DE 11
Total long-term liabilities	QFEE.	483,559
Total liabilities	10 10 10 10 10 10 10 10 10 10 10 10 10 1	4,389,084
Net Assets		
Unrestricted		9,577,896
Temporarily restricted		9,160,652
Permanently restricted		5,732,418
		TAXIS BY
Total net assets		24,470,966
Total liabilities and net assets	\$	28,860,050

Consolidated Statement of Activities
Year Ended April 30, 2004

Change in Unrestricted Net Assets	
Revenues and gains	
Net patient service revenue Contributions	\$ 10,513,183
Education revenues	423,699
Tuition and educational fees	
Federal grants	1,672,246
Other revenue	86,058
Investment return	1,365,362
Other revenue	180,709
Net assets released from restriction due to satisfaction of	
program requirements	551,198
Total revenues and gains	14,792,455
Expenses	Asset a seed but a seed the broder I
Salaries, wages and benefits	7.522.661
Medical services, supplies and other expenses	7,522,661
Facility costs	6,036,498
Provider taxes	1,811,713
Provision for bad debts	161,134
	614,832
Total expenses	16,146,838
Change in unrestricted net assets	(1,354,383)
Change in Temporarily Restricted Net Assets Contributions	
Investment return	120,188
#####################################	1,222,403
Change in annuity payable	7.218
Net assets released from restriction due to satisfaction of	
program requirements	(551,198)
Tokki office profiction and the face contract recommend to a contract of	november of the second second second
Change in temporarily restricted net assets	798,611
TOTAL BOOK IN THE PERSON OF TH	of the laster and the last of the second
Change in Permanently Restricted Net Assets	
Change in beneficial interest in outside trusts	149,440
Change in permanently restricted net assets	149,440
Change in Net Assets	(406,332)
	(100,532)
Net Assets, Beginning of Year, as Previously Stated	25,931,198
Adjustment Related to Prior Periods	(1,053,900)
Not Accete Projection 637	Equipment acquired with exercist leave
Net Assets, Beginning of Year, as Restated	24,877,298
Net Assets, End of Year	\$ <u>24,470,966</u>

Consolidated Statement of Cash Flows Year Ended April 30, 2004

Operating Activities	\$ (406.332)
Change in net assets  Adjustments to reconcile change in net assets to net cash	
used in operating activities  Change in beneficial interest in outside trusts	(149,440)
Provision for bad debts	614,832
나 있다. 그는 그는 사람들이 나는 그를 가는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없는 것이 없는데 없는데 가장 있다면 없는데	667,425
Depreciation and amortization	(2.071.752)
Net realized and unrealized gains on investments	(31,995)
Gain on dispositions of property and equipment	(1,053,900)
Adjustment applicable to prior years	atomic of the source of the so
Changes in	146,668
Patient and student tuition receivables	95,372
Other receivables	5,487
Supply inventories	125,977
Prepaid expenses and other assets	466,537
Accounts payable	124.868
Deferred tuition, students	555.252
Accrued expenses	(985,139)
Estimated third-party payor settlements	(983,139)
Net cash used in operating activities	(1,896,140)
Investing Activities	
Proceeds from sale of equipment	112,037
Purchases of property and equipment	(308,373)
Proceeds from sale of investments	8,967,277
Purchase of investments	(6,917,359)
Turchase of investments	The second secon
Net cash provided by investing activities	1,853,582
Financing Activities	
Principal payments on long-term obligations	(336,674)
Net cash used in financing activities	(336,674)
Decrease in Cash and Cash Equivalents	(379,232)
Cash and Cash Equivalents, Beginning of Year	453,733
Cash and Cash Equivalents, End of Year	\$74,501
Supplemental Cash Flows Information	
Cash payments for interest	\$ 29,228
Cash payments for interest	\$ 29,228
Noncash Investment and Financing Activities	
Equipment acquired with capital lease	\$ 134,999
Equipment acquired with capital rease	

# Frontier Nursing Service, Inc. and Affiliates Notes to Consolidated Financial Statements April 30, 2004

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

#### Organization

Mary Breckinridge established the Kentucky Committee for Mothers and Babies in Leslie County, Kentucky, in 1925. The name later changed to the Frontier Nursing Service, Inc. and Affiliates (Service) in 1928. The Service's original purpose was to provide needed health care in the Appalachian area, introducing the first nurse-midwives in the United States. During its early years, the Service was the only provider of health services in Leslie County and the portion of surrounding counties comprising its service area. In 1939, the Service established a midwifery school. Today, FNS, Inc. (FNS) operates as a holding company for a midwifery and family nursing school, a real estate holding company, a hospital, a foundation and a system of rural health clinics which provide primary care services through the Dr. Anne Wasson Rural Health Center, the Kate Ireland Women's Health Care Center, Community Health Center and Beechfork Clinic. The Service has historically been dependent on charitable contributions to fund a significant portion of the costs of services and programs.

