North Bay Regional Health Centre Financial Statements For the year ended March 31, 2022

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Independent Auditor's Report

To the Members and Board of Directors of the North Bay Regional Health Centre

Opinion

We have audited the financial statements of North Bay Regional Health Centre (the "Health Centre"), which comprise the statement of financial position as at March 31, 2022 and the statements of changes in net assets, remeasurment gains (losses), operations and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Health Centre as at March 31, 2022, and its results of operations and its cash flows for the year then ended in accordance with Canadian public sector accounting standards.

Basis for Opinion

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the Health Centre in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other Matters

The financial statements for the year ended March 31, 2021 were audited by another auditor who expressed an unmodified opinion on those financial statements on June 10, 2021.

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

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

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

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



Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements.

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Health Centre's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Health Centre's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Health Centre to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

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

BDO Canada LLP

Chartered Professional Accountants, Licensed Public Accountants

North Bay, Ontario June 27, 2022

North Bay Regional Health Centre Statement of Financial Position

March 31	2022	2021
Assets		
Current		
Cash and cash equivalents	\$ 44,407,821 \$	22,820,615
Accounts receivable (Note 4)	20,354,861	32,850,375
Inventories	3,409,024	3,354,265
Prepaid expenses	3,556,656	3,266,024
Current portion of long-term receivables (Note 6)	10,072,025	9,588,848
	81,800,387	71,880,127
Capital assets (Note 5)	463,332,423	470,591,156
Long-term receivables (Note 6)	295,043,970	305,115,995
· · · · · · · · · · · · · · · · · · ·	\$840,176,780 \$	847,587,278
Liabilities and Net Assets		
Current		
Accounts payable and accrued liabilities (Note 8)	\$ 65,893,178 \$	63,727,744
Deferred contributions	2,190,070	2,474,879
Current portion of capital lease obligations (Note 7)	262,276	239,944
Current portion of long-term obligations (Note 9)	12,780,209	12,127,575
	81,125,733	78,570,142
Capital lease obligations (Note 7)	894,703	1,133,756
Long-term obligations (Note 9)	353,410,762	365,268,041
Interest rate swaps (Note 9)	620,298	2,963,627
Deferred capital contributions (Note 10)	389,934,057	396,797,433
Post-employment benefit obligation (Note 11)	15,750,900	15,575,000
	841,736,453	860,307,999
Net Assets		
Internally restricted (Note 15)	1,756,000	1,756,000
Unrestricted	(2,695,375)	(11,513,094)
Accumulated remeasurement losses (Page 6)	(620,298)	(2,963,627)
	(1,559,673)	(12,720,721)
	\$840,176,780 \$	847,587,278

Provincial Funding - COVID-19 (Note 3) Commitments and Contingencies (Note 13)

In behalf of the Board:

Director

Director

North Bay Regional Health Centre Statement of Changes in Net Assets

For the year ended March 31	202	<u>.2</u>
	Internally Restricted Unrestricted Tot	<u>al</u>
Net assets, beginning of year	\$ 1,756,000 \$ (11,513,094) \$ (9,757,09	4)
Excess of revenues over expenses for the year	- 8,817,719 8,817,71	9_
Net assets, end of year	\$ 1,756,000 \$ (2,695,375) \$ (939,37	5)

			2021
	 Internally Restricted		Total
Net assets, beginning of year	\$ 1,756,000	\$ (30,216,603)\$	(28,460,603)
Excess of revenues over expenses for the year	-	18,703,509	18,703,509
Net assets, end of year	\$ 1,756,000	\$ (11,513,094)\$	(9,757,094)

North Bay Regional Health Centre Statement of Remeasurement Gains (Losses)

For the year ended March 31		2022	2021
	_	Total	Total
Accumulated remeasurement gains, beginning of year	\$	(2,963,627)\$	(6,910,808)
Unrealized gains attributable to interest rate swaps	_	2,343,329	3,947,181
Accumulated remeasurement losses, end of year	\$	(620,298)\$	(2,963,627)

