Financial Statements (Expressed in thousands of dollars)

FIRST NATIONS HEALTH AUTHORITY

Year ended March 31, 2015



KPMG LLP

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INDEPENDENT AUDITORS' REPORT

To the Board of Directors of First Nations Health Authority

We have audited the accompanying financial statements of First Nations Health Authority, which comprise the statement of financial position as at March 31, 2015, the statements of operations, changes in net assets and cash flows for the year then ended, and notes comprising a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, 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.

Auditor's Responsibility

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

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on our judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, we consider internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

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



Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of First Nations Health Authority as at March 31, 2015, and its results of operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

Report on Other Legal and Regulatory Requirements

As required by the Society Act (British Columbia), we report that, in our opinion, the accounting policies applied in preparing and presenting the financial statements in accordance with standards for not-for-profit organizations have been applied on a basis with that of the preceding year.

Chartered Accountants

LPMG LLP

June 25, 2015 Vancouver, Canada

Statement of Financial Position (Expressed in thousands of dollars)

March 31, 2015, with comparative information for 2014

	2015	2014
Assets		
Current assets:		
Cash	\$ 69,230	\$ 43,131
Short-term investments (note 4)	24,268	15,040
Accounts receivable	3,338	4,399
Prepaid expenses	1,224	894
	98,060	63,464
Security deposits	141	88
Property and equipment (note 5)	5,277	4,316
	\$ 103,478	\$ 67,868
Liabilities		
Current liabilities:		
Accounts payable and accrued liabilities	\$ 25,201	\$ 20,259
Deferred contributions (note 6)	4,807	8,812
	30,008	29,071
Net Assets		
Invested in property and equipment	5,277	4,316
Internally restricted	48,224	15,617
Unrestricted	19,969	18,864
	73,470	38,797

Commitments (note 7)

See accompanying notes and schedules to the financial statements.

Approved on behalf of the Board:

dyai vale	Director	Director

Statement of Operations (Expressed in thousands of dollars)

Year ended March 31, 2015, with comparative information for 2014

		2015		2014
Revenue:				
Health Canada	\$	413,771	\$	248,781
Province of British Columbia	·	12,353	·	8,545
Interest and miscellaneous income (note 4)		2,325		1,606
Health Authorities of British Columbia		660		458
First Nations Information Governance Centre ("FNIGC")		491		6
University of Northern British Columbia		-		13
		429,600		259,409
Expenses:				
Operations:				
Corporate operations		31,378		21,834
		31,378		21,834
Governance and First Nations Engagement (note 9):				
First Nations Health Council		1,333		1,206
First Nations Health Directors Association		919		989
First Nations Engagement		1,057		1,568
Regional operations		2,440		838
		5,749		4,601
Program services:				
Health benefits		137,699		96,298
Direct community services funding		168,481		80,772
Health services and programs		51,620		26,039
		357,800		203,109
		394,927		229,544
Excess of revenues over expenses	\$	34,673	\$	29,865

See accompanying notes and schedules to the financial statements.

Statement of Changes in Net Assets (Expressed in thousands of dollars)

Year ended March 31, 2015, with comparative information for 2014

	Invested in property and equipment		nternally estricted	Unre	estricted	Total
Balance, March 31, 2014	\$	4,316	\$ 15,617	\$	18,864	\$ 38,797
Purchases of property and equipment		3,092	-		(3,092)	-
Health Transformation Reserve		-	-		-	-
Medical Services Plan Project Board		-	3,963		(3,963)	-
Health Actions Initiatives		-	(2)		2	-
CCFA - Federal Tobacco Control Strategy Funding		-	390		(390)	-
CCFA - Prescription Drug Abuse Funding		-	256		(256)	-
Health Service Enhancement Reserve		-	13,000		(13,000)	-
Infrastructure Reserve		-	15,000		(15,000)	-
Excess (deficiency) of revenues over expenses		(2,131)	-		36,804	34,673
Balance, March 31, 2015	\$	5,277	\$ 48,224	\$	19,969	\$ 73,470

See accompanying notes and schedules to the financial statements.

Statement of Cash Flows (Expressed in thousands of dollars)

Year ended March 31, 2015, with comparative information for 2014

673 \$	29,865
131	1,066
804	30,931
061	(2,128)
330)	(822)
(53)	(33)
	17,324
-	(7,190)
419	38,082
092)	(2,708)
313)	(10,222)
085	14,006
320)	1,076
099	39,158
131	3,973
230 \$	43,131
- \$	1,344
	131 804 061 330) (53) 942 005) 419 092) 313) 085 320) 099

See accompanying notes and schedules to financial the statements.