#### **Principles of Consolidation**

The Service consists of the following nonprofit entities:

FNS, Inc. - (FNS) Parent holding company of the Service.

Mary Breckinridge Health Care, Inc. (MBHC) – Entity responsible for operating the hospital and home health agency.

Frontier School of Midwifery and Family Nursing, Inc. (School) – Entity responsible for operating the midwifery and family nursing school.

Frontier Nursing Service Foundation, Inc. (Foundation) – Entity responsible for maintaining the investment portfolio of the Service and receiving contributions from donors.

FNS Real Estate, Inc. (FNS REI) – Entity responsible for holding and managing the real estate and fixed assets owned by the Service.

Frontier Nursing Healthcare, Inc. (FNH) - Entity responsible for operating the rural health clinics.

The consolidated financial statements include the accounts and transactions of the above entities. Intercompany transactions and accounts have been eliminated in consolidation.

Notes to Consolidated Financial Statements
April 30, 2004

# Use of Estimates

The preparation of consolidated 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 consolidated financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

#### Cash and Cash Equivalents

Cash and cash equivalents consists of cash and highly liquid investments having an original maturity of three months or less.

#### Deferred Tuition - Students

The Service provides midwifery education and family nurse practitioner programs over an approximate 24-month period to eligible students. The program generally takes 24 months to complete. The School's policy is to recognize tuition revenue ratably over the term of the program for each student.

#### Patient Accounts Receivable

MBHC and FNH report patient accounts receivable for services rendered at net realizable amounts from third-party payers, patients and others. MBHC and FNH provide an allowance for doubtful accounts based upon a review of outstanding receivables, historical collection information and existing economic conditions. As a service to the patient, MBHC and FNH bill third-party payers directly and bill the patient when the patient's liability is determined. Patient accounts receivable are due in full when billed. Accounts are considered delinquent and subsequently written off as bad debts based on individual credit evaluation and specific circumstances of the account.

### Accounts Receivable - Student Tuition

Accounts receivable are stated at the amount billed to students. The School provides an allowance for doubtful accounts, which is based upon a review of outstanding receivables, historical collection information and existing economic conditions. Accounts receivable are ordinarily due 30 days after the issuance of the invoice. Accounts past due more than 120 days are considered delinquent. Delinquent receivables are written off based on individual credit evaluation and specific circumstances of the student.

# Frontier Nursing Service, Inc. and Affiliates Notes to Consolidated Financial Statements April 30, 2004

#### Investments and Investment Return

Investments in equity securities having a readily determinable fair value and in all debt securities are carried at fair value. Other investments are valued at the lower of cost (or fair value at time of donation, if acquired by contribution) or fair value. Investment return includes dividend, interest and other investment income, realized and unrealized gains and losses on investments carried at fair value and realized gains and losses on other investments.

Investment return that is initially restricted by donor stipulation and for which the restriction will be satisfied in the same year is included in unrestricted net assets. Other investment return is reflected in the statement of activities as unrestricted, temporarily restricted or permanently restricted based upon the existence and nature of any donor or legally imposed restrictions. The board of governors designates unrestricted assets for special uses.

#### Supply Inventories

Medical supply and pharmaceutical inventories are stated at the lower of cost, determined using first-in, first-out method, or market.

#### Property and Equipment

Property and equipment are stated at cost and are depreciated on a straight-line basis over the estimated useful life of each asset. Assets under capital lease obligations and leasehold improvements are amortized over the shorter of the lease term or their respective estimated useful lives.

#### Beneficial Interest in Outside Trusts

The Service is a beneficiary of trust funds held by others. The Service has recorded as a permanently restricted asset the fair value of the trusts, which represents an estimate of the net present value of the estimated income to be received from these trusts. Income received from such funds is included in unrestricted donations.

