

West Virginia Single Audit



For the Year Ended June 30, 2024

STATE OF WEST VIRGINIA SINGLE AUDIT

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Report of Independent Auditors on Internal Control Over Financial Reporting and on Compliance and Other Matters Based on an Audit of Financial Statements Performed in Accordance with *Government Auditing Standards*

The Honorable Jim Justice, Governor
of the State of West Virginia

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States (*Government Auditing Standards*), the financial statements of governmental activities, the business-type activities, the aggregate discretely presented component units, each major fund, and the aggregate remaining fund information of the State of West Virginia as of and for the year ended June 30, 2024, and the related notes to the financial statements, which collectively comprise the State of West Virginia’s basic financial statements (collectively referred to as the “basic financial statements”), and have issued our report thereon dated December 13, 2024. Our report includes a reference to other auditors who audited the financial statements of certain entities within the governmental activities, the business-type activities, the aggregate discretely presented component units, certain major funds, and the aggregate remaining fund information as described in our report on the State of West Virginia’s financial statements. This report does not include the results of the other auditors’ testing of internal control over financial reporting or compliance and other matters that are reported on separately by those auditors. The financial statements of the West Virginia Investment Management Board was not audited in accordance with *Government Auditing Standards*, and the West Virginia Housing Development Fund along with the following discretely presented component units of the West Virginia Higher Education Fund discretely presented component unit: Big Green Scholarship Foundation, Inc.; Blue Ridge Community & Technical College Foundation, Inc.; Bluefield State College Foundation, Inc.; Concord University Foundation, Inc.; Fairmont State Foundation, Inc.; The Glenville State College Foundation, Inc.; The Marshall University Foundation, Inc.; New River Community and Technical College Foundation, Inc.; Provident – Marshall Properties, LLC; Southern West Virginia Community College Foundation, Inc.; West Liberty University Foundation, Inc.; West Virginia Northern Community College Foundation, Inc.; West Virginia School of Osteopathic Medicine Foundation, Inc.; West Virginia State University Foundation, Inc.; and WVU at Parkersburg Foundation, Inc. were audited by other auditors and were not audited in accordance with *Government Auditing Standards*, and accordingly this report does not include reporting on internal control over financial reporting or compliance and other matters associated with these entities or that are reported on separately by those auditors who audited the financial statements of these entities.

Report on Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered State of West Virginia’s internal control over financial reporting (internal control) as a basis for designing audit procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of State of West Virginia’s internal control. Accordingly, we do not express an opinion on the effectiveness of the State of West Virginia’s internal control.



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A *deficiency in internal control* exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct misstatements on a timely basis. A *material weakness* is a deficiency, or a combination of deficiencies, in internal control, such that there is a reasonable possibility that a material misstatement of the entity's financial statements will not be prevented, or detected and corrected on a timely basis. A *significant deficiency* is a deficiency, or a combination of deficiencies, in internal control that is less severe than a material weakness, yet important enough to merit attention by those charged with governance.

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. However, material weaknesses or significant deficiencies may exist that were not identified.

Report on Compliance and Other Matters

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

Purpose of this Report

The purpose of this report is solely to describe the scope of our testing of internal control and compliance and the results of that testing, and not to provide an opinion on the effectiveness of the entity's internal control or on compliance. This report is an integral part of an audit performed in accordance with *Government Auditing Standards* in considering the entity's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

Ernst & Young LLP

December 13, 2024



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Report of Independent Auditors on Compliance for Each Major Federal Program; Report on Internal Control Over Compliance; and Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

The Honorable Patrick Morrisey, Governor
of the State of West Virginia

Report of Independent Auditors on Compliance for Each Major Federal Program

Qualified and Unmodified Opinions

We have audited the State of West Virginia’s compliance with the types of compliance requirements identified as subject to audit in the U.S. Office of Management and Budget (OMB) *Compliance Supplement* that could have a direct and material effect on each of the State of West Virginia’s major federal programs for the year ended June 30, 2024. The State of West Virginia’s major federal programs are identified in the summary of auditor’s results section of the accompanying schedule of findings and questioned costs.

Qualified Opinion on Supplemental Nutrition Assistance Program (SNAP Cluster), Child Nutrition Cluster, Unemployment Insurance, COVID-19 Coronavirus State and Local Fiscal Recovery Funds, Epidemiology and Laboratory Capacity for Infectious Diseases (ELC), Foster Care Title IV-E, and Research and Development Cluster

In our opinion, except for the noncompliance described in the Basis for Qualified and Unmodified Opinions section of our report, the State of West Virginia complied, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on Supplemental Nutrition Assistance Program (SNAP Cluster), Child Nutrition Cluster, Unemployment Insurance, COVID-19 Coronavirus State and Local Fiscal Recovery Funds, Epidemiology and Laboratory Capacity for Infectious Diseases (ELC), Foster Care Title IV-E and Research and Development Cluster for the year ended June 30, 2024.

Unmodified Opinion on Each of the Other Major Federal Programs

In our opinion, the State of West Virginia complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its other major federal programs that are identified in the summary of auditor’s results section of the accompanying schedule of findings and questioned costs for the year ended June 30, 2024.

Basis for Qualified and Unmodified Opinions

We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States of America (GAAS); the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States (*Government Auditing Standards*); and the audit requirements of Title 2 U.S. *Code of Federal Regulations* Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance). Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor’s Responsibilities for the Audit of Compliance section of our report.



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We are required to be independent of the State of West Virginia and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion on compliance for each major federal program. Our audit does not provide a legal determination of the State of West Virginia’s compliance with the compliance requirements referred to above.

Other Matter-Federal Expenditures Not Included in the Compliance Audit

The State of West Virginia’s basic financial statements include the operations of the West Virginia Housing Development Fund (a proprietary fund), and the following discretely presented component units; the West Virginia University Research Corporation, the Marshall University Research Corporation, the West Virginia State University Research and Development Corporation, West Virginia Drinking Water Treatment Revolving Loan Fund, West Virginia Water Pollution Control Revolving Fund, and the West Virginia Water Development Authority which expended federal awards that are not included in the State of West Virginia’s schedule of expenditures of federal awards during the year ended June 30, 2024. Our compliance audit, described below in the Opinion on Each Major Federal Program” Section does not include the operations of this proprietary fund and these discretely presented component units, because they engaged other auditors to perform an audit of compliance.

Matters Giving Rise to Qualified Opinion on Supplemental Nutrition Assistance Program (SNAP Cluster), Child Nutrition Cluster, Unemployment Insurance, COVID-19 Coronavirus State and Local Fiscal Recovery Funds, Epidemiology and Laboratory Capacity for Infectious Diseases (ELC), Foster Care Title IV-E, and Research and Development Cluster

As described in the accompanying schedule of findings and questioned costs, the State of West Virginia did not comply with requirements regarding the following:

Finding Number	Assistance Listing Number	Program or Cluster Name	Compliance Requirement
2024-006	10.551/10.561/ COVID-19 10.561	Supplemental Nutrition Assistance Program (SNAP Cluster)	Special Tests and Provisions – ADP System for SNAP
2024-007	10.553/10.555/ 10.556/10.559/ 10.582	Child Nutrition Cluster	Reporting
2024-014	17.225	Unemployment Insurance	Reporting
2024-025	93.658	Foster Care Title IV-E	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility and Special Tests and Provisions – Payment Rate Setting and Application
2024-033	93.323/COVID-19 93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	Activities Allowed or Unallowed and Allowable Costs/Cost Principles
2024-034	93.323/COVID-19 93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	Cash Management



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Finding Number	Assistance Listing Number	Program or Cluster Name	Compliance Requirement
2024-035	COVID-19 21.027	COVID-19 Coronavirus State and Local Fiscal Recovery Funds	Matching, Level of Effort and Earmarking and Reporting
2024-053	Various	Research and Development Cluster	Procurement, Suspension and Debarment
2024-054	Various	Research and Development Cluster	Subrecipient Monitoring

Compliance with such requirements is necessary, in our opinion, for the State of West Virginia to comply with the requirements applicable to those programs.

Responsibilities of Management for Compliance

Management is responsible for compliance with the requirements referred to above and for the design, implementation, and maintenance of effective internal control over compliance with the requirements of laws, statutes, regulations, rules, and provisions of contracts or grant agreements applicable to the State of West Virginia’s federal programs.

Auditor’s Responsibilities for the Audit for Compliance

Our objectives are to obtain reasonable assurance about whether material noncompliance with the compliance requirements referred to above occurred, whether due to fraud or error, and express an opinion on the State of West Virginia’s compliance based on our audit. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance will always detect material noncompliance when it exists. The risk of not detecting material noncompliance resulting from fraud is higher than for that resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Noncompliance with the compliance requirements referred to above is considered material, if there is a substantial likelihood that, individually or in the aggregate, it would influence the judgment made by a reasonable user of the report on compliance about the State of West Virginia’s compliance with the requirements of each major federal program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, and the Uniform Guidance, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material noncompliance, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the State of West Virginia’s compliance with the compliance requirements referred to above and performing such other procedures as we considered necessary in the circumstances.
- Obtain an understanding of the State of West Virginia’s internal control over compliance relevant to the audit in order to design audit procedures that are appropriate in the circumstances and to test and report on internal control over compliance in accordance with the Uniform Guidance, but not for the purpose of expressing an opinion on the effectiveness of the State of West Virginia’s internal control over compliance. Accordingly, no such opinion is expressed.



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We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and any significant deficiencies and material weaknesses in internal control over compliance that we identified during the audit.

Other Matters

The results of our auditing procedures disclosed other instances of noncompliance, which are required to be reported in accordance with the Uniform Guidance and which are described in the accompanying schedule of findings and questioned costs as items:

Finding Number	Assistance Listing Number	Program or Cluster Name	Compliance Requirement
2024-004	Various 97.036	Research and Development Cluster Disaster Grants – Public Assistance (Presidentially Declared Disasters)	Other
2024-008	14.228/COVID-19 14.228	Community Development Block Grants/State’s Program and Non-Entitlement Grants in Hawaii	Reporting
2024-009	15.252	Abandoned Mine Land Reclamation (AMLR)	Reporting
2024-010	15.252	Abandoned Mine Land Reclamation (AMLR)	Subrecipient Monitoring
2024-013	17.225	Unemployment Insurance	Special Tests and Provisions – UI Program Integrity-Overpayments
2024-016	20.205	Highway Planning and Construction	Special Tests and Provisions – Contractor Recoveries
2024-017	COVID-19 84.425U, W	COVID-19 Education Stabilization Fund	Reporting
2024-018	COVID-19 84.425D, R, U, V, W	COVID-19 Education Stabilization Fund	Reporting
2024-020	93.558	Temporary Assistance for Needy Families	Special Tests and Provisions – Penalty for Refusal to Work
2024-021	93.558	Temporary Assistance for Needy Families	Special Tests and Provisions – Income Eligibility and Verification System
2024-022	93.558	Temporary Assistance for Needy Families	Activities Allowed or Unallowed and Allowable Costs/Cost Principles
2024-023	93.558	Temporary Assistance for Needy Families	Special Tests and Provisions – Penalty for Failure to Comply with Work Verification Plan



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Finding Number	Assistance Listing Number	Program or Cluster Name	Compliance Requirement
2024-024	93.575/COVID-19 93.575/93.596	Child Care and Development Fund (CCDF Cluster)	Special Tests and Provisions – Provider Eligibility for ARP Act Stabilization Funds
2024-026	93.658	Foster Care Title IV-E	Reporting
2024-027	93.558	Temporary Assistance for Needy Families	Reporting
	93.788	Opioid STR	
2024-028	93.788	Opioid STR	Subrecipient Monitoring
2024-029	93.659	Adoption Assistance	Activities Allowed or Unallowed, Allowable Costs/Cost Principles and Eligibility
2024-031	93.323/ COVID-19 93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	Subrecipient Monitoring
2024-032	93.323/ COVID-19 93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	Equipment and Real Property Management
2024-036	84.010	Title I Grants to Local Educational Agencies	Eligibility
2024-039	84.063/84.268	Student Financial Assistance Cluster	Cash Management and Reporting
2024-040	84.007/84.033/ 84.038/84.063/ 84.268/84.379	Student Financial Assistance Cluster	Special Tests and Provisions – Gramm-Leach-Bliley Act - Student Information Security
2024-046	84.038	Student Financial Assistance Cluster	Special Tests and Provisions – Perkins Loan Recordkeeping and Record Retention
2024-047	84.063/84.268	Student Financial Assistance Cluster	Special Tests and Provisions – Enrollment Reporting
2024-048	Various	Research and Development Cluster	Activities Allowed or Unallowed and Allowable Costs/Cost Principles
2024-049	Various	Research and Development Cluster	Activities Allowed or Unallowed and Allowable Costs/Cost Principles
2024-052	Various	Research and Development Cluster	Procurement, Suspension and Debarment
2024-055	Various	Research and Development Cluster	Special Tests and Provisions
2024-056	Various	Research and Development Cluster	Period of Performance
2024-057	93.568	Low-Income Home Energy Assistance	Reporting
2024-058	93.568	Low-Income Home Energy Assistance	Subrecipient Monitoring



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Our opinion on each major federal program is not modified with respect to these matters.

We performed audit procedures with respect to the Student Financial Assistance Cluster major federal program related to compliance requirements in Special Tests and Provisions N11, Gramm-Leach Bliley Act – Student Information Security as outlined in the OMB Compliance Supplement for the year ended June 30, 2024. We determined whether the State of West Virginia has designated a “Qualified Individual,” as described in the OMB Compliance Supplement, to be responsible for implementing and monitoring the information security program in accordance with 16 CFR 314.4(a). We determined whether the State of West Virginia has a written information security program and that the written information security program documents the seven minimum elements required by 16 CFR 314.4(a)-(g). Our audit procedures did not evaluate whether the designated Qualified Individual is competent to oversee the implementation and monitoring of the information security program nor whether the Qualified Individual possessed the adequate authority to carry out those duties. Our audit procedures also did not determine whether the written information security program sufficiently and completely addressed the seven minimum elements required by 16 CFR 314.4(a)-(g). Our opinion on the Student Financial Assistance Cluster major federal program is not modified with respect to this matter.

Government Auditing Standards requires the auditor to perform limited procedures on the State of West Virginia’s response to the noncompliance findings identified in our audit described in the accompanying schedule of findings and questioned costs. The State of West Virginia’s response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

Report on Internal Control Over Compliance

Our consideration of internal control over compliance was for the limited purpose described in the Auditor’s Responsibilities for the Audit of Compliance section above and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies in internal control over compliance, and therefore, material weaknesses or significant deficiencies may exist that were not identified. However, as discussed below, we did identify certain deficiencies in internal control over compliance that we consider to be material weaknesses and significant deficiencies.

A deficiency in internal control over compliance exists when the design or operation of a control over compliance does not allow management or employees, in the normal course of performing their assigned functions, to prevent, or detect and correct, noncompliance with a type of compliance requirement of a federal program on a timely basis. *A material weakness in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance, such that there is a reasonable possibility that material noncompliance with a type of compliance requirement of a federal program will not be prevented, or detected and corrected, on a timely basis. We consider the following deficiencies in internal control over compliance described in the accompanying schedule of findings and questioned costs as listed below to be material weaknesses.



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Finding Number	Assistance Listing Number	Program or Cluster Name	Compliance Requirement
2024-001	10.551/10.561/ COVID-19 10.561	Supplemental Nutrition Assistance Program (SNAP Cluster)	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility, Matching, Level of Effort and Earmarking, Period of Performance, Reporting, and Special Tests and Provisions
	93.558	Temporary Assistance for Needy Families	
	93.568	Low-Income Home Energy Assistance	
	93.575/COVID-19 93.575/93.596	Child Care and Development Fund (CCDF Cluster)	
	93.767	Children’s Health Insurance Program	
	93.775/93.777/ 93.778	Medicaid Cluster	
	93.788	Opioid STR	
2024-002	93.658	Foster Care Title IV-E	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility, and Special Tests and Provisions
	93.659	Adoption Assistance	
	93.767	Children’s Health Insurance Program	
	93.775/93.777/ 93.778	Medicaid Cluster	
2024-003	93.767	Children’s Health Insurance Program	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility, and Special Tests and Provisions
	93.775/93.777/ 93.778	Medicaid Cluster	
2024-004	Various	Research and Development Cluster	Other
	97.036	Disaster Grants – Public Assistance (Presidentially Declared Disasters)	
2023-005	93.558	Temporary Assistance for Needy Families	Subrecipient Monitoring
	93.575/COVID-19 93.575/93.596	Child Care and Development Fund (CCDF Cluster)	
	93.788	Opioid STR	



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Finding Number	Assistance Listing Number	Program or Cluster Name	Compliance Requirement
2024-007	10.553/10.555/ 10.556/10.559/ 10.582	Child Nutrition Cluster	Reporting
2024-008	14.228/COVID-19 14.228	Community Development Block Grants/State's Program and Non-Entitlement Grants in Hawaii	Reporting
2024-009	15.252	Abandoned Mine Land Reclamation (AMLR)	Reporting
2024-010	15.252	Abandoned Mine Land Reclamation (AMLR)	Subrecipient Monitoring
2024-011	17.225	Unemployment Insurance	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility, Reporting and Special Tests and Provisions
2024-012	17.225	Unemployment Insurance	Matching, Level of Effort, and Earmarking and Reporting
2024-014	17.225	Unemployment Insurance	Reporting
2024-015	17.225	Unemployment Insurance	Special Tests and Provisions – UI Benefit Payments
2024-017	COVID-19 84.425U, W	COVID-19 Education Stabilization Fund	Reporting
2024-018	COVID-19 84.425D, R, U, V, W	COVID-19 Education Stabilization Fund	Reporting
2024-019	93.558	Temporary Assistance for Needy Families	Special Tests and Provisions – Child Support Non-Cooperation, Penalty for Refusal to Work, and Adult Custodial Parent of Child Under Six When Child Care Not Available
2024-021	93.558	Temporary Assistance for Needy Families	Special Tests and Provisions – Income Eligibility and Verification System
2024-024	93.575/COVID-19 93.575/93.596	Child Care and Development Fund (CCDF Cluster)	Special Tests and Provisions – Provider Eligibility for ARP Act Stabilization Funds
2024-027	93.558 93.788	Temporary Assistance for Needy Families Opioid STR	Reporting
2024-031	93.323/COVID-19 93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	Subrecipient Monitoring
2024-032	93.323/ COVID-19 93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	Equipment and Real Property Management



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Finding Number	Assistance Listing Number	Program or Cluster Name	Compliance Requirement
2024-033	93.323/ COVID-19 93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	Activities Allowed or Unallowed and Allowable Costs/Cost Principles
2024-034	93.323/ COVID-19 93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	Cash Management
2024-035	COVID-19 21.027	COVID-19 Coronavirus State and Local Fiscal Recover Funds	Matching, Level of Effort and Earmarking and Reporting
2024-037	84.010	Title I Grants to Local Educational Agencies	Matching, Level of Effort and Earmarking
2024-038	10.553/10.555/ 10.556/10.559/ 10.582	Child Nutrition Cluster	Reporting
2024-039	84.063/84.268	Student Financial Assistance Cluster	Cash Management and Reporting
2024-040	84.007/84.033/ 84.038/84.063/ 84.268/84.379	Student Financial Assistance Cluster	Special Tests and Provisions - Gramm-Leach-Bliley Act - Student Information Security
2024-042	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364	Student Financial Assistance Cluster	Eligibility, Reporting and Special Tests and Provisions
2024-043	84.007/84.033/ 84.063/84.268	Student Financial Assistance Cluster	Special Tests and Provisions – Return of Title IV Funds
2024-045	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364	Student Financial Assistance Cluster	Special Tests and Provisions – Using a Servicer to Deliver Title IV Credit Balances to a Card or Other Access Device
2024-046	84.038	Student Financial Assistance Cluster	Special Tests and Provisions – Perkins Loan Recordkeeping and Record Retention
2024-047	84.063/84.268	Student Financial Assistance Cluster	Special Tests and Provisions – Enrollment Reporting
2024-048	Various	Research and Development Cluster	Activities Allowed or Unallowed and Allowable Costs/Cost Principles
2024-049	Various	Research and Development Cluster	Activities Allowed or Unallowed and Allowable Costs/Cost Principles
2024-050	Various	Research and Development Cluster	Cash Management



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Finding Number	Assistance Listing Number	Program or Cluster Name	Compliance Requirement
2024-051	Various	Research and Development Cluster	Cash Management
2024-052	Various	Research and Development Cluster	Procurement, Suspension and Debarment
2024-053	Various	Research and Development Cluster	Procurement, Suspension and Debarment
2024-054	Various	Research and Development Cluster	Subrecipient Monitoring
2024-055	Various	Research and Development Cluster	Special Tests and Provisions
2024-057	93.568	Low-Income Home Energy Assistance	Reporting
2024-058	93.568	Low-Income Home Energy Assistance	Subrecipient Monitoring

A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance. We consider the following deficiencies in internal control over compliance described in the accompanying schedule of findings and questioned costs as listed below to be significant deficiencies.

Finding Number	Assistance Listing Number	Program or Cluster Name	Compliance Requirement
2024-013	17.225	Unemployment Insurance	Special Tests and Provisions – UI Program Integrity – Benefit Payments
2024-016	20.205	Highway Planning and Construction	Special Tests and Provisions – Contractor Recoveries
2024-022	93.558	Temporary Assistance for Needy Families	Activities Allowed or Unallowed and Allowable Costs/Cost Principles
2024-026	93.658	Foster Care Title IV-E	Reporting
2024-028	93.788	Opioid STR	Subrecipient Monitoring
2024-030	97.036/COVID-19 97.036	Disaster Grants – Public Assistance (Presidentially Declared Disasters)	Activities Allowed or Unallowed and Allowable Costs/Cost Principles
2024-036	84.010	Title I Grants to Local Educational Agencies	Eligibility
2024-041	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364	Student Financial Assistance Cluster	Special Tests and Provisions – Verification



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Finding Number	Assistance Listing Number	Program or Cluster Name	Compliance Requirement
2024-044	84.007/84.033/ 84.063/84.268	Student Financial Assistance Cluster	Cash Management
2024-056	Various	Research and Development Cluster	Period of Performance

Our audit was not designed for the purpose of expressing an opinion on the effectiveness of internal control over compliance. Accordingly, no such opinion is expressed.

Government Auditing Standards requires the auditor to perform limited procedures on the State of West Virginia’s response to the internal control over compliance findings identified in our audit described in the accompanying schedule of findings and questioned costs. The State of West Virginia’s response was not subjected to the other auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance. Accordingly, this report is not suitable for any other purpose.

Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance

We have audited the financial statements of the governmental activities, the business-type activities, the aggregate discretely presented component units, each major fund, and the aggregate remaining fund information of the State of West Virginia as of and for the year ended June 30, 2024, and the related notes to the financial statements, which collectively comprise the State of West Virginia’s basic financial statements. We have not performed any procedures with respect to the audited financial statements that collectively comprise the basic financial statements subsequent to December 13, 2024. We have issued our report thereon dated December 13, 2024, which contained unmodified opinions on those financial statements. Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the basic financial statements. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain other procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards is fairly stated, in all material respects, in relation to the basic financial statements as a whole.

February 28, 2025

***SCHEDULE OF
EXPENDITURES
OF FEDERAL
AWARDS***

STATE OF WEST VIRGINIA
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FEDERAL GRANTOR LISTING
FOR THE YEAR ENDING JUNE 30, 2024

FEDERAL ASSISTANCE LISTING/ GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	FEDERAL PROGRAM EXPENDITURES	AMOUNT PASSED THROUGH TO SUBRECIPIENTS	TOTAL FEDERAL EXPENDITURES
<u>DEPARTMENT OF AGRICULTURE</u>				
10.001	AGRICULTURAL RESEARCH BASIC AND APPLIED RESEARCH	\$89,934	\$0	\$89,934
10.025	PLANT AND ANIMAL DISEASE, PEST CONTROL, AND ANIMAL CARE	\$1,590,771	\$0	\$1,590,771
10.028	WILDLIFE SERVICES	\$47,330	\$0	\$47,330
10.069	CONSERVATION RESERVE PROGRAM	\$76,656	\$0	\$76,656
10.153	MARKET NEWS	\$7,556	\$0	\$7,556
10.156	FEDERAL - STATE MARKETING IMPROVEMENT PROGRAM	\$56,278	\$0	\$56,278
10.170	SPECIALTY CROP BLOCK GRANT PROGRAM - FARM BILL	\$123,830	\$375,875	\$499,705
10.182	FOOD BANK NETWORK	\$6,020,858	\$1,560,003	\$7,580,861
10.185	LOCAL FOOD FOR SCHOOLS COOPERATIVE AGREEMENT PROGRAM	\$0	\$643,197	\$643,197
10.187	THE EMERGENCY FOOD ASSISTANCE PROGRAM (TEFAP) COMMODITY CREDIT CORPORATION ELIGIBLE RECIPIENT FUNDS	\$0	\$213,766	\$213,766
10.202***	COOPERATIVE FORESTRY RESEARCH	\$631,259	\$0	\$631,259
10.203***	PAYMENTS TO AGRICULTURAL EXPERIMENT STATIONS UNDER THE HATCH ACT	\$4,345,491	\$0	\$4,345,491
10.207***	ANIMAL HEALTH AND DISEASE RESEARCH	\$11,481	\$0	\$11,481
10.210	HIGHER EDUCATION NATIONAL NEEDS GRADUATE FELLOWSHIPS GRANTS	\$10,521	\$0	\$10,521
10.215***	SUSTAINABLE AGRICULTURE RESEARCH AND EDUCATION	\$75,860	\$0	\$75,860
10.216	1890 INSTITUTION CAPACITY BUILDING GRANTS	\$23,814	\$0	\$23,814
10.217	HIGHER EDUCATION CHALLENGE GRANTS	\$182,675	\$0	\$182,675
10.229	EXTENSION COLLABORATIVE ON IMMUNIZATION TEACHING & ENGAGEMENT	\$61,009	\$0	\$61,009
10.303	INTEGRATED PROGRAMS	\$119,307	\$20,444	\$139,751
10.310***	AGRICULTURE AND FOOD RESEARCH INITIATIVE (AFRI)	\$1,877,975	\$733,861	\$2,611,836
10.328	FOOD SAFETY OUTREACH PROGRAM	\$7,882	\$0	\$7,882
10.329	CROP PROTECTION AND PEST MANAGEMENT COMPETITIVE GRANTS PROGRAM	\$29,995	\$0	\$29,995
10.334	ENHANCING AGRICULTURAL OPPORTUNITIES FOR MILITARY VETERANS COMPETITIVE GRANTS PROGRAM	\$125,129	\$0	\$125,129
10.443	OUTREACH AND ASSISTANCE FOR SOCIALLY DISADVANTAGED AND VETERAN FARMERS AND RANCHERS	\$128,151	\$0	\$128,151
10.475	COOPERATIVE AGREEMENTS WITH STATES FOR INTRASTATE MEAT AND POULTRY INSPECTION	\$906,150	\$0	\$906,150
10.500	COOPERATIVE EXTENSION SERVICE	\$161,110	\$0	\$161,110
10.511	SMITH-LEVER FUNDING (VARIOUS PROGRAMS)	\$3,904,316	\$0	\$3,904,316
10.514	EXPANDED FOOD AND NUTRITION EDUCATION PROGRAM	\$1,206,533	\$0	\$1,206,533
10.515	RENEWABLE RESOURCES EXTENSION ACT AND NATIONAL FOCUS FUND PROJECTS	\$66,578	\$0	\$66,578
10.516	RURAL HEALTH AND SAFETY EDUCATION COMPETITIVE GRANTS PROGRAM	\$91,167	\$0	\$91,167
10.525	FARM AND RANCH STRESS ASSISTANCE NETWORK COMPETITIVE GRANTS PROGRAM	\$74,735	\$210,776	\$285,511
10.541	CHILD NUTRITION - TECHNOLOGY INNOVATION GRANT	\$86,160	\$0	\$86,160
10.542	PANDEMIC EBT FOOD BENEFITS	\$376,231	\$0	\$376,231
10.557	WIC SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS, AND CHILDREN	\$28,651,367	\$12,233,602	\$40,884,969
COVID 10.557	COVID-19 - WIC SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS, AND CHILDREN	\$34,398	\$0	\$34,398
10.558	CHILD AND ADULT CARE FOOD PROGRAM	\$244,901	\$19,859,445	\$20,104,346
10.560	STATE ADMINISTRATIVE EXPENSES FOR CHILD NUTRITION	\$2,789,734	\$0	\$2,789,734
10.572	WIC FARMERS' MARKET NUTRITION PROGRAM (FMNP)	\$209,916	\$0	\$209,916
10.575	FARM TO SCHOOL GRANT PROGRAM	\$48,603	\$0	\$48,603
10.576	SENIOR FARMERS MARKET NUTRITION PROGRAM	\$458,877	\$0	\$458,877
10.578	WIC GRANTS TO STATES (WGS)	\$459,044	\$(142,889)	\$316,155
10.579	CHILD NUTRITION DISCRETIONARY GRANTS LIMITED AVAILABILITY	\$0	\$355,348	\$355,348
10.645	FARM TO SCHOOL STATE FORMULA GRANT	\$1,635	\$96,000	\$97,635
10.646	SUMMER ELECTRONIC BENEFIT TRANSFER PROGRAM FOR CHILDREN	\$1,652,174	\$0	\$1,652,174
10.649	PANDEMIC EBT ADMINISTRATIVE COSTS	\$3,101,227	\$76,172	\$3,177,399
10.664	COOPERATIVE FORESTRY ASSISTANCE	\$994,549	\$87,526	\$1,082,075
10.665	SCHOOLS AND ROADS-GRANTS TO STATES AND FOREST SERVICE SCHOOLS AND ROADS CLUSTER	\$2,828,383	\$0	\$2,828,383
10.676	FOREST LEGACY PROGRAM	\$67,515	\$0	\$67,515
10.678	FOREST STEWARDSHIP PROGRAM	\$4,143	\$0	\$4,143
10.680	FOREST HEALTH PROTECTION	\$1,801,450	\$0	\$1,801,450
10.684	INTERNATIONAL FORESTRY PROGRAMS	\$24,462	\$0	\$24,462
10.691	GOOD NEIGHBOR AUTHORITY	\$27,584	\$0	\$27,584
10.698	STATE & PRIVATE FORESTRY COOPERATIVE FIRE ASSISTANCE	\$215,635	\$193,701	\$409,336
10.699	PARTNERSHIP AGREEMENTS	\$60,907	\$0	\$60,907
10.727	INFLATION REDUCTION ACT URBAN AND COMMUNITY FORESTRY PROGRAM	\$47,570	\$0	\$47,570
10.766	COMMUNITY FACILITIES LOANS AND GRANTS	\$655,964	\$0	\$655,964
10.854	RURAL ECONOMIC DEVELOPMENT LOANS AND GRANTS	\$13,000	\$0	\$13,000
10.855	DISTANCE LEARNING AND TELEMEDICINE LOANS AND GRANTS	\$432,716	\$0	\$432,716
10.868	RURAL ENERGY FOR AMERICA PROGRAM	\$53,126	\$22,800	\$75,926
10.902	SOIL AND WATER CONSERVATION	\$186,289	\$0	\$186,289
10.904	WATERSHED PROTECTION AND FLOOD PREVENTION	\$(19,147)	\$0	\$(19,147)
10.912	ENVIRONMENTAL QUALITY INCENTIVES PROGRAM	\$19,177	\$0	\$19,177
10.916	WATERSHED REHABILITATION PROGRAM	\$50,770	\$0	\$50,770
10.960	TECHNICAL AGRICULTURAL ASSISTANCE	\$9,669	\$0	\$9,669

STATE OF WEST VIRGINIA
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FEDERAL GRANTOR LISTING
FOR THE YEAR ENDING JUNE 30, 2024

FEDERAL ASSISTANCE LISTING/ GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	FEDERAL PROGRAM EXPENDITURES	AMOUNT PASSED THROUGH TO SUBRECIPIENTS	TOTAL FEDERAL EXPENDITURES
SNAP CLUSTER				
10.551	SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)	\$552,224,578	\$0	\$552,224,578
10.561	STATE ADMINISTRATIVE MATCHING GRANTS FOR THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM	\$21,508,665	\$782,559	\$22,291,224
COVID 10.561	COVID-19 - STATE ADMINISTRATIVE MATCHING GRANTS FOR THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM	\$2,403,182	\$0	\$2,403,182
	TOTAL SNAP CLUSTER	\$576,136,425	\$782,559	\$576,918,984
CHILD NUTRITION CLUSTER				
10.553	SCHOOL BREAKFAST PROGRAM (SBP)	\$197,911	\$51,119,623	\$51,317,534
10.555	NATIONAL SCHOOL LUNCH PROGRAM (NSLP)	\$284,680	\$116,187,179	\$116,471,859
10.556	SPECIAL MILK PROGRAM FOR CHILDREN (SMP)	\$0	\$10,742	\$10,742
10.559	SUMMER FOOD SERVICE PROGRAM FOR CHILDREN (SFSPC)	\$95,814	\$4,460,759	\$4,556,573
10.582	FRESH FRUIT AND VEGETABLE PROGRAM	\$0	\$3,166,262	\$3,166,262
	TOTAL CHILD NUTRITION CLUSTER	\$578,405	\$174,944,565	\$175,522,970
FOOD DISTRIBUTION CLUSTER				
10.565	COMMODITY SUPPLEMENTAL FOOD PROGRAM	\$29,849	\$4,166,137	\$4,195,986
10.568	EMERGENCY FOOD ASSISTANCE PROGRAM (ADMINISTRATIVE COSTS)	\$68,295	\$869,584	\$937,879
COVID 10.568	COVID-19 - EMERGENCY FOOD ASSISTANCE PROGRAM (ADMINISTRATIVE COSTS)	\$15,878	\$240,220	\$256,098
10.569	EMERGENCY FOOD ASSISTANCE PROGRAM (FOOD COMMODITIES)	\$0	\$10,294,379	\$10,294,379
	TOTAL FOOD DISTRIBUTION CLUSTER	\$114,022	\$15,570,320	\$15,684,342
10.U01	RESEARCH TO SUPPORT SILVAH MODERNIZATION	\$8,546	\$0	\$8,546
10.U02	FOOD INSPECTIONS	\$5,034	\$0	\$5,034
10.U03	NATIONAL VISITOR USE MONITORING FOR RECREATIONAL SYSTEMS ON PUBLIC LANDS	\$414,624	\$0	\$414,624
10.U04	NATIONAL VISITOR USE MONITORING FOR RECREATIONAL SYSTEMS ON CUSTER GALLAIN NATIONAL FOREST	\$105,769	\$0	\$105,769
10.U05	PARKS HUGHES RIVER NRCS AGREEMENT	\$28,175	\$0	\$28,175
TOTAL DEPARTMENT OF AGRICULTURE		\$645,033,380	\$227,837,071	\$872,870,451
DEPARTMENT OF COMMERCE				
11.032	STATE DIGITAL EQUITY PLANNING GRANTS	\$327,770	\$203,608	\$531,378
11.035	BROADBAND EQUITY, ACCESS, AND DEPLOYMENT PROGRAM	\$3,232,750	\$233,897	\$3,466,647
11.307	ECONOMIC ADJUSTMENT ASSISTANCE AND ECONOMIC DEVELOPMENT CLUSTER	\$1,656,998	\$385,324	\$2,042,322
COVID 11.307	COVID-19 - ECONOMIC ADJUSTMENT ASSISTANCE	\$8,039,720	\$0	\$8,039,720
11.617	CONGRESSIONALLY - IDENTIFIED PROJECTS	\$800,754	\$0	\$800,754
11.U01	APPALACHIAN CLIMATE TECHNOLOGIES (ACTNOW) COALITION	\$25,474	\$0	\$25,474
TOTAL DEPARTMENT OF COMMERCE		\$14,083,466	\$822,829	\$14,906,295
DEPARTMENT OF DEFENSE				
12.002	PROCUREMENT TECHNICAL ASSISTANCE FOR BUSINESS FIRMS	\$168,188	\$0	\$168,188
12.113	STATE MEMORANDUM OF AGREEMENT PROGRAM FOR THE REIMBURSEMENT OF TECHNICAL SERVICES	\$435,456	\$0	\$435,456
12.225	COMMERCIAL TECHNOLOGIES FOR MAINTENANCE ACTIVITIES PROGRAM	\$1,150,130	\$0	\$1,150,130
12.300***	BASIC AND APPLIED SCIENTIFIC RESEARCH	\$133,049	\$71,816	\$204,865
12.400	MILITARY CONSTRUCTION, NATIONAL GUARD	\$5,758,740	\$0	\$5,758,740
12.401	NATIONAL GUARD MILITARY OPERATIONS AND MAINTENANCE (O&M) PROJECTS	\$42,948,455	\$0	\$42,948,455
12.404	NATIONAL GUARD CHALLENGE PROGRAM	\$11,005,767	\$0	\$11,005,767
12.431***	BASIC SCIENTIFIC RESEARCH	\$23,444	\$0	\$23,444
12.501	TRAINING AND SUPPORT - COMBATING WEAPONS OF MASS DESTRUCTION	\$60,417	\$0	\$60,417
12.600	COMMUNITY INVESTMENT	\$304,319	\$0	\$304,319
12.618	COMMUNITY ECONOMIC ADJUSTMENT ASSISTANCE FOR ESTABLISHMENT OR EXPANSION OF A MILITARY INSTALLATION	\$122,216	\$0	\$122,216
12.900	LANGUAGE GRANT PROGRAM	\$82,083	\$78,870	\$160,953
12.902	INFORMATION SECURITY GRANT PROGRAM	\$54,530	\$0	\$54,530
12.U01	2023 DOD CYSP WEST VIRGINIA UNIVERSITY	\$86,973	\$0	\$86,973
12.U02	AIR FORCE JR ROTC - SUMMER FLIGHT ACADEMY	\$207,037	\$0	\$207,037
12.U03	INTELLIGENT MULTIROTOR AUTONOMOUS GLIDER FOR RELOCATABLE SENSORS (MAGRS) PH2	\$(139)	\$0	\$(139)
TOTAL DEPARTMENT OF DEFENSE		\$62,540,665	\$150,686	\$62,691,351
DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT				
14.110	MANUFACTURED HOME LOAN INSURANCE - FINANCING PURCHASE OF MANUFACTURED HOMES AS PRINCIPAL RESIDENCES OR BORROWERS	\$59,463	\$0	\$59,463
14.228	COMMUNITY DEVELOPMENT BLOCK GRANTS/STATE'S PROGRAM AND NON-ENTITLEMENT GRANTS IN HAWAII	\$1,826,370	\$27,973,664	\$29,800,034
COVID 14.228	COVID-19 - COMMUNITY DEVELOPMENT BLOCK GRANTS/STATE'S PROGRAM AND NON-ENTITLEMENT GRANTS IN HAWAII	\$53,316	\$3,254,323	\$3,307,639
14.231	EMERGENCY SOLUTIONS GRANT PROGRAM	\$109,842	\$1,950,917	\$2,060,759
COVID 14.231	COVID-19 - EMERGENCY SOLUTIONS GRANT PROGRAM	\$19,227	\$271,448	\$290,675
14.241	HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS	\$24,568	\$827,661	\$852,229
14.251	ECONOMIC DEVELOPMENT INITIATIVE, COMMUNITY PROJECT FUNDING, AND MISCELLANEOUS GRANTS	\$1,159,652	\$0	\$1,159,652
14.400	EQUAL OPPORTUNITY IN HOUSING	\$248,310	\$0	\$248,310
TOTAL DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT		\$3,500,748	\$34,278,013	\$37,778,761

STATE OF WEST VIRGINIA
 SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
 FEDERAL GRANTOR LISTING
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FEDERAL ASSISTANCE LISTING/ GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	FEDERAL PROGRAM EXPENDITURES	AMOUNT PASSED THROUGH TO SUBRECIPIENTS	TOTAL FEDERAL EXPENDITURES
<u>DEPARTMENT OF THE INTERIOR</u>				
15.018	ENERGY COMMUNITY REVITALIZATION PROGRAM (ECRP)	\$20,109,060	\$0	\$20,109,060
15.250	REGULATION OF SURFACE COAL MINING AND SURFACE EFFECTS OF UNDERGROUND COAL MINING	\$10,394,102	\$0	\$10,394,102
15.252	ABANDONED MINE LAND RECLAMATION (AMLR)	\$23,105,399	\$9,188,272	\$32,293,671
15.433	FLOOD CONTROL ACT LANDS	\$223,501	\$0	\$223,501
15.438	NATIONAL FOREST ACQUIRED LANDS	\$165,159	\$0	\$165,159
15.608	FISH AND WILDLIFE MANAGEMENT ASSISTANCE	\$53,319	\$0	\$53,319
15.615	COOPERATIVE ENDANGERED SPECIES CONSERVATION FUND	\$114,783	\$0	\$114,783
15.634	STATE WILDLIFE GRANTS	\$537,903	\$0	\$537,903
15.657	ENDANGERED SPECIES CONSERVATION - RECOVERY IMPLEMENTATION FUNDS	\$29,339	\$0	\$29,339
15.662	GREAT LAKES RESTORATION	\$54,916	\$0	\$54,916
15.667	HIGHLANDS CONSERVATION	\$41,210	\$0	\$41,210
15.670	ADAPTIVE SCIENCE	\$25,079	\$0	\$25,079
15.808**	U.S. GEOLOGICAL SURVEY - RESEARCH AND DATA COLLECTION	\$7,962	\$0	\$7,962
15.810	NATIONAL COOPERATIVE GEOLOGIC MAPPING	\$173,750	\$0	\$173,750
15.814	NATIONAL GEOLOGICAL AND GEOPHYSICAL DATA PRESERVATION	\$85,245	\$0	\$85,245
15.904	HISTORIC PRESERVATION FUND GRANTS-IN-AID	\$776,052	\$68,159	\$844,211
15.916	OUTDOOR RECREATION-ACQUISITION, DEVELOPMENT AND PLANNING	\$7,209	\$1,596,896	\$1,604,105
15.922	NATIVE AMERICAN GRAVES PROTECTION AND REPATRIATION ACT PRESERVATION OF HISTORIC STRUCTURES ON THE CAMPUSES OF HISTORICALLY BLACK COLLEGES AND UNIVERESITIES (HBCUs)	\$3,072	\$0	\$3,072
15.932	HERITAGE PARTNERSHIP	\$23,733	\$0	\$23,733
15.939	NATURAL RESOURCE STEWARDSHIP	\$310,425	\$0	\$310,425
15.944	COOPERATIVE RESEARCH AND TRAINING PROGRAMS - RESOURCES OF THE NATIONAL PARK SYSTEM	\$40,543	\$0	\$40,543
15.945***		\$8,893	\$0	\$8,893
<u>FISH AND WILDLIFE CLUSTER</u>				
15.605	SPORT FISH RESTORATION	\$4,273,210	\$0	\$4,273,210
15.611	WILDLIFE RESTORATION AND BASIC HUNTER EDUCATION	\$6,990,172	\$0	\$6,990,172
15.626	ENHANCED HUNTER EDUCATION AND SAFETY	\$26,470	\$0	\$26,470
	<u>TOTAL FISH AND WILDLIFE CLUSTER</u>	\$11,289,852	\$0	\$11,289,852
15.U01	WILDLIFE GRIZZLED SKIPPER BUTTERFLY	\$4,110	\$0	\$4,110
15.U02	WRS-DNR-23-0026	\$39,044	\$0	\$39,044
<u>TOTAL DEPARTMENT OF THE INTERIOR</u>		\$67,623,660	\$10,853,327	\$78,476,987
<u>DEPARTMENT OF JUSTICE</u>				
16.017	SEXUAL ASSAULT SERVICES FORMULA PROGRAM	\$7,811	\$177,664	\$185,475
16.525	GRANTS TO REDUCE DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, AND STALKING ON CAMPUS	\$71,117	\$0	\$71,117
16.540	JUVENILE JUSTICE AND DELINQUENCY PREVENTION	\$50,300	\$197,307	\$247,607
16.543	MISSING CHILDREN'S ASSISTANCE	\$1,010,043	\$0	\$1,010,043
16.550	STATE JUSTICE STATISTICS PROGRAM FOR STATISTICAL ANALYSIS CENTERS	\$26,001	\$0	\$26,001
16.554	NATIONAL CRIMINAL HISTORY IMPROVEMENT PROGRAM (NCHIP)	\$1,095,778	\$28,343	\$1,124,121
16.575	CRIME VICTIM ASSISTANCE	\$782,794	\$5,668,954	\$6,451,748
16.576	CRIME VICTIM COMPENSATION	\$315,500	\$0	\$315,500
16.585	TREATMENT COURT DISCRETIONARY GRANT PROGRAM	\$429,333	\$154,245	\$583,578
16.588	VIOLENCE AGAINST WOMEN FORMULA GRANTS	\$81,626	\$722,803	\$804,429
16.589	RURAL DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, AND STALKING ASSISTANCE PROGRAM	\$9,706	\$365,625	\$375,331
16.590	GRANTS TO ENCOURAGE ARREST POLICIES AND ENFORCEMENT OF PROTECTION ORDERS PROGRAM	\$106,813	\$155,455	\$262,268
16.593	RESIDENTIAL SUBSTANCE ABUSE TREATMENT FOR STATE PRISONERS	\$42,631	\$21,080	\$63,711
16.609	PROJECT SAFE NEIGHBORHOODS	\$8,252	\$6,923	\$15,175
16.710	PUBLIC SAFETY PARTNERSHIP AND COMMUNITY POLICING GRANTS	\$1,335,895	\$0	\$1,335,895
16.735	PREA PROGRAM: STRATEGIC SUPPORT FOR PREA IMPLEMENTATION	\$28,710	\$28,710	\$57,420
16.738	EDWARD BYRNE MEMORIAL JUSTICE ASSISTANCE GRANT PROGRAM	\$350,599	\$863,553	\$1,214,152
16.741	DNA BACKLOG REDUCTION PROGRAM	\$635,759	\$0	\$635,759
16.742	PAUL COVERDELL FORENSIC SCIENCES IMPROVEMENT GRANT PROGRAM	\$248,959	\$0	\$248,959
16.750	SUPPORT FOR ADAM WALSH ACT IMPLEMENTATION GRANT PROGRAM	\$42,426	\$0	\$42,426
16.754	HAROLD ROGERS PRESCRIPTION DRUG MONITORING PROGRAM	\$614,885	\$0	\$614,885
16.813	NICS ACT RECORD IMPROVEMENT PROGRAM	\$1,661,682	\$0	\$1,661,682
16.816	JOHN R. JUSTICE PROSECUTORS AND DEFENDERS INCENTIVE ACT	\$1,482	\$59,341	\$60,823
16.833	NATIONAL SEXUAL ASSAULT KIT INITIATIVE	\$86,694	\$0	\$86,694
16.838	COMPREHENSIVE OPIOID, STIMULANT, AND SUBSTANCE USE PROGRAM	\$141,240	\$2,281,276	\$2,422,516
16.922	EQUITABLE SHARING PROGRAM	\$14,337	\$0	\$14,337
16.U01	STATE JUSTICE INSTITUTE	\$40,492	\$0	\$40,492
16.U02	MISCELLANEOUS JUSTICE PROGRAMS	\$1,144,539	\$0	\$1,144,539
16.U03	EQUITABLE SHARING PROGRAM-JUSTICE	\$4,880,689	\$0	\$4,880,689
16.U04	EQUITABLE SHARING PROGRAM-TREASURY	\$9,496	\$0	\$9,496
16.U05	FBI JTTF LAW ENFORCEMENT AGREEMENT	\$13,430	\$0	\$13,430
<u>TOTAL DEPARTMENT OF JUSTICE</u>		\$15,289,019	\$10,731,279	\$26,020,298
<u>DEPARTMENT OF LABOR</u>				
17.002	LABOR FORCE STATISTICS	\$674,081	\$0	\$674,081
17.005	COMPENSATION AND WORKING CONDITIONS	\$86,488	\$0	\$86,488
17.225	UNEMPLOYMENT INSURANCE (NOTE 6)	\$176,302,314	\$0	\$176,302,314

STATE OF WEST VIRGINIA
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FEDERAL GRANTOR LISTING
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FEDERAL ASSISTANCE LISTING/ GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	FEDERAL PROGRAM EXPENDITURES	AMOUNT PASSED THROUGH TO SUBRECIPIENTS	TOTAL FEDERAL EXPENDITURES
17.235	SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM	\$78,563	\$810,495	\$889,058
17.245	TRADE ADJUSTMENT ASSISTANCE	\$1,123,045	\$0	\$1,123,045
17.261	WORKFORCE DATA QUALITY INITIATIVE (WDQI)	\$973,123	\$0	\$973,123
17.268	H-1B JOB TRAINING GRANTS	\$1,520,586	\$52,404	\$1,572,990
17.270	REENTRY EMPLOYMENT OPPORTUNITIES	\$76,855	\$0	\$76,855
17.271	WORK OPPORTUNITY TAX CREDIT PROGRAM (WOTC)	\$119,212	\$0	\$119,212
17.273	TEMPORARY LABOR CERTIFICATION FOR FOREIGN WORKERS	\$70,230	\$0	\$70,230
17.277	WIOA NATIONAL DISLOCATED WORKER GRANTS/WIA NATIONAL EMERGENCY GRANTS	\$12,941	\$91,536	\$104,477
17.280	WIOA DISLOCATED WORKER NATIONAL RESERVE DEMONSTRATION GRANTS	\$471,533	\$0	\$471,533
17.285	APPRENTICESHIP USA GRANTS	\$17,105	\$2,667	\$19,772
17.287	JOB CORPS EXPERIMENTAL PROJECTS AND TECHNICAL ASSISTANCE	\$118,945	\$0	\$118,945
17.504	CONSULTATION AGREEMENTS	\$464,751	\$0	\$464,751
17.600	MINE HEALTH AND SAFETY GRANTS	\$625,673	\$0	\$625,673
17.804	LOCAL VETERANS' EMPLOYMENT REPRESENTATIVE PROGRAM	\$464,352	\$0	\$464,352
17.999	MISCELLANEOUS LABOR PROGRAMS	\$(62,747)	\$0	\$(62,747)
EMPLOYMENT SERVICE CLUSTER				
17.207	EMPLOYMENT SERVICE/WAGNER-PEYSER FUNDED ACTIVITIES	\$6,140,616	\$0	\$6,140,616
17.801	JOBS FOR VETERANS STATE GRANTS	\$919,231	\$0	\$919,231
TOTAL EMPLOYMENT SERVICE CLUSTER		\$7,059,847	\$0	\$7,059,847
WIOA CLUSTER				
17.258	WIOA ADULT PROGRAM	\$0	\$5,421,430	\$5,421,430
17.259	WIOA YOUTH ACTIVITIES	\$0	\$4,824,145	\$4,824,145
17.278	WIOA DISLOCATED WORKER FORMULA GRANTS	\$4,222,425	\$8,562,822	\$12,785,247
TOTAL WIOA CLUSTER		\$4,222,425	\$18,808,397	\$23,030,822
TOTAL DEPARTMENT OF LABOR		\$194,419,322	\$19,765,499	\$214,184,821
DEPARTMENT OF STATE				
19.009	ACADEMIC EXCHANGE PROGRAMS - UNDERGRADUATE PROGRAMS	\$34,939	\$0	\$34,939
TOTAL DEPARTMENT OF STATE		\$34,939	\$0	\$34,939
DEPARTMENT OF TRANSPORTATION				
20.200	HIGHWAY RESEARCH AND DEVELOPMENT PROGRAM	\$9,699	\$42,529	\$52,228
20.205*	HIGHWAY PLANNING AND CONSTRUCTION	\$795,715,612	\$3,492,021	\$799,207,633
20.215	HIGHWAY TRAINING AND EDUCATION	\$5,000	\$210,000	\$215,000
20.219*	RECREATIONAL TRAILS PROGRAM	\$720,738	\$906,741	\$1,627,479
20.224	FEDERAL LANDS ACCESS PROGRAM	\$114,694	\$0	\$114,694
20.232	COMMERCIAL DRIVER'S LICENSE PROGRAM IMPLEMENTATION GRANT	\$152,383	\$0	\$152,383
20.301	RAILROAD SAFETY	\$19,590	\$0	\$19,590
20.505	METROPOLITAN TRANSPORTATION PLANNING AND STATE AND NON-METROPOLITAN PLANNING AND RESEARCH	\$196,714	\$279,771	\$476,485
20.509	FORMULA GRANTS FOR OTHER THAN URBANIZED AREAS	\$5,485,270	\$8,378,267	\$13,863,537
20.513	CAPITAL ASSISTANCE PROGRAM FOR ELDERLY PERSONS AND PERSONS WITH DISABILITIES	\$354,936	\$1,247,977	\$1,602,913
20.528	RAIL FIXED GUIDEWAY PUBLIC TRANSPORTATION SYSTEM STATE SAFETY OVERSIGHT FORMULA GRANT PROGRAM	\$294,559	\$0	\$294,559
20.700	PIPELINE SAFETY PROGRAM STATE BASE GRANT	\$936,767	\$0	\$936,767
20.701	UNIVERSITY TRANSPORTATION CENTERS PROGRAM	\$71,548	\$0	\$71,548
20.703	INTERAGENCY HAZARDOUS MATERIALS PUBLIC SECTOR TRAINING AND PLANNING GRANTS	\$399,039	\$0	\$399,039
20.706	PIPELINE EMERGENCY RESPONSE GRANT (PERG)	\$96,229	\$0	\$96,229
20.724	PIPELINE SAFETY RESEARCH COMPETITIVE ACADEMIC AGREEMENT PROGRAM (CAAP)	\$13,780	\$0	\$13,780
20.933	NATIONAL INFRASTRUCTURE INVESTMENTS	\$20,185,684	\$0	\$20,185,684
20.934	NATIONALLY SIGNIFICANT FREIGHT AND HIGHWAY PROJECTS STRENGTHENING MOBILITY AND REVOLUTIONIZING TRANSPORTATION (SMART)	\$482	\$0	\$482
20.941	GRANTS PROGRAM	\$6,166	\$0	\$6,166
FMCSA CLUSTER				
20.218	MOTOR CARRIER SAFETY ASSISTANCE	\$3,494,432	\$0	\$3,494,432
20.237	MOTOR CARRIER SAFETY ASSISTANCE HIGH PRIORITY ACTIVITIES GRANTS AND COOPERATIVE AGREEMENTS	\$462,500	\$0	\$462,500
TOTAL FMCSA CLUSTER		\$3,956,932	\$0	\$3,956,932
FEDERAL TRANSIT CLUSTER				
20.525	STATE OF GOOD REPAIR GRANTS PROGRAM	\$1,879,168	\$0	\$1,879,168
20.526	BUSES AND BUS FACILITIES FORMULA PROGRAM	\$388,365	\$0	\$388,365
TOTAL FEDERAL TRANSIT CLUSTER		\$2,267,533	\$0	\$2,267,533
HIGHWAY SAFETY CLUSTER				
20.600	STATE AND COMMUNITY HIGHWAY SAFETY	\$939,842	\$1,350,487	\$2,290,329
20.616	NATIONAL PRIORITY SAFETY PROGRAMS	\$1,029,175	\$1,829,399	\$2,858,574
TOTAL HIGHWAY SAFETY CLUSTER		\$1,969,017	\$3,179,886	\$5,148,903
20.U01	MDOT PAVEMENT AND DISTRESS ANALYSIS	\$1,992	\$0	\$1,992
TOTAL DEPARTMENT OF TRANSPORTATION		\$832,974,364	\$17,737,192	\$850,711,556