Notes to Financial Statements (Tabular amounts are expressed in thousands of dollars, unless otherwise stated)

Year ended March 31, 2015

1. Organization:

First Nations Heath Authority ("FNHA" or the "Authority") was incorporated under the Society Act (British Columbia) on March 6, 2009 and is a not-for-profit organization for financial reporting purposes. FNHA is a non-taxable entity under the Income Tax Act.

FNHA is mandated by the Transformative Change Accord: First Nations Health Plan 2006, the Tripartite First Nations Health Plan 2007, the BC Tripartite Framework Agreement on First Nation Health Governance 2011, and resolutions at the annual Gathering Wisdom events.

FNHA has a broad mandate to improve health services for British Columbia ("BC") First Nations through collaboration and partnership with the Province of BC and the Government of Canada. First Nations Health Authority plans, designs, manages, and funds the delivery of First Nations health programs and services in British Columbia.

During Fiscal 2014, FNHA assumed responsibility from the federal government for the design and delivery of First Nations health programs and services in two phases. The First Nations Health Benefits program (formerly the Non-Insured Health Benefits Program) was transferred on July 2, 2013 and on October 1, 2013, FNHA assumed the responsibility for all regionally operated programs and services, assets and personnel.

2. Economic dependence:

The operations of the Authority are dependent on continued funding from federal and provincial government departments.

3. Significant accounting policies:

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations (Accounting Standards for NPO's) and reflect the following significant accounting policies:

(a) Financial instruments:

The Authority initially measures its financial assets and financial liabilities at fair value when the Authority becomes a party to the contractual provisions of the financial instrument. Subsequently, investments in equity instruments quoted in an active market are measured at fair value and all financial instruments are measured at amortized cost.

Transaction costs related to financial instruments measured at fair value are expensed as incurred. Transaction costs related to the other financial instruments are added to the carrying value of the asset or netted against the carrying value of the liability and are then recognized over the expected life of the instrument using the straight-line method. Any premium or discount related to an instrument measured at amortized cost is amortized over the expected life of the item using the straight-line method and recognized in the statement of operations as interest income or expense.

Notes to Financial Statements (Tabular amounts are expressed in thousands of dollars, unless otherwise stated)

Year ended March 31, 2015

3. Significant accounting policies (continued):

(a) Financial instruments (continued):

With respect to financial assets measured at amortized cost, the Authority recognizes in the statement of operations an impairment loss, if any, when it determines that a significant adverse change has occurred during the period in the expected timing or amount of future cash flows. When the extent of impairment decreases and the decrease can be related to an event occurring after the impairment was recognized, the impairment loss is reversed to the extent of the impairment, not exceeding the initial carrying value.

(b) Short-term investments:

Investments consist of short-term funds and guaranteed investment certificates ("GICs") with an original term to maturity of between 90 days and one year.

(c) Property and equipment:

Property and equipment received as contributions are recognized at fair value. Property and equipment acquired by FNHA are recorded at cost.

Amortization is provided over the estimated useful lives of the assets on the following basis:

Asset	Basis	Rate
	0	
Computer equipment	Straight-line	3 years
Medical equipment	Straight-line	8 years
Vehicles	Straight-line	5 years
Leasehold improvements	Straight-line	Over the term of the lease
Furniture, fixtures, and equipment	Straight-line	5 years

Systems development work in progress is not amortized until the asset is available for productive use.

The carrying value of an item of property and equipment is tested for recoverability whenever events or changes in circumstances indicate that the carrying amount may not be recoverable. An impairment loss is recognized when the carrying amount is not recoverable and exceeds its fair value. No impairment losses have been identified by the Authority for the year ended March 31, 2015.

(d) Revenue recognition:

Contributions are recognized as revenue under the deferral method. Restricted operating contributions are deferred and recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable, if the amount to be received can be reasonably estimated and collection is reasonably assured. Interest and miscellaneous income is recognized when earned and collection is reasonably assured.

Notes to Financial Statements (Tabular amounts are expressed in thousands of dollars, unless otherwise stated)

Year ended March 31, 2015

3. Significant accounting policies (continued):

(e) Allocation of expenses:

Expenditures are recorded on an accrual basis and non-core operating expenditures are charged directly to the respective program that the activity benefits.

The non-core operating programs also incur general support expenses relating to human resources, information technology, and finance and administrative support based on time spent related to these programs. Premises rent and operating expenses, meeting room and equipment usage, when applicable, are allocated based on actual usage and costs. The basis of all allocations is reviewed annually during budget preparation and may be revised according to changing requirements.

Additional disclosures are included in note 9.