North Bay Regional Health Centre Statement of Operations

For the year ended March 31	2022	2021
Revenues Provincial funding - base Provincial funding - pandemic and other (Note 3) Patient services and preferred accomodation Other Uniquely funded programs (Note 14) Amortization of deferred capital contributions - equipment (Note 10)	\$195,931,875 \$ 50,497,378 13,815,723 8,831,929 32,236,306 1,160,023 302,473,234	192,568,875 35,394,159 12,677,887 7,843,060 31,634,905 1,447,916 281,566,802
Expenses Salaries and wages Other supplies and services Benefit contributions Medical staff remuneration Drugs Medical and surgical supplies Amortization - equipment Bad debts Uniquely funded programs (Note 14)	122,926,014 45,001,610 40,830,276 22,684,393 11,459,601 9,121,164 5,554,828 76,921 32,236,306 289,891,113	122,263,590 41,033,981 37,408,551 21,883,029 10,209,164 8,692,507 5,689,584 552,985 31,634,905
Excess of revenues over expenses before the undernoted	12,582,121	2,198,506
Amortization of deferred capital contributions - buildings (Note 10) Amortization of buildings Provincial funding - interest on long-term obligations Interest on long-term obligations	10,168,536 (11,260,950) 17,183,909 (19,855,897)	10,099,156 (11,172,633) 17,691,876 (20,335,396)
Excess of revenues over expenses before item below	8,817,719	(1,518,491)
Provincial funding - working capital		20,222,000
Excess of revenues over expenses for the year	\$ 8,817,719 \$	18,703,509

North Bay Regional Health Centre Statement of Cash Flows

For the year ended March 31	2022	2021
Cash provided by (used in)		
Operating Excess of revenues over expenses for the year	\$ 8,817,719 \$	18,703,509
Items not involving cash Amortization of capital assets Amortization of deferred capital contributions	16,815,778 (11,328,559)	16,862,217 (11,547,072)
Post-employment benefits expense	1,405,600	1,083,000
	15,710,538	25,101,654
Changes in non-cash working capital balances Accounts receivable Inventories	12,495,514 (54,759)	(24,590,614) (407,910)
Prepaid expenses Accounts payable and accrued liabilities	(290,632) 2,165,434	(643,902) 15,133,492
Deferred contributions	(284,810)	(214,058)
	29,741,285	14,378,662
Investing Receipt of long-term receivables	9,588,848	9,332,743
Financing Deferred capital contributions received	4,465,183	3,160,577
Proceeds on long-term obligations Repayment of long-term obligations Payment of post-employment benefits	(11,421,366) (1,229,700)	9,288,000 (10,676,771) (1,078,600)
	(8,185,883)	693,206
Capital		
Purchase of capital assets	(9,557,044)	(13,125,996)
Increase in cash and cash equivalents during the year	21,587,206	11,278,615
Cash and cash equivalents, beginning of year	22,820,615	11,542,000
Cash and cash equivalents, end of year	\$ 44,407,821 \$	22,820,615

March 31, 2022

1. Significant Accounting Policies

Nature and Purpose of Organization

The North Bay Regional Health Centre (the "Health Centre") is incorporated without share capital under the laws of Ontario. Its principal activity is the provision of health care services in the District of Nipissing, Ontario and mental health services in Northeastern Ontario. The Health Centre is a registered charity under the Income Tax Act and, accordingly, is exempt from income taxes under section 149 of the Income Tax Act.

Basis of Presentation

The financial statements of the Health Centre have been prepared in accordance with Canadian public sector accounting standards ("PSAB") including the 4200 standards for government not-for-profit organizations.

Contributed Services

Consistent with other hospitals, there are a number of volunteers that contribute a significant amount of their time each year to the Health Centre to assist the Health Centre in carrying out certain charitable aspects of its service delivery activities. Because of the difficulty in determining the fair value, contributed services are not recognized in the financial statements.

Cash and

Cash Equivalents

Cash and cash equivalents consist of cash on hand, deposits at call with banks and other short-term highly liquid investments with original maturities of three months or less.

Inventories

Inventories are valued at the lower of average cost and net realizable value. Cost is determined on the first-in first-out basis and comprises all costs to purchase, convert and any other costs in bringing the inventories to their present location and condition.

March 31, 2022

1. Significant Accounting Policies (continued)

Revenue Recognition

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

Under the Health Insurance Act and Regulations thereto, the Health Centre is funded primarily by the Province of Ontario in accordance with budget arrangements established by Ontario Health, and Ontario Health North. Operating grants are recorded as revenue in the period to which they relate. Grants approved but not received at the end of an accounting period are accrued. Where a portion of a grant relates to a future period, it is deferred and recognized in the subsequent period.

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

Grants approved but not yet received at the end of an accounting period are accrued. Where a portion of a grant relates to a future period, it is deferred and recognized in that subsequent period.

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

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

Amortization of buildings is not funded by Ontario Health North and accordingly the amortization of buildings has been reflected as an undernoted item in the statement of operations with the corresponding realization of revenue for deferred contributions.

Patient and other ancillary income are recognized as revenue when the services are provided or when goods are sold.