STATE OF WEST VIRGINIA
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FEDERAL ASSISTANCE LISTING/ GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	FEDERAL PROGRAM EXPENDITURES	AMOUNT PASSED THROUGH TO SUBRECIPIENTS	TOTAL FEDERAL EXPENDITURES
<u>DEPARTMENT OF THE TREASURY</u>				
21.016	EQUITABLE SHARING	\$55,572	\$0	\$55,572
COVID 21.019	COVID-19 - CORONAVIRUS RELIEF FUND	\$1,432,933	\$(175,508)	\$1,257,425
COVID 21.027	COVID-19 - CORONAVIRUS STATE AND LOCAL FISCAL RECOVERY FUNDS	\$100,073,730	\$139,686	\$100,213,416
<u>TOTAL DEPARTMENT OF THE TREASURY</u>		<u>\$101,562,235</u>	<u>\$(35,822)</u>	<u>\$101,526,413</u>
<u>APPALACHIAN REGIONAL COMMISSION</u>				
23.001	APPALACHIAN REGIONAL DEVELOPMENT (SEE INDIVIDUAL APPALACHIAN PROGRAMS)	\$66,084	\$0	\$66,084
23.002	APPALACHIAN AREA DEVELOPMENT	\$469,468	\$1,366,862	\$1,836,330
23.003	APPALACHIAN DEVELOPMENT HIGHWAY SYSTEM	\$27,624,118	\$0	\$27,624,118
23.011	APPALACHIAN RESEARCH, TECHNICAL ASSISTANCE, AND DEMONSTRATION PROJECTS	\$65,739	\$0	\$65,739
23.U01	ARC POWERING PROSPERITY	\$780,691	\$0	\$780,691
<u>TOTAL APPALACHIAN REGIONAL COMMISSION</u>		<u>\$29,006,100</u>	<u>\$1,366,862</u>	<u>\$30,372,962</u>
<u>EQUAL EMPLOYMENT OPPORTUNITY COMMISSION</u>				
30.001	EMPLOYMENT DISCRIMINATION-TITLE VII OF THE CIVIL RIGHTS ACT OF 1964	\$232,879	\$0	\$232,879
<u>TOTAL EQUAL EMPLOYMENT OPPORTUNITY COMMISSION</u>		<u>\$232,879</u>	<u>\$0</u>	<u>\$232,879</u>
<u>FEDERAL COMMUNICATIONS COMMISSION</u>				
32.011	AFFORDABLE CONNECTIVITY OUTREACH GRANT PROGRAM	\$189,649	\$0	\$189,649
<u>TOTAL FEDERAL COMMUNICATIONS COMMISSION</u>		<u>\$189,649</u>	<u>\$0</u>	<u>\$189,649</u>
<u>GENERAL SERVICES ADMINISTRATION</u>				
39.003	DONATION OF FEDERAL SURPLUS PERSONAL PROPERTY	\$145,624	\$0	\$145,624
<u>TOTAL GENERAL SERVICES ADMINISTRATION</u>		<u>\$145,624</u>	<u>\$0</u>	<u>\$145,624</u>
<u>NATIONAL AERONAUTICS AND SPACE ADMINISTRATION</u>				
43.001	SCIENCE	\$4,979	\$0	\$4,979
43.008***	OFFICE OF STEM ENGAGEMENT (OSTEM)	\$141,347	\$0	\$141,347
43.009	MISSION SUPPORT	\$376,701	\$0	\$376,701
<u>TOTAL NATIONAL AERONAUTICS AND SPACE ADMINISTRATION</u>		<u>\$523,027</u>	<u>\$0</u>	<u>\$523,027</u>
<u>INSTITUTE OF MUSEUM AND LIBRARY SERVICES</u>				
45.025	PROMOTION OF THE ARTS PARTNERSHIP AGREEMENTS	\$301,674	\$614,692	\$916,366
45.310	GRANTS TO STATES	\$1,419,460	\$650,948	\$2,070,408
<u>TOTAL INSTITUTE OF MUSEUM AND LIBRARY SERVICES</u>		<u>\$1,721,134</u>	<u>\$1,265,640</u>	<u>\$2,986,774</u>
<u>NATIONAL SCIENCE FOUNDATION</u>				
47.049***	MATHEMATICAL AND PHYSICAL SCIENCES	\$113,867	\$0	\$113,867
47.050	GEOSCIENCES	\$49,547	\$0	\$49,547
47.070***	COMPUTER AND INFORMATION SCIENCE AND ENGINEERING	\$(12,904)	\$0	\$(12,904)
47.076***	STEM EDUCATION (FORMERLY EDUCATION AND HUMAN RESOURCES)	\$1,314,240	\$329,204	\$1,643,444
47.078	POLAR PROGRAMS	\$59,165	\$0	\$59,165
47.083***	INTEGRATIVE ACTIVITIES	\$741,981	\$2,480,517	\$3,222,498
47.U01	NSF CYBERSECURITY	\$1,368	\$0	\$1,368
<u>TOTAL NATIONAL SCIENCE FOUNDATION</u>		<u>\$2,267,264</u>	<u>\$2,809,721</u>	<u>\$5,076,985</u>
<u>SMALL BUSINESS ADMINISTRATION</u>				
59.037	SMALL BUSINESS DEVELOPMENT CENTERS	\$910,040	\$0	\$910,040
COVID 59.037	COVID-19 - SMALL BUSINESS DEVELOPMENT CENTERS	\$(442)	\$0	\$(442)
59.058	FEDERAL AND STATE TECHNOLOGY PARTNERSHIP PROGRAM	\$45,441	\$0	\$45,441
59.059	CONGRESSIONAL GRANTS	\$762,261	\$30,000	\$792,261
59.061	STATE TRADE EXPANSION	\$0	\$131,847	\$131,847
<u>TOTAL SMALL BUSINESS ADMINISTRATION</u>		<u>\$1,717,300</u>	<u>\$161,847</u>	<u>\$1,879,147</u>
<u>DEPARTMENT OF VETERANS AFFAIRS</u>				
64.005	GRANTS TO STATES FOR CONSTRUCTION OF STATE HOME FACILITIES	\$117,614	\$0	\$117,614
64.015	VETERANS STATE NURSING HOME CARE	\$10,360,875	\$0	\$10,360,875
64.028	POST-9/11 VETERANS EDUCATIONAL ASSISTANCE	\$133,463	\$0	\$133,463
64.053	PAYMENTS TO STATES FOR PROGRAMS TO PROMOTE THE HIRING AND RETENTION OF NURSES AT STATE VETERANS HOMES	\$100,063	\$0	\$100,063
64.124	ALL-VOLUNTEER FORCE EDUCATIONAL ASSISTANCE	\$171,446	\$0	\$171,446
64.203	VETERANS CEMETERY GRANTS PROGRAM	\$113,940	\$0	\$113,940
<u>TOTAL DEPARTMENT OF VETERANS AFFAIRS</u>		<u>\$10,997,401</u>	<u>\$0</u>	<u>\$10,997,401</u>
<u>ENVIRONMENTAL PROTECTION AGENCY</u>				
66.001	AIR POLLUTION CONTROL PROGRAM SUPPORT	\$1,575,913	\$0	\$1,575,913
66.034	SURVEYS, STUDIES, RESEARCH, INVESTIGATIONS, DEMONSTRATIONS, AND SPECIAL PURPOSE ACTIVITIES RELATING TO THE CLEAN AIR ACT	\$676,954	\$0	\$676,954
66.040	STATE CLEAN DIESEL GRANT PROGRAM	\$480,590	\$0	\$480,590
66.204	MULTIPURPOSE GRANTS TO STATES AND TRIBES	\$20,906	\$9,184	\$30,090
66.312	ENVIRONMENT JUSTICE GOVERNMENT TO GOVERNMENT (EJ2G) PROGRAM	\$475	\$0	\$475
66.419	WATER POLLUTION CONTROL STATE, INTERSTATE, AND TRIBAL PROGRAM SUPPORT	\$2,154,461	\$40,000	\$2,194,461
66.432	STATE PUBLIC WATER SYSTEM SUPERVISION	\$769,016	\$0	\$769,016

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66.433	STATE UNDERGROUND WATER SOURCE PROTECTION VOLUNTARY SCHOOL AND CHILD CARE LEAD TESTING AND REDUCTION GRANT PROGRAM	\$148,338	\$0	\$148,338
66.444		\$53,995	\$0	\$53,995
66.454	WATER QUALITY MANAGEMENT PLANNING	\$281,380	\$151,971	\$433,351
66.460	NONPOINT SOURCE IMPLEMENTATION GRANTS	\$932,424	\$926,364	\$1,858,788
66.461	REGIONAL WETLAND PROGRAM DEVELOPMENT GRANTS	\$278,300	\$0	\$278,300
66.466	GEOGRAPHIC PROGRAMS - CHESAPEAKE BAY PROGRAM	\$1,552,696	\$1,289,403	\$2,842,099
66.468	DRINKING WATER STATE REVOLVING FUND	\$(276,971)	\$0	\$(276,971)
66.474	WATER PROTECTION GRANTS TO THE STATES GREATER RESEARCH OPPORTUNITIES (GRO) FELLOWSHIPS FOR UNDERGRADUATE ENVIRONMENTAL STUDY	\$1	\$0	\$1
66.513	PERFORMANCE PARTNERSHIP GRANTS	\$79,062	\$0	\$79,062
66.605	ENVIRONMENTAL INFORMATION EXCHANGE NETWORK GRANT PROGRAM AND RELATED ASSISTANCE	\$821,528	\$62,841	\$884,369
66.608		\$7,174	\$0	\$7,174
66.708	POLLUTION PREVENTION GRANTS PROGRAM	\$282,054	\$0	\$282,054
66.714	PESTICIDE ENVIRONMENTAL STEWARDSHIP PROGRAM (PESP) GRANTS RESEARCH, DEVELOPMENT, MONITORING, PUBLIC EDUCATION, OUTREACH, TRAINING, DEMONSTRATIONS, AND STUDIES	\$64,254	\$0	\$64,254
66.716***		\$3,724	\$0	\$3,724
66.801	HAZARDOUS WASTE MANAGEMENT STATE PROGRAM SUPPORT SUPERFUND STATE, POLITICAL SUBDIVISION, AND INDIAN TRIBE SITE-SPECIFIC COOPERATIVE AGREEMENTS	\$1,500,367	\$0	\$1,500,367
66.802		\$163,891	\$0	\$163,891
66.804	UNDERGROUND STORAGE TANK (UST) PREVENTION, DETECTION AND COMPLIANCE PROGRAM	\$319,259	\$0	\$319,259
66.805	LEAKING UNDERGROUND STORAGE TANK TRUST FUND CORRECTIVE ACTION PROGRAM	\$540,002	\$0	\$540,002
66.809	SUPERFUND STATE AND INDIAN TRIBE CORE PROGRAM COOPERATIVE AGREEMENTS	\$300,986	\$0	\$300,986
66.817	STATE AND TRIBAL RESPONSE PROGRAM GRANTS	\$885,983	\$0	\$885,983
66.818	BROWNFIELDS MULTIPURPOSE, ASSESSMENT, REVOLVING LOAN FUND, AND CLEANUP COOPERATIVE AGREEMENTS	\$582,369	\$3,960	\$586,329
66.920	SOLID WASTE INFRASTRUCTURE FOR RECYCLING INFRASTRUCTURE GRANTS DEMONSTRATION AND ECONOMIC EVALUATION OF REE/CM CONCENTRATE PRODUCTION AT COAL AND HARD ROCK AND TREATMENT SITES	\$15,613	\$0	\$15,613
66.U01		\$1,112,024	\$132,806	\$1,244,830
TOTAL ENVIRONMENTAL PROTECTION AGENCY		\$15,326,768	\$2,616,529	\$17,943,297
DEPARTMENT OF ENERGY				
81.041	STATE ENERGY PROGRAM	\$446,734	\$431,415	\$878,149
81.042	WEATHERIZATION ASSISTANCE FOR LOW-INCOME PERSONS	\$269,398	\$3,831,092	\$4,100,490
81.049	OFFICE OF SCIENCE FINANCIAL ASSISTANCE PROGRAM	\$466,852	\$0	\$466,852
81.057***	UNIVERSITY COAL RESEARCH	\$223,679	\$0	\$223,679
81.086***	CONSERVATION RESEARCH AND DEVELOPMENT	\$13,113	\$136,149	\$149,262
81.089***	FOSSIL ENERGY RESEARCH AND DEVELOPMENT (NOTE 5)	\$3,443,921	\$50,000	\$3,493,921
81.117	ENERGY EFFICIENCY AND RENEWABLE ENERGY INFORMATION DISSEMINATION, OUTREACH, TRAINING AND TECHNICAL ANALYSIS/ASSISTANCE	\$451,925	\$0	\$451,925
81.119	STATE ENERGY PROGRAM SPECIAL PROJECTS	\$3,650	\$11,296	\$14,946
TOTAL DEPARTMENT OF ENERGY		\$5,319,272	\$4,459,952	\$9,779,224
DEPARTMENT OF EDUCATION				
84.002	ADULT EDUCATION - BASIC GRANTS TO STATES	\$750,941	\$3,597,173	\$4,348,114
84.007**	FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS (FSEOG)	\$3,925,385	\$0	\$3,925,385
84.010	TITLE I GRANTS TO LOCAL EDUCATIONAL AGENCIES	\$688,882	\$114,824,966	\$115,513,848
84.013	TITLE I STATE AGENCY PROGRAM FOR NEGLECTED AND DELINQUENT CHILDREN AND YOUTH	\$1,296,762	\$0	\$1,296,762
84.016	UNDERGRADUATE INTERNATIONAL STUDIES AND FOREIGN LANGUAGE PROGRAMS	\$75,825	\$0	\$75,825
84.031	HIGHER EDUCATION INSTITUTIONAL AID	\$5,358,880	\$0	\$5,358,880
84.033**	FEDERAL WORK-STUDY PROGRAM (FWS)	\$4,126,716	\$0	\$4,126,716
84.038**	FEDERAL PERKINS LOAN PROGRAM FEDERAL CAPITAL CONTRIBUTIONS	\$9,896,484	\$0	\$9,896,484
84.048	CAREER AND TECHNICAL EDUCATION-BASIC GRANTS TO STATES	\$4,261,870	\$5,387,522	\$9,649,392
84.063**	FEDERAL PELL GRANT PROGRAM	\$102,899,377	\$0	\$102,899,377
84.116	FUND FOR THE IMPROVEMENT OF POSTSECONDARY EDUCATION	\$3,322,558	\$0	\$3,322,558
84.126	REHABILITATION SERVICES-VOCATIONAL REHABILITATION GRANTS TO STATES	\$52,095,457	\$0	\$52,095,457
84.169	INDEPENDENT LIVING-STATE GRANTS	\$0	\$351,263	\$351,263
84.177	REHABILITATION SERVICES INDEPENDENT LIVING SERVICES FOR OLDER INDIVIDUALS WHO ARE BLIND	\$237,609	\$0	\$237,609
84.181	SPECIAL EDUCATION - GRANTS FOR INFANTS AND FAMILIES	\$1,847,543	\$661,639	\$2,509,182
COVID 84.181	COVID-19 - SPECIAL EDUCATION - GRANTS FOR INFANTS AND FAMILIES	\$292,623	\$9,000	\$301,623
84.184	SCHOOL SAFETY NATIONAL ACTIVITIES SUPPORTED EMPLOYMENT SERVICES FOR INDIVIDUALS WITH THE MOST SIGNIFICANT DISABILITIES	\$1,098,881	\$0	\$1,098,881
84.187		\$241,145	\$0	\$241,145
84.196	EDUCATION FOR HOMELESS CHILDREN AND YOUTH	\$99,052	\$453,768	\$552,820
84.206	JAVIS GIFTED AND TALENTED STUDENTS EDUCATION GRANT PROGRAM INNOVATIVE APPROACHES TO LITERACY, PROMISE NEIGHBORHOODS, FULL-SERVICE COMMUNITY SCHOOLS, AND CONGRESSIONALLY DIRECTED SPENDING FOR ELEMENTARY AND SECONDARY EDUCATION COMMUNITY PROJECTS	\$159,271	\$20,145	\$179,416
84.215		\$243,906	\$0	\$243,906
84.268**	FEDERAL DIRECT STUDENT LOANS	\$351,623,190	\$0	\$351,623,190
84.287	TWENTY-FIRST CENTURY COMMUNITY LEARNING CENTERS SPECIAL EDUCATION - PERSONNEL DEVELOPMENT TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	\$2,357,088	\$5,387,708	\$7,744,796
84.325		\$217,583	\$0	\$217,583

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84.326	SPECIAL EDUCATION-TECHNICAL ASSISTANCE AND DISSEMINATION TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	\$69,792	\$14,604	\$84,396
84.334	GAINING EARLY AWARENESS AND READINESS FOR UNDERGRADUATE PROGRAMS	\$4,052,282	\$937,360	\$4,989,642
84.335	CHILD CARE ACCESS MEANS PARENTS IN SCHOOL	\$330,100	\$0	\$330,100
84.358	RURAL EDUCATION	\$404,016	\$2,080,631	\$2,484,647
84.365	ENGLISH LANGUAGE ACQUISITION STATE GRANTS	\$84,445	\$646,840	\$731,285
84.367	SUPPORTING EFFECTIVE INSTRUCTION STATE GRANTS (FORMERLY IMPROVING TEACHER QUALITY STATE GRANTS)	\$520,885	\$13,224,589	\$13,745,474
84.369	GRANTS FOR STATE ASSESSMENTS AND RELATED ACTIVITIES	\$5,589,542	\$361	\$5,589,903
84.379**	TEACHER EDUCATION ASSISTANCE FOR COLLEGE AND HIGHER EDUCATION GRANTS (TEACH GRANTS)	\$387,485	\$0	\$387,485
84.408**	POSTSECONDARY EDUCATION SCHOLARSHIPS FOR VETERAN'S DEPENDENTS	\$6,973	\$0	\$6,973
84.424	STUDENT SUPPORT AND ACADEMIC ENRICHMENT PROGRAM	\$179,852	\$7,316,525	\$7,496,377
EDUCATION STABILIZATION FUND				
COVID 84.425C	COVID-19 - EDUCATION STABILIZATION FUND - GEER	\$542,266	\$3,479,187	\$4,021,453
COVID 84.425D	COVID-19 - EDUCATION STABILIZATION FUND - ESSER	\$(7,966)	\$63,086,466	\$63,078,500
COVID 84.425J	COVID-19 - EDUCATION STABILIZATION FUND - HBCU	\$2,595,425	\$0	\$2,595,425
COVID 84.425R	COVID-19 - EDUCATION STABILIZATION FUND - CRRSA EANS	\$3,355,403	\$1,082,478	\$4,437,881
COVID 84.425U	COVID-19 - EDUCATION STABILIZATION FUND - ARP ESSER	\$4,151,029	\$328,828,612	\$332,979,641
COVID 84.425V	COVID-19 - EDUCATION STABILIZATION FUND - ARP EANS	\$0	\$2,833,946	\$2,833,946
COVID 84.425W	COVID-19 - EDUCATION STABILIZATION FUND - ARP ESSER - HOMELESS CHILDREN AND YOUTH	\$0	\$1,767,849	\$1,767,849
TOTAL EDUCATION STABILIZATION FUND		\$10,636,157	\$401,078,538	\$411,714,695
SPECIAL EDUCATION CLUSTER (IDEA)				
84.027	SPECIAL EDUCATION-GRANTS TO STATES (IDEA, PART B)	\$7,412,216	\$87,839,756	\$95,251,972
84.173	SPECIAL EDUCATION-PRESCHOOL GRANTS (IDEA PRESCHOOL)	\$389,972	\$3,786,009	\$4,175,981
TOTAL SPECIAL EDUCATION CLUSTER (IDEA)		\$7,802,188	\$91,625,765	\$99,427,953
TRIO CLUSTER				
84.042	TRIO-STUDENT SUPPORT SERVICES	\$1,742,197	\$0	\$1,742,197
84.044	TRIO-TALENT SEARCH	\$231,847	\$0	\$231,847
84.047	TRIO-UPWARD BOUND	\$2,264,203	\$0	\$2,264,203
84.217	TRIO MCNAIR POST-BACCALAUREATE ACHIEVEMENT	\$317,979	\$0	\$317,979
TOTAL TRIO CLUSTER		\$4,556,226	\$0	\$4,556,226
CAMPUS REC ACCESSIBILITY - AN INQUIRY INTO THE ACCESSIBILITY OF CAMPUS RECREATION				
84.U01	UNIVERSITY NANOSAT PROGRAM MISSION CONCEPT 2	\$4,500	\$0	\$4,500
84.U02	NORTHERN WV BROWNFIELDS ASSISTANCE CENTER (NBAC)	\$23,852	\$0	\$23,852
84.U03	NAEP	\$475	\$0	\$475
84.U04	NSF IPA	\$154,430	\$0	\$154,430
84.U05		\$143,891	\$0	\$143,891
TOTAL DEPARTMENT OF EDUCATION		\$582,064,119	\$647,618,397	\$1,229,682,516
ELECTION ASSISTANCE COMMISSION				
90.401	HELP AMERICA VOTE ACT REQUIREMENTS PAYMENTS	\$1,030,119	\$0	\$1,030,119
TOTAL ELECTION ASSISTANCE COMMISSION		\$1,030,119	\$0	\$1,030,119
DEPARTMENT OF HEALTH AND HUMAN SERVICES				
93.041	SPECIAL PROGRAMS FOR THE AGING-TITLE VII, CHAPTER 3-PROGRAMS FOR PREVENTION OF ELDER ABUSE, NEGLECT, AND EXPLOITATION	\$100	\$37,996	\$38,096
93.042	SPECIAL PROGRAMS FOR THE AGING-TITLE VII, CHAPTER 2-LONG TERM CARE OMBUDSMAN SERVICES FOR OLDER INDIVIDUALS	\$95,315	\$71,316	\$166,631
93.043	SPECIAL PROGRAMS FOR THE AGING-TITLE III, PART D-DISEASE PREVENTION AND HEALTH PROMOTION SERVICES	\$0	\$233,305	\$233,305
93.048	SPECIAL PROGRAMS FOR THE AGING-TITLE IV AND TITLE II - DISCRETIONARY PROJECTS	\$99,616	\$564,401	\$664,017
93.052	NATIONAL FAMILY CAREGIVER SUPPORT, TITLE III, PART E	\$16,537	\$1,249,790	\$1,266,327
93.069	PUBLIC HEALTH EMERGENCY PREPAREDNESS	\$1,914,118	\$3,207,356	\$5,121,474
93.070	ENVIRONMENTAL PUBLIC HEALTH AND EMERGENCY RESPONSE	\$106,189	\$0	\$106,189
93.071	MEDICARE ENROLLMENT ASSISTANCE PROGRAM	\$26,071	\$273,428	\$299,499
93.073	BIRTH DEFECTS AND DEVELOPMENTAL DISABILITIES - PREVENTION AND SURVEILLANCE	\$23,525	\$0	\$23,525
93.079	COOPERATIVE AGREEMENTS TO PROMOTE ADOLESCENT HEALTH THROUGH SCHOOL-BASED HIV/STD PREVENTION AND SCHOOL-BASED SURVEILLANCE	\$(686)	\$25,235	\$24,549
93.090	GUARDIANSHIP ASSISTANCE	\$4,509,128	\$0	\$4,509,128
93.092	AFFORDABLE CARE ACT (ACA) PERSONAL RESPONSIBILITY EDUCATION PROGRAM	\$198	\$126,129	\$126,327
93.103***	FOOD AND DRUG ADMINISTRATION-RESEARCH	\$1,924,451	\$20,889	\$1,945,340
93.104	COMPREHENSIVE COMMUNITY MENTAL HEALTH SERVICES FOR CHILDREN WITH SERIOUS EMOTIONAL DISTURBANCES (SED)	\$224,363	\$1,343,320	\$1,567,683
93.110	MATERNAL AND CHILD HEALTH FEDERAL CONSOLIDATED PROGRAMS	\$105,417	\$89,796	\$195,213
93.116	PROJECT GRANTS AND COOPERATIVE AGREEMENTS FOR TUBERCULOSIS CONTROL PROGRAMS	\$176,807	\$0	\$176,807
93.121****	ORAL DISEASES AND DISORDERS RESEARCH	\$39,061	\$0	\$39,061
93.127	EMERGENCY MEDICAL SERVICES FOR CHILDREN	\$132,975	\$0	\$132,975
93.130	COOPERATIVE AGREEMENTS TO STATES/TERRITORIES FOR THE COORDINATION AND DEVELOPMENT OF PRIMARY CARE OFFICES	\$160,687	\$0	\$160,687

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FEDERAL GRANTOR LISTING
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FEDERAL ASSISTANCE LISTING/ GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	FEDERAL PROGRAM EXPENDITURES	AMOUNT PASSED THROUGH TO SUBRECIPIENTS	TOTAL FEDERAL EXPENDITURES
93.136	INJURY PREVENTION AND CONTROL RESEARCH AND STATE AND COMMUNITY BASED PROGRAMS	\$3,205,688	\$5,833,515	\$9,039,203
93.150	PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS (PATH)	\$0	\$337,715	\$337,715
COVID 93.155	COVID-19 - RURAL HEALTH RESEARCH CENTERS	\$0	\$131,434	\$131,434
93.165	GRANTS TO STATES FOR LOAN REPAYMENT	\$0	\$608,500	\$608,500
93.191	GRADUATE PSYCHOLOGY EDUCATION	\$329,709	\$0	\$329,709
93.197	CHILDHOOD LEAD POISONING PREVENTION PROJECTS, STATE AND LOCAL CHILDHOOD LEAD POISONING PREVENTION AND SURVEILLANCE OF BLOOD LEVELS IN CHILDREN	\$357,527	\$0	\$357,527
93.213***	RESEARCH AND TRAINING IN COMPLEMENTARY AND INTEGRATIVE HEALTH	\$4,364	\$0	\$4,364
93.217	FAMILY PLANNING SERVICES	\$1,714,332	\$0	\$1,714,332
93.235	TITLE V STATE SEXUAL RISK AVOIDANCE EDUCATION (TITLE V STATE SRAE) PROGRAM	\$2,119	\$369,122	\$371,241
93.236	GRANTS TO STATES TO SUPPORT ORAL HEALTH WORKFORCE ACTIVITIES	\$98,171	\$483,614	\$581,785
93.243	SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES PROJECTS OF REGIONAL AND NATIONAL SIGNIFICANCE	\$625,238	\$7,034,068	\$7,659,306
COVID 93.243	COVID-19 - SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES PROJECTS FOR REGIONAL AND NATIONAL SIGNIFICANCE	\$82,313	\$490,563	\$572,876
93.247	ADVANCED NURSING EDUCATION WORKFORCE GRANT PROGRAM	\$636,442	\$0	\$636,442
93.251	EARLY HEARING DETECTION AND INTERVENTION	\$87,573	\$86,999	\$174,572
93.262	OCCUPATIONAL SAFETY AND HEALTH PROGRAM	\$(340)	\$0	\$(340)
93.264**	NURSE FACULTY LOAN PROGRAM (NFLP)	\$119,405	\$0	\$119,405
93.268	IMMUNIZATION COOPERATIVE AGREEMENTS	\$1,799,275	\$441,534	\$2,240,809
COVID 93.268	COVID-19 - IMMUNIZATION COOPERATIVE AGREEMENTS	\$1,561,416	\$2,621,199	\$4,182,615
93.270	VIRAL HEPATITIS PREVENTION AND CONTROL	\$381,854	\$336,140	\$717,994
93.279***	DRUG ABUSE AND ADDICTION RESEARCH PROGRAMS	\$1,332,110	\$0	\$1,332,110
93.283	CENTERS FOR DISEASE CONTROL AND PREVENTION INVESTIGATIONS AND TECHNICAL ASSISTANCE	\$(34)	\$0	\$(34)
93.301	SMALL RURAL HOSPITAL IMPROVEMENT GRANT PROGRAM	\$0	\$266,240	\$266,240
93.310***	TRANS-NIH RESEARCH PROJECT	\$31,490	\$0	\$31,490
93.319	OUTREACH PROGRAMS TO REDUCE THE PREVALENCE OF OBESITY IN HIGH RISK RURAL AREAS	\$623,649	\$18,441	\$642,090
93.323	EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)	\$3,212,361	\$50,333	\$3,262,694
COVID 93.323	COVID-19 - EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC)	\$5,695,761	\$5,275,173	\$10,970,934
93.324	STATE HEALTH INSURANCE ASSISTANCE PROGRAM	\$90,861	\$347,848	\$438,709
93.336	BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM	\$531,274	\$0	\$531,274
93.342**	HEALTH PROFESSIONS STUDENT LOANS, INCLUDING PRIMARY CARE LOANS AND LOANS FOR DISADVANTAGED STUDENTS (HPSL/PCL/LDS)	\$6,934,145	\$0	\$6,934,145
93.350	NATIONAL CENTER FOR ADVANCING TRANSLATIONAL SCIENCES	\$9,519	\$0	\$9,519
93.354	PUBLIC HEALTH EMERGENCY RESPONSE: COOPERATIVE AGREEMENT FOR EMERGENCY RESPONSE: PUBLIC HEALTH CRISIS RESPONSE	\$0	\$(22,627)	\$(22,627)
COVID 93.354	COVID-19 - PUBLIC HEALTH EMERGENCY RESPONSE: COOPERATIVE AGREEMENT FOR EMERGENCY RESPONSE: PUBLIC HEALTH CRISIS RESPONSE	\$0	\$5,953,775	\$5,953,775
93.364**	NURSING STUDENT LOANS (NSL)	\$719,876	\$0	\$719,876
93.366	STATE ACTIONS TO IMPROVE ORAL HEALTH OUTCOMES AND PARTNER ACTIONS TO IMPROVE ORAL HEALTH OUTCOMES	\$194,583	\$150,937	\$345,520
93.367	FLEXIBLE FUNDING MODEL - INFRASTRUCTURE DEVELOPMENT AND MAINTENANCE FOR STATE MANUFACTURING FOOD REGULATORY PROGRAMS	\$206,100	\$0	\$206,100
93.387	NATIONAL AND STATE TOBACCO CONTROL PROGRAM	\$499,854	\$1,043,676	\$1,543,530
93.391	ACTIVITIES TO SUPPORT STATE, TRIBAL, LOCAL AND TERRITORIAL (STLT) HEALTH DEPARTMENT RESPONSE TO PUBLIC HEALTH OR HEALTHCARE CRISES	\$122,638	\$0	\$122,638
COVID 93.391	COVID-19 - ACTIVITIES TO SUPPORT STATE, TRIBAL, LOCAL AND TERRITORIAL (STLT) HEALTH DEPARTMENT RESPONSE TO PUBLIC HEALTH OR HEALTHCARE CRISES	\$635,761	\$4,571,342	\$5,207,103
93.393***	CANCER CAUSE AND PREVENTION RESEARCH	\$347,108	\$0	\$347,108
93.395***	CANCER TREATMENT RESEARCH	\$444	\$0	\$444
93.413	THE STATE FLEXIBILITY TO STABILIZE THE MARKET GRANT PROGRAM	\$16,538	\$0	\$16,538
93.421	STRENGTHENING PUBLIC HEALTH SYSTEMS AND SERVICES THROUGH NATIONAL PARTNERSHIPS TO IMPROVE AND PROTECT THE NATION'S HEALTH	\$0	\$7,238	\$7,238
93.426	THE NATIONAL CARDIOVASCULAR HEALTH PROGRAM	\$767,823	\$661,879	\$1,429,702
93.434	EVERY STUDENT SUCCEEDS ACT/PRESCHOOL DEVELOPMENT GRANTS	\$131,809	\$2,538,462	\$2,670,271
93.436	WELL-INTEGRATED SCREENING AND EVALUATION FOR WOMEN ACROSS THE NATION (WISEWOMAN)	\$74,803	\$99,896	\$174,699
93.493	CONGRESSIONAL DIRECTIVES	\$353,797	\$488,041	\$841,838
COVID 93.499	COVID-19 - LOW INCOME HOUSEHOLD WATER ASSISTANCE PROGRAM	\$2,154,220	\$0	\$2,154,220
93.556	MARYLEE ALLEN PROMOTING SAFE AND STABLE FAMILIES	\$621,657	\$1,671,790	\$2,293,447
93.558	TEMPORARY ASSISTANCE FOR NEEDY FAMILIES	\$86,102,392	\$21,388,880	\$107,491,272
93.560	PAYMENTS TO TERRITORIES - ADULTS	\$(6,705)	\$0	\$(6,705)
93.563	CHILD SUPPORT ENFORCEMENT	\$25,357,351	\$0	\$25,357,351
93.566	REFUGEE AND ENTRANT ASSISTANCE STATE/REPLACEMENT DESIGNEE ADMINISTERED PROGRAMS	\$18,420	\$199,376	\$217,796
93.568	LOW-INCOME HOME ENERGY ASSISTANCE	\$18,535,026	\$16,149,367	\$34,684,393
93.569	COMMUNITY SERVICES BLOCK GRANTS	\$258,093	\$7,776,430	\$8,034,523
93.586	STATE COURT IMPROVEMENT PROGRAM	\$354,791	\$0	\$354,791
93.590	COMMUNITY-BASED CHILD ABUSE PREVENTION GRANTS	\$51,395	\$234,857	\$286,252
93.597	GRANTS TO STATES FOR ACCESS AND VISITATION PROGRAMS	\$94,970	\$0	\$94,970
93.599	CHAFEE EDUCATION AND TRAINING VOUCHERS PROGRAM (ETV)	\$297,169	\$66,963	\$364,132

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93.600	HEAD START AND HEAD START CLUSTER	\$78,165	\$77,138	\$155,303
93.603	ADOPTION AND LEGAL GUARDIANSHIP INCENTIVE PAYMENTS	\$2,615,385	\$62,499	\$2,677,884
93.630	DEVELOPMENTAL DISABILITIES BASIC SUPPORT AND ADVOCACY GRANTS	\$343,046	\$501,784	\$844,830
	STATE PLANNING GRANTS FOR QUALIFYING COMMUNITY-BASED MOBILE CRISIS INTERVENTION SERVICES	\$192,582	\$0	\$192,582
93.643	CHILDREN'S JUSTICE GRANTS TO STATES	\$181,166	\$29,712	\$210,878
93.645	STEPHANIE TUBBS JONES CHILD WELFARE SERVICES PROGRAM	\$1,653,820	\$0	\$1,653,820
93.658	FOSTER CARE TITLE IV-E	\$78,379,338	\$259,522	\$78,638,860
93.659	ADOPTION ASSISTANCE	\$79,586,079	\$59,411	\$79,645,490
	COVID-19 - EMERGENCY GRANTS TO ADDRESS MENTAL AND SUBSTANCE USE DISORDERS DURING COVID-19	\$0	\$626,231	\$626,231
COVID 93.665	SOCIAL SERVICES BLOCK GRANT	\$21,614,800	\$0	\$21,614,800
93.667	CHILD ABUSE AND NEGLECT STATE GRANTS	\$46,958	\$109,950	\$156,908
	FAMILY VIOLENCE PREVENTION AND SERVICES/DOMESTIC VIOLENCE SHELTER AND SUPPORTIVE SERVICES	\$92	\$1,720,345	\$1,720,437
	COVID-19 - FAMILY VIOLENCE PREVENTION AND SERVICES/DOMESTIC VIOLENCE SHELTER AND SUPPORTIVE SERVICES	\$0	\$1,169,292	\$1,169,292
COVID 93.671	JOHN H. CHAFEE FOSTER CARE PROGRAM FOR SUCCESSFUL TRANSITION TO ADULTHOOD	\$2,442,254	\$2,074,428	\$4,516,682
	COVID-19 - JOHN H. CHAFEE FOSTER CARE PROGRAM FOR SUCCESSFUL TRANSITION TO ADULTHOOD	\$596,923	\$(842,473)	\$(245,550)
COVID 93.674	MENTAL AND BEHAVIORAL HEALTH EDUCATION AND TRAINING GRANTS	\$903,872	\$0	\$903,872
	PPHF: BREAST AND CERVICAL CANCER SCREENING OPPORTUNITIES FOR STATES, TRIBES AND TERRITORIES SOLELY FINANCED BY PREVENTION AND PUBLIC HEALTH FUNDS	\$(1)	\$0	\$(1)
93.744	ELDER ABUSE PREVENTION INTERVENTION PROGRAM	\$285,837	\$33,200	\$319,037
93.747	COVID-19 - ELDER ABUSE PREVENTION INTERVENTION PROGRAM	\$122,202	\$329,636	\$451,838
COVID 93.747	CHILDREN'S HEALTH INSURANCE PROGRAM	\$93,385,388	\$0	\$93,385,388
93.767	OPIOID STR	\$7,772,109	\$50,391,509	\$58,163,618
93.788	MONEY FOLLOWS THE PERSON REBALANCING DEMONSTRATION	\$2,000,903	\$2,155,553	\$4,156,456
93.791	ORGANIZED APPROACHES TO INCREASE COLORECTAL CANCER SCREENING SECTION 223 DEMONSTRATION PROGRAMS TO IMPROVE COMMUNITY MENTAL HEALTH SERVICES	\$479,661	\$201,125	\$680,786
93.800	HEART AND VASCULAR DISEASES RESEARCH	\$563,132	\$0	\$563,132
93.829	LUNG DISEASES RESEARCH	\$0	\$8,437,826	\$8,437,826
93.837***	BLOOD DISEASES AND RESOURCES RESEARCH	\$71,898	\$0	\$71,898
93.838***	TRANSLATION AND IMPLEMENTATION SCIENCE RESEARCH FOR HEART, LUNG, BLOOD DISEASES, AND SLEEP DISORDERS	\$940	\$0	\$940
93.839	ACL CENTERS FOR INDEPENDENT LIVING, RECOVERY ACT	\$225,513	\$0	\$225,513
93.840***	ACL CENTERS FOR INDEPENDENT LIVING, RECOVERY ACT	\$220,818	\$0	\$220,818
93.844	EXTRAMURAL RESEARCH PROGRAMS IN THE NEUROSCIENCES AND NEUROLOGICAL DISORDERS	\$1,690	\$0	\$1,690
93.847***	ALLERGY AND INFECTIOUS DISEASES RESEARCH	\$84,391	\$0	\$84,391
93.853***	BIOMEDICAL RESEARCH AND RESEARCH TRAINING (NOTE 5)	\$1,147,123	\$0	\$1,147,123
93.859***	CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	\$264,955	\$0	\$264,955
93.865***	AGING RESEARCH	\$37,023	\$0	\$37,023
93.866***	VISION RESEARCH	\$270,845	\$27,323	\$298,168
93.870	MATERNAL, INFANT AND EARLY CHILDHOOD HOME VISITING GRANT	\$1,060,239	\$4,764,039	\$5,824,278
93.879	MEDICAL LIBRARY ASSISTANCE	\$1,000	\$0	\$1,000
93.889	NATIONAL BIOTERRORISM HOSPITAL PREPAREDNESS PROGRAM	\$219,513	\$970,571	\$1,190,084
COVID 93.889	COVID-19 - NATIONAL BIOTERRORISM HOSPITAL PREPAREDNESS PROGRAM	\$27,013	\$0	\$27,013
	CANCER PREVENTION AND CONTROL PROGRAMS FOR STATE, TERRITORIAL AND TRIBAL ORGANIZATIONS	\$1,726,590	\$171,207	\$1,897,797
93.898	RURAL HEALTH CARE SERVICES OUTREACH, RURAL HEALTH NETWORK DEVELOPMENT AND SMALL HEALTH CARE PROVIDER QUALITY IMPROVEMENT	\$173,370	\$569,169	\$742,539
93.912	GRANTS TO STATES FOR OPERATION OF STATE OFFICES OF RURAL HEALTH	\$151,346	\$18,255	\$169,601
93.913	HIV CARE FORMULA GRANTS	\$4,831,642	\$2,357,790	\$7,189,432
93.917	HIV PREVENTION ACTIVITIES HEALTH DEPARTMENT BASED RESEARCH, TREATMENT AND EDUCATION PROGRAMS ON LYME DISEASE IN THE UNITED STATES	\$653,481	\$3,206	\$656,687
93.940	HUMAN IMMUNODEFICIENCY VIRUS (HIV)/ACQUIRED IMMUNODEFICIENCY VIRUS SYNDROME (AIDS) SURVEILLANCE	\$10,428	\$0	\$10,428
93.942***	COOPERATIVE AGREEMENTS TO SUPPORT STATE-BASED SAFE MOTHERHOOD AND INFANT HEALTH INITIATIVE PROGRAMS	\$280,648	\$0	\$280,648
93.944	BLOCK GRANTS FOR COMMUNITY MENTAL HEALTH SERVICES	\$282,621	\$0	\$282,621
93.946	BLOCK GRANTS FOR COMMUNITY MENTAL HEALTH SERVICES	\$409,035	\$3,485,882	\$3,894,917
93.958	COVID-19 - BLOCK GRANTS FOR COMMUNITY MENTAL HEALTH SERVICES	\$173,626	\$4,390,232	\$4,563,858
COVID 93.958	BLOCK GRANTS FOR PREVENTION AND TREATMENT OF SUBSTANCE ABUSE	\$660,141	\$5,898,101	\$6,558,242
93.959	COVID-19 - BLOCK GRANTS FOR PREVENTION AND TREATMENT OF SUBSTANCE ABUSE	\$241,698	\$3,933,220	\$4,174,918
COVID 93.959	COAL MINERS RESPIRATORY IMPAIRMENT TREATMENT CLINICS AND SERVICES CENTERS FOR DISEASE CONTROL AND PREVENTION COLLABORATION WITH ACADEMIA TO STRENGTHEN PUBLIC HEALTH	\$71,437	\$1,386,205	\$1,457,642
93.965	SEXUALLY TRANSMITTED DISEASES (STD) PREVENTION AND CONTROL GRANTS	\$488,415	\$0	\$488,415
93.967	COVID-19 - SEXUALLY TRANSMITTED DISEASES (STD) PREVENTION AND CONTROL GRANTS	\$720,706	\$0	\$720,706
COVID 93.977	COOPERATIVE AGREEMENTS FOR DIABETES CONTROL PROGRAMS	\$350	\$43,813	\$44,163
93.977	PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT	\$543,282	\$450,103	\$993,385

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93.994	MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT TO THE STATES	\$4,263,800	\$2,373,932	\$6,637,732
AGING CLUSTER				
93.044	SPECIAL PROGRAMS FOR THE AGING-TITLE III, PART B-GRANTS FOR SUPPORTIVE SERVICES AND SENIOR CENTERS	\$75,736	\$2,278,744	\$2,354,480
93.045	SPECIAL PROGRAMS FOR THE AGING-TITLE III, PART C-NUTRITION SERVICES	\$391,476	\$3,946,446	\$4,337,922
93.053	NUTRITION SERVICES INCENTIVE PROGRAM	\$0	\$1,285,734	\$1,285,734
	TOTAL AGING CLUSTER	\$467,212	\$7,510,924	\$7,978,136
CCDF CLUSTER				
93.575	CHILD CARE AND DEVELOPMENT BLOCK GRANT	\$27,525,497	\$15,852,774	\$43,378,271
COVID 93.575	COVID-19 - CHILD CARE AND DEVELOPMENT BLOCK GRANT	\$17,698,160	\$2,934,710	\$20,632,870
93.596	CHILD CARE MANDATORY AND MATCHING FUNDS OF THE CHILD CARE AND DEVELOPMENT FUND	\$17,132,789	\$2,367,169	\$19,499,958
	TOTAL CCDF CLUSTER	\$62,356,446	\$21,154,653	\$83,511,099
MEDICAID CLUSTER				
93.775	STATE MEDICAID FRAUD CONTROL UNITS	\$1,647,222	\$0	\$1,647,222
93.777	STATE SURVEY AND CERTIFICATION OF HEALTH CARE PROVIDERS AND SUPPLIERS (TITLE XVIII) MEDICARE	\$4,836,674	\$0	\$4,836,674
93.778	MEDICAL ASSISTANCE PROGRAM	\$4,070,874,131	\$2,901,294	\$4,073,775,425
	TOTAL MEDICAID CLUSTER	\$4,077,358,027	\$2,901,294	\$4,080,259,321
COVID-19 - A MULTICENTER, ADAPTIVE, RANDOMIZED, BLINDED CONTROLLED TRIAL OF THE SAFETY AND EFFICACY OF INVESTIGATIONAL THERAPEUTICS FOR HOSPITALIZED ADULTS WITH COVID-19				
COVID 93.U01	CLINICAL LABORATORY IMPROVEMENT AMENDMENTS	\$54,992	\$0	\$54,992
93.U02	CLINICAL LABORATORY IMPROVEMENT AMENDMENTS	\$251,477	\$0	\$251,477
COVID 93.U02	COVID-19 - CLINICAL LABORATORY IMPROVEMENT AMENDMENTS	\$1,198	\$0	\$1,198
93.U03	VITAL STATISTICS COOP PROGRAM	\$221,107	\$0	\$221,107
93.U04	HEALTH ROCKS	\$113,737	\$0	\$113,737
93.U05	MAMMOGRAPHY QUALITY ACT	\$75,854	\$0	\$75,854
93.U06	TOBACCO WORKPLAN	\$788,995	\$0	\$788,995
93.U07	CLARIFYING THE OPTIMAL APPLICATION OF SLT THERAPY (COAST) TRIAL	\$7,264	\$0	\$7,264
93.U08	RECOVER INITIATIVE	\$805,637	\$0	\$805,637
93.U09	THE CONTINUUM OF CARE IN HOSPITALIZED PATIENTS WITH OPIOID USE DISORDER AND INFECTIOUS COMPLICATIONS OF DRUG USE (CHOICE)	\$278,774	\$0	\$278,774
93.U10	COLLEGIATE RECOVERY PROGRAM	\$48,076	\$0	\$48,076
93.U11	CDC STRENGTHENING US PUBLIC HEALTH INFRASTRUCTURE WORKFORCE AND DATA SYSTEMS PROJECT PHMC	\$28,653	\$0	\$28,653
93.U12	ENUMERATION AT BIRTH	\$56,350	\$0	\$56,350
93.U13	MYELOID-DERIVED SUPPRESSOR CELLS EXPRESSING MYELOPEROXIDASE DIRECTLY INHIBIT ADAPTIVE IMMUNE CELLS LIMITING IMMUNOTHERAPY IN MELANOMA	\$42,530	\$0	\$42,530
COVID 93.U14	COVID-19 - ADAPTIVE PLATFORM TREATMENT TRIAL FOR OUTPATIENTS WITH COVID-19	\$16,516	\$0	\$16,516
COVID 93.U15	COVID-19 - ACTIV-3B (TESICO) FOR HOSPITALIZED PATIENTS WITH ARDS ASSOCIATED WITH COVID-19	\$160,891	\$0	\$160,891
TOTAL DEPARTMENT OF HEALTH AND HUMAN SERVICES		\$4,634,631,119	\$228,889,695	\$4,863,520,814
CORPORATION FOR NATIONAL AND COMMUNITY SERVICE				
94.003	AMERICORPS STATE COMMISSIONS SUPPORT GRANT	\$367,217	\$0	\$367,217
94.006	AMERICORPS STATE AND NATIONAL	\$28,302	\$5,218,627	\$5,246,929
94.009	TRAINING AND TECHNICAL ASSISTANCE	\$241,789	\$0	\$241,789
94.013	AMERICORPS VOLUNTEERS IN SERVICE TO AMERICA	\$0	\$35,000	\$35,000
94.021	AMERICORPS VOLUNTEER GENERATION FUND	\$6,720	\$77,611	\$84,331
TOTAL CORPORATION FOR NATIONAL AND COMMUNITY SERVICE		\$644,028	\$5,331,238	\$5,975,266
EXECUTIVE OFFICE OF THE PRESIDENT				
95.001	HIGH INTENSITY DRUG TRAFFICKING AREAS PROGRAM (NOTE 5)	\$774,076	\$0	\$774,076
95.010	CONGRESSIONAL DIRECTIVES	\$224,636	\$0	\$224,636
TOTAL EXECUTIVE OFFICE OF THE PRESIDENT		\$998,712	\$0	\$998,712
SOCIAL SECURITY ADMINISTRATION				
96.001	SOCIAL SECURITY DISABILITY INSURANCE AND DISABILITY INSURANCE/SSI CLUSTER	\$21,656,251	\$0	\$21,656,251
TOTAL SOCIAL SECURITY ADMINISTRATION		\$21,656,251	\$0	\$21,656,251
DEPARTMENT OF HOMELAND SECURITY				
97.008	SOCIAL SECURITY - WORK INCENTIVES PLANNING AND ASSISTANCE PROGRAM	\$11,663	\$1,680,285	\$1,691,948
97.012	BOATING SAFETY FINANCIAL ASSISTANCE	\$1,156,030	\$0	\$1,156,030
97.023	COMMUNITY ASSISTANCE PROGRAM STATE SUPPORT SERVICES ELEMENT (CAP-SSSE)	\$199,750	\$338	\$200,088
97.036	DISASTER GRANTS - PUBLIC ASSISTANCE (PRESIDENTIALLY DECLARED DISASTERS)	\$10,837,120	\$39,093,664	\$49,930,784
COVID 97.036	COVID-19 - DISASTER GRANTS - PUBLIC ASSISTANCE (PRESIDENTIALLY DECLARED DISASTERS)	\$10,358,127	\$16,113,722	\$26,471,849
97.039	HAZARD MITIGATION GRANT	\$432,746	\$5,504,591	\$5,937,337
97.041	NATIONAL DAM SAFETY PROGRAM	\$92,511	\$0	\$92,511
97.042	EMERGENCY MANAGEMENT PERFORMANCE GRANTS	\$1,817,142	\$1,494,182	\$3,311,324
97.044	ASSISTANCE TO FIREFIGHTERS GRANT	\$40,460	\$0	\$40,460

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97.045	COOPERATING TECHNICAL PARTNERS	\$1,364,061	\$0	\$1,364,061
97.047	BRIC: BUILDING RESILIENT INFRASTRUCTURE AND COMMUNITIES	\$53,318	\$53,147	\$106,465
COVID 97.050	COVID-19 - PRESIDENTIAL DECLARED DISASTER ASSISTANCE TO INDIVIDUALS AND HOUSEHOLDS - OTHER NEEDS	\$3,750	\$0	\$3,750
97.052	EMERGENCY OPERATIONS CENTERS	\$253,175	\$0	\$253,175
97.067	HOMELAND SECURITY GRANT PROGRAM	\$417,341	\$1,830,992	\$2,248,333
97.088	DISASTER ASSISTANCE PROJECTS	\$155,714	\$0	\$155,714
97.137	STATE AND LOCAL CYBERSECURITY GRANT PROGRAM TRIBAL CYBERSECURITY GRANT PROGRAM	\$13,769	\$0	\$13,769
<u>TOTAL DEPARTMENT OF HOMELAND SECURITY</u>		<u>\$27,206,677</u>	<u>\$65,770,921</u>	<u>\$92,977,598</u>
<u>U.S AGENCY FOR INTERNATIONAL DEVELOPMENT</u>				
98.012	USAID DEVELOPMENT PARTNERSHIPS FOR UNIVERSITY COOPERATION AND DEVELOPMENT	\$134,847	\$0	\$134,847
<u>TOTAL U.S AGENCY FOR INTERNATIONAL DEVELOPMENT</u>		<u>\$134,847</u>	<u>\$0</u>	<u>\$134,847</u>
<u>TOTAL EXPENDITURES OF FEDERAL AWARDS</u>		<u>\$7,272,874,088</u>	<u>\$1,282,430,876</u>	<u>\$8,555,304,964</u>

* HIGHWAY PLANNING AND CONSTRUCTION CLUSTER, TOTAL STATE OF WEST VIRGINIA EXPENDITURES \$796,436,350 TOTAL SUBRECIPIENT EXPENDITURES \$4,398,762 AND TOTAL FEDERAL EXPENDITURES \$800,835,112.

** STUDENT FINANCIAL ASSISTANCE CLUSTER, TOTAL STATE OF WEST VIRGINIA EXPENDITURES \$480,639,036 TOTAL SUBRECIPIENT EXPENDITURES \$0 AND TOTAL FEDERAL EXPENDITURES \$480,639,036.

*** RESEARCH AND DEVELOPMENT CLUSTER, TOTAL STATE OF WEST VIRGINIA EXPENDITURES \$19,378,755, TOTAL SUBRECIPIENT EXPENDITURES \$12,287,585, AND TOTAL FEDERAL EXPENDITURES \$31,666,340.

The accompanying notes are an integral part of this schedule.

**STATE OF WEST VIRGINIA
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE FISCAL YEAR ENDED JUNE 30, 2024**

NOTE 1. BASIS OF ACCOUNTING

The Schedule of Expenditures of Federal Awards (the Schedule) has been prepared on the cash basis of accounting. The federal awards are listed in the Schedule under the federal agency supplying the award. The individual Assistance Listing numbers are listed first, then clusters, and then federal contract numbers. The federal program number followed by U** and a two-digit number are used if the Assistance Listing number is not available.

The Schedule includes noncash items such as Food Stamps (Assistance Listing number 10.551), State Administrative Expense for Child Nutrition (Assistance Listing number 10.560), and Donation of Federal Surplus Personal Property (Assistance Listing number 39.003). All items are valued based on amounts as established by the federal grantor agency.

NOTE 2. INDIRECT COST RATE

Per Uniform Guidance 2 CFR § 200.510(b)(6), auditees are required to disclose whether they elect to use the 10 percent de minimis cost rate that 2 CFR§ 200.414(f) allows for nonfederal entities that have never received a negotiated indirect cost rate. The State does not elect to use the 10 percent de minimis cost rate.

NOTE 3. LOANS OUTSTANDING

Loans outstanding as of June 30, 2024, with continuing compliance requirements, are as follows:

<u>Assistance</u>		
<u>Listing Number</u>	<u>Name of Program</u>	<u>Ending Balance</u>
COVID 11.307	COVID-19 – Economic Adjustment Assistance	\$ 5,017,222
COVID 21.027	COVID-19 – Coronavirus State and Local Fiscal Recovery Funds	98,622,209
84.038	Federal Perkins Loan (FPL) – Federal Capital Contributions	6,981,047
93.264	Nurse Faculty Loan Program (NFLP)	91,476
93.342	Health Professions Student Loans, Including Primary Care Loans and Loans for Disadvantaged Students (HPSL/PCL/LDS)	6,380,600
93.364	Nursing Student Loans (NSL)	<u>604,788</u>
	Total Loans Outstanding	<u>\$ 117,697,342</u>

STATE OF WEST VIRGINIA
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE FISCAL YEAR ENDED JUNE 30, 2024

NOTE 4. REPORTING ENTITY

The Schedule includes various departments, agencies, boards and commissions governed by the legislature, judiciary and/or constitutional officers of the State of West Virginia (the State). The reporting entity also includes the State's institutions of public higher education. Certain institutions of higher education within the State maintain separate research corporations. These corporations receive various federal awards for research and development and other programs. Each of the research corporations has a separate audit performed in accordance with the Uniform Guidance, and accordingly, a separate submission has been made (see Note 8).

The Schedule does not include federal funds received and expended by certain independent authorities and other organizations included in the reporting entity under the criteria of the Governmental Accounting Standards Board, as described in Note 1 to the State's basic financial statements published in the Annual Comprehensive Financial Report for the fiscal year ended June 30, 2024. The West Virginia Housing Development Fund, West Virginia Water Development Authority, West Virginia Drinking Water Treatment Revolving Loan Fund, and the West Virginia Water Pollution Control Revolving Fund, which are discretely presented component units and proprietary funds, elected to have their own single audit; therefore, their expenditures of federal awards are excluded from the State's schedule of expenditures of federal awards. This component unit and proprietary fund are required to submit their own single audit report to the federal audit clearinghouse (see Note 8).