(f) Use of estimates:

The preparation of financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the amounts of revenues and expenses for the reporting period. Actual results could differ from those estimates. Significant estimates include the useful lives of property and equipment, and accrued liabilities.

(g) Employee benefits:

Defined contribution plan accounting is applied to multi-employer defined benefit plans and, accordingly, contributions are expensed when payable.

(h) Comparative information:

Certain comparative information has been reclassified to conform with this year's current financial statement presentation.

4. Investments:

	2015	2014
Short-term funds GICs	\$ 1 24,267	\$ 4,936 10,104
	\$ 24,268	\$ 15,040

Available funds are invested in one year GICs with rates of return ranging from 1.75% to 1.40%. In Fiscal 2015, interest earned on GICs was \$259 (2014 - \$122).

Notes to Financial Statements (Tabular amounts are expressed in thousands of dollars, unless otherwise stated)

Year ended March 31, 2015

5. Property and equipment:

March 31, 2015	Cost	 umulated ortization	ı	Net book value
Computer equipment Medical equipment Vehicles Leasehold improvements Furniture, fixtures and equipment	\$ 7,904 2,026 2,734 455 144	\$ 3,974 1,544 2,051 304 113	\$	3,930 482 683 151 31
	\$ 13,263	\$ 7,986	\$	5,277

March 31, 2014	Cost	 umulated ortization	Net book value
Computer equipment Medical equipment Vehicles Leasehold improvements Furniture, fixtures and equipment	\$ 5,578 2,026 2,169 305 144	\$ 2,261 1,399 1,905 237 104	\$ 3,317 627 264 68 40
	\$ 10,222	\$ 5,906	\$ 4,316

Notes to Financial Statements (Tabular amounts are expressed in thousands of dollars, unless otherwise stated)

Year ended March 31, 2015

6. Deferred contributions:

Deferred contributions include funding received in advance of expenditures being made in respect of the following:

							Prov	ince of						
				Health		Health		British	i	FNIGC				
		ealth nada		anada CCFA unding	Implem	Canada nentation Funding		lumbia Canada foway)	Health S	egional Survey IREES		Other		2015
Deferred contributions, beginning of year	\$		¢		¢	7.397	¢	639	\$	686	¢	90	¢	8,812
Contributions received	φ	-	φ	9,363	Ψ	- 1,391	φ	-	Ψ	20	Ψ	323	φ	9,706
Contributions receivable		-		162		-		1,280		548		-		1,990
Less contributions payable		-		(895)		-		-		-		-		(895)
Less amounts recognized as revenue		-		(8,630)		(3,708)		(1,873)		(491)		(104)		(14,806)
Deferred contributions, end of year	\$	-	\$	-	\$	3,689	\$	46	\$	763	\$	309	\$	4,807

	Health Canada	Health Canada CCFA Funding	Health Canada Implementation Funding	Province of British Columbia (Canada Health Infoway)	FNIGC Regional Health Survey & FNREES	Other	2014
Deferred contributions, beginning of year Contributions received	\$ 2,654 717	\$ - 5.714	\$ 12,972	\$ - 900	\$ 248 37	\$ 128 186	\$ 16,002 7,554
Contributions received Contributions receivable	-	257	-	900	404	17	678
Less contributions payable Less amounts recognized as revenue	(3) (3,368)	(998) (4,973)	(5,575)	(261)	(3)	(15) (226)	(1,016) (14,406)
Deferred contributions, end of year	\$ -	\$ -	\$ 7,397	\$ 639	\$ 686	\$ 90	\$ 8,812

Notes to Financial Statements

(Tabular amounts are expressed in thousands of dollars, unless otherwise stated)

Year ended March 31, 2015

7. Commitments:

The Authority leases premises and equipment with future minimum lease payments, exclusive of operating costs, for each of the next five fiscal years as follows:

2016	\$	3,819
2017	Ψ	3,078
2018		1,695
2019		715
2020		451
	\$	9,758

8. Financial risks:

The following are the key risks that the Authority is monitoring which may impact operating results and liquidity:

(a) Interest rate risk:

The Authority's short-term investments are exposed to interest rate risk as the value of the financial instruments will fluctuate due to changes in interest rates and the volatility of these rates. The Authority does not use derivative instruments to reduce its exposure to interest rate risk.

(b) Credit risk:

The Authority is exposed to credit risk in connection with its cash, short-term investments, accounts receivable, and security deposits.

The Authority manages its credit risk by depositing cash and investing in short-term instruments with a reputable commercial bank. Exposure to credit risk in accounts receivable is also reduced as the majority of monies outstanding are due from governments.