#### Annuities Payable

Contributions received by the Service under gift annuity agreements are recorded at fair value at the date of contribution. Under the terms of the annuity agreement, the Service holds the assets contributed and makes periodic payments of a fixed amount to the annuitant for the remainder of the annuitant's lifetime. Assets held under the gift annuity agreement at April 30, 2004, totaled \$131,665. The net present value of the annuity obligation, calculated using the applicable federal rate at the time of the gift, and life expectancy tables totaled approximately \$9,400 at April 30, 2004, and is included in accrued expenses in the accompanying consolidated statement of financial position.

Notes to Consolidated Financial Statements
April 30, 2004

#### Estimated Malpractice Costs

An annual estimated provision is accrued for the self-insured portion of medical malpractice claims and includes an estimate of the ultimate costs for both reported claims and claims incurred but not reported.

#### Self-funded Health Care Plan

The Service maintains a self-insured health care plan covering substantially all full-time employees. Contributions are made to the administrator as health care claims are incurred and expenses are accrued as incurred.

#### Temporarily and Permanently Restricted Net Assets

Temporarily restricted net assets are those whose use by the Service has been limited by donors to a specific time period or purpose. Permanently restricted net assets have been restricted by donors to be maintained by the Service in perpetuity.

#### **Grant Revenues**

Support funded by grants is recognized as the School performs the contracted services or incurs outlays eligible for reimbursement under the grant agreements. Grant activities and outlays are subject to audit and acceptance by the granting agency and, as a result of such audit, adjustments could be required.

#### Net Patient Service Revenue

The Service has agreements with third-party payers that provide for payments to MBHC and FNH at amounts different from established rates. Payment arrangements include prospectively determined rates per discharge, reimbursed costs, discounted charges and per diem payments. Net patient revenue is reported at the estimated net realizable amounts from patients, third-party payers and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payers. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods, as final settlements are determined.

#### Charity Care

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

Notes to Consolidated Financial Statements
April 30, 2004

#### Contributions

Gifts of cash and other assets received without donor stipulations are reported as unrestricted revenue and nets assets. Gifts received with a donor stipulation that limits their use are reported as temporarily or permanently restricted revenue and net assets. When a donor stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions. Gifts having donor stipulations which are satisfied in the period the gift is received are reported as unrestricted revenue and net assets.

#### Income Taxes

The Service is compromised of not-for-profit corporations that are tax exempt pursuant to Section 501(c)(3) of the Internal Revenue Code (Code), except for FNS REI, which is a not-for-profit corporation recognized under Section 501(c)(2) of the Code. FNH has applied for, but not yet received, tax-exempt status pursuant to Section 501(c)(3) of the Code. The management of FNH believes it is operating in accordance with the provisions of Section 501(c)(3). Accordingly, no provision for income taxes has been made in the accompanying consolidated financial statements.

#### Note 2: Net Patient Service Revenue

MBHC and FNH have agreements with third-party payers that provide for payments at amounts different from established rates. These payment arrangements include:

Medicare – For services prior to September 1, 2003, inpatient acute care services rendered to Medicare program beneficiaries were paid at prospectively determined rates per discharge. These rates vary according to a patient classification system that is based on clinical, diagnostic and other factors. Inpatient nonacute services and certain outpatient services related to Medicare beneficiaries are paid based on a combination of fee schedules and a cost reimbursement methodology. MBHC and FNH is reimbursed for certain services at tentative rates with final settlement determined after submission of annual cost reports by MBHC and FNH and audits thereof by the Medicare fiscal intermediary. Effective August 1, 2000, a prospective payment system was activated by the Medicare program for outpatient procedures. MBHC was held harmless from the new prospective payment system until December 31, 2003.

Notes to Consolidated Financial Statements April 30, 2004

On September 1, 2003, MBHC elected critical access hospital (CAH) designation, which changes the payment system for the care of Medicare beneficiaries. As a CAH, inpatient and outpatient services are paid on a cost reimbursement methodology. MBHC is reimbursed certain services at tentative rates with a final settlement determined after submission of annual cost reports by MBHC and audit thereof by the Medicare fiscal intermediaries.

Medicaid – For services prior to September 1, 2003, inpatient services provided to Medicaid program beneficiaries are reimbursed at prospectively determined per diem rates. Outpatient services rendered to Medicaid program beneficiaries are reimbursed under a cost reimbursement methodology. MBHC and FNH are reimbursed at a tentative rate with final settlement determined after submission of annual cost reports by MBHC and FNH and audits thereof by the Medicaid fiscal intermediary.