NOTE 5. INDIRECT/PASS-THROUGH FEDERAL FUNDS

The following grants have expenditures reported on the SEFA and are indirect or pass-through funds from various other agencies:

The United States Office of Drug Control Policy provides funds to the Laurel County Fiscal Court of London, Kentucky. A portion of these funds are passed through from the Fiscal Court to the West Virginia State Police with pass-through entity identifying numbers HDTA17 and HDTA23.

The West Virginia Research Corporation passed funds to the West Virginia School of Osteopathic Medicine for Assistance Listing Number 93.859 with pass-through entity identifying numbers 12-303-WVSOM-7 and 12-303-WVSOM, and also to Shepherd University for Assistance Listing Number 43.008 with pass-through identifying number 91-175C, 91-175C-SU, 91-175C-SU-2, and 91-175C-SU-3. The West Virginia Research Corporation also passed funds to the West Virginia Geological and Economic Survey for

**STATE OF WEST VIRGINIA
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE FISCAL YEAR ENDED JUNE 30, 2024**

Assistance Listing Number 81.089 with pass-thru identifying numbers 19-553-WVGES and MM000400539.

The Marshall University Research Corporation passed funds to the West Virginia School of Osteopathic Medicine for Assistance Listing Number 93.859 with pass-through identifying numbers P2301256, P2400982, and P2301291. The Marshall University Research Corporation also passed funds to Shepherd University for Assistance Listing Number 93.859 with pass-through identifying numbers 5P20GM103434-23.

The Battelle Research Institute passed funds to the West Virginia Geological and Economic Survey for Assistance Listing Number 81.089 with pass-through identifying numbers 779375 and 000844343.

NOTE 6. UNEMPLOYMENT INSURANCE PROGRAM (UI) (ASSISTANCE LISTING NUMBER 17.225 AND COVID-19 17.225)

The State receives federal funds for administrative purposes. State unemployment taxes must be deposited to a state account in the Federal Unemployment Trust Fund, used only to pay benefits under the federally approved state law. State UI funds as well as federal funds are included on the Schedule.

The following schedule provides a breakdown of the state and federal portions of the total expended under Assistance Listing number 17.225 and COVID-19 17.225:

	<u>Beginning Balance July 1, 2023</u>		<u>Receipts</u>		<u>Expenditures</u>		<u>Ending Balance June 30, 2024</u>
State UI Funds	\$ (853,829)	\$	16,688,427	\$	15,866,325	\$	(31,727)
Federal UI Funds	<u>14,366</u>		<u>163,794,528</u>		<u>160,435,989</u>		<u>3,372,905</u>
Total	<u>\$ (839,463)</u>	<u>\$</u>	<u>180,482,955</u>	<u>\$</u>	<u>176,302,314</u>	<u>\$</u>	<u>3,341,178</u>

NOTE 7. APPROVED PROJECT WORKSHEETS

The State incurred eligible expenditures in prior years and the Federal Emergency Management Agency (FEMA) approved the State's project worksheets in FY 2024. The State recorded eligible expenditures of \$7,359,932 in Assistance Listing 97.036 on this year's SEFA.

**STATE OF WEST VIRGINIA
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE FISCAL YEAR ENDED JUNE 30, 2024**

NOTE 8. COMPONENT UNITS / PROPRIETARY FUND

The following is a summary of federal awards at the various component units and a proprietary fund that have separate Uniform Guidance audits and submissions. These awards have been excluded from the State's Schedule.

West Virginia Housing Development Fund

West Virginia University Research Corporation

Marshall University Research Corporation

West Virginia State University Research and Development Corporation

West Virginia Drinking Water Treatment Revolving Loan Fund

West Virginia Water Pollution Control Revolving Fund

West Virginia Water Development Authority

***SCHEDULE
OF FINDINGS
AND
QUESTIONED
COSTS***

State of West Virginia

Schedule of Findings and Questioned Costs

For the Year Ended June 30, 2024

Section I – Summary of Auditor’s Results

Financial Statements

Type of report the auditor issued on whether the financial statements audited were prepared in accordance with GAAP: Unmodified, with reference to other auditors

Internal control over financial reporting:

Material weakness(es) identified? **Yes** X **No**

Significant deficiency(ies) identified? **Yes** X **None reported**

Noncompliance material to financial statements noted? **Yes** X **No**

Federal Awards

Internal control over major Federal programs:

Material weakness(es) identified? X **Yes** **No**

Significant deficiency(ies) identified? X **Yes** **None reported**

Type of auditor’s report issued on compliance for major Federal programs: Unmodified, except for the following which are Qualified:

- Supplemental Nutrition Assistance Program (SNAP Cluster)
- Child Nutrition Cluster
- Unemployment Insurance
- COVID-19 Coronavirus State and Local Fiscal Recovery Funds
- Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)
- Foster Care Title IV-E
- Research and Development Cluster

Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)? X **Yes** **No**

Identification of Major Federal Programs:

Assistance Listing Number(s)	Name of Federal Program or Cluster
10.551/10.561/COVID-19 10.561	Supplemental Nutrition Assistance Program (SNAP Cluster)
10.553/10.555/10.556/10.559/10.582	Child Nutrition Cluster
14.228/COVID-19 14.228	Community Development Block Grants/State’s Program and Non-Entitlement Grants in Hawaii
15.252	Abandoned Mine Land Reclamation (AMLR)

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

Identification of Major Federal Programs: (continued)

Assistance Listing Number(s)	Name of Federal Program or Cluster
17.225	Unemployment Insurance
20.205	Highway Planning and Construction
COVID-19 21.027	COVID-19 Coronavirus State and Local Fiscal Recovery Funds
23.003	Appalachian Development Highway System
84.010	Title I Grants to Local Educational Agencies
84.007/84.033/84.038/84.063/84.268/ 84.379/84.408/93.264/93.342/93.364	Student Financial Assistance Cluster
COVID-19 84.425C,D,J,R,U,V,W	COVID-19 Education Stabilization Fund
10.202/10.203/10.207/10.215/10.310/ 12.300/12.431/15.808/15.945/43.008/ 47.049/47.070/47.076/47.08366.716/ 81.057/81.086/81.089/93.103/93.121/ 93.213/93.279/93.310/93.393/93.395/ 93.837/93.838/93.840/93.847/93.853/ 93.855/93.859/93.865/93.866/93.867/ 93.942	Research and Development Cluster
93.323/COVID-19 93.323	Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)
93.558	Temporary Assistance for Needy Families
93.568	Low-Income Home Energy Assistance
93.575/COVID-19 93.575/93.596	Child Care and Development Fund (CCDF Cluster)
93.658	Foster Care Title IV-E
93.659	Adoption Assistance
93.767	Children’s Health Insurance Program
93.775/93.777/93.778	Medicaid Cluster
93.788	Opioid STR
97.036/COVID-19 97.036	Disaster Grants – Public Assistance (Presidentially Declared Disasters)

Dollar threshold used to distinguish between Type A and Type B programs: \$25,665,914

Auditee qualified as low-risk auditee? Yes X No

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

Section II – Financial Statement Findings and Questioned Costs

None identified.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

Section III – Federal Award Findings and Questioned Costs

2024–001 Department of Human Services (DoHS) Information System and Related Business Process Controls

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Agriculture Supplemental Nutrition Assistance Program (SNAP Cluster) Grant Award 1WV400401 Grant Award 1WV430459 Grant Award 1WV430469	10.551/10.561/ COVID-19 10.561
	U.S. Department of Health and Human Services Temporary Assistance for Needy Families (TANF) Grant Award 2301WVTANF Grant Award 2401WVTANF	93.558
	Low-Income Home Energy Assistance Grant Award 2201WVLIEI Grant Award 2301WVLIEE Grant Award 2301WVLIEI Grant Award 2301WVLIEA Grant Award 2401WVLIEA Grant Award 2401WVLIEI	93.568
	Child Care and Development Fund (CCDF Cluster) Grant Award 2301WVCCDF Grant Award 2301WVCCDM Grant Award 2301WVCCDD Grant Award 2401WVCCDF Grant Award 2401WVCCDM Grant Award 2401WVCCDD	93.575/COVID-19 93.575/93.596
	Children’s Health Insurance Program (CHIP) Grant Award 2205WV5021 Grant Award 2305VA3002 Grant Award 2305WV5021 Grant Award 2405WV5021	93.767
	Medicaid Cluster Grant Award 2205WV5MAP Grant Award 2205WV5ADM Grant Award 2305WV5MAP	93.775/93.777/93.778

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-001 Department of Human Services (DoHS) Information System and Related Business Process Controls (continued)

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	Grant Award 2305WV5ADM Grant Award 2405WV5MAP Grant Award 2405WV5ADM	
	Opioid STR Grant Award 6H79TI083313-02M004 Grant Award 1H79TI085744-01 Grant Award 5H79TI085744-02	93.788

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): 2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Condition: The Family and Children Tracking System (FACTS) and Recipient Automated Payment Information Data System (RAPIDS) systems did not effectively implement access management controls due to the following:

Family and Children Tracking System (FACTS): West Virginia Department of Human Services (DoHS) operates a wide variety of computer applications, many of which affect Federal and State programs’ data. Our review of the information system controls noted that adequate segregation of duties does not exist for the FACTS information system. Certain users have the ability to both create and approve cases.

Additionally, no supervisory review is required for provider payment information input into the system. Furthermore, the active user listing provided was unable to be comprehensively reconciled to the UAR performed for FACTS.

Recipient Automated Payment Information Data System (RAPIDS): Our testing of the controls surrounding eligibility determination noted that adequate segregation of duties does not exist for the RAPIDS system. In addition, no supervisory review is required for case information input into the system. Further, it was noted that approval of disbursements only occurs at the batch level, which does not allow the approver to review each transaction individually.

Additionally, RAPIDS did not complete a comprehensive UAR and did not implement separation of duties during UAR to ensure supervisors were unable to review their own access.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-001 Department of Human Services (DoHS) Information System and Related Business Process Controls (continued)

Cause: FACTS management was unable to provide an accurate listing of users with access to the system who were included in the UAR.

Additionally, RAPIDS management does not verify profiles are appropriate for all users during the UAR. The PATH FARAPIDS UAR does not have a process in place for providing secondary supervisory approval, which allows for supervisors to review and approve of their own access.

Controls have not been implemented over the segregation of duties within RAPIDS and FACTS. Furthermore, management indicated that a lack of personnel resources contributes to the improper segregation of duties issue.

Effect or Potential Effect: Without a complete and comprehensive user access review, FACTS and RAPIDS users may have continued, unauthorized access to system resources.

Without proper segregation of duties or adequate detect controls, the ability exists for certain information system users to create and approve cases and demand payments within the FACTS and RAPIDS applications. Information can be input into the FACTS and RAPIDS applications or modified within the applications without supervisory review, which could lead to payments being made to ineligible applicants, for the improper amount, or for an improper length of time.

Without proper segregation of duties or adequate detect controls, the ability exists for case workers to input unsupported information into an applicant’s eligibility calculation within RAPIDS. Further, without supervisory review at the transactional level, disbursements for unallowable costs or activities could occur.

Questioned Costs: \$0

Context: Total Federal expenditures for these programs can be located in the Schedule of Expenditures of Federal Awards.

The table below identifies the Federal programs and compliance requirements impacted.

Federal Program	System	Compliance Requirements Impacted
Supplemental Nutrition Assistance Program (SNAP Cluster)	RAPIDS	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Special Tests and Provisions – ADP System for SNAP
Temporary Assistance for Needy Families	RAPIDS	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility, Special Tests and Provisions – Penalty for Failure to Comply with Work Verification Plan and Penalty for Refusal to Work

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-001 Department of Human Services (DoHS) Information System and Related Business Process Controls (continued)

Federal Program	System	Compliance Requirements Impacted
Low-Income Home Energy Assistance	RAPIDS	Eligibility, Reporting
Child Care Development Fund (CCDF Cluster)	FACTS	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility
CHIP	RAPIDS	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility, Level of Effort
Medicaid Cluster	RAPIDS	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility, Special Tests and Provisions
Opioid STR	FACTS	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Period of Performance

Identification as a Repeat Finding: This is a repeat of prior year findings 2023-002 and 2022-001.

Recommendation: Appropriate separation of duties should be implemented to ensure supervisors are not the sole approvers of their own continued access.

We recommend that access to various FACTS and RAPIDS system applications be restricted to a limited number of users. Controls should be established to ensure that an individual is limited to either creating or approving cases or payments. A detect control should be implemented that would require a review of all individual cases and payments with the same request and approval worker to ensure that cases and payments created and approved were appropriate.

Further, we recommend that a formal review process be implemented to ensure that information input into FACTS and RAPIDS is properly reviewed by authorized individuals prior to payment.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-002 Department of Human Services (DoHS) - Information Technology General Controls – WVPATH

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Services Foster Care Title IV-E Grant Award 2301WVFOST Grant Award 2401WVFOST	93.658
	Adoption Assistance Grant Award 2301WVADPT Grant Award 2401WVADPT	93.659
	Children’s Health Insurance Program (CHIP) Grant Award 2205WV5021 Grant Award 2305VA3002 Grant Award 2305WV5021 Grant Award 2405WV5021	93.767
	Medicaid Cluster Grant Award 2205WV5MAP Grant Award 2205WV5ADM Grant Award 2305WV5MAP Grant Award 2305WV5ADM Grant Award 2405WV5MAP Grant Award 2405WV5ADM	93.775/93.777/93.778

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): 2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Condition: The Department of Human Services (DoHS) People’s Access to Help (PATH) system did not effectively implement access and change management controls based on the following:

- WV PATH Child Welfare (WV PATH CW) and WV PATH Family Assistance (WV PATH FA) were unable to provide a complete and accurate listing of all new hires, modified users, and terminated users for their systems.
- RAPIDS, WV PATH CW, and WV PATH FA did not complete a comprehensive user access review.
- WV PATH CW does not track documentation detailing validation of infrastructure patches which do not directly involve code deployment changes.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-002 Information Technology General Controls – WVPATH (continued)

- WV PATH FA management did not implement separation of duties during UAR and supervisors reviewed their own access.

Cause: The WV PATH system does not contain a record of new hires, modified users, or terminated users because the WV PATH system cannot maintain personnel data in systems also maintaining customer benefit information.

The WV PATH UAR does not have a process in place for providing secondary supervisory approval.

The WV PATH UAR does not verify profiles are appropriate for all users and not all users with access to the WV PATH system were included in the annual UAR.

The WV PATH system does not have established procedures or requirements to officially document validation of infrastructure patches in non-production environments.

Effect or Potential Effect: There are ineffective internal controls over logical access and change management for the WV PATH application. As a result, the WV PATH application cannot be relied on for the audit period.

Questioned Costs: \$0

Context: Total Foster Care Title IV-E expenditures were \$78,638,860 for the year ended June 30, 2024.
Total Adoption Assistance expenditures were \$79,645,490 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is a repeat of prior year finding 2023-003.

Recommendation: Management should ensure documentation of user access statuses is accurately tracked for the WV PATH application.

Management should ensure that a review of WV PATH user access is performed on a periodic basis (e.g., annually) to ensure user access rights remain consistent with user job responsibilities. Review procedures should be performed for all users with access, including those with privileged access, to the WV PATH application to determine access appropriateness. Appropriate separation of duties should be implemented to ensure supervisors are not the sole approvers of their own continued access. In addition, management should ensure that adequate documentation is maintained to provide evidence of the review.

A formal, documented process should be implemented to comprehensively capture authorization, testing, and production migration approvals for change requests to the WV PATH application and supporting infrastructure. This documentation should allow for an audit trail of all program changes ensuring that changes were appropriately authorized and administered.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-003 MMIS User Access Review

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Services Children’s Health Insurance Program (CHIP)	93.767
	Grant Award 2205WV5021	
	Grant Award 2305VA3002	
	Grant Award 2305WV5021	
	Grant Award 2405WV5021	
	Medicaid Cluster	93.775/93.777/93.778
	Grant Award 2205WV5MAP	
	Grant Award 2205WV5ADM	
	Grant Award 2305WV5MAP	
	Grant Award 2305WV5ADM	
	Grant Award 2405WV5MAP	
	Grant Award 2405WV5ADM	
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”	
Condition:	The user access review (UAR) for the West Virginia Medicaid Management Information System (WV MMIS) did not include timely and appropriate follow-up actions for two users identified as requiring follow-up actions.	
Cause:	WV MMIS did not perform timely follow-up actions and ensure completion of actions following the UAR were conducted appropriately.	
Effect or Potential Effect:	Not conducting a complete and comprehensive user access review, MMIS incurs the risk that users may have continued unauthorized access to system resources.	
Questioned Costs:	\$0	
Context:	Total Medicaid Federal expenditures were \$4,080,259,321 for June 30, 2024. Total CHIP Federal expenditures were \$93,385,388 for June 30, 2024.	
Identification as a Repeat Finding:	This is not a repeat finding.	
Recommendation:	WV MMIS management should ensure UAR follow-up actions are performed in a timely manner.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-003 MMIS User Access Review (continued)

**Views of
Responsible
Officials:**

Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-004 Schedule of Expenditures of Federal Awards

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	Department of Agriculture Agriculture and Food Research Initiative (AFRI)	10.310
	Department of the Interior U.S. Geological Survey Research and Data Collection Cooperative Research and Training Programs – Resources of the National Park System	15.808 15.945
	National Science Foundation Integrative Activities STEM Education	47.083 47.076
	Environmental Protection Agency Research, Development, Monitoring, Public Education, Outreach, Training, Demonstrations, and Studies	66.716
	Department of Energy University Coal Research	81.057
	Department of Health and Human Services Oral Diseases and Disorders Research Research and Training in Complementary and Integrative Health Drug Abuse and Addiction Research Programs Trans-NIH Research Project Cancer Cause and Prevention Research Cancer Treatment Research Heart and Vascular Diseases Research Lung Diseases Research Translation and Implementation Science Research for Heart, Lung, Blood Diseases, and Sleep Disorders Diabetes, Digestive, and Kidney Diseases Extramural Research Extramural Research Programs in the Neurosciences and Neurological Disorders Aging Research Vision Research Research, Treatment and Education Programs on Lyme Disease in the United States	93.121 93.213 93.279 93.310 93.393 93.395 93.837 93.838 93.840 93.847 93.853 93.866 93.867 93.942

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-004 Schedule of Expenditures of Federal Awards (continued)

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
<p>Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):</p>	<p>Department of Homeland Security Disaster Grants – Public Assistance (Presidentially Declared Disasters)</p>	<p>97.036</p>
<p>Condition:</p>	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).</p> <p>The Uniform Guidance 2 CFR section 200.510 states, “(b) Schedule of expenditures of Federal awards. The auditee must also prepare a schedule of expenditures of Federal awards (SEFA) for the period covered by the auditee’s financial statements which must include the total Federal awards expended as determined in accordance with §200.502 Basis for determining Federal awards expended.”</p> <p>Various agencies did not properly identify their Federal awards as part of the Research and Development Cluster.</p> <p>Various R&D awards had the wrong assistance listing identified on the SEFA.</p> <p>In addition, we noted cash on hand balance under the Disaster Grant – Public Assistance (Presidentially Declared Disasters) at the Division of Highways (the Division) on the SEFA for fiscal year 2024. Management identified approximately \$10 million of Federal expenditures that were not recorded on the SEFA in multiple prior years.</p>	
<p>Cause:</p>	<p>The internal controls over the SEFA reporting processes at the state agency level were not operating effectively to ensure management identified and classified awards as part of the R&D Cluster on the SEFA.</p> <p>Appropriate internal controls were not in place at the Division to identify if Federal expenditures were recorded on the SEFA appropriately for the Disaster Grant – Public Assistance (Presidentially Declared Disasters) program.</p>	
<p>Effect or Potential Effect:</p>	<p>The Department did not properly identify and report R&D awards as part of the R&D Cluster on the SEFA and ensure the appropriate assistance listing was presented.</p> <p>Disaster Grant – Public Assistance (Presidentially Declared Disasters) Federal expenditures may be misstated.</p>	
<p>Questioned Costs:</p>	<p>\$0</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-004 Schedule of Expenditures of Federal Awards (continued)

Context: Total R&D Cluster originally reported on the SEFA was \$16,763,569 for fiscal 2024, the revised R&D Cluster reported on the SEFA is \$31,366,340. Management corrected the final SEFA.
Total Disaster Grant – Public Assistance (Presidentially Declared Disasters) expenditures reported on the SEFA were \$ 76,402,633 for fiscal 2024.

Identification as a Repeat Finding: This is not a repeat finding.

Recommendation: We recommend that management at the state agency level be provided guidance on recording R&D Cluster awards on the SEFA and the SEFA be reviewed and approved by supervising personnel.
We recommend the Division review federal expenditures incurred throughout the fiscal year to ensure Disaster Grant – Public Assistance (Presidentially Declared Disasters) expenditures are properly recorded on the SEFA.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-005 Internal Controls Over Subrecipient Monitoring

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Services Temporary Assistance for Needy Families Grant Award 2401WVTANF Grant Award 2301WVTANF	93.558
	Child Care and Development Fund (CCDF Cluster) Grant Award G2401WVCCDF Grant Award G2301WVCCDF	93.575/COVID-19 93.575/93.596
	Opioid STR Grant Award 1H79TI085744-01 Grant Award 5H79TI085744-02 Grant Award 6H79TI083313-02M004	93.788
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”	
Condition:	During our internal control testing of subrecipient monitoring, we determined that the subrecipient risk assessment performed did not clearly conclude the level of risk assessed (Low, Medium, High) for each subrecipient.	
Cause:	The internal controls over subrecipient monitoring are not designed sufficiently to require a conclusion to be reached on a subrecipient’s risk assessment to determine the level of monitoring required to be performed.	
Effect or Potential Effect:	Subrecipients may not be properly risk assessed, therefore impacting the type and amount of monitoring that would be performed in the future.	
Questioned Costs:	\$0	
Context:	The Federal expenditures and subrecipient expenditures for the Opioid STR program for the fiscal year ended June 30, 2024, were \$58,163,618 and \$50,391,509, respectively. The Federal expenditures and subrecipient expenditures for the Child Care and Development Fund (CCDF Cluster) for the fiscal year ended June 30, 2024, were \$83,511,099 and \$21,154,653, respectively.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-005 Internal Controls Over Subrecipient Monitoring (continued)

The Federal expenditures and subrecipient expenditures for Temporary Assistance for Needy Families (TANF) for the fiscal year ended June 30, 2024, were \$107,491,272 and \$21,388,880, respectively.

Identification as a Repeat Finding: This is a repeat of prior year findings 2023-004 and 2022-041.

Recommendation: We recommend that management review its internal controls over the process to perform the risk assessment and conclude on the level of risk and monitoring required.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–006 Special Tests and Provisions – ADP System for SNAP

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Agriculture Supplemental Nutrition Assistance Program (SNAP Cluster) Grant Award 1WV400401 Grant Award 1WV430459 Grant Award 1WV430469	10.551/10.561/ COVID-19 10.561
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>7 CFR section 272.10 requires that State agencies “sufficiently automate their SNAP operations and computerize their systems for obtaining, maintaining, utilizing, and transmitting information concerning SNAP.” This includes: (1) processing and storing all case file information necessary for eligibility determination and benefit calculation, identifying specific elements that affect eligibility, and notifying the certification unit of cases requiring notices of disposition, adverse action and mass change, and expiration; (2) providing an automatic cutoff of participation for households that have not been recertified at the end of their certification period by reapplying and being determined eligible for a new period; and (3) generating data necessary to meet Federal issuance and reconciliation reporting requirements.</p>	
Condition:	<p>The Department of Human Services (DoHS) uses the Recipient Automated Payment Information Data System (RAPIDS) as its Automated Data Processing (ADP) system for SNAP. Our testing of the controls surrounding eligibility determination noted that no independent review and approval is required in RAPIDS for case information input by the case worker. Further, it was noted that review and approval of disbursements only occurs at the batch level, which does not allow the independent reviewer to review each transaction individually. Data integrity is critical for the automation SNAP operations. Due to limitations of the ADP system for SNAP, the auditor was unable to conclude whether the State’s ADP system for SNAP (i.e., RAPIDS) was in compliance with requirements of 7 CFR section 272.10.</p>	
Cause:	<p>Controls within the RAPIDS system are not designed to sufficiently protect the integrity of data input into the system.</p>	
Effect or Potential Effect:	<p>The information related to the operations of the SNAP Cluster may not be appropriately maintained, processed or transmitted by the ADP system.</p>	
Questioned Costs:	<p>\$0</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-006 Special Tests and Provisions – ADP System for SNAP (continued)

Context: Total Federal expenditures for the SNAP Cluster were \$576,918,984 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is a repeat of prior year findings 2023-005 and 2022-002.

Recommendation: We recommend that management establish the appropriate segregation of duties related to the review and approval of eligibility applications, RAPIDS ADP system, for SNAP.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-007 Transparency Act Reporting

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
<p>Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):</p>	<p>U.S. Department of Agriculture Child Nutrition Cluster</p>	<p>10.553/10.555/ 10.556/10.559/10.582</p>
<p>Condition:</p>	<p>2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>Under the requirements of the Federal Funding Accountability and Transparency Act (Pub. L. No. 109-282) (Transparency Act) that are codified in 2 CFR Part 170, “unless the auditee is exempt as provided in paragraph d. of this award term, the auditee must report each action that equals or exceeds \$30,000 in Federal funds for a subaward to a non-Federal entity or Federal agency no later than the end of the month following the month in which the obligation was made.” Recipients of grants or cooperative agreements are required to report first-tier subawards of \$30,000 or more to the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS) per submission instructions posted at http://www.fsr.gov.</p> <p>The West Virginia Department of Education is a prime recipient of funding for the Child Nutrition Cluster and made first tier subawards of greater than \$30,000 but did not file any of the necessary Federal Funding Accountability and Transparency Act (FFATA) reports.</p>	
<p>Cause:</p>	<p>Policies and procedures and internal controls were not in place to ensure compliance with the Transparency Act.</p>	
<p>Effect or Potential Effect:</p>	<p>West Virginia Department of Education management did not report the necessary FFATA reports for first tier subawards over \$30,000 to the FFATA Subaward Reporting System.</p>	
<p>Questioned Costs:</p>	<p>\$0</p>	
<p>Context:</p>	<p>Total subrecipient expenditures for the Child Nutrition Cluster subject to FFATA reporting were \$165,480,997 for the year ended June 30, 2024.</p> <p>Total Federal expenditures for the Child Nutrition Cluster were \$175,522,970 for the year ended June 30, 2024.</p>	
<p>Identification as a Repeat Finding:</p>	<p>This is a repeat of prior year findings 2023-007 and 2022-004.</p>	
<p>Recommendation:</p>	<p>We recommend that West Virginia Department of Education management take immediate action to ensure compliance with the reporting requirements of the FFATA.</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-007 Transparency Act Reporting (continued)

**Views of
Responsible
Officials:**

Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-008 Transparency Act Reporting

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Housing and Urban Development Community Development Block Grants/State's 14.228/COVID-19 Program and Non-Entitlement Grants in Hawaii	14.228
	Grant Award B16DL540001 #2	
	Grant Award B16DC540001	
	Grant Award B17DC540001	
	Grant Award B18DC540001	
	Grant Award B19DC540001	
	Grant Award B20DC540001	
	Grant Award B20DW540001	
	Grant Award B21DC540001	
	Grant Award B22DC540001	
	Grant Award B23DC540001	

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):

2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Under the requirements of the Federal Funding Accountability and Transparency Act (Pub.L. No. 109-282) (Transparency Act) that are codified in 2 CFR Part 170, “unless the auditee is exempt as provided in paragraph d. of this award term, the auditee must report each action that equals or exceeds \$30,000 in Federal funds for a subaward to a non-Federal entity or Federal agency no later than the end of the month following the month in which the obligation was made.” Recipients of grants or cooperative agreements are required to report first-tier subawards of \$30,000 or more to the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS) per submission instructions posted at <http://www.fsr.gov>.

2 CFR 200.211 requires that a Federal agency must include specific pieces of information within each Federal award, including a Federal Award Date. As defined in 2 CFR 200.1, the term Federal Award Date refers to “the date when the authorized official of the Federal agency signed (physically or digitally) the Federal award or when an alternative, consistent with the requirements of 31 U.S.C. 1501, is reached with the recipient.”

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-008 Transparency Act Reporting (continued)

Condition: During our testing of Federal Funding Accountability and Transparency Act (FFATA) Reports, it was noted that the reports were not submitted by the State of West Virginia Community Development Block Grant program management within the time frame designated in 2 CFR 170 Appendix A and included incorrect Subaward Obligation/Action Dates.

Transactions Tested	Subaward not Reported	Report not Timely	Subaward Amount Incorrect	Subaward Missing Key Elements
5	0	5	0	5
Dollar Amount of Transactions Tested	Subaward not Reported	Report not Timely	Subaward Amount Incorrect	Subaward Missing Key Elements
\$4,359,500	\$0	\$4,359,500	\$0	\$4,359,500

Cause: A lack of oversight and adequate review and approval of the FFATA reporting requirements by CDBG management caused the reports required for first-tier subawards over \$30,000 to not be submitted timely to the FFATA Subaward Reporting System, and to have missing/incorrect information reported.

Effect or Potential Effect: CDBG management did not report the necessary FFATA reports for first-tier subawards over \$30,000 to the FFATA Subaward Reporting System accurately or in a timely fashion.

Questioned Costs: \$0

Context: Subawards for the CDBG program included 15 subawards that totaled \$13,907,624 for the year ended June 30, 2024. The five subawards tested that were not reported to the FFATA Subaward Reporting System timely and contained incorrect key elements were \$4,359,500.

Total expenditures for the CDBG program were \$33,107,673 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is a repeat of findings 2023-008 and 2022-005.

Recommendation: CDBG management should review its internal controls over the review and approval of FFATA reports to ensure compliance with the reporting requirements of the Federal Funding Accountability and Transparency Act, which includes the timely submission of the reports and accurate information.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-009 Transparency Act Reporting

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of the Interior Abandoned Mine Land Reclamation (AMLR)	15.252
	Grant Award S16AF20058	
	Grant Award S18AF20000	
	Grant Award S19AF20000	
	Grant Award S20AF20008	
	Grant Award S20AF20094	
	Grant Award S21AF10040	
	Grant Award S22AF00013	
	Grant Award S22AF00039	
	Grant Award S23AF00013	
	Grant Award S23AF00059	
	Grant Award S23AF00107	
	Grant Award S24AF00064	
	Grant Award S24AF00032	

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):

2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Under the requirements of the Federal Funding Accountability and Transparency Act (Pub. L. No. 109-282) (Transparency Act) that are codified in 2 CFR Part 170, “unless the auditee is exempt as provided in paragraph d. of this award term, the auditee must report each action that equals or exceeds \$30,000 in Federal funds for a subaward to a non-Federal entity or Federal agency no later than the end of the month following the month in which the obligation was made.” Recipients of grants or cooperative agreements are required to report first-tier subawards of \$30,000 or more to the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS) per submission instructions posted at <http://www.fsrs.gov>.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–009 Transparency Act Reporting (continued)

Condition: For four of five subawards selected for testing, the West Virginia Department of Environmental Protection (the Department) was not in compliance with FFATA reporting requirements. The following table summarizes the exceptions noted during testing.

Transactions Tested	Subaward not Reported	Report not Timely	Subaward Amount Incorrect	Subaward Missing Key Elements
5	0	3	0	2
Dollar Amount of Transactions Tested	Subaward not Reported	Report not Timely	Subaward Amount Incorrect	Subaward Missing Key Elements
\$20,240,710	\$0	\$18,621,710	\$0	\$18,900,000

In addition, the subaward obligation/action date was reported inaccurately.

Cause: The Department does not have adequate internal controls and policies and procedures in place to ensure that subawards of \$30,000 or more are reported accurately to FSRS.

Effect or Potential Effect: The Department is not reporting accurate or timely information for first-tier subawards of \$30,000 or more causing them not to be in compliance with Federal reporting requirements.

Questioned Costs: \$0

Context: Total subrecipient expenditures for the Abandoned Mine Land Reclamation (AMLR) Grants program were \$9,188,272, for the year ended June 30, 2024.

Total Federal expenditures for the Abandoned Mine Land Reclamation (AMLR) Grants program were \$32,293,671, for the year ended June 30, 2024.

Identification as a Repeat Finding: This is a repeat of prior year finding 2023–009.

Recommendation: We recommend that the Department strengthen internal controls and policies and procedures over FFATA reporting to ensure they are in compliance with Federal reporting requirements.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-010 Subrecipient Monitoring

Identification of the Federal Program:

Federal Agency and Program Name

Assistance Listing #

U.S. Department of the Interior
 Abandoned Mine Land Reclamation (AMLR) 15.252
 Grant Award S16AF20058
 Grant Award S18AF20000
 Grant Award S19AF20000
 Grant Award S20AF20008
 Grant Award S20AF20094
 Grant Award S21AF10040
 Grant Award S22AF00013
 Grant Award S22AF00039
 Grant Award S23AF00013
 Grant Award S23AF00059
 Grant Award S23AF00107
 Grant Award S24AF00064
 Grant Award S24AF00032

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):

2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

2 CFR 200.332(a) requires that a pass-through entity “Ensure that every subaward is clearly identified to the subrecipient as a subaward and includes the following information at the time of the subaward and if any of these data elements change, include the changes in subsequent subaward modification. When some of this information is not available, the pass-through entity must provide the best information available to describe the Federal award and subaward.” Required information includes the Federal award date of award to the recipient by the Federal agency, subaward budget period start and end date, assistance listings number and title, identification of whether the award is R&D, and indirect cost rate for the Federal award (including if the de minimis rate is charged).

Condition:

For one of five subawards selected for testing for subrecipient monitoring, the West Virginia Department of Environmental Protection (the Department) did not communicate to the subrecipient the Federal award date of award, subaward budget period start and end date, assistance listings number and title, identification of whether the award is R&D, and indirect cost rate for the Federal award (including if the de minimis rate is charged).

Cause:

There are insufficient internal controls in place surrounding what information is included in the subaward.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–010 Subrecipient Monitoring (continued)

Effect or Potential Effect: The Department is not providing required information to its subrecipients and, therefore, not complying with Federal regulations.

Questioned Costs: \$0

Context: Total subrecipient expenditures for the AMLR Grants program were \$9,188,272 for the year ended June 30, 2024.

Total Federal expenditures for the AMLR Grants program were \$32,293,671 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is a repeat of prior year finding 2023–011.

Recommendation: We recommend that the Department implement written policies and procedures to ensure that the subawards include all requirements information to be communicated to subrecipients in line with Federal regulations.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–011 Internal Controls Over Information Technology – Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility, Reporting, and Special Tests and Provisions

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Labor	
	Unemployment Insurance (UI)	17.225
	Grant Award UI-38244-22-55-A-54	
	Grant Award UI-34749-20-55-A-54	
	Grant Award UI-39304-23-55-A-54	
	Grant Award UI-37257-22-55-A-54	
	Grant Award UI-9356-23-55-A-54	
	Grant Award UI-38014-22-60-A-54	
	Grant Award 24A55UI000043-01	
	Grant Award 23A60UB000083-01	
	Grant Award 23A60UB000105-01	
	Grant Award 23A60UD000023-01	

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): 2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Condition: Workforce West Virginia (WWV) did not document its periodic reviews of administrator access changes to the Automated Benefit Payment System (ABPS) or the Unemployment Compensation Tax application (UC Tax).

Employee terminations were not communicated timely to the West Virginia Office of Technology (WVOT) to remove network access or access to ABPS and UC Tax. The current process to remove terminated employees does not allow for the documentation of all applications requiring access removal.

WWV has not performed periodic disaster recovery testing for WWV owned applications.

WWV did not perform a review of the SOC report for wvOASIS and documentation did not include reviewing and determining if the required complementary user entity controls were in place. Additionally, complementary user entity controls were not in place.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–011 Internal Controls Over Information Technology – Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility, Reporting, and Special Tests and Provisions (continued)

Cause: The internal controls over the information technology processes related to access management and disaster recovery testing were not adequately designed or implemented.

Effect or Potential Effect: Unauthorized access to critical information systems may occur and not be detected or resolved in a timely manner causing WWV to be in noncompliance.
WWV may not be able to effectively respond to a disaster and recover pertinent data.

Questioned Costs: \$0

Context: Total Federal disbursements for the UI program were \$176,302,314 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is a repeat of prior year findings 2023–013 and 2022–008.

Recommendation: WWV should implement policies and procedures related to access management and disaster recovery.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–012 Reporting and Matching

Identification of the Federal Program:

Federal Agency and Program Name

Assistance Listing #

U.S. Department of Labor	
Unemployment Insurance (UI)	17.225
Grant Award UI-38244-22-55-A-54	
Grant Award UI-34749-20-55-A-54	
Grant Award UI-39304-23-55-A-54	
Grant Award UI-37257-22-55-A-54	
Grant Award UI-9356-23-55-A-54	
Grant Award UI-38014-22-60-A-54	
Grant Award 24A55UI000043-01	
Grant Award 23A60UB000083-01	
Grant Award 23A60UB000105-01	
Grant Award 23A60UD000023-01	

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):

2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Condition:

During our testing of the Employment and Training Administration ETA 2112 reports submitted, we noted management resubmitted four of the reports submitted to the U.S. Department of Labor due to errors in amounts reported.

Additionally, during our testing of the matching compliance requirement, we noted while the inputs to the calculation are reviewed monthly in conjunction with the review of the ETA 2112 reports, there is no formal review of a matching calculation to ensure compliance with the program matching requirement.

Cause:

The internal controls over the individual reporting processes were not adequately enforced.

Effect or Potential Effect:

Reports could be filed with errors or lack of supporting documentation and not be identified by management. Additionally, matching requirements may not be met and go undetected by management.

Questioned Costs:

\$0

Context:

Total Federal disbursements for the UI program were \$176,302,314 for the year ended June 30, 2024.

Identification as a Repeat Finding:

This is not a repeat finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–012 Reporting and Matching (continued)

Recommendation: We recommend that WWV implement internal controls over the report submission and matching calculation processes, to ensure each report and calculation is reviewed and approved by appropriate individuals familiar with the reporting and matching requirements to ensure that accurate information is reported.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–013 Special Tests and Provisions: UI Program Integrity – Overpayments

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
<p>Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):</p>	<p>U.S. Department of Labor Unemployment Insurance (UI) Grant Award UI-38244-22-55-A-54 Grant Award UI-34749-20-55-A-54 Grant Award UI-39304-23-55-A-54 Grant Award UI-37257-22-55-A-54 Grant Award UI-9356-23-55-A-54 Grant Award UI-38014-22-60-A-54 Grant Award 24A55UI000043-01 Grant Award 23A60UB000083-01 Grant Award 23A60UB000105-01 Grant Award 23A60UD000023-01</p>	<p>17.225</p>
<p>Condition:</p>	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>Program requirements for overpayments include the State must identify the basis for the overpayment consistent with its written procedures. An overpayment memorandum is created summarizing the details of the overpayment and submitted to UI cross-match staff or claims deputy for review. Upon review, the overpayment is established, and a Deputy Decision or WVUC-B-14-J Overpayment Determination is generated and sent to the claimant.</p> <p>WWV is not identifying the basis for overpayments consistent with its written procedures. During our testing of 40 overpayments, totaling \$358,320, we noted:</p> <ul style="list-style-type: none"> • Three instances, totaling \$22,674, where the overpayment memo was not completed. • Three instances, totaling \$47,552, where the overpayment memo was completed after the Deputy’s decision was issued. • Seven instances, totaling \$99,766, for untimely establishment of the overpayment within the ABPS system, • Five instances, totaling \$21,775, where there was no evidence of the Benefit Payment Control Department’s review of the overpayment established. 	
<p>Cause:</p>	<p>The internal controls and written procedures over the overpayment processes were not consistently implemented.</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–013 Special Tests and Provisions: UI Program Integrity – Overpayments (continued)

Effect or Potential Effect:	Overpayments could be established in error or for an incorrect amount and not be identified by management.
Questioned Costs:	\$0
Context:	Total Federal disbursements for the UI program were \$176,302,314 for the year ended June 30, 2024.
Identification as a Repeat Finding:	This is not a repeat finding.
Recommendation:	WWV should follow its internal controls, policies and procedures for establishing overpayments as designed.
Views of Responsible Officials:	Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-014 Reporting

Identification of the Federal Program:

Federal Agency and Program Name

Assistance Listing #

U.S. Department of Labor	
Unemployment Insurance (UI)	17.225
Grant Award UI-38244-22-55-A-54	
Grant Award UI-34749-20-55-A-54	
Grant Award UI-39304-23-55-A-54	
Grant Award UI-37257-22-55-A-54	
Grant Award UI-9356-23-55-A-54	
Grant Award UI-38014-22-60-A-54	
Grant Award 24A55UI000043-01	
Grant Award 23A60UB000083-01	
Grant Award 23A60UB000105-01	
Grant Award 23A60UD000023-01	

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):

2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

2 CFR 200.329 also requires the recipient monitor and report program performance by submitting reports as required by the Federal award that cover each program function and activity. As applicable, performance reports should contain information on the following: (i) a comparison of accomplishments to the objectives of the Federal award established for the reporting period, (ii) explanations on why established goals or objectives were not met; and (iii) additional information, analysis, and explanation of cost overruns or higher-than-expected unit costs.

Specifically, the WWV is required to submit periodic reporting to evaluate performance of the state’s Unemployment Insurance (UI) programs as outlined in the United States Department of Labor’s UI Report Handbook No. 401 (5th Edition 2017).

Condition:

For the Employment and Training Administration (ETA) 9050, ETA 9052, and ETA 9055 performance reports and ETA 2208A special report required to be submitted during the fiscal year, WWV was unable to provide sufficient evidence to ensure the accuracy and completeness of the data reported in key line items of the related report.

Cause:

The internal controls over information technology processes related to access management were not adequately designed or implemented for the ABPS system used in preparing performance and special reports and management did not implement additional compensating internal controls over the preparation of these reports to ensure accuracy and completeness.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-014 Reporting (continued)

Effect or Potential Effect: Reports could be filed using information that is inaccurate and incomplete.

Questioned Costs: \$0

Context: For fiscal year 2024, WWV was required to submit the following performance and special reports related to the above referenced reports:

Report Name	Number of Submissions	Number of Reports Sampled
ETA 9050	12	3
ETA 9052	12	3
ETA 9055	12	3
ETA 2208A	8	5
Total	44	14

Total financial, performance, and special reports submitted during fiscal year 2024 was 152.

Total Federal expenditures for the UI program were \$176,302,314 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is not a repeat finding.

Recommendation: We recommend WWV implement policies and procedures related to access management for its information technology systems.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–015 Special Tests and Provisions: UI Benefit Payments

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Labor Unemployment Insurance (UI)	17.225
	Grant Award UI-38244-22-55-A-54	
	Grant Award UI-34749-20-55-A-54	
	Grant Award UI-39304-23-55-A-54	
	Grant Award UI-37257-22-55-A-54	
	Grant Award UI-9356-23-55-A-54	
	Grant Award UI-38014-22-60-A-54	
	Grant Award 24A55UI000043-01	
	Grant Award 23A60UB000083-01	
	Grant Award 23A60UB000105-01	
	Grant Award 23A60UD000023-01	
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”	
Condition:	WWV was unable to provide sufficient evidence of its review to ensure the number of cases selected for Benefits Accuracy Measurement (BAM) testing during the year was in-line with the minimum requirements set by the DOL ET Handbook 395.	
Cause:	The internal controls over documenting the review and approval of the number of BAM cases sampled were not consistently implemented.	
Effect or Potential Effect:	Benefit payments could be improperly paid or denied and go undetected by management.	
Questioned Costs:	\$0	
Context:	Total benefit payments for the UI program were \$160,434,002 for the year ended June 30, 2024. Total Federal expenditures for the UI program were \$176,302,314 for the year ended June 30, 2024.	
Identification as a Repeat Finding:	This is not a repeat finding.	
Recommendation:	We recommend that WWV revise its internal controls over the documentation of the review and approval of the number of BAM cases sampled during the year to include retaining the supporting documentation.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–015 Special Tests and Provisions: UI Benefit Payments (continued)

**Views of
Responsible
Officials:**

Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–016 Special Tests and Provisions – Contractor Recoveries

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Transportation Highway Planning and Construction	20.205
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>Tennessee v. Dole 749 F.2d 331 (6th Cir. 1984) ruled that when a State recovers funds from highway contractors for project overcharges due to bid-rigging, fraud, or anti-trust violations or otherwise recovers compensatory damages, the state-aid project involved shall be credited with the state’s share of such recoveries.</p>	
Condition:	For four of the six contractor recoveries selected for testing, the credit was not appropriately credited in billings to the Federal government.	
Cause:	The Division does not have adequate internal controls and policies and procedures in place to ensure that contractor recoveries are being credited in billings to the Federal government.	
Effect or Potential Effect:	The Division is not in compliance with Federal statutes, regulations, and the terms of the conditions of the Federal award. The Federal government was overcharged for projects in which contractor recoveries were received since the recoveries were not credited back to the Federal government.	
Questioned Costs:	\$73,504 (ALN 20.205) represents the total Federal share of contractor recoveries on construction contracts that was not credited in billings to the Federal government.	
Context:	<p>We selected a sample of six contractor recoveries (\$512,189) that should have been credited to the Federal government and identified four contractor recoveries (\$73,504) that were not credited in the billings to the Federal government. Total of contractor recoveries were \$786,330 in fiscal year 2024.</p> <p>Total Federal expenditures for the Highways Planning and Construction program were \$799,207,633 for the year ended June 30, 2024.</p>	
Identification as a Repeat Finding:	This is not a repeat finding.	
Recommendation:	We recommend that the Division implement policies and procedures to ensure that all contractor recoveries are appropriately recorded in the accounting records and reflected in billings to the Federal government.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-016 Special Tests and Provisions – Contractor Recoveries (continued)

**Views of
Responsible
Officials:**

Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-017 Transparency Act Reporting

Identification of the Federal Program:

Federal Agency and Program Name	Assistance Listing #
U.S. Department of Education	
COVID-19 Education Stabilization Fund (ESF)	COVID-19 84.425U
COVID-19 ESF Section 1 – Elementary and Secondary Education	COVID-19 84.425W

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):

2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Under the requirements of the Federal Funding Accountability and Transparency Act (Pub. L. No. 109-282) (Transparency Act) that are codified in 2 CFR Part 170, “unless the auditee is exempt as provided in paragraph d. of this award term, the auditee must report each action that equals or exceeds \$30,000 in Federal funds for a subaward to a non-Federal entity or Federal agency no later than the end of the month following the month in which the obligation was made.” Recipients of grants or cooperative agreements are required to report first-tier subawards of \$30,000 or more to the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS) per submission instructions posted at <http://www.fsr.gov>.

Condition:

During our testing of Federal Funding Accountability and Transparency Act (FFATA) Reports, it was noted that one (1) report was not submitted by the West Virginia Department of Education (WVDE) and one (1) report was not submitted timely.

Transactions Tested	Subaward not Reported	Report not Timely	Subaward Amount Incorrect	Subaward Missing Key Elements
6	1	1	0	0

Dollar Amount of Transactions Tested	Subaward not Reported	Report not Timely	Subaward Amount Incorrect	Subaward Missing Key Elements
\$866,322	\$150,000	\$104,556	\$0	\$0

Cause:

Internal Operations at WVDE rely on other offices within WVDE to provide information prior to the FFATA reports being completed; however, one of the subaward agreements executed in FY 2024 exceeding the threshold for FFATA reporting purposes was not detected during the review, and as such, the required FFATA report was not submitted. Additionally, one of the subaward agreements executed in February 2022 that required FFATA report submission was

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-017 Transparency Act Reporting (continued)

missed and later detected during an internal review in October 2023 when the subaward agreement was revised.

Effect or Potential Effect: WVDE did not report or timely report the necessary FFATA report for the Education Stabilization Fund first-tier subawards over \$30,000 to the FFATA Subaward Reporting System.

Questioned Costs: \$0

Context: We tested 6 FFATA reports related to subawards with grant funding amount of \$866,332 of which 1 FFATA report was not submitted that totaled \$150,000 and 1 FFATA report amounting to \$104,556 was not submitted timely. The Federal expenditures for the Education Stabilization Fund program for the fiscal year ended June 30, 2024, were \$411,714,695.

Identification as a Repeat Finding: This is a repeat of prior year findings 2023-028 and 2022-025.

Recommendation: We recommend that WVDE strengthen internal controls and procedures over timely review with Internal Operations related to FFATA reporting to ensure it is in compliance with the Federal reporting requirements.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-018 Reporting

Identification of the Federal Program:

Federal Agency and Program Name	Assistance Listing #
U.S. Department of Education	COVID-19:
COVID-19 Education Stabilization Fund – ESF	84.425D/84.425R
COVID-19 ESF – Section 1 – Elementary and Secondary Education	84.425U/84.425V/ 84.425W
Grant Award S425R210008	
Grant Award S425D210036	
Grant Award S425U210036	
Grant Award S425V210008	
Grant Award S425D200036	

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):

2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Under the American Rescue Plan (ARP) Act and 34 CFR Part 76, grantees that receive Elementary and Secondary School Emergency Relief (ESSER) Fund and Emergency Assistance to Nonpublic Schools (EANS) Program must submit an annual performance report with data on expenditures, planned expenditures, subrecipients, and uses of funds, including for mandatory reservations.

Condition:

Management did not provide evidence of the review and approval of the annual ESSER and EANS report.

In addition, we noted one variance on the annual EANS report related to the amount of returned CRRSA funds expended by the Local Educational Agencies (LEA). We noted the reported amount on the EANS report had a variance of \$100,824 pertaining to the amount of returned CRRSA funds expended by the LEAs.

Cause:

The West Virginia Department of Education (WVDE) did not have sufficient internal controls over retaining supporting documentation of review and approval of the annual ESSER and EANS reports.

In addition, for the variance noted, management’s review and approval over the WVDE reported was not robust enough to identify that the amount reported was based on the original allocations and not based on the actual distribution of the funds and the actual expenditures incurred by the Local Educational Agencies.

Effect or Potential Effect:

ESSER and EANS reports submitted could have incorrect or inaccurate data/amounts.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–018 Reporting (continued)

Questioned Costs: \$0

Context: The Federal expenditures for the Education Stabilization Fund program for the fiscal year ended June 30, 2024, were \$411,714,695.

Identification as a Repeat Finding: This is a repeat of prior year finding 2023–029.

Recommendation: We recommend WVDE review its internal controls to require supporting documentation over the review and approval of reports is retained and also ensure accuracy of the amounts reported.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–019 Internal Controls Over Special Tests and Provisions – Child Support Non-cooperation, Penalty for Refusal to Work, and Adult Custodial Parent of Child Under Six When Child Care Not Available

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
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	U.S. Department of Health and Human Services	
	Temporary Assistance for Needy Families (TANF)	93.558
	Grant Award 2024 – 2401WVTANF	
	Grant Award 2023 – 2301WVTANF	

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): 2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Condition: The West Virginia Department of Human Services (DoHS) has policies and procedures in place surrounding the issuance and removal of sanctions; however, internal controls are not appropriately designed, and documentation is not maintained to determine that benefit sanctions were appropriately applied or removed from a case.

Questioned Costs: \$0

Context: Total Federal expenditures for TANF for the fiscal year ended June 30, 2024, were \$107,491,272.

Cause: Internal controls are not operating effectively surrounding the issuance or removal of sanctions against TANF recipients.

Effect or Potential Effect: Recipient benefits may potentially be reduced or increased in error or without appropriate cause.

Identification as a Repeat Finding: This is a repeat of prior year findings 2023–35 and 2022–027.

Recommendation: We recommend that management maintain sufficient documentation to evidence its review prior to the issuance or removal of sanctions.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–020 Special Tests and Provisions – Penalty for Refusal to Work

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Services Temporary Assistance for Needy Families (TANF) Grant Award 2024 – 2401WVTANF Grant Award 2023 – 2301WVTANF	93.558

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	<p>The State agency must maintain adequate documentation, verification, and internal control procedures to ensure the accuracy of the data used in calculating work participation rates. In so doing, it must have in place procedures to (a) determine whether its work activities may count for participation rate purposes; (b) determine how to count and verify reported hours of work; (c) identify who is a work-eligible individual; and (d) control internal data transmission and accuracy. Each State agency must comply with its HHS-approved Work Verification Plan in effect for the period that is audited. HHS may penalize the State by an amount not less than one percent and not more than five percent of the SFAG for violation of this provision (42 USC 601, 602, 607, and 609; 45 CFR sections 261.60, 261.61, 261.62, 261.63, 261.64, and 261.65).</p> <p>If an individual in a family receiving assistance refuses to engage in required work, a State must reduce assistance to the family, at least pro rata, with respect to any period during the month in which the individual so refuses or may terminate assistance. Any reduction or termination is subject to good cause or other exceptions as the State may establish (42 USC 607(e)(1); 45 CFR sections 261.13 and 261.14(a) and (b)). However, a State may not reduce or terminate assistance based on a refusal to work if the individual is a single custodial parent caring for a child who is less than 6 years of age if the individual can demonstrate the inability (as determined by the State) to obtain child care for one or more of the following reasons: (a) the unavailability of appropriate care within a reasonable distance of the individual’s work or home; (b) unavailability or unsuitability of informal child care; or (c) unavailability of appropriate and affordable formal child care (42 USC 607(e)(2); 45 CFR sections 261.15(a), 261.56, and 261.57).</p>
Condition:	For one of the 40 cases selected for testing, the client appeared to have been participating in their assigned activity. The individual should not have been included in the population of individuals not participating in their assigned activity.
Cause:	There are insufficient internal controls in place surrounding the generation and review of the population of individuals not participating in an assigned activity and caseworker data entry into the RAPIDS system.
Effect or Potential Effect:	The State of WV maybe inappropriately reducing or terminating the assistance grant of those individuals who refuse to engage in work but are subject to good cause or other exceptions established by the State. Further the State may not be able to effectively identify individuals who should or should not be subject to reductions or terminations in benefits.
Questioned Costs:	Unknown; sampling is based on qualitative case criteria not a specific transaction or payment.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–020 Special Tests and Provisions – Penalty for Refusal to Work (continued)

Context: Total Federal expenditures for TANF for the fiscal year ended June 30, 2024, were \$107,491,272.

Identification as a Repeat Finding: This is a repeat of prior year finding 2023–036.

Recommendation: We recommend that management implement policies and procedures to ensure that information in RAPIDS is complete and accurate.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–021 Special Tests and Provisions – Income Eligibility and Verification System

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	U.S. Department of Health and Human Services Temporary Assistance for Needy Families (TANF) Grant Award 2024 – 2401WVTANF Grant Award 2023 – 2301WVTANF	93.558
Condition:	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>Each state shall participate in the Income Eligibility and Verification System (IEVS) required by Section 1137 of the Social Security Act as amended. Under the State plan the State is required to coordinate data exchanges with other Federally assisted benefit programs, request and use income and benefit information when making eligibility determinations, and adhere to standardized formats and procedures in exchanging information with other programs and agencies. Specifically, the State is required to request and obtain information as follows (42 USC 1320b-7; 45CFR section 205.55): (a) wage information from the state Wage Information Collection Agency (SWICA) should be obtained for all applicants at the first opportunity following receipt of the application, and for all recipients on a quarterly basis; (b) Unemployment Compensation (UC) information should be obtained for all applicants at the first opportunity, and in each of the first three months in which the individual is receiving aid. This information should also be obtained in each of the first three months following any recipient-reported loss of employment. If an individual is found to be receiving UC, the information should be requested until benefits are exhausted; (c) all available information from the Social Security Administration (SSA) for all applicants at the first opportunity; (d) information from the U.S. Citizenship and Immigration Services and any other information from other agencies in the state or in other states that might provide income or other useful information; and (e) unearned income from the Internal Revenue Service (IRS).</p> <p>During testing of 40 TANF cases subject to IEVS, we noted the following:</p> <p>Control – For 40 of the 40 cases selected for control testing, adequate documentation of review of the data exchanges, and system matches, and review of actions taken by the caseworker when required was not provided.</p> <p>Compliance</p> <ul style="list-style-type: none"> For 12 of the 40 cases selected for testing, the recipient did not appear to be receiving WVWorks (the State of West Virginia’s TANF program) benefits. The auditor was unable to determine if these cases should have been subject to a data match under TANF. The population provided by management is a mix of all types of benefit matches (SNAP, TANF, etc.) versus just matches related to TANF. 	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–021 Special Tests and Provisions – Income Eligibility and Verification System (continued)

- For 3 of the 40 cases selected for testing, the recipient appeared to be receiving WVWorks benefits, and a data match indicating caseworker action required was noted, but no action was completed.
- For the remaining 25 of the 40 cases, the recipient appeared to be receiving WVWorks, a data match occurred, and related worker action was taken, but documentation supporting the action was not available.
- In addition, the auditor could not determine if specific action items were completed relating to individual exchange types.

