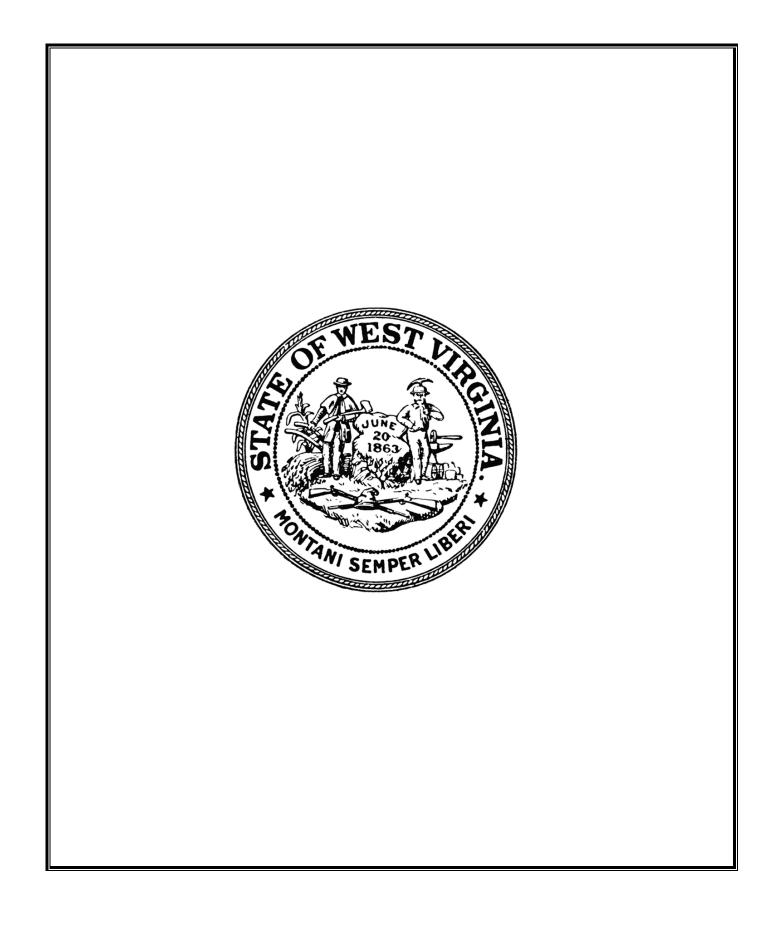


STATE OF WEST VIRGINIA SINGLE AUDIT

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AUDITORS' REPORTS



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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 and the standards applicable to financial audits contained in Government Auditing Standards issued by the Comptroller General of the United States, 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, 2019, and the related notes to the financial statements, which collectively comprise the State of West Virginia's basic financial statements, and have issued our report thereon dated December 20, 2019. 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, the West Virginia Housing Development Fund and the following discretely presented component units of the Higher Education Fund discretely presented component unit: Big Green Scholarship Foundation, Inc.; Blue Ridge Community & Technical College Foundation, Inc.; Bluefield State College Foundation, Inc.; Bluefield State College Research and Development Corporation; Concord University Foundation, Inc.; Fairmont State Foundation, Inc.; The Glenville State College Foundation, Inc.; The Marshall University Foundation, Inc.; Provident - Marshall Properties, LLC; New River Community and Technical College Foundation, Inc.; The Shepherd University Foundation, Inc.; 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.; The West Virginia State University Foundation, Inc.; and WVU at Parkersburg Foundation, Inc. were audited by other auditors and were not performed in accordance with Government Auditing Standards.

Internal Control Over Financial Reporting

In planning and performing our audit of the financial statements, we considered the State of West Virginia's internal control over financial reporting (internal control) to determine the audit procedures that are appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the 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.

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 may exist that have not been identified.

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 determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance 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 20, 2019



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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 Jim Justice, Governor of the State of West Virginia

Report on Compliance for Each Major Federal Program

We have audited the State of West Virginia's compliance with the types of compliance requirements described 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, 2019. 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.

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 West Virginia State University Research and Development Corporation, Marshall University Research Corporation, and West Virginia Drinking Water Treatment Revolving Loan Fund which expended \$330,504,732 collectively, in federal awards which are not included in the State of West Virginia's schedule of expenditures of federal awards during the year ended June 30, 2019. Our audit, described below, did 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 in accordance with 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).

Management's Responsibility

Management is responsible for compliance with federal statutes, regulations and the terms and conditions of its federal awards applicable to its federal programs.

Auditor's Responsibility

Our responsibility is to express an opinion on compliance for each of the State of West Virginia's major federal programs based on our audit of the types of compliance requirements referred to above. We conducted our audit of compliance in accordance with auditing standards generally accepted in the United States; the standards applicable to financial audits contained in *Government Auditing Standards*, issued by the Comptroller General of the United States; 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). Those standards and the Uniform Guidance require that we plan and perform the audit to obtain reasonable assurance about whether noncompliance with the types of compliance requirements referred to above that could have a direct and material effect on a major federal program occurred. An audit includes examining, on a test basis, evidence about the State of West Virginia's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances.

We believe that our audit provides a reasonable basis for our adverse, qualified, and unmodified opinions on compliance for major federal programs. However, our audit does not provide a legal determination of the State of West Virginia's compliance.



Basis for Adverse Opinion on Unemployment Insurance (UI), Disaster Grants – Public Assistance (Presidentially Declared Disasters), and Emergency Management Performance Grants

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

Finding Number	CFDA Number	Program or Cluster Name	Compliance Requirement	
2019–006	17.225	Unemployment Insurance (UI)	Eligibility	
2019–007	17.225	Unemployment Insurance (UI)	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, and Eligibility	
2019–008	17.225	Unemployment Insurance (UI)	Reporting	
2019–009	17.225	Unemployment Insurance (UI)	Special Tests and Provisions – Match with IRS 940 FUTA Tax Form	
2019–010	17.225	Unemployment Insurance (UI)	Special Tests and Provisions –UI Program Integrity - Overpayments	
2019-038	97.036	Disaster Grants – Public Assistance (Presidentially Declared Disasters)	Reporting	
2019-040	97.036	Disaster Grants – Public Assistance (Presidentially Declared Disasters)	Subrecipient Monitoring	
2019–041	97.042	Emergency Management Performance Grants	Cash Management	
2019–042	97.042	Emergency Management Performance Grants	Matching, Level of Effort and Earmarking	
2019–043	97.042	Emergency Management Performance Grants	Period of Performance	
2019–044	97.042	Emergency Management Performance Grants	Reporting	
2019–045	97.042	Emergency Management Performance Grants	Reporting	
2019–046	97.042	Emergency Management Performance Grants	Special Tests and Provisions – Training Exercise Plan Requirement	
2019–047	97.042	Emergency Management Performance Grants	Special Tests and Provisions – Closeout Reporting	

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



Adverse Opinion on Unemployment Insurance (UI), Disaster Grants – Public Assistance (Presidentially Declared Disasters), and Emergency Management Performance Grants

In our opinion, because of the significance of the matters discussed in the Basis for Adverse Opinion paragraph, the State of West Virginia did not comply, in all material respects, with the types of compliance requirements referred to above that could have a direct and material effect on Unemployment Insurance (UI), Disaster Grants – Public Assistance (Presidentially Declared Disasters), and Emergency Management Performance Grants for the year ended June 30, 2019.

Basis for Qualified Opinion on Highway Planning and Construction Cluster; Student Financial Assistance (SFA) Cluster; Low-Income Home Energy Assistance; Adoption Assistance; Children's Health Insurance Program (CHIP); Medicaid Cluster; and State Targeted Response to the Opioid Crisis

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

Finding Number	CFDA Number	Program or Cluster Name	Compliance Requirement	
2019–011	20.205/20.219/ 20.224/23.003	Highway Planning and Construction Cluster	Period of Performance	
2019-013	20.205/20.219/ 20.224/23.003	Highway Planning and Construction Cluster	Special Tests and Provisions – Utilities	
2019-014	20.205/20.219/ 20.224/23.003	Highway Planning and Construction Cluster	Special Tests and Provisions – Administration of Engineering and Design-Related Service Contracts	
2019-016	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and Provisions - Verification	
2019-018	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and Provisions - Return of Title IV Funds	
2019-019	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and Provisions – Enrollment Reporting	
2019-028	93.568	Low-Income Home Energy Assistance	Eligibility	
2019-029	93.568	Low-Income Home Energy Assistance	Reporting	
2019-031	93.659	Adoption Assistance	Eligibility	



Finding Number	CFDA Number	Program or Cluster Name	Compliance Requirement
2019-034	93.767/93.775/ 93.777/93.778 & ARRA-93.778	Children's Health Insurance Program (CHIP); Medicaid Cluster;	Eligibility
2019-035	93.788	State Targeted Response to the Opioid Crisis	Matching, Level of Effort and Earmarking

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

Qualified Opinion on Highways Planning and Construction Cluster; Student Financial Assistance (SFA) Cluster; Low-Income Home Energy Assistance; Adoption Assistance; Children's Health Insurance Program (CHIP); Medicaid Cluster; and State Targeted Response to the Opioid Crisis

In our opinion, except for the noncompliance described in the Basis for Qualified Opinion paragraph, 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 Highways Planning and Construction Cluster; Student Financial Assistance (SFA) Cluster; Low-Income Home Energy Assistance; Adoption Assistance; Children's Health Insurance Program (CHIP); Medicaid Cluster; and State Targeted Response to the Opioid Crisis for the year ended June 30, 2019.

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 types of 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, 2019.

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 described and listed below:

Finding Number	CFDA Number	Program or Cluster Name	Compliance Requirement	
2019-001	10.557	Special Supplemental Nutrition Program for Women, Infants and Children (WIC)	Period of Performance	
2019-002	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Matching, Level of Effort and Earmarking	
2019-003	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Period of Performance	
2019-012	20.205/20.219/ 20.224/23.003	Highway Planning and Construction Cluster	Special Tests and Provisions - Wage Rate Requirements	
2019-017	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and Provisions – Disbursements to or on Behalf of Students	



Finding Number	CFDA Number	Program or Cluster Name	Compliance Requirement	
2019-020	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and provisions – Borrower Data Transmission and Reconciliation	
2019–022	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and Provisions – Gramm-Leach-Bliley Act – Student Information Security	
2019-023	84.027/84.137	Special Education Cluster (IDEA)	Period of Performance	
2019-024	93.558	Temporary Assistance for Needy Families (TANF) Cluster	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, and Eligibility	
2019-026	93.558	Temporary Assistance for Needy Families (TANF) Cluster	Special Tests and Provisions – Penalty for Refusal to Work	
2019-037	93.788	State Targeted Response to the Opioid Crisis	Special Tests and Provisions – Key Personnel	

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

The State of West Virginia's responses to the noncompliance findings identified in our audit are described in the accompanying schedule of findings and questioned costs. The State of West Virginia's response was not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the responses.

We performed audit procedures with respect to the Student Financial Assistance Cluster major federal program related to compliance requirements in Special Test and Provision N 9, Gramm-Leach-Bliley Act-Student Information Security as outlined in the OMB Compliance Supplement for the year ended June 30, 2019. We determined whether the State of West Virginia has designated an individual to coordinate the information security program. We determined whether the State of West Virginia performed a risk assessment that addresses the three required areas noted in 16 CFR 314.4 (b) and whether the State of West Virginia documented a safeguard for each risk identified from the three required to be risk assessed by 16 CFR 314.4 (b). Our audit procedures did not evaluate whether the designated individual who coordinated the information security program is competent to oversee the program nor whether the individual possessed the adequate authority to carry out those duties. Our audit procedures also did not determine whether the risk assessment sufficiently addressed the required areas, whether the risks identified are the appropriate risks or that the identified risks appear to be a complete list. Further, our audit procedures did not determine whether the documented safeguards have been put in place or that they will effectively mitigate, reduce or even address the identified risks. Our opinion on the Student Financial Assistance Cluster major federal program is not modified with respect to this matter.

As indicated in Section I of the accompanying Schedule of Findings and Questioned Costs, we have audited the Medicaid Cluster and the Children's Health Insurance Program (CHIP) each as a major federal program. Also, as indicated in the first paragraph of this report, we conducted our audit of compliance using the compliance requirements contained in the OMB Compliance Supplement, including those contained in Section E "Eligibility". In the 2019 OMB Compliance Supplement, this section includes eligibility determinations based on Modified



Adjusted Gross Income (MAGI- based eligibility determination) for the Medicaid Cluster and CHIP. Section E for the Medicaid Cluster states that "auditors should re-determine eligibility to ensure beneficiaries qualify for the Medicaid program and are in the appropriate enrolment category". Our procedures related to MAGI based eligibility determinations for the Medicaid Cluster and CHIP were limited to testing the State of West Virginia's compliance with their Modified Adjusted Gross Income (MAGI) eligibility verification plan for Medicaid & CHIP.

Report on Internal Control Over Compliance

Management of the State of West Virginia is responsible for establishing and maintaining effective internal control over compliance with the types of compliance requirements referred to above. In planning and performing our audit of compliance, we considered the State of West Virginia's internal control over compliance with the types of requirements that could have a direct and material effect on each major federal program to determine the auditing procedures that are appropriate in the circumstances for the purpose of expressing an opinion on compliance for each major program 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 internal control over compliance. Accordingly, we do not express an opinion on the effectiveness of the State of West Virginia's internal control over compliance.

Our consideration of internal control over compliance was for the limited purpose described in the preceding paragraph and was not designed to identify all deficiencies in internal control over compliance that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that have not been 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 deficiencies in internal control over compliance described in the accompanying schedule of findings and questioned costs and as listed below to be material weaknesses.

Finding Number	CFDA Number	Program or Cluster Name	Compliance Requirement
2019–005	14.228	Community Development Block Grants/State's Program and Non-Entitlement Grants in Hawaii	Reporting
2019–006	17.225	Unemployment Insurance (UI)	Eligibility
2019–007	17.225	Unemployment Insurance (UI)	Activities Allowed or Unallowed/Allowable Costs/Cost Principles/Eligibility
2019–008	17.225	Unemployment Insurance (UI)	Reporting
2019–009	17.225	Unemployment Insurance (UI)	Special Tests and Provisions – Match with IRS 940 FUTA Tax Form
2019–011	20.205/20.219/ 20.224/23.003	Highways Planning and Construction Cluster	Period of Performance
2019–013	20.205/20.219/ 20.224/23.003	Highways Planning and Construction Cluster	Special Tests and Provisions – Utilities



Finding Number	CFDA Number	Program or Cluster Name	Compliance Requirement
2019–014	20.205/20.219/ 20.224/23.003	Highways Planning and Construction Cluster	Special Tests and Provisions – Administration of Engineering and Design – Related Service Contracts
2019–016	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and Provisions - Verification
2019–018	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and Provisions – Return of Title IV Funds
2019–019	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and Provisions – Enrollment Reporting
2019–021	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and Provisions – Program Eligibility
2019–022	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and Provisions – Gramm-Leach-Bliley Act – Student Information Security
2019–025	93.558	Temporary Assistance for Needy Families (TANF) Cluster	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
2019–027	93.558/93.568/ 93.575/93.596/ 93.658/93.659/ 93.767/93.775/ 93.777/93.778 & ARRA-93.778	Temporary Assistance for Needy Families (TANF) Cluster, Low-Income Home Energy Assistance, Child Care and Development Fund (CCDF) Cluster, Foster Care—Title IV-E, Adoption Assistance, Children's Health Insurance Program (CHIP), Medicaid Cluster	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility; Level of Effort, Special Tests and Provisions – Operation of a Foster Care Demonstration Project, Special Tests and Provisions – Payment Rate Setting and Application



Finding Number	CFDA Number	Program or Cluster Name	Compliance Requirement	
2019–028	93.568	Low-Income Home Energy Assistance	Eligibility	
2019–029	93.568	Low-Income Home Energy Assistance	Reporting	
2019–030	93.575/93.596	Child Care and Development Fund (CCDF) Cluster	Special Tests and Provisions – Fraud Detection and Repayment	
2019–031	93.659	Adoption Assistance	Eligibility	
2019–032	93.775/93.777/ 93.778 & ARRA-93.778	Medicaid Cluster	Special Tests and Provisions – Utilization Control and Program Integrity	
2019–033	93.775/93.777/ 93.778 & ARRA-93.778	Medicaid Cluster	Special Tests and Provisions – Medicaid Fraud Control Unit	
2019–034	93.767/93.775/ 93.777/93.778 & ARRA-93.778	Children's Health Insurance Program (CHIP), Medicaid Cluster	Eligibility	
2019–035	93.788	State Targeted Response to the Opioid Crisis	Matching, Level of Effort and Earmarking	
2019–038	97.036	Disaster Grants – Public Assistance (Presidentially Declared Disasters)	Reporting	
2019–041	97.042	Emergency Management Performance Grant	Cash Management	
2019–042	97.042	Emergency Management Performance Grant	Matching, Level of Effort and Earmarking	
2019–043	97.042	Emergency Management Performance Grant	Period of Performance	
2019-044	97.042	Emergency Management Performance Grant	Reporting	
2019–045	97.042	Emergency Management Performance Grant	Reporting	
2019–046	97.042	Emergency Management Performance Grant	Special Tests and Provisions – Training Exercise Plan Requirement	
2019–047	97.042	Emergency Management Performance Grant	Special Tests and Provisions – Closeout Reporting	

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, yet important enough to merit attention by those charged with governance. We consider the deficiencies in internal control over compliance described in the accompanying schedule of findings and questioned costs and as listed below to be significant deficiencies.

Finding Number	CFDA Number	Program or Cluster Name	Compliance Requirement
2019–001	10.557	Special Supplemental Nutrition Program for Women, Infants and Children (WIC)	Period of Performance
2019–002	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Matching, Level of Effort and Earmarking



Finding Number	CFDA Number	Program or Cluster Name	Compliance Requirement	
2019–003	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Period of Performance	
2019–004	12.401	National Guard Military Operations and Maintenance (O&M) Projects	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, and Period of Performance	
2019–010	17.225	Unemployment Insurance (UI)	Special Tests and Provisions – UI Program Integrity – Overpayments	
2019–012	20.205/20.219/ 20.224/23.003	Highways Planning and Construction Cluster	Special Tests and Provisions – Wage Rate Requirements	
2019–015	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Reporting	
2019–017	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and Provisions – Disbursements to or on Behalf of Students	
2019–020	84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	Student Financial Assistance (SFA) Cluster	Special Tests and Provisions – Borrower Data Transmission and Reconciliation	
2019–023	84.027/84.137	Special Education Cluster (IDEA)	Period of Performance	
2019–036	93.788	State Targeted Response to the Opioid Crisis	Subrecipient Monitoring	
2019–037	93.788	State Targeted Response to the Opioid Crisis	Special Tests and Provisions – Key Personnel	
2019–039	97.036	Disaster Grants – Public Assistance (Presidentially Declared Disasters)	Reporting	
2019–040	97.036	Disaster Grants – Public Assistance (Presidentially Declared Disasters)	Subrecipient Monitoring	

The State of West Virginia's responses to the internal control over compliance findings identified in our audit are described in the accompanying schedule of findings and questioned costs. The State of West Virginia's responses were not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the responses.



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 State of West Virginia as of and for the year ended June 30, 2019, and have issued our report thereon dated December 21, 2019, which contained an unmodified opinion on those financial statements. Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. 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 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 financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States. In our opinion, the schedule of expenditure of federal awards is fairly stated in all material respects in relation to the financial statements as a whole.

Ernst + Young LLP

January 31, 2020

SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

FEDERAL CFDA / GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	STATE OF WEST VIRGINIA EXPENDITURES	TOTAL SUBRECIPENT EXPENDITURES	TOTAL FEDERAL EXPENDITURES
DEPARTMENT OF AGRICU	<u>LTURE</u>			
10.001	AGRICULTURAL RESEARCH BASIC AND APPLIED RESEARCH	\$11,862	\$0	\$11,862
10.025	PLANT AND ANIMAL DISEASE, PEST CONTROL, AND ANIMAL CARE	\$714,797	\$0	\$714,797
10.069	CONSERVATION RESERVE PROGRAM	\$15,976	\$0	\$15,976
10.072	WETLANDS RESERVE PROGRAM	\$5,552	\$0	\$5,552
10.170	SPECIALTY CROP BLOCK GRANT PROGRAM - FARM BILL	\$106,293	\$116,146	\$222,439
10.174	ACER ACCESS DEVELOPMENT PROGRAM TRADE MITIGATION PROGRAM ELIGIBLE RECIPENT AGENCY OPERATIONAL	\$8,308	\$15,477	\$23,785
10.178	FUNDS	\$0	\$26,538	\$26,538
10.202***	COOPERATIVE FORESTRY RESEARCH PAYMENTS TO AGRICULTURAL EXPERIMENT STATIONS UNDER THE HATCH	\$554,924	\$0	\$554,924
10.203***	ACT	\$3,001,888	\$0	\$3,001,888
10.207***	ANIMAL HEALTH AND DISEASE RESEARCH	\$25,061	\$0	\$25,061
10.217	HIGHER EDUCATION CHALLENGE GRANTS	\$17,397	\$6,664	\$24,061
10.303	INTEGRATED PROGRAMS	\$18,412	\$25,318	\$43,730
10.304	HOMELAND SECURTIY AGRICULTURE	\$37,736	\$0	\$37,736
10.310	AGRICULTURE AND FOOD RESEARCH INITIATIVE (AFRI) NATIONAL FOOD SAFETY	\$106,033	\$0	\$106,033
10.328	TRAINING,EDUCATION,EXTENSION,OUTREACH,AND TECHNICAL ASSISTANCE COMPETITIVE GRANTS PROGRAM	\$11,558	\$0	\$11,558
*****	CROP PROTECTION AND PEST MANAGEMENT COMPETITIVE GRANTS	Ţ,= 00	40	Ţ,300
10.329	PROGRAM	\$25,510	\$10,691	\$36,201
10.351	RURAL BUSINESS DEVELOPMENT GRANT	\$31	\$0	\$31
	COOPERATIVE AGREEMENTS WITH STATES FOR INTRASTATE MEAT AND			
10.475	POULTRY INSPECTION	\$883,192	\$0	\$883,192
10.479	FOOD SAFETY COOPERATIVE AGREEMENTS	\$216,877	\$0	\$216,877
10.500	COOPERATIVE EXTENSION SERVICE	\$3,404,444	\$36,975	\$3,441,419
10.535	SNAP FRAUD FRAMEWORK IMPLEMENTATION GRANT WIC SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN,	\$244,220	\$0	\$244,220
10.557	INFANTS, AND CHILDREN	\$20,544,523	\$11,222,899	\$31,767,422
10.558	CHILD AND ADULT CARE FOOD PROGRAM	\$91,697	\$18,186,032	\$18,277,729
10.560	STATE ADMINISTRATIVE EXPENSES FOR CHILD NUTRITION	\$3,491,061	\$0	\$3,491,061
10.572	WIC FARMERS' MARKET NUTRITION PROGRAM (FMNP)	\$51,496	\$0	\$51,496
10.574	TEAM NUTRITION GRANTS	\$0	(\$3,928)	(\$3,928)
10.575	FARM TO SCHOOL GRANT PROGRAM	\$4,837	\$0	\$4,837
10.576	SENIOR FARMERS MARKET NUTRITION PROGRAM	\$421,671	\$0	\$421,671
10.578	WIC GRANTS TO STATES (WGS)	\$384,560	\$0	\$384,560
10.579	CHILD NUTRITION DISCRETIONARY GRANTS LIMITED AVAILABILITY	\$0	\$173,521	\$173,521
10.582	FRESH FRUIT AND VEGETABLE PROGRAM	\$0	\$1,770,755	\$1,770,755
10.664	COOPERATIVE FORESTRY ASSISTANCE SCHOOLS AND ROADS-GRANTS TO STATES AND FOREST SERVICE	\$873,663	\$133,202	\$1,006,865
10.665	SCHOOLS AND ROADS CLUSTER	\$264,325	\$1,401,325	\$1,665,650
10.676	FOREST LEGACY PROGRAM	\$37,296	\$0	\$37,296
10.678	FOREST STEWARDSHIP PROGRAM	\$12,325	\$0	\$12,325
10.680	FOREST HEALTH PROTECTION	\$583,776	\$0	\$583,776
10.684	INTERNATIONAL FORESTRY PROGRAMS	\$67,161	\$0	\$67,161
10.698	STATE & PRIVATE FORESTRY COOPERATIVE FIRE ASSISTANCE	\$471	\$1,963	\$2,434
10.699	PARTNERSHIP AGREEMENTS	\$56,604	\$0	\$56,604
10.868	RURAL ENERGY FOR AMERICA PROGRAM	\$11,616		\$16,891
10.902	SOIL AND WATER CONSERVATION		\$5,275	\$200.647
10.903	SOIL SURVEY	\$200,647 \$8,429	\$0 \$0	\$8,429
	ENVIRONMENTAL QUALITY INCENTIVES PROGRAM		\$0	
10.912		\$100,629		\$100,629
10.913	FARM AND RANCH LANDS PROTECTION PROGRAM	\$35,385	\$0	\$35,385
10.914 10.916	WILDLIFE HABITAT INCENTIVE PROGRAM WATERSHED REHABILITATION PROGRAM	\$26,733 \$341,081	\$0 \$0	\$26,733 \$341,081
10.910		φ341,061	φО	\$341,061
10.551	SNAP CLUSTER SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) STATE ADMINISTRATIVE MATCHING CRANTS FOR THE SUPPLEMENTAL	\$405,621,653	\$0	\$405,621,653
10 561	STATE ADMINISTRATIVE MATCHING GRANTS FOR THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM	\$15 E76 640	¢4 404 000	¢10 000 440
10.561	TOTAL SNAP CLUSTER	\$15,576,616 \$421,198,269	\$4,421,832 \$4,421,832	\$19,998,448 \$425,620,101
	CHILD NUTRITION CLUSTER			
10.553	SCHOOL BREAKFAST PROGRAM (SBP)	\$253,047	\$42,467,253	\$42,720,300
10.555	NATIONAL SCHOOL LUNCH PROGRAM (NSLP)	\$9,538,496	\$82,099,388	\$91,637,884
10.556	SPECIAL MILK PROGRAM FOR CHILDREN (SMP)	\$0	\$10,799	\$10,799
10.559	SUMMER FOOD SERVICE PROGRAM FOR CHILDREN (SFSPC)	\$0	\$1,897,379	\$1,897,379
	TOTAL CHILD NUTRITION CLUSTER	\$9,791,543	\$126,474,819	\$136,266,362