March 31, 2022

1. Significant Accounting Policies (continued)

Capital Assets

Purchased capital assets are recorded at cost less accumulated amortization. Contributed capital assets are recorded at fair value at the date of contribution. Assets acquired under capital leases are amortized over the estimated life of the assets or over the lease term, as appropriate. Repairs and maintenance costs are charged to expenses. Betterments which extend the estimated life of an asset are capitalized. When a capital asset no longer contributes to the Health Centre's ability to provide services or the value of future economic benefits associated with the capital asset is less than its net book value, the carrying value of the capital asset is reduced to reflect the decline in the asset's value. Construction in progress is not amortized until construction is substantially complete and the assets are ready for use.

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

Land
Buildings, roads, sidewalks
and landscaping
Leasehold improvements
Furniture and Equipment
Equipment under capital lease
Computer hardware and
software

- no amortization

Various rates from 2% to 20%
Various rates from 10% to 20%
Various rates from 4% to 33%
Various rates from 20% to 25%

- Various rates from 7% to 25%

Assets to be disposed of would be separately presented in the statement of financial position and reported at the lower of the carrying amount or fair value less costs to sell, and are no longer amortized. The asset and liability of a disposed group classified as held for sale would be presented separately in the appropriate asset and liability sections of the statement of financial position.

Funding Adjustments

The Health Centre receives grants from the Ontario Health North and Ontario Health for specific services. Pursuant to the related agreements, if the Health Centre does not meet specified levels of activity, Ontario Health and Ontario Health North may be entitled to seek recoveries. Should any amounts become recoverable, the recoveries would be charged to operations in the period in which the recovery is determined to be payable. Should programs and activities incur a deficit, the Health Centre records any recoveries thereon when additional funding is received or receivable if the amounts can be reasonably estimated and collection is reasonably assured.

March 31, 2022

1. Significant Accounting Policies (continued)

Retirement and Post

- Employment Benefits

The Health Centre accrues it's obligations for employee benefit plans. The cost of non-pension post-retirement and post-employment benefits earned by employees is actuarially determined using the projected benefit method pro-rated on service and management's best estimate of retirement ages of employees and expected health care costs.

Actuarial gains (losses) on the accrued benefit obligation arise from changes in actuarial assumptions used to determine the accrued benefit obligation. The net accumulated actuarial gains (losses) are amortized over the average remaining service period of active employees. The average remaining service period of the active employees covered by the employee benefit plan is 11 years.

Past service costs arising from plan amendments are recognized immediately in the period the plan amendments occur.

The Health Centre is an employer member of the Health Care of Ontario Pension Plan (the "Plan"), which is a multi-employer, defined benefit pension plan. The Health Centre has adopted defined contribution plan accounting principles for this Plan because insufficient information is available to apply defined benefit plan accounting principles. The Health Centre records as pension expense the current service cost, amortization of past service costs and interest costs related to the future employer contributions to the Plan for past employee service.

Management Estimates

The preparation of financial statements in conformity with PSAB for Government NPOs requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities at the date of financial statements, and the reported amounts of revenues and expenses during the period. Actual results could differ from these estimates.

Accounts receivable and post-employment benefits are reported based on amounts expected to be recovered or incurred and reflect an appropriate allowance for unrecoverable amounts based on management's estimates. Amounts recorded for inventory obsolescence and amortization of capital assets are based on estimates of useful service life.

March 31, 2022

1. Significant Accounting Policies (continued)

In a prior year, the Health Centre recorded a long-term receivable and associated deferred grant from the MOH representing the present value of annual grants through to 2041 to fund the principal repayment component of the Health Centre's agreement with Plenary Health North Bay GP. In future years, the long-term receivable will be drawn down for the grant received from the Province annually. The deferred grant will also be drawn down, as the annual amount received is recognized in revenue.

These estimates are reviewed periodically, and, as adjustments become necessary, they are reported in earnings in the year which they become known.

Financial Instruments

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

Fair value

This category includes cash and cash equivalents which is initially recognized at cost and subsequently carried at fair value. Unrealized changes in fair value are recognized in the statement of remeasurement gains and losses until they are realized, when they are transferred to the statement of operations.