Cause: The internal controls do not require documentation to be retained surrounding matches made between the information systems and actions taken after a match is made.

There are insufficient internal controls in place surrounding the generation and review of populations provided to the auditor, the Income Eligibility and Verification System matches, and the caseworker actions required within the Recipient Automated Payment Information Data System (RAPIDS).

Effect or Potential Effect: The State of WV may not be coordinating data exchanges with other Federally assisted benefit programs as required by the state plan.

Questioned Costs: Unknown; sampling is not based on an individual payment or claim.

Context: Total Federal expenditures for TANF for the fiscal year ended June 30, 2024, were \$107,491,272.

Identification as a Repeat Finding: This is a repeat of prior year findings 2023–037 and 2022–028.

Recommendation: We recommend that management implement policies and procedures to ensure that information in RAPIDS and populations are complete and accurate. In addition, we also recommend management evaluate its control over the caseworker action requirement within RAPIDS on matches related to the Income Eligibility and Verification System.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–022 Activities Allowed or Unallowed and Allowable Costs/Cost Principles

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Services Temporary Assistance for Needy Families (TANF) Grant Award 2024 – 2401WVTANF Grant Award 2023 – 2301WVTANF Grant Award 2022 – 2201WVTANF	93.558
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>2 CFR 200.403 requires costs to be necessary and reasonable for performance of the Federal award and be allocable thereto under these principles. Additionally, costs charged to the Federal award must be adequately documented.</p>	
Condition:	During the testing of 40 TANF benefit payments (\$26,495) made to individuals, adequate supporting documentation for one benefit payment (\$794) was unavailable. Due to the lack of appropriate supporting evidence, the auditor was unable to determine if the purpose and timing of the payment were allowable.	
Cause:	The internal controls over the benefit payment processes were not consistently followed, resulting in no documentation to support the benefit payment.	
Effect or Potential Effect:	As adequate documentation was not maintained for the benefit payment made to the individual, it is possible that unallowable costs could be charged to the grant.	
Questioned Costs:	\$794 (ALN 93.558, award 2201WVTANF) represents the amount of the payment to the individual where adequate supporting documentation was unavailable.	
Context:	Total Federal expenditures for TANF for the fiscal year ended June 30, 2024, were \$107,491,272.	
Identification as a Repeat Finding:	This is not a repeat finding.	
Recommendation:	We recommend that management evaluate its policies and procedures to ensure adequate documentation is maintained for all costs charged to Federal awards.	
Views of Responsible Officials:	Management concurs with the finding and has developed a plan to correct the finding.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–023 Special Tests and Provisions – Penalty for Failure to Comply With Work Verification Plan

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
<p>Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):</p>	<p>U.S. Department of Health and Human Services Temporary Assistance for Needy Families (TANF) Grant Award 2024 – 2401WVTANF Grant Award 2023 – 2301WV TANF</p>	<p>93.558</p>
<p>Condition:</p>	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).</p> <p>The state agency must maintain adequate documentation, verification, and internal control procedures to ensure the accuracy of the data used in calculating work participation rates. In so doing, it must have in place procedures to (a) determine whether its work activities may count for participation rate purposes; (b) determine how to count and verify reported hours of work; (c) identify who is a work-eligible individual; and (d) control internal data transmission and accuracy. Each state agency must comply with its HHS-approved Work Verification Plan in effect for the period that is audited. HHS may penalize the state by an amount not less than one percent and not more than five percent of the SFAG for violation of this provision (42 USC 601, 602, 607, and 609; 45 CFR sections 261.60, 261.61, 261.62, 261.63, 261.64, and 261.65).</p> <p>For two of the 40 records selected for testing, the participation hours reported to the Federal government were not consistent with the information in the case file or RAPIDS.</p> <p>For three of the 40 records selected for testing, there was no information maintained to support the participation hours for the individual/month selected.</p>	
<p>Cause:</p>	<p>Because of control deficiencies within RAPIDS the discrepancies in data elements reported and supported caused by caseworker errors were not identified and remedied.</p>	
<p>Effect or Potential Effect:</p>	<p>The auditor was unable to determine if the auditee was in compliance with the specified compliance requirement.</p>	
<p>Questioned Costs:</p>	<p>Unknown; sampling is based on the submission of data and does not correspond to a payment or transaction.</p>	
<p>Context:</p>	<p>Total Federal expenditures for TANF for the fiscal year ended June 30, 2024, were \$107,491,272.</p>	
<p>Identification as a Repeat Finding:</p>	<p>This is a repeat of prior year finding 2023-040.</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

**2024–023 Special Tests and Provisions – Penalty for Failure to Comply With Work Verification Plan
(continued)**

Recommendation: We recommend that management implement policies and procedures to ensure that information in RAPIDS is complete and accurate. In addition, we also recommend management evaluate the effectiveness of the current training programs for the TANF program to ensure adequate technical training is provided.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–024 Special Tests and Provisions – Provider Eligibility for ARP ACT Stabilization Funds

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
<p>Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):</p>	<p>U.S. Department of Health and Human Services Child Care Disaster Relief/Child Care Development Block Grant/Child Care Mandatory and Matching Funds of the Child Care Development Fund (CCDF 93.575/COVID-19 Cluster) Grant Award 2021 – 2101WVCSC6 Grant Award 2023 – 2301WVCCDD Grant Award 2023 – 2301WVCCDF</p>	<p>93.575/93.596</p>
	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p>	
	<p>According to Pub L 117-2 Sec. 2201: “To be qualified to receive ARP Act stabilization funds, a provider on the date of application for the award must either be: (1) open and available to provide child care services, or (2) closed due to public health, financial hardship, or other reasons relating to the COVID-19 public health emergency. In addition, the provider must either (1) be eligible to serve children who receive CCDF subsidies at the time of application for stabilization funds, or (2) be licensed, regulated, or registered in the state, territory, or tribe as of March 11, 2021 and meet applicable state and local health and safety requirements at the time of application for stabilization funds. In their application for stabilization funds, a child care provider must certify: a). That the provider will, when open and providing services, implement policies in line with guidance and orders from corresponding state, territorial, tribal, and local authorities and, to the greatest extent possible, implement policies in line with guidance from the CDC. b). For each employee, the provider must pay at least the same amount in weekly wages and maintain the same benefits for the duration of the stabilization funding. c). The provider will provide relief from copayments and tuition payments for the families enrolled in the provider’s program, to the extent possible, and prioritize such relief for families struggling to make either type of payment.”</p>	
<p>Condition:</p>	<p>The West Virginia Department of Human Services (DoHS) has policies and procedures in place surrounding the review and approval of provider certifications in the application for funding and review and approval of verification of eligibility criteria; however, adequate documentation to support the review was not maintained.</p> <p>In addition, 2 providers (totaling \$68,000) of the 40 providers (totaling \$1,197,180) selected for testing did not have a Provider Service Agreement that was completed.</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–024 Special Tests and Provisions – Provider Eligibility for ARP ACT Stabilization Funds (continued)

Cause:	Internal controls are not operating effectively surrounding the review and approval and completion of Provider Certifications Agreements and verification of eligibility criteria.
Effect or Potential Effect:	Providers who received ARP Act Stabilization funds may not have met the eligibility criteria or made the required certifications.
Questioned Costs:	\$68,000 (ALN COVID 93.575, award 2101WVCSC6), which is the amount of payments to providers for which a completed Provider Service Agreement could not be provided.
Context:	Total Federal expenditures for the CCDF Cluster for the fiscal year ended June 30, 2024, were \$83,511,099.
Identification as a Repeat Finding:	This is a repeat of prior year findings 2023–042 and 2022–026.
Recommendation:	We recommend that management maintain sufficient documentation to evidence its review and approval of provider certifications and eligibility criteria.
Views of Responsible Officials:	Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–2025 Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility, and Special Tests and Provisions – Payment Rate Setting and Application

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
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	U.S. Department of Health and Human Services Foster Care Title IV-E Grant Award 2301WVFOST Grant Award 2401WVFOST	93.658
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Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): 2 CFR 200.303 requires that the DoHS must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

2 CFR 1356.30(f) requires that “in order for a child care institution to be eligible for Title IV-E funding, the licensing file for the institution must contain documentation which verifies that safety considerations with respect to the staff of the institution have been addressed.”

42 USC 671(a) requires that, to be eligible for payments under the Foster Care—Title IV-E program, States “shall have a plan approved by the Secretary which provides for foster care maintenance payments.” 45 CFR section 1356.21(m)(1) adds that “the title IV-E agency must review at reasonable, specific, time-limited periods to be established by the agency the amount of the payments made for foster care maintenance ... to assure their continued appropriateness.”

Condition: We tested 40 cases (\$273,709 of disbursements to providers on behalf of children) for allowability, eligibility, and payment rate setting, and noted the following:

- For 11 of the cases, the licensing files did not include the required documentation of certain safety considerations, including criminal background checks for all adults working at the child care institution. During audit fieldwork, management obtained the required documentation related to safety considerations retained by the providers for nine of the 11 cases. The remaining two providers were determined not to be eligible foster care settings.
- For one additional case, an improper payment was made to a provider on behalf of otherwise eligible children. The provider experienced a lapse in licensing and did not have an approved contract rate in place at the time of payment.
- All disbursements to psychiatric residential treatment facilities were determined not to be eligible foster care settings.

Cause: Management indicated that the missing documentation was related to a misunderstanding of the requirement by licensing personnel, and other errors resulted from oversights by caseworkers.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–025 Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility, and Special Tests and Provisions – Payment Rate Setting and Application (continued)

Effect or Potential Effect: Improper payments were made using Federal funds.

Questioned Costs: Questioned costs total \$1,675,958 (\$455,731 – ALN 93.658, award 2301WVFOST and \$1,220,227 – ALN 93.658, award 2401WVFOST), representing:

- Payments made to two providers who did not have documentation of certain safety considerations of \$22,630;
- Payments made to one provider that experienced a lapse in licensing and did not have an approved contract rate in place at the time of payment of \$4,095; and
- All \$1,649,233 of disbursements to psychiatric residential treatment facilities that were determined not to be eligible foster care settings.

Context: Total Federal expenditures for the Foster Care Title IV-E program were \$78,638,860 for the year ended June 30, 2024, of which approximately \$52,095,543 were programmatic expenditures disbursed to providers on behalf of children.

Identification as a Repeat Finding: This finding is a partial repeat of prior year finding of 2023–049.

Recommendation: We recommend that DoHS obtain and maintain in the licensing file sufficient documentation from all providers to ensure compliance with required safety considerations. Additionally, we recommend that DoHS develop appropriate policies related to the supervision and review of provider licensing and safety consideration monitoring. We also recommend that DoHS review the current staffing and training programs to ensure sufficient staff levels are maintained and adequate technical training is provided. Further, we recommend continued monitoring and evaluation of coding and categorizations within PATH.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-026 Reporting

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Services Foster Care Title IV-E Grant Award 2301WVFOST Grant Award 2401WVFOST	93.658
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”	
	2 CFR section 200.328(c) requires that recipients of Federal funding “must submit financial reports as required by the Federal award.”	
Condition:	For one of two reports tested, the Department of Human Services (DoHS) submitted an incomplete CB-496 report.	
Cause:	The DoHS could not produce certain data related to the number of children assisted due to a transition to a new information technology application, wvPATH.	
Effect or Potential Effect:	Information reported in the CB-496 could not be supported. The information reported provided to the Federal awarding could be incomplete or inaccurate.	
Questioned Costs:	\$0	
Context:	Total Federal expenditures for Foster Care Title IV-E were \$78,638,860 for the year ended June 30, 2024.	
Identification as a Repeat Finding:	This is not a repeat finding.	
Recommendation:	We recommend that management continue to work with new IT applications to ensure necessary data can be produced for accurate and complete financial reporting.	
Views of Responsible Officials:	Management concurs with the finding and has developed a plan to correct the finding.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–027 Transparency Act Reporting

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Service Temporary Assistance for Needy Families (TANF) Grant Award 2023 – 2301WVTANF Grant Award 2024 – 2401WVTANF	93.558
	Opioid State Targeted Response (STR) Grant Award 1H79TI085744-01 Grant Award 5H79TI085744-02 Grant Award 6H79TI083313-02M004	93.788

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):

2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Under the requirements of the Federal Funding Accountability and Transparency Act (Pub. L. No. 109-282) (Transparency Act) that are codified in 2 CFR Part 170, “unless the auditee is exempt as provided in paragraph d. of this award term, the auditee must report each action that equals or exceeds \$30,000 in Federal funds for a subaward to a non-Federal entity or Federal agency no later than the end of the month following the month in which the obligation was made.” Recipients of grants or cooperative agreements are required to report first-tier subawards of \$30,000 or more to the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS) per submission instructions posted at <http://www.fsr.gov>.

Condition:

STR – We selected a sample of Federal Funding Accountability and Transparency Act (FFATA) reports and noted the following reporting errors:

Transactions Tested	Subaward not Reported	Report not Timely	Subaward Amount Incorrect	Subaward Missing Key Elements
40	1	0	0	1
Dollar Amount of Transactions Tested	Subaward not Reported	Report not Timely	Subaward Amount Incorrect	Subaward Missing Key Elements
\$20,546,274	\$62,688	\$0	\$0	\$350,000

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–027 Transparency ACT Reporting (continued)

TANF – We selected a sample of FFATA reports and noted the following reporting errors:

Transactions Tested	Subaward not Reported	Report not Timely	Subaward Amount Incorrect	Subaward Missing Key Elements
5	1	4	0	1
Dollar Amount of Tested Transactions	Subaward not Reported	Report not Timely	Subaward Amount Incorrect	Subaward Missing Key Elements
\$2,190,101	\$297,678	\$1,892,423	\$0	\$377,940

Cause: The internal controls and policies and procedures in place are not suitably designed to ensure that subawards of \$30,000 or more are being reported accurately and timely.

Effect or Potential Effect: FFATA reports are not being submitted or submitted inaccurate information or untimely for first-tier subawards of \$30,000 or more and therefore not in compliance with Federal reporting requirements.

Questioned Costs: \$0

Context: TANF – Total subawards awarded by the West Virginia Department of Education (DOE) included 13 subawards that totaled \$5,395,947 for the year ended June 30, 2024.
 Total Federal expenditures for TANF for the fiscal year ended June 30, 2024, were \$107,491,272.
 Opioid STR – Total subrecipient expenditures for Opioid STR were \$50,391,509 for the year ended June 30, 2024.
 Total Federal expenditures for Opioid STR were \$58,163,618 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is not a repeat finding.

Recommendation: We recommend that internal controls and policies and procedures over FFATA reporting be strengthened to ensure they are in compliance with Federal reporting requirements.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-028 Subrecipient Monitoring

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	U.S. Department of Health and Human Services Opioid STR Grant Award 1H79TI085744-01 Grant Award 5H79TI085744-02 Grant Award 6H79TI083313-02M004	93.788
Condition:	<p>2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>The pass-through entity is responsible for monitoring the overall performance of a subrecipient to ensure the goals and objectives of the subaward. Per 2 CFR 200.332(e)(1) a pass-through entity must “Monitor the activities of a subrecipient as necessary to ensure that the subrecipient complies with Federal statutes, regulations, and the terms and conditions of the subaward. The pass-through entity is responsible for monitoring the overall performance of a subrecipient to ensure that the goals and objectives of the subaward are achieved. In monitoring a subrecipient, a pass-through entity must: (1) Review financial and performance reports.”</p> <p>As part of the subaward agreements, subrecipients are required to submit performance reports to the State of West Virginia Department of Human Services (DoHS) monthly.</p> <p>During our testing of 10 subrecipients (\$4,230,331) we noted DoHS was unable to provide sufficient documentation of the review and approval of subrecipient performance reports submitted.</p> <p>Additionally, for four (\$742,451) of the ten subrecipients with subawards to be monitored during the year selected, DoHS was unable to provide all monthly performance reports for the subrecipient. Further, DoHS was not able to provide documentation of the follow-up with the subrecipient to obtain the required reporting.</p>	
Cause:	<p>The internal controls over subrecipient monitoring were not consistently followed, resulting in performance reports not being obtained from subrecipients, as well as no documentation of the review of performance reports received.</p>	
No Effect or Potential Effect:	<p>Subrecipients may not be adhering to program goals and objectives as outlined in the subaward agreement.</p>	
Questioned Costs:	<p>\$0</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–028 Subrecipient Monitoring (continued)

Context: Total subrecipient expenditures for the Opioid STR program were \$50,391,509 for the fiscal year ended June 30, 2024.

Total Federal expenditures for the Opioid STR program were \$58,163,618 for the fiscal year ended June 30, 2024.

Identification as a Repeat Finding: This is not a repeat finding.

Recommendation: We recommend that management review its internal controls over the documentation of the review and approval of subrecipient performance reports.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–029 Activities Allowed or Unallowed, Allowable Costs/Cost Principles and Eligibility

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Services Adoption Assistance Grant Award 2301WVADPT Grant Award 2401WVADPT	93.659
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>42 USC 673(a)(2) indicates that funds may be expended for adoption assistance subsidy payments made on behalf of eligible children, in accordance with a written and binding adoption assistance agreement. Subsidy payments are made to adoptive parents based on the need(s) of the child (i.e., developmental, cognitive, emotional, behavioral) and the circumstances of the adopting parents.</p>	
Condition:	One of the 40 cases tested for allowability and eligibility resulted in a subsidy payment in excess of the approved amount on file.	
Cause:	Management indicated that the excess payment was caused by clerical errors regarding the maintenance of documentation. Internal controls are not suitably designed to review files for adequate document maintenance prior to disbursements.	
Effect or Potential Effect:	Unallowable claims were paid using Federal funds.	
Questioned Costs:	\$669 (ALN 93.659, award 2401WVADPT) represents the subsidy payment in excess of the approved amount.	
Context:	<p>The one instance represents \$669 of adoption assistance payments out of a total sample of 40 benefit payments tested for allowability and eligibility of \$46,253.</p> <p>Total Federal expenditures for the Adoption Assistance program were \$79,645,490 for the year ended June 30, 2024.</p>	
Identification as a Repeat Finding:	This is not a repeat finding.	
Recommendation:	We recommend that DoHS implement internal controls to review all documentation maintained for eligible individuals to ensure disbursements are not made unless all required documents are on file.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–029 Activities Allowed or Unallowed, Allowable Costs/Cost Principles and Eligibility (continued)

**Views of
Responsible
Officials:**

Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–030 Activities Allowed or Unallowed and Allowable Costs/Cost Principles

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
<p>Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):</p>	<p>U.S. Department of Homeland Security Disaster Grants – Public Assistance (Presidentially Declared Disasters) Grant Award FEMA–4273-DR–WV Grant Award FEMA–4331-DR–WV Grant Award FEMA–4359-DR–WV Grant Award FEMA–4378-DR–WV Grant Award FEMA–4455-DR–WV Grant Award FEMA–4517-DR–WV Grant Award FEMA–4603-DR–WV Grant Award FEMA–4605-DR–WV Grant Award FEMA–4678-DR–WV Grant Award FEMA–4679-DR–WV</p>	<p>97.036/ COVID-19 97.036</p>
<p>Condition:</p>	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>2 CFR 200.53 defines improper payments as “any payment that should not have been made or that was made in an incorrect amount under statutory, contractual, administrative, or other legally applicable requirements.” 2 CFR 200.403 indicates that costs must “be consistent with policies and procedures that apply uniformly to both Federally-financed and other activities of the non-Federal entity” and must “be adequately documented.”</p>	
<p>Cause:</p>	<p>For 40 of the 40 payroll transactions selected for testing at the West Virginia Military Authority (the Authority), there was no documentation that the employee’s time worked was reviewed and approved. Further, for one payroll transaction, there was no supporting documentation for the number of days the employee was paid.</p>	
<p>Cause:</p>	<p>The Authority does not have adequate internal controls and policies and procedures in place to ensure all payroll transactions are reviewed and approved.</p>	
<p>Effect or Potential Effect:</p>	<p>The Authority may not identify noncompliance with Federal statutes, regulations, and terms of the conditions of the Federal award including allowability. Expenditures may be paid that are not allowable.</p>	
<p>Questioned Costs:</p>	<p>\$312 (ALN COVID-19 97.036, award FEMA–4679-DR–WV), which represents the payroll expense related to the employee paid who did not have supporting documentation.</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–030 Activities Allowed or Unallowed and Allowable Costs/Cost Principles (continued)

Context: Total payroll charged to the grant was \$2,308,364 for the year ended June 30, 2024.
Total Federal expenditures for the Disaster Grants – Public Assistance (Presidentially Declared Disasters) program was \$76,402,633 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is a repeat of prior year finding 2023–056.

Recommendation: We recommend that the Authority implement controls to ensure that expenditures are properly reviewed and approved before being charged to a Federal award.

Views of Responsible Officials: Management acknowledges the finding. See corrective action plan.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–031 Subrecipient Monitoring

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Services Epidemiology and Laboratory Capacity for Prevention and Control of Emerging Infectious Diseases (ELC) Grant Award 6 NU50CK000551	93.323/COVID -19 93.323
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	<p>2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>Per 2 CFR 200.332(c), a pass-through entity must evaluate each subrecipient’s fraud risk and risk of noncompliance with a subaward to determine the appropriate subrecipient monitoring procedures.</p>	
Condition:	We selected a sample of five subrecipient subawards (totaling \$1,426,805) executed in fiscal year 2024 and noted risk assessments were not performed for any of the subrecipients’ subawards.	
Cause:	The internal controls were not suitably designed to ensure that a risk assessment is performed for each subaward.	
Effect or Potential Effect:	Lack of performing risk assessments could potentially lead to insufficient monitoring procedures performed.	
Questioned Costs:	\$0	
Context:	<p>Total subrecipient expenditures for the ELC program were \$5,325,506 for the fiscal year ended June 30, 2024.</p> <p>Total Federal expenditures for the ELC program were \$14,233,628 for the fiscal year ended June 30, 2024.</p>	
Identification as a Repeat Finding:	This is a repeat of prior year findings 2023–004 and 2022–041.	
Recommendation:	We recommend that DoHS management review its internal controls over the risk assessment process and establish a policy to ensure that subrecipient risk assessments are timely performed.	
Views of Responsible Officials:	Management concurs with the finding and has developed a plan to correct the finding.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–032 Equipment and Real Property Management

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Services Epidemiology and Laboratory Capacity for Infectious Diseases (ELC)	93.323/ COVID-19 93.323
	Grant Award 5 NU50CK000551-05-00	
	Grant Award 6 NU50CK000551-05-01	
	Grant Award 6 NU50CK000551-05-02	
	Grant Award 6 NU50CK000551-05-03	
	Grant Award 6 NU50CK000551-05-04	
	Grant Award 6 NU50CK000551-05-05	
	Grant Award 6 NU50CK000551-05-06	
	Grant Award 6 NU50CK000551-05-07	

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): 2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

2 CFR 200.313(b) requires a state must use, manage, and dispose of equipment acquired under a Federal award in accordance with State laws and procedures.

According to State Policy, “All agencies are required to take a physical inventory once every three years, and shall have completed such physical inventory by June 30th of the relevant year. The physical inventory shall include viewing of all Reportable Assets under the agency’s jurisdiction. The head of every spending unit of State government shall, on or before July 15, of each year, make an accounting and inventory of, and file with the director, all real and personal property, and of all equipment, supplies and commodities in its possession as of the close of the last fiscal year as stated in West Virginia Code §5A-3-35.”

Condition: During our testing of Epidemiology and Laboratory Capacity for Infectious Diseases (ELC), the West Virginia Department of Health (DoH) did not provide all of the required documentation to support the physical inventory performed in fiscal year 2024. In addition, management could not demonstrate the accuracy of the listing with the net book value of all equipment purchased and disposed of using ELC grant funds.

Cause: DoH management provided the Asset Management Certification sheet that states physical inventory of all reportable assets was completed as of June 2024. However, details supporting the physical inventory performed were not provided as part of the audit. In addition, internal controls and policies and procedures over maintaining details of equipment inventory purchases and disposals of were not adequately enforced. DoH did not provide the script or query used to generate the listing of equipment specific to the ELC program or provide a reconciliation

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–032 Equipment and Real Property Management (continued)

	between the equipment listing and the fixed asset system to ensure accuracy of the equipment report.
Effect or Potential Effect:	ELC program is not in compliance with the State regulations over Equipment & Real Property Management. Equipment purchased with ELC funds may not be properly tracked or accounted for.
Questioned Costs:	\$0
Context:	Total equipment purchases for FY 2024 were \$291,424. The total net book value based on the report provided by management totaled \$2,697,764. The total expenditures for the year ended June 30, 2024 were \$14,233,628.
Identification as a Repeat Finding:	This is a repeat of prior year finding 2023–058.
Recommendation:	We recommend that DoH management follow the State’s established policies and internal control and maintain oversight of equipment management.
View of Responsible Officials:	Management concurs with the findings and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–033 Activities Allowed or Unallowed and Allowable Costs/Cost Principles

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Services Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) Grant Award 5 NU50CK000551	93.323/ COVID-19 93.323
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>2 CFR 200.403 requires costs to be necessary and reasonable for performance of the Federal award and be allocable thereto under these principles. Additionally, costs charged to the Federal award must be adequately documented.</p>	
Condition:	<p>For 40 payroll transactions (totaling \$54,160) tested, documentation supporting that the individual worked on the program was not provided for any of the samples.</p> <p>For 54 non-payroll transactions tested (totaling \$1,720,970), 22 transactions (totaling \$548,955) did not have the appropriate level of reviews performed.</p>	
Cause:	<p>The Agency did not maintain effort certifications for time worked on the program to support the payroll charges.</p> <p>For the non-payroll transactions, internal controls over the review and approval for allowability were not maintained.</p>	
Effect or Potential Effect:	<p>Due to the lack of adequate supporting documents evidencing time spent on the program, the auditor was unable to determine if the payroll expenses charged were allowable and in accordance with the Federal cost principles.</p> <p>Due to the lack of supporting documentation over the review and approval of non-payroll transactions, unallowable costs or incorrect amounts could be charged to the program.</p>	
Questioned Costs:	<p>\$54,160 (ALN 93.323, award 5 NU50CK000551) represents the total payroll transactions tested which did not have an effort certification.</p>	
Context:	<p>Total payroll expenses charged to the program were \$2,896,110. Total non-payroll expenses charged to the program were \$10,572,287.</p> <p>Total program expenditures for the year ended June 30, 2024 were \$14,233,628.</p>	
Identification as a Repeat Finding:	<p>This is not a repeat finding.</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-033 Activities Allowed or Unallowed and Allowable Costs/Cost Principles (continued)

Recommendation: We recommend that management evaluate its policies and procedures to ensure adequate documentation supporting the time spent on the program is maintained to ensure that costs charged to the Federal program are appropriate. In addition, we recommend management evaluate the process over review and approval of expenses charged to the program and ensure that individuals with the appropriate knowledge of the grant requirements review the costs for allowability.

View of Responsible Officials: Management concurs with the findings and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–034 Subrecipient Cash Management

Identification of the Federal Program:

Federal Agency and Program Name

Assistance Listing #

U.S. Department of Health and Human Services
 Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) 93.323/
 COVID-19 93.323
 Grant Award 5 NU50CK000551

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):

2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

2 CFR 200.305(b)(1) requires that the non-Federal entity must “monitor cash drawdowns by their subrecipients to ensure that the time elapsing between the transfer of Federal funds to the subrecipient and their disbursement for program purposes is minimized as required by the applicable cash management requirements in the Federal award to the recipient.”

Per DoHS policy, the Spending Unit shall limit cash advances to a subrecipient to the minimum amounts needed and be timed in accordance with the actual, immediate cash requirements of the subrecipient for carrying out the purpose of the approved program or project. The timing and amount of cash advances shall be as close as is administratively feasible to the actual disbursements by the subrecipient for direct program or project costs and the proportionate share of any allowable indirect costs.

Condition:

During our testing of 24 subrecipient payments (totaling \$1,055,380), we noted 3 subrecipient payments (totaling \$165,035) where payments to the subrecipients were in excess of their actual expenditures incurred or immediate cash needs. The supporting documentation from the subrecipients showed less expenses than the amount that had been drawn down to date on the grants, indicating subrecipients having adequate cash balances on hand at the time of the request.

Cause:

Internal controls over the review and approval of the drawdown of subrecipients’ requests and payments to subrecipients were not effective.

Effect or Potential Effect:

Cash remitted to the subrecipient is in excess of the subrecipients’ actual and immediate cash requirements for carrying out the purpose of the program.

Questioned Costs:

\$165,035 (ALN 93.323, award 5 NU50CK000551) related to subrecipient payments in excess of immediate cash needs.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-034 Subrecipient Cash Management (continued)

Context: The total subrecipient drawdowns selected for testing were \$1,055,380.
Total amount of subrecipient drawdowns for the ELC program was \$5,325,506 for the fiscal year ended June 30, 2024.

Identification as a Repeat Finding: This is a repeat of prior year finding 2023-034.

Recommendation: We recommend DoHS strengthen its internal controls over subrecipient cash management by reviewing the subrecipients' expenditures and compared to the cash requested to ensure the drawdown is appropriate and excess cash is not remitted to the subrecipient.

View of Responsible Officials: Management concurs with the findings and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-035 Reporting and Earmarking

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
<p>Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):</p>	<p>U.S. Department of the Treasury COVID-19 Coronavirus State and Local Fiscal Recovery Funds</p>	<p>COVID-19 21.027</p>
	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>The terms and conditions of the funding require the recipient to submit quarterly Project and Expenditure Reports to the U.S. Department of the Treasury (Treasury). Information required to be included in these quarterly reports includes projects funded, expenditures, obligations, and other information. Treasury’s Coronavirus State and Local Fiscal Recovery Funds Compliance and Reporting Guidance requires that “Reporting must be consistent with the definition of expenditures pursuant to 2 CFR 200.1.”</p> <p>Under the Treasury 2022 Final rule, “recipients can calculate lost revenue for the years 2020, 2021, 2022, and 2023 based on the formula provided in the 2022 Final Rule to determine the amount of State and Local Fiscal Recovery Funds that can be used for the ‘provision of government services.’ ”</p>	
<p>Condition:</p>	<p>For one of the quarterly Project and Expenditure Reports submitted, certain costs that had been obligated but not expended were erroneously reported as current period and cumulative expenditures under the program.</p>	
	<p>Management used the incorrect amount reported in the Project and Expenditure Reports for tracking the provision of government services requirement.</p>	
<p>Cause:</p>	<p>Management misinterpreted the reporting instructions that defined current expenditures and utilized the incorrect amount in tracking the provision of government services calculations.</p>	
<p>Effect or Potential Effect:</p>	<p>Reports submitted to Treasury could be inaccurate and using the incorrect amount may lead to non-compliance related to provision of the government services requirement.</p>	
<p>Questioned Costs:</p>	<p>\$0</p>	
<p>Context:</p>	<p>Total Federal expenditures for the Coronavirus State and Local Fiscal Recovery Funds program were \$100,213,416 for the year ended June 30, 2024.</p>	
<p>Identification as a Repeat Finding:</p>	<p>This is not a repeat finding.</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-035 Reporting and Earmarking (continued)

Recommendation: We recommend that management review the reporting instructions more closely to ensure they are appropriately implemented in completing the Project and Expenditure Report and ensure the amounts used in the provision of government services requirement calculations are appropriate.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–036 Eligibility for Subrecipients

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Education Title 1 Grants to Local Educational Agencies Grant Award S010A230048	84.010
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	Section 200.303 of the Uniform Guidance states the following regarding internal control: “The non-Federal entity must: (a) Establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States or the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”	
	34 CFR 200.71(b) states that an LEA is eligible for a concentration grant if (1) the LEA is eligible for a basic grant under 34 CFR 200.71(a); and (2) the number of formula children exceeds (i) 6,500; or (ii) 15 percent of the LEA’s total population ages 5 to 17 years, inclusive.	
Condition:	During our testing of 9 counties for eligibility, we noted that one county did not meet the eligibility criteria for receipt of a concentration grant due to not having formula children of 6,500 or 15% of the LEA’s total population ages 5 to 17 years, inclusive.	
Cause:	Internal controls were not in place to ensure compliance with Title 1 eligibility.	
Effect or Potential Effect:	West Virginia Department of Education management gave a concentration grant of \$254,435 to an LEA that was not eligible to receive such grant.	
Questioned Costs:	\$254,435 (ALN 84.010, award S010A230048) represents the total subrecipient grants that were made to subrecipients that were not eligible	
Context:	Total subrecipient expenditures were \$113,507,923 for the fiscal year ended June 30, 2024. Total Federal expenditures were \$115,513,848 for Title 1 for the fiscal year ended June 30, 2024.	
Identification as a Repeat Finding:	This is not a repeat finding.	
Recommendation:	We recommend that the West Virginia Department of Education ensure that controls surrounding the eligibility process are consistently implemented.	
Views of Responsible Officials:	Management concurs with the finding and has developed a plan to correct the finding.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–037 Level of Effort and Earmarking

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Education Title 1 Grants to Local Educational Agencies Grant Award S010A230048	84.010
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”	
Condition:	<p>The West Virginia Department of Education (the Department) is responsible for performing tests to verify that the required level of effort is met. Management did not retain supporting documentation over the review and approval of the level of effort calculations.</p> <p>In addition, the Department is responsible for ensuring that the maximum limits are not exceeded for allocation of the program funds towards targeting school improvement funds and funds reserved for state administration. Management did not retain supporting documentation over the review and approval of the calculations of the limits set by the U.S Department of Education.</p>	
Cause:	The Department does not have adequate internal controls and policies and procedures in place to require supporting documentation of the review and approval of the level of effort and earmarking limits calculations.	
Effect or Potential Effect:	<p>Local education agencies (LEA) could receive grant funding while not meeting level of effort requirements.</p> <p>The Department may not be in compliance with the earmarking requirements.</p>	
Questioned Costs:	\$0	
Context:	<p>Total subrecipient expenditures were \$113,507,923 for the fiscal year ended June 30, 2024.</p> <p>Total Federal expenditures were \$115,513,848 for Title 1 for the fiscal year ended June 30, 2024.</p>	
Identification as a Repeat Finding:	This is not a repeat finding.	
Recommendation:	We recommend that the Department strengthen internal controls and policies and procedures over level of effort and earmarking requirements to ensure supporting documentation of the review and approval of the calculations is maintained.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-037 Level of Effort and Earmarking (continued)

**Views of
Responsible
Officials:**

Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-038 Reporting

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Education	10.553/10.555/ 10.556/10.559/ 10.582
	Child Nutrition Cluster	
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”	
Condition:	Management did not perform a reconciliation of the meal claim numbers reported in the Report of School Program Operations – FNS-10 and Report of Summer Food Service Program for Children – FNS-418.	
Cause:	Management had staffing issues and was not able to perform the reconciliation of the meal claim counts by category (Free, Reduced, and Paid) to the payments made to the Local Educational Agencies to ensure there are no discrepancies in meal claim numbers for fiscal 2024.	
Effect or Potential Effect:	FNS-10 and FNS-418 reports submitted could have incorrect or inaccurate data or amounts.	
Questioned Costs:	\$0	
Context:	Total Federal expenditures for the Child Nutrition Cluster were \$175,522,970 for the year ended June 30, 2024.	
Identification as a Repeat Finding:	This is not a repeat finding.	
Recommendation:	We recommend that West Virginia Department of Education management enforce the existing policies and procedures and retain documentation over review and approval of reports prior to submission.	
Views of Responsible Officials:	Management concurs with the finding and has developed a plan to correct the finding.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-039 Cash Management and Internal Control Over Financial Reporting

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
<p>Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):</p>	<p>Student Financial Assistance Cluster U.S. Department of Education</p>	<p>84.063/84.268</p>
<p>Condition:</p>	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>Cash Management – Schools participating in the Direct Loan program are required to perform monthly Direct Loan reconciliations (34 CFR 685.300(b)(5)). Electronic Announcements DL-22-07 and GENERAL-22-86 explain that a school must reconcile the funds it received from G5 with actual disbursement records the school submitted to Common Origination and Disbursement (COD). Each month, COD sends the school a School Account Statement, which is the U.S. Department of Education’s (ED) official record of the school’s cash and disbursement records and identifies the difference between the net draws from G5 and the actual disbursement information reported to COD by the school. The school is required to account for any differences by reconciling ED’s records (School Account Statements) with the school’s financial and business records.</p> <p>Bluefield State University (BSU) did not prepare the required monthly Direct Loan program reconciliations or a reconciliation between COD and Banner disbursement reports per its financial aid system for the Direct Loan program for one of five months selected for testing. In addition, for one of five months selected for testing, the reconciliations were prepared but not reviewed.</p> <p>Glenville State University (GSU) did not prepare the required monthly Direct Loan program reconciliation. In addition, GSU did not perform reconciliations between COD and Banner disbursement reports per its financial aid system for Pell and Direct Loans.</p> <p>West Liberty University (WLU) did not prepare the required monthly Direct Month Loan reconciliation.</p>	
<p>Cause:</p>	<p>Cash Management – GSU and WLU were unaware of the monthly reconciliation requirement for the Federal Direct Student Loans Program.</p> <p>Financial Reporting – BSU’s internal control was not operating effectively and GSU did not design an internal control to demonstrate that the data reported to the U.S. Department of Education through COD is complete, accurate, and prepared in accordance with regulatory requirements.</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-039 Cash Management and Internal Control Over Financial Reporting (continued)

Effect or Potential Effect: Cash Management – Differences between G5 and COD could exist that are not properly investigated and documented. GSU and WLU are not in compliance with ED’s monthly reconciliation requirement for the Federal Direct Student Loans program.

Financial Reporting – The U.S. Department of Education records may not reconcile to BSU Direct Loan payment data or to GSU Pell and Direct Loan payment data.

Questioned Costs: \$0

Context: Total BSU, GSU, and WLU expenditures for the Student Financial Assistance Cluster for the year ended June 30, 2024, were \$8,174,245, \$7,659,888, and \$17,800,642, respectively. Total Student Financial Assistance Cluster expenditures were \$480,639,036 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is not a repeat finding.

Recommendation: Cash Management –

- Management at GSU and WLU should implement a monthly Direct Loan reconciliation in accordance with 34 CFR 685.300(b)(5). In addition, documentation over review and approval of the reconciliation for accuracy and completeness should be retained to evidence the operating effectiveness of internal controls.
- Management at BSU should strengthen its existing internal control to ensure the monthly Direct Loan reconciliation is consistently prepared, reviewed, and approved to evidence the operating effectiveness of internal controls.

Financial Reporting –

- Management of GSU should implement policies and procedures to perform monthly reconciliations between COD and Banner disbursement reports for Pell and Direct Loans. In addition, documentation over review and approval of the reconciliation for accuracy and completeness should be retained to evidence the operating effectiveness of internal controls.
- Management at BSU should strengthen its existing internal control to ensure the reconciliation between COD and Banner disbursement reports for Direct Loans is consistently prepared, reviewed, and approved to evidence the operating effectiveness of internal controls.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-040 Special Tests and Provisions – Gramm-Leach-Bliley Act – Student Information Security

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
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	Student Financial Assistance Cluster U.S. Department of Education	84.007/84.033/ 84.038/84.063/ 84.268/84.379
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Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): 2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).” The Gramm-Leach-Bliley Act (Pub. L. No. 106-102) (GLBA) requires financial institutions to explain their information-sharing practices to their customers and to safeguard sensitive data (16 CFR 314).

“The elements that an institution must address in its written information security program are at 16 CFR 314.4.

At a minimum, an institution’s written information security program —

- (1) Designates a qualified individual responsible for overseeing and implementing the institution’s information security program and enforcing the information security program in compliance (16 CFR 314.4(a)).
- (2) Provides for the information security program to be based on a risk assessment that identifies reasonably foreseeable internal and external risks to the security, confidentiality, and integrity of customer information (as the term customer information applies to the institution) that could result in the unauthorized disclosure, misuse, alteration, destruction, or other compromise of such information, and assesses the sufficiency of any safeguards in place to control these risks (16 CFR 314.4(b)).
- (3) Provides for the design and implementation of safeguards to control the risks the institution identifies through its risk assessment (16 CFR 314.4(c)). At a minimum, the institution’s written information security program must address the implementation of the minimum safeguards identified in 16 CFR 314.4(c)(1) through (8). The eight minimum safeguards that the written information security program must address are summarized as follows:
 - (i). Implement and periodically review access controls.
 - (ii). Conduct a periodic inventory of data, noting where it’s collected, stored, or transmitted.
 - (iii). Encrypt customer information on the institution’s system and when it’s in transit.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-040 Special Tests and Provisions – Gramm-Leach-Bliley Act – Student Information Security (continued)

- (iv). Assess apps developed by the institution.
 - (v). Implement multi-factor authentication for anyone accessing customer information on the institution's system.
 - (vi). Dispose of customer information securely
 - (vii). Anticipate and evaluate changes to the information system or network.
 - (viii). Maintain a log of authorized users' activity and keep an eye out for unauthorized access.
- (4) Provides for the institution to regularly test or otherwise monitor the effectiveness of the safeguards it has implemented (16 CFR 314.4(d)).
 - (5) Provides for the implementation of policies and procedures to ensure that personnel are able to enact the information security program (16 CFR 314.4(e)).
 - (6) Addresses how the institution will oversee its information system service providers (16 CFR 314.4(f)).
 - (7) Provides for the evaluation and adjustment of its information security program in light of the results of the required testing and monitoring; any material changes to its operations or business arrangements; the results of the required risk assessments; or any other circumstances that it knows or has reason to know may have a material impact the institution's information security program (16 CFR 314.4(g)).

Condition:

Glenville State University (GSU), Shepherd University (SU), West Liberty University (WLU), West Virginia State University (WVSU), and West Virginia University at Parkersburg (WVUP) did not have adequate documentation retained to evidence that a review and approval of the information security program were performed during the fiscal year to ensure compliance with Federal regulations.

Fairmont State University (FSU) performed and documented a review of its information security program; however, the review was not effective as certain required elements and documentation were missing from the written Information Security Program.

Pierpont Community and Technical College (PCTC) did not have a written Information Security Program in place during FY24.

The information security program for FSU, GSU, WLU and WVUP did not address all required elements per 16 CFR 314.4 outlined above. The following required elements were missing:

- (2) The risk assessment did not identify reasonably foreseeable internal and external risks to the security, confidentiality, and integrity of customer information (as the term customer information applies to the institution) that could result in the unauthorized disclosure, misuse, alteration, destruction, or other compromise of such information, and assesses the sufficiency of any safeguards in place to control these risks. (GSU)
- (3)(ii) Conduct a periodic inventory of data, noting where it's collected, stored, or transmitted. (FSU, GSU, WLU and WVUP)

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-040 Special Tests and Provisions – Gramm-Leach-Bliley Act – Student Information Security (continued)

- (3)(iii) Encrypt customer information on the institution’s system and when it’s in transit. (GSU and WLU)
- (3)(iv) Assess apps developed by the institution. (WLU and WVUP)
- (3)(v) Implement multi-factor authentication for anyone accessing customer information on the institution’s system. (GSU and WLU)
- (3)(vi) Dispose of customer information securely. (FSU and WLU)
- (3)(vii) Anticipate and evaluate changes to the information system or network. (WLU)
- (6) Addresses how the institution will oversee its information system service providers. (FSU and WLU)
- (7) Provides for the evaluation and adjustment of its information security program in light of the results of the required testing and monitoring; any material changes to its operations or business arrangements; the results of the required risk assessments; or any other circumstances that it knows or has reason to know may have a material impact on the institution’s information security program. (FSU)

Cause: Management of FSU, GSU, SU, WLU, WVSU and WVUP did not have sufficient internal controls in place or retain sufficient documentation of their review and approval of the information security program.

PCTC did not have a written information security program in place during FY24.

Effect or Potential Effect: The written Information Security Program was not compliant with 16 CFR 314.4.

Questioned Costs: \$0

Context: Total Student Financial Assistance Cluster expenditures at each school are as follows for the year ended June 30, 2024: FSU – \$16,611,670, GSU – \$7,659,888, PCTC – \$4,256,025, SU – \$15,428,618, WLU – \$17,800,642, WVSU – \$10,085,573, and WVUP – \$8,415,579. The total expenditures for the SFA Cluster for the year ended June 30, 2024, were \$480,639,036.

Identification as a Repeat Finding: This is a repeat of prior year findings 2023-019 and 2022-017.

Recommendation: Management should design and implement internal controls over the information security program to ensure all requirements of the GLBA are included in the written Information Security Program appropriately.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–041 Internal Controls over Special Tests and Provisions – Verification

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	Student Financial Assistance Cluster U.S. Department of Education	84.007/84.033/ 84.038/84.063/ 84.268/84.379
	U.S. Department of Health and Human Services	93.264/93.342/ 93.364
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”	
Condition:	Bluefield State University (BSU) and Fairmont State University (FSU) did not have adequate internal controls in place surrounding verification. During our testing, we noted that the verification process was not consistently completed for all students.	
Cause:	BSU and FSU did not have adequate internal controls in place to ensure that changes identified during the verification process were processed and submitted to the U.S. Department of Education.	
Effect or Potential Effect:	Students receiving Federal aid could receive the incorrect amount of Federal student financial assistance.	
Questioned Costs:	\$0	
Context:	<p>We selected a sample of 16 students for BSU and identified three instances where the review and approval of the verification forms were not sufficiently documented.</p> <p>We selected a sample of 36 students for FSU and identified four instances where the review and approval of the verification forms were not sufficiently documented.</p> <p>Total Student Financial Assistance Cluster expenditures for BSU and FSU were \$8,174,245, and \$16,611,670, respectively, for the year ended June 30, 2024. The total expenditures for the Student Financial Assistance Cluster for the year ended June 30, 2024, were \$480,639,036.</p>	
Identification as a Repeat Finding:	This is a repeat of prior year findings 2023–020 and 2022–015.	
Recommendation:	Management should review its internal controls over verification to ensure all verification forms are reviewed and approved.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-041 Internal Controls over Special Tests and Provisions – Verification (continued)

**Views of
Responsible
Officials:**

Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–042 Banner Information Technology General Controls – Eligibility, Reporting and Special Tests and Provisions

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
	Student Financial Assistance Cluster	
	U.S. Department of Education	84.007/84.033/ 84.038/84.063/ 84.268/84.379
	U.S. Department of Health and Human Services	93.264/93.342/ 93.364

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): 2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Condition: The State of West Virginia did not implement all logical access and change management controls that are required to be in place to support effective information technology general controls (ITGCs) for the Banner application instances at 10 of 16 universities / colleges. As a result, Banner ITGCs, and therefore, Banner application controls cannot be relied upon in the period of audit.

Cause: Across the 10 universities/colleges (Glenville State University, Mountwest Community and Technical College, New River Community and Technical College, Concord University, Pierpont Community and Technical College, Shepherd University, West Liberty University, West Virginia Northern Community College, West Virginia University at Parkersburg, and West Virginia State University), management did not have a formalized process to support access provisioning events were authorized, approved, and documented. Additionally, documentation did not exist to support the timely revocation of access upon a user leaving the university/college. Further, a user access review (UAR) for Banner was not performed to ensure access remains appropriate based on users’ job responsibilities. Additional UAR weaknesses included a lack of separation of duties for the reviewer and untimely completion of the UAR, unauthorized access to UAR documentation, and lack of complete UAR documentation. We also identified instances where privileged accounts to Banner were shared among users and password settings were not configured with leading industry standards or configured consistently according to applicable password policies. Specific to the change management process, a formalized and documented process was not consistently followed to support that Banner application and supporting infrastructure patches and releases were authorized, tested, and approved prior to being implemented to production.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–042 Banner Information Technology General Controls – Eligibility, Reporting and Special Tests and Provisions (continued)

Effect or Potential Effect: There is a risk the data relevant to the Student Financial Assistance Cluster program stored within the student financial aid system may be inappropriately created or modified.

Effective testing of the required logical access and change management controls is to support effective ITGCs over the Banner application. As a result, the Banner application cannot be relied on for the audit period.

Questioned Costs: \$0

Context: The total expenditures for the Student Financial Assistance Cluster for the year ended June 30, 2024, were \$480,639,036.

Identification as a Repeat Finding: This is a repeat of prior year finding 2023–021.

Recommendation: Documentation of the requestor, access rights requested, and approval should be defined and maintained for all new and modified Banner access requests. This documentation should allow for an audit trail of all new and transferred users ensuring that access was granted/removed from the Banner application. Additionally, segregation of duties should exist between the requestor/approver and grantor of the access. Management should remove terminated user's access from the Banner application. Management should enhance the process of communicating terminated employees to ensure access is revoked or disabled timely.

Management should ensure that a review of user access is performed on a periodic basis (e.g., annually) to ensure user access rights remain consistent with user job responsibilities. Review procedures should be performed for all users with access to the Banner application to determine access appropriateness. In addition, management should ensure that adequate documentation is maintained to provide evidence (sign-offs, hard-copy reports, etc.) of the review.

Management should configure Banner password settings related to minimum length, complexity, expiration, history, and account lockout to enhance overall security. Further, privileged access to the Banner application should be granted to administrators via unique IDs to provide accountability and avoid the sharing of default privileged accounts.

A formal, documented change process needs to be implemented to capture authorization, testing, and production migration approvals for patches and releases to the Banner application and supporting infrastructure. This documentation should allow for an audit trail of all program changes ensuring that changes were appropriately authorized and administered.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–043 Special Tests and Provisions – Return of Title IV Funds

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
<p>Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):</p>	<p>Student Financial Assistance Cluster U.S. Department of Education</p>	<p>84.007/84.033/84.063/ 84.268</p>
<p>Condition:</p>	<p>Glenville State University (GSU), Fairmont State University (FSU), and Mountwest Community and Technical College (MCTC) did not retain sufficient documentation of their review and approval over the returns of Title IV funds.</p>	
<p>Cause:</p>	<p>The institutions did not have adequate internal controls to require documentation over the review and approval of the return of Title IV funds be retained. In addition, MCTC relied on application controls within the Banner system, which has been determined to have ineffective ITGCs.</p>	
<p>Effect or Potential Effect:</p>	<p>The institution may not calculate the return of Title IV funds or return the correct amount of Federal student financial assistance required on accordance with Department of Education regulations.</p>	
<p>Questioned Costs:</p>	<p>\$0</p>	
<p>Context:</p>	<p>We tested a sample of twelve Title IV refund calculations at GSU and noted that the review and approval of the Title IV calculation were not sufficiently documented.</p> <p>We tested a sample of eight Title IV refund calculations at FSU and noted that for three Title IV calculations, the review and approval were not sufficiently documented.</p> <p>We tested a sample of six Title IV refund calculations at MCTC and noted that the review and approval of the Title IV calculation were not sufficiently documented.</p> <p>Total Student Financial Assistance Cluster expenditures for GSU, FSU and MCTC were \$7,659,888, \$16,611,670, and \$5,514,662, respectively, for the year ended June 30, 2024. The total expenditures for the Student Financial Assistance Cluster for the year ended June 30, 2024, were \$480,639,036.</p>	
<p>Identification as a Repeat Finding:</p>	<p>This is a repeat of prior year findings 2023–022 and 2022–011.</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-043 Special Tests and Provisions – Return of Title IV Funds (continued)

Recommendation: Management should implement internal controls to ensure review and approval of the Title IV calculation are sufficiently documented. In addition, the review should be more robust to ensure that the correct inputs were used in the calculation.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–044 Internal Control – Cash Management

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	Student Financial Assistance Cluster U.S. Department of Education	84.007/84.033/84.063/ 84.268
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”	
Condition:	We selected a sample of eight drawdown requests for Concord University (CU) and noted CU did not retain evidence of the review and approval for five drawdown requests. For three of the five drawdowns which related to Federal Work-Study (FWS) drawdowns, the drawdown did not have proper evidence of segregation of duties between the reviewer and the individual responsible for initiating the drawdown.	
Cause:	CU has policies and procedures in place to review the drawdowns prior to requesting from the Department of Education’s G5 payment management system; however, the policies and procedures were not followed for these drawdowns.	
Effect or Potential Effect:	Drawdowns could be inaccurate, incomplete, and not agree to underlying books and records of the institution.	
Questioned Costs:	\$0	
Context:	Total CU expenditures for the Student Financial Assistance Cluster for the year ended June 30, 2024, were \$13,986,889. Total Student Financial Assistance Cluster expenditures were \$480,639,036 for the year ended June 30, 2024.	
Identification as a Repeat Finding:	This is a repeat of prior year finding 2023–023.	
Recommendation:	Management should follow established policies, procedures, and internal controls for the review and approval of drawdown requests. In addition, for FWS drawdowns, the institution should redesign its review and approval control to ensure adequate segregation of duties between the reviewer and the individual responsible for initiating the drawdown.	
Views of Responsible Officials:	Management concurs with the finding and has developed a plan to correct the finding.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–045 Special Tests and Provisions – Using a Servicer to Deliver Title IV Credit Balances to a Card or Other Access Device

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
	Student Financial Assistance (SFA) Cluster	
	U.S. Department of Education	84.007/84.033/ 84.038/84.063/ 84.268/84.379
	U.S. Department of Health and Human Services	93.264/93.342/ 93.364

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): 2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Condition: Concord University (CU), Mountwest Community and Technical College (MCTC), Shepherd University (SU) and West Virginia University at Parkersburg (WVUP) have T1 arrangements with a third-party servicer of Title IV credit balances.

- CU and SU did not obtain and review the third-party servicer’s Title IV compliance audit, *Report on Controls at a Service Organization Relevant to User Entities’ Internal Control over Financial Reporting (SOC 1)* and *Report on Controls Relevant to Security (SOC 2)*.
- While MCTC and WVUP obtained the third-party servicer’s Title IV compliance audit, *Report on Controls at a Service Organization Relevant to User Entities’ Internal Control over Financial Reporting (SOC 1)* and *Report on Controls Relevant to Security (SOC 2)*, the school did not retain documentation showing who performed the review, the date the review was performed, what specific items were reviewed or what conclusions were reached related to the third-party servicer’s compliance with the requirements they were contracted for.

Cause: CU and SU did not have internal controls in place to perform a due diligence review over the third-party servicer’s Title IV compliance audit, *Report on Controls at a Service Organization Relevant to User Entities’ Internal Control over Financial Reporting (SOC 1)* and *Report on Controls Relevant to Security (SOC 2)*.

MCTC and WVUP do not have adequately designed internal controls in place to require documentation of the due diligence review performed over the third-party servicer’s Title IV compliance audit, *Report on Controls at a Service Organization Relevant to User Entities’ Internal Control over Financial Reporting (SOC 1)* and *Report on Controls Relevant to Security (SOC 2)*.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–045 Special Tests and Provisions – Using a Servicer to Deliver Title IV Credit Balances to a Card or Other Access Device (continued)

Effect or Potential Effect: The third-party servicer could be out of compliance with Federal regulations and have ineffective internal controls, which could impact the schools’ compliance with certain Federal regulations over T1 arrangements contained in 34 CFR 668.164(e).