Effective September 1, 2003, with the CAH designation, both inpatient and outpatient services rendered to Medicaid program beneficiaries are reimbursed under a cost reimbursement methodology. MBHC is reimbursed at a tentative rate with final settlement determined after submission of annual cost reports by MBHC and audits thereof by the Department for Medicaid Services.

Approximately 85% of net patient service revenues for 2004 are from participation in the Medicare and state sponsored Medicaid programs, respectively.

MBHC and FNH have also entered into payment agreements with certain commercial insurance carriers, health maintenance organizations and preferred provider organizations. The basis for payment to MBHC and FNH under these agreements includes prospectively determined rates per discharge, discounts from established charges and prospectively determined daily rates.

#### Note 3: Concentration of Credit Risk

MBHC and FNH grant credit without collateral to patients, most of whom are area residents and are insured under third-party payer agreements. The mix of receivables from patients and third-party payers at April 30, 2004, is:

Medicare	30%
Medicaid	37
Other third-party payers	19
Patients	14
	100%

Notes to Consolidated Financial Statements April 30, 2004

The Service maintains a substantial portion of its cash and investments in two local financial institutions. The balances are insured by the Federal Deposit Insurance Corporation up to \$100,000. At various times during the fiscal year, the cash balances may exceed the insured limits. The Service considers the risk associated with the cash balances in excess of the insured limits to be minimal. At April 30, 2004, the Service's cash accounts did not exceed federally insured limits.

# Note 4: Grant Commitments

The School receives its grant support through periodic claims filed with the respective funding sources, not to exceed a limit specified in the funding agreement. Since the financial statements of the School are prepared on the accrual basis, any earned portions of the grants not yet received are recorded as receivables. Following are the grant commitments that extend beyond April 30, 2004:

_	Grant	Term	Grant Amount	Earned as of April 30, 2004	Funding Available
	Advanced Education Nursing Traineeships	July 1, 2003 – June 30, 2004	\$ <u>82,916</u>	\$50,000	\$ 32,916

#### Note 5: Investments and Investment Return

Investments at April 30, 2004, consisted of the following:

Cash and equivalents	\$ 1,709,132
Corporate bonds	2,041,095
Common trust fund bonds	2,823,488
Common stock	12,854,336
Common trust fund equities	1,861,427
	21,289,478
Less investments held in perpetuity	3,956,521
Investments – current	\$_17,332,957

Notes to Consolidated Financial Statements April 30, 2004

Total investment return is comprised of the following:

	Un	restricted		mporarily estricted		Total
Interest and dividends Realized gains (losses) Unrealized gains (losses)	\$	278,306 403,080 683,976	\$	237,707 370,387 614,309	s _	516,013 773,467 1,298,285
Total investment	\$	1,365,362	\$_	1,222,403	\$_	2,587,765

### Note 6: Property and Equipment

Property and equipment held by the Service includes the following at April 30, 2004:

Land	\$ 542,682
Buildings	4,548,160
Equipment	7,689,154
Construction in progress	4,524
	12,784,520
Less accumulated depreciation and amortization	9,902,490
	\$2,882,030

#### Note 7: Beneficial Interest in Outside Trusts

The Service is a beneficiary of trust funds held by others. The Service receives income annually based on a percentage stipulated in the trust agreement. The trustee is to hold assets of the trust in perpetuity. Should the Service ever cease to exist, the assets will be transferred to another beneficiary as named in the trust agreement. The composition of the Service's beneficial interest in outside trusts held by third parties consists of the following as of April 30, 2004:

Ballard trust	\$ 307,734
Gage trust	973,102
Jones trust	52,977
Patterson trust	220,103
Ross trust	74,249
Schoff trust	60,184
Stebbins trust	87,548
	\$ 1,775,897

Notes to Consolidated Financial Statements
April 30, 2004

# Note 8: Medical Malpractice Claims

The Service purchases medical malpractice insurance under a claims-made policy on a fixed premium basis with coverage of \$1,000,000 per occurrence, \$3,000,000 in aggregate and a \$500,000 self-insured retention. Accounting principles generally accepted in the United States of America require a health care provider to accrue the expense of its share of malpractice claim costs, if any, for any reported and unreported incidents of potential improper professional service occurring during the year by estimating the probably ultimate costs of the incidents. Based upon the Service's claim experience, no such accrual has been made. It is reasonably possible that this estimate could change materially in the near term.