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

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

Amortized cost

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

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

March 31, 2022

1. Significant Accounting Policies (continued)

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

March 31, 2022

2. Financial Instrument Classification

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

	2022
	Amortized Fair Value Cost Total
Cash and cash equivalents Accounts receivable Accounts payable and accrued liabilities	\$44,407,821 \$ \$44,407,821 - 20,354,861 20,354,861 - 65,893,178 65,893,178
	\$44,407,821 \$86,248,039 \$130,655,860
	2021
	2021
	Amortized Fair Value Cost Total
Cash and cash equivalents Accounts receivable Accounts payable and accrued liabilities	\$ 22,820,615 \$ - \$ 22,820,615 - 32,850,375 32,850,375 - 63,727,744 63,727,744
	\$ 22,820,615 \$ 96,578,119 \$119,398,734

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

- Level 1 fair value measurements are those derived from quoted prices (unadjusted) in active markets for identical assets or liabilities using the last bid price;
- Level 2 fair value measurements are those derived from inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly (i.e. as prices) or indirectly (i.e. derived from prices); and
- Level 3 fair value measurements are those derived from valuation techniques that include inputs for the asset or liability that are not based on observable market data (unobservable inputs).

March 31, 2022

2. Financial Instrument Classification (continued)

			2022
	Level 1	Level 2	Level 3 Total
Cash and cash equivalents	\$ 44,407,821 \$	- \$	- \$ 44,407,821
			2021
	Level 1	Level 2	Level 3 Total
Cash and cash equivalents	\$ 22,820,615 \$	- \$	- \$ 22,820,615

There were no transfers between Level 1, 2 and Level 3 for the years ended March 31, 2022 and 2021.

March 31, 2022

3. Provincial funding - COVID-19

On March 11, 2020 the World Health Organization declared the COVID-19 outbreak a pandemic. This has resulted in significant financial, market and societal impacts in Canada and around the world.

From the declaration of the pandemic to the date of approval of these financial statements, the Health Centre implemented the following actions in relation to the COVID-19 pandemic:

- Periodic closures of certain facilities to the general public, with temporary facilities opened to deal with screening and testing activities; and
- Revisions to the delivery and number of services in order to create capacity for pandemic response and limit the potential for transmission within the Health Centre, including the cancellation of elective surgeries and the transfer of alternative level of care patients to other facilities.

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

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

Management's estimate of Ontario Health revenue for COVID-19 is based on the most recent guidance provided by Ontario Health and the impacts of COVID-19 on the Health Centre's operations, revenues and expenses. Management has analyzed the requirements and has provided an estimate for the supportable amounts based on the current available information. Any adjustments to Management's estimate of Ontario Health revenues will be reflected in the Health Centre's financial statements in the year of settlement.

March 31, 2022

3. Provincial Funding - COVID-19 (continued)

Details of the Ontario Health funding for COVID-19 recognized and included in Provincial funding - pandemic and other on the Statement of Operations are summarized below:

	2022	2021
Covid incremental operating expense reimbursement Assessment centre and testing volume based revenues Uninsured patient and lost revenue supports Temporary pandemic pay (staff and physicians) PSW temporary wage enhancement Additional bedded capacity Other project funding and incentives Broad based funding reconciliation	\$ 6,096,600 \$ 5,174,551 674,396 351,106 460,800 8,151,400 161,889	5,279,953 2,461,969 2,692,799 4,556,078 204,700 2,229,500 510,223 906,500
Total	\$ 21,070,742 \$	18,841,722

In addition to the above, the Health Centre has also recognized \$158,671 (2021 - \$267,116) in Ontario Health funding for COVID-19 related to capital expenditures, which has been recorded as an addition to deferred capital contributions during the year.

4.	Accounts Receivable	2022	2021
	Provincial funding Insurers and patients Other	\$ 13,740,398 1,804,323 4,810,140	\$ 29,347,476 1,958,065 1,544,834
		\$ 20,354,861	\$ 32,850,375

The reported balance of accounts receivable are net of an allowance for doubtful accounts of \$468,270 (2021 - \$482,720).

March 31, 2022

5.	Capital Assets		2022		2024
			2022		2021
		Cost	Accumulated Amortization	Cost	Accumulated Amortization
	Land Buildings, roads, sidewalks,	\$ 1,643,221	\$ -	\$ 1,643,221	\$ -
	and landscaping	532,968,981	122,962,909	530,102,687	112,243,142
	Leasehold improvements	1,589,170	980,251	2,738,190	2,013,825
	Furniture and equipment	57,908,601	34,886,916	52,845,992	32,159,379
	Computer hardware and software	43,433,831	15,381,305	42,051,412	12,374,000
		\$637,543,804	\$174,211,381	\$629,381,502	\$158,790,346
	Net book value		\$463,332,423		\$470,591,156

March 31, 2022

6. Long-Term Receivables

	2022	2021
Capital project funding (i) Municipal contributions (ii) Recruitment loans - acute care physicians (iii)	\$304,557,805 \$ 558,190	5 313,991,482 659,445 53,916
	305,115,995	314,704,843
Less: current portion of long-term receivables	10,072,025	9,588,848
Balance, end of year	\$ <u>295,043,970</u>	\$305,115,995