Questioned Costs: \$0

Context: CU, MCTC, SU, and WVUP had total expenditures of \$13,986,889, \$5,514,662, \$15,428,618, and \$8,415,579, respectively, for the year ended June 30, 2024. Total expenditures for the SFA Cluster were \$480,639,036 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is a repeat of prior year finding 2023–024.

Recommendation: The schools should implement internal controls to retain the documentation over its review of the contract with its third-party servicer of Title IV credit balances to include their Title IV compliance audit, *Report on Controls at a Service Organization Relevant to User Entities’ Internal Control over Financial Reporting (SOC 1)* and *Report on Controls Relevant to Security (SOC 2)*, to ensure compliance with the Federal regulations over T1 arrangements. Documentation should include who performed the review, the date of the review, the specific items reviewed, and conclusions reached and should be retained to support the operating effectiveness of internal controls.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–046 Special Tests and Provisions – Perkins Loan Recordkeeping and Record Retention

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
<p>Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):</p>	<p>Student Financial Assistance Cluster U.S. Department of Education</p>	<p>84.038</p>
<p>Condition:</p>	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>As stated in the 2023 OMB Compliance Supplement (34 CFR 674.19), “when an institution uses a third-party servicer for its Perkins Loan program, the institution must perform due diligence to ensure that the third-party servicer is in compliance with the requirements for the functions the third-party servicer is performing for the institution. Such due diligence could include obtaining and reviewing the third-party servicer’s most recent Title IV compliance audit.”</p> <p>Concord University (CU) and West Liberty University (WLU) did not maintain sufficient evidence of the due diligence review performed over their third-party servicer of their Federal Perkins Loan Program portfolio.</p> <ul style="list-style-type: none"> • For CU, while the school obtained the third-party servicer’s Title IV compliance audit, <i>Report on Controls at a Service Organization Relevant to User Entities’ Internal Control over Financial Reporting (SOC 1)</i> and <i>Report on Controls Relevant to Security (SOC 2)</i>, the school did not retain documentation showing who performed the review, the date of the review, what specific items were reviewed, or what conclusions were reached related to the third-party servicer’s compliance with the requirements they were contracted for. • For WLU, the school did not obtain or review the third-party servicer’s Title IV compliance audit. 	
<p>Cause:</p>	<p>CU did not have adequately designed internal controls in place to require documentation of the due diligence review performed.</p> <p>WLU did not have adequately designed internal controls in place to require the review of the third-party servicer’s Title IV compliance audit as management was unaware of the requirement to include this in the due diligence review.</p>	
<p>Effect or Potential Effect:</p>	<p>The SOC1, SOC2, or third-party servicer could be out of compliance with Federal regulations and have ineffective internal controls, which could impact the school’s compliance with the Federal Perkins Loan Program requirements.</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-046 Special Tests and Provisions – Perkins Loan Recordkeeping and Record Retention (continued)

Questioned Costs: \$0

Context: CU and WLU had Federal Perkins Loan Program expenditures of \$652,786 and \$924,830, respectively, for the year ended June 30, 2024. Total Federal Perkins Loan Program expenditures were \$9,896,484 for the year ended June 30, 2024. Total expenditures for the SFA Cluster were \$480,639,036 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is a repeat of prior year finding 2023-025.

Recommendation: For CU, the school should implement internal controls to retain documentation over its review of the third-party servicer of its Federal Perkins Loan Program portfolio, including its Title IV compliance audit, *Report on Controls at a Service Organization Relevant to User Entities' Internal Control over Financial Reporting (SOC 1)* and *Report on Controls Relevant to Security (SOC 2)*, to ensure compliance with the Federal Perkins Loan Program. Documentation should include who performed the review, the date of the review, the specific items reviewed, and the conclusions reached and should be retained to support the operating effectiveness of internal controls.

For WLU, the school's internal controls should be redesigned to include the third-party servicer's Title IV compliance audit in the scope of its due diligence review to ensure compliance with the Federal Perkins Loan Program. Documentation should include who performed the review, the date of the review, the specific items reviewed, and the conclusions reached and should be retained to support the operating effectiveness of internal controls.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-047 Special Tests and Provisions – Enrollment Reporting

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	Student Financial Assistance (SFA) Cluster U.S. Department of Education	84.063/84.268
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>Per the National Student Loan Data System (NSLDS) Enrollment Reporting Guide (November 2022), Chapter 1.1, “Enrollment Reporting is required for all schools participating in Title IV aid. The details of the specific regulations including the Department’s guidance can be found later in this guide.</p> <p>The collection of enrollment data is essential to the Department for many reasons:</p> <ul style="list-style-type: none"> • It ensures loan repayment dates are accurately based on the last date of attendance. • It allows in-school deferments to be automatically granted using NSLDS enrollment data. • It provides vast amounts of critical data about the effectiveness of Title IV aid programs, including completion data.” <p>Chapter 1.4, “At a minimum, schools are required to certify enrollment every 60 days, and respond within 15 days of the date that NSLDS sends a Roster file to the school or its third-party servicer. This requirement also applies to schools that report exclusively online.”</p> <p>For audit purposes, the institutions are responsible for identifying a population of Pell and Direct Loan students from institution records that had a reduction or increase in attendance levels impacting enrollment status.</p>	
Condition:	<p>Internal controls over the review and approval of the enrollment report sent to the National Student Clearinghouse (NSC) were not adequately designed or operating effectively for Bluefield State University (BSU), Concord University (CU), Fairmont State University (FSU), Glenville State University (GSU), Mountwest Community and Technical College (MCTC), Marshall University (MU), New River Community and Technical College (NRCTC), Pierpont Community and Technical College (PCTC), Shepherd University (SU), West Liberty University (WLU), West Virginia State University (WVSU), West Virginia University (WVU), and West Virginia University at Parkersburg (WVUP) as follows:</p> <ul style="list-style-type: none"> • Final review and approval to submit the enrollment report to NSC was not consistently retained by the institution. (BSU, GSU, NRCTC, PCTC, and WVSU) 	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-047 Special Tests and Provisions – Enrollment Reporting (continued)

- A record count reconciliation between the enrollment report submitted to the NSC and the number of files received by the NSC, including documentation over how any rejected records were addressed, was not retained. (BSU, CU, FSU, GSU, MCTC, MU, PCTC, NRCTC, SU, WLU, WVSU, WVU, and WVUP)
- Details of the validation of student information included in the enrollment report for accuracy was not consistently retained by the institution. (BSU, FSU, GSU, MCTC, MU, NRCTC, PCTC, and WVSU)
- The NSC automated emails used as a quality checklist which includes enrollment report due dates, receipt of the text file by the NSC, completion of the Error Resolution Report, and confirmation of certification and processing by the NSC were not consistently retained by the institution. (BSU, GSU, MCTC, NRCTC, PCTC, SU, WLU, WVSU, and WVUP)

For West Virginia School of Osteopathic Medicine (WVSOM), adequate evidence of review of enrollment reporting updates made directly to the National Student Loan Data System (NSLDS) was not retained for six of 11 updates sampled. Five of the six sampled NSLDS updates related to roster files and one of the six related to withdrawals.

For BSU, GSU, MCTC, NRCTC, PCTC, SU, WVSOM, WVSU, and WVUP, the control was not adequately designed for the entire fiscal year 2024.

For CU, MU, and WVU, the control was not adequately designed for the period from July 1, 2023 to January 31, 2024.

For FSU, the control related to non-graduate transmissions was not adequately designed for the period from July 1, 2023 to January 31, 2024. The control related to graduate transmissions was not adequately designed for the entire fiscal year 2024.

For WLU, the control was not adequately designed for the period from July 1, 2023 to April 30, 2024.

In addition, for two of 40 enrollment status changes sampled, two were reported after the 60-day requirement (WVSOM). Specifically, one student withdrawal was reported within 64 days and one student leave of absence was reported within 66 days.

Furthermore, management was unable to provide complete and accurate enrollment reporting populations specifically related to students with reductions or increases in attendance levels within semesters and between semesters, for example, a student who changes enrollment status from full-time to half-time.

Cause: The institutions did not have adequately designed internal controls in place surrounding the enrollment reporting process.

Effect or Potential Effect: The institutions may not report accurate and complete enrollment data timely to the National Student Loan Data System (NSLDS).

Questioned Costs: \$0

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-047 Special Tests and Provisions – Enrollment Reporting (continued)

Context: The total expenditures for the SFA Cluster for the year ended June 30, 2024, were \$480,639,036.

Identification as a Repeat Finding: This is a repeat of prior year findings 2023-026 and 2022-012.

Recommendation: Documentation over the review and approval of the enrollment report for accuracy and completeness should be retained to evidence the operating effectiveness of internal controls. In addition, management should ensure timely reporting of enrollment status changes to NSLDS.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-048 Activities Allowed or Unallowed and Allowable Costs/Cost Principles

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	Research and Development Cluster	
	U.S. Department of Agriculture	10.202, 10.203, 10.207, 10.215, 10.310
	U.S. Department of Defense	12.300, 12.431
	U.S. Department of the Interior	15.945
	National Aeronautics and Space Administration	43.008
	National Science Foundation	47.049, 47.070, 47.076
	Environmental Protection Agency	66.716
	U.S. Department of Energy	81.057, 81.089
	U.S. Department of Health and Human Services	93.103, 93.121, 93.213, 93.279, 93.310, 93.393, 93.395, 93.837, 93.840, 93.847, 93.853, 93.859, 93.865, 93.866, 93.867, 93.942

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): 2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

2 CFR 200.403 requires costs to be necessary and reasonable for performance of the Federal award and be allocable thereto under these principles. Additionally, costs charged to the Federal award must be adequately documented.

2 CFR.430 (g) *Standards for Documentation of Personnel Expenses.*

(1) Charges to Federal awards for salaries and wages must be based on records that accurately reflect the work performed. These records must:

- (i) Be supported by a system of internal control that provides reasonable assurance that the charges are accurate, allowable, and properly allocated;
- (ii) Be incorporated into the official records of the recipient or subrecipient;
- (iii) Reasonably reflect the total activity for which the employee is compensated by the recipient or subrecipient, not exceeding 100 percent of compensated activities.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-048 Activities Allowed or Unallowed and Allowable Costs/Cost Principles (continued)

Condition:	<p>For Fairmont State University (FSU),</p> <ul style="list-style-type: none">• Management indicated that for individuals paid with a stipend, supporting documentation is not maintained for evidencing the individual worked on the grant. Due to the lack of appropriate supporting evidence, the auditor was unable to determine if the payroll expense for stipends was allowable.• For one selection, the effort certification was not reviewed and approved by someone knowledgeable of their work. <p>For West Liberty University (WLU),</p> <ul style="list-style-type: none">• Management indicated that for individuals paid with a stipend supporting documentation is not maintained for evidencing the individual worked on the grant. Due to the lack of appropriate supporting evidence, the auditor was unable to determine if the payroll expense for stipends was allowable. <p>For West Virginia University (WVU),</p> <ul style="list-style-type: none">• For 19 of the 40 payroll selections the effort certifications were not reviewed and approved by someone knowledgeable of their work.• For 1 of the 40 payroll selections the effort certification was not signed until after the end of the fiscal year.• For 2 of the 40 non-payroll selections there was no evidence of the review and approval of the expense. <p>For West Virginia Department of Agriculture (WVDA),</p> <ul style="list-style-type: none">• We noted seven selections (totaling \$12,420) of 40 non-payroll selections (totaling \$37,819), and six selections (totaling \$962) of 40 payroll selections (\$5,536) were not allowable as they were incurred after WVDA had exhausted their grant funding for the applicable funding period.
Cause:	<p>The internal controls over payroll expenses related to stipends do not require supporting documentation to support the time worked on the grant be retained. (FSU, WLU)</p> <p>Additionally, documentation over the review and approval of effort certifications is not maintained. (FSU)</p> <p>WVU does not have an internal control in place which requires an individual knowledgeable of what the employee is working on to review and approve effort certification.</p> <p>WVDA does not have a robust enough control to track expenses incurred versus the budget throughout the funding period to identify when federal funding has been exhausted.</p>

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-048 Activities Allowed or Unallowed and Allowable Costs/Cost Principles (continued)

Effect or Potential Effect: As adequate documentation was not maintained for the payment made to the individual, it is possible that unallowable costs could be charged to the grant. (FSU, WLU)

As adequate documentation was not maintained for the review and approval made to the individual, it is possible that unallowable costs could be charged to the grant. (WVU)

Unallowable costs were charged to the grant. (WVDA)

Questioned Costs: Total questioned costs equal \$470,136

\$224,354, the total stipends and fringe charged to the FSU and WLU grants for fiscal 2024 for the following awards:

- ALN 43.008, 47.049, 47.076 (\$58,121) – represents the total amount of the stipends and fringe charged to the following awards for FSU:
 - Award HRD-1834575 – ALN 47.076 – \$2,931
 - Award 2130106 – ALN 47.076 – \$15,330
 - Award 2150226 – ALN 47.049 – \$17,298
 - Award 80NSSC20M0055 – ALN 43.008 – \$8,883
 - Award 1834586 – ALN 47.076 – \$13,679
- ALN 43.008, 93.859 (\$166,233) – represents the total amount of the stipends and fringe charged to the following awards for WLU:
 - Award 80NSSC20M0055 – ALN 43.008 – \$85,200
 - Award 5P20GM103434-23 – ALN 93.859 – \$81,033

\$245,782 represents expenses charged to ALN 93.103 – Award 5U19FD007093 – after the grant funding for WVDA was exhausted.

Context: Total payroll expenditures for FSU were \$146,983 for the fiscal year ended June 30, 2024. Total FSU R&D expenditures were \$739,345 for the fiscal year ended June 30, 2024.

Total payroll expenditures for WLU were \$204,287 for the fiscal year ended June 30, 2024. Total WLU R&D expenditures were \$588,406 for the fiscal year ended June 30, 2024.

Total payroll expenditures for WVU were \$4,888,044 for the fiscal year ended June 30, 2024. Total WVU R&D expenditures were \$23,072,579 for the fiscal year ended June 30, 2024.

Total WVDA expenditures were \$ 1,765,481 for the fiscal year ended June 30, 2024.

Total R&D Federal expenditures were \$31,366,340 for the fiscal year ended June 30, 2024.

Identification as a Repeat Finding: This is not a repeat finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-048 Activities Allowed or Unallowed and Allowable Costs/Cost Principles (continued)

Recommendation: We recommend that management evaluate its policies and procedures to ensure adequate documentation is maintained for all costs charged to Federal awards.

We recommend that management put effective controls in place identifying when grant funding has run out and expenses can no longer be charged to the grant.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-049 Activities Allowed or Unallowed and Allowable Costs/Cost Principles – Indirect Costs

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	Research and Development Cluster	
	U.S Department of Agriculture	10.202, 10,203, 10.207, 10.215, 10.310
	U.S. Department of Defense	12.300, 12.431
	U.S. Department of the Interior	15.945
	National Aeronautics and Space Administration	43.008
	National Science Foundation	47.070, 47.076, 47.083
	Environmental Protection Agency	66.716
	U.S. Department of Energy	81.057, 81.089
	U.S. Department of Health and Human Services	93.103, 93.121, 93.213, 93.279, 93.310, 93.393, 93.395, 93.837, 93.840, 93.847, 93.853, 93.859, 93.865, 93.866, 93.867, 93.942

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): 2 CFR Section 200.303 of the Uniform Guidance states the following regarding internal control:
 “The non-Federal entity must:
 (a) Establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States or the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Appendix IV to 2 CRF Part 200 B 1 (e) states: “The base period for the allocation of indirect costs is the period in which such costs are incurred and accumulated for allocation to work performed in that period. The base period normally should coincide with the organization’s fiscal year but, in any event, must be so selected as to avoid inequities in the allocation of the costs.”

Condition: Higher Education Policy Commission (HEPC) – The indirect cost rate calculation is prepared and reviewed by the same individual.
 West Virginia University (WVU) – The auditor was unable to test management’s control over indirect costs. Management relies on an application control within its IT system to calculate indirect expense. As the auditor was unable to test the IT general controls (ITGCs) over the IT

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-049 Activities Allowed or Unallowed and Allowable Costs/Cost Principles – Indirect Costs (continued)

system, the auditor was unable to rely on the system indirect cost application. Therefore, we did not select a sample of transactions for internal control testing.

West Liberty University (WLU) – Indirect costs are not recorded in the general ledger as expenditures when incurred; indirect costs are recorded as revenue in the general ledger when payment of the indirect cost is received. Indirect dollars previously received that were spent during FY24 were erroneously included as expenditures in the schedule of expenditures of Federal awards.

West Virginia Department of Agriculture (WVDA) – did not record its indirect costs on the schedule of expenditures of Federal awards within the R&D Cluster.

Cause: HEPC – does not have an internal control over the review and approval of the indirect cost rate calculation.

WVU – the auditor was unable to test the ITGCs in place over the IT system, and therefore, the auditor is unable to rely on the IT system and related application controls.

WLU – does not have an understanding of requirements for reporting of indirect costs on the schedule of expenditures of Federal awards.

WVDA – does not have an understanding of the treatment of indirect costs for reporting on the schedule of expenditures of Federal awards.

Effect or Potential Effect: Indirect costs may not be calculated correctly.

Indirect costs were not properly recorded on the schedule of expenditures of Federal awards.

Questioned Costs: \$0

Context: HEPC – Total indirect costs for HEPC for fiscal year 2024 were \$96,695. Total R&D expenditures for HEPC were \$3,420,589.

West Virginia University – Total indirect costs for West Virginia University for fiscal year 2024 were \$2,582,567. Total R&D expenditures for WVU were \$23,072,579 for the year ended June 30, 2024.

West Liberty University – West Liberty University spent \$146,337 in previously earned indirect costs in the current year, which is recorded on the SEFA. Total indirect costs for West Liberty University for fiscal year 2024 were \$103,429. Total R&D expenditures for WLU for fiscal year 2024 were \$588,406.

West Virginia Department of Agriculture – Total indirect costs for fiscal year 2024 were \$271,971. Total R&D expenditures for WVDA for fiscal year 2024 were \$1,765,481.

The total R&D Cluster expenditures reported on the Schedule of Expenditures of Federal Awards (SEFA) are \$31,366,340 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is not a repeat finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-049 Activities Allowed or Unallowed and Allowable Costs/Cost Principles – Indirect Costs (continued)

Recommendation: HEPC – Management should implement an internal control over the review and approval of the indirect cost rate calculation.

West Virginia University – Management should design and implement a manual internal control over the review and approval of the indirect cost calculation.

West Liberty University – Management should record indirect costs in accordance with its indirect rate calculation and record it in the period incurred. In addition, indirect expense should be recorded on the schedule of expenditures of Federal awards.

Department of Agriculture – Management should record indirect costs on the schedule of expenditures of Federal awards.

**Views of
Responsible
Officials:**

Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–050 Internal Controls – Cash Management

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	Research and Development Cluster National Science Foundation	47.076 47.083
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”	
Condition:	<p>We selected a sample of five cash drawdown requests for the Higher Education Policy Commission (HEPC). We identified that for one of the five draws, the draw down did not have the proper segregation of duties between the individual who initiated the drawdown and the reviewer of the drawdown.</p> <p>Additionally, management does not have an effective policy in place to require the preparer of the draw down to review actual payroll expenditures incurred for the period of the draw to ensure they are not drawing down funds in excess of their immediate cash needs from the payment management system.</p>	
Cause:	<p>HEPC does not have internal controls that require segregation of duties between the individual initiating the draw and the reviewer.</p> <p>Management does not have a policy over the determination of the expenses to be included in the cash draws.</p>	
Effect or Potential Effect:	The amount of cash drawn may not be correct or supported by the books and records.	
Questioned Costs:	\$0	
Context:	<p>Total expenditures for HEPC for fiscal year 2024 were \$3,420,589.</p> <p>The total R&D Cluster expenditures reported on the SEFA are \$31,366,340 for the year ended June 30, 2024.</p>	
Identification as a Repeat Finding:	This is not a repeat finding.	
Recommendation:	Management should design and implement effective internal controls over the review and approval of the cash draw process and implement an effective cash management draw policy.	
Views of Responsible Officials:	Management concurs with the finding and has developed a plan to correct the finding.	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–051 Internal Controls – Cash Management

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
	Research and Development Cluster	
	National Aeronautics and Space Administration	43.008
	U.S. Department of Health and Human Services	93.103, 93.859

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): 2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

Condition: West Liberty University (WLU) did not retain supporting documentation of its review and approval of subaward invoices submitted for cash reimbursement.

West Virginia University (WVU) did not retain supporting documentation of its review and approval of the payment of subrecipient invoices. In addition, WVU did not retain supporting documentation of land grant draws submitted for cash reimbursement.

West Virginia Department of Agriculture (WVDA) did not retain supporting documentation of its review and approval of the cash draws.

Cause: WLU does not have sufficient internal controls that require supporting documentation of review and approval of prepared invoices to be retained.

WVU does not have sufficient internal controls that require supporting documentation of the review and approval of subrecipient invoices or land grant draws to be retained.

WVDA does not have internal controls that require supporting documentation of review and approval of cash management draws to be retained.

Effect or Potential Effect: The amount invoiced for cash draws may not be correct.

The amount of cash drawn may not be correct or supported by the books and records.

Questioned Costs: \$0

Context: West Liberty University – Total expenditures for WLU for fiscal year 2024 were \$588,406.

West Virginia University – Total WVU R&D expenditures for fiscal year 2024 were \$23,072,579.

West Virginia Department of Agriculture – Total expenditures for WVDA for fiscal year 2024 were \$1,765,481.

The total R&D Cluster expenditures reported on the SEFA are \$31,366,340 for the year ended June 30, 2024.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-051 Internal Controls – Cash Management (continued)

Identification as a Repeat Finding: This is not a repeat finding.

Recommendation: Management should review its internal controls over the review and approval of the cash draw and subrecipient cash processes to require supporting documentation be retained.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–052 Procurement, Suspension and Debarment

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	Research and Development Cluster	
	National Aeronautics and Space Administration	43.008
	National Science Foundation	47.076, 47.083
	U.S. Department of Health and Human Services	93.103, 93.859

Award Numbers: Various

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	<p>Section 200.303 of the Uniform Guidance states the following regarding internal control: “The non-Federal entity must: (a) Establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.”</p> <p>2 CFR Section 180.300 – When you enter into a covered transaction with another person at the next lower tier, you must verify that the person with whom you intend to do business is not excluded or disqualified. You do this by:</p> <ul style="list-style-type: none"> (a) Checking <i>SAM.gov</i> Exclusions; or (b) Collecting a certification from that person; or (c) Adding a clause or condition to the covered transaction with that person.
Condition:	<p>HEPC – We selected a sample of twelve transactions (totaling \$76,412) subject to suspension and debarment and noted that three transactions (totaling \$7,600) where the vendor was not located in SAM.gov and management did not perform additional steps to assess if the vendor was excluded or disqualified and nine transactions (totaling \$68,813) where HEPC did not retain supporting documentation of its review of the vendor for suspension and debarment prior to entering into a purchase order or contract.</p> <p>FSU – We selected a sample of seven transactions (totaling \$61,722) subject to suspension and debarment and noted that for all seven transactions FSU was not retaining supporting documentation of its review of vendors in SAM.gov to support the vendor was not excluded or disqualified.</p> <p>WVDA – We selected a sample of eight transactions (totaling \$43,862) subject to suspension and debarment and noted that for six of transactions (totaling \$23,287) management did not have supporting documentation of its suspension and debarment review of the vendors in SAM.gov or obtain other allowable documentation in accordance with 2 CFR Section 180.300.</p> <p>The entities’ suspension and debarment policies are not robust to enough to detail how the policies and procedures should be implemented (e.g. dollar threshold and which vendors) (FSU, HEPC, WVDA).</p>

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-052 Procurement, Suspension and Debarment (continued)

Cause: Management was not following its policy which requires screenprints of searches to be retained of its review of vendors in SAM.gov. In addition, internal controls do not require management to perform additional steps to assess if the vendor was excluded or disqualified if it is not in SAM.gov. (HEPC, FSU, WVDA)

Management's policies do not specifically address which types of vendors and transactions and at what thresholds suspension and debarment searches are required. (HEPC, FSU, WVDA)

Effect or Potential Effect: Management may enter into Federal transactions with vendors who are excluded or disqualified.

Questioned Costs: \$170,901 represents the Federal expenditures related to vendors that were not subject to the suspension and debarment process for the following awards:

- HEPC – \$76,412
 - Award 1458952 – ALN 47.083 – \$7,000
 - Award 2323953 – ALN 47.083 – \$600
 - Award 1834586 – ALN 47.076 – \$43,424
 - Award 2242771 – ALN 47.083 – \$25,388
- FSU – \$61,721
 - Award HRD-1834575 – ALN 47.076 – \$32,667
 - Award 2130106 – ALN 47.076 – \$3,125
 - Award 5P20GM103434-23 – ALN 93.859 – \$25,929
- WVDA – \$36,651 – ALN 93.103
 - Award 5U19FD007093-04 – \$21,339
 - Award 5U2FFD007445-03 – \$15,312

Context: HEPC – Total Federal portion of procurement expenditures subject to suspension and debarment review was \$396,162 for the year ended June 30, 2024.

FSU – Total Federal portion of procurement expenditures subject to suspension and debarment review was \$229,255.20 for the year ended June 30, 2024.

WVDA – Total Federal portion of procurement expenditures subject to suspension and debarment review was \$158,749.65 for the year ended June 30, 2024.

Total R&D Cluster expenditures reported in the SEFA were \$31,366,340 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is not a repeat finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-052 Procurement, Suspension and Debarment (continued)

Recommendation: Management should formalize internal controls to include retention of evidence of review of SAM.gov. In addition, internal controls should be developed to cover alternative procedures for vendors not located in SAM.gov.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–053 Procurement, Suspension and Debarment

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
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Research and Development Cluster U.S. Department of Energy	81.089
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Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation): Section 200.303 of the Uniform Guidance states the following regarding internal control: “The non-Federal entity must: (a) Establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award.”

Uniform Guidance 2 CFR Section 200.320 (b) states: “Formal procurement methods are required when the value of the procurement transaction under a Federal award exceeds the simplified acquisition threshold of the recipient or subrecipient. Formal procurement methods are competitive and require public notice. The following formal methods of procurement are used for procurement transactions above the simplified acquisition threshold determined by the recipient or subrecipient in accordance with paragraph (a)(2)(ii)“

Per section 3.1.1 of West Virginia University’s (WVU) Procurement manual: “The University shall require a public competitive solicitation process when goods or services are over certain monetary limits, as established by state law. Public competitive bidding is required in the following circumstances:

- (a) The cost of the goods or services, excluding construction, is equal to or exceeds \$50,000.”

Per section 3.3 of WVU’s Procurement manual: “Purchases that are equal to or exceed the University’s bid thresholds require a competitive public bidding process ... There are two procurement methods available when the purchase amount exceeds the University’s bid threshold: Requests for Bids and Requests for Proposals”

Per section 3.4.1 of WVU’s Procurement manual: “The sole source procurement method is used when there is only one supplier of the product or service. The single source procurement method is used when there are multiple suppliers but purchasing from a particular provider is in the best interest of the University for strategic reasons. A need for a particular proprietary item does not justify sole or single source procurement if there is more than one potential supplier for that item.

Any request that a purchase be restricted to one potential supplier shall be accompanied by an explanation as to why no other will be suitable or acceptable to meet the need. The Originating Department shall complete the “Single or Sole Source Justification Form” and submit the completed form to Procurement for review and approval. The determination of whether the procurement shall be made as a sole or single source shall be made by the CPO or designee. In cases of reasonable doubt, competition should be solicited. The determination and the basis thereof shall be documented in writing by the CPO or designee and included in the Procurement File.”

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-053 Procurement, Suspension and Debarment (continued)

Condition:	For one procurement transactions tested, we noted West Virginia University (WVU) did not perform a public competitive solicitation process or a complete a sole-source justification form to support the vendor that was selected.
Cause:	Management does not have sufficient internal controls in place to ensure that the State of West Virginia procurement policies are followed for all procurement transactions prior to entering into the procurement.
Effect or Potential Effect:	WVU entered into a procurement transaction that did not go through a public competitive solicitation process or have a sole source justification form.
Questioned Costs:	\$1,918,732 – ALN 81.089 – Award DE-FE0032296. This represents the total Federal expenditures for the vendor that did not have an RFP or sole source justification form.
Context:	Total Federal expenditures subject to procurement for WVU were \$1,918,732 for the year ended June 30, 2024. Total WVU R&D expenditures were \$23,072,579 for the year ended June 30, 2024. Total R&D Cluster expenditures reported in the SEFA were \$31,366,340 for the year ended June 30, 2024.
Identification as a Repeat Finding:	This is not a repeat finding.
Recommendation:	Management should review its policies and procedures to ensure it requires all procurement transactions are reviewed and approved to ensure they are in accordance with WVU’s procurement policies and have the appropriate supporting documentation.
Views of Responsible Officials:	Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-054 Subrecipient Monitoring

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	Research and Development Cluster	
	U.S. Department of Agriculture	10.310
	U.S. Department of Defense	12.300
	National Science Foundation	47.076, 47.083
	U.S. Department of Energy	81.089
	U.S. Department of Health and Human Services	93.838, 93.867
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	<p>2 CFR Section 200.303 of the Uniform Guidance states the following regarding internal control:</p> <p>“The non-Federal entity must:</p> <p>(a) Establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations, and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the Comptroller General of the United States or the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>2 CFR 200.332 Requirements for pass-through entities:</p> <p>“A pass-through entity must:</p> <p>(b) Ensure that every subaward is clearly identified to the subrecipient as a subaward and includes the information provided below. A pass-through entity must provide the best available information when some of the information below is unavailable. A pass-through entity must provide the unavailable information when it is obtained. Required information includes:</p> <p>1) Federal award identification.</p> <p>(i). Subrecipient's name (must match the name associated with its unique entity identifier);</p> <p>(ii). Subrecipient's unique entity identifier;</p> <p>(iii). Federal Award Identification Number (FAIN);</p> <p>(iv). Federal Award Date;</p> <p>(v). Subaward Period of Performance Start and End Date;</p> <p>(vi). Subaward Budget Period Start and End Date;</p> <p>(vii). Amount of Federal Funds Obligated in the subaward;</p>	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-054 Subrecipient Monitoring (continued)

- (viii). Total Amount of Federal Funds Obligated to the subrecipient by the pass-through entity, including the current financial obligation;
 - (ix). Total Amount of the Federal Award committed to the subrecipient by the pass-through entity;
 - (x). Federal award project description, as required by the Federal Funding Accountability and Transparency Act (FFATA);
 - (xi). Name of the Federal agency, pass-through entity, and contact information for awarding official of the pass-through entity;
 - (xii). Assistance Listings title and number; the pass-through entity must identify the dollar amount made available under each Federal award and the Assistance Listings Number at the time of disbursement;
 - (xiii). Identification of whether the Federal award is for research and development; and
 - (xiv). Indirect cost rate for the Federal award (including if the de minimis rate is used in accordance with § 200.414).
- (c) Evaluate each subrecipient's fraud risk and risk of noncompliance with a subaward to determine the appropriate subrecipient monitoring described in *paragraph (f)* of this section.
- (d) If appropriate, consider implementing specific conditions in a subaward as described in § 200.208 and notify the Federal agency of the specific conditions.
- (e) Monitor the activities of a subrecipient as necessary to ensure that the subrecipient complies with Federal statutes, regulations, and the terms and conditions of the subaward. The pass-through entity is responsible for monitoring the overall performance of a subrecipient to ensure that the goals and objectives of the subaward are achieved.
- (1) Review financial and performance reports.
 - (2) Ensure that the subrecipient takes corrective action on all significant developments that negatively affect the subaward.
 - (3) Issue a management decision for audit findings pertaining only to the Federal award provided to the subrecipient from the pass-through entity as required by § 200.521.
 - (4) Resolve audit findings specifically related to the subaward.
- (g) Verify that a subrecipient is audited as required by subpart F of this part.”

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-054 Subrecipient Monitoring (continued)

Condition:	<p>Higher Education Policy Commission (HEPC)</p> <ul style="list-style-type: none">• Management does not have subrecipient policies in accordance with 2 CFR 200.332.• Management did not perform the subrecipient procedures outlined in 2 CFR section 200.332 for its pass-through entities including performing a risk assessment and monitoring the subrecipient to ensure that the subrecipient complies with Federal statutes, regulations, and the terms and conditions of the subaward.• Management represented it obtained its audit reports but did not retain documentation of its review and approval of the reports.• We tested two subrecipient subaward agreements and noted they did not include the subrecipient's unique entity identifier and identification that the Federal award is for research and development as required by 2 CFR 200.332(b). <p>West Virginia University (WVU)</p> <ul style="list-style-type: none">• WVU is not following its subrecipient monitoring policy.<ul style="list-style-type: none">– For the five new subaward selections tested, WVU did not complete a risk assessment (management level determinations) for each subrecipient before signing the subaward agreement.– For five of the six subrecipients we tested, WVU did not fully complete the subrecipient monitoring checklist for each subrecipient. For one of the six subrecipients we tested WVU did not complete a subrecipient monitoring checklist.
Cause:	<p>Management does not have subrecipient policies in accordance with 2 CFR section 200.332. (HEPC)</p> <p>Management is not following its subrecipient policy. (WVU)</p> <p>Management internal controls over the review and approval of the subaward agreements is not robust enough to identify that the required information is included. (HEPC, WVU)</p>
Effect or Potential Effect:	<p>Management is not in compliance with 2 CFR section 200.332.</p> <p>Management may not appropriately monitor subrecipient activities to provide reasonable assurance that the subrecipient administered the subaward in compliance with the terms and conditions of the subaward.</p> <p>Management may not identify the subaward and applicable requirements and other award information sufficient for the pass-through entity to comply with Federal statutes, regulations, and the terms and conditions of the Federal award.</p>
Questioned Costs:	<p>\$0</p>

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-054 Subrecipient Monitoring (continued)

Context: HEPC had subrecipients expenditures totaling \$2,680,997 for the year ended June 30, 2024, representing 5 subrecipients.
WVU had subrecipient expenditures totaling \$9,320,826 for the year ended June 30, 2024, representing 27 subrecipients.
Total R&D Cluster expenditures reported on the SEFA are \$31,366,340 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is not a repeat finding.

Recommendation: We recommend that management develop subrecipient policies in accordance with 2 CFR section 200.332 and perform the subrecipient procedures outlined in 2CFR section 200.332 for its pass-through entities.
WVU management should ensure it is following its written policies over subrecipient monitoring.
In addition, management should review its internal controls over subaward agreements to ensure it requires a more robust review of the required information to be included in the subaward agreement.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-055 Special Tests and Provisions – Key Personnel

Identification of the Federal Program:	Federal Agency and Program Name	Assistance Listing #
	Research and Development Cluster National Science Foundation U.S. Department of Health and Human Services	47.049, 47.076 93.103, 93.942
Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>2 CFR sections 200.308(f) Revisions Requiring Prior Approval</p> <p>A recipient or subrecipient must request prior written approval from the Federal agency or pass-through entity for the following program and budget-related reasons:</p> <ol style="list-style-type: none"> (1) Change in key personnel (including employees and contractors) that are identified by name or position in the Federal award. (2) The disengagement from a project for more than three months, or a 25 percent reduction in time and effort devoted to the Federal award over the course of the period of performance, by the approved project director or principal investigator. 	
Condition:	<p>Management does not have internal controls over the revisions to key personnel or the approved project director or principal investigator.</p> <p>Fairmont State University (FSU)</p> <ul style="list-style-type: none"> • Management does not have a formal process to track changes in key personnel’s effort or changes in the approved project director or principal investigator. For four of our five selections subject to testing there was no effort report available to determine if the key personnel were working on the project in line with the grant agreement <p>West Virginia Department of Agriculture (WVDA)</p> <ul style="list-style-type: none"> • Management does not have a formal process in place to track changes in key personnel’s effort or changes in the approved project director or principal investigator. • Management is not tracking changes in key personnel’s effort greater than 25% in a 3-month period. 	

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-055 Special Tests and Provisions – Key Personnel (continued)

West Virginia University (WVU)

- For three of the nineteen selections, WVU was not able to provide the required documentation to support the key person was working on the project as required per the grant agreement.
- For four of the nineteen selections, WVU did not provide documentation to support our testing over key personnel.

Cause: Management does not have internal controls over reporting changes in key personnel or the approved project director or principal investigator to the awarding Federal agency. (FSU, WVDA)

Management does not have effective internal controls over maintaining documentation relevant to key personnel. (WVU)

Details supporting the key personnel selections were not provided as part of the audit. (WVU)

Effect or Potential Effect: Management may not properly report changes in key personnel or changes in effort for the project director or principal investigator.

Questioned Costs: \$41,196 – represents total payroll and fringe costs for the positions where changes in effort greater than 25% were not reported to the awarding Federal agency for the following awards or where supporting documentation of the effort certification was not maintained:

FSU – \$8,794 – represents payroll and fringe costs for positions where supporting documentation of the effort certification was not maintained.

- ALN 47.076 – Award 2130106 – \$3,794
- ALN 47.076 – Award HRD-1834575 – \$500
- ALN 47.076 – Award 1834586 – \$2,500
- ALN 47.049 – Award 2150226 – \$2,000

WVDA – \$26,780 – ALN 93.103 – represents payroll and fringe costs for the positions where changes in effort greater than 25% were not reported to the awarding Federal agency.

- Award 5U18FD007198 – \$3,515
- Award 1U2FFD008116 – \$4,571
- Award 5U2FFD007445 – \$18,694

WVU – \$5,622 – ALN 93.942 – Award WU-23-0152 – represents payroll and fringe costs for positions where effort was unable to be determined, or the effort certification was not maintained.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-055 Special Tests and Provisions – Key Personnel (continued)

Context: FSU – Total payroll costs were \$146,983 for the year ended June 30, 2024.
WVDA – Total payroll costs were \$585,045 for the year ended June 30, 2024.
WVU – Total payroll costs were \$4,888,044 for the year ended June 30, 2024.
Total R&D Cluster expenditures reported on the SEFA are \$31,366,340 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is not a repeat finding.

Recommendation: We recommend that management develop internal controls and policies and procedures over reporting changes in key personnel and changes in effort for the project director or principal investigator. In addition, the internal controls should include reporting changes in key personnel or the project director or principal investigator to the awarding Federal agency.
Additionally, management should retain the details of all changes in key personnel and changes in effort for the project director or principal investigator.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–056 Period of Performance

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
	Research and Development Cluster	
	Department of Agriculture	10.310
	U.S. Department of Health and Human Services	93.279, 93.942

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	<p>2 CFR 200.303 requires that a non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”</p> <p>2 CFR.344 (a) The Federal agency or pass-through entity must close out the Federal award when it determines that all administrative actions and required work of the Federal award have been completed. When the recipient or subrecipient fails to complete the necessary administrative actions or the required work for an award, the Federal agency or pass-through entity must proceed with closeout based on the information available. This section specifies the administrative actions required at the end of the period of performance.</p> <p>2 CFR.344 (c) The recipient must liquidate all financial obligations incurred under the Federal award no later than 120 calendar days after the conclusion of the period of performance. A subrecipient must liquidate all financial obligations incurred under a subaward no later than 90 calendar days after the conclusion of the period of performance of the subaward (or an earlier date as agreed upon by the pass-through entity and subrecipient). When justified, the Federal agency or pass-through entity may approve extensions for the recipient or subrecipient.</p>
Condition:	<p>West Virginia University (WVU) management does not have internal controls to ensure closeout procedures are followed in accordance with 2 CFR 344(a) and (c).</p> <p>We noted WVU did not liquidate certain financial obligations incurred under various Federal awards within 120 calendar days after the end date of the period of performance as specified in the terms of the Federal award.</p>
Cause:	<p>Management does not have internal controls to ensure that the close-out process occurs in accordance with the terms and conditions of the Federal award and 2 CFR 344(a).</p>
Effect or Potential Effect:	<p>Management did not properly liquidate its financial obligations incurred under certain of its Federal awards within 120 calendar days after the conclusion of the period of performance.</p>

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–056 Period of Performance (continued)

Questioned Costs: \$478,903 – represents the total financial obligations not obligated within 120 calendar days after the conclusion of the Federal award period of performance.

Assistance Listing Number	Award Number	Expenditures
10.310	2020-67014-30901	\$1,135
93.279	20-A0-S2-003671 21-A0-S3-003671 7-DP1-DA-048570-04 AWD00000584 (139027-2) CON-80003459 (GR114197) CON-80004218 (GR119407) NA	\$467,340
93.942	WU-23-0152	\$10,427

Context: Total WVU R&D expenditures are \$23,072,580 for the year ended June 30, 2024.

Total R&D Cluster expenditures reported on the SEFA are \$31,366,340 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is not a repeat finding.

Recommendation: We recommend that management develop internal controls and policies and procedures over the close-out process to ensure all financial obligations incurred under its Federal awards are liquidated within 120 calendar days after the conclusion of the period of performance.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-057 Reporting

Identification of the Federal Program:

Federal Agency and Program Name **Assistance Listing #**

U.S. Department of Health and Human Services Low-Income Home Energy Assistance Grant Award 2201WVLIEI Grant Award 2301WVLIEE Grant Award 2301WVLIEI Grant Award 2301WVLIEA Grant Award 2401WVLIEA Grant Award 2401WVLIEI	93.568
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Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):

2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).”

2 CFR 200.329 also requires the recipient monitor and report program performance by submitting reports as required by the Federal award that cover each program function and activity. As applicable, performance reports should contain information on the following: (i) a comparison of accomplishments to the objectives of the Federal award established for the reporting period, (ii) explanations on why established goals or objectives were not met; and (iii) additional information, analysis, and explanation of cost overruns or higher-than-expected unit costs.

45 CFR 96.82 requires “each grantee which is a State or an insular area which receives an annual allotment of at least \$200,000 shall submit to the Department, as part of its LIHEAP grant application, the data required by section 2605(c)(1)(G) of Public Law 97-35 (42 U.S.C. 8624(c)(1)(G)) for the 12-month period corresponding to the Federal fiscal year (October 1-September 30) preceding the fiscal year for which funds are requested. The data shall be reported separately for LIHEAP heating, cooling, crisis, and weatherization assistance.”

42 U.S.C. 8624(c)(1)(G) states “as part of the annual application required in subsection (a), the chief executive officer of each State shall prepare and furnish to the Secretary, in such format as the Secretary may require, a plan which states, with respect to the 12-month period specified by the Secretary, the number and income levels of households which apply and the number which are assisted with funds provided under this subchapter, and the number of households so assisted with—

- (i) one or more members who had attained 60 years of age;
- (ii) one or more members who were disabled; and
- (iii) one or more young children”

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-057 Reporting (continued)

Condition: Management did not retain its reconciliation of assisted households, applicant households, and performance management data received from its third-party service provider as reported in the Quarterly Performance and Management Report and the Annual Report on Households Assisted by LIHEAP to the RAPIDS system to ensure completeness and accuracy of the information.

Cause: The internal control was not properly designed to require the retention of the reconciliations performed as part of management's review and approval of the reports prior to submission to the Federal agency.

Effect or Potential Effect: The submitted Quarterly Performance and Management Report and Annual Report on Households Assisted by LIHEAP could have incorrect or inaccurate data or amounts.

Questioned Costs: \$0

Context: Total Federal expenditures for the program were \$34,684,393 for the year ended June 30, 2024.

Identification as a Repeat Finding: This is not a repeat finding.

Recommendation: We recommend that management retain the reconciliations of the data received from its third-party service provider to the underlying internal source system to ensure accuracy and completeness as part of its review and approval of reports prior to submission.

Views of Responsible Officials: Management concurs with the finding and has developed a plan to correct the finding.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024–058 Subrecipient Monitoring

Identification of the Federal

Program:	Federal Agency and Program Name	Assistance Listing #
	U.S. Department of Health and Human Services Low-Income Home Energy Assistance	93.568
	Grant Award 2201WVLIEI	
	Grant Award 2301WVLIEE	
	Grant Award 2301WVLIEI	
	Grant Award 2301WVLIEA	
	Grant Award 2401WVLIEA	
	Grant Award 2401WVLIEI	

Criteria or Specific Requirement (Including Statutory, Regulatory or Other Citation):	2 CFR 200.303 requires that the non-Federal entity must “(a) establish and maintain effective internal control over the Federal award that provides reasonable assurance that the non-Federal entity is managing the Federal award in compliance with Federal statutes, regulations and the terms and conditions of the Federal award. These internal controls should be in compliance with guidance in “Standards for Internal Control in the Federal Government” issued by the comptroller General of the United States and the “Internal Control Integrated Framework”, issued by the Committee of Sponsoring Organizations of the Treadway Commission (COSO).” Per 2 CFR 200.332(c), a pass-through entity must evaluate each subrecipient’s fraud risk and risk of noncompliance with a subaward to determine the appropriate subrecipient monitoring procedures.
Condition:	We selected a sample of nine subrecipient subawards (totaling \$2,223,962) executed in fiscal year 2024 and noted risk assessments were not performed for any of the subrecipients’ subawards.
Cause:	The internal controls were not suitably designed to ensure that a risk assessment is performed for each subaward.
Effect or Potential Effect:	Lack of performing risk assessments could potentially lead to insufficient monitoring procedures performed.
Questioned Costs:	\$0
Context:	Total subrecipient expenditures for the program were \$16,149,367 for the fiscal year ended June 30, 2024. Total Federal expenditures for the program were \$34,684,393 for the fiscal year ended June 30, 2024.
Identification as a Repeat Finding:	This is not a repeat finding.
Recommendation:	We recommend that management review its internal controls over the risk assessment process and establish a policy to ensure that subrecipient risk assessments are timely performed.

State of West Virginia

Schedule of Findings and Questioned Costs (continued)

For the Year Ended June 30, 2024

2024-058 Subrecipient Monitoring (continued)

**Views of
Responsible
Officials:**

Management concurs with the finding and has developed a plan to correct the finding.

***CORRECTIVE
ACTION
PLAN***



CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

CONTACT PERSON

For finding resolution and Single Audit matters, please contact Betsy Chapman, West Virginia Department of Administration, Financial Accounting and Reporting Section, 2101 Washington Street, E., Charleston, WV 25305 (Telephone 304-414-9072). E-mail: Betsy.Chapman@wv.gov. The respective state agency identified in each finding is responsible for the corrective action plan.

2024-001 DEPARTMENT OF HUMAN SERVICES INFORMATION SYSTEM AND RELATED BUSINESS PROCESS CONTROLS
Department of Human Services (DoHS)
Assistance Listing Number 10.551, 10.561, COVID-19 10.561, 93.558, 93.568, 93.575, 93.596, COVID-19 93.575, 93.775, 93.777, 93.778, 93.767, 93.788

With regards to the condition noted for the FACTS UAR, The MMIS does not agree with the statement that FACTS is “without a complete and comprehensive user access review”. The UAR is a process to review all workers in the system at a specific point in time which was done on April 10, 2024. The auditors were provided with evidence from reports, screenshots and emails that the UAR was completed which accounted for all workers. A new report to help with this review was also created and provided to the auditors that showed all active workers throughout the audit period of July 1, 2023 to June 30, 2024. Additionally, in the prior year audits, the auditors selected individual worker samples to test; however, those samples were not conducted during this year to help verify the records.

The DoHS implemented a new information technology system for child welfare case work, processing payments, maintaining documentation, etc. The name of the new system is WVPATH (West Virginia People’s Access to Help). The WVPATH system replaced the Family and Children’s Tracking System (FACTS) which was referenced in the finding. The implementation of the WV PATH system was completed in January 2023. The WVPATH system has additional controls and levels of review as compared with the FACTS systems. During the entire fiscal year 2024, the WV PATH system was operational. Additionally, the FACTS system was set to a “read-only” for child welfare staff and access limited users shortly after the WV PATH system was operational. The FACTS system child welfare records are no longer updatable and only accessible by limited users to search historical data. FACTS data is set to be preserved, some of the data will be transferred to the WV PATH system. The FACTS system is scheduled to be discontinued in the near future.



CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

With regards to the condition noted for RAPIDS, The Department of Human Services Bureau for Family Assistance PATH system (formerly RAPIDS) maintains internal controls as required under federal regulations, including 7 CFR 272.4(c)(1), as well as the Standards for Internal Control in the Federal Government and the standards as set forth in the executive summary of the Internal Control – Integrated Framework prepared by the Committee of Sponsoring Organizations of the Treadway Commission.

Internal control regulations, located at 7 CFR 272.4(c)(1), subtitled “Requirements.”, reads, in part, in order to safeguard certification and issuance records from unauthorized creation or tampering, the State agency shall establish an organizational structure which divides the responsibility for eligibility determinations and coupon issuance among certification, data management, and issuance units.” The PATH system (formerly RAPIDS) maintains segregation of these activities. Certification duties are performed by employees managed under the divisions of Field Operations. Data management is maintained by the Department’s contractor, Optum. Issuance activities are performed through the Division of Finance, including, but not limited to, the Office of Electronic Benefits.

These separations of duties meet the requirements within the Standards for Internal Control in the Federal Government under the heading of “Segregation of duties” beginning on page 47 of the document located at <https://www.gao.gov/assets/gao-14-704g.pdf>.

Regarding the “batch level, which does not allow the approver to review each transaction individually” finding, our system meets the standards set forth in 7 CFR 274.1(h), which reads, in part, “[t]he State agency shall establish the master issuance file in a manner compatible with its system used for maintaining case record ... The master issuance file shall contain all the information needed to identify certified households, issue household benefits, record the participation activity for each household and supply all information necessary to fulfill the reporting requirements prescribed in § 274.4.” In addition, it meets all requirements for 7 CFR 274.1(h)(1)(ii), which includes a review of the master file prior to issuance.



CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

**2024-002 DEPARTMENT OF HUMAN SERVICES INFORMATION
TECHNOLOGY GENERAL CONTROLS – WVPATH
Department of Human Services (DoHS)
Assistance Listing Number 93.658, 93.659, 93.767, 93.775, 93.777, 93.778**

- WV PATH Child Welfare (WV PATH CW) and WV PATH Family Assistance (WV PATH FA) were unable to provide a complete and accurate listing of all new hires, modified users, and terminated users for their systems.

The Department of Personnel and the WV DoHS system is the same one that has been utilized for more than 30 years. This states and explicitly explains that a person may be hired and given a start day to report to a specified office, the orientation to that job may be a requirement to be completed prior to any other action. Afterwards, the Supervisor or appointing authority may then request a RACF ID be assigned to the new worker as well as a Network ID. Once that information is provided back to the requestor, the actual User ID and privileges to the system are requested, this can obviously be another date. The request for an ID is processed and again, due to separation of duty, forwarded onto the separate unit to be completed. The DoHS system was never designed to capture an exact date since as stated this can be numerous dates. The system was also never designed to capture an end-date of an employee/worker's access to the system. This has been noted in a comment section of the system for the entire existence of the eligibility system. The effort to reconfigure the Hire and Termination Dates into a system would place a financial burden on the State of WV that has never been needed or requested before.

- RAPIDS, WV PATH CW and WV PATH FA did not complete a comprehensive user access review.

Once all documentation for an ID is received, signed, processed, the paper records are recorded to a secure State owned and maintained drive. The rollout from all segregated units to be connected to one platform - the Common Landing Page - commonly referred to as CLP; was not completed until July 2024. After that time the PATH FA completed several internal audits to ensure the accuracy of those who had access to the system of BCSE-OSCAR. Also, annually the PATH FA completes a yearly internal audit of all individuals who have access to the system and an affidavit is signed by the Supervisors within each county to attest to the validity of the lists that are composed and sent



CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

to them to review. Those individuals are provided with a time frame to submit this composed record back to the Security Maintenance team to inactivate the person or persons who no longer need or require access to the system. The second layer of an audit is provided by WV Office of Technology. This report indicates that if a person has not signed in or logged onto the Legacy and/or WV IES PATH system within 180 days the RACF ID that has been assigned to them is placed in an inactive state. The report is provided monthly, but as stated previously this may not be accurate since a worker may be on FMLA or enduring a medical procedure which may cause them to not be physically able to log onto the system but still be an active and in good standing State of WV employee. No action is taken based on this monthly report; however, it is an added layer to ensure DoHS are not utilizing this report due to the example provided. OMIS and PATH FA staff are working to enhance the audit process and make this a more streamlined effort but also make this occur more frequently throughout the year. DoHS delayed implementing this due to the roll out and onboarding of the last unit to be added to the CLP- Common Landing Page. OMIS and PATH FA staff will begin a bi-annual audit process, which will occur each May and November beginning with May 2025.

The PATH CW UAR was completed on July 31, 2024, based on a query of all active PATH CW users generated by Optum. A list of workers on the UAR was provided as well as the code used to pull the list and screenshots demonstrating how it was generated. An additional report is included.

A working copy of the list of workers for the PATH CW UAR was provided containing the results of the review. The admin staff have reviewed each worker record for accuracy and processed any requests.

- WV PATH CW does not track documentation detailing validation of infrastructure patches which do not directly involve code deployment changes.

Optum provided a document on 1/17/2025 “SAA_2024_CAL_2B_PATH_CW_narratives on changes not code related or to training” that provided evidence and documentation on the validation of patching is taking place. The list of changes for PATH CW was provided to the auditors along with a revision showing the screenshots a few days later.



CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

The Optum infrastructure team, Infrastructure Management Services (IMS) is responsible for scheduling and deploying patches to servers. In order to complete the scheduling process, IMS uses the ServiceNow tool and email to communicate dates, times, and patches that will be deployed to server owners' systems (for this instant that will be the team(s) supporting the PATH CW systems.) This change process follows the company standards for changing control in the Optum FE environment. As provided in evidence, the lower-level environments are the first to receive the patching with validation checkouts completed by the appropriate teams which are documented, such as PATH CW. The PATH team uses Service Now Gov ticketing to provide information on the scheduled downtime to production systems to the state customer and to get state approval for the downtime.

- WV PATH FA management did not implement separation of duties during UAR, and supervisors reviewed their own access.

The final finding of a CSM - Community Service Manager - signing off on their own access did occur for one county and it was not a statewide occurrence. This should not have occurred, and steps were implemented in May 2024 to prevent this from being allowed or permitted going forward.

2024-003 MMIS USER ACCESS REVIEW **Department of Health, Health Facilities, and Human Resources** **Assistance Listing Number 93.775, 93.777, 93.778, 93.767**

The Bureau for Medical Services, Office of Enterprise Systems, Medicaid Management Information System (MMIS) Operations team is developing a Desk Level Procedure (DLP) for system access audits. The new DLP will include guidance on tracking access request confirmations via a spreadsheet. Basic information captured will be the date when an email is sent and follow-up due date. These steps will be added to the existing process executed in performing system access audits to ensure that timely follow-ups occur, and that documentation is available for auditors. There will also be a process put into place for another team member to double-check the audit information before it is submitted. MMIS plans to implement the change by June 1, 2025.



CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

2024-004 SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
Financial Accounting and Reporting Section, Division of Highways
Assistance Listing Number 10.310, 15.808, 15.945, 47.083, 47.076, 66.716,
81.057, 93.121, 93.213, 93.279, 93.310, 93.393, 93.395, 93.837, 93.838,
93.840, 93.847, 93.853, 93.866, 93.867, 93.942, 97.036

Financial Accounting and Reporting Section (FARS) response

Effective January 2025, FARS has implemented policies and procedures to ensure all research and development grants received by any state agency will be included in the R&D Cluster and that the correct assistance listing number will be used. These policies and procedures will be discussed during closing book training in June 2025 for all state agencies and a closing book form has been updated to track all R&D grants. The updated closing book form will be included in the closing book packets starting in FY2025 going forward. Each agency will list any R&D grants on the form using the assistance listing number on the grant award when submitting their SEFA information to FARS to ensure they are included in the R&D Cluster when compiling the State's draft and final SEFA.