FEDERAL CFDA / GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	STATE OF WEST VIRGINIA EXPENDITURES	TOTAL SUBRECIPENT EXPENDITURES	TOTAL FEDERAL EXPENDITURES
	FOOD DISTRIBUTION CLUSTER			
10.565	COMMODITY SUPPLEMENTAL FOOD PROGRAM	\$1,242,496	\$351,514	\$1,594,010
10.568 10.569	EMERGENCY FOOD ASSISTANCE PROGRAM (ADMINISTRATIVE COSTS) EMERGENCY FOOD ASSISTANCE PROGRAM (FOOD COMMODITIES)	\$19,336 \$7,966,856	\$1,007,954 \$0	\$1,027,290 \$7,966,856
10.309	TOTAL FOOD DISTRIBUTION CLUSTER	\$9.228.688	\$1,359,468	\$10,588,156
		,===,	* 1,222,122	*,****,***
10.U01	NATIONAL VISITOR USE MONITORING	\$148,973	\$0	\$148,973
10.U02	STUDY OF NEW CRAYFISH SPECIES	\$90	r ₀	\$90
10.U03 TOTAL DEPARTMENT OF A	2019 WEST VIRGINIA FARMER TAX EDUCATION OUTREACH PROGRAM	\$351 \$477.387.971	\$0 \$165,384,972	\$351 \$642,772,943
TOTAL DEPARTMENT OF	AGRICULTURE	φ477,307,311	φ103,304,972	φ042,772,343
DEPARTMENT OF COMME	ERCE			
	ECONOMIC ADJUSTMENT ASSISTANCE AND ECONOMIC DEVELOPMENT			
11.307	CLUSTER	\$5,657,307	\$0	\$5,657,307
11.549	STATE AND LOCAL IMPLEMENTATION GRANT PROGRAM	\$121,967	\$0	\$121,967
11.620 TOTAL DEPARTMENT OF	SCIENCE, TECHNOLOGY, BUSINESS AND/OR EDUCATION OUTREACH	\$9,203 \$5,788,477	\$0 \$0	\$9,203 \$5,788,477
TOTAL DEPARTMENT OF	COMMERCE	φ3,700,477	φυ	φ3,700, 4 77
DEPARTMENT OF DEFENS	SE .			
12.002	PROCUREMENT TECHNICAL ASSISTANCE FOR BUSINESS FIRMS	\$359,671	\$0	\$359,671
	STATE MEMORANDUM OF AGREEMENT PROGRAM FOR THE			
12.113	REIMBURSEMENT OF TECHNICAL SERVICES	\$292,381	\$0	\$292,381
12.400	MILITARY CONSTRUCTION, NATIONAL GUARD NATIONAL GUARD MILITARY OPERATIONS AND MAINTENANCE (O&M)	\$32,799	\$0	\$32,799
12.401	PROJECTS	\$28,297,588	\$0	\$28,297,588
12.401	NATIONAL GUARD CHALLENGE PROGRAM	\$5,263,786	\$0 \$0	\$5,263,786
12.431***	BASIC SCIENTIFIC RESEARCH	\$249,840	\$0	\$249,840
12.617	ECONOMIC ADJUSTMENT ASSISTANCE FOR STATE GOVERNMENTS	\$41,272	\$5,942	\$47,214
40.000	BASIC,APPLIED,AND ADVANCED RESEARCH IN SCIENCE AND	07.040	r ₀	07.040
12.630 12.900	ENGINEERING LANGUAGE GRANT PROGRAM	\$87,612 \$26.800	\$0 \$61,579	\$87,612 \$88,379
12.902	INFORMATION SECURITY GRANT PROGRAM	\$121,618	\$01,379	\$121,618
	INTELLIGENT MULTIROTOR AUTONOMOUS GLIDER FOR RELOCATABLE	* ,	*-	, ,
12.U04	SENSORS (MAGRS)	\$11,459	\$0	\$11,459
	IPA:ASSESSMENT OF POLYMERIC OR COMPOSITE MATERIALS FOR USE AS			
12.U05	INFRASTRUCTURE ELEMENTS SUCH AS RAILROAD TIES	\$7,342	\$0	\$7,342
	IPA:ASSESSMENT OF POLYMERIC OR COMPOSITE MATERIALS FOR USE AS			
40,1100	INFRASTRUCTURE ELEMENTS SUCH AS RAILROAD TIES;SKIDMORE	04.445	.	04 445
12.U06 TOTAL DEPARTMENT OF	AGREEMENT	\$4,445 \$34,796,613	\$0 \$67,521	\$4,445 \$34,864,134
TOTAL DELAKTMENT OF	<u>DELENGE</u>	Ψοτ,του,στο	Ψ01,021	ψο-1,00-1,10-1
DEPARTMENT OF HOUSIN	IG AND URBAN DEVELOPMENT			
	MANUFACTURED HOME LOAN INSURANCE-FINANCING PURCHASE OF			
14.110	MANUFACTURED HOMES AS PRINCIPAL RESIDENCES OF BORROWERS	\$33,286	\$0	\$33,286
14 229	COMMUNITY DEVELOPMENT BLOCK GRANTS/STATE'S PROGRAM AND NON-		¢10 000 c01	¢00 040 070
14.228 14.231	ENTITLEMENT GRANTS IN HAWAII EMERGENCY SOLUTIONS GRANT PROGRAM	\$12,949,771 \$68,759	\$10,892,601 \$2.064.471	\$23,842,372 \$2,133,230
14.241	HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS	\$21,773	\$471,407	\$493,180
14.400	EQUAL OPPORTUNITY IN HOUSING	\$57,946	\$0	\$57,946
TOTAL DEPARTMENT OF	HOUSING AND URBAN DEVELOPMENT	\$13,131,535	\$13,428,479	\$26,560,014
DED A DEL CENTRO DE TRUE DA	PEDIOD			
DEPARTMENT OF THE INT	REGULATION OF SURFACE COAL MINING AND SURFACE EFFECTS OF			
15.250	UNDERGROUND COAL MINING	\$9,565,464	\$0	\$9,565,464
15.252	ABANDONED MINE LAND RECLAMATION (AMLR)	\$32,764,360	\$12,610,288	\$45,374,648
.0.202	SCIENCE AND TECHNOLOGY PROJECTS RELATED TO COAL MINING AND	ψ0 <u>2</u> ,. σ .,σσσ	Ψ·2,σ·σ,2σσ	ψ 10,01 1,010
15.255	RECLAMATION	\$205,822	\$0	\$205,822
15.433	FLOOD CONTROL ACT LANDS	\$211,089	\$211,534	\$422,623
15.438	NATIONAL FOREST ACQUIRED LANDS	\$17,850	\$17,679	\$35,529
15.608	FISH AND WILDLIFE MANAGEMENT ASSISTANCE	\$50,041	\$0	\$50,041
15.615	COOPERATIVE ENDANGERED SPECIES CONSERVATION FUND	\$85,964	\$0	\$85,964
15.634	STATE WILDLIFE GRANTS	\$540,798	\$0	\$540,798
15 657	ENDANGERED SPECIES CONSERVATION - RECOVERY IMPLEMENTATION	¢20.424	ΦO.	\$20.424
15.657 15.810	FUNDS NATIONAL COOPERATIVE GEOLOGIC MAPPING	\$28,124 \$64,499	\$0 \$0	\$28,124 \$64,499
15.812	COOPERATIVE GEOLOGIC MAFFING COOPERATIVE RESEARCH UNITS PROGRAM	\$46,711	\$0	\$46,711
15.814	NATIONAL GEOLOGICAL AND GEOPHYSICAL DATA PRESERVATION	\$19,225	\$0	\$19,225
15.904	HISTORIC PRESERVATION FUND GRANTS-IN-AID	\$649,921	\$102,281	\$752,202
15.916	OUTDOOR RECREATION-ACQUISITION, DEVELOPMENT AND PLANNING	\$6,646	\$301,098	\$307,744

FEDERAL CFDA / GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	STATE OF WEST VIRGINIA EXPENDITURES	TOTAL SUBRECIPENT EXPENDITURES	TOTAL FEDERAL EXPENDITURES
15.939	HERITAGE PARTNERSHIP	\$160,882	\$0	\$160,882
15.944	NATURAL RESOURCE STEWARDSHIP	\$4,228	\$0	\$4,228
10.544	COOPERATIVE RESEARCH AND TRAINING PROGRAMS - RESOURCES OF	Ψ+,220	ΨΟ	Ψ+,220
15.945	THE NATIONAL PARK SYSTEM	\$75.923	\$0	\$75,923
15.981	WATER USE AND DATA RESEARCH	\$29,867	\$0	\$29,867
10.001	WHEN OSE AND BANKESEARON	Ψ20,001	ΨΟ	Ψ20,007
	FISH AND WILDLIFE CLUSTER			
15.605	SPORT FISH RESTORATION	\$10,435,456	\$0	\$10,435,456
15.611	WILDLIFE RESTORATION AND BASIC HUNTER EDUCATION	\$3,893,752	\$0	\$3,893,752
	TOTAL FISH AND WILDLIFE CLUSTER	\$14,329,208	\$0	\$14,329,208
TOTAL DEPARTMENT OF	THE INTERIOR	\$58,856,622	\$13,242,880	\$72,099,502
DEPARTMENT OF JUSTICE				
16.017	SEXUAL ASSAULT SERVICES FORMULA PROGRAM	\$5,781	\$341,691	\$347,472
	GRANTS TO REDUCE DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL			
16.525	ASSAULT, AND STALKING ON CAMPUS	\$174,591	\$0	\$174,591
16.540	JUVENILE JUSTICE AND DELINQUENCY PREVENTION	\$140,369	\$381,468	\$521,837
16.543	MISSING CHILDREN'S ASSISTANCE	\$385,682	\$0	\$385,682
	STATE JUSTICE STATISTICS PROGRAM FOR STATISTICAL ANALYSIS			
16.550	CENTERS	\$31,895	\$104,152	\$136,047
16.554	NATIONAL CRIMINAL HISTORY IMPROVEMENT PROGRAM (NCHIP)	\$640,499	\$0	\$640,499
	NATIONAL INSTITUTE OF JUSTICE RESEARCH, EVALUATION, AND			
16.560	DEVELOPMENT PROJECT GRANTS	\$23,661	\$0	\$23,661
	CRIMINAL JUSTICE RESEARCH AND DEVELOPMENT-GRADUATE RESEARCH			
16.562	FELLOWSHIPS	\$14,308	\$0	\$14,308
16.575	CRIME VICTIM ASSISTANCE	\$53,319	\$3,472,704	\$3,526,023
16.582	CRIME VICTIM ASSISTANCE/DISCRETIONARY GRANTS	\$425,685		\$6,531,567
16.585	DRUG COURT DISCRETIONARY GRANT PROGRAM	\$931,586	\$0	\$931,586
16.588	VIOLENCE AGAINST WOMEN FORMULA GRANTS RURAL DOMESTIC VIOLENCE. DATING VIOLENCE. SEXUAL ASSAULT. AND	\$236,710	\$1,201,354	\$1,438,064
16.589	STALKING ASSISTANCE PROGRAM	\$9,930	\$149,654	\$159,584
10.569	GRANTS TO ENCOURAGE ARREST POLICIES AND ENFORCEMENT OF	φ9,930	\$149,054	\$109,004
16.590	PROTECTION ORDERS PROGRAM	\$60,348	\$194,649	\$254,997
16.593	RESIDENTIAL SUBSTANCE ABUSE TREATMENT FOR STATE PRISONERS	\$58,052	\$46,684	\$104,736
16.710	PUBLIC SAFETY PARTNERSHIP AND COMMUNITY POLICING GRANTS	\$31,759	\$0	\$31,759
10.710	PREA PROGRAM: DEMONSTRATION PROJECTS TO ESTABLISH "ZERO TOLERANCE" CULTURES FOR SEXUAL ASSAULT IN CORRECTIONAL	ψο1,700	ΨΟ	ψ01,700
16.735	FACILITIES	\$45,644	\$0	\$45,644
16.738	EDWARD BYRNE MEMORIAL JUSTICE ASSISTANCE GRANT PROGRAM	\$1,639,167	\$0	\$1,639,167
16.741	DNA BACKLOG REDUCTION PROGRAM	\$340,998	\$0	\$340,998
16.742	PAUL COVERDELL FORENSIC SCIENCES IMPROVEMENT GRANT PROGRAM	\$116,427	\$0	\$116,427
16.751	EDWARD BYRNE MEMORIAL COMPETITIVE GRANT PROGRAM	\$0	\$45,644	\$45,644
16.813	NICS ACT RECORD IMPROVEMENT PROGRAM	\$2,153,254	\$0	\$2,153,254
16.816	JOHN R. JUSTICE PROSECUTORS AND DEFENDERS INCENTIVE ACT	\$28,192	\$0	\$28,192
16.827	JUSTICE REINVESTMENT INITIATIVE	\$1,000	\$0	\$1,000
16.833	NATIONAL SEXUAL ASSAULT KIT INITIATIVE	\$115,356	\$69,510	\$184,866
16.838	COMPREHENSIVE OPIOID ABUSE SITE-BASED PROGRAM	\$227,599	\$72,782	\$300,381
16.922	EQUITABLE SHARING PROGRAM	\$22,197	\$0	\$22,197
16.U07	MISCELLANEOUS JUSTICE PROGRAMS	\$775,352	\$0	\$775,352
16.U08	REGIONAL COMMUNITY POLICING INSTITUTE	\$367	\$0	\$367
16.U09	EQUITABLE SHARING PROGRAM-JUSTICE	\$316,107	\$0	\$316,107
16.U10 TOTAL DEPARTMENT OF	PURDUE PHARMA SETTLEMENT	\$37,683 \$9,043,518	\$0 \$12,186,174	\$37,683 \$21,229,692
DEPARTMENT OF LABOR	JOSTICE	ψ3,043,310	ψ12,100,174	ΨΕ1,ΕΕ3,03Ε
17.002	LABOR FORCE STATISTICS	\$716,978	\$0	\$716,978
17.005	COMPENSATION AND WORKING CONDITIONS	\$93,218	\$0	\$93,218
17.225	UNEMPLOYMENT INSURANCE (NOTE 4)	\$387,335,731	\$0	\$387,335,731
17.235	SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM	\$51,658	\$885,172	\$936,830
17.245	TRADE ADJUSTMENT ASSISTANCE	\$4,183,087	\$0	\$4,183,087
17.268	H-1B JOB TRAINING GRANTS	\$1,081,186	\$0	\$1,081,186
17.269	COMMUNITY BASED JOB TRAINING GRANTS	\$841,117	\$0	\$841,117
17.271	WORK OPPORTUNITY TAX CREDIT PROGRAM (WOTC)	\$251,207	\$0	\$251,207
17.273	TEMPORARY LABOR CERTIFICATION FOR FOREIGN WORKERS	\$62,177	\$0	\$62,177
	WIOA NATIONAL DISLOCATED WORKER GRANTS/WIA NATIONAL	•		•
17.277	EMERGENCY GRANTS	\$746,642	\$2,605,181	\$3,351,823

FEDERAL CFDA / GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	STATE OF WEST VIRGINIA EXPENDITURES	TOTAL SUBRECIPENT EXPENDITURES	TOTAL FEDERAL EXPENDITURES
	TRADE ADJUSTMENT ASSISTANCE COMMUNITY COLLEGE AND CAREER			
17.282	TRAINING (TAACCCT) GRANTS	\$415,332	\$107,303	\$522,635
17.285	APPRENTICESHIP USA GRANTS	\$55,812	\$0	\$55,812
17.504	CONSULTATION AGREEMENTS	\$412,548	\$0	\$412,548
17.600	MINE HEALTH AND SAFETY GRANTS	\$446,300	\$0	\$446,300
17.999	MISCELLANEOUS LABOR PROGRAMS	\$629,468	\$0	\$629,468
	EMPLOYMENT SERVICE CLUSTER			
17.207	EMPLOYMENT SERVICE/WAGNER-PEYSER FUNDED ACTIVITIES	\$5,612,013	\$0	\$5,612,013
17.801	DISABLED VETERANS' OUTREACH PROGRAM (DVOP)	\$594,996	\$0	\$594,996
17.804	LOCAL VETERANS' EMPLOYMENT REPRESENTATIVE (LVER) PROGRAM	\$251,997	\$0	\$251,997
	TOTAL EMPLOYMENT SERVICE CLUSTER	\$6,459,006	\$0	\$6,459,006
	WIOA CLUSTER			
17.258	WIA/WIOA - ADULT PROGRAM	\$0	\$5,006,712	\$5,006,712
17.259	WIA/WIOA - YOUTH ACTIVITIES	\$0	\$5,177,612	\$5,177,612
17.278	WIA/WIOA DISLOCATED WORKER FORMULA GRANTS	\$1,752,673	\$5,127,211	\$6,879,884
	TOTAL WIOA CLUSTER	\$1,752,673	\$15,311,535	\$17,064,208
TOTAL DEPARTMENT OF I	<u>ABOR</u>	\$405,534,140	\$18,909,191	\$424,443,331
DEPARTMENT OF TRANSP	ORTATION			
20.205*	HIGHWAY PLANNING AND CONSTRUCTION	\$353,905,310	\$7,215,548	\$361,120,858
20.218	NATIONAL MOTOR CARRIER SAFETY	\$2,021,828	\$0	\$2,021,828
20.219*	RECREATIONAL TRAILS PROGRAM	\$334,381	\$346,376	\$680,757
20.224*	FEDERAL LANDS ACCESS PROGRAM	\$202,489	\$0	\$202,489
20.232	COMMERCIAL DRIVER'S LICENSE PROGRAM IMPLEMENTATION GRANT	\$0	\$88,647	\$88,647
20.232	MOTOR CARRIER SAFETY ASSISTANCE HIGH PRIORITY GRANTS AND	ΨΟ	ψ00,047	ψ00,041
20.237	COOPERATIVE AGREEMENTS	\$75,440	\$0	\$75,440
	METROPOLITAN TRANSPORTATION PLANNING AND STATE AND NON-			
20.505	METROPOLITAN PLANNING AND RESEARCH	\$95,095	\$0	\$95,095
20.509	FORMULA GRANTS FOR RURAL AREAS RAIL FIXED GUIDEWAY PUBLIC TRANSPORTATION SYSTEM STATE SAFETY	\$1,010,609	\$5,713,322	\$6,723,931
20.528	OVERSIGHT FORMULA GRANT PROGRAM	\$287,974	\$0	\$287,974
20.607	ALCOHOL OPEN CONTAINER REQUIREMENTS	\$2,399,954	\$69,786	\$2,469,740
	NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION (NHTSA)	+ =,,	****,	- ,,
20.614	DISCRETIONARY SAFETY GRANTS AND COOPERATIVE AGREEMENTS	\$57,383	\$0	\$57,383
20.700	PIPELINE SAFETY PROGRAM STATE BASE GRANT	\$666,412	\$0	\$666,412
	INTERAGENCY HAZARDOUS MATERIALS PUBLIC SECTOR TRAINING AND	******	**	*****
20.703	PLANNING GRANTS	\$9,681	\$21,500	\$31,181
	PIPELINE SAFETY RESEARCH COMPETITIVE ACADEMIC AGREEMENT			
20.724	PROGRAM (CAAP)	\$66,038	\$0	\$66,038
20.U11	WV DOT PHASE III TRAILS PROJECT	\$34,839	\$0	\$34,839
20.U12	WV DOT PHASE II SCANNING PROJECT	\$244,987	\$0	\$244,987
	FEDERAL TRANSIT CLUSTER			
20.500	FEDERAL TRANSIT - CAPITAL INVESTMENT GRANTS	\$158,550	\$0	\$158,550
20.525	STATE OF GOOD REPAIR GRANTS PROGRAM	\$80,761	\$0	\$80,761
20.526	BUS AND BUS FACILITIES FORMULA PROGRAM	\$103,032	\$0	\$103,032
	TOTAL FEDERAL TRANSIT CLUSTER	\$342,343	\$0	\$342,343
	TRANSIT SERVICES PROGRAMS CLUSTER			
20.513	ENHANCED MOBILITY OF SENIORS AND INDIVIDUALS WITH DISABILITIES	\$289,865 \$289,865	\$948,562	\$1,238,427
	TOTAL TRANSIT SERVICES PROGRAMS CLUSTER	\$289,865	\$948,562	\$1,238,427
00.000	HIGHWAY SAFETY CLUSTER	04 005 055	0700 05	AC 251 25 -
20.600	STATE AND COMMUNITY HIGHWAY SAFETY	\$1,925,226	\$728,832	\$2,654,058
20.601	ALCOHOL IMPAIRED DRIVING COUNTERMEASURES INCENTIVE GRANTS I	\$82,572	\$0	\$82,572
20.609	SAFETY BELT PERFORMANCE GRANTS	\$0	\$20,816	\$20,816
20.610	STATE TRAFFIC SAFETY INFORMATION SYSTEM IMPROVEMENTS GRANTS	\$0	\$420,135	\$420,135
20.612	INCENTIVE GRANT PROGRAM TO INCREASE MOTORCYCLIST SAFETY	\$11,239	\$0	\$11,239
20.616	NATIONAL PRIORITY SAFETY PROGRAMS TOTAL HIGHWAY SAFETY CLUSTER	\$1,761,312 \$3,780,349	\$1,120,070 \$2,289,853	\$2,881,382 \$6,070,202
TOTAL DEDARMENT OF				
TOTAL DEPARTMENT OF T	I RAINSFUR I A HUIN	\$365,824,977	\$16,693,594	\$382,518,571