#### Note 9: Long-term Obligations

Long-term obligations consist of the following at April 30, 2004:

Note payable to Toyotal Financial Services due		
February 21, 2009, interest at 4.99%, due in monthly		
installments of \$432, including interest, collateralized		
by a 2004 Toyota RAV4.	\$	21,868
Note payable to Toyotal Financial Services due		
February 21, 2009, interest at 4.99%, due in monthly		
installments of \$399, including interest, collateralized		
by a 2004 Toyota RAV4.		20,211
Note payable to bank due in full December 29, 2004,		
interest at prime due quarterly, collateralized by a		
2001 Toyota Sequoia.		24,455
Note payable to bank due in full December 1, 2004,		
interest at prime due quarterly, collateralized by a trust		
account held with bank.		190,000
Capital leases for equipment, at rates ranging from one		
percent to 36%, collateralized by equipment.		637,447
Tolland are invested in \$500 MM rev year. One individual is		893,981
Less current portion		410,422
Noncurrent obligations	\$	483,559
uipment under capital leases includes the following at April	30. 20	04.

Equipment under capital leases includes the following at April 30, 2004:

Equipment Less accumulated depreciation	\$ 961,420 310,336
	\$ 651 084

Notes to Consolidated Financial Statements
April 30, 2004

Aggregate annual maturities of long-term debt and capital lease obligations at April 30, 2004, were:

	Long-term Debt		Capital Lease Obligations	
2005 2006 2007 2008 2009	\$	222.506 8.462 8.894 9.348 7,324	\$	201,836 200,636 194,636 57,195 13,872
Less amount representing interest	\$	256,534	no.i	668.175 30,728
Present value of future minimum lease payments			\$	637,447

#### Note 10: Retirement Plan

The FNS Capital Accumulation Plan (Plan), a noncontributory defined contribution retirement plan, covers substantially all of the Service's employees. Employer contributions are determined by the board of governors of the Service annually and are allocated among Plan participants on the basis of eligible employee salaries. The Service's contribution related to the Plan was \$164,015 in 2004.

#### Note 11: Self-insurance Program

The Service has a self-insurance program for hospitalization and medical coverage for its employees. The Service limits its losses through the use of a stop-loss policy from re-insurers. Specific individual losses for claims are limited to \$50,000 per year. One individual is excluded from this limit. The stop-loss amount for the individual is \$100,000. Provision for losses expected under this program are recorded based upon the Service's estimates of the aggregate liability for claims incurred and totaled \$88,478 for the year ended April 30, 2004. The amount of actual losses incurred could differ materially from the estimates reflected in these consolidated financial statements. Cumulative amounts estimated to be payable by the Service with respect to reported claims and incurred but not reported claims have been accrued as liabilities.

# Frontier Nursing Service, Inc. and Affiliates

Notes to Consolidated Financial Statements April 30, 2004

# Note 12: Temporarily and Permanently Restricted Net Assets

Temporarily restricted net assets are available for the following purposes:

Alice Adams Scholarship	S	10,593
Caroline Butler Atwood Memorial Nursing	4	10,393
Center Fund		252 005
Charitable Gift Annuity Fund		253,985 200,021
Education fund		
Elizabeth Canby Bradford DuPont Memorial		5,539,127
Fund		221.752
Endowment fund		321,752
Friends Endowment		221,935
Hyden Hospital in Patient Care Fund		75,770
Jacob and Gertrude Arronson Memorial		129,937
Scholarship Fund		0.006
Jesse Smith Noyes Endowment		8,886
Kate Ireland Education Fund		267.897
Kate Ireland Endowment Scholarship		497,361
Kate Ireland Women's Healthcare Center Fund		163,079
Kip Kelso Crist Fund		341,039
Kitty Ernst Endowment		576,576
Mardi Perry Scholarship Fund		28,117
Margaret L. Ferguson Memorial Scholarship		54,876
Fund		HIEROS BOLINGS
Nancy B. Taylor Memorial Scholarship Fund		17,489
Restricted donations		8,752
Shockey/Bulkey Memorial Fund		255,548
Social Services Fund		77,117
Susanne Preston Wilson Grandin Memorial		105,474
Scholarship Fund		
a substant and the subs		5,321
	\$	9,160,652

During the year ended April 30, 2004, net assets were released from donor restrictions by incurring expenses, satisfying the restricted purposes, in the amount of \$551,198.