- (i) The Health Centre has recorded a long-term receivable relating to funding from Ontario Health relating to the construction of the new NBRHC facility. Ontario Health has committed to fund 92.83% of principal repayments relating to the construction obligation, which amounted to \$328,081,299 at March 31, 2022. The funding receivable is recorded at the net present value of Ontario Health grants to be received monthly, with the last monthly grant to be received in June 2040. The net present value is calculated using the effective interest rate method and a discount rate of 5.55%, which is the rate used for the related long-term obligation. Information concerning the long-term obligation relating to NBRHC facility is included in Note 9.
- (ii) Municipal contribution receivable are recorded at their present value using the effective interest rate method and a discount rate of 4.75%.
- (iii) Recruitment loans for acute care physicians are non-interest bearing and partially forgivable provided certain contractual conditions are met by the receipient physician.

March 31, 2022

7.	Obligations	under	capital	leases
<i>'</i> .	Obligations	unuei	Capitai	icases

		2022	2021
Capital lease for computer hardware bearing interest at 9.11%, expiring 2023, secured by assets with a net book value of \$82,731.	\$	81,391	5 125,340
Capital lease for computer hardware, bearing interest at 5.36%, expiring 2023, secured by assets with a net book value of \$22,804.		18,431	34,522
Capital lease for computer hardware, bearing interest at 9.26%, expiring 2023, secured by assets with a net book value of \$6,514.		6,771	9,316
Capital lease for computer hardware, bearing interest at 8.80%, expiring 2023, secured by assets with a net book value of \$3,235.		3,352	4,615
Capital lease for computer hardware, bearing interest at 8.26%, expiring 2023, secured by assets with a net book value of \$9,522.		10,131	12,689
Capital lease for clinical equipment, bearing interest at 7.86%, expiring 2024, secured by assets with a net book value of \$131,668	,	139,116	175,856
Capital lease for clinical equipment, bearing interest at 6.84%, expiring 2025, secured by assets with a net book value of \$289,134.	;	296,769	343,217
Capital lease for clinical equipment, bearing interest at 6.87%, expiring 2025, secured by assets with a net book value of \$562,841.	!	577,796	668,145
Capital lease for computer hardware, bearing interest at 6.62%, expiring 2026, secured by assets with a net book value of \$24,284.		23,222	
	1,	156,979	1,373,700
Less: current portion of obligations under capital lease		262,276	239,944
	\$ <u> </u>	894,703	5 1,133,756

Future minimum lease payments are as follows:

2023	\$ 336,116
2024	261,896
2025	227,840
2026	55,892
2027 and thereafter	 1,354
	883,098
Add: salvage value of assets	444,455
Less: interest included in lease payments	 170,574
Present value of minimum lease payments	\$ 1,156,979

March 31, 2022

8. Accounts Payable and Accrued Liabilities

	2022	2021
Accounts payable and accrued liabilities: - Province of Ontario - Other funding agencies - Trade payables	\$ 22,698,679 \$ 1,109,939 16,390,215	19,157,215 1,165,297 18,646,953
Payroll accruals: - Salaries and wages - Employee deductions payable - Vacation pay and other entitlements	13,001,198 3,461,274 9,231,873 \$ 65,893,178 \$	11,817,060 3,643,845 9,297,374 63,727,744

March 31, 2022

9.	Long-term Obligations	2022	2021
	Long term obligation uncocured payable in monthly		
	Long-term obligation, unsecured, payable in monthly instalments of \$2,389,333, bearing interest at 5.55%, final payment due June 2040.	\$328,903,032 \$	339,017,169
	Long-term obligation, secured over related assets, payable in monthly instalments of \$20,903, bearing interest at 4.00%, due in 2036.	2,768,172	2,905,296
	Long-term obligation, payable in monthly instalments of \$66,655, bearing interest at 3.39%, due in 2029.	14,013,391	14,328,693
	Long-term obligation, payable in monthly instalments of \$107,146, bearing interest at 3.68% and due in 2041.	20,027,893	20,566,238
	Available \$3,000,000 credit facility, unsecured, principal repayable on each draw in equal annual instalments over a period of six years, bearing interest at prime.	478,483	578,220
		366,190,971	377,395,616
	Less amounts due within one year included in current liabilities	12,780,209	12,127,575
		\$ <u>353,410,762</u> \$	365,268,041

The Health Centre has entered into interest rate derivative agreements to manage the volatility of interest rates. The Health Centre has converted floating rate debt for fixed rate debt. The fair value of the interest rate swaps is a liability of \$620,298 (2021 - \$2,963,627) and has been determined using Level 3 of the fair value hierarchy. The related derivate agreements are in place until the maturity of the debt.