FEDERAL CFDA / GRANT CONTRACT NUMBER	NAME OF PROGRAM	STATE OF WEST VIRGINIA EXPENDITURES	TOTAL SUBRECIPENT EXPENDITURES	TOTAL FEDERAL EXPENDITURES
DEPARTMENT OF THE T				
21.U13	EQUITABLE SHARING PROGRAM-TREASURY	\$57,461	\$0	\$57,461
TOTAL DEPARTMENT OF	F THE TREASURY	\$57,461	\$0	\$57,461
APPALACHIAN REGIONA	AL COMMISSION			
23.001	APPALACHIAN REGIONAL DEVELOPMENT	\$1,115,665	\$0	\$1,115,665
23.002	APPALACHIAN AREA DEVELOPMENT	\$292,571	\$1,365,297	\$1,657,868
23.003*	APPALACHIAN DEVELOPMENT HIGHWAY SYSTEM	\$32,917,184	\$0	\$32,917,184
	APPALACHIAN RESEARCH, TECHNICAL ASSISTANCE, AND			
23.011	DEMONSTRATION PROJECTS	\$32,111	\$0	\$32,111
00.114.4	WORKFORCE CONSTRUCTION, TELECOMMUNICATIONS, & ENERGY (CCE)	\$404.044	¢o.	¢404.044
23.U14 TOTAL APPALACHIAN R	TRAINING CENTER ECIONAL COMMISSION	\$194,841 \$34,552,372	\$0 \$1,365,297	\$194,841 \$35,917,669
TOTAL ATTALACTIAN K	ECIONAL COMMISSION	Ψ04,002,012	ψ1,000,201	ψου,υττ,υυυ
EQUAL EMPLOYMENT O	PPORTUNITY COMMISSION			
•	EMPLOYMENT DISCRIMINATION-TITLE VII OF THE CIVIL RIGHTS ACT OF			
30.001	1964	\$10,178	\$0	\$10,178
TOTAL EQUAL EMPLOY	MENT OPPORTUNITY COMMISSION	\$10,178	\$0	\$10,178
GENERAL SERVICES AD				^
39.003	DONATION OF FEDERAL SURPLUS PERSONAL PROPERTY	\$74,117	\$0 \$0	\$74,117
TOTAL GENERAL SERVI	CES ADMINISTRATION	\$74,117	\$0	\$74,117
NATIONAL AFRONALITIC	CS AND SPACE ADMINISTRATION			
43.001	SCIENCE	\$88,324	\$0	\$88,324
43.008	EDUCATION (NOTE 3)	\$33,717	\$0	\$33,717
43.009	CROSS AGENCY SUPPORT	\$212,653	\$0	\$212,653
TOTAL NATIONAL AERO	NAUTICS AND SPACE ADMINISTRATION	\$334,694	\$0	\$334,694
	AND LIBRARY SERVICES			
45.025	PROMOTION OF THE ARTS-PARTNERSHIP AGREEMENTS	\$312,466		\$722,613
45.129 45.130	PROMOTION OF THE HUMANITIES-FEDERAL STATE PARTNERSHIP PROMOTION OF THE HUMANITIES-CHALLENGE GRANTS	\$7,847	\$0 \$0	\$7,847
45.163	PROMOTION OF THE HUMANITIES-CHALLENGE GRANTS PROMOTION OF THE HUMANITIES-PROFESSIONAL DEVELOPMENT	\$21,352 \$137,712	\$0 \$0	\$21,352 \$137,712
45.310	GRANTS TO STATES	\$1,113,908	\$445,526	\$1,559,434
	USEUM AND LIBRARY SERVICES	\$1,593,285	\$855,673	\$2,448,958
NATIONAL SCIENCE FOU	<u>UNDATION</u>			
47.049***	MATHEMATICAL AND PHYSICAL SCIENCES	\$28,523	\$0	\$28,523
47.076***	EDUCATION AND HUMAN RESOURCES	\$414,815	\$0	\$414,815
47.004***	OFFICE OF EXPERIMENTAL PROGRAM TO STIMULATE COMPETITIVE	* 400 000	* 0.005.407	* + * * * * * * * * * * * * * * * * * *
47.081***	RESEARCH	\$493,629	\$3,905,437	\$4,399,066
47.083*** TOTAL NATIONAL SCIEN	OFFICE OF INTEGRATIVE ACTIVITIES	\$7,413 \$944,380	\$0 \$3,905,437	\$7,413 \$4,849,817
TOTAL NATIONAL SCIEN	NCE FOUNDATION	Ψ344,300	ψ5,505,451	Ψ+,0+3,011
SMALL BUSINESS ADMIN	NISTRATION			
59.037	SMALL BUSINESS DEVELOPMENT CENTERS	\$690,804	\$0	\$690,804
59.061	STATE TRADE EXPANSION	\$30,258	\$161,391	\$191,649
TOTAL SMALL BUSINESS	S ADMINISTRATION	\$721,062	\$161,391	\$882,453
DEPARTMENT OF VETER		A= 000 =0.4		A= 000 =0.4
64.015	VETERANS STATE NURSING HOME CARE	\$7,292,784	\$0	\$7,292,784
64.124 64.203	ALL-VOLUNTEER FORCE EDUCATIONAL ASSISTANCE VETERANS CEMETERY GRANTS PROGRAM	\$174,245 \$68,820		\$174,245 \$68,820
64.028	POST-9/11 VETERANS EDUCATIONAL ASSISTANCE	\$202,602		\$202,602
64.U15	PREVENTABLE HOSPITALIZATIONS AMONG VETERANS WITH DIABETES	\$22,819		\$22,819
TOTAL DEPARTMENT OF		\$7,761,270		\$7,761,270
ENVIRONMENTAL PROT	ECTION AGENCY			
66.001	AIR POLLUTION CONTROL PROGRAM SUPPORT	\$1,533,980	\$0	\$1,533,980
66.032	STATE INDOOR RADON GRANTS	\$61,978	\$40,489	\$102,467
22.224	SURVEYS, STUDIES, RESEARCH, INVESTIGATIONS, DEMONSTRATIONS,	A 470 770		A 170 550
66.034	AND SPECIAL PURPOSE ACTIVITIES RELATING TO THE CLEAN AIR ACT	\$476,559	\$0	\$476,559
66.204	MULTIPURPOSE GRANTS TO STATES AND TRIBES WATER POLLUTION CONTROL STATE, INTERSTATE, AND TRIBAL PROGRAM	\$34,564	\$0	\$34,564
66.419	SUPPORT	\$2,087,063	\$40,000	\$2,127,063
66.432	STATE PUBLIC WATER SYSTEM SUPERVISION	\$603,699	. ,	\$603,699
66.433	STATE UNDERGROUND WATER SOURCE PROTECTION	\$138,848		\$138,848
66.454	WATER QUALITY MANAGEMENT PLANNING	\$112,412		\$112,412
	CAPITALIZATION GRANTS FOR CLEAN WATER STATE REVOLVING FUNDS	•		•
66.458	AND CLEAN WATER STATE REVOLVING FUND CLUSTER	\$0	\$25,020,000	\$25,020,000

FEDERAL CFDA / GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	STATE OF WEST VIRGINIA EXPENDITURES	TOTAL SUBRECIPENT EXPENDITURES	TOTAL FEDERAL EXPENDITURES
66.460	NONPOINT SOURCE IMPLEMENTATION GRANTS	\$620,130	\$878,967	\$1,499,097
66.461	REGIONAL WETLAND PROGRAM DEVELOPMENT GRANTS	\$27,042	\$0	\$27,042
66.466	CHESAPEAKE BAY PROGRAM CAPITALIZATION GRANTS FOR DRINKING WATER STATE REVOLVING	\$1,777,780	\$688,224	\$2,466,004
66.468	FUNDS AND DRINKING WATER STATE REVOLVING FUND CLUSTER	\$2,270,615	\$123,440	\$2,394,055
66.605	PERFORMANCE PARTNERSHIP GRANTS \$272,782 \$0		\$272,782	
	ENVIRONMENTAL INFORMATION EXCHANGE NETWORK GRANT PROGRAM			
66.608	AND RELATED ASSISTANCE TOXIC SUBSTANCES COMPLIANCE MONITORING COOPERATIVE	\$192,617	\$0	\$192,617
66.701	AGREEMENTS TSCA TITLE IV STATE LEAD GRANTS CERTIFICATION OF LEAD-BASED	\$62,820	\$0	\$62,820
66.707	PAINT PROFESSIONALS	\$147,851	\$0	\$147,851
66.708	POLLUTION PREVENTION GRANTS PROGRAM	\$93,789	\$0	\$93,789
66.801	HAZARDOUS WASTE MANAGEMENT STATE PROGRAM SUPPORT SUPERFUND STATE, POLITICAL SUBDIVISION, AND INDIAN TRIBE SITE-	\$1,475,825	\$0	\$1,475,825
66.802	SPECIFIC COOPERATIVE AGREEMENTS UNDERGROUND STORAGE TANK PREVENTION, DETECTION AND	\$202,210	\$0	\$202,210
66.804	·		\$0	\$284,548
66.805	ACTION PROGRAM	\$776,018	\$0	\$776,018
	SUPERFUND STATE AND INDIAN TRIBE CORE PROGRAM COOPERATIVE			
66.809	AGREEMENTS	\$29,689	\$0	\$29,689
66.817	STATE AND TRIBAL RESPONSE PROGRAM GRANTS	\$489,472		\$489,472
66.818	BROWNFIELD ASSESSMENT AND CLEANUP COOPERATIVE AGREEMENTS	\$289,362	\$0	\$289,362
66.U16 66.U17	OPERATIONALIZING WETLAND FUNCTIONAL ASSESSMENT IN WV MISC. FEDERAL AWARD PROGRAMS	\$46,965 \$1,053,682	\$0	\$46,965 \$1,053,682
66.U18	PESTCIDE SAFETY EDUCATION PROGRAM IN WEST VIRGINIA 2019	\$7,977	\$0	\$7,977
TOTAL ENVIRONMENTAL		\$15,170,277	\$26,791,120	\$41,961,397
DEPARTMENT OF ENERGY	<u>r</u>			
81.041	IMPACT AID	\$408,090	\$130,569	\$538,659
81.042	WEATHERIZATION ASSISTANCE FOR LOW-INCOME PERSONS	\$260,739	\$3,243,116	\$3,503,855
81.049	OFFICE OF SCIENCE FINANCIAL ASSISTANCE PROGRAM	\$50,428	\$0	\$50,428
81.057	UNIVERSITY COAL RESEARCH CONSERVATION RESEARCH AND DEVELOPMENT	\$65,976	\$0 \$0	\$65,976 \$11,959
81.086*** 81.087***	RENEWABLE ENERGY RESEARCH AND DEVELOPMENT	\$11,959 \$45,274	\$0 \$0	\$45,274
81.089***	FOSSIL ENERGY RESEARCH AND DEVELOPMENT (NOTE 3) ENERGY EFFICIENCY AND RENEWABLE ENERGY INFORMATION DISSEMINATION, OUTREACH, TRAINING AND TECHNICAL	\$175,182	\$0	\$175,182
81.117	ANALYSIS/ASSISTANCE	\$344,348	\$0	\$344,348
81.119	STATE ENERGY PROGRAM SPECIAL PROJECTS UCFER: COMPUTATIONAL INVESTIGATION OF COAL CONVERSION VIA	\$26,910	\$27,699	\$54,609
81.U19	MICROWAVE INDUCED PLASMAS	\$5,137	\$0	\$5,137
TOTAL DEPARTMENT OF I		\$1,394,043	\$3,401,384	\$4,795,427
DEPARTMENT OF EDUCAT	<u>FION</u>			
84.002	ADULT EDUCATION - BASIC GRANTS TO STATES	\$651,460	\$2,215,697	\$2,867,157
84.007**	FEDERAL SUPPLEMENTAL EDUCATIONAL OPPORTUNITY GRANTS (FSEOG)	\$4,341,024	\$0	\$4,341,024
84.010	TITLE I GRANTS TO LOCAL EDUCATIONAL AGENCIES TITLE I STATE AGENCY PROGRAM FOR NEGLECTED AND DELINQUENT	\$726,168	\$90,073,462	\$90,799,630
84.013	CHILDREN AND YOUTH	\$928,889	\$0	\$928,889
84.031	HIGHER EDUCATION-INSTITUTIONAL AID	\$3,556,746	\$0	\$3,556,746
84.033**	FEDERAL WORK-STUDY PROGRAM (FWS)	\$3,449,984	\$0	\$3,449,984
84.038**	FEDERAL PERKINS LOAN (FPL) - FEDERAL CAPITAL CONTRIBUTIONS CAREER AND TECHNICAL EDUCATION-BASIC GRANTS TO STATES	\$39,626,763	\$0	\$39,626,763
84.048 84.063**	FEDERAL PELL GRANT PROGRAM (PELL)	\$3,275,870 \$109,805,187	\$4,951,317 \$0	\$8,227,187 \$109,805,187
04.400	REHABILITATION SERVICES-VOCATIONAL REHABILITATION GRANTS TO	# 40.050.000	0040.057	# 40 004 7 45
84.126	STATES INDEPENDENT LIVING-STATE GRANTS	\$19,252,388	\$349,357	\$19,601,745
84.169 84.177	INDEPENDENT LIVING SERVICES FOR OLDER INDIVIDUALS WHO ARE BLIND	\$0 \$339,057	\$418,815 \$0	\$418,815 \$339,057
84.181	SPECIAL EDUCATION - GRANTS FOR INFANTS AND FAMILIES	\$1,371,933	\$471,696	\$1,843,629
01 107	SUPPORTED EMPLOYMENT SERVICES FOR INDIVIDUALS WITH THE MOST SIGNIFICANT DISABILITIES	\$155 OSE	\$0	\$155 OCE
84.187 84.196	EDUCATION FOR HOMELESS CHILDREN AND YOUTH	\$155,065 \$88,505	\$332,332	\$155,065 \$420,837
84.196 84.268**	FEDERAL DIRECT STUDENT LOANS	\$423,632,016	\$332,332 \$0	\$420,837 \$423,632,016
84.287	TWENTY-FIRST CENTURY COMMUNITY LEARNING CENTERS	\$321,742	\$5,866,832	\$6,188,574
84.326	SPECIAL EDUCATION-TECHNICAL ASSISTANCE AND DISSEMINATION TO IMPROVE SERVICES AND RESULTS FOR CHILDREN WITH DISABILITIES	\$140,479	\$1,717	\$142,196
	GAINING EARLY AWARENESS AND READINESS FOR UNDERGRADUATE			
84.334 84.358	PROGRAMS RURAL EDUCATION	\$1,655,560 \$28,631	\$1,565,993 \$1,869,782	\$3,221,553 \$1,898,413

FEDERAL CFDA / GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	STATE OF WEST VIRGINIA EXPENDITURES	TOTAL SUBRECIPENT EXPENDITURES	TOTAL FEDERAL EXPENDITURES
84.365	ENGLISH LANGUAGE ACQUISITION STATE GRANTS	\$133,565	\$418,388	\$551,953
84.366	MATHEMATICS AND SCIENCE PARTNERSHIPS	\$278,801	\$143,757	\$422,558
84.367	SUPPORTING EFFECTIVE INSTRUCTION STATE GRANT	\$330,901	\$16,246,534	\$16,577,435
84.369	GRANTS FOR STATE ASSESSMENTS AND RELATED ACTIVITIES	\$5,807,474	\$55,809	\$5,863,283
	NATIONAL SCIENCE AND MATHEMATICS ACCESS TO RETAIN TALENT	. , ,		
84.376	(SMART) GRANTS (SMART GRANTS)	\$108,173	\$0	\$108,173
84.377	SCHOOL IMPROVEMENT GRANTS	\$55,398	\$612,714	\$668,112
	TEACHER EDUCATION ASSISTANCE FOR COLLEGE AND HIGHER	\$363,093		
84.379**	· · · · · · · · · · · · · · · · · · ·		\$0	\$363,093
84.424	STUDENT SUPPORT AND ACADEMIC ENRICHMENT PROGRAM	\$110,146	\$3,310,634	\$3,420,780
84.027	SPECIAL EDUCATION CLUSTER (IDEA) SPECIAL EDUCATION-GRANTS TO STATES (IDEA, PART B)	\$9,408,998	\$67,489,924	\$76,898,922
84.173	SPECIAL EDUCATION-PRESCHOOL GRANTS (IDEA PRESCHOOL)	\$544,872	\$2,415,832	\$2,960,704
01.170	TOTAL SPECIAL EDUCATION CLUSTER (IDEA)	\$9.953.870	\$69,905,756	\$79,859,626
	TOTAL SI LOIAL EDUCATION GLOSTER (IDEA)	ψ9,933,070	φυσ,συσ, <i>1</i> συ	φ19,039,020
84.042	TRIO CLUSTER TRIO-STUDENT SUPPORT SERVICES	\$1,527,180	\$0	\$1,527,180
84.044	TRIO-TALENT SEARCH		\$0	
		\$234,558		\$234,558
84.047	TRIO-UPWARD BOUND	\$1,690,639	\$0	\$1,690,639
84.066	TRIO-EDUCATIONAL OPPORTUNITY CENTERS	\$1,150	\$0	\$1,150
84.217	TRIO-MCNAIR POST-BACCALAUREATE ACHIEVEMENT	\$301,728	\$0	\$301,728
	TOTAL TRIO CLUSTER	\$3,755,255	\$0	\$3,755,255
84.U20	NATIONAL ASSESSMENT OF EDUCATIONAL PROGRESS	\$126,614	\$0	\$126,614
TOTAL DEPARTMENT OF I	EDUCATION	\$634,370,757	\$198,810,592	\$833,181,349
ELECTION ASSISTANCE CO				
90.401	HELP AMERICA VOTE ACT REQUIREMENTS PAYMENTS	\$136,305	\$3,611,943	\$3,748,248
TOTAL ELECTION ASSISTA	ANCE COMMISSION	\$136,305	\$3,611,943	\$3,748,248
DEPARTMENT OF HEALTH	I AND HUMAN SERVICES			
	SPECIAL PROGRAMS FOR THE AGING-TITLE VII, CHAPTER 3-PROGRAMS			
93.041	FOR PREVENTION OF ELDER ABUSE, NEGLECT, AND EXPLOITATION SPECIAL PROGRAMS FOR THE AGING-TITLE VII, CHAPTER 2-LONG TERM	\$12,435	\$26,000	\$38,435
93.042	CARE OMBUDSMAN SERVICES FOR OLDER INDIVIDUALS SPECIAL PROGRAMS FOR THE AGING-TITLE III, PART D-DISEASE	\$86,306	\$13,821	\$100,127
93.043	PREVENTION AND HEALTH PROMOTION SERVICES SPECIAL PROGRAMS FOR THE AGING-TITLE IV AND TITLE II -	\$6,906	\$164,501	\$171,407
93.048	DISCRETIONARY PROJECTS	\$46,517	\$151,349	\$197,866
93.051	ALZHEIMER'S DISEASE DEMONSTRATION GRANTS TO STATES	\$39,474	\$39,908	\$79,382
93.052	NATIONAL FAMILY CAREGIVER SUPPORT, TITLE III, PART E	\$33,768	\$948,629	\$982,397
93.070	ENVIRONMENTAL PUBLIC HEALTH AND EMERGENCY RESPONSE	\$14,727	\$0	\$14,727
93.071	MEDICARE ENROLLMENT ASSISTANCE PROGRAM	\$10,604	\$290,043	\$300,647
00.071	BIRTH DEFECTS AND DEVELOPMENTAL DISABILITIES - PREVENTION AND	Ψ10,001	Ψ200,010	
93.073	SURVEILLANCE HOSPITAL PREPAREDNESS PROGRAM (HPP) AND PUBLIC HEALTH	\$54,128	\$161,456	\$215,584
	EMERGENCY PREPAREDNESS (PHEP) ALIGNED COOPERATIVE			
93.074	AGREEMENTS	\$1,940,406	\$4,178,540	\$6,118,946
	COOPERATIVE AGREEMENTS TO PROMOTE ADOLESCENT HEALTH THROUGH SCHOOL-BASED HIV/STD PREVENTION AND SCHOOL-BASED			
93.079	SURVEILLANCE	\$9,796	\$6,517	\$16,313
93.090	GUARDIANSHIP ASSISTANCE	\$1,624,526	\$0	\$1,624,526
	AFFORDABLE CARE ACT (ACA) PERSONAL RESPONSIBILITY EDUCATION			
93.092	PROGRAM WELL-INTEGRATED SCREENING AND EVALUATION FOR WOMEN ACROSS	\$58,817	\$113,651	\$172,468
93.094	THE NATION	\$311,738	\$246,695	\$558,433
93.103***	FOOD AND DRUG ADMINISTRATION-RESEARCH	\$1,141,710	\$0	\$1,141,710
93.110	MATERNAL AND CHILD HEALTH FEDERAL CONSOLIDATED PROGRAMS PROJECT GRANTS AND COOPERATIVE AGREEMENTS FOR TUBERCULOSIS	\$95,893	\$23,362	\$119,255
00.110		# 400,000	••	\$400.000
93.116 93.127	CONTROL PROGRAMS EMERGENCY MEDICAL SERVICES FOR CHILDREN	\$163,608 \$77,398	\$0 \$29,279	\$163,608 \$106,677
93.130	COOPERATIVE AGREEMENTS TO STATES/TERRITORIES FOR THE COORDINATION AND DEVELOPMENT OF PRIMARY CARE OFFICES	\$157,659	\$15,000	\$172,659
93.135	CENTERS FOR RESEARCH AND DEMONSTRATION FOR HEALTH PROMOTION AND DISEASE PREVENTION	\$6,124	\$0	\$6,124
შ ა.135	INJURY PREVENTION AND CONTROL RESEARCH AND STATE AND	Φ0,124	Φ0	φ0,124
93.136	COMMUNITY BASED PROGRAMS PROJECTS FOR ASSISTANCE IN TRANSITION FROM HOMELESSNESS	\$2,163,486	\$1,191,756	\$3,355,242
93.150	(PATH)	\$2,524	\$322,786	\$325,310
93.165	GRANTS TO STATES FOR LOAN REPAYMENT PROGRAM	\$0	\$40,000	\$40,000