Permanently restricted net assets include gifts, which require by donor restriction that the corpus be invested in perpetuity and only the income be made available for program operation in accordance with donor restrictions.

## Frontier Nursing Service, Inc. and Affiliates

Notes to Consolidated Financial Statements April 30, 2004

Permanently restricted net assets are summarized as follows:

Alice Adams Scholarship	\$	22,722	
Alice E. Whitman Memorial Library Fund		7.500	
Anne P. Whistler Endowment		2,200,000	
Beneficial interest in outside trust		1,775,897	
Caroline Butler Atwood Memorial Nursing			
Center Fund		344.573	
Elizabeth Canby Bradford DuPont Memorial			
Fund Control of the Fund		376,217	
Endowment fund		140,820	
Friends Endowment		34,732	
Hyden Hospital in Patient Care Fund		48,476	
Jacob and Gertrude Arronson Memorial			
Scholarship Fund		110,369	
James Waller Rodes Memorial Trust		69,957	
Kitty Ernst Endowment		47,701	
Mardi Perry Scholarship Fund		37,022	
Margaret L. Ferguson Memorial Scholarship			
Fund		36,951	
Nancy B. Taylor Memorial Scholarship Fund		99,072	
Nixon Billings Fund		105,155	
Shockey/Bulkey Memorial Fund		165,511	
Social Services Fund		41,925	
Susanne Preston Wilson Grandin Memorial			
Scholarship Fund		25,318	
Wigglesworth Chase Fund		50,000	
	Lucien	and restriction	
	\$	5,739,918	

### Note 13: Charity Care

In support of their mission, the MBHC and FNH voluntarily provide free care to patients who lack financial resources and are deemed to be medically indigent. Because MBHC and FNH do not pursue collection of amounts determined to qualify as charity care, they are not reported in net patient service revenue. In addition, MBHC and FNH provide services to other medically indigent patients under certain government-reimbursed public aid programs. Such programs pay providers amounts which are less than established charges for the services provided to the recipients and many times the payments are less than the cost of rendering the services provided.

# Frontier Nursing Service, Inc. and Affiliates Notes to Consolidated Financial Statements April 30, 2004

Uncompensated charges relating to these services for the year ended April 30, 2004, are as follows:

Charity allowances \$ 87,502 State Medicaid and other public aid programs \$ 772,586

\$ 860,088

In addition to uncompensated charges, the MBHC and FNH also commit significant time and resources to endeavors and critical services which meet otherwise unfilled community needs. Many of these activities are sponsored with the knowledge that they will not be self-supporting or financially viable. Such programs include health screening and assessments, prenatal education and care, hospice programs, transitional residence for individuals infected with HIV or suffering from AIDS, support for homeless residents, Meals on Wheels for elderly shut-ins, community educational services and various support groups.

### Note 14: Functional Expenses

The Service provides health care and educational services primarily to residents within its geographic area. Expenses related to providing these services for the year ended April 30, 2004, are as follows:

Health care and education services
General and administrative
Sundraising
Sundraising
Sundraising
Sundraising
Sundraising
Sundraising
Sundraising
Sundraising

### Note 15: Significant Estimates and Concentrations

Accounting principles generally accepted in the United States of America require disclosure of certain significant estimates and current vulnerabilities due to certain concentrations. Those matters include the following:

# Allowance for Net Patient Service Revenue Adjustments

Estimates of allowances for adjustments included in net patient service revenue are described in Notes 1 and 2.

#### Malpractice Claims

Estimates related to the accrual for medical malpractice claims are described in Notes 1 and 8.

## Frontier Nursing Service, Inc. and Affiliates

Notes to Consolidated Financial Statements
April 30, 2004

### Self-insurance Program

Estimates related to the provision for losses as a result of the Service's self-insurance program for hospitalization and medical coverage for its employees are described in Notes 1 and 11.

### General Litigation

During the fiscal year ended April 30, 2004, the Service has been named as defendant in various lawsuits. The management of the Service considers the claims to be without merit, but believes the possibility exists that the plaintiffs may be awarded damages. As of April 30, 2004, the Service cannot estimate potential damage amounts but believes the potential impact on the financial position and future results from operations of the Service will not be material.