Scheduled principal repayments for the next five years and thereafter are as follows:

2023	\$ 12,780,209
2024	12,488,510
2025	13,185,398
2026	13,871,422
2027	14,631,145
Thereafter	299,234,287
merearter	\$ 366,190,971

March 31, 2022

10. Deferred Capital Contributions

Deferred capital contributions represent the unamortized and unspent balances of grants, donations and contributions received for capital asset acquisitions. The details of the continuity of these funds are as follows:

	2022	2021
Deferred contributions related to buildings and equipment:		
Balance, beginning of year Contributions received during the year Less: Amounts amortized to revenue	\$396,797,433 \$ 4,465,183 (11,328,559)	405,183,928 3,160,577 (11,547,072)
Balance, end of year	\$389,934,057 \$	396,797,433

March 31, 2022

11. Post-Employment Benefits Liability

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

			2	2021	
Accrued employee future benefits obligations	\$1	5,750,900	\$	15,575,000	
	_	2022		2021	
Current year benefit cost Interest on accrued benefit obligation Amortized actuarial losses	\$	727,000 749,600 (71,000)	\$	678,300 683,800 (279,100)	
Total expense	\$	1,405,600	\$	1,083,000	

The Health Centre paid \$1,229,700 (2021 - \$1,078,600) in benefit payments during the year. Above amounts exclude pension contributions to the Health Centre's pension plan, a multi-employer plan, described below.

Retirement Benefits

Healthcare of Ontario Pension Plan ("HOOPP")

HOOPP provides pension services to 419,627 members and approximately 624 employers. Substantially all of the full-time employees and some of the part-time employees are members of HOOPP. The plan is a multi-employer plan and therefore the Health Centre's contributions are accounted for as if the plan were a defined contribution plan with the Health Centre's contributions being expensed in the period they come due. Each year, an independent actuary determines the funding status of HOOPP by comparing the actuarial value of invested assets to the estimated present value of all pension benefits that members have earned to date. The results of the most recent valuation as at December 31, 2021 disclosed a surplus of \$28,512 million. The results of this valuation disclosed total actuarial liabilities and pension obligations of \$188,641 million in respect of benefits accrued for service with actuarial assets at that date of \$217,153 million. Because HOOPP is a multi-employer plan, any pension plan surpluses or deficits are a joint responsibility of Ontario member organizations and their employees. As a result, the organization does not recognize any share of the HOOPP surplus or deficit. Contributions by the Health Centre to the plan during the year amounted to \$11,661,740 (2021 - \$11,294,113).

March 31, 2022

11. Post-Employment Benefits Liability (continued)

Post-Employment Benefits

The Health Centre extends post-employment life insurance, health and dental benefits to certain employee groups subsequent to their retirement. The Health Centre recognizes these benefits as they are earned during the employees' tenure of service. The related benefit liability was determined by an actuarial valuation study completed with a date of April 12, 2022, and estimated rates for March 31, 2022.

The major actuarial assumptions employed for the valuations are as follows:

a) Discount rate

The present value as at March 31, 2022 of the future benefits was determined using a discount rate of 4.59% (2021 - 4.59%).

b) Health Centre and other medical

Health Centre and other medical costs were assumed to increase at 6.0% per annum in 2022 (2021 - 6.0%).

c) Dental costs

Dental costs were assumed to increase at 3.0% per annum in 2022 (2021 - 3.0%).

12. North Bay Regional Health Centre Foundation

The Health Centre has an economic interest in the North Bay Regional Health Centre Foundation ("the Foundation"). The Foundation was incorporated by Letters Patent under the Ontario Corporations Act on September 30, 1999 as a not-for-profit organization and is a registered charity under the Income Tax Act. Its primary goal is to provide ongoing resources for patient-focused care, education and research. Donations and grants received from the Foundation during the year were \$1,498,555 (2021 - \$949,642).

The Foundation is not controlled by the Health Centre and therefore is not consolidated in these financial statements.

March 31, 2022

13. Commitments and Contingencies

a. Lifecycle and maintenance costs

In February 2007, the former North Bay General Hospital ("NBGH") signed an agreement with Plenary Health North Bay GP ("Plenary") to build, maintain and finance the NBRHC facility. Plenary commenced facility construction in March 2007 with substantial completion in June 2010.