FEDERAL CFDA / GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	STATE OF WEST VIRGINIA EXPENDITURES	TOTAL SUBRECIPENT EXPENDITURES	TOTAL FEDERAL EXPENDITURES
,	CHILDHOOD LEAD POISONING PREVENTION PROJECTS, STATE AND LOCAL			
	CHILDHOOD LEAD POISONING PREVENTION AND SURVEILLANCE OF			
93.197	BLOOD LEVELS IN CHILDREN	\$90,460	\$0	\$90,460
93.217	FAMILY PLANNING-SERVICES	\$1,951,465	\$0	\$1,951,465
93.234 93.235	TRAUMATIC BRAIN INJURY STATE DEMONSTRATION GRANT PROGRAM	\$5,709 \$5,829	\$0 \$453,298	\$5,709 \$459,127
93.236	AFFORDABLE CARE ACT (ACA) ABSTINENCE EDUCATION PROGRAM GRANTS TO STATES TO SUPPORT ORAL HEALTH WORKFORCE ACTIVITIES	\$14,542	\$72,241	\$86,783
93.241	STATE RURAL HOSPITAL FLEXIBILITY PROGRAM	\$86,653	\$292,086	\$378,739
93.241	SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES_PROJECTS OF	ψ00,033	Ψ292,000	ψ370,739
93.243	REGIONAL AND NATIONAL SIGNIFICANCE	\$326,550	\$8,707,206	\$9,033,756
93.251	UNIVERSAL NEWBORN HEARING SCREENING	\$61,156	\$103,670	\$164,826
93.264**	NURSING FACULTY LOAN PROGRAM (NFLP)	\$163,997	\$0	\$163,997
93.268	IMMUNIZATION COOPERATIVE AGREEMENTS	\$1,030,458	\$435,292	\$1,465,750
93.270	VIRAL HEPATITIS PREVENTION AND CONTROL	\$242,067	\$0	\$242,067
93.279	DRUG ABUSE AND ADDICTION RESEARCH PROGRAMS	\$36,077	\$0	\$36,077
	CENTERS FOR DISEASE CONTROL AND PREVENTION_INVESTIGATIONS	\$209,291		
93.283	AND TECHNICAL ASSISTANCE	\$329,686	\$538,977	
93.301	SMALL RURAL HOSPITAL IMPROVEMENT GRANT PROGRAM	\$0	\$204,644	\$204,644
93.305	NATIONAL STATE BASED TOBACCO CONTROL PROGRAMS	\$250,989	\$405,000	\$655,989
02 210	OUTREACH PROGRAMS TO REDUCE THE PREVALENCE OF OBESITY IN	¢406 220	P O	¢406.000
93.319	HIGH RISK RURAL AREAS EPIDEMIOLOGY AND LABORATORY CAPACITY FOR INFECTIOUS DISEASES	\$426,338	\$0	\$426,338
93.323	(ELC)	\$1,017,182	\$123,766	\$1,140,948
33.323	HEALTH PROFESSIONS STUDENT LOANS, INCLUDING PRIMARY CARE	Ψ1,017,102	Ψ123,700	ψ1,140,540
93.342**	LOANS AND LOANS FOR DISADVANTAGED STUDENTS (HPSL/PCL/LDS)	\$7,819,902	\$0	\$7,819,902
	PUBLIC HEALTH EMERGENCY RESPONSE: COOPERATIVE AGREEMENT FOR	4 :,0:0,00=	**	4.,,
93.354	EMERGENCY RESPONSE: PUBLIC HEALTH CRISIS RESPONSE	\$174,795	\$230,003	\$404,798
93.359	NURSE EDUCATION, PRACTICE QUALITY AND RETENTION GRANTS	\$1,020	\$0	\$1,020
93.364**	NURSING STUDENT LOANS (NSL)	\$754,915	\$0	\$754,915
93.413	THE STATE FLEXIBILITY TO STABILIZE THE MARKET GRANT PROGRAM	\$137,190	\$0	\$137,190
	IMPROVING THE HEALTH OF AMERICANS THROUGH PREVENTION AND			
93.426	MANAGEMENT OF DIABETES AND HEART DISEASE AND STROKE	\$393,337	\$219,189	\$612,526
00.544	AFFORDABLE CARE ACT (ACA) GRANTS TO STATES FOR HEALTH	# 40.707		040.707
93.511	INSURANCE PREMIUM REVIEW	\$48,727	\$0	\$48,727
	THE AFFORDABLE CARE ACT: BUILDING EPIDEMIOLOGY, LABORATORY, AND HEALTH INFORMATION SYSTEMS CAPACITY IN THE EPIDEMIOLOGY			
	AND LABORATORY CAPACITY FOR INFECTIOUS DISEASE (ELC) AND			
	EMERGING INFECTIONS PROGRAM (EIP) COOPERATIVE			
93.521	AGREEMENTS; PPHF	\$194,954	\$70,924	\$265,878
	PPHF CAPACITY BUILDING ASSISTANCE TO STRENGTHEN PUBLIC HEALTH	, , , , , , , , , , , , , , , , , , , ,	* -/-	*,-
	IMMUNIZATION INFRASTRUCTURE AND PERFORMANCE FINANCED IN PART			
93.539	BY PREVENTION AND PUBLIC HEALTH FUNDS	\$39,345	\$82,046	\$121,391
93.556	PROMOTING SAFE AND STABLE FAMILIES	\$1,415,144	\$716,173	\$2,131,317
	TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) STATE PROGRAMS			
93.558	AND TANF CLUSTER	\$64,891,915	\$9,869,504	\$74,761,419
93.560	FAMILY SUPPORT PAYMENTS TO STATES-ASSISTANCE PAYMENTS	(\$8,405)	\$0	(\$8,405)
93.563	CHILD SUPPORT ENFORCEMENT	\$22,587,454	\$0	\$22,587,454
93.566	REFUGEE AND ENTRANT ASSISTANCE-STATE ADMINISTERED PROGRAMS	\$1,264	\$74,998	\$76,262
93.568	LOW-INCOME HOME ENERGY ASSISTANCE	\$21,150,773 \$226,769	\$9,815,029	\$30,965,802
93.569 93.586	COMMUNITY SERVICES BLOCK GRANTS STATE COURT IMPROVEMENT PROGRAM	\$226,769 \$364,872	\$7,921,109	\$8,147,878 \$364,872
93.590	COMMUNITY-BASED CHILD ABUSE PREVENTION GRANTS	\$3,097	\$0 \$233.006	\$236.103
93.597	GRANTS TO STATES FOR ACCESS AND VISITATION PROGRAMS	\$96,046	\$0	\$96,046
93.599	CHAFEE EDUCATION AND TRAINING VOUCHERS PROGRAM (ETV)	\$373,762	\$14,318	\$388,080
93.600	HEAD START	\$65,762	\$57,842	\$123,604
93.603	ADOPTION AND LEGAL GUARDIANSHIP INCENTIVE PAYMENTS	\$600,973	\$70,573	\$671,546
93.630	DEVELOPMENTAL DISABILITIES BASIC SUPPORT AND ADVOCACY GRANTS	\$176,039	\$582,544	\$758,583
93.643	CHILDREN'S JUSTICE GRANTS TO STATES	\$164,745	\$0	\$164,745
93.645	STEPHANIE TUBBS JONES CHILD WELFARE SERVICES PROGRAM	\$1,651,897	\$0	\$1,651,897
93.658	FOSTER CARE-TITLE IV-E	\$54,157,165	\$114,106	\$54,271,271
93.659	ADOPTION ASSISTANCE	\$44,902,901	\$441,274	\$45,344,175
93.667	SOCIAL SERVICES BLOCK GRANT	\$19,888,939	\$0	\$19,888,939
93.669	CHILD ABUSE AND NEGLECT STATE GRANTS	\$37,670	\$106,466	\$144,136
00.074	FAMILY VIOLENCE PREVENTION AND SERVICES/DOMESTIC VIOLENCE	40	\$005.000	#005 000
93.671	SHELTER AND SUPPORTIVE SERVICES CHAFEE FOSTER CARE INDEPENDENCE PROGRAM	\$0 \$965,188	\$895,328	\$895,328 \$1,445,697
93.674 93.732	MENTAL AND BEHAVIORAL HEALTH EDUCATION AND TRAINING GRANTS	\$311,032	\$480,509 \$0	\$1,445,697
JJ.1 JZ	STATE PUBLIC HEALTH APPROACHES FOR ENSURING QUITLINE CAPACITY -		Ψ	ψ511,052
93.735	FUNDED IN PART BY PREVENTION AND PUBLIC HEALTH FUNDS (PPHF)	\$92,881	\$0	\$92,881

FEDERAL CFDA / GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	STATE OF WEST VIRGINIA EXPENDITURES	TOTAL SUBRECIPENT EXPENDITURES	TOTAL FEDERAL EXPENDITURES
	PPHF: HEALTH CARE SURVEILLANCE/HEALTH STATISTICS- SURVEILLANCE			
	PROGRAM ANNOUNCEMENT: BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM FINANCED IN PART BY PREVENTION AND PUBLIC HEALTH FUNDS			
93.745	(PPHF) CHILD LEAD POISONING PREVENTION SURVEILLANCE FINANCED IN PART	\$225,844	\$0	\$225,844
93.753	BY PREVENTION AND PUBLIC HEALTH (PPHF) PROGRAM STATE AND LOCAL PUBLIC HEALTH ACTIONS TO PREVENT OBESITY,	\$57,605	\$0	\$57,605
93.757	DIABETES, HEART DISEASE, AND STROKE (PPHF) PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT FUNDED	\$79,091	\$207,146	\$286,237
93.758	SOLELY WITH PREVENTION AND PUBLIC HEALTH FUNDS (PPHF)	\$588,481	\$220,906	\$809,387
93.767	CHILDREN'S HEALTH INSURANCE PROGRAM CENTERS FOR MEDICARE AND MEDICAID SERVICES (CMS) RESEARCH,	\$74,715,584	\$0	\$74,715,584
93.779	DEMONSTRATIONS AND EVALUATIONS	\$104,320	\$295,440	\$399,760
93.788	OPIOID STR	\$2,058,409	\$4,033,055	\$6,091,464
93.791	MONEY FOLLOWS THE PERSON REBALANCING DEMONSTRATION	\$1,676,100	\$1,413,415	\$3,089,515
93.800	ORGANIZED APPROACHES TO INCREASE COLORECTAL CANCER SCREENING	\$421,263	\$94,300	\$515,563
00.000	DOMESTIC EBOLA SUPPLEMENT TO THE EPIDEMIOLOGY AND	ψ 12 1,200	ψο 1,000	ψο.ο,σσσ
93.815	LABORATORY CAPACITY FOR INFECTIOUS DISEASES (ELC) HOSPITAL PREPAREDNESS PROGRAM (HPP) EBOLA PREPAREDNESS AND	\$32,268	\$41,344	\$73,612
93.817	RESPONSE ACTIVITIES	\$0	\$4,480	\$4,480
93.859***	BIOMEDICAL RESEARCH AND RESEARCH TRAINING (NOTE 3)	\$804,554	\$0	\$804,554
93.865***	CHILD HEALTH AND HUMAN DEVELOPMENT EXTRAMURAL RESEARCH	\$3,832	\$0	\$3,832
	MATERNAL, INFANT AND EARLY CHILDHOOD HOME VISITING GRANT PROGRAM AND MATERNAL, INFANT, AND EARLY CHILDHOOD HOME	**,***	**	******
93.870	VISITING CLUSTER	\$350,624	\$7,112,776	\$7,463,400
00.07 0	CANCER PREVENTION AND CONTROL PROGRAMS FOR STATE,	φοσσ,σ2 .	ψ.,,	ψ1,100,100
93.898	TERRITORIAL AND TRIBAL ORGANIZATIONS	\$1,670,020	\$907,649	\$2,577,669
	GRANTS TO STATES FOR OPERATION OF STATE OFFICES OF RURAL	* ., ,	*****	4 =,011,000
93.913	HEALTH	\$126.612	\$25,000	\$151,612
93.917	HIV CARE FORMULA GRANTS	\$1,997,364	\$2,036,333	\$4,033,697
00.011	SCHOLARSHIPS FOR HEALTH PROFESSIONS STUDENTS FROM DISADVANTAGED BACKGROUNDS - SCHOLARSHIPS FOR DISADVANTAGED	Ψ1,007,001	ΨΣ,000,000	ψ1,000,007
93.925**	STUDENTS (SDS)	\$650.000	\$0	\$650.000
93.925		* ,		,
	HIV PREVENTION ACTIVITIES-HEALTH DEPARTMENT BASED HUMAN IMMUNODEFICIENCY VIRUS (HIV)/ACQUIRED IMMUNODEFICIENCY	\$598,506	\$70,360	\$668,866
93.944	VIRUS SYNDROME (AIDS) SURVEILLANCE ASSISTANCE PROGRAMS FOR CHRONIC DISEASE PREVENTION AND	\$164,540	\$0	\$164,540
93.945	CONTROL	\$82,115	\$56,350	\$138,465
	COOPERATIVE AGREEMENTS TO SUPPORT STATE-BASED SAFE			
93.946	MOTHERHOOD AND INFANT HEALTH INITIATIVE PROGRAMS	\$104,777	\$0	\$104,777
93.958	BLOCK GRANTS FOR COMMUNITY MENTAL HEALTH SERVICES BLOCK GRANTS FOR PREVENTION AND TREATMENT OF SUBSTANCE	\$215,782	\$3,267,645	\$3,483,427
93.959	ABUSE COAL MINERS RESPIRATORY IMPAIRMENT TREATMENT CLINICS AND	\$506,266	\$7,512,391	\$8,018,657
93.965	SERVICES	\$130,552	\$1,172,930	\$1,303,482
	SEXUALLY TRANSMITTED DISEASES (STD) PREVENTION AND CONTROL			
93.977	GRANTS	\$530,357	\$0	\$530,357
93.991	PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT	\$632,702	\$57,369	\$690,071
93.994	MATERNAL AND CHILD HEALTH SERVICES BLOCK GRANT TO THE STATES	\$4,286,276	\$2,682,135	\$6,968,411
	AGING CLUSTER			
00.044	SPECIAL PROGRAMS FOR THE AGING-TITLE III, PART B-GRANTS FOR	#400 =cc	#0.000.c=c	#0.074.C.17
93.044	SUPPORTIVE SERVICES AND SENIOR CENTERS	\$133,569	\$2,938,378	\$3,071,947
00.045	SPECIAL PROGRAMS FOR THE AGING-TITLE III, PART C-NUTRITION	6405.00=	Φ4.04.4.0E=	#4.000.000
93.045	SERVICES	\$195,607	\$4,614,055	\$4,809,662
93.053	NUTRITION SERVICES INCENTIVE PROGRAM	\$0 \$329,176	\$1,263,098 \$8,815,531	\$1,263,098 \$9,144,707
	TOTAL AGING CLUSTER	⊅ 3∠9,1/6	φο,ο ι ο ,531	Ф9, 144,707

FEDERAL CFDA / GRANT/ CONTRACT NUMBER	NAME OF PROGRAM	STATE OF WEST VIRGINIA EXPENDITURES	TOTAL SUBRECIPENT EXPENDITURES	TOTAL FEDERAL EXPENDITURES
	CCDF CLUSTER			
93.575	CHILD CARE AND DEVELOPMENT BLOCK GRANT	\$24,836,815	\$9,793,482	\$34,630,297
	CHILD CARE MANDATORY AND MATCHING FUNDS OF THE CHILD CARE AND			
93.596	DEVELOPMENT FUND	\$13,804,669	\$3,615,090	\$17,419,759
	TOTAL CCDF CLUSTER	\$38,641,484	\$13,408,572	\$52,050,056
	MEDICAID CLUSTER			
93.775	STATE MEDICAID FRAUD CONTROL UNITS	\$819,550	\$0	\$819,550
	STATE SURVEY AND CERTIFICATION OF HEALTH CARE PROVIDERS AND			
93.777	SUPPLIERS (TITLE XVIII) MEDICARE	\$4,175,687	\$0	\$4,175,687
93.778	MEDICAL ASSISTANCE PROGRAM	\$3,248,834,516	\$3,815,145	\$3,252,649,661
ARRA 93.778	ARRA - MEDICAL ASSISTANCE PROGRAM	\$5,816,407	\$0	\$5,816,407
	TOTAL MEDICAID CLUSTER	\$3,259,646,160	\$3,815,145	\$3,263,461,305
93.U21	CLINICAL LABORATORY IMPROVEMENT AMENDMENTS	\$82,499	\$0	\$82,499
93.U22	VITAL STATISTICS COOP PROGRAM	\$200,567	\$0	\$200,567
93.U23	FOOD INSPECTIONS	\$18,903	\$0	\$18,903
93.U24	MAMMOGRAPHY QUALITY ACT	\$3,016	\$0	\$3,016
93.U25	FDA TOBACCO ENFORCEMENT	\$524,963	\$0	\$524,963
93.U26	TOBACCO WORKPLAN	\$516,766	\$0	\$516,766
93.U27	COLLEGIATE RECOVERY PROGRAM	\$10,102	\$0	\$10,102
93.U28	FEDRAL FOOD, DRUG AND COSMETIC ACT	\$2,315	\$0	\$2,315
TOTAL DEPARTMENT OF I	HEALTH AND HUMAN SERVICES	\$3,650,449,176	\$108,335,395	\$3,758,784,571
	DNAL AND COMMUNITY SERVICE			
94.003	STATE COMMISSIONS	\$303,534	\$0	\$303,534
94.006	AMERICORPS	\$12,654	\$3,614,542	\$3,627,196
94.009	TRAINING AND TECHNICAL ASSISTANCE	\$171,152	\$0	\$171,152
94.013	VOLUNTEERS IN SERVICE TO AMERICA	\$53,957	\$0	\$53,957
94.021	VOLUNTEER GENERATION FUND	\$68,406	\$132,376	\$200,782
TOTAL CORPORATION FOR	R NATIONAL AND COMMUNITY SERVICE	\$609,703	\$3,746,918	\$4,356,621
EXECUTIVE OFFICE OF TH	IE PRESIDENT			
95.001	HIGH INTENSITY DRUG TRAFFICKING AREAS PROGRAM (NOTE 3)	\$737,562	\$0	\$737,562
TOTAL EXECUTIVE OFFICE		\$737,562	\$0	\$737,562
		,		
SOCIAL SECURITY ADMIN	ISTRATION			
	SOCIAL SECURITY-DISABILITY INSURANCE (DI) AND DISABILITY			
96.001	INSURANCE/SSI CLUSTER	\$18,004,301	\$0	\$18,004,301
96.U29	DEATH RECORDS	\$4	\$0	\$4
96.U30	ENUMERATION AT BIRTH	\$80,137	\$0	\$80,137
TOTAL SOCIAL SECURITY	ADMINISTRATION	\$18,084,442	\$0	\$18,084,442
DEPARTMENT OF HOMELA	AND SECURITY			
97.012	BOATING SAFETY FINANCIAL ASSISTANCE	\$452,495	\$0	\$452,495
	COMMUNITY ASSISTANCE PROGRAM STATE SUPPORT SERVICES ELEMENT			
97.023	(CAP-SSSE)	\$202,061	\$6,720	\$208,781
	DISASTER GRANTS - PUBLIC ASSISTANCE (PRESIDENTIALLY DECLARED			
97.036	DISASTERS)	\$19,550,117	\$13,709,411	\$33,259,528
97.039	HAZARD MITIGATION GRANT	\$12,731	\$2,310,497	\$2,323,228
97.041	NATIONAL DAM SAFETY PROGRAM	\$78,082	\$0	\$78,082
97.042	EMERGENCY MANAGEMENT PERFORMANCE GRANTS	\$2,993,406	\$1,873,938	\$4,867,344
97.044	ASSISTANCE TO FIREFIGHTERS GRANT	\$170,088	\$0	\$170,088
97.045	COOPERATING TECHNICAL PARTNERS	\$533,752	\$0	\$533,752
97.047	PRE-DISASTER MITIGATION	(\$29,576)	\$0	(\$29,576)
97.056	PORT SECURITY GRANT PROGRAM	\$72,568	\$0	\$72,568
97.067	HOMELAND SECURITY GRANT PROGRAM	\$602,292	\$2,698,578	\$3,300,870
97.088	DISASTER ASSISTANCE PROJECTS	\$49,731	\$1,212,832	\$1,262,563
TOTAL DEPARTMENT OF I	HOMELAND SECURITY	\$24,687,747	\$21,811,976	\$46,499,723

		STATE OF WEST	TOTAL	
FEDERAL CFDA / GRANT/		VIRGINIA	SUBRECIPENT	TOTAL FEDERAL
CONTRACT NUMBER	NAME OF PROGRAM	EXPENDITURES	EXPENDITURES	EXPENDITURES
U.S AGENCY FOR INTERN	IATIONAL DEVELOPMENT			
	USAID DEVELOPMENT PARTNERSHIPS FOR UNIVERSITY COOPERATION			
98.012	AND DEVELOPMENT	\$25,002	\$0	\$25,002
TOTAL U.S AGENCY FOR	INTERNATIONAL DEVELOPMENT	\$25,002	\$0	\$25,002
TOTAL EXPENDITURES C	F FEDERAL AWARDS	\$5,762,077,686	\$612,709,937	\$6,374,787,623

^{*} HIGHWAY PLANNING AND CONSTRUCTION CLUSTER, TOTAL STATE OF WEST VIRGINIA EXPENDITURES \$387,359,364 TOTAL SUBRECIPIENT EXPENDITURES \$7,561,924 AND TOTAL FEDERAL EXPENDITURES \$394,921,288.

The accompanying notes are an integral part of this schedule.

^{**} STUDENT FINANCIAL ASSISTANCE CLUSTER, TOTAL STATE OF WEST VIRGINIA EXPENDITURES \$590,606,881 TOTAL SUBRECIPIENT EXPENDITURES \$0 AND TOTAL FEDERAL EXPENDITURES \$590,606,881.

^{***} RESEARCH AND DEVELOPMENT CLUSTER, TOTAL STATE OF WEST VIRGINIA EXPENDITURES \$6,958,604, TOTAL SUBRECIPIENT EXPENDITURES \$3,905,437, AND TOTAL FEDERAL EXPENDITURES \$10,864,041.

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 Catalog of Federal Domestic Assistance (CFDA) 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 CFDA number is not available.

The Schedule includes noncash items such as Food Stamps (CFDA number 10.551), State Administrative Expense for Child Nutrition (CFDA number 10.560), and Donation of Federal Surplus Personal Property (CFDA number 39.003). All items are valued based on amounts as established by the federal grantor agency. The Schedule also includes Federal Direct Student Loans (CFDA number 84.268) that are made directly to individual students.