### Note 16: Adjustment Applicable to Prior Years

During 2004, the Service determined that MBHC's patient account receivable, net of the allowances for contractuals and doubtful accounts, were overstated by \$1.053.900 due to computational errors. Accordingly, the beginning balance of net assets as of May 1, 2003, has been restated.

# **Report of Operations**

The following is a comparative analysis of services provided during the two fiscal years 2003 and 2004.

	FYE 2003	FYE 2004
Percent of occupancy	40.3	30.5
Patient days (total)  Medical/Surgical  Swing Bed	4,417 4,034 383	3,083 2,814 269
Admissions (total)  Medical/Surgical  Swing Beds  Average daily census  Average length of stay	1,358 1,318 40 11.1 3.1	1,023 998 25 10.1 3.0
Deaths	27	13
Observation	447	643
Emergency Room Visits	10,357	9,077
EKG procedures (total)		2,716
X-rays delicated telegraph appreciate		8,752
CT Scans	302	1,986
Ultrasound 9300 gailbulan bataub	221	1,112
Mammograms	46	243
Lab procedures (total)	149,226	121,299

	FYE 2003	FYE 2004
EEG procedures (total)	14	nuwollot or4
Physical Therapy	152	481
Respiratory Therapy (total)	36,990	32,104
Home Health visits (total)	15,882	13,138
Clinics (total)	19,919	12,038
Number of Volunteer Couriers	5	3

# Seventy-Ninth Year Totals - Selected Data

The figures below should not be understood as audit totals. They are reasonable close approximations as of the close of the fiscal year that ended April 30, 2004.

* Patients registered from the beginning in 1925 (including all clinics and emergency room)	528,656
* Maternity cases delivered	24,939
* Number of days of occupancy in FNS hospitals (including old Hyden Hospital, which opened during	EKG proc
June 1928, and Mary Breckinridge Hospital which opened during February 1975). Figures exclude	
newborns.	596,595
* Number of midwives graduated including CNEP	Ultrasonne
	1,581
* Number of CNEP students currently enrolled	174
* Number of CFNP students currently enrolled	44

# IN MEMORIAM

Samuel Ellison Neel, Arlington, Virginia, died June 21, 2004. Mr. Neel was the Co-Chair of the Mary Breckinridge Hospital campaign in the early 70's. Mr. Neel's wife, Mary, and two of his daughters served as couriers at the Frontier Nursing Service.

# In Memory of:

Shirley T. Ohl
Mrs. Harriet Nicol
Mr. Wilburn Nantz
Mrs. Sally M. Muncy
Samuel E. Neel
Miss Kate Ireland
Dorothea Chase
Mr. & Mrs. Theodore
Chase, Jr.

Bernice Washburn
Ms. Sharon Rolle
Dr. Huston Westover
Mr. & Mrs. M.W. Bouwensch
Liz Palethorp
Miss P. Anne Cundle
Mrs. Jane H. Hope
Miss Kate Ireland
Dr. & Mrs. David B. Stevens

# IN HONOR OF

the sing return this section to the Dove comment Children

Mary Neel
Dr. Susan P. Graham
Dr. Jon C. Kucera

# In Memoriam

If you wish to make a contribution to the Frontier Nursing Service in memory of a friend or loved one, please complete and return this section to the Development Office at FNS.

# **FNS and Subsidiary Corporations**

### FNS, Inc:

William W. Hall, Jr., President & CEO
Barb Gibson, Assistant to CEO
Nathan Lee, Vice-President of Finance
Kevin Couch, Assistant Controller
Beulah Couch, Director of Human Resources

# Frontier School of Midwifery & Family Nursing (FSMFN):

Dr. Susan Stone, President and Dean
Dr. Julie Marfell, Chair of Family Nursing/Executive
 Director of Frontier Nursing Clinics
Dr. Susan Ulrich, Chair of Midwifery & Women's Health
Dr. Carol Panicucci, Coordinator of Graduate Education

### Mary Breckinridge Healthcare, Inc:

Mallie Noble, Administrator
Linda Craft, Director of Nursing
Ferdousi Begum, Internist
Madeline Tan, Peditrician
Roy Varghese, Internist, Chief of Staff

### Frontier Nursing Healthcare, Inc.

Linda Ahrens, *FNP*Heidi Froemke, *FNP*, *Director of Rural Healthcare Clinics*Katherine Lauderdale, *FNP*Angela Mitchell, *FNP*Lynn Wilkening, *CNM* 

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Mr. Michael T. Rust, Louisville, KY

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### Form of Bequest

For the convenience of those who wish to remember the Frontier Nursing Service in their Wills, this form of bequest is suggested:

"I hereby give, devise and bequeath the sum of . . . dollars (or property properly described) to the Frontier Nursing Service, a corporation organized under the laws of the State of Kentucky.