Division of Highways (DOH) response

The DOH did not report all expenses on the SEFA in prior years for FEMA. The DOH will correct the beginning cash balance to include prior year expenses for the FY 2025 SEFA. Effective February 1, 2025, the DOH will run monthly reports for the FEMA funds and reconcile the receipts transferred from WV Division of Emergency Management to the expenses that were recorded for FEMA to ensure that expenses are being captured correctly on the SEFA.

2024-005 INTERNAL CONTROLS OVER SUBRECIPIENT MONITORING
Department of Health, Health Facilities, and Human Resources
Assistance Listing Number 93.788, 93.575, 93.596, COVID-19 93.575,
93.558

Effective June 10, 2024, the Office of Shared Administrations' Chief Financial Officer issued a directive to the Department of Health, Department of Health Facilities and the Department of Human Services (spending units) which implemented a requirement that risk assessments and certifications would need to be completed by spending unit staff prior to the issuance of all subawards. If during the evaluation of risk, a spending unit determines that a subrecipient's risk is high, the award can still be made but should include specific terms and additional conditions as appropriate to the risk and as deemed necessary by the spending unit. To ensure all risk assessments have been completed prior to finalizing a subaward, a hard stop has been



CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

incorporated within the Department's subrecipient Grants Management Solution system (CRM) if the risk assessment is missing prior to completion of the award. Therefore, no grant award can be sent to a grantee for final signatures without a copy of the risk assessment being included as part of the overall grant documentation. The process was implemented for grants beginning on or after July 1, 2024.

Since the process is new, the Department may find the need to make modifications going forward. Once it has been determined that the process is working as desired, the Department plans to incorporate the risk assessment process and the related certifications into the CRM system to streamline the workflow process.

2024-006 SPECIAL TESTS AND PROVISIONS – ADP SYSTEM FOR SNAP Department of Human Services (DoHS) Assistance Listing Number 10.551, 10.561, COVID-19 10.561

Management appreciates and shares the auditors' concern with SNAP program integrity as it relates to the RAPIDS ADP system. DoHS notes that 7 CFR § 272.10 begins with, "(1) Purpose. All State agencies are required to sufficiently automate their SNAP operations and computerize their systems for obtaining, maintaining, utilizing and transmitting information concerning SNAP. Sufficient automation levels are those which result in effective programs or in cost effective reductions in errors and improvements in management efficiency, such as decreases in program administrative costs". Within the RAPIDS ecosystem for SNAP administration, this automation includes data matching measures undertaken, in compliance with related federal rules as specified in 7 CFR § 272.8, 7 CFR § 272.16, etc., to automate the validation of client-provided, worker-input information while mitigating the additional administrative burden of secondary review for all worker interactions with a client's case. Policy regarding state and federal data matching is laid out in Chapter 6 of the State's Income Maintenance Manual (IMM).

The primary data exchange system detailed in IMM Chapter 6 that is applicable to SNAP is the Income and Eligibility Verification System (IEVS) required by 7 CFR § 272.8. Systems mandated federally for inclusion in the IEVS include those operated by Workforce WV, the Internal Revenue Service (IRS), and the U.S. Social Security Administration (SSA). A variety of other sources may also be queried for the purpose of validating client-provided information entered into RAPIDS by a worker, including Veterans Affairs (VA), Beneficiary and Earnings Data Exchange (BENDEX), Beneficiary



CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

Earnings and Exchange Record System (BEERS), National Directory of New Hires, and Prisoner Matching with the Department of Corrections as well as the Federal Data Services Hub (FDSH).

IMM Chapter 6, page 2 describes the purpose of data matching through the IEVS. Information obtained through IEVS is used to verify the eligibility of the assistance group (AG), verify the proper amount of benefits, determine if the AG received benefits to which it was not entitled, obtain information for use in criminal or civil prosecution based on receipt of benefits to which the AG was not entitled.

IMM Chapter 6, pages 2-3 further detail the points at which a match with the IEVS must take place when a data exchange in the eligibility system occurs, when a new case is created, when a new person is added to a benefit, When a person's demographic information is changed; and, on a periodic basis for all individuals in the eligibility system, depending on the type of benefit being received.

Requirements for independent verification of information when automated data matches fail or report a discrepancy with client-provided, worker-input information are spelled out in IMM 6.4.4.

The DoHS believes that these automations, while perhaps not foolproof, are in keeping with both the word and intent of 7 CFR § 272.10, 7 CFR § 272.8, 7 CFR § 272.16, etc., which aim to automate processes to reduce administrative burden and associated costs, such as those that would be associated with a secondary review of all worker interactions with a client's case.

Furthermore, page 4-10.551-9 of the Compliance Supplement 2023 which lays out the suggested audit procedures for this topic recommends the use of the USDA-FNS SNAP System Integrity Review Tool (SIRT) to ensure that the State's ADP system is in alignment with USDA-FNS requirements and ensure that automated processes within RAPIDS continue to comport with federal requirements for ADP systems. To our knowledge, the auditors neither utilized that tool to guide their work nor requested verification from the State that it had been previously employed. To accompany this response, DoHS provided a copy of the SIRT submitted to FNS on October 26, 2023, in preparation for the go-live of the WV PATH Family Assistance pilot program; DoHS would note that as there is no significant difference in system functionality between the Family Assistance module of WV PATH and the existing eRAPIDS system, the responses/comments/replies from both FNS and the State that are included in this version of the SIRT generally apply both to eRAPIDS and to PATH.



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Throughout 2023, the Division of Performance and Quality Improvement (DPQI) continued its ongoing SNAP case reviews, as well as continued its efforts to report compliance with monthly requirements for expanded supervisor case reviews conducted and tracked through the Rushmore case review system, as mandated in December 7, 2022, memorandum to supervisors provided to the auditors last year. Further, the Bureau for Family Assistance (BFA) developed additional worker training, including the reinstatement of face-to-face Statewide Payment Accuracy Conferences (held throughout the summers of 2023 and 2024), with the aim to ensure that client information is accurately captured in RAPIDS so the APD can perform its automated functions with integrity.

A December 11, 2024, letter from the USDA-FNS Mid-Atlantic Regional Office indicated that the Bureau's corrective actions in relation to this finding in prior years have adequately addressed the finding.

2024-007 TRANSPARENCY ACT REPORTING
Department of Education (WVDE)
Assistance Listing Number 10.553, 10.555, 10.556, 10.559, 10.582

WVDE has already put a process in place to report the child nutrition payments to Federal Funding Accountability and Transparency Act (FFATA). This process started in July 2024. FFATA reports have been filed for FY 2025.

2024-008 TRANSPARENCY ACT REPORTING
West Virginia Community Development Block Grant Program (CDBG)
Assistance Listing Number 14.228, COVID-19 14.228

To ensure necessary subaward data regarding first-tier subawards are reported in a timely fashion to meet FFATA requirements, the CDBG program manager, infrastructure unit manager, and the West Virginia Community Advance and Development (CAD) director will perform the following procedures:

1. Once CDBG applications are reviewed and scored, project and funding recommendations are submitted to the Office of the Governor for final review and approval.



CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

2. After CDBG subawards are announced, the CDBG Program Manager will prepare the FFATA report within 3 business days of receiving the Governor's CDBG award letters.
3. Prior to submitting the FFATA report in the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS), the CDBG Program Manager will provide the Infrastructure Unit Manager and the CAD Director with a copy of the draft report for review and approval.
4. Once the FFATA report is approved by the Infrastructure Unit Manager and the CAD Director, the CDBG Program Manager will submit the report in the FSRS.
5. After the FFATA report is submitted in FSRS and within 45 days of CDBG award announcements, the CDBG Program Manager will submit the FFATA report via email to the assigned Office of Community Planning and Development representative with HUD.

2024-009 TRANSPARENCY ACT REPORTING
Department of Environmental Protection (DEP)
Assistance Listing Number 15.252

DEP currently has written standard operating procedures in place for reporting subawards of \$30,000 or more in the Federal Funding Accountability and Transparency Act Subaward Reporting System. The audit found that three subawards were reported later than the timeframe required by FSRS, and two subawards reported the incorrect obligation date. DEP's standard operating procedures have been modified to include a pre-submission review level to ensure that these errors do not occur in the future.

2024-010 SUBRECIPIENT MONITORING
Department of Environmental Protection (DEP)
Assistance Listing Number 15.252

DEP currently has written standard operating procedures to ensure that all information required under 2 CFR 200.332 is included in each subaward. The one award that was found to be deficient did not contain five of the nineteen informational components of 2 CFR 200.332. DEP has corrected this error and has updated the standard operating procedures to include documentation in all subawards that contain these federal informational components.



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**2024-011 INTERNAL CONTROLS OVER INFORMATION TECHNOLOGY –
ACTIVITIES ALLOWED OR UNALLOWED, ALLOWABLE
COSTS/COST PRINCIPLES, ELIGIBILITY, REPORTING, AND
SPECIAL TESTS AND PROVISIONS**

**Workforce West Virginia (WWV)
Assistance Listing Number 17.225**

WWV will review the policies and procedures which documents the process for periodic review of administrative access and user access for the ABPS and UI Tax systems and make updates as needed to ensure employee terminations are reported timely to the WV Office of Technology (WVOT). Appropriate staff will be trained on the policies and procedures. Disaster Recovery testing was conducted with WVOT and the mainframe vendor Ensono October 2023. WWV will document review of future SOC reports.

**2024-012 REPORTING AND MATCHING
Workforce West Virginia (WWV)
Assistance Listing Number 17.225**

WWV Employment and Training Administration (ETA) 2112 reports are reviewed monthly using a sample 2112 report in excel before being keyed into the SUN system. Once entered into the ETA system the only option is to save the report. Any adjustment or re-saving of the document will cause the report to show as a revision. The four revisions that occurred in FY24: 1) July 2023 report after DOL issued UPIL 20-20, Change 1 related to Temporary Federal Compensation; 2) October 2023 report after keying error was identified the following month; 3) December 2023 report after starting January 2024 report and noticing that a US Treasury Interest Credit was now showing in Treasury Direct for December 2023, that was not shown in Treasury Direct when the 2112 report was prepared; and 4) June 2024 report after it was resaved within 2 minutes of being saved the first time. Beginning February 2025, WWV will begin printing the final entered 2112 for comparison to the 2112 excel file.

As of February 6, 2025, WWV has added an annual formal review of the matching calculation to ensure compliance with the program matching requirement of the Regular Unemployment Insurance receipts and payments.



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**2024-013 SPECIAL TESTS AND PROVISIONS: UI PROGRAM INTEGRITY –
OVERPAYMENTS
Workforce West Virginia (WWV)
Assistance Listing Number 17.225**

For the three instances, totaling \$47,552, where the overpayment memo was completed after the Deputy's decision was issued this could not have been avoided because in most instances where there is a Deputy's decision this often results in an overpayment. So, in this instance the overpayment memo would be completed after the Deputy's decision was made. WWV will continue to provide training on the policies and procedures for establishing overpayments.

**2024-014 REPORTING
Workforce West Virginia (WWV)
Assistance Listing Number 17.225**

WWV is in the process of modernizing the Alternative Base Period System (ABPS). At the current time it is not feasible for WWV to have an independent SOC review performed. During the modernization process WWV will work to identify ways that internal controls may be implemented to ensure the accuracy of performance and special reports of ABPS are accurate. This is expected to be completed by September 30, 2028. Prior to the completion of the modernization, WWV will work to identify ways the internal controls may be implemented to ensure the accuracy of the ABPS reports.

**2024-015 SPECIAL TESTS AND PROVISIONS: UI BENEFIT PAYMENTS
Workforce West Virginia (WWV)
Assistance Listing Number 17.225**

A WWV data analyst is responsible for ensuring that at least the minimum number of cases are being sampled. Each quarter the data analyst determines the number of cases for each type of audit that will be requested to meet the required number of samples each year. Once the schedule is prepared for the quarter, the data analyst emails or discusses the schedule with the Benefits Accuracy Measurement (BAM) Manager, the report is reviewed to verify they are on track to meet the required samples. Then, each week the data analyst compiles a report, submitted to the BAM Manager, of the aging of each case and a tally of the number of cases that have been assigned and completed. For FY2024, there were 480 paid samples reviewed. The BAM Unit will review and update the policies and procedures by June 1, 2025.



CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

2024-016 SPECIAL TESTS AND PROVISIONS – CONTRACTOR RECOVERIES
Division of Highways (DOH)
Assistance Listing Number 20.205

The DOH did not have adequate internal controls in place to ensure that contractor recoveries are reflected in billings to the federal government.

Internal control will be processed in the following order:

1. Contractor recovery payment is received by Accounts Receivable (AR).
2. Determining the WV Oasis coding and funding split will be completed by AR and Federal Aid (FA).
3. AR will deposit the check as a Cash Receipt (CR) to expenses based on coding determination which will complete the check receipt.

Additional internal control completed by FA is as follows:

1. FA will be utilizing Contract Admin’s “Contractor Recoveries” tracking Google Sheet that is shared between Contract Admin and FA.
2. FA will be monitoring and tracking the process of the check receipt.
3. FA will be monitoring and tracking prompt payment owed to the Federal Highway Administration and completing financial adjustments as needed.

These updated controls are effective as of January 13, 2025.

2024-017 TRANSPARENCY ACT REPORTING
Department of Education (WVDE)
Assistance Listing Number COVID-19 84.425U, 84.425W

The WVDE will ensure that all non-LEA signed grant awards are submitted to Internal Operations in a timely manner for FFATA reporting purposes. Internal Operations will ensure that all reports pertaining to FFATA are submitted in the allotted time frame in compliance with the federal reporting requirements and will be effective as of February 2025.



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2024-018 REPORTING

Department of Education (WVDE)

Assistance Listing Number COVID-19 84.425D, 84.425R 84.425U, 84.425V, 84.425W

The WVDE will ensure that all existing policies and procedures are followed and that all reports pertaining to Elementary and Secondary School Emergency Relief (ESSER) Fund reporting submission will be reviewed and approved by the appropriate responsible parties prior to final submission. This review and approval process will ensure that all amounts are reported accurately to the best of knowledge by the reporting team and subsequent supervisor(s). The WVDE will also update the specific variance identified in the finding once the ESSER reporting for Emergency Assistance to Nonpublic Schools reopens later this year. These processes will be effective February 2025.

2024-019 INTERNAL CONTROLS OVER SPECIAL TESTS AND PROVISIONS – CHILD SUPPORT NON-COOPERATION, PENALTY FOR REFUSAL TO WORK, AND ADULT CUSTODIAL PARENT OF CHILD UNDER SIX WHEN CHILD CARE NOT AVAILABLE

Department of Human Services (DoHS)

Assistance Listing Number 93.558

Effective May 1, 2025, WV WORKS Policy Unit staff will work with county office management to ensure that all staff are completing the required training on Sanctions. WV WORKS workers will be required to take a blackboard course on Case Comments to be opened on April 1, 2025, and available through April 30, 2025. The course will stress the importance of properly documenting the reason for sanction. A tracking form will be developed by the Division of Professional Development to track the completion of the blackboard courses.

Additionally, the Bureau is exploring peer review for case workers and supervisor review of case workers with less than two years of tenure to enforce proper documentation. The Bureau is also exploring adding additional Rushmore Peer and Supervisor Reviews for all case workers with less than two years of tenure to enforce the proper application and documentation of all sanctions.



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2024-020 SPECIAL TESTS AND PROVISIONS – PENALTY FOR REFUSAL TO WORK
Department of Human Services (DoHS)
Assistance Listing Number 93.558

Effective May 1, 2025, the Bureau of Family Assistance will develop a task team to review case parameters to ensure the accuracy of the data provided before the cases are pulled for sample. After the cases are pulled, a selection of cases will be reviewed for accuracy.

2024-021 SPECIAL TESTS AND PROVISIONS – INCOME ELIGIBILITY AND VERIFICATION SYSTEM
Department of Human Services (DoHS)
Assistance Listing Number 93.558

Effective April 1, 2025, WV WORKS workers will be required to take a blackboard course on Case Comments. The course will stress the importance of properly documenting all IEVS matches. Additionally, an exercise regarding IEVS case comments has been added to the third week of WV WORKS training. The Bureau is also exploring adding additional Rushmore Peer and Supervisor Reviews for all case workers with less than 2 years of tenure to enforce the proper documentation of all IEVS matches.

2024-022 ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE COSTS/COST PRINCIPLES
Department of Human Services (DoHS)
Assistance Listing Number 93.558

Effective April 1, 2025, WV WORKS workers will be required to take a blackboard course on Case Comments. The course will stress the importance of properly documenting any supportive payments. Desk guides for supportive payments and proper documentation required for each to be shared with field staff. The WV WORKS Policy unit will provide technical assistance to all county offices and will schedule ongoing technical assistance site visits statewide.



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**2024-023 SPECIAL TESTS AND PROVISIONS – PENALTY FOR FAILURE TO COMPLY WITH WORK VERIFICATION PLAN
Department of Human Services (DoHS)
Assistance Listing Number 93.558**

Effective April 1, 2025, WV WORKS workers will be required to take a blackboard course on Case Comments. The course will stress the importance of properly documenting participation hours. The WV WORKS Policy Unit is developing desk guides on the proper documentation of participation hours, components and supportive payments.

**2024-024 SPECIAL TESTS AND PROVISIONS - PROVIDER ELIGIBILITY FOR ARP ACT STABILIZATION FUNDS
Department of Human Services (DoHS)
Assistance Listing Number 93.575, COVID-19 93.575, 93.596**

The ARP Stabilization Grant Program was a temporary funding allocation given to states during the Covid-19 pandemic. All funds were required to be expended by September 30, 2023. This program no longer exists. Should such a funding opportunity arise in the future, the Division of Early Care and Education will establish procedures to ensure that providers who indicate a desire to receive WV Child Care Stabilization payments are thoroughly screened for eligibility through the implementation of an online data system designed to ensure all eligibility requirements are met and documented prior to awarding funding.

**2024-025 ACTIVITIES ALLOWED OR UNALLOWED, ALLOWABLE COSTS/COST PRINCIPLES, ELIGIBILITY, AND SPECIAL TESTS AND PROVISIONS – PAYMENT RATE SETTING AND APPLICATION
Department of Human Services (DoHS)
Assistance Listing Number 93.658**

Out of state facilities will be required upon request, or at a minimum annually, to submit a list containing details of the date of hire and date of fingerprinting for criminal clearance as well as information demonstrating child and adult protective services maltreatment checks were completed for each employee. If the agency refuses to submit the required information, they will be deemed ineligible for Title IV-E reimbursement and documented in Comprehensive Child Welfare Information System as such.

For out of state facilities with which the Bureau of Social Services has a contract or child specific agreement, an addendum will be included requiring



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hire dates cannot precede the date of fingerprinting for criminal clearance nor the date the results are received.

Specialists from the out of state review team within the Division of Regulatory Management will complete a report, containing any findings, that will be uploaded to the PATH provider file, as well as the internal provider record that is maintained within the Division of Regulatory Management. This will be required annually as part of the out-of-state facility licensing review. Out of State Contracts or Child Specific Agreements are renewed at the beginning of the state fiscal year July 2025 and continued annually.

Specialists from the out of state review team within the Division of Regulatory Management as part of their annual licensing review will ensure wvPATH provider records are updated to reflect timely licensing status as well as ensuring that child specific agreements do not lapse.

wvPATH did a code fix/system change on September 19, 2024, to allow the “Psychiatric Residential Treatment Facility” providers to have their Title IV-E reimbursable status set to no.

**2024-026 REPORTING
 Department of Human Services (DoHS)
 Assistance Listing Number 93.658**

The Bureau for Social Services (BSS) and the Office of Shared Administration (OSA) are a part of a continual work group to review items and issues with the wvPATH system to address them and add enhancements to the system. The child population for eligible foster care for children and the total population each reporting quarter is one of the enhancements the vendor has been working on for the past few months. Once the vendor has completed the work, the child population for the two missing report quarters will be available. These policies and procedures will be implemented in May 2025.

**2024-027 TRANSPARENCY ACT REPORTING
 Department of Human Services (DoHS)
 Assistance Listing Number 93.558, 93.788**

For the first Opioid item, the supervisor reviewing the FFATA reports should have asked the staff accountant to further investigate the Unique Entity Identifier (UEI) error as it would have been identified that the UEI was mistyped in the grant tracking system (CRM). By investigating the error



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further, the error would have been identified, and the information would have been reported in FSRS.gov for FFATA reporting.

For the second Opioid item, the supervisor reviewing the FFATA report should have identified that the obligation date entered on the FFATA report was incorrect. The report was for the month of February and obligation dates reported should have been for the month of February so an obligation date of 3/11/2024 should have drawn attention warranting further investigation. The supporting documentation reflected an obligation date of 2/28/2024 for this grant agreement so the error was an input error by the staff accountant entering the information. The two Opioid items will be discussed at the next bi-weekly meeting with the Grant Reporting staff to reiterate that current processes and procedures need to be followed.

For the TANF FFATA issue, grant staff have enhanced their internal controls by implementing the corrective action plan from the prior year finding in January 2024. The instance noted in this finding was reported in January 2024 when the corrective action was put into place. Management believes the current processes and procedures are now working.

2024-028 SUBRECIPIENT MONITORING
Department of Human Services (DoHS)
Assistance Listing Number 93.788

Upon issuance of the final West Virginia State Single Audit Report, the Bureau for Behavioral Health will seek to work with our Federal Oversight Agency, the Substance Abuse and Mental Health Services Administration (SAMHSA) to resolve the audit finding and to obtain clarification and/or technical assistance related to the review of programmatic reporting. Should SAMHSA confirm or confer with this finding, the Bureau for Behavioral Health will seek to implement procedural updates to comply with that guidance within 30 days of the formal confirmation.

As to the conditions identified in the second paragraph of this finding, it states that “DoHS was unable to provide all monthly performance reports for the subrecipient. Further, they were not able to provide documentation of the follow-up with the subrecipient to obtain the required reporting. The DoHS would like to note that for all grant agreements closed out during the most recent grant cycle, a final cumulative programmatic report was submitted by our subgrantees and reviewed by our staff. Due to significant volume in reporting and various delays that could impact programmatic performance and data submission, the Bureau for Behavioral Health procedures had allowed



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subgrantees to submit their most recent cumulative monthly report with year-to-date data in lieu of submitting multiple prior months missing reports.

With acknowledgment to the Auditor’s concerns, the DoHS believes and concurs that timely receipt and review of programmatic reporting is not only required by statute but vital to successful program oversight and administration. The Bureau for Behavioral Health will revise its internal procedures to mandate that for all grant agreements starting July 1, 2025, and after, that subgrantees submit programmatic reporting for each and every unique period as identified in the terms and conditions of the grant agreement. Further, in instances where no services are provided by the subgrantee, the Bureau shall mandate that those providers submit, at a minimum, verification that no program services were provided for the designated reporting period.

**2024-029 ACTIVITIES ALLOWED OR UNALLOWED, ALLOWABLE COSTS/COST PRINCIPLES AND ELIGIBILITY
 Department of Human Services (DoHS)
 Assistance Listing Number 93.659**

BSS issued a Memorandum / Standard Operating Procedure (SOP) for Adoption Subsidy and Services effective August 1, 2020. That SOP addresses steps staff should take to ensure subsidy payments are entered promptly and correctly. Additionally, the SOP discusses actions to ensure the adoption records are not missing information. This SOP will be recirculated to current staff that are responsible for the adoption record entry and maintenance.

**2024-030 ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE COSTS/COST PRINCIPLES
 Military Authority (MA)
 Assistance Listing Number 97.036, COVID-19 97.036**

MA purchased a new timekeeping system called ARRO for all state-active duty (SAD) operations. MA began using this new system on the 10/9/2024 – 11/1/2024 pay period and it will be used for all SAD operations going forward. ARRO provides record of certifications of time worked by West Virginia National Guard members to ensure that the members’ time is accurately reported and entered into the Oasis payroll system at the correct pay rates and amounts. The State Active-Duty Payroll Procedures in the new ARRO system are detailed below.

1. Due to the nature of missions and various locations, SAD soldiers and airmen do not have access to UKG, the state timekeeping system or paper



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timesheets. Soldiers and Airmen are paid on a daily basis. The MA has two ways to validate days worked and rates of pay.

- a. SAD orders are generated for all service members participating in any SAD domestic operation. These are created in ARRO, the new timekeeping system and loaded into the individual service member system of record Army (IPERMS) and Air. The soldiers and airmen's rate of pay are maintained by the G1 (Army) and A1 (Air) offices and flow into the ARRO system based on rank and years of service.
- b. The second certification is through a daily personnel status accountability report (Submitted in ARRO). At the conclusion of the pay period, the unit or Joint Task Force completes their pay certification, and the J1 will then certify and review the payroll, allowing the pay to move to MA Human Resource Department for download and submission into OASIS.

2024-031

SUBRECIPIENT MONITORING

Department of Human Services (DoHS)

Assistance Listing Number 93.323, COVID-19 93.323

On June 10, 2024, the Office of Shared Administrations' Chief Financial Officer issued a directive to the Department of Health, Department of Health Facilities and the Department of Human Services (spending units) which implemented a requirement that risk assessments and certifications would need to be completed by spending unit staff prior to the issuance of all subawards. If during the evaluation of risk, a spending unit determines that a subrecipient's risk is high, the award can still be made but could include specific terms and additional conditions as appropriate to the risk and as deemed necessary by the spending unit. To ensure all risk assessments have been completed prior to finalizing a subaward, a hard stop has been incorporated within the Department's subrecipient Grants Management Solution system (CRM) if the risk assessment is missing prior to completion of the award. Therefore, no grant award can be sent to a grantee for final signatures without a copy of the risk assessment being included as part of the overall grant documentation. The process was implemented for grants beginning on or after July 1, 2024.

Since the process is new, the Department may find the need to make modifications as we move forward. Once it has been determined that the process is working as desired, the Department plans to incorporate the risk



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assessment process and the related certifications into the CRM system to streamline the workflow process.

2024-032 **EQUIPMENT AND REAL PROPERTY MANAGEMENT**
Department of Human Services (DoHS)
Assistance Listing Number 93.323, COVID-19 93.323

The Office of Shared Administration Operations submitted the Asset management Certification as required by Policy that a physical inventory was completed as of June 2024 and that all assets under the Department head's jurisdiction as of June 30, 2024, with an acquisition cost of \$1,000 or more, computer equipment with an acquisition cost of \$500 or more, all weapons, and vehicles that are leased for one year or more regardless of acquisition cost, were entered into wvOASIS Fixed Asset Module for the current fiscal year and that all shell manual documents are final. The Certification further certifies that all obsolete assets under the Department head's jurisdiction were retired in accordance with Surplus Property policy, procedures and guidelines.

At this time, the Agency is unable to query a report of fixed assets using the CFDA number 93.323 as the CFDA number is not part of the chart of account elements used in the tracking of Fixed Asset in wvOASIS. Instead, the OSA utilized a report to obtain grant expenditures made on all programs tied to this specific CFDA. The report was then used to manually identify the fixed assets currently active in wvOASIS based on the expenditures referencing those programs and specific fixed asset reportable items over \$1,000 or computer equipment as required by WV Surplus Property.

Management believes that fixed assets for FY2024 are accounted for as certified by the annual certification. To report fixed assets more efficiently, management will update all identified Epidemiology fixed assets in the wvOASIS system with the chart of account elements necessary to report fixed assets that will reference back to the CFDA for reconciliation to expenditure reporting. This will require a request to the wvOASIS reporting team to add the program period chart of account element to the WV-FIN-AM-017 Assets by Department report in wvOASIS Business Intelligence. Management will also require that all future fixed assets recorded in wvOASIS will include the full fund accounting and detail accounting chart of accounts including program and program periods for future fiscal year reporting of fixed assets and reconciliation to expenditures. If the program period can't be added, OSA will work with the wvOASIS team to determine another method.



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2024-033 ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE COSTS /COST PRINCIPLES

**Department of Human Services (DoHS)
Assistance Listing Number 93.323, COVID-19 93.323**

For the payroll issue, the program is focused on continual improvement of supporting documentation. Management will remind staff of policies and procedures related to record keeping and retention of time and effort documentation to ensure adequate documentation supporting the time spent on the program is maintained to ensure that costs charged to the federal program are appropriate.

For the nonpayroll transactions, management believes there are multiple levels of review for the payment of invoices which begins with certification of an invoice. Financial coding is then provided by finance staff in the spending unit who have knowledge of the federal cost principles and the allowability of costs per 2 CFR Subpart E and work closely with the program staff to ensure invoices are coded correctly. When an invoice is against a contract, funding was determined to be allowable at the point when the contract was put in place. Invoices must use the same funding that is attached to the contract. Both contracts and invoices go through multiple workflows where staff audit them before approval. Purchasing card transactions are finalized via an automatic batch process in the accounting system. However, before the document in the system is created, the Pcard transaction must be approved. The approval is triggered by reconciliation in the system of the transaction. The next approval is at the Central Pcard Division when the transactions are marked approved.

2024-034 SUBRECIPIENT CASH MANAGEMENT **Department of Human Services (DoHS)** **Assistance Listing Number 93.323, COVID-19 93.323**

The West Virginia Department of Health has analyzed the conditions that led to this finding and determined that due to human error, there were invoices processed for subrecipient grants prior to receipt of the required expenditure reports which would have allowed staff to verify that the grantee is under the 10% threshold prior to authorizing payment. In February 2024, the Bureau for Public Health implemented the Subrecipient Grant Expenditure Checklist, Subrecipient Grant Invoice Checklist, and Invoice and expenditure tracking sheet completion requirements that alert staff of the percentage a grantee is holding once invoice and expenditure report data is input. Staff responsible for reviewing subrecipient expenditure reports and processing invoices will continue mandatory retraining and at the start of employment for new staff



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members and require the staff member to certify that the reviews are completed.

**2024-035 REPORTING AND EARMARKING
Office of the Governor (GO)
Assistance Listing Number COVID-19 21.027**

The GO understands the interpretation of the guidance leading to this finding from the auditors' perspective and has, accordingly, changed the timing of recording expenditures to be in line with this recommendation, effective on the January 31, 2025 reporting.

**2024-036 ELIGIBILITY FOR SUBRECIPIENTS
Department of Education (WVDE)
Assistance Listing Number 84.010**

Effective July 1, 2024, additional steps were taken to ensure an accurate number of formula children are used before concentration grants are awarded to LEAs. This additional step is necessary due to the growing number of charter schools and increases in their enrollment, which has an impact on some county district enrollments. Before grants are awarded, an additional review of student numbers, both increases and decreases, for each LEA will be completed.

**2024-037 LEVEL OF EFFORT AND EARMARKING
Department of Education (WVDE)
Assistance Listing Number 84.010**

Effective February 2025, additional steps will be taken to ensure an accurate number of formula children are used before concentration grants are awarded to LEAs. This additional step is necessary due to the growing number of charter schools and increases in their enrollment, which impacts some county district enrollments. Before grants are awarded, an additional review of student numbers, both increases and decreases, for each LEA will be completed.

**2024-038 REPORTING
Department of Education (WVDE)
Assistance Listing Number 10.553, 10.555, 10.556, 10.559, 10.582**

The Office of Child Nutrition staff member that is responsible for the manual claims calculation has been given additional training on how to reconcile the



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spreadsheet monthly. A printout from this monthly reconciliation will now be included as part of the support for the FNS-10 and FNS-418 meal count report submission. The Office of Child Nutrition manager will review and approve the reconciliation when certifying the Federal report submissions. This reconciliation is up to date for FY 2025.

2024-039

CASH MANAGEMENT AND INTERNAL CONTROL OVER FINANCIAL REPORTING

Bluefield State University, Glenville State University, and West Liberty University

Assistance Listing Number 84.063, 84.268

Bluefield State University (BSU) response

The Office of Financial Aid will perform monthly DL reconciliations between Banner and COD disbursement reports with the following steps:

1. Compare financial aid office records with business office disbursements for refunds of cash made by the business office to the Department of Education's G5 payment management system but not recorded in the financial aid office system.
2. Disbursements made by the business office but not recorded in the financial aid office system or not sent to COD and accepted.
3. Instances when the financial aid office calculated a return of aid and reported a downward adjustment to COD, the information was not recorded in the business office system and the funds were not returned to G5.
4. Reconcile with School Account Statements (SAS) data from the Department of Education upon receiving the Monthly SAS reports. Comparing the cash summary information to the internal records. If the subtotals and ending cash balance match or show discrepancies can be explained and documented, if not, compare SAS detail with student account records in the Business Office to complete the reconciliation. These policies and procedures will be implemented in January 2025.

Glenville State University (GSU) response

As of December 2024, the GSU Financial Aid Office, in conjunction with the GSU Business and Finance Office, has implemented policies and procedures to perform, at a minimum, monthly Pell Grant and Direct Loan reconciliations, with the appropriate sign-offs. The GSU Financial Aid Office reviews and



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reconciles all Pell Grant and Direct Loan disbursement records at least monthly by comparing Banner records to Common Origination and Disbursement (COD) records. If any do not match, the GSU Financial Aid Office notes this within their documentation and resolves these discrepancies in a timely manner.

They are reconciled by the GSU Financial Aid Office, signed off by the reconciling staff member, as well as the Financial Aid Director. Further, the GSU Business and Finance Office Accountant and GSU Financial Controller review and sign-off the reconciled data. The final copy is kept within the GSU Financial Aid Office.

West Liberty University (WLU) response

The Financial Aid Office is committed to ensuring full compliance with 34 CFR 685.300(b)(5) and has taken the following steps to address the issue: A formal monthly reconciliation process between G5 and COD will be established, with clear procedures and documented steps. This reconciliation will align the cash draws from G5 with the disbursements reported to COD, and any discrepancies will be investigated and either resolved or noted. This will be effective and fully implemented by January 2025.

2024-040

SPECIAL TESTS AND PROVISIONS – GRAMM-LEACH-BLILEY ACT-STUDENT INFORMATION SECURITY

Glenville State University, Shepherd University, West Liberty University, West Virginia State University, West Virginia University at Parkersburg, Fairmont State University, and Pierpont Community and Technical College

Assistance Listing Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379

Glenville State University (GSU) response

GSU will work to provide more documentation with the Information Security Program review process. GSU has adopted a new review template to properly document the review process. Additionally, GSU had an open position in the IT department and advertised for applicants with documentation experience and has hired a new employee with a strong documentation background. To improve its information security posture and ensure compliance, GSU will take the following steps:

1. Conduct a comprehensive risk assessment:
 - a. Identify potential risks to sensitive customer information, including both internal and external threats.



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2. Evaluate vulnerabilities and threats related to systems, people, and processes.
3. Update the risk assessment regularly, considering new risks as the university's information environment changes (e.g., adoption of new technologies, changes in federal or state laws).
4. Assess the sufficiency of existing safeguards:
 - a. Evaluate existing technical, physical, and administrative safeguards to ensure adequacy to protect sensitive data.
 - b. Implement additional safeguards if necessary, such as encryption, access controls, and multi-factor authentication.
5. Document and track risk mitigation efforts:
 - a. Document the risk assessment process, including identified risks and mitigations.
 - b. Track the effectiveness of safeguards and perform regular reviews to update safeguards as necessary.

GSU will show better documentation identifying data by using a tool such as CUSpider to discover if data is in unexpected places. GSU will document any physical locations where data might be stored, such as file cabinets, servers, or other storage devices. GSU will identify where data is stored digitally, whether on-premises or in the cloud. This can include databases, spreadsheets, or specialized software systems. GSU will identify data transmitted internally within the organization. This might include emails, internal networks, or intranet systems. GSU will identify data transmitted to third parties, such as cloud services, vendors, or other external systems and make note of the transmission methods (e.g., email, file transfers, API integrations).

GSU should document encryption technologies to safeguard data at rest and in transit. GSU will enable SSL/TLS for Web Traffic (HTTPS): Ellucian Banner's WebTailor or Banner Web interfaces will be served over HTTPS to encrypt the web traffic between clients (students, staff, etc.) and the Ellucian Banner system. API processes are through SFTP with third-party services. SQL Server: GSU will use Transparent Data Encryption (TDE) to encrypt the



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database files. Customer data to be found on desktops and file servers will be encrypted locally as well.

GSU will activate MFA for accounts accessing customer information. GSU will enter a work order with WVNET to install this on our instance of Banner. GSU will install an add on to our Active Directory Server for MFA on campus. These steps will be completed in the first quarter of the new year. GSU is committed to maintaining compliance with GLBA and ensuring the confidentiality and security of customer information. As part of the continuous improvement efforts, GSU will continue to monitor systems, policies, and procedures to ensure that all relevant GLBA requirements are met in the future.

Shepherd University (SU) response

Effective May 2024, SU will review the documentation and guidance that is circulated regarding GLBA annually and use the guidance to map out the GLBA points that tie to Shepherd's information security program. Going forward, SU will clearly document the mapping to ensure that all points are followed that relate to the GLBA guidance. SU will ensure that there is a proper and documented process of review and communication of these steps to Executive Leadership of SU.

West Liberty University (WLU) response

A draft of the remediation was completed by the end of November. It was reviewed internally by the appropriate internal parties and approved for implementation in January 2025. This plan ties together several current operational practices and improves others. Specifically, the plan coordinates activities of the Data Security Governance Committee, identified under University policy #82 and further increases the level of documentation required to annually name a Privacy Officer and Data Steward. It emphasizes the need for legal review of data classifications to ensure that they align with the current law. It defines standards for Data Access Control and strengthens the WLU Data Audit Procedure to create separation and add workflow between personnel who manage data access and personnel review and approve the user access audit findings. The plan also ties the following existing governance and applicable standards to create a complete picture of the overall requirements and how they should be applied:

University Policy #82 – Information Privacy
University Policy #81 – Data Breach Response
GLBA
NIST



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Lastly, the procedure dictates governance review periods and a calendar of annual events to ensure the continued relevance of the procedure and associated policies and standards.

West Virginia State University (WVSU) response

WVSU clearly and fully documents the information security program and shows compliance with 2 CFR 200.303. WVSU's information security program will clearly document the following items:

1. The qualified individual responsible for overseeing and implementing the institution's information security program and enforcing the information security program in compliance with 16 CFR 314.
2. Provide documentation of regular risk assessments that identify reasonably foreseeable internal and external risks to the security, confidentiality, and integrity of students' information that could result in unauthorized disclosure, misuse, alteration, destruction, or other compromise of such information, and assess the quality of any implemented safeguards intended to mitigate these risks.
3. Design, implement and regularly review safeguards to control the risks the institution identifies by way of its risk assessments identifying at a minimum the following eight safeguards required to be documented in the institution's information security policy.
 - a. Implement and periodically review access controls.
 - b. Conduct periodic inventory of data, documenting where the data originates, is stored, or transmitted.
 - c. Encrypt student information on the institution's system and when it is in transit.
 - d. Assess applications developed by the institution.
 - e. Implement multi-factor authentication for anyone accessing student information on the University's system.
 - f. Dispose of student information securely.
 - g. Proactively plan for and evaluate changes to the University's information system or network.



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- h. Maintain a lot of authorized users' activity and be vigilant of unauthorized access to the institutions network.
4. Document and regularly test or otherwise monitor the quality of the safeguards the University has implemented.
5. Provide for the implementation and adoption of policies and procedures to ensure that employees are able enact WVSU's information security program.
6. Document on how the University will interact and oversee its information system service providers.

Provide for the assessment and adjustment of the information security program with regard to the results of required testing and monitoring; any substantial changes to the Universities operations or business arrangements; the results of required risk assessments; or any other circumstances that are known or has reason to know may have material impact upon the University's information security program. These policies and procedures will be implemented in May 2025.

West Virginia University at Parkersburg (WVUP) response

WVUP now has access to the audit logs relevant to these events and will ensure all supporting documentation will follow the requested formats. A review was conducted, but did not meet the requirements of the request. WVUP is working on updating the process to ensure that the supporting documentation meets the requirements. The updated process will be implemented by March 1, 2025.

Fairmont State University (FSU) response

FSU is currently conducting a periodic inventory of data, noting where it's collected, stored, or transmitted via a software platform. The data is reviewed annually. FSU is also documenting current procedures and will publish these procedures and train users on the operating procedure once documented completely. This is currently in progress and will be completed by April 30, 2025.

FSU currently has secure disposal of information practices, but it is undocumented. FSU will create a "Data Disposal" policy and procedure outlining all current practices, and enhancing practices where applicable. This is currently in progress and will be completed by April 30, 2025.



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Pierpont Community and Technical College (PCTC) response

PCTC formally approved and implemented all Information Technology Policies in April 2024. PCTC approved and implemented its Information Security Program in January 2024.

2024-041 INTERNAL CONTROLS OVER SPECIAL TESTS AND PROVISIONS – VERIFICATION

**Bluefield State University and Fairmont State University
Assistance Listing Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379,
93.264, 93.342, 93.364**

Bluefield State University (BSU) response

BSU will implement a more controlled review process for the Student Aid files that have been chosen for verification that consists of the following:

1. As the students' files are received through ED connect and downloaded into our system a report is generated flagging which files have verification codes by the Financial Aid Counselor. Those files are then set up in Banner with the proper documents indicated in the "Applicant Requirement Screen" to be mailed to and completed by each student and or parent.
2. All completed student documents are reviewed by a Financial Aid Counselor as they are turned in for completeness and initials and logged into banner.
3. All completed student files are then given to the Preparer (Financial Aid Counselor) to be analyzed and compared to their FAFSA screen in RNANA" Need Analysis" screen by aid year for any conflicting information. Documentation necessary to resolve the conflict is at that time requested from the student through the Banner system by financial aid counselor. Letters are mailed or emails are sent to contact the students for the necessary information.
4. Verification checklists are completed by the preparer when all documents are turned in and the students' file is verified.
5. The following items are verified by the Financial Aid Counselor (Preparer): Tax information, Taxes paid, number of family members, number of family members in college, social security 1099 forms, child support, IRA 1040 forms, Foreign Income, Earned Income credit, Interest income or any other untaxed income. And any other income or assets that have been listed. High



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School Diploma forms will be checked continually as well as all other documents in the student file.

6. Dependent/Independent verification checklist is completed. SAR amounts are compared to amounts on various documents. Differences in dollar amounts are added to see if U.S Department of Education tolerance levels for Pell Grant and loan programs are met.
7. If the comparison is within tolerance levels, no recalculation is done.
8. If tolerance levels are exceeded, recalculation is performed electronically within the Banner system.
9. If the Pell award changes due to recalculation, then the amounts are adjusted in Banner.
10. After all calculations are made and the checklist are completed the files will then be reviewed by another counselor for accuracy. This reviewer will then sign off on the file and checklist that it has been reviewed, and no errors were found or that something needed to be recalculated. Both the preparer and the reviewer will sign off and date the checklist.

Fairmont State University (FSU) response

Effective February 2024, controls were put into place to address the additional review of the verification process once the initial review was completed. It was found that through some reporting and timing that the additional review did not occur for all students.

FSU implemented the following internal controls for the verification process:

1. When all documents are received, the Information System Specialist (ISS) will perform the initial verification including updates or corrections in the FAFSA Partner Portal. The ISS enters initials and date of review into ROAUSDF to confirm the first review is complete. The ISS will notify the secondary reviewer that the file is ready for review.
2. The secondary review is completed by a Financial Aid Counselor (FAC). The FAC will also record the review in ROAUSDF.
3. The ISS runs a monthly report to track complete and incomplete verification files.



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2024-042 BANNER INFORMATION TECHNOLOGY GENERAL CONTROLS – ELIGIBILITY, REPORTING AND SPECIAL TESTS AND PROVISIONS
Glenville State University, Mountwest Community and Technical College, New River Community and Technical College, Concord University, Pierpont Community and Technical College, Shepherd University, West Liberty University, West Virginia Northern Community College, West Virginia University at Parkersburg, West Virginia State University
Assistance Listing Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364

Glenville State University (GSU) response

Effective January 2025, GSU has created a comprehensive User Access Review Policy for Ellucian Banner in addition to the Active Directory Policy. This is to be executed on a bi-annual basis with documentation of accounts reviewed. GSU has added these documentation duties as well as others to an open job position. GSU is committed to developing a more formal process with human resources and the payroll department to more accurately document and execute the revocation of accesses of departing and transferring employees.

Mountwest Community and Technical College (MCTC) response

MCTC, specifically the Banner Admin, will continue to ensure that any and all Banner access requests for employees are documented and signed off on before access is granted. The current process is as follows; A support ticket is to be sent to the Banner admin by the requester (the VP, Director, Manager, Supervisor of said employee) with the Banner request form attached and signed by both the requestor and employee. The requestor must specify what access is being requested, and it must be in line with the employee's expected job duties and responsibilities.

MCTC will continue to ensure that Banner access is terminated upon employee resignation or separation from the college. HR and/or the respective Director or VP of the terminated employee assume responsibility for timely notification to the Banner administrator(s) to revoke the terminated user's Banner access. All notifications are to be submitted via email or an IT support ticket.

MCTC will continue to ensure that only authorized users have access to the Banner Security Account (Bansecr) or any distributed accounts. Any designees of the Director of IT or CIO who are appointed to assist as a secondary Banner admin will be assigned their own distributed Bansecr account. MCTC will work with WVNET to ensure the distributed account is assigned and granted only



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to the specific designee. This practice helps to maintain, track, and audit any system changes.

MCTC will continue to ensure that the security and complexity of Banner passwords meet industry standards. EIS is currently implemented so all users currently authenticate to Banner using their Active Directory credentials. The minimum password character length was updated in January 2024 to 12, an increase from the character length of 9 that was active during the audit period. Password history is enabled which ensures users cannot use any of their last 10 previous passwords; Password change frequency is set to 180 days, or 6 months; MCTC also enforces our IT Acceptable Use Policy which prohibits password sharing.

MCTC will continue to ensure that all module patches and upgrades are tested and approved before moving the said upgrades, patches to the production system. Documentation will be created to track the date and time of testing as well as the approval.

MCTC will continue to ensure that Banner user access is reviewed periodically. The current process is that Banner accounts are disabled for all users who have not been active in the Banner system for 6 months or longer. MCTC also takes measures to review access grants for employees who switch positions; Access is revoked for the Banner forms that do not fall under the responsibilities of the new job position, and any additional access must be signed off on by the VP or Director of the employee's department.

MCTC will add a step to the annual review to ensure that access grants are still valid and needed for each employee that has Banner access, and that employees do not have access to anything that no longer pertains to their job role. The date of the review will be documented. The MCTC CIO currently is the Banner admin responsible for user access review. The CIO is also the database administrator which comes with privileged access to the Banner system. This allows the CIO to fulfill the role as the lead IT support technician for the college and each department that uses Banner. It was noted that another individual should be assigned to review Banner access as CIO annually. MCTC will implement a step in this process for each Vice President or "Banner Data Owner" to review and acknowledge the CIO's role and access to the Banner forms that fall under their respective area. These policies and procedures will be effective January 2025.



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New River Community and Technical College (NRCTC) response

Effective July 2024, NRCTC's annual permissions review was pushed back when it was required to be done by June 30th. NRCTC will be doing the review in May going forward to prevent the review from running into the next fiscal/audit year. There was no evidence found that one user's account was locked due to inactivity. NRCTC now runs confirmation reports after locking accounts for inactivity and keep screenshots of the locked user accounts from GSASECR either as of the time they were locked (December and afterwards) or as of the time they're unlocked (if they were locked prior to that point). NRCTC now requires departments to explicitly confirm that staff have conducted testing of Banner updates.

NRCTC will develop written procedures for user provisioning, the monthly inactivity review, the annual permissions review, or user termination.

Concord University (CU) response

Effective May 2024, CU prioritizes the retirement of BANSECR and the transition to individualized accounts since May 2024. CU created individual accounts, but CU received errors within the Access Management application. CU created a case on May 31, 2024. CU then directed to create a new case where a defect was identified. As noted in the last case, the fix for the defect is slated to be available December 2024. CU will be continuing to work with Ellucian to support the transition to individualized accounts. In the meantime, CU will be changing the BANSECR password, and it will only be known by a single individual in the department. CU will be implementing a secondary authorization that prompts supervisors for their SSO username and password before the form can be viewed.

Each audit form is read only. The only way the form can be populated is via URL variables. Each supervisor has a unique system-generated URL sent to them that passes the URL for those values. No other end-user has access to this system-generated link. CU provided a copy of that e-mail and link from the system account as evidence of the Python process.

Pierpont Community and Technical College (PCTC) response

PCTC implemented a process for an annual yearly review of all Banner users' access in October 2024.

Shepherd University (SU) response

SU's Information Security Program will be reviewed annually by Executive Leadership or by the group designated. Documentation of review will consist of meeting agendas and meeting notes, as well as changing history of the



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documents themselves where applicable. Reviewer and Chief Information Security Office (CISO) approvals will be documented by email. Executive leadership will identify reviewers by January 31 of each year and CISO edits by February 28 of each year. Review and edits will take place in March/April with approval in May of each year. Sign off will be via email.

West Liberty University (WLU) response

WLU is preparing and documenting a process and workflow that will define users access needs, with an appropriate management approval chain that will be in place prior to April 2025. WLU will, as a function of the process described above, create stronger documentation to ensure that any level of auditor can understand that user access revocation is not, and has not, been a risk at WLU. WLU will, as a function of the process described above, create stronger documentation to ensure that any level of auditor can understand that user access reviews have taken place at WLU including functional departmental review and approval. WLU will, as a function of the process described above, create an approval workflow and require individual departments to review and approve current work assignments and their corresponding access.

WLU, as many of the cited institutions noted here, engages with WVNet to manage all hardware, software, and back-end processes related to our Banner instances. All application testing and infrastructure patching, and the documentation therein, is the responsibility of WVNet. WLU does not have access to perform these activities, and it is WVNet's mission, as a state agency, to manage these functions. This has been a repetitive conversation in the audit process for multiple years. The only manner in which WLU could remediate these issues would build a separate instance of Banner at WLU and operate independently, which would require the investment of several million dollars in hardware, software and net new manpower.

With that as a backdrop, WLU is including the WVNet Policy covering "Software Change". In addition, the Executive Director of WVNet provides the following insights: "WVNet strives to evaluate major upgrades on at least a quarterly basis. Due to Ellucian release schedules, these major upgrades are applied on as much of a regular cadence as possible to ensure compatibility among the different components of the Banner system. Additional patch cycles may be performed for anything that is deemed "critical" or "necessary" for specific applications that do not have major codependency requirements. This is especially true for applications such as Banner Financial Aid, which has a more frequent release schedule due to changes in financial processing. Application of patches are communicated with the customer functional support staff prior to any implementation via the use of an in-house



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ticketing system (OZ). All patches are first performed in a test environment and verification is required from the customer prior to installation in a production environment. Once the customer has tested and verified no issues were encountered in their test environment, the patches are applied to the production environment, tracking the process through the OZ ticketing system. The OZ ticketing system is also used to communicate any encountered issues or problems found. These tickets track changes to the application and the steps are used to provide a resolution and provide customers with direct communication with support staff to resolve issues.

West Virginia Northern Community College (WVNCC) response

Effective April 1, 2025, WVNCC will meet quarterly to review user access, password settings and privileged access. During the review, WVNCC will document any concerns of user provisioning, terminated employee access, and privileged access. Changes to the system will be made according to the results of the review. The IT Committee will review policy and procedure annually around the Banner system and make recommendations to the IT staff to improve processes. The IT Meetings will reflect the recommendations.

West Virginia University at Parkersburg (WVUP) response

WVUP now has access to the audit logs relevant to these events and will ensure all supporting documentation will follow the requested formats. A review was conducted, but did not meet the requirements of the request. WVUP is working on updating the process to ensure that the supporting documentation meets the requirements. The updated process will be implemented by March 1, 2025.

WVUP is currently in the process of updating both the written password policy as well as any systems password policies for consistency and to ensure compliance. This task will be completed by April 1, 2025.

West Virginia State University (WVSU) response

WVSU will correct the finding regarding Banner ITGCs by developing, reviewing and implementing the following changes:

1. In order to address the lack of a formalized process to support access provisioning events for Banner WVSU IT will work with WVSU HR and develop an employee new hire / position change / termination form which must be completed by an employee's supervisor.
 - a. The form will include a section for the supervisor to request Banner access for their employee as well as what Banner modules the employee will need access to.



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- b. For each employee change event (new hire, position change, termination) the managing supervisor will be required to submit the form to Human Resources.
 - c. Upon receiving the new form HR will submit a change request to IT which includes the date the change should be made effective as well as a copy of the form.
 - d. As part of the change request process, IT will verify through email with the VP(s) over the affected employee's area(s) to ensure the validity of the information provided.
 - e. Once IT has validated the form through VP approval, IT will commit the changes requested.
2. To address the need for a User Access Review of Banner accounts, IT will develop a report to be sent to each employee supervisor at the beginning of each term.
 - a. The report will list each employee who reports to each supervisor and show the employee's Banner Access levels.
 - b. Each supervisor will be asked to review the report and affirm that their employees have the proper Banner access.
 - c. In the event a supervisor notices the need for a permissions change IT will request that an Employee Change Form be submitted to HR in order to document the needed change.
3. In order to address issues with generic privileged accounts, IT will actively work to disable generic accounts and assign proper privileges to individual accounts, thereby allowing for proper and less confusing tracking of privileged account access and changes.
4. With regard to the change management process, in order to better track changes to both the test and production systems, WVSU will now run a report before and after each change request showing the current versions of all Banner modules and attach the reports to the appropriate IT work request. This should better support the tracking of Banner changes for future audits. IT will also formally document the change management process. These policies and procedures will be implemented in May 2025.



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**2024-043 SPECIAL TESTS AND PROVISIONS – RETURN OF TITLE IV FUNDS
Glenville State University, Fairmont State University, and Mountwest
Community & Technical College
Assistance Listing Number 84.007, 84.033, 84.063, 84.268**

Glenville State University (GSU) response

As of October 2024, the GSU Financial Aid Office has implemented internal controls to ensure review and approval of the Return of Title IV (R2T4) calculations. These reviews and approvals are now sufficiently documented. One staff member in the Financial Aid Office runs the R2T4 calculations within the federal system, Common Origination and Disbursement (COD), prints the calculations, and performs the aid adjustments in Banner, then signs off on the R2T4 form that the adjustments have been processed. Once that is completed, a second staff member reviews all calculations and adjustments and signs off on the R2T4 form as well.

Fairmont State University (FSU) response

FSU Accounting Office identifies withdrawn students using the Argos report RZRWDRL. The accountant creates an Excel file documenting the date of withdrawal, federal and state aid disbursements, and total institutional charges. When all information is recorded for identified withdrawn students, the accountant notifies the Information System Specialist (ISS) in the Financial Aid Office that students are ready for the Return of Title IV (R2T4) process. The ISS performs the R2T4 calculation using the Common Origination and Disbursement (COD) website. The Financial Aid Director (FAD) or appointed person completes a secondary review by performing another calculation in COD. Effective February 2025, the FAD ensures all aid the student was eligible to receive had been disbursed at the time of review and notes on the R2T4 worksheet. If the aid had not been disbursed, the cause would be researched. If eligibility requirements were not met or documentation is outstanding, students do not qualify for a post-withdrawal disbursement (PWD) and aid will be canceled. If a student qualifies for a PWD, the student is notified accordingly. If the secondary reviewer's information matches the first reviewer, the ISS will be notified to complete the return and notify the student. The secondary reviewer creates a worksheet to note the date of withdrawal, disbursed aid, institutional charges, and PWD determination. The worksheet is saved with the COD calculation sheets in AppXtender. When the ISS returns required aid in the Banner system, a note will be made in RHACOMM with details of the return. The Finance Program Manager, Information Systems Specialist, Financial Aid Director will perform the checks weekly by verifying the data for the calculation has been entered correctly, and



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the adjustments to the BANNER system are accurate. Additional investigation will be needed when reviewers cannot produce the same results from the R2T4 form and will verify the accuracy of the calculation and ensure the data being used for recalculation is accurate. The recalculation will be performed after verifying the data from the system.