NOTE 2. INDIRECT COST RATE

Per Uniform Guidance 2 CFR § 200.510(b)(6), auditees are required to disclose whether or not 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, 2019, with continuing compliance requirements, are as follows:

$\underline{\text{CFDA}}$		
<u>Number</u>	Name of Program	Ending Balance
	Economic Adjustment Assistance and Economic Development	
11.307	Cluster	\$ 4,562,654
84.038	Federal Perkins Loan (FPL) – Federal Capital Contributions	32,947,126
93.264	Nurse Faculty Loan Program (NFLP)	164,537
93.342	Health Professions Student Loans, Including Primary Care	
	Loans and Loans for Disadvantaged Students (HPSL/PCL/LDS)	6,767,986
93.364	Nursing Student Loans (NSL)	616,536
	Total Loans Outstanding	<u>\$45,058,839</u>

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 Comprehensive Annual Financial Report for the fiscal year ended June 30, 2019. The West Virginia Housing Development Fund and the West Virginia Drinking Water Treatment Revolving Loan Fund, which is a discretely presented component unit and a proprietary fund, respectively, 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 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 HDTA18 and HDTA19.

The West Virginia Research Corporation passed funds to the West Virginia School of Osteopathic Medicine for CFDA Number 93.859 with pass-through entity identifying number 12-303-WVSOM-5, and also to Shepherd University for CFDA Number 43.008 with pass-through identifying number 91-175C-SU and for CFDA Number 93.859 with pass-through identifying number 01-054B-SU-7. The West Virginia Research Corporation also passed funds to the West Virginia Geological and Economic Survey for CFDA Number 81.087 with pass-through identifying number 17-463-WVGES.

The Marshall University Research Corporation passed funds to the West Virginia School of Osteopathic Medicine for CFDA Number 93.859 with pass-through identifying numbers P1800873, P1801984, and P1902138. The Marshall University Research Corporation also passed funds to Shepherd University for CFDA Number 93.859 with pass-through identifying number P1900964.

The Battelle Research Institute and Tetra Tech passed funds to the West Virginia Geological and Economic Survey for CFDA Number 81.089 with pass-through identifying numbers 354860, 3377572, 507700, and 1137982.

NOTE 6. UNEMPLOYMENT INSURANCE PROGRAM (UI) (CFDA NUMBER 17.225)

The U.S. Department of Labor, in consultation with the Office of Management and Budget officials, has determined that for the purpose of audits and reporting under the Uniform Guidance, state UI funds as well as federal funds should be considered federal awards for determining Type A programs. 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 CFDA number 17.225:

	Beginning Balance July 1, 2018	Receipts	Expenditures	Ending Balance June 30, 2019
		<u> </u>		
State UI Funds	\$ (487,403)	\$ 372,583,824	\$ 373,801,719	\$ (1,705,298)
Federal UI Funds	854,309	13,596,475	13,534,012	916,772
Total	\$ 366,906	\$ 386,180,299	\$ 387,335,731	\$ (788,526)

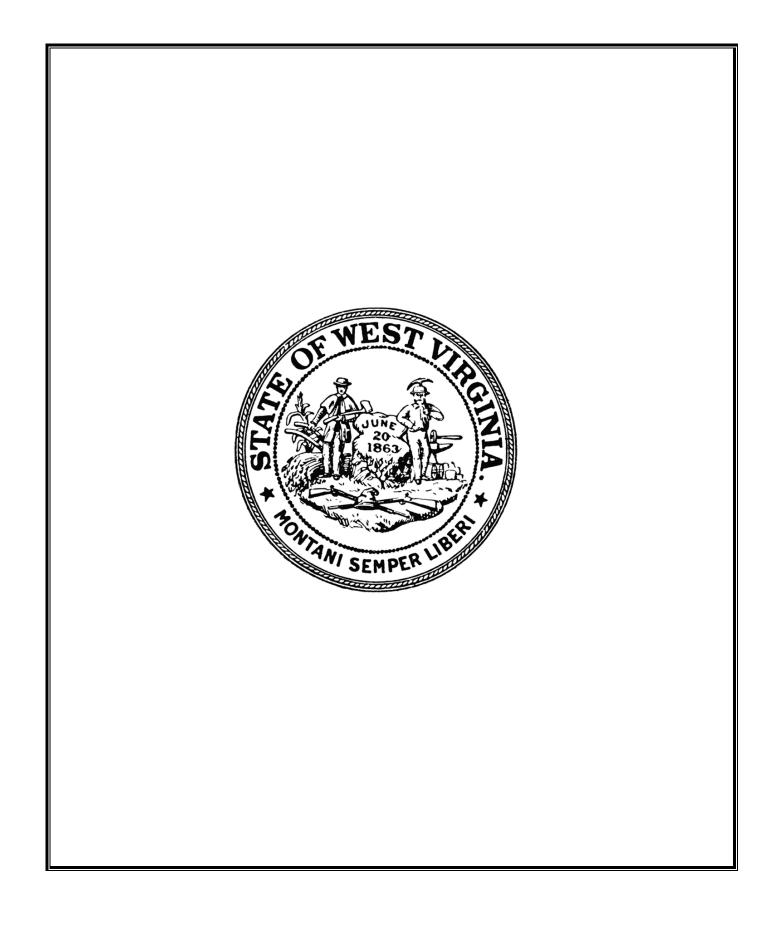
NOTE 7. APPROVED PROJECT WORKSHEETS

The State incurred eligible expenditures in FY 2018 and the Federal Emergency Management Agency (FEMA) approved the State's project worksheets in FY 2019. The State recorded the eligible expenditures of \$4,447,056 in CFDA 97.036 on this year's SEFA.

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 University Research Corporation	<u>\$ 102,788,776</u>
Marshall University Research Corporation	<u>\$ 19,222,038</u>
West Virginia State University Research and Development Corporation	<u>\$ 10,636,540</u>
West Virginia Housing Development Fund	<u>\$ 188,864,526</u>
West Virginia Drinking Water Treatment Revolving Loan Fund	\$ 8,992,852



SCHEDULE OF FINDINGS AND QUESTIONED COSTS

STATE OF WEST VIRGINIA SCHEDULE OF FINDINGS AND QUESTIONED COSTS for the Year Ended June 30, 2019

Section I. Summary of Auditor's Results

Financial statements: Type of report the auditors issued on whether the financial statements audited were prepared in accordance with GAAP (unmodified, qualified, adverse or disclaimer):	Unm	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 auditors' report issued on compliance for major federal programs (unmodified, qualified, adverse or disclaimer):	progra: Pla Clu Assist: Ho Adopt He: (CHI: State Op quali Insurai Public En	Unmodified for all major federal programs except for the Highway Planning and Construction Cluster, Student Financial Assistance Cluster, Low-Income Home Energy Assistance, Adoption Assistance, Children's Health Insurance Program (CHIP), Medicaid Cluster, and State Targeted Response to the Opioid Crisis, which were qualified and Unemployment Insurance (UI), Disaster Grants – Public Assistance (Presidentially Declared Disasters), and Emergency Management Performance Grants, which were adverse		
Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?	X	Yes		No

STATE OF WEST VIRGINIA SCHEDULE OF FINDINGS AND QUESTIONED COSTS for the Year Ended June 30, 2019

Identification of Major Federal Programs:

Audited by Ernst & Young:

CFDA Number(s)	Reportable Findings	Name of Federal Program or Cluster
10.553/10.555/ 10.556/10.559	None	Child Nutrition Cluster
10.557	2019-001	Special Supplemental Nutrition Program for Women, Infants, and Children
12.401	2019–002, 003, 004	National Guard Military Operations and Maintenance (O&M) Projects
14.228	2019–005	Community Development Block Grants/State's Program and Non-Entitlement Grants in Hawaii
17.225	2019–006, 007, 008, 009, 010	Unemployment Insurance
20.205/20.219/ 20.224/23.003	2019–011, 012, 013, 014	Highway Planning and Construction Cluster
84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925	2019–015, 016, 017, 018, 019, 020, 021, 022	Student Financial Assistance Cluster
84.027/84.173	2019–023	Special Education Cluster (IDEA)
93.558	2019–024, 025, 026, 027	Temporary Assistance for Needy Families (TANF) Cluster
93.568	2019–027, 028, 029	Low-Income Home Energy Assistance
93.575/93.596	2019–027, 030	Child Care and Development Fund (CCDF) Cluster
93.658	2019–027	Foster Care—Title IV-E
93.659	2019–027, 031	Adoption Assistance
93.667	None	Social Services Block Grant
93.767	2019–027, 034	Children's Health Insurance Program (CHIP)

Identification of Major Federal Programs (continued):

Audited by Ernst & Young:

ter
eclared Disasters)

Dollar threshold used to distinguish between Type A and B programs:	<u>\$</u>	19,124,363		
Auditee qualified as low-risk auditee		Yes	X	No

Section II. Financial Statement Findings

None Reported

Section III. Federal Award Findings and Questioned Costs

Reference Number	Findings	Questioned Costs
2019–001	Period of Performance	\$178 – CFDA #10.557 Grant Award 191WV701W1003
2019–002	Matching	\$3,253 – CFDA #12.401 Grant Award W912L8-19-2-1001
2019–003	Period of Performance	\$30,372 – CFDA #12.401 Grant Award W912L8-19-2-1001
2019–004	Activities Allowed or Unallowed; Allowable Costs/Cost Principles; and Period of Performance Internal Controls	N/A
2019–005	Internal Controls Over Reporting	N/A
2019-006	Eligibility	\$1,210 – CFDA #17.225
2019–007	Missing Supporting Documentation for Activities Allowed or Unallowed; Allowable Costs/Cost Principles; and Eligibility	\$3,449 – CFDA #17.225
2019–008	Reporting	Unknown
2019–009	Special Tests and Provisions – Match with IRS 940 FUTA Tax Form	N/A
2019–010	Special Tests and Provisions – Unemployment Insurance Program Integrity - Overpayments	\$8,235 – CFDA #17.225
2019-011	Federal Highways Administration Period of Performance	Unknown
2019-012	Wage Rate Requirements	\$1,434,600 - CFDA #20.205
2019–013	Special Tests and Provisions – Utilities - Incorrect Population	N/A
2019–014	Administration of Engineering and Design-Related Service Contracts	Unknown
2019–015	Internal Control Over Reporting	N/A
2019–016	Special Tests and Provisions – Verification	\$2,390 – Marshall University CFDA #84.063 Grant Award P063P180425 \$1,632 – Shepherd University CFDA #84.063 Grant Award P063P180426
2019–017	Special Tests and Provisions – Disbursements to or on Behalf of Students	N/A

Section III. Federal Award Findings and Questioned Costs (continued):

Reference Number	Findings	Questioned Costs
2019–018	Special Tests and Provisions – Return of Title IV Funds	\$1,920 – Marshall University CFDA #84.268 Grant Award P268K190425 \$7,312 – West Liberty University - \$7,011 CFDA #84.268 Grant Award P268K190427; \$301 CFDA #84.063 Grant Award P063P180427 \$3,178 – Bluefield College CFDA #84.268 Grant Award P268K190422 \$13,100 – WVSOM CFDA #84.268 Grant Award P268K196656 \$32,487 – WVU - \$26,960 CFDA #84.268 Grant Award P268K190429; \$5,527 CFDA #84.063 Grant Award P063P180429
2019-019	Special Tests and Provisions – Enrollment Reporting	N/A
2019–020	Special Tests and Provisions –Borrower Data Transmission and Reconciliation	N/A
2019–021	Special Tests and Provisions – Program Eligibility Internal Controls	N/A
2019–022	Special Tests and Provisions – Gramm-Leach-Bliley Act – Student Information Security	N/A
2019–023	Period of Performance	\$20,833 – CFDA #84.027 Grant Award H027A180075-18A
2019–024	Allowability and Eligibility	\$331 – CFDA #93.558 – \$288 Grant Award 2018 – 2018G996115, \$43 Grant Award 2019 – 2019G996115
2019–025	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	N/A
2019-026	Special Tests and Provisions – Penalty for Refusal to Work	Unknown
2019–027	DHHR Information System and Related Business Process Controls	N/A
2019–028	Eligibility	\$1,736 – CFDA #93.568 Grant Award G-1901WVLIEA \$80 – CFDA #93.568 Grant Award G-18B1WVLEA

Section III. Federal Award Findings and Questioned Costs

(continued):

Reference Number	Findings	Questioned Costs
2019-029	Missing Supporting Documentation	Unknown
2019–030	Special Tests and Provisions – Fraud Detection and Repayment Internal Controls	N/A
2019–031	Eligibility Documentation	\$2,632 – CFDA #93.659; \$1,735 related to Grant Award 1901WVADPT and \$897 related to Grant Award 1801WVADPT
2019–032	Special Tests and Provisions – Utilization Control and Program Integrity Internal Controls	N/A
2019–033	Special Tests and Provisions – Medicaid Fraud Control Unit Internal Controls	N/A
2019–034	Eligibility	\$12,566 – CFDA #93.778 Grant Award 1905WV5MAP \$3,782 – CFDA #93.767 Grant Award 1905WV5021
2019-035	Matching, Level of Effort, Earmarking	\$473,317 – CFDA #93.788
2019-036	Subrecipient Monitoring	N/A
2019-037	Special Tests and Provisions – Key Personnel	Unknown
2019-038	Schedule of Expenditures of Federal Awards	Unknown
2019-039	Internal Controls Over Reporting	N/A
2019–040	Subrecipient Monitoring	\$237,229 – CFDA #97.036 – \$45,803 Grant Award FEMA- 4359-DR-WV, \$191,426 Grant Award FEMA-4273-DR-WV
2019-041	Subrecipient Cash Management	N/A
2019-042	Earmarking	Unknown
2019-043	Period of Performance Missing Population	Unknown
2019-044	Reporting	Unknown
2019-045	Reporting	N/A
2019–046	Special Tests and Provisions - Training and Exercise Plan Requirements	N/A
2019–047	Special Tests and Provisions - Closeout Reporting Requirements	N/A

2019-001 PERIOD OF PERFORMANCE

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Health and Human Resources Special Supplemental Nutrition Program for Women,

Infants and Children (WIC) 10.557

Grant Award 191WV701W1003

Criteria: 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 200.309 states that "a non-Federal entity may charge to the Federal award only

allowable costs incurred during the period of performance."

Condition: Two of the five transactions tested from grants with performance period beginning dates

during the audit period was incorrectly charged to the grant. Expenditures were incurred prior

to the period of performance beginning on October 1, 2018.

Ouestioned Costs: \$178 - CFDA #10.557 Grant Award 191WV701W1003

Context: Total federal expenditures for the Special Supplemental Nutrition Program for Women,

Infants and Children (WIC) were \$31,767,422 for the year ended June 30, 2019. The instance recorded outside the period of performance represents \$178 of total expenditures tested for

grants with performance period beginning dates during the audit period of \$68,030.

Cause: WIC does not have adequate internal controls and policies and procedures around the review

and approval of transactions to ensure that allowable costs are incurred during the period of

performance.

Effect: WIC charged unallowable costs to the grant.

Recommendation: We recommend that WIC implement more effective internal controls and policies and

procedures around the review and approval of transactions to ensure that expenditures

charged to the grant are incurred during the period of performance.

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

Responsible Officials:

2019-002 MATCHING

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Defense

National Guard Military Operations and Maintenance

(O&M) Projects

12.401

Grant Award W912L8-19-2-1001
Grant Award W912L8-19-2-1002
Grant Award W912L8-19-2-1003
Grant Award W912L8-19-2-1004
Grant Award W912L8-19-2-1005
Grant Award W912L8-19-2-1007
Grant Award W912L8-19-2-1008
Grant Award W912L8-19-2-1010
Grant Award W912L8-19-2-1014
Grant Award W912L8-19-2-1021
Grant Award W912L8-19-2-1022
Grant Award W912L8-19-2-1023
Grant Award W912L8-19-2-1024
Grant Award W912L8-19-2-1040
Grant Award W912L8-19-2-1040
Grant Award W912L8-19-2-1041

Criteria:

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 200.306(b) states that "For all Federal awards, any shared costs or matching funds and all contributions, including cash and third party in-kind contributions, must be accepted as part of the non-Federal entity's cost sharing or matching."

Per Appendix 1 of the Army National Guard (ARNG) Facilities Program Agreement project repair ratio is to be allocated at 50% federal.

Condition: One of the sixty transactions tested from grants with matching requirements was not allocated

the appropriate federal share. The federal grant was overcharged by using a 65% rate instead

of the required 50%.

Questioned Costs: \$3,253 – CFDA #12.401 Grant Award W912L8-19-2-1001

Context: Total federal expenditures for National Guard Military Operations and Maintenance (O&M)

Projects program were \$28,297,588 for the year ended June 30, 2019. The instance noted where the federal share was incorrect resulted in The National Guard Military O&M overcharging the federal grant by \$3,253. The total expenditures tested for the matching

requirements was \$55,431.

Cause: The National Guard Military O&M Projects does not have adequate review and approval

controls and policies and procedures in place to ensure that expenditures are being charged

appropriately to the grant at the correct matching rate.

2019-002 MATCHING (continued)

Effect: The National Guard Military O&M Projects drew down more federal funds than allowable

because an incorrect match rate was used.

Recommendation: We recommend that the National Guard Military Operations and Maintenance O&M Projects

implement more effective review and approval controls and policies and procedures to ensure

that appropriate expenditures are matched at the appropriate rate.

Views of Responsible Officials:

2019-003 PERIOD OF PERFORMANCE

(Repeat of Prior Year Finding 2018–002)

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Defense

National Guard Military Operations and Maintenance 12.401

(O&M) Projects

Grant Award W912L8-19-2-1001
Grant Award W912L8-19-2-1002
Grant Award W912L8-19-2-1003
Grant Award W912L8-19-2-1004
Grant Award W912L8-19-2-1005
Grant Award W912L8-19-2-1007
Grant Award W912L8-19-2-1010
Grant Award W912L8-19-2-1010
Grant Award W912L8-19-2-1014
Grant Award W912L8-19-2-1021
Grant Award W912L8-19-2-1022
Grant Award W912L8-19-2-1023
Grant Award W912L8-19-2-1024
Grant Award W912L8-19-2-1040
Grant Award W912L8-19-2-1040
Grant Award W912L8-19-2-1041

Criteria:

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 200.309 states that "a non-Federal entity may charge to the Federal award only allowable costs incurred during the period of performance."

National Guard Bureau (NGB) 5-1, Chapter 11 requires that "within 90 days after the end of the Federal fiscal year or upon termination of the CA, whichever is earlier, the recipient shall promptly deliver to the United States Property and Fiscal Office (USPFO) a final accounting of all funding and disbursements under the agreement for the fiscal year."

Condition:

Six of the 15 transactions tested from grants with performance period beginning dates during the audit period were incorrectly charged to the grant. Expenditures were incurred prior to the period of performance beginning on October 1, 2018.

Questioned Costs: \$30,372 – CFDA #12.401 Grant Award W912L8-19-2-1001

Context: Total federal expenditures for National Guard Military Operations and Maintenance (O&M)

Projects program were \$28,297,588 for the year ended June 30, 2019. The six instances recorded outside the period of performance represent \$30,372 of total expenditures tested for grants with performance period beginning dates during the audit period of \$44,309. The total

expenditures subject to period of performance testing was \$90,011.

2019-003 PERIOD OF PREFORMANCE

(Repeat of Prior Year Finding 2018–002) (continued)

Cause: The National Guard Military Operations and Maintenance (O&M) Projects does not have

adequate review and approval controls and policies and procedures in place to ensure that

allowable costs are incurred during the period of performance.

Effect: The National Guard Military Operations and Maintenance (O&M) Projects expenditure were

charged to the grant that are not allowable causing federal funds to be drawn down for

unallowable costs.

Recommendation: We recommend that the National Guard Military Operations and Maintenance (O&M)

Projects implement more effective review and approval controls and policies and procedures to ensure that expenditures incurred prior to the period of performance beginning date are not

charged to the grant.

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

Responsible Officials:

2019–004 ACTIVITIES ALLOWED OR UNALLOWED; ALLOWABLE COSTS/COST PRINCIPLES; AND PERIOD OF PERFORMANCE INTERNAL CONTROLS

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Defense

National Guard Military Operations and Maintenance 12.401

(O&M) Projects

Grant Award W912L8-19-2-1001
Grant Award W912L8-19-2-1002
Grant Award W912L8-19-2-1003
Grant Award W912L8-19-2-1004
Grant Award W912L8-19-2-1005
Grant Award W912L8-19-2-1007
Grant Award W912L8-19-2-1008
Grant Award W912L8-19-2-1010
Grant Award W912L8-19-2-1014
Grant Award W912L8-19-2-1021
Grant Award W912L8-19-2-1022
Grant Award W912L8-19-2-1023
Grant Award W912L8-19-2-1024
Grant Award W912L8-19-2-1040
Grant Award W912L8-19-2-1040
Grant Award W912L8-19-2-1041

Criteria:

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 60 transactions of costs recorded during the latter part and after the period of performance for federal awards with period of performance ending dates during the audit period, and testing of 60 transactions for which the obligation had not been liquidated as of the end of the period of performance, five payroll transactions selected for testing were not properly approved for compliance with allowable activities, allowable costs, and period of performance compliance requirements prior to disbursement.

Questioned Costs: N/A

Context: Total federal expenditures for National Guard Military Operations and Maintenance (O&M)

Projects program were \$28,297,588 for the year ended June 30, 2019.

Cause: The National Guard Military Operations and Maintenance (O&M) Projects does not have

adequate internal controls and policies and procedures in place to ensure that expenditures are properly approved for compliance with allowable activities, allowable costs, and period

of performance compliance requirements before disbursement.

Effect: The National Guard Military Operations and Maintenance (O&M) Projects may charge

expenditures to the grant that are not allowable causing the federal funds to be repaid.

2019–004 ACTIVITIES ALLOWED OR UNALLOWED; ALLOWABLE COSTS/COST PRINCIPLES; AND PERIOD OF PERFORMANCE INTERNAL CONTROLS (continued)

Recommendation: We recommend that the National Guard Military Operations and Maintenance (O&M)

Projects enhance review and approval controls and policies and procedures to ensure payroll expenditures are properly approved for compliance with allowable activities, allowable costs,

and period of performance compliance requirements before disbursement.

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

Responsible Officials:

2019-005 INTERNAL CONTROLS OVER REPORTING

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Housing and Urban Development Community Development Block Grants/State's Program

and Non-Entitlement Grants in Hawaii

14.228

Grant Award B14DC540001 Grant Award B15DC540001 Grant Award B16DC540001 Grant Award B17DC540001 Grant Award B16DL540001 Grant Award B18DC540001 Grant Award B08DN540001

Criteria: 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)."

OMB Circular A-133 section 300b states that the non-federal entity is responsible for maintaining "internal control over Federal programs that provides reasonable assurance that management is managing Federal awards in compliance with laws, regulations, and the provisions of contracts or grant agreements that could have a material effect on each of its

Federal programs."

Condition: The Quarterly Performance Reports (QPR) for the Disaster Recovery Grant Reporting

System (DRGR) were not appropriately reviewed and approved prior to submission.

Questioned Costs: N/A

Context: Total federal expenditures for the Community Development Block Grants program were

\$23,842,372, for the year ended June 30, 2019.