## How Endowment Gifts May be Made

The following are some of the ways of making gifts to the Endowment Fund of the Frontier Nursing Service:

- 1. By specific gift under your Will you may leave outright a sum of money, specified secruities, real property, or a fraction or percentage of your estate.
- 2. By gift of residue under your Will you may leave all or a portion of your residuary estate to the Service.
- 3. By life insurance you may have life insurance made payable direct to the Service.

The principal of the gifts will carry the donor's name unless other instructions are given. The income will be used for the work of the Service in the manner judged best by its Trustees.

Contributions to the Frontier Nursing Service, Inc., are tax deductible under Section 501 (c) (3) of the Internal Revenue Code of 1954.

Gifts of stock should be sent to: Frontier Nursing Service Mr. John Foley, Treasurer Fifth Third Central Kentucky Trust 250 West Main Street, Suite 100 Lexington, KY 40507

## **URGENT NEEDS**

FNS has an urgent need for the items listed below and hopes that its friends will wish to contribute toward their purchase. We sometimes receive more gifts for a particular item than needed. In those instances, your gift will be applied toward another need.

Emergency Room:	
Basic Arrythmia Training Manuals	
(5@\$50.00)	250.00
ACLS Books (5 @ \$45.00 each)	225.00
Doppler	600.00
Digital Camera with Printer Dock	
(for sexual assault)	446.44
Home Health:	
Shampoo Head Boards (8 @ \$30.29 ea)	242.32
Blood Pressure Cuffs (6 @ \$24.94 ea)	149.64
Stethoscopes (6 @ \$39.40 ea)	236.40
Bath Scales (6 @ 132.43 ea)	794.58
Lab:	
Lab Coats (20)	350.00
Blood Bank Centrifuge	1,279.20
Medical/Surgical:	
Digital Camera and Printer	
(for wound documentation)	446.44
Hill Rom Relaxer Chair (5)	
(for patient rooms)	4,090.00
Nursing Administration:	
Pediatric ALS Training Model	650.00
Pediatric Model Replacement Bones	50.00
Respiratory Therapy:	
Hand Held Pulse Oximeter	629.00
	027.00

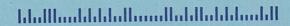
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Loose Item

Please send me more information about:

The FNS Courier and Volunteer programs.

Visiting and Touring the FNS.

Books and other literature concerning FNS.

Change of address.

As an interested friend, my subscription of \$5.00 a year is enclosed.

New 
Renewal

As a supporter, you will receive the Frontier Nursing Service Quarterly Bulletin unless you request otherwise.

Enclosed is my gift of \$ \_\_\_\_\_



Mary Breckinridge's home at Wendover. Historic Landmark – Restored in 1981. Name
Address
City State
Zip

Your Gift is Tax Deductible

Loose Item

### FRONTIER NURSING SERVICE, Inc.

Its motto:

"He shall gather the lambs with his arm and carry them in his bosom, and shall gently lead those that are with young."

Isaiah 40:11

Its object:

To safeguard the lives and health of mothers and children by providing and preparing trained nurse-midwives and nurse-practitioners for rural areas where there is inadequate medical service; to give skilled care to women in childbirth; to give nursing care to the sick of both sexes and all ages; to establish, own, maintain and operate hospitals, clinics, nursing centers, and educational programs for nurse-midwives and nurse-practitioners; to carry out preventive public health measures; to educate the rural population in the laws of health, and parents in baby hygiene and child care; to provide expert social service; to obtain medical, dental and surgical services for those who need them, at a price they can afford to pay; to promote the general welfare of the elderly and handicapped; to ameliorate economic conditions inimical to health and growth, and to conduct research toward that end; to do any and all other things in any way incident to, or connected with, these objects, and, in pursuit of them to cooperate with individuals and with organizations, private, state or federal; and through the fulfillment of these aims to advance the cause of health, social welfare and economic independence in rural districts with the help of their own leading citizens.

From the Articles of Incorporations of the Frontier Nursing Service. Article III as amended June 8, 1984