Mountwest Community & Technical College (MCTC) response

Effective February 2024, MCTC instituted a policy requiring staff to maintain the SFRWDRL reports for all withdrawals (both official and unofficial) run in “Update” mode with notations by at least two staff members to indicate timeliness, and to indicate that touch points along the calculation have been reviewed such as checking start and end dates in STVTERM and break days in SOATBRK as well as percentage calculated comparing Banner percentages to manually calculated percentages. Sampling of calculations was to be compared to manual calculations using USDE supplied manual Return to Title IV Worksheets to ensure that the Banner calculation of returns aligns with the manual calculation. On September 18, 2024, MCTC updated that policy to require the SFRWDRL report with notations, along with a screen capture of STVTERM and SOATBRK and verification of the withdrawal date per student, be uploaded in a zip file to Jobsub before any R2T4 calculations are run for the week. An email communication to the Financial Aid Director/Associate Director indicating files are awaiting review will be sent. A return email will be sent indicating review and approval to proceed. Once RPATIVC is completed, at least one manual worksheet will be completed each semester to verify effectiveness of Banner calculations. The manual calculation will be provided by uploading to Jobsub or via 256-bit password encryption via email so that the Financial Aid Director/Associate Director can also maintain and sign off on the calculations. These processes, effective September 18, 2024, should provide verification that review, and approval of calculations is being documented.

2024-044

INTERNAL CONTROL - CASH MANAGEMENT

Concord University (CU)

Assistance Listing Number 84.007, 84.033, 84.063, 84.268

Between office turnover and employee performance issues, the proper segregation of duties over this process was not followed. Effective August 2024, CU has new personnel in place to perform these duties, with proper training provided. In addition, CU no longer relies on singular initials on drawdown forms. Multiple signature lines are now present on all drawdown forms to ensure proper review and approval of federal draw downs.



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2024-045 SPECIAL TESTS AND PROVISIONS – USING A SERVICER TO DELIVER TITLE IV CREDIT BALANCES TO A CARD OR OTHER ACCESS DEVICE

Concord University, Mountwest Community and Technical College, Shepherd University, and West Virginia University at Parkersburg Assistance Listing Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364

Concord University (CU) response

Effective January 2025, CU has implemented calendar reminders to obtain the SOC and Compliance reports from Bank Mobile. Once obtained from Bank Mobile, the CFO will review the opinion of the report, and any exceptions noted. The CFO will then enter the ticket into the CU IT ticket system in order to obtain an IT opinion of the controls in place.

Mountwest Community and Technical College (MCTC) response

Effective February 2025, MCTC will implement a review process to be conducted on an annual or monthly basis, as applicable, of all accounts opened with the Servicer during the specified timeframe. The "Activation & Preferences Report" available to management through the Servicers Administrator portal will be used to provide the data for review by management.

The review process will consist of the following:

- A request made by the servicer to provide a report of accounts opened with date/time stamp of consent to opening at the end of every term. An email to the servicer providing date/time stamp of request and a wet signature of the reviewer will be documented.
- Monthly review of the "Activation & Preferences Report" validated against Servicer "Accounts Opened" report. A wet signature of the reviewer and date of review will be documented.
- Generate a monthly follow-up email to applicable students confirming the opening of the Servicer Account which will include an attachment to the Servicer "Terms and Conditions" and "Fee Schedules. A sample of follow-up emails providing date/time stamp will be documented.
- Annual review of the Servicers' Client Contract and Profile site for accuracy and completeness of information. A wet signature of the reviewer and date of review will be documented.



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- Annual review of the Servicers' System and Organization Controls (SOC) and Compliance audits. A wet signature, date of review, and noted comments, if any, will be documented.
- Management will be incorporated as part of its “Due Diligence” and Attestation” copies of comparable banking institution fee schedules that are date/time stamped to serve as evidence of review.

Shepherd University (SU) response

Effective February 2024, SU developed and maintained a checklist to ensure that the appropriate tasks are being done. This includes reviewing SOC reports and the compliance audit from Bank Mobile noting and mitigating potential risk. More thorough documentation of the process and review points will be maintained. An email summary of the findings, if applicable, or lack of findings will be sent to the Vice President of Financial Administration for communication purposes.

West Virginia University at Parkersburg (WVUP) response

Effective January 2025, WVUP has implemented an internal policy to ensure that all required/recommended items are reviewed at least once per fiscal year, between May 1 and June 30. WVUP will properly document the review (outlined in the policy) and retain the documentation.

2024-046

SPECIAL TESTS AND PROVISIONS – PERKINS LOAN RECORDKEEPING AND RECORD RETENTION Concord University, West Liberty University Assistance Listing Number 84.038

Concord University (CU) response

CU has implemented calendar reminders to obtain the SOC and Compliance reports from ECSI starting in January 2025. Once obtained from ECSI, the CFO will review the opinion of the report, and any exceptions noted. The CFO will then enter the ticket into the CU IT ticket system in order to obtain an IT opinion of the controls in place.

West Liberty University (WLU) response

To comply with internal control for the review and due diligence of the 3rd party servicer’s Title IV compliance review, WLU will ensure that moving forward that in addition to the SOC 1 and SOC 2 report collection and review, that the Title IV compliance report of the servicer will be obtained and



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reviewed to ensure that the requirements are met for the Federal Perkins Loan program portfolio.

Effective January 2025, the Student Account Manager will oversee that documentation will be kept providing the date that the report was received, evidence of the completed review, what specific items were reviewed, and any outcomes reached. This documentation will be retained along with the report to support the necessary internal controls, and for audit/record keeping purposes.

2024-047 SPECIAL TESTS AND PROVISIONS – ENROLLMENT REPORTING
Bluefield State University, Concord University, Fairmont State University, Glenville State University, Mountwest Community and Technical College, Marshall University, New River Community and Technical College, Pierpont Community and Technical College, Shepherd University, West Liberty University, West Virginia State University, West Virginia University, West Virginia University at Parkersburg, and West Virginia School of Osteopathic Medicine
Assistance Listing Number 84.063 and 84.268

Bluefield State University (BSU) response

BSU will review the final enrollment report and approvals will be signed off to submit the report to NSC, BSU will consistently retain a copy within our institution's files monthly. BSU will retain the record count reconciliation between the final enrollment report, text file, and the number of files received by the NSC, including all documentation on how any rejected records were addressed. BSU will retain the details of the validation of the students' information included in the enrollment report for accuracy. It will be maintained consistently in our monthly folders. BSU will consistently retain the NSC automated emails used as a quality checklist including enrollment due dates, and receipt of the text files by the NSC. The availability and completion of the Error Resolution Report, as well as the confirmation of certification and processing by the NSC report, will all be retained. These policies and procedures will be implemented in January 2025.

Concord University (CU) response

CU has implemented a control to retain the uploaded report that contains the total file count to compare record counts with the enrollment submitted to the NSC and how many files were rejected in August 2024. The NSLDS issue rests with an employee that was not adhering to the control that was in place. The registrar is now reviewing the report starting in February 2024 to adhere to separation of duties.



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Fairmont State University (FSU) response

Effective February 2025, FSU will retain a screen shot of the record count received by the NSC and will document any rejected records and how FSU will address the rejected records. FSU will review a portion of the enrollment records submitted before it is uploaded to NSC. This review will include detailed documentation, for a select few, on how FSU validated the students' enrollment status. FSU will keep a spreadsheet of the students that FSU validated and the Banner screens that are used to do so.

Glenville State University (GSU) response

Effective November 2024, the GSU Financial Aid Office, in conjunction with the GSU Registrar's Office, has implemented policies and procedures for Enrollment Reporting to the National Student Loan Data System (NSLDS) via the National Student Clearinghouse (NSC). The Financial Aid Director runs a process in Banner to pull an enrollment report every 45-60 days. Before sending the file to the NSC, the Registrar's Office reviews it, comparing record counts between the file and Banner. The Registrar then notifies the Financial Aid Director, who uploads the file to the NSC for review. If there are any errors that need to be corrected, the Financial Aid Director makes these corrections in collaboration with the Registrar, then sends the file back for processing again within the allotted timeframe. Once the NSC has confirmed that the file has been processed successfully, the Registrar spot checks 15-20 records for accuracy. All email communication between the NSC, the Registrar, and the Financial Aid Director is kept on file in the Financial Aid Office shared drive.

Mountwest Community and Technical College (MCTC) response

Following the audit conducted during the fall 2024 semester, we have implemented several improvements to safeguard and enhance the accuracy of our reporting processes. In response to the audit findings, we have strengthened our record authentication procedures beyond our standard annual process confirmation. Specifically, we now conduct additional spot checks for each data upload to the National Student Clearinghouse (NSCH).

As part of this enhanced process, the registrar's office now verifies a batch of student data, with the verification being completed by two separate individuals. This two-person verification ensures an added layer of accuracy and accountability. After both individuals independently verify the data, a secondary verification is performed on the batch before it is uploaded to the NSCH. Furthermore, all verified data and supporting documentation, including confirmation emails, are securely saved for future reference. Any information received from the NSCH is also archived, with dates recorded to



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ensure efficient data retrieval and confirmation. These improvements were implemented immediately following the audit findings in the fall of 2024. As we worked through the audit, we identified several areas where we could reinforce our processes to ensure ongoing data integrity and readiness for future audits.

Marshall University (MU) response

Effective February 1, 2024, MU has continued to maintain the following processes for internal control purposes:

Documenting that a record count reconciliation has been completed between the enrollment submission file and the number of files received by the NSC, as well as documenting how any rejected records were addressed.

Documenting and retaining records of the spot check validation process to ensure the accuracy of student information included in the enrollment submission files.

New River Community and Technical College (NRCTC) response

The Registrar's office will run a random selection of 20 students from NSLDS to make sure students are correct in the clearinghouse, which will be done at least 50 days from when the students were initially reported. The Registrar's office will keep documentation of the sampled students. The Registrar's office will keep records of how many files were accepted and how many were rejected. The Registrar's office will provide documentation of validation of student information included in the enrollment report and retain emails by providing a file specially for NSC enrollment reporting emails received and sent regarding enrollment reporting. Emails to be retained are error resolution and confirmation of certification and processing by the NSC. The Registrar's office will also create a checklist to follow and use as documentation to ensure all steps throughout the process are completed and checked off the list.

Pierpont Community and Technical College (PCTC) response

Effective February 2024, PCTC is completing the review of the file before it is submitted, not after it is submitted. The Associate Registrar pulls the report prior to the due date to give those in the review process ample time to review the files before the Associate Registrar submits the document to the NSC. PCTC is keeping track of the due date of submission, the date the text file is sent to the NSC, the date the error resolution report is received, the date it is sent back, and the date the report is certified by the NSC. A new tab in PCTC's worksheet in TEAMS was created that is completed each time PCTC submits an enrollment verification to the NSC. TEAMS is backed up via MS 365 tenant and anything loaded into TEAMS is retained. PCTC notes the actual



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enrollment count as of the time of the NSC submission, the enrollment count on the TXT file, the number of files received by the NSC, and the number of rejected files. This verifies that all the files PCTC intended to submit to the NSC were received by the NSC and processed. This information is kept on each spreadsheet used to verify the information sent to the NSC.

Shepherd University (SU) response

Effective February 2025, SU will add a checklist to the existing reporting and retention structure that had already been established for Clearinghouse data transmission. The checklist will be completed with each transmission, organizing data retention efforts to ensure the inclusion of the additional elements required.

West Liberty University (WLU) response

To comply with internal controls over the process of enrollment reporting, WLU implemented and executed additional enrollment reporting internal controls to:

1. Perform a record count reconciliation between the final enrollment report and the number of files received by the NSC.
2. Retain NSC automated emails as a quality checklist regarding due dates, receipt of text files. by the NSC, availability and completion of error resolution reports, and confirmation of certification and processing by the NSC. These updated policies and procedures of internal controls started and are consistently performed by the appropriate knowledgeable personnel for each enrollment reporting transmission to the NSC as of May 2024 and forward. Additional documentation was pulled in the 2023-2024 audit past this May implementation date and no issues were found.

West Virginia State University (WVSU) response

WVSU utilizes the National Student Clearinghouse (NSC) to update student's enrollment and its effects on student's direct loan and Pell statuses. Thorough edit checks of student data for each semester will be produced by IT on a regular basis. The Office of the Registrar, in coordination with Admissions, Dual Enrollment, and other contributors of student data will make sure these errors are corrected. Special focus will be placed on resolving these errors before each enrollment file is produced. (initial data integrity, first check). On or around the 25th of each month, IT will produce the NSC enrollment file. Each time the file is produced, the file will be sent to the Registrar for review to ensure accuracy of the data being pulled from Banner. Registrar sends approval for upload to NSC. Emails from NSC, IT, and Registrar approval and



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files with Registrar student checks to be retained. (process integrity, second check) The file will be uploaded to the NSC by IT, ensuring NSC receives the appropriate number of records. The data will then be reviewed and any discrepancies in the data, when compared with past data, will be resolved in a timely manner. The NSC error report will be reviewed and any errors corrected. The NSC process makes sure these errors are resolved before the data is reported to the NSLDS, it is the responsibility of the Registrar to make sure these are resolved with accurate data. Emails from NSC, and screenshots of errors will be retained. (data integrity, third check) After resolution of errors, the NSC will perform a final review of data before sending to the NSLDS. This will be reported on the NSLDS reporting tab of the enrollment reporting screen in the NSC website. If data is satisfactory, the submission will be marked with "Congrats. No Errors!" by the originator clearinghouse. The NSC sends emails whenever these items are updated. It is the responsibility of the Registrar to review and resolve any errors in a timely manner. Emails from NSC and screenshot of NSLDS reporting dashboard to be retained (data integrity, fourth check). The enrollment data is then submitted to the NSLDS. After NSLDS reviews the data, any errors will be reported back through the NSC in the same manner as NSC errors. The resolution of these errors is of special importance and will be given top priority. The NSC sends emails whenever these items are updated. It is the responsibility of the registrar to review and resolve any errors in a timely manner. Emails from NSC and any error documentation to be retained. (data integrity, fifth check). These policies and procedures were implemented in February 2025.

West Virginia University (WVU) response

WVU's Registrar's office reviews rejected records and takes appropriate action to clear the rejections. Many of these rejections require additional information from students, therefore resolution is based on student discretion in providing documentation. Effective February 2024, WVU ensured that documentation of the submission record count and rejection follow up was maintained in enrollment reporting records.

West Virginia University at Parkersburg (WVUP) response

Effective July 1, 2024, WVUP reconciles the record count of enrollment records processed by taking the following actions:

1. Highlighting the record count at the end of the Banner-generated enrollment report file as part of the spot-checking review process.
2. Screenshot the total records on the text file.



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3. Screenshot the total records on the .lis file.
4. Screenshot the total number of files received by NSC once it has been acknowledged that the file has been received and processed.
5. Retaining documentation to show that if for some reason the file count does not match, research was done to locate the reason for the discrepancy, and the discrepancy was either resolved or unable to be documented why it could not be resolved.

Effective July 1, 2024, WVUP started maintaining copies of all NSC automated emails used as a quality checklist which includes enrollment report due dates, receipt of the text file by the NSC, completion of the Error Resolution Report, and confirmation of certification and processing by the NSC.

West Virginia School of Osteopathic Medicine (WVSOM) response

Effective January 2025, WVSOM’s Registrar implemented a submittal process that uploads spreadsheets to update enrollments. On or around the 1st of every other month, the Registrar will save current rosters with the latest enrollment data to the auditor folder. NSLDS enrollment rosters from banner will be checked for necessary updates. The Registrar will process the NSLDS update calculations worksheet in the auditor folder which shows calculations for submittals and other details. The Registrar will check numbers from spreadsheet submittal versus roster totals and ensure all information is current, including student statuses (enrolled, graduated, withdrawn) and academic term details.

The Registrar will run advanced search in NSLDS to check for any outliers that may need processed and ensure corrections are made promptly, and the corrected data is re-submitted to the NSLDS within the same review cycle.

2024-048

ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE COSTS/COST PRINCIPLE

Fairmont State University, West Liberty University, West Virginia University, and WV Department of Agriculture

Assistance Listing Number 10.202, 10.203, 10.207, 10.215, 10.310, 12.300, 12.431, 15.945, 43.008, 47.049, 47.070, 47.076, 66.716, 81.057, 81.089, 93.103, 93.121, 93.213, 93.279, 93.310, 93.393, 93.395, 93. 837, 93.840, 93.847, 93.853, 93.859, 93.865, 93.866, 93.867, 93.942



CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

Fairmont State University (FSU) response

The Office of Sponsored Programs (OSP) currently requires time and effort reporting from Principle Investigators (PIs), Co-PIs, and key/senior personnel on a grant; however, OSP does not have a formal process through which to effectively collect effort reporting. A new fillable PDF form will be created and in use as of June 2025. This new form will be more streamlined and include additional space for the signatures of the PIs on each grant, providing physical documentation for effort reporting. New consequences will be established and enforced for grant-funded individuals who fail to complete and submit effort reports, including but not limited to being prohibited from applying for additional or future grants if there are any outstanding reports. A tracking sheet will be created by June 2025 to ensure PIs are meeting their effort requirements and reporting on it appropriately. This sheet will be reviewed and updated by OSP. The above corrective actions will be implemented and consistently applied throughout the activities of the Office of Sponsored Programs.

West Liberty University (WLU) response

Effective February 2025, WLU is in the process of implementing new processes and procedures to document the effort put on grants by students which will mirror the current process already in place for principal investigators and other key personnel.

West Virginia University (WVU) response

It is WVU's policy that most employees should certify their own Effort Report and that most employees have first-hand knowledge about the effort they expended. All the Effort Reports selected were certified and complete, and West Virginia University does not view a second signature on the Effort Report as a reasonable, value-added control. West Virginia University will review the current labor distribution processes and resulting Effort Reporting processes to identify, document, and evaluate key internal controls to determine enhancements that need to be made to ensure continued compliance with 2 CFR 200.

WV Department of Agriculture (WVDA) response

Effective for FY2025, the Department of Agriculture will implement a new standard Schedule of Expenditures Federal Awards reconciliation template that will be completed for each program that will include deducting overspent costs. As many of the Department of Agriculture's programs are funded based on formula, it is often the case that the State must absorb costs beyond what is funded by the Federal government to meet the goals and objectives of the funding and thus it has been standard practice to continue to track these



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expenses even when Federal funding has been exhausted. Management disagrees that the current monthly tracking system in general is not robust enough to note when federal funding has been exhausted as the federal financial report related to the questioned costs was filed prior to closeout when all funding had been spent. Rather, the questioned costs were the result of an inconsistent reconciliation process at year-end that did not reduce the amount reported by the overspent amount.

2024-049

ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE COSTS/COST PRINCIPLE – INDIRECT COSTS

Higher Education Policy Commission, West Virginia University, West Liberty University, WV Department of Agriculture

Assistance Listing Number 10.202, 10.203, 10.207, 10.215, 10.310, 12.300, 12.431, 15.945, 43.008, 47.070, 47.076, 47.083, 66.716, 81.057, 81.089, 93.103, 93.121, 93.213, 93.279, 93.310, 93.393, 93.395, 93.837, 93.840, 93.847, 93.853, 93.859, 93.865, 93.866, 93.867, 93.942

Higher Education Policy Commission (HEPC) response

Effective immediately, HEPC has added review controls to address the ineffective internal controls identified. By April 30, 2025, HEPC will develop and implement policies and procedures to address an additional internal control for indirect cost calculations. This addition will ensure that there is a preparer and a separate reviewer of indirect cost calculations.

West Virginia University (WVU) response

WVU relies on general IT and application controls within the financial system to calculate indirect expenses, which were not tested as part of this audit. While the audit team was unable to test the IT controls, 40 indirect cost compliance selections were tested. There were no questioned costs resulting from the compliance testing, which indicates that indirect expenses are being calculated correctly.

WVU will review current processes and enhance the internal control documentation surrounding these processes. During this review, West Virginia University will evaluate the need for manual mitigating controls over the indirect cost calculation.

West Liberty University (WLU) response

WLU will implement a procedure for recording indirect expenses in the general ledger. WLU does not have grant software and cannot record indirect costs automatically as they are incurred; therefore, indirect costs will be manually calculated based on the indirect cost rates agreed upon in the grant award and



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will be posted to the general ledger on a quarterly basis when the quarterly billings are compiled. The calculated indirect costs will be reviewed before being posted to the general ledger. WLU will include these indirect costs on the FY25 SEFA.

WV Department of Agriculture (WVDA) response

Effective February 2025, the WVDA will report indirect expenditures on the schedule of expenditures of federal awards. While indirect expense was accounted for in direct reporting to federal agencies, the Department had been advised to only report direct expenditures for the schedule of expenditures of federal awards and thus had historically excluded indirect expense for SEFA reporting. Additionally, indirect expense will be recorded against individual programs beginning in fiscal year 2025, providing for an additional review of indirect cost calculations.

2024-050 INTERNAL CONTROLS – CASH MANAGEMENT Higher Education Policy Commission (HEPC) Assistance Listing Number 47.076, 47.083

Effective immediately, HEPC has added review controls to address the ineffective internal controls identified. By March 31, 2025, HEPC will develop and implement policies and procedures to ensure proper segregation of duties between the preparer and reviewer of the drawdown. Additionally, HEPC will include procedures to review payroll reports on a per drawdown basis to confirm the proper amount of funds are being drawn down.

2024-051 INTERNAL CONTROLS – CASH MANAGEMENT West Liberty University, West Virginia University, WV Department of Agriculture Assistance Listing Number 43.008, 93.103, 93.859

West Liberty University (WLU) response

WLU will ensure that documentation is maintained of the review and approval of invoices and related supporting documentation submitted to the granting agency for reimbursement.

West Virginia University (WVU) response

WVU agrees with the audit recommendation to ensure that WVU's subrecipient monitoring, including invoice review, policies and procedures are followed and that the appropriate supporting documentation is retained. Also, WVU agrees that a review of the land grant draw process is necessary and will



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work with the appropriate personnel to ensure that draws are reviewed and documentation of the review is maintained.

WV Department of Agriculture (WVDA) response

Effective February 2025, the WVDA will require a SF-270 Request for Advance or Reimbursement or equivalent form be prepared with support for review and signature of management prior to Federal funds being drawn regardless of whether this is required by the Federal awarding agency. The signed report with support will be maintained in shared files.

2024-052

PROCUREMENT, SUSPENSION AND DEBARMENT

**Higher Education Policy Commission, Fairmont State University, WV
Department of Agriculture, West Virginia University
Assistance Listing Number 43.008, 47.076, 47.083, 93.103, 93.859**

Higher Education Policy Commission (HEPC) response

Effective immediately, HEPC has added review controls to address the ineffective internal controls identified. By March 31, 2025, HEPC will update policies and procedures to establish and maintain effective internal control over federal awards. The updates will clearly establish the threshold for identifying covered transactions and provide clear guidance on conducting suspension and debarment searches in SAM.gov for those transactions. The updates will also provide any additional steps or documentation required to assess whether a vendor is excluded or disqualified if not in SAM.gov.

Fairmont State University (FSU) response

FSU will formalize internal controls for Sam.gov review by doing the following:

- o Establish a clear, documented policy for reviewing Sam.gov records to ensure vendors (over the threshold) are checked against this database before engagement. Consult with the HEPC to determine the dollar threshold.
- o Once the HEPC has determined the threshold, update Fairmont State's Purchasing Manual to be in alignment with the WVHEPC Purchasing Manual.
- o Develop a procedure to ensure that all Sam.gov reviews are performed as required.
- o Implement a process for documenting and retaining evidence of Sam.gov checks, i.e. maintaining screen print.



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- o Provide training to relevant staff on the importance of the verification processes and how to implement it correctly
- o Develop Alternative Procedures for Vendors Not Found in Sam.gov.
- o Develop and formalize alternative verification procedures for vendors not appearing in Sam.gov. Potentially create a certification form for the vendor to sign when they are not in Sam.gov.
- o Ensure all alternative verification procedures are clearly documented, and evidence of these checks is retained as part of the vendor onboarding process.
- o Provide training to relevant staff on the importance of these alternative verification processes and how to implement them correctly.

The new internal controls and procedures will be in place by July 1, 2025.

WV Department of Agriculture (WVDA) response

Effective February 2025, the WVDA will implement an additional review to include the Comptroller /Assistant Director of Administrative Services in the approval process of purchase orders and contract renewals. Furthermore, as the position with primary responsibility for performing suspension and debarment checks saw turnover twice in fiscal year 2024, to ensure continuity and accessibility of documentation, suspension and debarment checks will be uploaded into the procurement folder in the financial system when issuing the purchase order or processing a contract renewal rather than only relying on hard copies. Additional training will be provided to current staff responsible for performing suspension and debarment checks.

2024-053 PROCUREMENT, SUSPENSION AND DEBARMENT West Virginia University (WVU) Assistance Listing Number 81.089

WVU agrees with the audit recommendation to ensure that WVU's Procurement policies and procedures are followed and that the appropriate supporting documentation is retained. The procurement transaction detailed in this finding involved the contractual category being improperly identified in initial award proposal. When a correction to the contractual category was determined necessary, approval by the sponsor was obtained, however proper engagement of the procurement team did not occur. WVU will take action to ensure that all employees and respective departments are knowledgeable of



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the importance of contractual category selection and the necessity to involve procurement when a change is required.

2024-054 SUBRECIPIENT MONITORING
Higher Education Policy Commission, West Virginia University (WVU)
Assistance Listing Number 10.310, 12.300, 47.076, 47.083, 81.089, 93.838, 93.867

Higher Education Policy Commission (HEPC) response

Effective April 30, 2025, HEPC will develop and implement policies and procedures to ensure subrecipient compliance as outlined in 2 CFR Section 200.332. The policy will include a risk assessment containing monitoring and compliance review standards to confirm the subrecipient complies with Federal statutes, regulations, and the terms and conditions of the subaward. Further, it will contain additional steps for retention of document review and approval of subrecipient reports.

West Virginia University (WVU) response

WVU agrees with the audit recommendation to ensure that WVU's subrecipient policy is being followed and that internal controls around subawards need reviewed and updated. A WVU subaward task force has been established and the primary objectives of this task force include assessing and evaluating current subaward processes and identifying areas for improvement. Also, this task force will be reviewing compliance with federal, state and institutional regulations.

2024-055 SPECIAL TESTS AND PROVISIONS – KEY PERSONNEL
Fairmont State University, WV Department of Agriculture
Assistance Listing Number 47.049, 47.076, 93.103, 93.942

Fairmont State University (FSU) response

The Office of Sponsored Programs currently requires time and effort reporting from PIs, Co-PIs, and key/senior personnel on a grant; however, OSP does not have a formal process through which to effectively collect effort reporting. A new fillable PDF form will be created and in use as of June 2025. This new form will be more streamlined and include additional space for the signatures of the PIs on each grant, providing physical documentation for effort reporting. New consequences will be established and enforced for grant funded individuals who fail to complete and submit effort reports, including but not limited to being prohibited from applying for additional or future grants if there are any outstanding reports. A tracking sheet will be created by June



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2025 to ensure PIs are meeting their effort requirements and reporting on it appropriately. This sheet will be reviewed and updated by OSP. The above corrective actions will be implemented and consistently applied throughout the activities of the Office of Sponsored Programs.

WV Department of Agriculture (WVDA) response

Effective February 2025, the WVDA will implement a quarterly analysis of project director or principal investigator effort to identify any reductions of time devoted to a federal award which may require prior approval of the Federal agency under 2 CFR 200.308 (f) (2) and (3) in the future. If there is a downward trend in time devoted to a project of 20% or more in total over the period of performance to-date, the project director or principal investigator will be contacted to determine if prior approval request will need to be sent to the Federal awarding agency. This analysis will be signed by the staff member who prepared the analysis as well as management documenting review. If there is an anticipated change in key personnel or a disengagement of more than 3 months, it will be the Divisions' responsibility to notify Administrative Services to assist in preparing and submitting the prior approval request. This procedure will be applicable to any Federal award where key personnel are identified by name or title in the Federal award.

2024-056

PERIOD OF PERFORMANCE

West Virginia University (WVU)

Assistance Listing Number 10.310, 93.279, 93.942

WVU's standard practice for post-award close-outs is that all costs should be posted within 30 days from the award end-date, and the final invoice is submitted within 90 days unless the terms dictate otherwise. At times, exceptions are granted for extenuating circumstances such as when awards are received late. Many of the awards noted in the audit as not being closed within the 120 days after the award date were not set up in WVU's financial system until late in the award period. However, all of the expenditures referred to in this finding were incurred within the active dates of the award as required by federal regulations and the transaction to charge the award was either an internal cost transfer or a reimbursement of contractual costs. WVU will review internal policies and procedures to ensure awards are properly set-up in a timely manner that allows for close-out within 120 days of award end-date and will work with departments to ensure cost transfers and contractual reimbursements are also processed in a timely manner. For any awards exceeding the 120 day close-out, WVU will ensure sponsor communication is maintained to document any approved extensions.



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2024-057 REPORTING
Department of Human Services (DoHS)
Assistance Listing Number 93.568

The DoHS will retain the reconciliations of the data received from its third-party service provider to the underlying internal source system to ensure accuracy and completeness as part of our review and approval of reports prior to submission from Optum and our grantee for other LIHEAP related programs. This information will be reviewed by our LIHEAP Coordinator as well as a second approval from our leadership team. This will begin immediately for the review of data received starting FY 2025.

DoHS has a draft Monitoring Plan in progress that will have a section specific to the reconciliation of reports. This will aid DoHS in the review and comparison of data received from all third-party sources to ensure completeness and accuracy before submittal. This draft Monitoring Plan will be finalized by March 31, 2025, and the LIHEAP Coordinator will begin full Monitoring April 1, 2025. DoHS will work with Optum, our third-party provider, to review the structure and data elements pulled to ensure we are meeting all federal guidelines. We will, if necessary, create additional Ad Hoc reports for comparison and create a spreadsheet for our tracking purposes of data as well. All data collected each year will be maintained in a shared drive for future use as backup documentation when needed. This will begin immediately. The comparison spreadsheet will be finalized by March 31, 2025. Discussions with Optum will begin immediately, and any changes needed will be implemented via change request to Optum. Depending on the complexity of the changes needed, DoHS will be in progress by December 31, 2025, making the identified changes.

2024-058 SUBRECEIPIENT MONITORING
Department of Economic Development (DED)
Assistance Listing Number 93.568

DED will establish policies and procedures for completing Federally required risk assessments of grant applicants of the Community Advancement and Development division of the West Virginia Development Office. As a pass-through entity of Federal funds, the State Office is required by 2 CFR §200.331(d) to evaluate each subrecipient's risk of noncompliance with Federal statutes, regulations, and the terms and conditions of grant agreements, regardless of whether the subaward is made through a competitive process. Completed risk assessments will help the State Office determine a monitoring plan and schedule for each subrecipient as well as whether additional, specific



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conditions should be incorporated into that subrecipient's subaward agreement(s).

Risk assessments will be completed annually for our subrecipients, or during the review cycle for the competitive grants. For competitive grants, risk assessments should be completed before subawards are made.

When completing subrecipient risk assessments, at a minimum the factors listed below should be considered. This list is not exhaustive and other risk factors may be considered depending upon the nature of the program for which the specific subaward is being made.

1. The subrecipient's prior experience with the same or similar subawards.
2. The results of previous audits - including whether or not the subrecipient is required to receive a Single Audit and the extent to which the same or similar subawards were audited as a major program.
3. The extent and results of Federal awarding agency monitoring.
4. The extent and results of previous monitoring by the State Office.
5. Financial stability.
6. Quality of management systems and ability to comply with Federal management standards (2 CFR §200.300-332).
7. Whether the subrecipient has new personnel or new or substantially changed systems.
8. Results of application reviews.

Additionally, for subawards granted through a competitive process, any criteria that will be used to evaluate risks posed by applicants for competitive subawards must be described in the notice of the funding opportunity. The WVCAD Subrecipient Risk Assessment Policy was updated February 2025.

Any risk factor used in the evaluation of the degree of risk posed by an applicant shall be scored quantitatively. The score for all risk factors used shall be totaled and a range developed to categorize each applicant as low, medium, or high risk. A copy of the risk assessment evaluation shall be kept as part of



CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

each applicant's file and scanned and placed on the shared network drive in the appropriate subfolder.

The results of risk assessments shall be utilized in the following ways:

1. To determine appropriate subrecipient monitoring.
2. For competitive subawards, an applicant who scores on the upper end of the high-risk range may be precluded from receiving funding if it is determined that specific award conditions will not mitigate the risks posed by the applicant to the point where making a subaward to them would be responsible.
3. An applicant, whether for a competitive or noncompetitive grant, who scores as medium risk or on the lower end of the high-risk range may have additional specific award conditions imposed. The specific award conditions selected should be related to risk factors for which the subrecipient received a high score to address areas of noncompliance that are high risk for the subrecipient. Specific award conditions may include, but are not limited to, items such as the following:
 - a. Requiring payments as reimbursements rather than advance payments.
 - b. Withholding authority to continue the program under the subaward until receipt of evidence of acceptable performance within a given period.
 - c. Requiring additional, more detailed financial reports.
 - d. Requiring additional monitoring.
 - e. Requiring the subrecipient to obtain technical or management assistance.
 - f. Establishing additional prior approvals.

If additional specific award conditions are imposed, the State Office will notify the applicant of the following before a subaward is made:

1. The nature of the specific award conditions.



STATE OF WEST VIRGINIA
DEPARTMENT OF ADMINISTRATION
Financial Accounting & Reporting Section
2101 Washington Street, East
Charleston, WV 25305

Sarah H. Long, CPA
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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2024

2. The reason why specific award conditions are being imposed.
3. The nature of the action needed to remove the specific award condition, if applicable.
4. The time allowed for completing the actions, if applicable.
5. The method for requesting reconsideration of the specific award condition(s).

Any specific award conditions must be promptly removed once the conditions that prompted them have been corrected.

***SUMMARY
SCHEDULE OF
PRIOR AUDIT
FINDINGS***



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

2023-001 FINANCIAL STATEMENT CLOSE PROCESS
Financial Accounting and Reporting Section
Assistance Listing Number Not Applicable
Resolved

Corrective action taken for FY 2024.

2023-002 DHHR INFORMATION SYSTEM AND RELATED BUSINESS
2022-001 PROCESS CONTROLS
Department of Health and Human Resources (DHHR)
Assistance Listing Number 10.551, 10.561, COVID-19 10.561, 93.558,
COVID-19 93.558, 93.568, COVID-19 93.568, 93.575, 93.596, COVID-19
93.575, 93.658, 93.659, 93.767, 93.775, 93.777, COVID-19 93.777, 93.778
Partially Resolved

With regards to the condition noted for the FACTS UAR, The MMIS does not agree with the statement that FACTS is “without a complete and comprehensive user access review”. The UAR is a process to review all workers in the system at a specific point in time which was done on April 10, 2024. The auditors were provided with evidence from reports, screenshots and emails that the UAR was completed which accounted for all workers. A new report to help with this review was also created and provided to the auditors that showed all active workers throughout the audit period of July 1, 2023, to June 30, 2024. Additionally, in the prior year audits, the auditors selected individual worker samples to test; however, those samples were not conducted during this year to help verify the records.

The DoHS implemented a new information technology system for child welfare case work, processing payments, maintaining documentation, etc. The name of the new system is WVPATH (West Virginia People’s Access to Help). The WVPATH system replaced the Family and Children’s Tracking System (FACTS) which was referenced in the finding. The implementation of the WV PATH system was completed in January 2023. The WVPATH system has additional controls and levels of review as compared with the FACTS systems. During the entire fiscal year 2024, the WV PATH system was operational. Additionally, the FACTS system was set to a “read-only” for child welfare staff and access limited users shortly after the WV PATH system was operational. The FACTS system child welfare records are no longer updatable and only accessible by limited users to search historical data. FACTS data is set to be preserved, some of the data will be transferred to the WV PATH system. The FACTS system is scheduled to be discontinued in the near future.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

With regards to the condition noted for RAPIDS, The Department of Human Services Bureau for Family Assistance PATH system (formerly RAPIDS) maintains internal controls as required under federal regulations, including 7 CFR 272.4(c)(1), as well as the Standards for Internal Control in the Federal Government and the standards as set forth in the executive summary of the Internal Control – Integrated Framework prepared by the Committee of Sponsoring Organizations of the Treadway Commission.

Internal control regulations, located at 7 CFR 272.4(c)(1), subtitled “Requirements.”, reads, in part, “in order to safeguard certification and issuance records from unauthorized creation or tampering, the State agency shall establish an organizational structure which divides the responsibility for eligibility determinations and coupon issuance among certification, data management, and issuance units.” The PATH system (formerly RAPIDS) maintains segregation of these activities. Certification duties are performed by employees managed under the divisions of Field Operations. Data management is maintained by the Department’s contractor, Optum. Issuance activities are performed through the Division of Finance, including, but not limited to, the Office of Electronic Benefits.

These separations of duties meet the requirements within the Standards for Internal Control in the Federal Government under the heading of “Segregation of duties” beginning on page 47 of the document located at <https://www.gao.gov/assets/gao-14-704g.pdf>.

Regarding the “batch level, which does not allow the approver to review each transaction individually” finding, our system meets the standards set forth in 7 CFR 274.1(h), which reads, in part, “[t]he State agency shall establish the master issuance file in a manner compatible with its system used for maintaining case record ... The master issuance file shall contain all the information needed to identify certified households, issue household benefits, record the participation activity for each household and supply all information necessary to fulfill the reporting requirements prescribed in § 274.4.” In addition, it meets all requirements for 7 CFR 274.1(h)(1)(ii), which includes a review of the master file prior to issuance. See current year finding 2024-001.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

**2023-003 INFORMATION TECHNOLOGY GENERAL CONTROLS – WVPATH
Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.658, 93.659
Partially Resolved**

- WV PATH Child Welfare (WV PATH CW) and WV PATH Family Assistance (WV PATH FA) were unable to provide a complete and accurate listing of all new hires, modified users, and terminated users for their systems.

The Department of Personnel and the WV DoHS system is the same one that has been utilized for more than 30 years. This states and explicitly explains that a person may be hired and given a start day to report to a specified office, the orientation to that job may be a requirement to be completed prior to any other action. Afterwards, the Supervisor or appointing authority may then request a RACF ID be assigned to the new worker as well as a Network ID. Once that information is provided back to the requestor, the actual User ID and privileges to the system are requested, this can obviously be another date. The request for an ID is processed and again, due to separation of duty, forwarded onto the separate unit to be completed. The DoHS system was never designed to capture an exact date since as stated this can be numerous dates. The system was also never designed to capture an end-date of an employee/worker's access to the system. This has been noted in a comment section of the system for the entire existence of the eligibility system. The effort to reconfigure the Hire and Termination Dates into a system would place a financial burden on the State of WV that has never been needed or requested before.

- RAPIDS, WV PATH CW and WV PATH FA did not complete a comprehensive user access review.

Once all documentation for an ID is received, signed, processed, the paper records are recorded to a secure State owned and maintained drive. The rollout from all segregated units to be connected to one platform - the Common Landing Page - commonly referred to as CLP; was not completed until July 2024. After that time the PATH FA completed several internal audits to ensure the accuracy of those who had access to the system of BCSE-OSCAR. Also, annually the PATH FA completes a yearly internal audit of all individuals who have access to the system and an affidavit is signed by the Supervisors within each county to attest to the validity of the lists that are composed and sent



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

to them to review. Those individuals are provided with a time frame to submit this composed record back to the Security Maintenance team to inactivate the person or persons who no longer need or require access to the system. The second layer of an audit is provided by WV Office of Technology. This report indicates that if a person has not signed in or logged onto the Legacy and/or WV IES PATH system within 180 days the RACF ID that has been assigned to them is placed in an inactive state. The report is provided monthly, but as stated previously this may not be accurate since a worker may be on FMLA or enduring a medical procedure which may cause them to not be physically able to log onto the system but still be an active and in good standing State of WV employee. No action is taken based on this monthly report; however, it is an added layer to ensure DoHS are not utilizing this report due to the example provided. OMIS and PATH FA staff are working to enhance the audit process and make this a more streamlined effort but also make this occur more frequently throughout the year. DoHS delayed implementing this due to the roll out and onboarding of the last unit to be added to the CLP- Common Landing Page. OMIS and PATH FA staff will begin a bi-annual audit process, which will occur each May and November beginning with May 2025.

The PATH CW UAR was completed on July 31, 2024, based on a query of all active PATH CW users generated by Optum. A list of workers on the UAR was provided as well as the code used to pull the list and screenshots demonstrating how it was generated. An additional report is included.

A working copy of the list of workers for the PATH CW UAR was provided containing the results of the review. The admin staff have reviewed each worker record for accuracy and processed any requests.

- WV PATH CW does not track documentation detailing validation of infrastructure patches which do not directly involve code deployment changes.

Optum provided a document on 1/17/2025 “SAA_2024_CAL_2B_PATH_CW_narratives on changes not code related or to training” that provided evidence and documentation on the validation of patching is taking place. The list of changes for PATH CW was provided to the auditors along with a revision showing the screenshots a few days later.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

The Optum infrastructure team, Infrastructure Management Services (IMS) is responsible for scheduling and deploying patches to servers. In order to complete the scheduling process, IMS uses the ServiceNow tool and email to communicate dates, times, and patches that will be deployed to server owners' systems (for this instant that will be the team(s) supporting the PATH CW systems.) This change process follows the company standards for changing control in the Optum FE environment. As provided in evidence, the lower-level environments are the first to receive the patching with validation checkouts completed by the appropriate teams which are documented, such as PATH CW. The PATH team uses Service Now Gov ticketing to provide information on the scheduled downtime to production systems to the state customer and to get state approval for the downtime.

- WV PATH FA management did not implement separation of duties during UAR, and supervisors reviewed their own access.

The final finding of a CSM - Community Service Manager - signing off on their own access did occur for one county and it was not a statewide occurrence. This should not have occurred, and steps were implemented in May 2024 to prevent this from being allowed or permitted going forward. See current year finding 2024-002.

2023-004 **INTERNAL CONTROLS OVER SUBRECIPIENT MONITORING**
2022-041 **Department of Health and Human Resources (DHHR)**
Assistance Listing Number 93.788, 93.323, COVID-19 93.323, 93.575,
93.596, COVID-19 93.575, 93.558, COVID-19 93.558
Partially Resolved

Effective June 10, 2024, the Office of Shared Administrations' Chief Financial Officer issued a directive to the Department of Health, Department of Health Facilities and the Department of Human Services (spending units) which implemented a requirement that risk assessments and certifications would need to be completed by spending unit staff prior to the issuance of all subawards. If during the evaluation of risk, a spending unit determines that a subrecipient's risk is high, the award can still be made but should include specific terms and additional conditions as appropriate to the risk and as deemed necessary by the spending unit. To ensure all risk assessments have been completed prior to finalizing a subaward, a hard stop has been incorporated within the Department's subrecipient Grants Management Solution system (CRM) if the risk assessment is missing prior to completion of the award. Therefore, no grant award can be sent to a grantee for final



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

signatures without a copy of the risk assessment being included as part of the overall grant documentation. The process was implemented for grants beginning on or after July 1, 2024.

Since the process is new, the Department may find the need to make modifications going forward. Once it has been determined that the process is working as desired, the Department plans to incorporate the risk assessment process and the related certifications into the CRM system to streamline the workflow process. See current year finding 2024-005.

On June 10, 2024, the Office of Shared Administrations’ Chief Financial Officer issued a directive to the Department of Health, Department of Health Facilities and the Department of Human Services (spending units) which implemented a requirement that risk assessments and certifications would need to be completed by spending unit staff prior to the issuance of all subawards. If during the evaluation of risk, a spending unit determines that a subrecipient’s risk is high, the award can still be made but could include specific terms and additional conditions as appropriate to the risk and as deemed necessary by the spending unit. To ensure all risk assessments have been completed prior to finalizing a subaward, a hard stop has been incorporated within the Department’s subrecipient Grants Management Solution system (CRM) if the risk assessment is missing prior to completion of the award. Therefore, no grant award can be sent to a grantee for final signatures without a copy of the risk assessment being included as part of the overall grant documentation. The process was implemented for grants beginning on or after July 1, 2024.

Since the process is new, the Department may find the need to make modifications as we move forward. Once it has been determined that the process is working as desired, the Department plans to incorporate the risk assessment process and the related certifications into the CRM system to streamline the workflow process. See current year finding 2024-031.

2023-005 **SPECIAL TESTS AND PROVISIONS – ADP SYSTEM FOR SNAP**
2022-002 **Department of Health and Human Resources (DHHR)**
Assistance Listing Number 10.551, 10.561, COVID-19 10.561
Partially Resolved

Management appreciates and shares the auditors’ concern with SNAP program integrity as it relates to the RAPIDS ADP system. DoHS notes that 7 CFR § 272.10 begins with, “(1) Purpose. All State agencies are required to sufficiently automate their SNAP operations and computerize their systems



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

for obtaining, maintaining, utilizing and transmitting information concerning SNAP. Sufficient automation levels are those which result in effective programs or in cost effective reductions in errors and improvements in management efficiency, such as decreases in program administrative costs . . .” Within the RAPIDS ecosystem for SNAP administration, this automation includes data matching measures undertaken, in compliance with related federal rules as specified in 7 CFR § 272.8, 7 CFR § 272.16, etc., to automate the validation of client-provided, worker-input information while mitigating the additional administrative burden of secondary review for all worker interactions with a client’s case. Policy regarding state and federal data matching is laid out in Chapter 6 of the State’s Income Maintenance Manual (IMM).

The primary data exchange system detailed in IMM Chapter 6 that is applicable to SNAP is the Income and Eligibility Verification System (IEVS) required by 7 CFR § 272.8. Systems mandated federally for inclusion in the IEVS include those operated by Workforce WV, the Internal Revenue Service (IRS), and the U.S. Social Security Administration (SSA). A variety of other sources may also be queried for the purpose of validating client-provided information entered into RAPIDS by a worker, including Veterans Affairs (VA), Beneficiary and Earnings Data Exchange (BENDEX), Beneficiary Earnings and Exchange Record System (BEERS), National Directory of New Hires, and Prisoner Matching with the Department of Corrections as well as the Federal Data Services Hub (FDSH).

IMM Chapter 6, page 2 describes the purpose of data matching through the IEVS. Information obtained through IEVS is used to verify the eligibility of the assistance group (AG), verify the proper amount of benefits, determine if the AG received benefits to which it was not entitled, obtain information for use in criminal or civil prosecution based on receipt of benefits to which the AG was not entitled.

IMM Chapter 6, pages 2-3 further detail the points at which a match with the IEVS must take place when a data exchange in the eligibility system occurs, when a new case is created, when a new person is added to a benefit, When a person’s demographic information is changed; and, on a periodic basis for all individuals in the eligibility system, depending on the type of benefit being received.

Requirements for independent verification of information when automated data matches fail or report a discrepancy with client-provided, worker-input information are spelled out in IMM 6.4.4.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

The DoHS believes that these automations, while perhaps not foolproof, are in keeping with both the word and intent of 7 CFR § 272.10, 7 CFR § 272.8, 7 CFR § 272.16, etc., which aim to automate processes to reduce administrative burden and associated costs, such as those that would be associated with a secondary review of all worker interactions with a client's case.

Furthermore, page 4-10.551-9 of the Compliance Supplement 2023 which lays out the suggested audit procedures for this topic recommends the use of the USDA-FNS SNAP System Integrity Review Tool (SIRT) to ensure that the State's ADP system is in alignment with USDA-FNS requirements and ensure that automated processes within RAPIDS continue to comport with federal requirements for ADP systems. To our knowledge, the auditors neither utilized that tool to guide their work nor requested verification from the State that it had been previously employed. To accompany this response, DoHS provided a copy of the SIRT submitted to FNS on October 26, 2023, in preparation for the go-live of the WV PATH Family Assistance pilot program; DoHS would note that as there is no significant difference in system functionality between the Family Assistance module of WV PATH and the existing eRAPIDS system, the responses/comments/replies from both FNS and the State that are included in this version of the SIRT generally apply both to eRAPIDS and to PATH.

Throughout 2023, the Division of Performance and Quality Improvement (DPQI) continued its ongoing SNAP case reviews, as well as continued its efforts to report compliance with monthly requirements for expanded supervisor case reviews conducted and tracked through the Rushmore case review system, as mandated in December 7, 2022, memorandum to supervisors provided to the auditors last year. Further, the Bureau for Family Assistance (BFA) developed additional worker training, including the reinstatement of face-to-face Statewide Payment Accuracy Conferences (held throughout the summers of 2023 and 2024), with the aim to ensure that client information is accurately captured in RAPIDS so the APD can perform its automated functions with integrity.

A December 11, 2024, letter from the USDA-FNS Mid-Atlantic Regional Office indicated that the Bureau's corrective actions in relation to this finding in prior years have adequately addressed the finding. See current year finding 2024-006.



**SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS
 FOR THE FISCAL YEAR ENDED JUNE 30, 2024**

2023-006 ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE COSTS/COST PRINCIPLES
Department of Health and Human Resources (DHHR)
Assistance Listing Number 10.551, 10.561, COVID-19 10.561
Resolved

Corrective action taken for FY 2024.

2023-007 TRANSPARENCY ACT REPORTING
2022-004 Department of Education (DOE)
Assistance Listing Number 10.553, 10.555, 10.556, 10.559, 10.582
Partially Resolved

WVDE has already put a process in place to report the child nutrition payments to Federal Funding Accountability and Transparency Act (FFATA). This process started in July 2024. FFATA reports have been filed for FY 2025. See current year finding 2024-007.

2023-008 TRANSPARENCY ACT REPORTING
2022-005 West Virginia Community Development Block Grant Program (CDBG)
Assistance Listing Number 14.228
Partially Resolved

To ensure necessary subaward data regarding first-tier subawards are reported in a timely fashion to meet FFATA requirements, the CDBG program manager, infrastructure unit manager, and the West Virginia Community Advance and Development (CAD) director will perform the following procedures:

1. Once CDBG applications are reviewed and scored, project and funding recommendations are submitted to the Office of the Governor for final review and approval.
2. After CDBG subawards are announced, the CDBG Program Manager will prepare the FFATA report within 3 business days of receiving the Governor’s CDBG award letters.
3. Prior to submitting the FFATA report in the Federal Funding Accountability and Transparency Act Subaward Reporting System (FSRS), the CDBG Program Manager will provide the Infrastructure Unit Manager and the CAD Director with a copy of the draft report for review and approval.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

4. Once the FFATA report is approved by the Infrastructure Unit Manager and the CAD Director, the CDBG Program Manager will submit the report in the FSRS.
5. After the FFATA report is submitted in FSRS and within 45 days of CDBG award announcements, the CDBG Program Manager will submit the FFATA report via email to the assigned Office of Community Planning and Development representative with HUD. See current year finding 2024-008.

2023-009 **TRANSPARENCY ACT REPORTING**
Department of Environmental Protection (DEP)
Assistance Listing Number 15.252
Partially Resolved

DEP currently has written standard operating procedures in place for reporting subawards of \$30,000 or more in the Federal Funding Accountability and Transparency Act Subaward Reporting System. The audit found that three subawards were reported later than the timeframe required by FSRS, and two subawards reported the incorrect obligation date. DEP's standard operating procedures have been modified to include a pre-submission review level to ensure that these errors do not occur in the future. See current year finding 2024-009.

2023-010 **REPORTING**
Department of Environmental Protection (DEP)
Assistance Listing Number 15.252
Resolved

Corrective action taken for FY 2024.

2023-011 **SUBRECIPIENT MONITORING**
Department of Environmental Protection (DEP)
Assistance Listing Number 15.252
Partially Resolved

DEP currently has written standard operating procedures to ensure that all information required under 2 CFR 200.332 is included in each subaward. The one award that was found to be deficient did not contain five of the nineteen informational components of 2 CFR 200.332. DEP has corrected this error and has updated the standard operating procedures to include documentation in



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

all subawards that contain these federal informational components. See current year finding 2024-010.

2023-012 **SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS**
Department of Environmental Protection (DEP)
Assistance Listing Number 15.252
Resolved

Corrective action taken for FY 2024.

2023-013 **INTERNAL CONTROLS OVER INFORMATION TECHNOLOGY**
2022-008 **Workforce West Virginia (WWV)**
Assistance Listing Number 17.225
Partially Resolved

WWV will review the policies and procedures which documents the process for periodic review of administrative access and user access for the ABPS and UI Tax systems and make updates as needed to ensure employee terminations are reported timely to the WV Office of Technology (WVOT). Appropriate staff will be trained on the policies and procedures. Disaster Recovery testing was conducted with WVOT and the mainframe vendor Ensono October 2023. WWV will document review of future SOC reports. See current year finding 2024-011.

2023-014 **REPORTING**
Workforce West Virginia (WWV)
Assistance Listing Number 17.225
Resolved

Corrective action taken for FY 2024.

2023-015 **REPORTING**
Division of Highways (the Division)
Assistance Listing Number 20.933
Resolved

Corrective action taken for FY 2024.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

2023-016 SPECIAL TESTS AND PROVISIONS – NOTIFICATION OF CHANGES TO KEY PERSONNEL
Division of Highways (the Division)
Assistance Listing Number 20.933
Resolved

Corrective action taken for FY 2024.

2023-017 SPECIAL TESTS AND PROVISIONS – SATISFACTORY ACADEMIC PROGRESS
Blue Ridge Community and Technical College, Bluefield State University, Fairmont State University, Marshall University, New River Community and Technical College, West Liberty University, West Virginia Northern Community College, West Virginia School of Osteopathic Medicine, and West Virginia University at Parkersburg
Assistance Listing Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364
Resolved

Corrective action taken for FY 2024.

2023-018 INTERNAL CONTROLS OVER FINANCIAL REPORTING
Pierpont Community and Technical College (PCTC)
Assistance Listing Number 84.063, 84.268
Resolved

Corrective action taken for FY 2024.

2023-019 SPECIAL TESTS AND PROVISIONS – GRAMM-LEACH-BLILEY ACT
2022-017 STUDENT INFORMATION SECURITY
Blue Ridge Community and Technical College, Bluefield State University, Concord University, Fairmont State University, Marshall University, New River Community and Technical College, Pierpont Community and Technical College, Shepherd University, West Liberty University, West Virginia Northern Community College, West Virginia State University, and West Virginia University at Parkersburg
Assistance Listing Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364
Partially Resolved

While Blue Ridge Community and Technical College, Bluefield State University, Concord University, Marshall University, New River Community



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

and Technical College, and West Virginia Northern Community College identified in the prior year finding resolved this matter, Fairmont State University, Pierpont Community and Technical College, Shepherd University, West Liberty University, West Virginia State University, West Virginia University at Parkersburg, and Glenville State University have a finding in the current year. This finding is only partially resolved because each university/college is only responsible for their own internal controls and the updated controls have not been implemented at the above institutions. See current year finding 2024-040 and the related corrective action plan.

Fairmont State University (FSU) response

FSU is currently conducting a periodic inventory of data, noting where it's collected, stored, or transmitted via a software platform. The data is reviewed annually. FSU is also documenting current procedures and will publish these procedures and train users on the operating procedure once documented completely. This is currently in progress and will be completed by April 30, 2025.