Cause: West Virginia Community Advancement and Development (WVCAD) does not have

adequate review and approval control and policies and procedures in place over the reporting

process.

Effect: Reports could be filed with errors or lack of supporting documentation and not be identified

by management.

Recommendation: We recommend that WVCAD implement internal controls over the report submission

process. At a minimum, such controls should include a documented review and approval process that ensures reported amounts agree with supporting documentation. We recommend

that the review be performed by an individual independent of the data entry process.

Views of Responsible Officials:

2019-006 ELIGIBILITY

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Labor

Unemployment Insurance (UI)

Grant Award UI-31491-17-60-A-54 Grant Award UI-29875-17-55-A-54 Grant Award UI-31628-18-60-A-54 Grant Award UI-32737-19-55-A-54

Criteria:

2 CFR 200.303 requires 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)."

17.225

20 CFR part 604.3-5 states "A State may pay UC only to an individual who is able to work and available for work for the week for which UC is claimed; Whether an individual is able to work and available for work under paragraph (a) of this section must be tested by determining whether the individual is offering services for which a labor market exists. This requirement does not mean that job vacancies must exist, only that, at a minimum, the type of services the individual is able and available to perform is generally performed in the labor market. The State must determine the geographical scope of the labor market for an individual under its UC law; The requirement that an individual be able to work and available for work applies only to the week of unemployment for which UC is claimed. It does not apply to the reasons for the individual's separation from employment, although the separation may indicate the individual was not able to work or available for work during the week the separation occurred. This Part does not address the authority of States to impose disqualifications with respect to separations. This Part does not limit the States' ability to impose additional able and available requirements that are consistent with applicable Federal laws.

A State may consider an individual to be able to work during the week of unemployment claimed if the individual is able to work for all or a portion of the week claimed, provided any limitation on his or her ability to work does not constitute a withdrawal from the labor market; If an individual has previously demonstrated his or her ability to work and availability for work following the most recent separation from employment, the State may consider the individual able to work during the week of unemployment claimed despite the individual's illness or injury, unless the individual has refused an offer of suitable work due to such illness or injury.

2019–006 ELIGIBILITY (continued)

General application. A State may consider an individual to be available for work during the week of unemployment claimed under any of the following circumstances: The individual is available for any work for all or a portion of the week claimed, provided that any limitation placed by the individual on his or her availability does not constitute a withdrawal from the labor market. The individual limits his or her availability to work which is suitable for such individual as determined under the State UC law, provided the State law definition of suitable work does not permit the individual to limit his or her availability in such a way that the individual has withdrawn from the labor market. In determining whether the work is suitable, States may, among other factors, take into consideration the education and training of the individual, the commuting distance from the individual's home to the job, the previous work history of the individual (including salary and fringe benefits), and how long the individual has been unemployed."

Condition: During our testing of 60 claimant payments, we noted one claimant payment tested for \$114,

of the 60 tested for \$16,007 was calculated incorrectly. We also noted during our testing that five claimant payments for \$1,210, which includes the one claimant payment calculated

incorrectly, of the 60 tested for \$16,007, were outside the period of eligibility.

Questioned Costs: \$1,210 – CFDA #17.225

Context: Total federal disbursements for the UI program was \$387,335,731 for the year ended June 30,

2019.

Cause: The internal controls over the eligibility process were ineffective and did not prevent or detect

the calculation errors or the payment of benefits outside of the period of eligibility.

Effect: Workforce West Virginia (WWV) was not in compliance with the eligibility requirements,

which state that all benefits paid must be calculated correctly and paid within the period of

eligibility.

Recommendation: We recommend that management of WWV implement controls over the calculation of

benefits paid and establish a process to ensure payments are made within the period of

eligibility.

Views of Responsible Officials:

2019–007 MISSING SUPPORTING DOCUMENTATION FOR ACTIVITIES ALLOWED OR UNALLOWED; ALLOWABLE COSTS/COST PRINCIPLES; AND ELIGIBILITY

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Labor

Unemployment Insurance (UI) 17.225

Grant Award UI-31491-17-60-A-54 Grant Award UI-29875-17-55-A-54 Grant Award UI-31628-18-60-A-54 Grant Award UI-32737-19-55-A-54

Criteria: 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 200.508(d) says an auditee must "provide the auditor with access to personnel, accounts, books, records, supporting documentation, and other information as needed for the

auditor to perform the audit required by this part."

Condition: The management of Workforce West Virginia (WWV) was unable to provide timely

supporting documentation to the auditors. For 14 of 60 cases the Eligibility Review

Questionnaire form was not provided or was missing.

Questioned Costs: \$3,449 – CFDA #17.225

Context: Total federal disbursements for the Unemployment Insurance (UI) program were

\$387,335,731 for the year ended June 30, 2019. The 14 cases with missing documentation

totaled \$3,449 out of the total of \$16,007 related to the 60 cases selected for testing.

Cause: A lack of oversight resulted in inadequate retention of relevant supporting documentation.

Effect: The auditors were unable to determine if WWV was in compliance with the specified

requirements.

Recommendation: We recommend that WWV ensure that all documentation supporting transactions or

compliance requirements subject to audit be maintained and readily available if requested.

Timely receipt of supporting documentation is crucial for the completion of the audit.

Views of Responsible Officials:

2019-008 REPORTING

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Labor

Unemployment Insurance (UI) 17.225

Grant Award UI-31491-17-60-A-54 Grant Award UI-29875-17-55-A-54 Grant Award UI-31628-18-60-A-54 Grant Award UI-32737-19-55-A-54

Criteria: 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 200.508(d) says an auditee must "provide the auditor with access to personnel, accounts, books, records, supporting documentation, and other information as needed for the

auditor to perform the audit required by this part."

Condition: During our testing of 22 reports submitted, we noted two ETA 227 reports did not contain

documentation of review and approval. Further, for four ETA 9130, one ETA 581, two ETA 227 reports, and the Trade Act Participation Report (TAPR) selected for testing, either the report could not be produced or the supporting documentation was not available. Additionally, supporting documentation for the two ET 2208A reports could not be

substantiated.

Questioned Costs: Unknown

Context: Total federal disbursements for the Unemployment Insurance (UI) program were

\$387,335,731 for the year ended June 30, 2019.

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

Effect: Workforce West Virginia (WWV) was not in compliance with the reporting requirements.

Recommendation: We recommend that management of WWV implement internal controls over the reporting

process to ensure each report is reviewed by appropriate individuals familiar with the

reporting requirements to ensure that adequate audit documentation is maintained.

Views of Responsible Officials:

2019-009 SPECIAL TESTS AND PROVISIONS - MATCH WITH IRS 940 FUTA TAX FORM

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Labor

Unemployment Insurance (UI) 17.225

Grant Award UI-31491-17-60-A-54 Grant Award UI-29875-17-55-A-54 Grant Award UI-31628-18-60-A-54 Grant Award UI-32737-19-55-A-54

Criteria: 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)."

26 CFR 31.3302(a)-3(a) requires that States annually certify for each tax payer the total amount of contributions required to be paid under State Law for the calendar year and the amounts and dates of such payments in order for taxpayers to be allowed the credit against

the FUTA tax.

Condition: Five of the five verification requests received from the IRS tested were not properly approved.

For five of five field audits tested, the tax payments did not meet the stated criteria for the

FUTA tax credit allowance.

Questioned Costs: N/A

Context: Total federal disbursements for the Unemployment Insurance (UI) program were

\$387,335,731 for the year ended June 30, 2019.

Cause: The internal controls over the IRS 940 FUTA Tax Form matching process were not operating

effectively.

Effect: Workforce West Virginia (WWV) was not in compliance with the IRS 940 FUTA Tax Form

matching requirements, which state that the tax payments must meet the stated criteria for the

FUTA tax credit allowance.

Recommendation: We recommend that management of WWV implement internal controls over the IRS 940

FUTA Tax Form matching process to ensure all tax payments meet the stated criteria for

FUTA tax credit allowance.

Views of Responsible Officials:

2019–010 SPECIAL TESTS AND PROVISIONS – UNEMPLOYEMENT INSURANCE PROGRAM INTEGRITY - OVERPAYMENTS

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Labor

Unemployment Insurance (UI) 17.225

Grant Award UI-31491-17-60-A-54 Grant Award UI-29875-17-55-A-54 Grant Award UI-31628-18-60-A-54 Grant Award UI-32737-19-55-A-54

Criteria: 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)."

 $2\ CFR\ 200.508(d)$ says an auditee must "provide the auditor with access to personnel, accounts, books, records, supporting documentation, and other information as needed for the

auditor to perform the audit required by this part."

Pub. L. No. 112-40 states that States are (1) required to impose a monetary penalty (not less than 15 percent) on claimants whose fraudulent acts resulted in overpayments, and (2) States are prohibited from providing relief from charges to an employer's UI account when overpayments are the result of the employer's failure to respond timely or adequately to a request for information. States may continue to waive recovery of overpayments in certain

situations and must continue to offer the individual a fair hearing prior to recovery.

Condition: For four of the 60 overpayments selected for testing, the UI program did not provide

documentation to determine if the State is properly identifying and handling overpayments.

Questioned Costs: \$8,235 – CFDA #17.225

Context: Total federal expenditures for the UI program was \$387,335,731 for the year ended June 30,

2019. The four instances of noncompliance represent \$8,235 of a total population tested of

\$192,151.

Cause: The UI program does not have adequate internal controls and policies and procedures in place

over the UI Program Integrity – Overpayments requirements.

Effect: The UI program is not in compliance with the federal rules and regulations regarding the UI

Program Integrity - Overpayments requirements. Overpayment information may be

inaccurately reported.

Recommendation: We recommend that the UI program enhance its internal controls and policies and procedures

in place over the UI Program Integrity – Overpayments process and that supporting

documentation be retained.

Views of Responsible Officials:

2019–011 FEDERAL HIGHWAYS ADMINISTRATION PERIOD OF PERFORMANCE (Repeat of Prior Year Finding 2018–006)

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Transportation

Highway Planning and Construction Cluster 20.205/20.219/

20.224/23.003

Criteria: 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 200.309 requires that "a non-Federal entity may charge to the Federal award only allowable costs incurred during the period of performance and any costs incurred before the Federal awarding agency or pass-through entity made the Federal award that were authorized

by the Federal awarding agency or pass-through entity."

Condition: The West Virginia Division of Highway (the Division) had project agreements that had no

period of performance ending dates (end dates) in the award agreements. Thus, it cannot be determined whether costs incurred pursuant to those agreements were incurred within the

period of performance.

Questioned Costs: Unknown

Context: Total federal expenditures for the Highways Planning and Construction Cluster were

\$394,921,288 for the year ended June 30, 2019. Management identified program agreements from fiscal 2015 through fiscal 2019 that did not have end dates. Total federal expenditures

related to project agreements without end dates for fiscal year 2019 was \$22,660,057.

Cause: The Division does not have adequate review and approval procedures in place to ensure that

all projects had end dates.

Effect: The Division may be charging costs which were incurred outside of the period of performance

of the federal award which would be unallowable.

Recommendation: We recommend that the Division implement review and approval controls and policies and

procedures to ensure that all project agreements have end dates and that no additional costs

are incurred after such dates.

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

Responsible Officials:

2019-012 WAGE RATE REQUIREMENTS (Repeat of Prior Year Finding 2018-008)

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Transportation

Highway Planning and Construction Cluster 20.205/20.219/ 20.224/23.003

Criteria: 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).

40 USC 3141-3144 requires that all laborers and mechanics employed by contractors or subcontractors to work on construction contracts more than \$2,000 financed by Federal assistance funds must be paid wages not less than those established for the locality of the project (prevailing wage rates) by the U.S. Department of Labor (DOL). The contractor or

subcontractor must submit the required certified payrolls.

Condition: For one of the forty projects selected for testing, there was no documentation that the certified

payrolls were received or reviewed by an individual at the West Virginia Division of

Highways (the Division).

Questioned Costs: \$1,434,600 – CFDA #20.205

Context: Total federal payroll expenditures and total federal expenditures for the Highway Planning

and Construction Cluster program were \$63,551,038 and \$394,921,288, respectively, for the year ended June 30, 2019. The one project without certified payroll represents \$1,434,600 of expenditures out of a total population tested for wage rate requirements of \$58,596,615.

Cause: The Division does not have adequate internal controls and policies and procedures in place

to ensure that certified payrolls are being submitted and reviewed timely.

Effect: The Division is not in compliance with federal statutes, regulations, and the terms of the

conditions of the federal award. Laborers may not be paid wages at the DOL prevailing wage

rate.

Recommendation: We recommend that the Division implement more effective policies and procedures to ensure

that certified payrolls are being submitted and reviewed timely by program personnel.

Views of Responsible Officials:

2019-013 SPECIAL TESTS AND PROVISIONS - UTILITIES - INCORRECT POPULATION

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Transportation

Highway Planning and Construction Cluster 20.205/20.219/

20.224/23.003

Criteria: 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 200.302(a) states "(a) each state must expend and account for the Federal award in accordance with state laws and procedures for expending and accounting for the state's own funds. In addition, the state's and the other non-Federal entity's financial management systems, including records documenting compliance with Federal statutes, regulations, and the terms and conditions of the Federal award, must be sufficient to permit the preparation of reports required by general and program-specific terms and conditions; and the tracing of funds to a level of expenditures adequate to establish that such funds have been used according to the Federal statutes, regulations, and the terms and conditions of the Federal

award."

Condition: The West Virginia Division of Highways (the Division) was not able to provide a complete

and accurate population of utility expenditures charged to the Highway Planning and Construction cluster that agreed to the accounting records. For one of the nine utility expenditures selected for testing at the West Virginia Division of Highway (the Division), the project should not have been included in the overall population. The project was a state

project and not a federal project.

Questioned Costs: N/A

Context: Total federal expenditures for the Highway Planning and Construction Cluster program was

\$394,921,288 for the year ended June 30, 2019.

Cause: The Division does not have adequate internal controls and policies and procedures in place

surrounding the generation and review of populations provided to the auditor.

Effect: The auditor was unable to determine if the auditee was in compliance with the specified

compliance requirement.

Recommendation: We recommend that the Division implement more effective policies and procedures to ensure

that populations are complete and accurate.

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

Responsible Officials:

2019-014 ADMINISTRATION OF ENGINEERING AND DESIGN-RELATED SERVICE CONTRACTS

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Transportation

Highway Planning and Construction Cluster 20.205/20.219/ 20.224/23.003

Criteria:

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).

48 CFR part 31 indicates that contracting agencies (State DOTs) are required to accept the indirect cost rates for consultants and sub-consultants that have been established by a cognizant agency in accordance with the Federal Acquisition Regulation for 1-year applicable accounting periods, if such rates are not currently under dispute. As noted in 23 CFR section 172.11(c)(3) and 23 USC 112(b)(2)(C), consultants and sub-consultants providing engineering and design-related services contracts must certify to contracting agencies that costs used to establish indirect cost rates are in compliance with the applicable cost principles contained in the Federal Acquisition Regulation by submitting a "Certificate of Final Indirect Costs".

Condition:

For six of the fourteen consultants selected for testing at the West Virginia Division of Highways (the Division), the consultant did not submit a "Certificate of Final Indirect Costs" to the Division; therefore, the Division did not accept the appropriate indirect cost rates.

Questioned Costs: Unknown

Context: Total federal expenditures for the Highway Planning and Construction Cluster program was

\$394,921,288 for the year ended June 30, 2019.

Cause: The Division does not have adequate internal controls and policies and procedures in place

to ensure that consultants are submitting the "Certificate of Final Indirect Costs". Therefore,

the Division is not able to accept the appropriate indirect cost rates.

Effect: The Division is not in compliance with federal statutes, regulations, and the terms of the

conditions of the federal award. Expenditures may be charged to the grant that are

unallowable.

Recommendation: We recommend that the Division implement policies and procedures to ensure that all

consultants submit a "Certificate of Final Indirect Costs" so that the indirect cost rates can be

accepted by the Division.

Views of Responsible Officials:

2019-015 INTERNAL CONTROL OVER REPORTING

CFDA# **Federal Program Information:** Federal Agency and Program Name

U.S. Department of Education

Office of Student Financial Assistance Office of Post-Secondary Education

U.S. Department of Health and Human Services Health Resources and Services Administration

Student Financial Assistance (SFA) Cluster

84.007/84.033/ 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925

Criteria: 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 Virginia University - Parkersburg (WVU-P), Mountwest Community and Technical

> College (MCTC), and New River Community and Technical College (NRCTC) are responsible to ensure Pell payment data sent to the U.S. Department of Education through the Common Origination (COD) System is complete, accurate, and prepared in accordance with the required basis. WVU-P, MCTC, and NRCTC do not retain adequate documentation of the policies and procedures in place to ensure the data is complete, accurate, and prepared in

accordance with the required basis.

Questioned Costs: N/A

Context: Total Pell Grant Program expenditures for WVU-P, MCTC, and NRCTC were \$4,798,369,

> \$3,519,061, and \$3,082,355 respectively, for the year ended June 30, 2019. The total Federal Pell Grant Program expenditures for the Student Financial Assistance Cluster for the year

ended June 30, 2019 were \$109,805,187.

Cause: WVU-P, MCTC, and NRCTC do not retain adequate documentation of the policies and

procedures in place to review the Pell payment data sent to the Department of Education.

Effect: The Federal Department of Education could receive incorrect Pell payment data.

We recommend that WVU-P, MCTC, and NRCTC implement more effective policies and **Recommendation:**

procedures surrounding the review and approval of the Pell payment data prior to submission.

Views of Responsible Officials:

2019-016 SPECIAL TESTS AND PROVISIONS - VERIFICATION

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Education

Office of Student Financial Assistance Office of Post-Secondary Education

U.S. Department of Health and Human Services Health Resources and Services Administration

Student Financial Assistance (SFA) Cluster

84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925

84.007/84.033/

Criteria:

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).

34 CFR Section 668.55(b)(1) states, "(b)(1) An applicant who is selected for verification of the number of persons in his or her household (household size) or the number of those in the household who are attending postsecondary institutions (number in college) must update those items to be correct as of the date of verification, except when the update is due to a change in his or her marital status."

Condition:

For one student selected from Marshall University and one student selected from Shepherd University in our compliance sample of 60 students who were selected for verification testing, the household size being verified was incorrect and an updated household size was not submitted to the Department of Education. For one student from Bluefield State College in our compliance sample of 60 students who were selected for verification testing, the child support income was miscalculated.

Further the following institutions did not have adequate internal controls in place surrounding the verification process for the selections made: Bluefield State College, Marshall University, and West Virginia University - Parkersburg. For Shepherd University and West Liberty University, the institutions had controls in place however these were determined to be ineffective.

Questioned Costs:

\$2,390 – Marshall University CFDA #84.063 Grant Award P063P180425 \$1,632 - Shepherd University CFDA #84.063 Grant Award P063P180426

Context:

Total Federal expenditures for the SFA cluster in total were \$590,606,881 for the year ended June 30, 2019. The total SFA cluster expenditures for Bluefield State College, Marshall University, Shepherd University, West Virginia University at Parkersburg, and West Liberty University were \$8,806,147, \$101,935,076, \$23,349,372, \$9,681,323, and \$20,324,530, respectively for the year ended June 30, 2019.

2019-016 SPECIAL TESTS AND PROVISIONS - VERIFICATION

(continued)

Cause: The institutions did not have adequate internal controls in place to ensure that verification

changes identified during the process were processed and submitted to the Federal

Department of Education.

Effect: Students receiving federal aid could receive the incorrect amount of federal student financial

assistance.

Recommendation: Management should develop internal controls to ensure that changes identified during the

verification process are submitted to the Federal Department of Education.

Views of Responsible Officials:

2019–017 SPECIAL TESTS AND PROVISIONS – DISBURSEMENTS TO OR ON BEHALF OF STUDENTS

(Repeat of Prior Year Finding 2018-011)

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Education

Office of Student Financial Assistance Office of Post-Secondary Education

U.S. Department of Health and Human Services Health Resources and Services Administration

Student Financial Assistance (SFA) Cluster 84.007/84.033/

84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925

Criteria:

2 CFR 200.303 requires 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).

34 CFR 668.165(a)(2), requires that, "Except in the case of a post-withdrawal disbursement made in accordance with § 668.22(a)(5), if an institution credits a student ledger account with Direct Loan, Federal Perkins Loan, or TEACH Grant program funds, the institution must notify the student or parent of— (i) The anticipated date and amount of the disbursement; (ii) The student's or parent's right to cancel all or a portion of that loan, loan disbursement, TEACH Grant, or TEACH Grant disbursement and have the loan proceeds or TEACH Grant proceeds returned to the Secretary; and (iii) The procedures and time by which the student or parent must notify the institution that he or she wishes to cancel the loan, loan disbursement, TEACH Grant, or TEACH Grant disbursement. (3) The institution must provide the notice described in paragraph (a)(2) of this section in writing."

Condition:

For one disbursement notification selected for testing at West Virginia State University and one disbursement notification selected for testing at Shepherd University, the institutions did not provide all required information in writing. For one of the disbursement notifications selected for testing at West Virginia University at Parkersburg, the institution could not provide documentation of the letter sent to the student. The total sample selected for testing was 60.

Questioned Costs: N/A

Context: Total Direct Loan, Federal Perkins Loan, and TEACH Grant expenditures for the SFA cluster

were \$463,621,872 for the year ended June 30, 2019. The total Direct Loan, Federal Perkins Loan, and TEACH Grant expenditures for West Virginia State University, Shepherd University, and West Virginia University at Parkersburg were \$11,405,942, \$17,821,987, and

\$4,707,035, respectively for the year ended June 30, 2019.

Cause: Internal controls and policies and procedures related to the institutions' disbursement

notifications did not encompass all of the required elements.

2019–017 SPECIAL TESTS AND PROVISIONS – DISBURSEMENTS TO OR ON BEHALF OF STUDENTS

(Repeat of Prior Year Finding 2018–011) (continued)

Effect: Institutions were not in compliance with the requirements related to disbursement

notification. Policies and procedures related to the institutions' disbursement notifications did

not encompass all of the required elements.

Recommendation: We recommend that the institutions implement more effective internal controls and policies

and procedures to ensure that all required information is part of the disbursement notifications sent to students and that supporting documentation for disbursement notifications is maintained and archived to allow for evidence of the institution's compliance with federal

guidelines.

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

Responsible Officials:

2019-018 SPECIAL TESTS AND PROVISIONS - RETURN OF TITLE IV FUNDS

CFDA# **Federal Program Information:** Federal Agency and Program Name

U.S. Department of Education

Office of Student Financial Assistance Office of Post-Secondary Education

U.S. Department of Health and Human Services Health Resources and Services Administration

Student Financial Assistance (SFA) Cluster

84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925

84.007/84.033/

Criteria:

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).

34 CFR section 668.173(b) requires timely return of title IV, HEA program funds. In accordance with procedures established by the Secretary or FFEL Program lender, an institution returns unearned title IV, HEA program funds timely if - (1) The institution deposits or transfers the funds into the bank account it maintains under § 668.163 no later than 45 days after the date it determines that the student withdrew; (2) The institution initiates an electronic funds transfer (EFT) no later than 45 days after the date it determines that the student withdrew; (3) The institution initiates an electronic transaction, no later than 45 days after the date it determines that the student withdrew, that informs a FFEL lender to adjust the borrower's loan account for the amount returned; or (4) The institution issues a check no later than 45 days after the date it determines that the student withdrew. An institution does not satisfy this requirement if - (i) The institution's records show that the check was issued more than 45 days after the date the institution determined that the student withdrew; or (ii) The date on the cancelled check shows that the bank used by the Secretary or FFEL Program lender endorsed that check more than 60 days after the date the institution determined that the student withdrew.