9. Allocation of expenses:

Human resources, information technology, premises rent and operating, meeting room and equipment usage, administrative support, and finance expenditures of \$205 (2014 - \$191) have been allocated to non-core operating programs, consistent with federal and provincial restricted funding requirements, as follows:

	2015	2014
First Nations Health Council First Nations Health Directors Association	\$ 121 84	\$ 109 82
	\$ 205	\$ 191

Notes to Financial Statements (Tabular amounts are expressed in thousands of dollars, unless otherwise stated)

Year ended March 31, 2015

10. Pension plan:

Effective January 1, 2013, FNHA and its employees were accepted as members and commenced contributing to the Municipal Pension Plan (the "Plan"), a jointly trusted pension plan. The Board of Trustees, representing the Plan members and employers, is responsible for overseeing the management of the Plan, including investment of the assets and administration of benefits. The Plan is a multi-employer defined benefit plan. The Plan has approximately 182,000 active members and 75,000 retired members. Active members include approximately 383 contributors from FNHA.

Every three years, an actuarial valuation is performed to assess the financial position of the Plan. The most recent valuation as at December 31, 2012 indicated an unfunded liability of \$1,370 million for basic pension benefits. The next valuation will be as at December 31, 2015 with results available in 2016. Defined contribution plan accounting is applied to the Plan as the Plan exposes the participating entities to actuarial risks associated with the current and former employees of other entities, with the result that there is no consistent and reliable basis for allocating the obligation, Plan assets and cost to individual entities participating in the Plan. The Authority paid \$2,126 for employer contributions to the Plan in fiscal 2015 (2014 - \$899).

Schedule of Revenues and Expenses by Category of Net Assets (Expressed in thousands of dollars)

Year ended March 31, 2015, with comparative information for 2014

		20)15				2014	
Unrestr Health Ca and		Unrestricted Province of British Columbia	Restricted	Total	Unrestricted Health Canada and other	Unrestricted Province of British Columbia	Restricted	Total
Revenue:								
	1,433	\$ -	\$ 12,338	\$ 413,771	\$ 234,865	\$ -	\$ 13,916	\$ 248,781
Province of British Columbia	-	10,480	1,873	12,353	_	8,284	261	8,545
Interest and miscellaneous income	2,224	-	101	2,325	1,487	-	119	1,606
Health Authorities	657	-	3	660	364	-	94	458
First Nations Information Governance Centre	-	-	491	491	3	-	3	6
University of Northern British Columbia	-	-	-	-	-	-	13	13
404	4,314	10,480	14,806	429,600	236,719	8,284	14,406	259,409
Expenses:								
Operations:								
Corporate operations 29	9,211	187	1,980	31,378	18,449	237	3,148	21,834
29	9,211	187	1,980	31,378	18,449	237	3,148	21,834
Governance and Community Engagement:	•		•	,	,		,	,
First Nations Health Council 1	1,333	-	-	1,333	1,206	-	-	1,206
First Nations Health Directors Association	919	-	-	919	903	-	86	989
First Nations Engagement 1	1,057	-	-	1,057	1,562	-	6	1,568
Regional Engagement 2	2,437	-	3	2,440	838	-	-	838
5	5,746	-	3	5,749	4,509	-	92	4,601
Program services:	•			,	,			,
Health benefits 135	5,251	-	2,448	137,699	94,774	-	1,524	96,298
Direct community services funding 163	3,226	4,222	1,033	168,481	77,866	1,656	1,250	80,772
Health services and Programs 38	3,489	6,073	7,058	51,620	16,038	4,120	5,881	26,039
336	5,966	10,295	10,539	357,800	188,678	5,776	8,655	203,109
371	1,923	10,482	12,522	394,927	211,636	6,013	11,895	229,544
Excess (deficiency) of revenue over expenses 32	2,391	(2)	2,284	34,673	25,083	2,271	2,511	29,865
Capital assets purchased	808	-	2,284	3,092	197	-	2,511	2,708
Total \$ 31	1,583	\$ (2)	\$ -	\$ 31,581	\$ 24,886	\$ 2,271	\$ -	\$ 27,157

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Schedule 1

Schedule of Expenses by Program (Expressed in thousands of dollars)