Upon completion of construction, annual payments of approximately \$6,800,000 for lifecycle and facility maintenance costs commenced for a period of 30 years, with the final payment due in May 2041. A portion of the payment is subject to indexing for increases in cost of living, labour, insuance and energy and utilities.

Ontario Health has approved an annual grant to fund the lifecycle component of these payments, with funding for Ontario Health's share of the facility maintenance costs incorporated into the Health Centre's operating grants.

b. HealthCare Insurance Reciprocal of Canada

The Health Centre is a member of the HealthCentre Insurance Reciprocal of Canada ("HIROC"). HIROC is a pooling of the liability insurance risk of its members. All members pay annual deposit premiums which are actuarially determined and are subject to further assessment for losses, if any, experienced by the pool for the years in which they are members. As at March 31, 2022, no assessments have been received by the Health Centre.

c. Legal and Litigation Matters

The Health Centre is involved in certain legal matters and litigation, the outcomes of which are not presently determinable. The loss, if any, from these contingencies will be accounted for in the periods in which the matters are resolved. With the exception of specific matters noted below, management is of the opinion that these matters are mitigated by adequate insurance coverage.

Prior to the current year, the NBGH was named as a co-defendant in a statement of claim. The action is claiming damages in excess of the insurance coverage that the NBGH held at the time of the incident. It is the Health Centre's position and that of its legal counsel that the likelihood of loss, if any, is not determinable at this time and the Health Centre has not recorded a liability for any amount relating to this claim. Damages and legal costs, if any, relating to this matter would be recognized in the year they become determinable.

Prior to the current year the NBGH was named as a co-defendant in a statement of claim where the date of occurrence was prior to the current insurance policy period. There is a dispute between the previous and current insurers as to which policy coverage extends to this claim. It is the Health Centre's position and that of its legal counsel that the likelihood of loss that is not covered by insurance, if any, is not determinable at this time and the Health Centre has not recorded a liability for any amount relating to this claim. Damages and legal costs, if any, relating to this matter would be recognized in the year they become determinable.

March 31, 2022

13. Commitments and Contingencies (continued)

d. Employment matters

During the normal course of business, the Health Centre is involved in certain employment related negotiations and has recorded accruals based on management's estimate of potential settlement amounts where these amounts are reasonably determinable. Where amounts are not reasonably determinable, costs, if any, relating to these matters would be recognized when known.

e. Letters of credit

As at March 31, 2022, \$Nil (2021 - \$Nil) of letters of credit have been issued with respect to performance contracts. These arrangements are secured by a general security agreement.

f. Meditech Expanse Program

During the fiscal year the Health Centre entered into a membership agreement along with twenty-two other Hospitals in Northeastern Ontario to incorporate and establish a new organization to provide Health Information System (HIS) support services to the member Hospitals. At the date of financial statement preparation, this new organization has been incorporated under letters patent dated October 2021 and is in the process of recruiting staff and putting processes and protocols in place for the coming years to allow it to provide HIS support services to the member Hospitals on a fee for service basis. As part of its membership agreement, the Health Centre is to receive credit towards future HIS support services provided by the new organization to the Health Centre to reflect and recognize certain costs and efforts the Health Centre has incurred over the past 3 years developing and implementing the Meditech Expanse program to provide more effective and efficient patient care. This agreement will provide the new organization the ability to use the technology created by the Health Centre to roll out and support all Hospitals under the membership agreement. The amount of credit is anticipated to be \$5,567,829 and this will be formalized by way of legal agreements between the two parties in fiscal 2023. The costs to develop Meditech Expanse are recognized in the Health Centre's financial statements in Note 5 under Computer hardware and software.

March 31, 2022

14. Uniquely funded programs

(a) Provincial funded programs:

	2022			2021	
Revenue:					
CACC Bundled Care Community Mental Health Substance Abuse Community Support Services POMS Home Care / HCCSS MTLC Other Programs	\$	2,679,594 46,604 7,596,744 3,025,623 383,444 27,683 131,500 459,340 35,175	\$	2,703,570 53,960 9,120,588 2,701,003 491,930 28,089 - 471,000 35,175	
		14,385,707		15,605,315	
Expenses:					
CACC Bundled Care Community Mental Health Substance Abuse Community Support Services POMS Home Care / HCCSS MTLC Other Programs	\$	2,679,594 46,604 7,596,744 3,025,623 383,444 27,683 131,500 459,340 35,175	\$	2,703,570 53,960 9,089,864 2,701,003 491,930 28,089 - 501,724 35,175	
Excess of revenue over expense	\$		\$	<u> </u>	
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March 31, 2022