Condition:

For eleven Return of Title IV Funds calculations selected from West Virginia University (WVU), the incorrect semester end date was used in the Return of Title IV calculations and the correct amount to be returned was returned after the 45-day requirement. For two Return of Title IV Funds calculations selected from West Virginia University, the funds were not returned to the Department of Education within the 45-day requirement. For one Return of Title IV Fund calculation selected from Marshall University, the institution could not support a revised date of withdrawal which caused the institution to return and then incorrectly draw funds back.

2019-018 SPECIAL TESTS AND PROVISIONS - RETURN OF TITLE IV FUNDS (continued)

For one Return of Title IV Fund calculation selected from West Liberty University, the incorrect refund amount was returned to the Department of Education. For one Return of Title IV Fund calculation selected from Bluefield State College and one Return of Title IV Fund calculation selected from West Virginia School of Osteopathic Medicine (WVSOM), the funds were not returned to the Department of Education within the 45-day requirement. The total number of compliance samples tested was 54. Further, the institutions listed above along with West Virginia Northern Community and Technical College, Fairmont State University, and Pierpont Community and Technical College did not have adequate internal

controls in place surrounding the Return of Title IV Funds.

Questioned Costs: \$1,920 - Marshall University CFDA #84.268 Grant Award P268K190425

\$7,312 - West Liberty University - \$7,011 CFDA #84.268 Grant Award P268K190427;

\$301 CFDA #84.063 Grant Award P063P180427

\$3,178 - Bluefield College CFDA #84.268 Grant Award P268K190422

\$13,100 - WVSOM CFDA #84.268 Grant Award P268K196656

\$32,487 - WVU - \$26,960 CFDA #84.268 Grant Award P268K190429; \$5,527 CFDA

#84.063 Grant Award P063P180429

Context: Total Student Financial Assistance Cluster expenditures for the year ended June 30, 2019

> were \$590,606,881. The total Student Financial Assistance Cluster expenditures for the year end June 30, 2019, for West Virginia University, Marshall University, West Virginia Northern Community and Technical College, West Liberty University, Bluefield State College, Fairmont State University, West Virginia School of Osteopathic Medicine, and Pierpont Community and Technical College were \$262,461,827, \$101,935,076, \$4,629,346,

\$20,324,256, \$8,806,147, \$24,641,788, \$46,387,373, and \$7,512,369, respectively.

Cause: The institutions do not have adequate internal controls in place to prevent non-compliance.

Effect: The institutions are not returning the correct amount of federal student financial assistance

required or the funds are not returned within the required time frame.

Recommendation: Management should implement internal controls to ensure that the correct amount of federal

student financial assistance is returned and returned within the required time frame.

Views of Responsible Officials:

2019-019 SPECIAL TESTS AND PROVISIONS - ENROLLMENT REPORTING

(Repeat of Prior Year Findings 2018–012, 2017–006, 2016–008, 2015–015, 2014–011, 2013–028, 2012–43, 2012–47, 2012–49, 2011–22)

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Education

Office of Student Financial Assistance Office of Post-Secondary Education

U.S. Department of Health and Human Services Health Resources and Services Administration

Student Financial Assistance (SFA) Cluster 84.007/84.033/

84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925

Criteria:

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).

34 CFR section 685.309(b) requires that institutions must "(1) Upon receipt of an enrollment report from the Secretary, a school must update all information included in the report and return the report to the Secretary - (i) In the manner and format prescribed by the Secretary; and (ii) Within the timeframe prescribed by the Secretary. (2) Unless it expects to submit its next updated enrollment report to the Secretary within the next 60 days, a school must notify the Secretary within 30 days after the date the school discovers that - (i) A loan under title IV of the Act was made to or on behalf of a student who was enrolled or accepted for enrollment at the school, and the student has ceased to be enrolled on at least a half-time basis or failed to enroll on at least a half-time basis for the period for which the loan was intended; or (ii) A student who is enrolled at the school and who received a loan under title IV of the Act has changed his or her permanent address.

Condition:

For one student selected from West Virginia State University, one student selected from Pierpont Community and Technical College, one student selected from West Liberty University, and three students selected from Marshall University in our compliance sample of 60 students who withdrew, graduated, or enrolled but never attended, the respective institutions did not promptly notify the appropriate entities of a change in the student's status in a timely and accurate manner.

For each of the students noted above from West Virginia State University and West Liberty University, there were timing and status discrepancies between the information reported by the institution to the Clearinghouse and their subsequent reporting of enrollment detail to National Student Loan Data System (NSLDS). Each of the students noted above from Marshall University and Pierpont Community and Technical College were not properly reported as being graduated.

2019-019 SPECIAL TESTS AND PROVISIONS - ENROLLMENT REPORTING

(Repeat of Prior Year Findings 2018–012, 2017–006, 2016–008, 2015–015, 2014–011, 2013–028, 2012–43, 2012–47, 2012–49, 2011–22) (continued)

Further the following institutions did not have adequate internal controls in place surrounding the enrollment reporting process for the selections made: West Virginia State University, West Liberty University, Marshall University, Mountwest Community and Technical College, West Virginia University, West Virginia University at Parkersburg, Pierpont Community and Technical College, Fairmont State University, Bluefield State College and Concord University.

Questioned Costs: N/A

Context: Total Direct Loan and Pell expenditures for the SFA cluster in total were \$533,437,203 for

the year ended June 30, 2019. The total Direct Loan and Pell expenditures for West Virginia State University, West Liberty University, Marshall University, Mountwest Community and Technical College, Pierpont Community and Technical College, West Virginia University, West Virginia University at Parkersburg, Fairmont State University, Bluefield State College and Concord University were \$15,946,066, \$18,209,225, \$100,515,864, \$5,814,833, \$7,348,587, \$224,848,284 \$9,505,404, \$24,299,118, \$8,363,330, and \$13,394,531,

respectively for the year ended June 30, 2019.

Cause: The institutions did not have adequate internal controls in place surrounding the enrollment

reporting process.

Effect: The institutions are not promptly notifying the NSLDS of changes in student status in an

accurate manner; thus, inaccurate information is reported to the NSLDS.

Recommendation: Management should develop an effective corrective action plan to address this matter in a

timely manner. As institutions are responsible for timely reporting whether they report directly or via a third-party servicer, we recommend that the institutions implement a review process to ensure they are promptly notifying the U.S. Department of Education and NSLDS

of changes in a student's status in a timely and accurate manner.

Views of Responsible Officials:

2019-020 SPECIAL TESTS AND PROVISIONS -BORROWER DATA TRANSMISSION AND RECONCILIATION

(Repeat of Prior Year Findings 2018–013, 2017–007, 2016–006)

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Education

Office of Student Financial Assistance Office of Post-Secondary Education

U.S. Department of Health and Human Services Health Resources and Services Administration

Student Financial Assistance (SFA) Cluster 84.007/84.033/

84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925

Criteria: 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).

34 CFR 685.300(a)(5) states "On a monthly basis, reconcile institutional records with Direct Loan funds received from the Secretary and Direct Loan disbursement records submitted to

and accepted by the Secretary."

Condition: For the two months selected for testing of Direct Loan School Account Statement (SAS)

reconciliation requirements at West Virginia University at Parkersburg and Bluefield State

College, proper reconciliations were not completed by the institutions.

For the two institutions listed above and Pierpont Community and Technical College there

were no policies or procedures in place to review the SAS reconciliations.

Questioned Costs: N/A

Total Direct Loan expenditures for the SFA cluster in total were \$423,632,016 for the year **Context:**

> ended June 30, 2019. The total Direct Loan expenditures for West Virginia University at Parkersburg, Bluefield State College, and Pierpont Community and Technical College were \$4,707,035, \$4,948,674, and \$4,457,513, respectively for the year ended June 30, 2019.

Written procedures detailing the process to reconcile loans from Common Origination and Cause:

> Disbursement (COD) records to Banner exist, as provided in narrative form during the audit. However, management represented that a formal reconciliation review process has not been

successfully implemented.

Effect: The absence of proper reconciliations could result in the institution's financial records for

Direct Loan expenditures to be improperly stated.

2019–020 SPECIAL TESTS AND PROVISIONS –BORROWER DATA TRANSMISSION AND RECONCILIATION

(Repeat of Prior Year Findings 2018–013, 2017–007, 2016–006) (continued)

Recommendation: We recommend that management implement a reconciliation process that monthly

reconciliations are performed and saved as documented in the institution's written procedure, including documentation of supervisor review and approval. In addition, management needs to ensure that all data received from COD is maintained within their records to facilitate audit

procedures.

Views of Responsible Officials:

2019-021 SPECIAL TESTS AND PROVISIONS - PROGRAM ELIGIBILITY INTERNAL CONTROLS

CFDA# **Federal Program Information:** Federal Agency and Program Name

U.S. Department of Education

Office of Student Financial Assistance Office of Post-Secondary Education

U.S. Department of Health and Human Services Health Resources and Services Administration

Student Financial Assistance (SFA) Cluster

84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925

84.007/84.033/

Criteria: 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 Virginia University - Parkersburg (WVU-P) and Marshall University have not

established internal controls over the attendance recording process related to distance

education programs.

Questioned Costs: N/A

Context: Total expenditures for the SFA cluster were \$590,606,881 for the year ended June 30, 2019.

The total SFA Cluster expenditures for WVU-P and Marshall University were \$9,681,323

and \$101,935,076, respectively for the year ended June 30, 2019.

Cause: Written policies and procedures have not been established by WVU-P and Marshall

University regarding the program eligibility compliance requirement, specifically distance

education programs.

Effect: The absence of proper controls could result in the institution's disbursing or returning the

improper amount of federal student financial assistance.

Recommendation: We recommend that management develop more effective policies and procedures, including

internal controls over the distance education program eligibility compliance requirement.

Views of Responsible Officials:

2019–022 SPECIAL TESTS AND PROVISIONS – GRAMM-LEACH-BLILEY ACT – STUDENT INFORMATION SECURITY

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Education

Office of Student Financial Assistance Office of Post-Secondary Education

U.S. Department of Health and Human Services Health Resources and Services Administration Student Financial Assistance (SFA) Cluster

> 84.038/84.063/ 84.268/84.379/ 93.264/93.342/ 93.364/93.925

84.007/84.033/

Criteria:

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).

16 CFR 314.4 (b) requires institutions to "Identify reasonably foreseeable internal and external risks to the security, confidentiality, and integrity of customer information that could result in the unauthorized disclosure, misuse, alteration, destruction or other compromise of such information, and assess the sufficiency of any safeguards in place to control these risks. At a minimum, such a risk assessment should include consideration of risks in each relevant area of your operations, including: (1) Employee training and management; (2) Information systems, including network and software design, as well as information processing, storage, transmission and disposal; and (3) Detecting, preventing and responding to attacks, intrusions, or other systems failures.

16 CFR 314.4(c) requires institutions to "Design and implement information safeguards to control the risks you identify through risk assessment, and regularly test or otherwise monitor the effectiveness of the safeguards' key controls, systems, and procedures."

Condition:

The following institutions did not perform a risk assessment that addresses the three required areas as noted in 16 CFR 314.4(b), which are 1) employee training and management; (2) information systems, including network and software design, as well as information processing, storage, transmission and disposal; and (3) detecting, preventing and responding to attacks, intrusions, or other systems failures: Marshall University, Mountwest Community and Technical College, West Virginia State University, West Virginia University at Parkersburg, BlueRidge Community and Technical College, Shepherd University, West Virginia Northern Community and Technical College, West Liberty University, Fairmont State University, Pierpont Community and Technical College, Bluefield State College, Concord University, West Virginia School of Osteopathic Medicine and New River Community and Technical College. Further, since risk assessments were not completed, the institutions did not document safeguards as required by 16 CFR 314.4(c).

2019–022 SPECIAL TESTS AND PROVISIONS – GRAMM-LEACH-BLILEY ACT – STUDENT INFORMATION SECURITY

(continued)

One institution, West Virginia University, performed the required risk assessment and further

documented safeguards for the risks identified in February 2019.

Further, the institutions identified above do not have internal controls in place around

requirements listed in 16 CFR 314.4(b) and (c).

Questioned Costs: N/A

Context: Total expenditures for the SFA cluster in total were \$590,606,881 for the year ended June 30,

2019.

Cause: Institutions do not have policies and procedures, including internal controls, addressing the

requirements of 16 CFR 314.4(b) and (c).

Effect: The absence of policies and procedures could result in the loss or improper storage of student

account information.

Recommendation: We recommend that management implement policy and procedures, including internal

controls, to ensure that they are in compliance with 16 CFR 314.4(b) and (c).

Views of Responsible Officials:

2019-023 PERIOD OF PERFORMANCE

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Education

Special Education Cluster (IDEA) 84.027/84.173

Grant Award H027A180075-18A Grant Award H173A180071 Grant Award H027A170075-17B Grant Award H173A170071 Grant Award H027A160075-16A Grant Award H173A160071

Criteria: 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 200.309 states that "a non-Federal entity may charge to the Federal award only

allowable costs incurred during the period of performance."

Condition: One of the six transactions tested from grants with performance period beginning dates during

the audit period was incorrectly charged to the grant. Expenditures were incurred prior to the

period of performance beginning on July 1, 2018.

Questioned Costs: \$20,833 – CFDA #84.027 Grant Award H027A180075-18A

Context: Total federal expenditures for the Special Education Cluster were \$79,859,626 for the year

ended June 30, 2019. The instance recorded outside the period of performance represents \$20,833 of total expenditures tested for grants with performance period beginning dates

during the audit period of \$45,799.

Cause: The Special Education Cluster does not have adequate internal controls and policies and

procedures in place to ensure that allowable costs are incurred during the period of

performance.

Effect: The Special Education Cluster is not in compliance with federal statutes, regulations, and the

terms of the conditions of the federal award. Expenditures were charged to the grant that are

not allowable.

Recommendation: We recommend that the Special Education Cluster implement more effective internal controls

and policies and procedures to ensure that expenditures charged to the grant are incurred

during the period of performance.

Views ofManagement concurs with the finding and has developed a plan to correct the finding. **Responsible**

Responsible Officials:

2019-024 ALLOWABILITY AND ELIGIBILITY

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Health and Human Services

Temporary Assistance for Needy Families (TANF)
Cluster 93.558

Grant Award 2018 – 2018G996115 Grant Award 2019 – 2019G996115

Criteria: A State shall require, as a condition of providing assistance, that a member of the family

assign to the State the rights the family member may have for support from any other person. This assignment does not exceed the amount of assistance provided (42 USC 608(a)(3)).

The State or Tribal Plan provides the specifics on the State or tribal area's definition of financially needy which the State or tribal area uses in determining eligibility. According to West Virginia's State Plan (a) (1) (A) (i) Definitions, "A caretaker relative is an adult relative other than the natural or adoptive parent, such as a grandparent, aunt, uncle, brother, sister and their legal spouses and those relatives of preceding generations and their legal spouses. A non-recipient work-eligible individual is a parent or stepparent who must sign the application, complete Orientation, a PRC and SSP, and be participating in a work activity. Neither these individuals nor caretaker relatives may be included in the WV WORKS

benefit."

Condition: During testing of allowability and eligibility we noted the following:

For one of the 40 benefit payments tested for \$288, an absent parent was noted on the case

and the signed ES-AP1 form (Assignment of Child Support) was not present.

For one of the 40 benefit payments tested for \$374, the relative caretaker waived inclusion in the benefit calculation, but was included in the household benefit calculation. The benefit

payment should have been \$331.

Questioned Costs: \$331 - CFDA #93.558; \$288 related to Grant Award 2018 - 2018G996115 and \$43 related

to Grant Award 2019 – 2019G996115

Context: The two instances represent \$662 of benefit payments out of total benefit payments tested of

\$13,256. The total payments for benefit assistance for the TANF program for the fiscal year ended June 30, 2019, were \$48,365,204. Total federal expenditures for TANF for the fiscal

year ended June 30, 2019, were \$74,761,419.

Cause: Management indicated that the errors were due to caseworker oversight.

Effect: A payment may have been made for ineligible recipients and some payments were not

properly supported with appropriate documentation.

Recommendation: We recommend that DHHR evaluate the effectiveness of the current training programs for

the TANF program to ensure adequate technical training is provided. Furthermore, DHHR should follow established policies and procedures to ensure that necessary approvals are

obtained, and the necessary documentation is maintained in the recipient case files.

Views of Responsible Officials:

2019–025 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

(Prior Year Findings 2018–019, 2017–010, 2016–016, 2015–024, 2014–018, 2013–036, 2012–56, 2011–44, 2010–41)

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Health and Human Services Temporary Assistance for Needy Families (TANF)

Cluster 93.558

Grant Award 2018 – 2018G996115 Grant Award 2019 – 2019G996115

Criteria: 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 Health & Human Resources (DHHR) has policies and

procedures in place surrounding the issuance and removal of sanctions; however, DHHR

could not provide adequate documentation that the control was operating effectively.

Questioned Costs: N/A

Context: Total federal expenditures for TANF for the fiscal year ended June 30, 2019, were

\$74,761,419.

Cause: There is lack of sufficient documentary evidence to rely on controls surrounding the issuance

or removal of sanctions against TANF recipients.

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

cause.

Recommendation: We recommend that DHHR management maintain sufficient documentation to evidence its

review prior to the issuance or removal of sanctions.

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

Responsible

Officials:

2019-026 SPECIAL TESTS AND PROVISIONS - PENALTY FOR REFUSAL TO WORK

(Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Health and Human Services
Temporary Assistance for Needy Families (TANF)

Cluster 93.558

Grant Award 2018 – 2018G996115 Grant Award 2019 – 2019G996115

Criteria:

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).

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).

Condition:

During testing of this special test and provision, we noted the following:

For two of the 40 cases selected for testing, the individuals should not have been included in the overall population. The clients were either never recipients of TANF benefits or had elected to be removed from receiving benefits prior to the date selected for testing.

For four of the 40 cases selected for testing, there were a variety of issues related to the compliance of recipients and documentation within Recipient Automated Payment Information Data System (RAPIDS). There were two instances in which individuals were not enrolled in an activity, yet their benefits were not properly reduced. There was one case in which the individual had a job, yet no monthly participation hours were recorded. The final case involved an individual who did not complete any type of hours, was not considered exempt, yet received benefits when they were ineligible. This individual was not referred for repayment. This conflicting data caused the auditor to be unable to determine if benefits were (im)properly reduced.

Ouestioned Costs:

Unknown

2019–026 SPECIAL TESTS AND PROVISIONS – PENALTY FOR REFUSAL TO WORK (continued)

Context: Total federal expenditures for TANF for the fiscal year ended June 30, 2019 were

\$74,761,419.

Cause: There are insufficient internal controls in place surrounding the generation and review of

populations provided to the auditor, and caseworker data entry into RAPIDS.

Effect: The auditor was unable to determine if the auditee was in compliance with the specified

compliance requirement.

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 DHHR evaluate the effectiveness of the current training programs for the TANF

program to ensure adequate technical training is provided.

Views of Responsible Officials:

2019–027 DHHR INFORMATION SYSTEM AND RELATED BUSINESS PROCESS CONTROLS (Repeat of Prior Year Findings 2018–017, 2017–002, 2016–017, 2015–025, 2014–016, 2013–034, 2012–51, 2011–46, 2010–43, 2009–43, 2008–55)

Federal Program Information:	Federal Agency and Program Name	CFDA #
	U.S. Department of Health and Human Services	
	Temporary Assistance for Needy Families (TANF)	
	Cluster	93.558
	Grant Award 2018G996115	
	Grant Award 2019G996115	
	Low-Income Home Energy Assistance	93.568
	Grant Award G-17B1WVLIEA	
	Grant Award G-1701WVLIE4	
	Grant Award G-18B1WVLIEA	
	Grant Award G-1901WVLIEA	
	Child Care and Development Fund (CCDF) Cluster	93.575/93.596
	Grant Award G1801WVCCDF	
	Grant Award G1901WVCCDF	
	Foster Care—Title IV-E	93.658
	Grant Award 1801WVFOST	
	Grant Award 1901WVFOST	
	Adoption Assistance	93.659
	Grant Award 1801WVADPT	
	Grant Award 1901WVADPT	
	Children's Health Insurance Program (CHIP)	93.767
	Grant Award 1805WV5021	
	Grant Award 1905WV5021	
	Medicaid Cluster	93.775/93.777/
		93.778 &
		ARRA-93.778
	Grant Award 1805WV5MAP	
	Grant Award 1805WV5ADM	
	Grant Award 1805WVIMPL	
	Grant Award 1805WVINCT	
	Grant Award 1905WV5MAP	
	Grant Award 1905WV5ADM	
	Grant Award 1905WVIMPL	
	Grant Award 1905WVINCT	

Criteria:

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).

2019–027 DHHR INFORMATION SYSTEM AND RELATED BUSINESS PROCESS CONTROLS (Repeat of Prior Year Findings 2018–017,2017–002, 2016–017, 2015–025, 2014–016, 2013–034, 2012–51, 2011–46, 2010–43, 2009–43, 2008–55) (continued)

Condition:

Family and Children Tracking System (FACTS): (West Virginia Department of Health and Human Resources (DHHR) 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. We noted that management implemented a mitigating detect control for the Foster Care program during fiscal year 2012 in response to this repeat finding; however, it was not designed to encompass the Adoption Assistance program or automatic payments in the Foster Care program. Additionally, no supervisory review is required for provider payment information input into the system.

Recipient Automated Payment Information Data System (RAPIDS) Application Suite: Our testing of the controls surrounding eligibility determination noted that adequate segregation of duties does not exist for the RAPIDS system. 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 approval worker to review each transaction individually.

Questioned Costs: N/A

Context: Total federal expenditures for these programs can be located in the Schedule of Expenditures

of Federal Awards.

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

Federal Program	System	Compliance Requirements Impacted
Children's Health Insurance Program (CHIP)	RAPIDS	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility; Level of Effort
Temporary Assistance for Needy Families (TANF) Cluster	RAPIDS	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility
Low-Income Home Energy Assistance	RAPIDS	Eligibility
Medicaid Cluster	RAPIDS	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility
Adoption Assistance	FACTS	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility
Foster Care – Title IV-E	FACTS	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility, Special Tests and Provisions – Operation of a Foster Care Demonstration Project, Special Tests and Provisions – Payment Rate Setting and Application
Child Care and Development Fund (CCDF) Cluster	FACTS	Activities Allowed or Unallowed, Allowable Costs/Cost Principles, Eligibility

Cause:

Policies and procedures have not been adequately updated for changes in the processing of eligibility. Furthermore, management indicated that a lack of personnel resources contributes to the improper segregation of duties issue.

2019–027 DHHR INFORMATION SYSTEM AND RELATED BUSINESS PROCESS CONTROLS (Repeat of Prior Year Findings 2018–017, 2017–002, 2016–017, 2015–025, 2014–016, 2013–034, 2012–51, 2011–46, 2010–43, 2009–43, 2008–55) (continued)

Effect:

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 application. Information can be input into the FACTS application or modified within the application 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.