FSU currently has secure disposal of information practices, but it is undocumented. FSU will create a "Data Disposal" policy and procedure outlining all current practices and enhancing practices where applicable. This is currently in progress and will be completed by April 30, 2025.

Pierpont Community and Technical College (PCTC) response

PCTC formally approved and implemented all Information Technology Policies in April 2024. PCTC approved and implemented its Information Security Program in January 2024.

Shepherd University (SU) response

Effective May 2024, SU will review the documentation and guidance that is circulated regarding GLBA annually and use the guidance to map out the GLBA points that tie to Shepherd's information security program. Going forward, SU will clearly document the mapping to ensure that all points are followed that relate to the GLBA guidance. SU will ensure that there is a proper and documented process of review and communication of these steps to Executive Leadership of SU.

West Liberty University (WLU) response

A draft of the remediation was completed by the end of November. It was reviewed internally by the appropriate internal parties and approved for implementation in January 2025. This plan ties together several current operational practices and improves others. Specifically, the plan coordinates



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

activities of the Data Security Governance Committee, identified under University policy #82 and further increases the level of documentation required to annually name a Privacy Officer and Data Steward. It emphasizes the need for legal review of data classifications to ensure that they align with the current law. It defines standards for Data Access Control and strengthens the WLU Data Audit Procedure to create separation and add workflow between personnel who manage data access and personnel review and approve the user access audit findings. The plan also ties the following existing governance and applicable standards to create a complete picture of the overall requirements and how they should be applied:

University Policy #82 – Information Privacy
University Policy #81 – Data Breach Response
GLBA
NIST

Lastly, the procedure dictates governance review periods and a calendar of annual events to ensure the continued relevance of the procedure and associated policies and standards.

West Virginia State University (WVSU) response

WVSU clearly and fully documents the information security program and shows compliance with 2 CFR200.303. WVSU's information security program will clearly document the following items:

1. The qualified individual responsible for overseeing and implementing the institution's information security program and enforcing the information security program in compliance with 16 CFR 314.
2. Provide documentation of regular risk assessments that identify reasonably foreseeable internal and external risks to the security, confidentiality, and integrity of students' information that could result in unauthorized disclosure, misuse, alteration, destruction, or other compromise of such information, and assess the quality of any implemented safeguards intended to mitigate these risks.
3. Design, implement and regularly review safeguards to control the risks the institution identifies by way of its risk assessments identifying at a minimum the following eight safeguards required to be documented in the institution's information security policy.
 - a. Implement and periodically review access controls.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

- b. Conduct periodic inventory of data, documenting where the data originates, is stored, or transmitted.
 - c. Encrypt student information on the institution's system and when it is in transit.
 - d. Assess applications developed by the institution.
 - e. Implement multi-factor authentication for anyone accessing student information on the University's system.
 - f. Dispose of student information securely.
 - g. Proactively plan for and evaluate changes to the University's information system or network.
 - h. Maintain a log of authorized users' activity and be vigilant of unauthorized access to the institutions network.
4. Document and regularly test or otherwise monitor the quality of the safeguards the University has implemented.
 5. Provide for the implementation and adoption of policies and procedures to ensure that employees are able enact WVSU's information security program.
 6. Document on how the University will interact and oversee its information system service providers.

Provide for the assessment and adjustment of the information security program with regard to the results of required testing and monitoring; any substantial changes to the Universities operations or business arrangements; the results of required risk assessments; or any other circumstances that are known or has reason to know may have material impact upon the University's information security program. These policies and procedures will be implemented in May 2025.

West Virginia University at Parkersburg (WVUP) response

WVUP now has access to the audit logs relevant to these events and will ensure all supporting documentation will follow the requested formats. A review was conducted, but did not meet the requirements of the request. WVUP is working



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

on updating the process to ensure that the supporting documentation meets the requirements. The updated process will be implemented by March 1, 2025.

Glennville State University (GSU) response

GSU will work to provide more documentation with the Information Security Program review process. GSU has adopted a new review template to properly document the review process. Additionally, GSU had an open position in the IT department and advertised for applicants with documentation experience and has hired a new employee with a strong documentation background. To improve its information security posture and ensure compliance, GSU will take the following steps:

1. Conduct a comprehensive risk assessment:
 - a. Identify potential risks to sensitive customer information, including both internal and external threats.
2. Evaluate vulnerabilities and threats related to systems, people, and processes.
3. Update the risk assessment regularly, considering new risks as the university's information environment changes (e.g., adoption of new technologies, changes in federal or state laws).
4. Assess the sufficiency of existing safeguards:
 - a. Evaluate existing technical, physical, and administrative safeguards to ensure adequacy to protect sensitive data.
 - b. Implement additional safeguards if necessary, such as encryption, access controls, and multi-factor authentication.
5. Document and track risk mitigation efforts:
 - a. Document the risk assessment process, including identified risks and mitigations.
 - b. Track the effectiveness of safeguards and perform regular reviews to update safeguards as necessary.

GSU will show better documentation identifying data by using a tool such as CUSpider to discover if data is in unexpected places. GSU will document any



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

physical locations where data might be stored, such as file cabinets, servers, or other storage devices. GSU will identify where data is stored digitally, whether on-premises or in the cloud. This can include databases, spreadsheets, or specialized software systems. GSU will identify data transmitted internally within the organization. This might include emails, internal networks, or intranet systems. GSU will identify data transmitted to third parties, such as cloud services, vendors, or other external systems and make note of the transmission methods (e.g., email, file transfers, API integrations).

GSU should document encryption technologies to safeguard data at rest and in transit. GSU will enable SSL/TLS for Web Traffic (HTTPS): Ellucian Banner's WebTailor or Banner Web interfaces will be served over HTTPS to encrypt the web traffic between clients (students, staff, etc.) and the Ellucian Banner system. API processes are through SFTP with third-party services. SQL Server: GSU will use Transparent Data Encryption (TDE) to encrypt the database files. Customer data to be found on desktops and file servers will be encrypted locally as well.

GSU will activate MFA for accounts accessing customer information. GSU will enter a work order with WVNET to install this on our instance of Banner. GSU will install an add on to our Active Directory Server for MFA on campus. These steps will be completed in the first quarter of the new year. GSU is committed to maintaining compliance with GLBA and ensuring the confidentiality and security of customer information. As part of the continuous improvement efforts, GSU will continue to monitor systems, policies, and procedures to ensure that all relevant GLBA requirements are met in the future.

2023-020 **SPECIAL TESTS AND PROVISIONS – VERIFICATION**
2022-015 **Fairmont State University and Bluefield State University**
Assistance Listing Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379,
93.264, 93.342, 93.364
Partially Resolved

This finding is only partially resolved because each university/college is only responsible for their own internal controls and the updated controls have not been implemented at the above institutions. See current year finding 2024-041 and the related corrective action plan.



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Fairmont State University (FSU) response

Effective February 2024, controls were put into place to address the additional review of the verification process once the initial review was completed. It was found that through some reporting and timing that the additional review did not occur for all students.

FSU implemented the following internal controls for the verification process:

1. When all documents are received, the Information System Specialist (ISS) will perform the initial verification including updates or corrections in the FAFSA Partner Portal. The ISS enters initials and date of review into ROAUSDF to confirm the first review is complete. The ISS will notify the secondary reviewer that the file is ready for review.
2. The secondary review is completed by a Financial Aid Counselor (FAC). The FAC will also record the review in ROAUSDF.
3. The ISS runs a monthly report to track complete and incomplete verification files.

Bluefield State University (BSU) response

BSU will implement a more controlled review process for the Student Aid files that have been chosen for verification that consists of the following:

1. As the students' files are received through ED connect and downloaded into our system a report is generated flagging which files have verification codes by the Financial Aid Counselor. Those files are then set up in Banner with the proper documents indicated in the "Applicant Requirement Screen" to be mailed to and completed by each student and or parent.
2. All completed student documents are reviewed by a Financial Aid Counselor as they are turned in for completeness and initials and logged into banner.
3. All completed student files are then given to the Preparer (Financial Aid Counselor) to be analyzed and compared to their FAFSA screen in RNANA "Need Analysis" screen by aid year for any conflicting information. Documentation necessary to resolve the conflict is at that time requested from the student through the Banner system by financial aid counselor. Letters are mailed or emails are sent to contact the students for the necessary information.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

4. Verification checklists are completed by the preparer when all documents are turned in and the students' file is verified.
5. The following items are verified by the Financial Aid Counselor (Preparer): Tax information, Taxes paid, number of family members, number of family members in college, social security 1099 forms, child support, IRA 1040 forms, Foreign Income, Earned Income credit, Interest income or any other untaxed income. And any other income or assets that have been listed. High School Diploma forms will be checked continually as well as all other documents in the student file.
6. Dependent/Independent verification checklist is completed. SAR amounts are compared to amounts on various documents. Differences in dollar amounts are added to see if U.S Department of Education tolerance levels for Pell Grant and loan programs are met.
7. If the comparison is within tolerance levels, no recalculation is done.
8. If tolerance levels are exceeded, recalculation is performed electronically within the Banner system.
9. If the Pell award changes due to recalculation, then the amounts are adjusted in Banner.
10. After all calculations are made and the checklist are completed the files will then be reviewed by another counselor for accuracy. This reviewer will then sign off on the file and checklist that it has been reviewed, and no errors were found or that something needed to be recalculated. Both the preparer and the reviewer will sign off and date the checklist.

2023-021

BANNER INFORMATION TECHNOLOGY GENERAL CONTROLS

Blue Ridge Community and Technical College, Bluefield State University, Concord University, Fairmont State University, Mountwest Community and Technical College, New River Community and Technical College, Pierpont Community and Technical College, Shepherd University, West Liberty University, West Virginia Northern Community College, West Virginia State University, Glenville State University and West Virginia University at Parkersburg

Assistance Listing Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364

Partially Resolved



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

While Blue Ridge Community and Technical College, Bluefield State University, and Fairmont State University identified in the prior year finding resolved this matter, Glenville State University, Mountwest Community and Technical College, New River Community and Technical College, Concord University, Pierpont Community and Technical College, Shepherd University, West Liberty University, West Virginia Northern Community College, West Virginia University at Parkersburg, and West Virginia State University have a finding in the current year. This finding is only partially resolved because each university/college is only responsible for their own internal controls and the updated controls have not been implemented at the above institutions. See current year finding 2024-042 and the related corrective action plan.

Glenville State University (GSU) response

Effective January 2025, GSU has created a comprehensive User Access Review Policy for Ellucian Banner in addition to the Active Directory Policy. This is to be executed on a bi-annual basis with documentation of accounts reviewed. GSU has added these documentation duties as well as others to an open job position. GSU is committed to developing a more formal process with human resources and the payroll department to more accurately document and execute the revocation of accesses of departing and transferring employees.

Mountwest Community and Technical College (MCTC) response

MCTC, specifically the Banner Admin, will continue to ensure that any and all Banner access requests for employees are documented and signed off on before access is granted. The current process is as follows; A support ticket is to be sent to the Banner admin by the requester (the VP, Director, Manager, Supervisor of said employee) with the Banner request form attached and signed by both the requestor and employee. The requestor must specify what access is being requested, and it must be in line with the employee's expected job duties and responsibilities.

MCTC will continue to ensure that Banner access is terminated upon employee resignation or separation from the college. HR and/or the respective Director or VP of the terminated employee assume responsibility for timely notification to the Banner administrator(s) to revoke the terminated user's Banner access. All notifications are to be submitted via email or an IT support ticket.

MCTC will continue to ensure that only authorized users have access to the Banner Security Account (Bansecr) or any distributed accounts. Any designees of the Director of IT or CIO who are appointed to assist as a secondary Banner admin will be assigned their own distributed Bansecr account. MCTC will work



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with WVNET to ensure the distributed account is assigned and granted only to the specific designee. This practice helps to maintain, track, and audit any system changes.

MCTC will continue to ensure that the security and complexity of Banner passwords meet industry standards. EIS is currently implemented so all users currently authenticate to Banner using their Active Directory credentials. The minimum password character length was updated in January 2024 to 12, an increase from the character length of 9 that was active during the audit period. Password history is enabled which ensures users cannot use any of their last 10 previous passwords; Password change frequency is set to 180 days, or 6 months; MCTC also enforces our IT Acceptable Use Policy which prohibits password sharing.

MCTC will continue to ensure that all module patches and upgrades are tested and approved before moving the said upgrades, patches to the production system. Documentation will be created to track the date and time of testing as well as the approval.

MCTC will continue to ensure that Banner user access is reviewed periodically. The current process is that Banner accounts are disabled for all users who have not been active in the Banner system for 6 months or longer. MCTC also takes measures to review access grants for employees who switch positions; Access is revoked for the Banner forms that do not fall under the responsibilities of the new job position, and any additional access must be signed off on by the VP or Director of the employee's department.

MCTC will add a step to the annual review to ensure that access grants are still valid and needed for each employee that has Banner access, and that employees do not have access to anything that no longer pertains to their job role. The date of the review will be documented. The MCTC CIO currently is the Banner admin responsible for user access review. The CIO is also the database administrator which comes with privileged access to the Banner system. This allows the CIO to fulfill the role as the lead IT support technician for the college and each department that uses Banner. It was noted that another individual should be assigned to review Banner access as CIO annually. MCTC will implement a step in this process for each Vice President or "Banner Data Owner" to review and acknowledge the CIO's role and access to the Banner forms that fall under their respective area. These policies and procedures will be effective January 2025.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

New River Community and Technical College (NRCTC) response

Effective July 2024, NRCTC's annual permissions review was pushed back when it was required to be done by June 30th. NRCTC will be doing the review in May going forward to prevent the review from running into the next fiscal/audit year. There was no evidence found that one user's account was locked due to inactivity. NRCTC now runs confirmation reports after locking accounts for inactivity and keep screenshots of the locked user accounts from GSASECR either as of the time they were locked (December and afterwards) or as of the time they're unlocked (if they were locked prior to that point). NRCTC now requires departments to explicitly confirm that staff have conducted testing of Banner updates.

NRCTC will develop written procedures for user provisioning, the monthly inactivity review, the annual permissions review, or user termination.

Concord University (CU) response

Effective May 2024, CU prioritizes the retirement of BANSECR and the transition to individualized accounts since May 2024. CU created individual accounts, but CU received errors within the Access Management application. CU created a case on May 31, 2024. CU then directed to create a new case where a defect was identified. As noted in the last case, the fix for the defect is slated to be available December 2024. CU will be continuing to work with Ellucian to support the transition to individualized accounts. In the meantime, CU will be changing the BANSECR password, and it will only be known by a single individual in the department. CU will be implementing a secondary authorization that prompts supervisors for their SSO username and password before the form can be viewed.

Each audit form is read only. The only way the form can be populated is via URL variables. Each supervisor has a unique system-generated URL sent to them that passes the URL for those values. No other end-user has access to this system-generated link. CU provided a copy of that e-mail and link from the system account as evidence of the Python process.

Pierpont Community and Technical College (PCTC) response

PCTC implemented a process for an annual yearly review of all Banner users' access in October 2024.

Shepherd University (SU) response

SU's Information Security Program will be reviewed annually by Executive Leadership or by the group designated. Documentation of review will consist of meeting agendas and meeting notes, as well as changing history of the



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

documents themselves where applicable. Reviewer and Chief Information Security Office (CISO) approvals will be documented by email. Executive leadership will identify reviewers by January 31 of each year and CISO edits by February 28 of each year. Review and edits will take place in March/April with approval in May of each year. Sign off will be via email.

West Liberty University (WLU) response

WLU is preparing and documenting a process and workflow that will define users access needs, with an appropriate management approval chain that will be in place prior to April 2025. WLU will, as a function of the process described above, create stronger documentation to ensure that any level of auditor can understand that user access revocation is not, and has not, been a risk at WLU. WLU will, as a function of the process described above, create stronger documentation to ensure that any level of auditor can understand that user access reviews have taken place at WLU including functional departmental review and approval. WLU will, as a function of the process described above, create an approval workflow and require individual departments to review and approve current work assignments and their corresponding access.

WLU, as many of the cited institutions noted here, engages with WVNet to manage all hardware, software, and back-end processes related to our Banner instances. All application testing and infrastructure patching, and the documentation therein, is the responsibility of WVNet. WLU does not have access to perform these activities, and it is WVNet's mission, as a state agency, to manage these functions. This has been a repetitive conversation in the audit process for multiple years. The only manner in which WLU could remediate these issues would build a separate instance of Banner at WLU and operate independently, which would require the investment of several million dollars in hardware, software and net new manpower.

With that as a backdrop, WLU is including the WVNet Policy covering "Software Change". In addition, the Executive Director of WVNet provides the following insights: "WVNet strives to evaluate major upgrades on at least a quarterly basis. Due to Ellucian release schedules, these major upgrades are applied on as much of a regular cadence as possible to ensure compatibility among the different components of the Banner system. Additional patch cycles may be performed for anything that is deemed "critical" or "necessary" for specific applications that do not have major codependency requirements. This is especially true for applications such as Banner Financial Aid, which has a more frequent release schedule due to changes in financial processing. Application of patches are communicated with the customer functional support staff prior to any implementation via the use of an in-house



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ticketing system (OZ). All patches are first performed in a test environment and verification is required from the customer prior to installation in a production environment. Once the customer has tested and verified no issues were encountered in their test environment, the patches are applied to the production environment, tracking the process through the OZ ticketing system. The OZ ticketing system is also used to communicate any encountered issues or problems found. These tickets track changes to the application and the steps are used to provide a resolution and provide customers with direct communication with support staff to resolve issues.

West Virginia Northern Community College (WVNCC) response

Effective April 1, 2025, WVNCC will meet quarterly to review user access, password settings and privileged access. During the review, WVNCC will document any concerns of user provisioning, terminated employee access, and privileged access. Changes to the system will be made according to the results of the review. The IT Committee will review policy and procedure annually around the Banner system and make recommendations to the IT staff to improve processes. The IT Meetings will reflect the recommendations.

West Virginia University at Parkersburg (WVUP) response

WVUP now has access to the audit logs relevant to these events and will ensure all supporting documentation will follow the requested formats. A review was conducted, but did not meet the requirements of the request. WVUP is working on updating the process to ensure that the supporting documentation meets the requirements. The updated process will be implemented by March 1, 2025.

WVUP is currently in the process of updating both the written password policy as well as any systems password policies for consistency and to ensure compliance. This task will be completed by April 1, 2025.

West Virginia State University (WVSU) response

WVSU will correct the finding regarding Banner ITGCs by developing, reviewing and implementing the following changes:

1. In order to address the lack of a formalized process to support access provisioning events for Banner WVSU IT will work with WVSU HR and develop an employee new hire / position change / termination form which must be completed by an employee's supervisor.
 - a. The form will include a section for the supervisor to request Banner access for their employee as well as what Banner modules the employee will need access to.



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- b. For each employee change event (new hire, position change, termination) the managing supervisor will be required to submit the form to Human Resources.
 - c. Upon receiving the new form HR will submit a change request to IT which includes the date the change should be made effective as well as a copy of the form.
 - d. As part of the change request process, IT will verify through email with the VP(s) over the affected employee's area(s) to ensure the validity of the information provided.
 - e. Once IT has validated the form through VP approval, IT will commit the changes requested.
 2. To address the need for a User Access Review of Banner accounts, IT will develop a report to be sent to each employee supervisor at the beginning of each term.
 - a. The report will list each employee who reports to each supervisor and show the employee's Banner Access levels.
 - b. Each supervisor will be asked to review the report and affirm that their employees have the proper Banner access.
 - c. In the event a supervisor notices the need for a permissions change IT will request that an Employee Change Form be submitted to HR in order to document the needed change.
 3. In order to address issues with generic privileged accounts, IT will actively work to disable generic accounts and assign proper privileges to individual accounts, thereby allowing for proper and less confusing tracking of privileged account access and changes.
 4. With regard to the change management process, in order to better track changes to both the test and production systems, WVSU will now run a report before and after each change request showing the current versions of all Banner modules and attach the reports to the appropriate IT work request. This should better support the tracking of Banner changes for future audits. IT will also formally document the change management process. These policies and procedures will be implemented in May 2025.



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2023-022 **SPECIAL TESTS AND PROVISIONS – RETURN OF TITLE IV FUNDS**
2022-011 **Blueridge Community and Technical College, Bluefield State**
University, Fairmont State University, Glenville State University,
Mountwest Community & Technical College, Pierpont Community
and Technical College, and West Virginia Northern Community
College
Assistance Listing Number 84.007, 84.033, 84.063, 84.268
Partially Resolved

While Blue Ridge Community and Technical College, Bluefield State University, Pierpont Community and Technical College, and West Virginia Northern Community College identified in the prior year finding resolved this matter, Glenville State University, Fairmont State University, and Mountwest Community and Technical College have a finding in the current year. This finding is only partially resolved because each university/college is only responsible for their own internal controls and the updated controls have not been implemented at the above institutions. See current year finding 2024-043 and the related corrective action plan.

Glenville State University (GSU) response

As of October 2024, the GSU Financial Aid Office has implemented internal controls to ensure review and approval of the Return of Title IV (R2T4) calculations. These reviews and approvals are now sufficiently documented. One staff member in the Financial Aid Office runs the R2T4 calculations within the federal system, Common Origination and Disbursement (COD), prints the calculations, and performs the aid adjustments in Banner, then signs off on the R2T4 form that the adjustments have been processed. Once that is completed, a second staff member reviews all calculations and adjustments and signs off on the R2T4 form as well.

Fairmont State University (FSU) response

FSU Accounting Office identifies withdrawn students using the Argos report RZRWDRL. The accountant creates an Excel file documenting the date of withdrawal, federal and state aid disbursements, and total institutional charges. When all information is recorded for identified withdrawn students, the accountant notifies the Information System Specialist (ISS) in the Financial Aid Office that students are ready for the Return of Title IV (R2T4) process. The ISS performs the R2T4 calculation using the Common Origination and Disbursement (COD) website. The Financial Aid Director (FAD) or appointed person completes a secondary review by performing another calculation in COD. Effective February 2025, the FAD ensures all aid the



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

student was eligible to receive had been disbursed at the time of review and notes on the R2T4 worksheet. If the aid had not been disbursed, the cause would be researched. If eligibility requirements were not met or documentation is outstanding, students do not qualify for a post-withdrawal disbursement (PWD) and aid will be canceled. If a student qualifies for a PWD, the student is notified accordingly. If the secondary reviewer's information matches the first reviewer, the ISS will be notified to complete the return and notify the student. The secondary reviewer creates a worksheet to note the date of withdrawal, disbursed aid, institutional charges, and PWD determination. The worksheet is saved with the COD calculation sheets in AppXtender. When the ISS returns required aid in the Banner system, a note will be made in RHACOMM with details of the return. The Finance Program Manager, Information Systems Specialist, Financial Aid Director will perform the checks weekly by verifying the data for the calculation has been entered correctly, and the adjustments to the BANNER system are accurate. Additional investigation will be needed when reviewers cannot produce the same results from the R2T4 form and will verify the accuracy of the calculation and ensure the data being used for recalculation is accurate. The recalculation will be performed after verifying the data from the system.

Mountwest Community & Technical College (MCTC) response

Effective February 2024, MCTC instituted a policy requiring staff to maintain the SFRWDRL reports for all withdrawals (both official and unofficial) run in "Update" mode with notations by at least two staff members to indicate timeliness, and to indicate that touch points along the calculation have been reviewed such as checking start and end dates in STVTERM and break days in SOATBRK as well as percentage calculated comparing Banner percentages to manually calculated percentages. Sampling of calculations was to be compared to manual calculations using USDE supplied manual Return to Title IV Worksheets to ensure that the Banner calculation of returns aligns with the manual calculation. On September 18, 2024, MCTC updated that policy to require the SFRWDRL report with notations, along with a screen capture of STVTERM and SOATBRK and verification of the withdrawal date per student, be uploaded in a zip file to Jobsub before any R2T4 calculations are run for the week. An email communication to the Financial Aid Director/Associate Director indicating files are awaiting review will be sent. A return email will be sent indicating review and approval to proceed. Once RPATIVC is completed, at least one manual worksheet will be completed each semester to verify effectiveness of Banner calculations. The manual calculation will be provided by uploading to Jobsub or via 256-bit password encryption via email so that the Financial Aid Director/Associate Director can also maintain and sign off on the calculations. These processes, effective September 18, 2024,



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

should provide verification that review, and approval of calculations is being documented.

- 2023-023** **INTERNAL CONTROLS OVER CASH MANAGEMENT**
Bluefield State University, Fairmont State University, Mountwest Community and Technical College, and West Virginia Northern Community College
Assistance Listing Number 84.007, 84.033, 84.063, 84.268
Partially Resolved

While Bluefield State University, Fairmont State University, Mountwest Community and Technical College, and West Virginia Northern Community College identified in the prior year finding resolved this matter, Concord University has a finding in the current year. This finding is only partially resolved because each university/college is only responsible for their own internal controls and the updated controls have not been implemented at the above institutions. See current year finding 2024-044 and the related corrective action plan.

Concord University (CU) response

Between office turnover and employee performance issues, the proper segregation of duties over this process was not followed. Effective August 2024, CU has new personnel in place to perform these duties, with proper training provided. In addition, CU no longer relies on singular initials on drawdown forms. Multiple signature lines are now present on all drawdown forms to ensure proper review and approval of federal draw downs.

- 2023-024** **SPECIAL TESTS AND PROVISIONS – USING A SERVICER TO DELIVER TITLE IV CREDIT BALANCES TO A CARD OR OTHER ACCESS DEVICE**
Bluefield State University, Blue Ridge Community & Technical College, Concord University, Mountwest Community and Technical College, Shepherd University, West Virginia Northern Community College, and West Virginia University at Parkersburg
Assistance Listing Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364
Partially Resolved

While Bluefield State University, Blue Ridge Community and Technical College, and West Virginia Northern Community College identified in the prior year finding resolved this matter, Concord University, Mountwest Community and Technical College, Shepherd University, and West Virginia University at



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

Parkersburg have a finding in the current year. This finding is only partially resolved because each university/college is only responsible for their own internal controls and the updated controls have not been implemented at the above institutions. See current year finding 2024-045 and the related corrective action plan.

Concord University (CU) response

Effective January 2025, CU has implemented calendar reminders to obtain the SOC and Compliance reports from Bank Mobile. Once obtained from Bank Mobile, the CFO will review the opinion of the report, and any exceptions noted. The CFO will then enter the ticket into the CU IT ticket system in order to obtain an IT opinion of the controls in place.

Mountwest Community and Technical College (MCTC) response

Effective February 2025, MCTC will implement a review process to be conducted on an annual or monthly basis, as applicable, of all accounts opened with the Servicer during the specified timeframe. The "Activation & Preferences Report" available to management through the Servicers Administrator portal will be used to provide the data for review by management.

The review process will consist of the following:

- A request made by the servicer to provide a report of accounts opened with date/time stamp of consent to opening at the end of every term. An email to the servicer providing date/time stamp of request and a wet signature of the reviewer will be documented.
- Monthly review of the "Activation & Preferences Report" validated against Servicer "Accounts Opened" report. A wet signature of the reviewer and date of review will be documented.
- Generate a monthly follow-up email to applicable students confirming the opening of the Servicer Account which will include an attachment to the Servicer "Terms and Conditions" and "Fee Schedules. A sample of follow-up emails providing date/time stamp will be documented.
- Annual review of the Servicers' Client Contract and Profile site for accuracy and completeness of information. A wet signature of the reviewer and date of review will be documented.



**SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS
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- Annual review of the Servicers' System and Organization Controls (SOC) and Compliance audits. A wet signature, date of review, and noted comments, if any, will be documented.
- Management will be incorporated as part of its “Due Diligence” and Attestation” copies of comparable banking institution fee schedules that are date/time stamped to serve as evidence of review.

Shepherd University (SU) response

Effective February 2024, SU developed and maintained a checklist to ensure that the appropriate tasks are being done. This includes reviewing SOC reports and the compliance audit from Bank Mobile noting and mitigating potential risk. More thorough documentation of the process and review points will be maintained. An email summary of the findings, if applicable, or lack of findings will be sent to the Vice President of Financial Administration for communication purposes.

West Virginia University at Parkersburg (WVUP) response

Effective January 2025, WVUP has implemented an internal policy to ensure that all required/recommended items are reviewed at least once per fiscal year, between May 1 and June 30. WVUP will properly document the review (outlined in the policy) and retain the documentation.

2023-025

SPECIAL TESTS AND PROVISIONS – PERKINS LOAN RECORDKEEPING AND RECORD RETENTION

Concord University, Marshall University, Shepherd University, West Liberty University, West Virginia School of Osteopathic Medicine, and West Virginia University

Assistance Listing Number 84.038

Partially Resolved

While Marshall University, Shepherd University, West Virginia School of Osteopathic Medicine, and West Virginia University identified in the prior year finding resolved this matter, Concord University and West Liberty University have a finding in the current year. This finding is only partially resolved because each university/college is only responsible for their own internal controls and the updated controls have not been implemented at the above institutions. See current year finding 2024-046 and the related corrective action plan.



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Concord University (CU) response

CU has implemented calendar reminders to obtain the SOC and Compliance reports from ECSI starting in January 2025. Once obtained from ECSI, the CFO will review the opinion of the report, and any exceptions noted. The CFO will then enter the ticket into the CU IT ticket system in order to obtain an IT opinion of the controls in place.

West Liberty University (WLU) response

To comply with internal control for the review and due diligence of the 3rd party servicer’s Title IV compliance review, WLU will ensure that moving forward that in addition to the SOC 1 and SOC 2 report collection and review, that the Title IV compliance report of the servicer will be obtained and reviewed to ensure that the requirements are met for the Federal Perkins Loan program portfolio.

Effective January 2025, the Student Account Manager will oversee that documentation will be kept providing the date that the report was received, evidence of the completed review, what specific items were reviewed, and any outcomes reached. This documentation will be retained along with the report to support the necessary internal controls, and for audit/record keeping purposes.

**2023-026
 2022-012**

**INTERNAL CONTROLS OVER SPECIAL TESTS AND PROVISIONS
 – ENROLLMENT REPORTING**

Bluefield State University, Blueridge Community and Technical College, Concord University, Fairmont State University, Marshall University, Mountwest Community and Technical College, New River Community and Technical College, Pierpont Community and Technical College, Shepherd University, West Liberty University, West Virginia Northern Community College, West Virginia State University, West Virginia University, and West Virginia University at Parkersburg

Assistance Listing Number 84.063, 84.268

Partially Resolved

While Blue Ridge Community and Technical College and West Virginia Northern Community College identified in the prior year finding resolved this matter, Bluefield State University, Concord University, Fairmont State University, Mountwest Community and Technical College, Marshall University, New River Community and Technical College, Pierpont Community and Technical College, Shepherd University, West Liberty University, West Virginia State University, West Virginia University, West



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

Virginia University at Parkersburg, Glenville State University, and West Virginia School of Osteopathic Medicine have a finding in the current year. This finding is only partially resolved because each university/college is only responsible for their own internal controls and the updated controls have not been implemented at the above institutions. See current year finding 2024-047 and the related corrective action plan.

Bluefield State University (BSU) response

BSU will review the final enrollment report and approvals will be signed off to submit the report to NSC, BSU will consistently retain a copy within our institution's files monthly. BSU will retain the record count reconciliation between the final enrollment report, text file, and the number of files received by the NSC, including all documentation on how any rejected records were addressed. BSU will retain the details of the validation of the students' information included in the enrollment report for accuracy. It will be maintained consistently in our monthly folders. BSU will consistently retain the NSC automated emails used as a quality checklist including enrollment due dates, and receipt of the text files by the NSC. The availability and completion of the Error Resolution Report, as well as the confirmation of certification and processing by the NSC report, will all be retained. These policies and procedures will be implemented in January 2025.

Concord University (CU) response

CU has implemented a control to retain the uploaded report that contains the total file count to compare record counts with the enrollment submitted to the NSC and how many files were rejected in August 2024. The NSLDS issue rests with an employee that was not adhering to the control that was in place. The registrar is now reviewing the report starting in February 2024 to adhere to separation of duties.

Fairmont State University (FSU) response

Effective February 2025, FSU will retain a screen shot of the record count received by the NSC and will document any rejected records and how FSU will address the rejected records. FSU will review a portion of the enrollment records submitted before it is uploaded to NSC. This review will include detailed documentation, for a select few, on how FSU validated the students' enrollment status. FSU will keep a spreadsheet of the students that FSU validated and the Banner screens that are used to do so.

Mountwest Community and Technical College (MCTC) response

Following the audit conducted during the fall 2024 semester, we have implemented several improvements to safeguard and enhance the accuracy of



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

our reporting processes. In response to the audit findings, we have strengthened our record authentication procedures beyond our standard annual process confirmation. Specifically, we now conduct additional spot checks for each data upload to the National Student Clearinghouse (NSCH).

As part of this enhanced process, the registrar's office now verifies a batch of student data, with the verification being completed by two separate individuals. This two-person verification ensures an added layer of accuracy and accountability. After both individuals independently verify the data, a secondary verification is performed on the batch before it is uploaded to the NSCH. Furthermore, all verified data and supporting documentation, including confirmation emails, are securely saved for future reference. Any information received from the NSCH is also archived, with dates recorded to ensure efficient data retrieval and confirmation. These improvements were implemented immediately following the audit findings in the fall of 2024. As we worked through the audit, we identified several areas where we could reinforce our processes to ensure ongoing data integrity and readiness for future audits.

Marshall University (MU) response

Effective February 1, 2024, MU has continued to maintain the following processes for internal control purposes: Documenting that a record count reconciliation has been completed between the enrollment submission file and the number of files received by the NSC, as well as documenting how any rejected records were addressed. Documenting and retaining records of the spot check validation process to ensure the accuracy of student information included in the enrollment submission files.

New River Community and Technical College (NRCTC) response

The Registrar's office will run a random selection of 20 students from NSLDS to make sure students are correct in the clearinghouse, which will be done at least 50 days from when the students were initially reported. The Registrar's office will keep documentation of the sampled students. The Registrar's office will keep records of how many files were accepted and how many were rejected. The Registrar's office will provide documentation of validation of student information included in the enrollment report and retain emails by providing a file specially for NSC enrollment reporting emails received and sent regarding enrollment reporting. Emails to be retained are error resolution and confirmation of certification and processing by the NSC. The Registrar's office will also create a checklist to follow and use as documentation to ensure all steps throughout the process are completed and checked off the list.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

Pierpont Community and Technical College (PCTC) response

Effective February 2024, PCTC is completing the review of the file before it is submitted, not after it is submitted. The Associate Registrar pulls the report prior to the due date to give those in the review process ample time to review the files before the Associate Registrar submits the document to the NSC. PCTC is keeping track of the due date of submission, the date the text file is sent to the NSC, the date the error resolution report is received, the date it is sent back, and the date the report is certified by the NSC. A new tab in PCTC's worksheet in TEAMS was created that is completed each time PCTC submits an enrollment verification to the NSC. TEAMS is backed up via MS 365 tenant and anything loaded into TEAMS is retained. PCTC notes the actual enrollment count as of the time of the NSC submission, the enrollment count on the TXT file, the number of files received by the NSC, and the number of rejected files. This verifies that all the files PCTC intended to submit to the NSC were received by the NSC and processed. This information is kept on each spreadsheet used to verify the information sent to the NSC.

Shepherd University (SU) response

Effective February 2025, SU will add a checklist to the existing reporting and retention structure that had already been established for Clearinghouse data transmission. The checklist will be completed with each transmission, organizing data retention efforts to ensure the inclusion of the additional elements required.

West Liberty University (WLU) response

To comply with internal controls over the process of enrollment reporting, WLU implemented and executed additional enrollment reporting internal controls to:

1. Perform a record count reconciliation between the final enrollment report and the number of files received by the NSC.
2. Retain NSC automated emails as a quality checklist regarding due dates, receipt of text files. by the NSC, availability and completion of error resolution reports, and confirmation of certification and processing by the NSC. These updated policies and procedures of internal controls started and are consistently performed by the appropriate knowledgeable personnel for each enrollment reporting transmission to the NSC as of May 2024 and forward. Additional documentation was pulled in the 2023-2024 audit past this May implementation date and no issues were found.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

West Virginia State University (WVSU) response

WVSU utilizes the National Student Clearinghouse (NSC) to update student's enrollment and its effects on student's direct loan and Pell statuses. Through edit checks of student data for each semester will be produced by IT on a regular basis. The Office of the Registrar, in coordination with Admissions, Dual Enrollment, and other contributors of student data will make sure these errors are corrected. Special focus will be placed on resolving these errors before each enrollment file is produced. (initial data integrity, first check). On or around the 25th of each month, IT will produce the NSC enrollment file. Each time the file is produced, the file will be sent to the Registrar for review to ensure accuracy of the data being pulled from Banner. Registrar sends approval for upload to NSC. Emails from NSC, IT, and Registrar approval and files with Registrar student checks to be retained. (process integrity, second check) The file will be uploaded to the NSC by IT, ensuring NSC receives the appropriate number of records. The data will then be reviewed and any discrepancies in the data, when compared with past data, will be resolved in a timely manner. The NSC error report will be reviewed and any errors corrected. The NSC process makes sure these errors are resolved before the data is reported to the NSLDS, it is the responsibility of the Registrar to make sure these are resolved with accurate data. Emails from NSC, and screenshots of errors will be retained. (data integrity, third check) After resolution of errors, the NSC will perform a final review of data before sending to the NSLDS. This will be reported on the NSLDS reporting tab of the enrollment reporting screen in the NSC website. If data is satisfactory, the submission will be marked with "Congrats. No Errors!" by the originator clearinghouse. The NSC sends emails whenever these items are updated. It is the responsibility of the Registrar to review and resolve any errors in a timely manner. Emails from NSC and screenshot of NSLDS reporting dashboard to be retained (data integrity, fourth check). The enrollment data is then submitted to the NSLDS. After NSLDS reviews the data, any errors will be reported back through the NSC in the same manner as NSC errors. The resolution of these errors is of special importance and will be given top priority. The NSC sends emails whenever these items are updated. It is the responsibility of the registrar to review and resolve any errors in a timely manner. Emails from NSC and any error documentation to be retained. (data integrity, fifth check). These policies and procedures were implemented in February 2025.

West Virginia University (WVU) response

WVU's Registrar's office reviews rejected records and takes appropriate action to clear the rejections. Many of these rejections require additional information from students, therefore resolution is based on student discretion in providing documentation. Effective February 2024, WVU ensured that documentation of



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

the submission record count and rejection follow up was maintained in enrollment reporting records.

West Virginia University at Parkersburg (WVUP) response

Effective July 1, 2024, WVUP reconciles the record count of enrollment records processed by taking the following actions:

1. Highlighting the record count at the end of the Banner-generated enrollment report file as part of the spot-checking review process.
2. Screenshot the total records on the text file.
3. Screenshot the total records on the .lis file.
4. Screenshot the total number of files received by NSC once it has been acknowledged that the file has been received and processed.
5. Retaining documentation to show that if for some reason the file count does not match, research was done to locate the reason for the discrepancy, and the discrepancy was either resolved or unable to be documented why it could not be resolved.

Effective July 1, 2024, WVUP started maintaining copies of all NSC automated emails used as a quality checklist which includes enrollment report due dates, receipt of the text file by the NSC, completion of the Error Resolution Report, and confirmation of certification and processing by the NSC.

Glenville State University (GSU) response

Effective November 2024, the GSU Financial Aid Office, in conjunction with the GSU Registrar's Office, has implemented policies and procedures for Enrollment Reporting to the National Student Loan Data System (NSLDS) via the National Student Clearinghouse (NSC). The Financial Aid Director runs a process in Banner to pull an enrollment report every 45-60 days. Before sending the file to the NSC, the Registrar's Office reviews it, comparing record counts between the file and Banner. The Registrar then notifies the Financial Aid Director, who uploads the file to the NSC for review. If there are any errors that need to be corrected, the Financial Aid Director makes these corrections in collaboration with the Registrar, then sends the file back for processing again within the allotted timeframe. Once the NSC has confirmed that the file has been processed successfully, the Registrar spot checks 15-20 records for accuracy. All email communication between the NSC, the Registrar, and the Financial Aid Director is kept on file in the Financial Aid Office shared drive.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

West Virginia School of Osteopathic Medicine (WVSOM) response

Effective January 2025, WVSOM's Registrar implemented a submittal process that uploads spreadsheets to update enrollments. On or around the 1st of every other month, the Registrar will save current rosters with the latest enrollment data to the auditor folder. NSLDS enrollment rosters from banner will be checked for necessary updates. The Registrar will process the NSLDS update calculations worksheet in the auditor folder which shows calculations for submittals and other details. The Registrar will check numbers from spreadsheet submittal versus roster totals and ensure all information is current, including student statuses (enrolled, graduated, withdrawn) and academic term details.

The Registrar will run advanced search in NSLDS to check for any outliers that may need processed and ensure corrections are made promptly, and the corrected data is re-submitted to the NSLDS within the same review cycle.

**2023-027 MAINTENANCE OF EFFORT
Department of Education (DOE)
Assistance Listing Number COVID-19 84.425U
Resolved**

Corrective action taken for FY 2024.

**2023-028 TRANSPARENCY ACT REPORTING
2022-025 Department of Education (DOE)
Assistance Listing Number COVID-19 84.425C, COVID-19 84.425D
Partially Resolved**

The WVDE will ensure that all non-LEA signed grant awards are submitted to Internal Operations in a timely manner for FFATA reporting purposes. Internal Operations will ensure that all reports pertaining to FFATA are submitted in the allotted time frame in compliance with the federal reporting requirements and will be effective as of February 2025. See current year finding 2024-017.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

- 2023-029 REPORTING**
Department of Education (DOE)
Assistance Listing Number COVID-19 84.425D, 84.425R 84.425U, 84.425V
Partially Resolved
- The WVDE will ensure that all existing policies and procedures are followed and that all reports pertaining to Elementary and Secondary School Emergency Relief (ESSER) Fund reporting submission will be reviewed and approved by the appropriate responsible parties prior to final submission. This review and approval process will ensure that all amounts are reported accurately to the best of knowledge by the reporting team and subsequent supervisor(s). The WVDE will also update the specific variance identified in the finding once the ESSER reporting for Emergency Assistance to Nonpublic Schools reopens later this year. These processes will be effective February 2025. See current year finding 2024-018.
- 2023-030 ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE COSTS/COST PRINCIPLES**
Department of Education (DOE)
Assistance Listing Number COVID-19 84.425D, 84.425U
Resolved
- Corrective action taken for FY 2024.
- 2023-031 INTERNAL CONTROLS OVER ALLOWABLE COSTS AND COST PRINCIPLES**
West Virginia State University (WVSU)
Assistance Listing Number COVID-19 84.425J
Resolved
- Corrective action taken for FY 2024.
- 2023-032 ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE COSTS/COST PRINCIPLES**
West Liberty University (WLU)
Assistance Listing Number COVID-19 84.425F
Resolved
- Corrective action taken for FY 2024.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

2023-033 CASH MANAGEMENT
Bluefield State University and West Virginia State University
Assistance Listing Number 84.425E, F, J
Resolved

Corrective action taken for FY 2024.

2023-034 SUBRECIPIENT CASH MANAGEMENT
Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.323, COVID-19 93.323
Partially Resolved

The West Virginia Department of Health has analyzed the conditions that led to this finding and determined that due to human error, there were invoices processed for subrecipient grants prior to receipt of the required expenditure reports which would have allowed staff to verify that the grantee is under the 10% threshold prior to authorizing payment. In February 2024, the Bureau for Public Health implemented the Subrecipient Grant Expenditure Checklist, Subrecipient Grant Invoice Checklist, and Invoice and expenditure tracking sheet completion requirements that alert staff of the percentage a grantee is holding once invoice and expenditure report data is input. Staff responsible for reviewing subrecipient expenditure reports and processing invoices will continue mandatory retraining and at the start of employment for new staff members and require the staff member to certify that the reviews are completed. See current year finding 2024-034.

2023-035 INTERNAL CONTROLS OVER SPECIAL TESTS AND PROVISIONS –
2022-027 CHILD SUPPORT NON-COOPERATION, PENALTY FOR REFUSAL
TO WORK, AND ADULT CUSTODIAL PARENT OF CHILD UNDER
SIX WHEN CHILD CARE NOT AVAILABLE
Department of Health & Human Resources (DHHR)
Assistance Listing Number 93.558, COVID-19 93.558
Partially Resolved

Effective May 1, 2025, WV WORKS Policy Unit staff will work with county office management to ensure that all staff are completing the required training on Sanctions. WV WORKS workers will be required to take a blackboard course on Case Comments to be opened on April 1, 2025, and available through April 30, 2025. The course will stress the importance of properly documenting the reason for sanction. A tracking form will be developed by the Division of Professional Development to track the completion of the blackboard courses.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

Additionally, the Bureau is exploring peer review for case workers and supervisor review of case workers with less than two years of tenure to enforce proper documentation. The Bureau is also exploring adding additional Rushmore Peer and Supervisor Reviews for all case workers with less than two years of tenure to enforce the proper application and documentation of all sanctions. See current year finding 2024-019.

2023-036 SPECIAL TESTS AND PROVISIONS – PENALTY FOR REFUSAL TO WORK

**Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.558, COVID-19 93.558
Partially Resolved**

Effective May 1, 2025, the Bureau of Family Assistance will develop a task team to review case parameters to ensure the accuracy of the data provided before the cases are pulled for sample. After the cases are pulled, a selection of cases will be reviewed for accuracy. See current year finding 2024-020.

**2023-037 SPECIAL TESTS AND PROVISIONS – INCOME ELIGIBILITY AND
2022-028 VERIFICATION SYSTEM**

**Department of Health & Human Resources (DHHR)
Assistance Listing Number 93.558, COVID-19 93.558
Partially Resolved**

Effective April 1, 2025, WV WORKS workers will be required to take a blackboard course on Case Comments. The course will stress the importance of properly documenting all IEVS matches. Additionally, an exercise regarding IEVS case comments has been added to the third week of WV WORKS training. The Bureau is also exploring adding additional Rushmore Peer and Supervisor Reviews for all case workers with less than 2 years of tenure to enforce the proper documentation of all IEVS matches. See current year finding 2024-021.

**2023-038 SUBRECIPIENT MONITORING
Department of Education (DOE)
Assistance Listing Number 93.558, COVID-19 93.558
Partially Resolved**

See current year finding 2024-005.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

2023-039 **ELIGIBILITY**
Department of Health & Human Resources (DHHR)
Assistance Listing Number 93.558, COVID-19 93.558
Resolved

Corrective action taken for FY 2024.

2023-040 **SPECIAL TESTS AND PROVISIONS – PENALTY FOR FAILURE TO COMPLY WITH WORK VERIFICATION PLAN**
Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.558
Partially Resolved

Effective April 1, 2025, WV WORKS workers will be required to take a blackboard course on Case Comments. The course will stress the importance of properly documenting participation hours. The WV WORKS Policy Unit is developing desk guides on the proper documentation of participation hours, components and supportive payments. See current year finding 2024-023.

2023-041 **TRANSPARENCY ACT REPORTING**
2022-029 **Department of Health and Human Resources (DHHR)**
Assistance Listing Number 93.558, COVID-19 93.558, 93.568, COVID-19 93.568
Partially Resolved

See current year finding 2024-027.

2023-042 **SPECIAL TESTS AND PROVISIONS - PROVIDER ELIGIBILITY FOR ARP ACT STABILIZATION FUNDS**
2022-026 **Department of Health & Human Resources (DHHR)**
Assistance Listing Number 93.489, 93.575, 93.596, COVID-19 93.575
Partially Resolved

The ARP Stabilization Grant Program was a temporary funding allocation given to states during the Covid-19 pandemic. All funds were required to be expended by September 30, 2023. This program no longer exists. Should such a funding opportunity arise in the future, the Division of Early Care and Education will establish procedures to ensure that providers who indicate a desire to receive WV Child Care Stabilization payments are thoroughly screened for eligibility through the implementation of an online data system designed to ensure all eligibility requirements are met and documented prior to awarding funding. See current year finding 2024-024.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

- 2023-043 TRANSPARENCY ACT REPORTING**
Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.489, 93.575, 93.596, COVID-19 93.575
Resolved
- Corrective action taken for FY 2024.
- 2023-044 ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE**
COSTS/COST PRINCIPLES AND ELIGIBILITY
Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.489, 93.575, 93.596, COVID-19 93.575
Resolved
- Corrective action taken for FY 2024.
- 2023-045 SPECIAL TESTS AND PROVISIONS – FRAUD DETECTION AND**
REPAYMENT
West Virginia Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.575, 93.596, COVID-19 93.575
Resolved
- Corrective action taken for FY 2024.
- 2023-046 ELIGIBILITY**
West Virginia Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.568, COVID-19 93.568
Resolved
- Corrective action taken for FY 2024.
- 2023-047 SUBRECIPIENT MONITORING**
West Virginia Community Advancement and Development (WV CAD)
Assistance Listing Number 93.568, COVID-19 93.568
Resolved
- Corrective action taken for FY 2024.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

**2023-048 ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE
COSTS/COST PRINCIPLES AND SPECIAL TESTS AND PROVISIONS
– PAYMENT RATE SETTING AND APPLICATION
Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.658
Resolved**

Corrective action taken for FY 2024.

**2023-049 ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE
COSTS/COST PRINCIPLES AND ELIGIBILITY
Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.658
Partially Resolved**

Out of state facilities will be required upon request, or at a minimum annually, to submit a list containing details of the date of hire and date of fingerprinting for criminal clearance as well as information demonstrating child and adult protective services maltreatment checks were completed for each employee. If the agency refuses to submit the required information, they will be deemed ineligible for Title IV-E reimbursement and documented in Comprehensive Child Welfare Information System as such.

For out of state facilities with which the Bureau of Social Services has a contract or child specific agreement, an addendum will be included requiring hire dates cannot precede the date of fingerprinting for criminal clearance nor the date the results are received.

Specialists from the out of state review team within the Division of Regulatory Management will complete a report, containing any findings, that will be uploaded to the PATH provider file, as well as the internal provider record that is maintained within the Division of Regulatory Management. This will be required annually as part of the out-of-state facility licensing review. Out of State Contracts or Child Specific Agreements are renewed at the beginning of the state fiscal year July 2025 and continued annually.

Specialists from the out of state review team within the Division of Regulatory Management as part of their annual licensing review will ensure wvPATH provider records are updated to reflect timely licensing status as well as ensuring that child specific agreements do not lapse.

wvPATH did a code fix/system change on September 19, 2024, to allow the



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

“Psychiatric Residential Treatment Facility” providers to have their Title IV-E reimbursable status set to no. See current year finding 2024-025.

2023-050 INTERNAL CONTROLS OVER ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE COSTS/COST PRINCIPLES, SPECIAL TEST AND PROVISIONS – PROVIDER ENROLLMENT & SPECIAL TEST AND PROVISIONS: PROVIDER HEALTH AND SAFETY STANDARDS (MEDICAID ONLY)
Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.775, 93.777, COVID-19 93.777, 93.778
Resolved

Corrective action taken for FY 2024.

2023-051 SPECIAL TESTS AND PROVISIONS – ADP RISK ANALYSIS & SYSTEM SECURITY REVIEW
Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.775, 93.777, COVID-19 93.777, 93.778, ARRA 93.778
Resolved

Corrective action taken for FY 2024.

2023-052 SUBRECIPIENT CASH MANAGEMENT
Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.788
Resolved

Corrective action taken for FY 2024.

2023-053 ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE COSTS/COST PRINCIPLES AND ELIGIBILITY
Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.659
Resolved

Corrective action taken for FY 2024.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

**2023-054 INTERNAL CONTROLS OVER TRANSPARENCY ACT REPORTING
Division of Emergency Management (DEM)
Assistance Listing Number 97.036, COVID-19 97.036
Resolved**

Corrective action taken for FY 2024.

**2023-055 SUBRECIPIENT MONITORING
School Building Authority (SBA)
Assistance Listing Number 97.036, COVID-19 97.036
Resolved**

Corrective action taken for FY 2024.

**2023-056 INTERNAL CONTROLS OVER ACTIVITIES ALLOWED OR
UNALLOWED AND ALLOWABLE COSTS/COST PRINCIPLES
West Virginia Military Authority (the Authority)
Assistance Listing Number 97.036, COVID-19 97.036
Partially Resolved**

MA purchased a new timekeeping system called ARRO for all state-active duty (SAD) operations. MA began using this new system on the 10/9/2024 – 11/1/2024 pay period and it will be used for all SAD operations going forward. ARRO provides record of certifications of time worked by West Virginia National Guard members to ensure that the members' time is accurately reported and entered into the Oasis payroll system at the correct pay rates and amounts. The State Active-Duty Payroll Procedures in the new ARRO system are detailed below.

1. Due to the nature of missions and various locations, SAD soldiers and airmen do not have access to UKG, the state timekeeping system or paper timesheets. Soldiers and Airmen are paid on a daily basis. The MA has two ways to validate days worked and rates of pay.
 - a. SAD orders are generated for all service members participating in any SAD domestic operation. These are created in ARRO, the new timekeeping system and loaded into the individual service member system of record Army (IPERMS) and Air. The soldiers and airmen's rate of pay are maintained by the G1 (Army) and A1 (Air) offices and flow into the ARRO system based on rank and years of service.



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

- b. The second certification is through a daily personnel status accountability report (Submitted in ARRO). At the conclusion of the pay period, the unit or Joint Task Force completes their pay certification, and the J1 will then certify and review the payroll, allowing the pay to move to MA Human Resource Department for download and submission into OASIS. See current year finding 2024-030.

**2023-057 ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE
COSTS/COST PRINCIPLES
Department of Health and Human Resources (DHHR)
Assistance Listing Number 97.036, COVID-19 97.036
Resolved**

Corrective action taken for FY 2024.

**2023-058 EQUIPMENT AND REAL PROPERTY MANAGEMENT
Department of Health and Human Resources (DHHR)
Assistance Listing Number 93.323, COVID-19 93.323
Partially Resolved**

The Office of Shared Administration Operations submitted the Asset management Certification as required by Policy that a physical inventory was completed as of June 2024 and that all assets under the Department head's jurisdiction as of June 30, 2024, with an acquisition cost of \$1,000 or more, computer equipment with an acquisition cost of \$500 or more, all weapons, and vehicles that are leased for one year or more regardless of acquisition cost, were entered into wvOASIS Fixed Asset Module for the current fiscal year and that all shell manual documents are final. The Certification further certifies that all obsolete assets under the Department head's jurisdiction were retired in accordance with Surplus Property policy, procedures and guidelines.

At this time, the Agency is unable to query a report of fixed assets using the CFDA number 93.323 as the CFDA number is not part of the chart of account elements used in the tracking of Fixed Asset in wvOASIS. Instead, the OSA utilized a report to obtain grant expenditures made on all programs tied to this specific CFDA. The report was then used to manually identify the fixed assets currently active in wvOASIS based on the expenditures referencing those programs and specific fixed asset reportable items over \$1,000 or computer equipment as required by WV Surplus Property.



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2024

Management believes that fixed assets for FY2024 are accounted for as certified by the annual certification. To report fixed assets more efficiently, management will update all identified Epidemiology fixed assets in the wvOASIS system with the chart of account elements necessary to report fixed assets that will reference back to the CFDA for reconciliation to expenditure reporting. This will require a request to the wvOASIS reporting team to add the program period chart of account element to the WV-FIN-AM-017 Assets by Department report in wvOASIS Business Intelligence. Management will also require that all future fixed assets recorded in wvOASIS will include the full fund accounting and detail accounting chart of accounts including program and program periods for future fiscal year reporting of fixed assets and reconciliation to expenditures. If the program period can't be added, OSA will work with the wvOASIS team to determine another method. See current year finding 2024-032.