14. Uniquely funded progams continued

(b) Other funded programs:

(b) other randed programs.	2022			2021	
Revenue:					
Land Ambulance (i) Community Paramedicine (i) Wordplay Grants - ECE Grants - Autism	\$	8,668,424 600,817 1,782,162 6,740,290 58,906	\$	8,676,026 - 1,722,430 5,499,112 132,022	
		17,850,599		16,029,590	
Expenses:					
Land Ambulance (i) Community Paramedicine (i) Wordplay Grants - ECE Grants - Autism	\$	8,668,424 600,817 1,782,162 6,740,290 58,906	\$	8,676,026 1,722,430 5,499,112 132,022 16,029,590	
Excess of revenue over expense	\$	-	\$	-	

(i) During fiscal 2021/2022, the District of Nipissing Social Services Administration Board made the decision to bring Land Ambulance and Community Paramedicine services in-house and will no longer be contracting this work to the North Bay Regional Health Centre. The change in service delivery is planned to be complete by December 31, 2022 and will result in the Land Ambulance and Community Paramedicine revenues and expenses being reduced in 2022/2023 and eliminated in 2023/2024.

15. Internally Restricted Net Assets

Included in net assets is an amount restricted from the sale of certain properties, net of demolition costs in the amount of \$1,756,000 (2021 - \$1,756,000). The internally restricted funds will be used to finance future capital investments for which no source of funds are available.

16. Comparative Figures

Certain financial statement balances have been reclassified to conform with the current year presentation.

March 31, 2022

17. Financial Instrument Risk Management

Credit Risk

Credit risk is the risk of financial loss to the Health Centre if a debtor fails to make payments of interest and principal when due. The Health Centre is exposed to this risk relating to its cash and cash equivalents and accounts receivable. The Health Centre holds its cash accounts with federally regulated chartered banks who are insured by the Canadian Deposit Insurance Corporation. In the event of default, the Health Centre's cash accounts are insured up \$100,000 (2021 - \$100,000).

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

The Health Centre measures its exposure to credit risk based on how long the amounts have been outstanding. An impairment allowance is set up based on the Health Centre's historical experience regarding collections. The amounts outstanding at year end were as follows:

	_								2022
			_			Pa	st dı	ıe	
	_	Total		Current		1-30 days		31-60 days	61+ days
Provincial funding Patients Other	\$	13,740,398 2,272,593 4,810,140	\$	13,740,398 143,220 4,810,140	\$	873,354 -	\$	- \$ 709,527 -	546,492 -
Gross receivables	\$	20,823,131	\$	18,693,758		873,354		709,527	546,492
Less: impairment allowances		(468,270)		(2,780)		(10,356)		(10,553)	(444,581)
Net receivables	\$	20,354,861	\$	18,690,978	\$	862,998	\$	698,974 \$	101,911
	_								2021
			_	Past due					
	_	Total		Current		1-30 days		31-60 days	61+ days
Provincial funding Patients Other	\$	29,347,476 2,440,785 1,544,834	\$	29,347,476 44,706 1,544,834	\$	1,091,263 -	\$	- \$ 736,530 -	568,286 -
Gross receivables	\$	33,333,095	\$	30,937,016		1,091,263		736,530	568,286
Less: impairment allowances	_	(482,720)		(3,754)		(12,940)		(11,093)	(454,933)
Net receivables	\$	32,850,375	\$	30,933,262	\$	1,078,323	\$	725,437 \$	113,353

March 31, 2022

17. Financial Instrument Risk Management (continued)

The amounts aged greater than 90 days owing from patients that have not had a corresponding impairment allowance setup against them are considered collectible based on the Health Centre's past experience. Management has reviewed the individual balances and based on the credit quality of the debtors and their past history of payment.

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

Market risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate as a result of market factors. Market factors include three types of risk: interest rate risk, currency risk and equity risk. The Health Centre is not exposed to significant currency or equity risk as it does not transact materially in foreign currency or hold equity financial instruments.

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

Interest rate risk

Interest rate risk is the potential for financial loss caused by fluctuations in fair value or future cash flows of financial instruments because of changes in market interest rates.

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

Liquidity risk

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

March 31, 2022

17. Financial Instrument Risk Management (continued)

	2022			
	Within 6 months	6 months to 1 year	1-5 years	>5 years
Accounts payable	\$ 65,893,178 \$	- \$	- \$	<u>-</u>
	2021			
	Within 6 months	6 months to 1 year	1-5 years	>5 years
Accounts payable	\$ 63,727,744 \$	- \$	- \$	-

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