Year ended March 31, 2015

	Contribution agreements	Health benefits	Salaries and benefits	General histrative	Pro	ofessional fees	Community meetings and travel	Travel and meetings	Honoraria	Total
Expenses:										
Operations:										
Corporate Operations	\$ 37	\$ -	\$ 12,228	\$ 12,623	\$	5,720	\$ 23	\$ 533	\$ 214	\$ 31,378
	37	-	12,228	12,623		5,720	23	533	214	31,378
Governance and First Nations Engagement:										
First Nations Health Council	_	_	258	183		7	58	243	584	1,333
First Nations Health Directors Association	-	_	301	130		64	115	182	127	919
First Nations Engagement	_	_	-	22		157	840	36	2	1,057
Regional Operations	-	-	2,000	76		8	27	329	-	2,440
	-	-	2,559	411		236	1,040	790	713	5,749
Program services:										
Health benefits	1,560	128,435	4,256	200		3,028	16	204	-	137,699
Direct community services funding	168,481	-	-	-		· -	-	-	-	168,481
Health services and Programs	21,033	-	16,610	2,950		9,260	337	1,430	-	51,620
	191,074	128,435	20,866	3,150		12,288	353	1,634	-	357,800
Total expenses	\$ 191,111	\$128,435	\$ 35,653	\$ 16,184	\$	18,244	\$ 1,416	\$ 2,957	\$ 927	\$ 394,927

Schedule 2

Schedule of Expenses by Program (continued) (Expressed in thousands of dollars)

Year ended March 31, 2014

	Contribution agreements	Health benefits	Salaries and benefits	Gene administrat		Prof	fessional fees	n	mmunity neetings nd travel	-	Travel and meetings	Honorar	а	Total
Expenses:														
Operations:														
Corporate Operations	\$ -	\$ -	\$ 9,761	\$ 7,6	551	\$	3,950	\$	26	\$	249	\$ 19	7 \$	21,834
	-	-	9,761	7,6	351		3,950		26		249	19	7	21,834
Governance and First Nations Engagement:														
First Nations Health Council	-	_	286	1	14		61		12		177	55	6	1,206
First Nations Health Directors Association	-	_	367	1	42		117		81		139	14		989
First Nations Engagement	-	_	-	1	14		136		1,295		23		_	1,568
Regional Operations	-	-	676		32		1		-		129		-	838
	-	-	1,329	2	102		315		1,388		468	69	9	4,601
Program services:														
Health benefits	705	91,760	1,625		99		2,043		6		60		-	96,298
Direct community services funding	80,772	-	· -		-		· -		-		-		-	80,772
Health services and Programs	8,872	1	9,007	g	37		6,199		469		554		-	26,039
	90,349	91,761	10,632	1,0)36		8,242		475		614		-	203,109
Total expenses	\$ 90,349	\$ 91,761	\$ 21,722	\$ 9,0	089	\$	12,507	\$	1,889	\$	1,331	\$ 89	6 \$	229,544

Schedule 2

Expenses by Region (Expressed in thousands of dollars)

Schedule 3

Year ended March 31, 2015, with comparative information for 2014

	North ¹	Interior	Vancouver Island	Fraser ¹	Vancouver Coastal	2015 Total ²
	NOILII	intenoi	Islanu	гіабеі	Coasiai	TOtal
Direct community services funding	\$ 54,369	\$ 40,028	\$ 39,456	\$ 14,097	\$ 16,733	\$ 164,683
Health services and programs	11,861	6,175	3,170	1,176	2,123	24,505
Health benefits ²	1,675	1,075	568	279	1,024	4,621
First Nations engagement	329	281	211	131	107	1,059
First National Health Council	87	125	179	101	102	594
First Nation Health Directors	50	63	43	32	41	229
Regional operations	375	407	522	254	256	1,814
Corporate operations	47	24	16	1	4	92
Total	\$ 68,793	\$ 48,178	\$ 44,165	\$ 16,071	\$ 20,390	\$ 197,597

			Vancouver		Vancouver	2014
	North ¹	Interior	Island	Fraser ¹	Coastal	Total ²
Direct community services funding	\$ 27,325	\$ 16,885	\$ 19,421	\$ 5,625	\$ 8,171	\$ 77,427
Health services and programs	5,757	2,514	1,047	360	1,133	10,811
Health benefits ²	882	499	186	113	444	2,124
First Nations engagement	163	221	96	97	58	635
First National Health Council	99	112	125	104	75	515
First Nation Health Directors	37	67	33	40	49	226
Regional operations	167	102	109	91	82	551
Corporate operations	101	41	8	1	83	234
Total	\$ 34,531	\$ 20,441	\$ 21,025	\$ 6,431	\$ 10,095	\$ 92,523

Note 1: First Nation Health Council costs for the North and Fraser regions include a portion of the costs for Chair and Vice Chair related to work done in the region.

Note 2: Health Benefits regional costs represent direct payments to providers for vision, patient travel and mental health based on their band location and not where the services were provided.

The majority of Health Benefit costs are presently not tracked at regional levels, this includes the current buyback arrangement with Health Canada.