Recommendation:

Management should develop an effective corrective action plan to address this matter in a timely manner. We recommend that access to various FACTS 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:

2019-028 ELIGIBILITY

(Repeat of Prior Year Finding 2018–021)

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Health and Human Services

Low-Income Home Energy Assistance 93.568

Grant Award G-1901WVLIEA

Criteria: 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 eligibility compliance requirements of LIHEAP require the West Virginia Department of Health and Human Resources (DHHR) to determine whether federal monies are spent in

accordance with the eligibility guidelines promulgated by 42 USC 8624(b)(2).

Condition: During our testing of 72 benefit payments for eligibility, we noted the following:

For one of the 72 cases reviewed, an application was not provided.

For six of the 72 cases, there was not adequate documentation surrounding the caseworker's

verification of the recipient's utility bill or wood/coal receipt.

Questioned Costs: \$1,736 – CFDA #93.568 Grant Award G-1901WVLIEA

\$80 - CFDA #93.568 Grant Award G-18B1WVLEA

Context: The six instances (six of 72 case files) represent \$1,816 of benefit payments out of total

benefit payments \$19,379. Total payments for benefit assistance for the LIHEAP program for the fiscal year ended June 30, 2019 were \$19,414,839. The federal expenditures for the

LIHEAP program for the fiscal year ended June 30, 2019, were \$30,965,802.

Cause: Management indicated that the errors were due to caseworker oversight.

Effect: A payment may have been made for ineligible recipients and some payments were not

properly approved and/or supported with appropriate documentation.

Recommendation: Management should develop an effective corrective action plan to address this matter in a

timely manner. We recommend that DHHR evaluate the effectiveness of the current training programs for the LIHEAP program to ensure adequate technical training is provided. Furthermore, DHHR should follow established policies and procedures to ensure that necessary approvals are obtained, and the necessary documentation is maintained in the

recipient case files.

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

Responsible Officials:

2019-029 MISSING SUPPORTING DOCUMENTATION

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Health and Human Services

Low-Income Home Energy Assistance 93.568

Grant Award G-1901WVLIEA Grant Award G-18B1WVLIEA

Criteria: 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 200.508(d) says an auditee must "provide the auditor with access to personnel, accounts, books, records, supporting documentation, and other information as needed for the

auditor to perform the audit required by this part."

Condition: The management of DHHR was unable to provide timely supporting documentation to the

auditors. The necessary underlying support was not provided in order to test compliance for

the LIHEAP Performance Data Form (OMB No. 0970-0449).

Questioned Costs: Unknown

Context: Total federal disbursements for the LIHEAP program were \$30,965,802 for the year ended

June 30, 2019.

Cause: A lack of oversight resulted in inadequate retention of relevant supporting documentation.

Effect: The auditors were unable to determine if the LIHEAP program was in compliance with the

specified requirements for the LIHEAP Performance Data Form (OMB No. 0970-0449).

Recommendation: We recommend that DHHR ensure that all documentation supporting reports or compliance

requirements subject to audit be maintained and readily available if requested. Timely receipt

of supporting documentation is crucial for the completion of the audit.

Views of Responsible Officials:

2019–030 SPECIAL TESTS AND PROVISIONS – FRAUD DETECTION AND REPAYMENT INTERNAL CONTROLS

(Repeat of Prior Year Findings 2018–022, 2017–014, 2016–021)

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Health and Human Services

Child Care and Development Fund (CCDF) Cluster 93.575/93.596

Grant Award G1701WVCCDF Grant Award G1801WVCCDF

Criteria: 2 CFR 200.303 states 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: Child Care payments resulting from fraud are identified and documented within quarterly

reconciliation spreadsheets, however documentation of review of the listing of cases referred for investigation, including the status, and the quarterly reconciliations was not provided.

Questioned Costs: N/A

Context: Total federal expenditures for the CCDF Cluster for fiscal year ended June 30, 2019, were

\$52,050,056.

Cause: The DHHR Bureau for Children and Families and the Office of Inspector General have not

coordinated their efforts surrounding the fraud detection and repayment process within the

DHHR.

Effect: Payments resulting from fraud may not be identified, and the proper procedures to establish

repayment or recovery may not occur in a reasonable amount of time.

Recommendation: DHHR should ensure its internal controls and policies and procedures are robust enough to

ensure fraudulent claims are identified and tracked through the reconciliation process beginning in the year of identification and continuing through the establishment and enforcement of repayment agreements. Additionally, status monitoring of cases referred for

investigation should be documented, and follow-up completed timely.

Views of Responsible Officials:

2019-031 ELIGIBILITY DOCUMENTATION

(Repeat of Prior Year Findings 2018–023, 2017–015, 2016–022, 2015–029, 2014–024, 2013–040, 2012–59)

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Health and Human Services

Adoption Assistance 93.659

Grant Awards 1801WVADPT Grant Awards 1901WVADPT

Criteria:

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).

Section 473 of the Social Security Act requires that the Adoption Assistance Agreement must be in effect prior to the adoptive parents' receipt of the Adoption Subsidy. Also, 45 CFR 1356.40 requires the Adoption Assistance Agreement must be signed and in effect at the time of or prior to the final decree of adoption, and a copy of the signed agreement must be given to each party. Further, the eligibility compliance requirements of the Adoption Assistance program require the West Virginia Department of Health and Human Resources (DHHR) to determine whether federal monies are spent in accordance with the eligibility guidelines promulgated by the Adoption Assistance and Child Welfare Act of 1980. West Virginia State Code § 49-3-1 states that consent by an agency or department to adopt a child must be given and a statement of relinquishment and termination of parental rights must be obtained from the birth parents. The Adoption Assistance Policy Manual states that an Adoption Placement Agreement (SSADP48) must be completed and signatures obtained as part of the preliminary adoption procedures after the parental rights have been terminated if the child is not registered on the Adoption Resource Network (ARN).

Condition:

Four of the 60 cases reviewed for eligibility did not have documents on file to determine eligibility:

- For one case, the Adoption Agreement was not signed or dated by the Regional Director/Designee. The total payment amount associated with this case was \$600, charged to Grant Award 1901WVADPT.
- Two cases were missing the signature and date of the respective DHHR worker on the Adoption Placement Agreement. The total payment amount associated with these cases was \$1,497, with \$600 charged to Grant Award 1901WVADPT and \$897 charged to Grant Award 1801WVADPT.
- One case was missing the Release and Consent Form. The total payment amount associated with this case was \$535, charged to Grant Award 1901WVADPT.

Questioned Costs:

\$2,632 - CFDA #93.659; \$1,735 related to Grant Award 1901WVADPT and \$897 related to Grant Award 1801WVADPT

2019-031 ELIGIBILITY DOCUMENTATION

(Repeat of Prior Year Findings 2018–023, 2017–015, 2016–022, 2015–029, 2014–024, 2013–040, 2012–59) (continued)

Context: The four instances represent \$2,632 of adoption payments out of a total population of benefit

payments tested for eligibility of \$37,894. Total federal expenditures for the Adoption

Assistance program were \$45,344,175 for the year ended June 30, 2019.

Cause: Management indicated that the lack of inclusion of the proper forms in the case files and lack

of sign-offs were oversights by the caseworker.

Effect: Documentation supporting the original eligibility determination could not be located.

Potentially ineligible claims were paid using federal funds.

Recommendation: We recommend that DHHR review the current staffing and training programs of the Adoption

Assistance Office to ensure sufficient staff levels are maintained and adequate technical training is provided. Furthermore, the DHHR should establish policies and procedures to

ensure that necessary documentation is filed in the adoption case files.

Views of Responsible Officials:

2019–032 SPECIAL TESTS AND PROVISIONS – UTILIZATION CONTROL AND PROGRAM INTEGRITY INTERNAL CONTROLS

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Health and Human Services

Medicaid Cluster 93.775/93.777/ 93.778 &

93.778 & ARRA-93.778

Grant Award 1805WV5MAP Grant Award 1805WV5ADM Grant Award 1805WVINCT Grant Award 1805WVIMPL Grant Award 1905WVINCT Grant Award 1905WV5MAP Grant Award 1905WV5ADM Grant Award 1905WVIMPL

Criteria: 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 internal controls over the special testes and provisions – utilization

control and program integrity, specifically the cases closed within the Office of Program Integrity (OPI), no documentation existed of the review of the required elements of a closed case being maintained in the case file for the seven of the seven cases selected for testing.

Questioned Costs: N/A

Context: The federal expenditures for the Medicaid Cluster for the fiscal year ended June 30, 2019,

were \$3,263,461,305. The total population subject to testing was 65.

Cause: Management indicated that the documentation of management's review of all closed cases

was not part of OPI's policies and procedures.

Effect: Cases may be closed without verification by management that all required elements of closed

cases are present.

Recommendation: Management should develop an effective corrective action plan to address this matter in a

timely manner. We recommend that DHHR establish policies and procedures to ensure that case files are reviewed upon closure by a member of management separate from the

caseworker and that the review is documented.

Views of Responsible Officials:

2019–033 SPECIAL TESTS AND PROVISIONS – MEDICAID FRAUD CONTROL UNIT INTERNAL CONTROLS

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Health and Human Services

Medicaid Cluster 93.775/93.777/ 93.778 &

ARRA-93.778

Grant Award 1805WV5MAP Grant Award 1805WV5ADM Grant Award 1805WVINCT Grant Award 1805WVIMPL Grant Award 1905WVINCT Grant Award 1905WV5MAP Grant Award 1905WV5ADM

Grant Award 1905WVIMPL

Criteria: 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 internal control testing of cases referred from the Office of Program Integrity

(OPI) to the Medicaid Fraud Control Unit, the Medicaid Fraud Referral Form was not complete for the five of the five cases selected. The final section of the form noting acceptance of the referral and review was incomplete for the five selected cases and documentation from the Just Ware system of acceptance of the case by the Medicaid Fraud

Control Unit was not maintained in the case file.

Questioned Costs: N/A

Context: The federal expenditures for the Medicaid program for the fiscal year ended June 30, 2019,

were \$3,263,461,305. The total population subject to testing was 14.

Cause: Management indicated that the documentation of the completed form was not part of OPI's

policies and procedures.

Effect: OPI will not have clear direction on whether or not to suspend Medicaid payments to a

provider and the status of the case with the Medicaid Fraud Control Unit.

Recommendation: Management should develop an effective corrective action plan to address this matter in a

timely manner. We recommend that DHHR create a policy and procedure to ensure that

completed Medicaid Fraud Referral Forms are maintained in the OPI files.

Views of Responsible Officials:

2019-034 ELIGIBILITY

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Health and Human Services

Children's Health Insurance Program (CHIP)

Grant Award 1805WV5021 Grant Award 1905WV5021

Medicaid Cluster 93.775/93.777/

93.778 & ARRA-93.778

93.767

Grant Award 1805WV5MAP Grant Award 1805WV5ADM Grant Award 1805WVINCT Grant Award 1805WVIMPL Grant Award 1905WVINCT Grant Award 1905WV5MAP Grant Award 1905WV5ADM Grant Award 1905WVIMPL

Criteria:

42 CFR 435.914 states "(a) The agency must include in each applicant's case record facts to support the agency's decision on his application. (b) The agency must dispose of each application by a finding of eligibility or ineligibility, unless—(1) There is an entry in the case record that the applicant voluntarily withdrew the application, and that the agency sent a notice confirming his decision; (2) There is a supporting entry in the case record that the applicant has died; or (3) There is a supporting entry in the case record that the applicant cannot be located."

42 CFR 457.965 states "The State must include in each applicant's record facts to support the State's determination of the applicant's eligibility for CHIP."

42 CFR 435.945(j) and 457.380(j) require states to develop and submit to the Centers for Medicaid and Medicare Services (upon request) a plan describing the Medicaid and CHIP eligibility verification policies and procedures adopted by the State. The State of West Virginia Modified Adjusted Gross Income (MAGI)-Based Eligibility Verification Plan for Medicaid & CHIP requires the following eligibility factors to be verified: income, residency, age, social security number, citizenship, immigration status, household composition, pregnancy, caretaker relative, Medicare, application for other benefits, and other insurance coverage. These are either required to be verified through electronic data sources or through self-attestation without additional verification or self-attestation with post -eligibility verification. Electronic data sources include: the Internal Revenue Service, Social Security Administration, State Wage Information Collection Agency, State Unemployment Compensation, State Administered Supplementary Payment Program, State General Assistance Programs, Supplemental Nutrition Assistance Program, Temporary Assistance for Needy Family, Bureau for Child Support Enforcement, State Income Tax, TALX, Work Force West Virginia and Families and Children Tracking System Income. State verification plans does not provide specific details. The most recently submitted plan for the State is posted on Medicaid.gov.

2019–034 ELIGIBILITY

(continued)

Condition:

The 2019 Compliance Supplement states that "the auditors should re-determine eligibility to ensure beneficiaries qualify for the Medicaid program and are in the appropriate enrollment category." During our testing of 60 cases for eligibility for the Medicaid program, we noted seven instances where no documentation of the verification of assets was maintained in the file; and two instances where no documentation of disability was maintained in the file. During our testing of 60 cases for eligibility for CHIP, we noted 13 instances where documentation of income verification to the electronic data source required by the state's MAGI-based CHIP eligibility verification plan was not maintained in the file. We also noted one instance where the social security number, age, date of birth, and immigration status were not verified in the Data Exchange system as required by the state's MAGI-based CHIP eligibility verification plan; one instance where the age, date of birth, social security number, and citizenship were verified after benefits were paid; and one instance where income was not verified.

Questioned Costs:

\$12,566 – CFDA #93.778 Grant Award 1905WV5MAP \$3,782 – CFDA #93.767 Grant Award 1905WV5021

Context:

The eight cases in Medicaid represent \$12,566 of Medicaid payments out of a population of benefit payments tested for eligibility of \$26,115. The 15 cases in CHIP represent \$3,782 of CHIP payments out of a population of benefit payments tested for eligibility of \$11,126. The federal expenditures for the Medicaid program for the fiscal year ended June 30, 2019, were \$3,263,461,305. The federal expenditures for the Children's Health Insurance Program for the fiscal year ended June 30, 2019, were \$74,715,584.

Cause:

Management indicated that the information was verified in accordance with the Medicaid and CHIP verification plan or the State plan, but no documentation was kept in the file of the verification.

Effect:

A payment may have been made for ineligible recipients.

Recommendation:

Management should develop an effective corrective action plan to address this matter in a timely manner. We recommend that DHHR evaluate the policies and procedures and add a requirement to maintain documentation of the verification of information with the federal data hub.

Views of Responsible Officials:

2019-035 MATCHING, LEVEL OF EFFORT, EARMARKING

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Health and Human Services

State Targeted Response to the Opioid Crisis 93.788

Grant Award 6H79TI080256-02M001 Grant Award 6H79TI080256-02M002 Grant Award 3H79TI081724-01W1 Grant Award 1H79TI08256-01 Grant Award 1H79TI081724-01 Grant Award 3H79TI080256-01S1 Grant Award 5H79TI080256-02

Criteria:

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 200.508(d) says an auditee must "provide the auditor with access to personnel, accounts, books, records, supporting documentation, and other information as needed for the auditor to perform the audit required by this part."

Condition:

During our testing of the State Targeted Response to the Opioid Crisis Program, the West Virginia Department of Health and Human Resources was unable to provide timely supporting documentation. Missing documentation includes:

- Internal calculations demonstrating compliance with earmarking requirements.
- Populations of earmarking transactions.

Questioned Costs: \$473,317 CFDA #93.788

Context: The federal expenditures for the State Targeted Response to the Opioid Crisis program for

the fiscal year ended June 30, 2019, were \$6,091,464.

Cause: Support was not provided timely in order to test the compliance requirement.

Effect: The auditor was unable to determine if the program was in compliance with earmarking

requirements.

Recommendation: Management should develop an effective corrective action plan to address this matter in a

timely manner. We recommend that DHHR establish policies and procedures requiring

proper documentation and maintenance of supporting information.

Views of Responsible Officials:

2019-036 SUBRECIPIENT MONITORING

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Health and Human Services

State Targeted Response to the Opioid Crisis 93.788

Grant Award 6H79TI080256-02M001 Grant Award 6H79TI080256-02M002 Grant Award 3H79TI081724-01W1 Grant Award 1H79TI08256-01 Grant Award 1H79TI081724-01 Grant Award 3H79TI080256-01S1 Grant Award 5H79TI080256-02

Criteria: 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 identified one instance out

of six tested, in which the subrecipient monitoring checklist was not correctly completed. Question 14a regarding if subrecipients submitted financial reports within the prescribed timeframes and question 14b regarding if information included in the financial reports was complete and accurate were marked yes. Supporting documentation demonstrated that the financial reports were not submitted in the required timeframe and contained incorrect

information.

Questioned Costs: N/A

Context: The federal expenditures for the State Targeted Response to the Opioid Crisis program for

the fiscal year ended June 30, 2019, were \$6,091,464.

Cause: The review of the subrecipient monitoring checklist was not precise enough to detect the

errors.

Effect: Subrecipients may not be properly risk assessed therefore impacting the type of monitoring

that would be performed in the future.

Recommendation: Management should develop an effective corrective action plan to address this matter in a

timely manner. We recommend that DHHR enhance policies and procedures that are precise

enough to detect errors in the subrecipient checklist.

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

Responsible Officials:

2019-037 SPECIAL TESTS AND PROVISIONS - KEY PERSONNEL

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Health and Human Services

State Targeted Response to the Opioid Crisis 93.788

Grant Award 6H79TI080256-02M001 Grant Award 6H79TI080256-02M002 Grant Award 3H79TI081724-01W1 Grant Award 1H79TI08256-01 Grant Award 1H79TI081724-01 Grant Award 3H79TI080256-01S1 Grant Award 5H79TI080256-02

Criteria:

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 200.508(d) says an auditee must "provide the auditor with access to personnel, accounts, books, records, supporting documentation, and other information as needed for the auditor to perform the audit required by this part."

Condition:

During our testing of the key personnel requirement, which requires prior approval for any changes in key staff including level of effort involving separation from the project for more than three months or a 25 percent reduction in time dedicated to the project, we noted that there was no internal control policies and procedures in place to ensure that management was in compliance with the key personnel requirement in the grant agreement. Additionally, information was not provided timely to the auditor to test compliance with the key personnel requirement.

Questioned Costs: Unknown

Context: The federal expenditures for the State Targeted Response to the Opioid Crisis program for

the fiscal year ended June 30, 2019, were \$6,091,464.

Cause: Management has not established internal control policies and procedures around the key

personnel requirement in the grant agreement.

Effect: Changes in key personnel or changes in level of effort may not be appropriately reported to

the grantor, and we were unable to determine if the Department of Health and Human

Services (DHHR) was in compliance with the requirements.

Recommendation: Management should develop an effective corrective action plan to address this matter in a

timely manner. We recommend that DHHR establish policies and procedures around internal

control of changes in key personnel or level of effort.

Views of Responsible Officials:

2019-038 SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

Federal Program Information: Federal Agency and Program Name CFDA #

U.S. Department of Homeland Security

Disaster Grants - Public Assistance (Presidentially

Declared Disasters)

97.036

Grant Award FEMA-4061-DR-WV
Grant Award FEMA-4236-DR-WV
Grant Award FEMA-4210-DR-WV
Grant Award FEMA-4093-DR-WV
Grant Award FEMA-4221-DR-WV
Grant Award FEMA-4220-DR-WV
Grant Award FEMA-4219-DR-WV
Grant Award FEMA-4236-DR-WV
Grant Award FEMA-4236-DR-WV
Grant Award FEMA-4331-DR-WV
Grant Award FEMA-4359-DR-WV

Criteria: 2 CFR 200.508(b) states, "The auditee must prepare appropriate financial statements,

Grant Award FEMA-4378-DR-WV

including the schedule of expenditures of Federal awards." The Federal Office of

Management and Budget issues instructions on how to prepare this schedule.

OMB Circular A-133 Section 300a state, "The auditee shall prepare appropriate financial

statements including the Schedule of Expenditures of Federal Awards (SEFA)."

Condition: The Military Authority's and School Building Authority's internal controls are not adequate

to ensure that the Schedule of Expenditures of Federal Awards (SEFA) accurately reports all federal assistance. The Military Authority could not adequately support the expenditures of \$2,374,641 reported on their SEFA. Our review of the School Building Authority's SEFA for fiscal year 2019 identified that total disbursements were originally understated by

\$3,973,547.

Questioned Costs: Unknown

Context: Total federal expenditures for the Disaster Grants – Public Assistance (Presidentially

Declared Disasters) program were \$33,259,528 for the year ended June 30, 2019.

Cause: The Military Authority and School Building Authority have not implemented adequate

internal controls to ensure the SEFA is accurate.

Effect: The Military Authority and School Building Authority is not properly reporting their federal

expenditures and type A programs may not be appropriately identified on a timely basis.

Recommendation: We recommend that both the Military Authority and School Building Authority ensure staff

responsible for the preparation of the SEFA have the resources needed to accurately prepare

the SEFA.

Views of Responsible

Responsible Officials:

2019-039 INTERNAL CONTROLS OVER REPORTING

(Repeat of Prior Year Findings 2018–025, 2017–020, 2016–025)

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Homeland Security

Disaster Grants - Public Assistance (Presidentially

Declared Disasters)

97.036

Grant Award FEMA-4061-DR-WV Grant Award FEMA-4236-DR-WV Grant Award FEMA-4210-DR-WV Grant Award FEMA-4093-DR-WV Grant Award FEMA-4221-DR-WV Grant Award FEMA-4220-DR-WV Grant Award FEMA-4219-DR-WV Grant Award FEMA-4273-DR-WV Grant Award FEMA-4331-DR-WV Grant Award FEMA-4359-DR-WV Grant Award FEMA-4378-DR-WV

Criteria:

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).

OMB Circular A-133 section 300b states that the non-federal entity is responsible for maintaining "internal control over Federal programs that provides reasonable assurance that management is managing Federal awards in compliance with laws, regulations, and the provisions of contracts or grant agreements that could have a material effect on each of its Federal programs."

Condition:

Management of the West Virginia Division of Homeland Security and Emergency Management (DHSEM) prepared and submitted the required Quarterly Performance Reports (QPR), the FEMA Form 009-0-111, without going through an appropriate review and approval process for one of the two reports selected for testing.

Questioned Costs: N/A

Context: Total federal expenditures for the Disaster Grants - Public Assistance (Presidentially

Declared Disasters) program were \$33,259,528 for the year ended June 30, 2019.

DHSEM does not have adequate internal controls and policies and procedures in place over Cause:

the reporting process to require an appropriate review and approval.

Effect: Federal reports may be submitted with errors or lack of supporting documentation and not be

identified on a timely basis.

2019-039 INTERNAL CONTROLS OVER REPORTING

(Repeat of Prior Year Findings 2018–025, 2017–020, 2016–025) (continued)

Recommendation: We recommend that DHSEM strengthen internal controls and policies and procedures over

the report preparation and submission process. We recommend that the review be performed by an individual independent of the data entry process and evidence of such review be

maintained.

Views of Responsible Officials:

2019-040 SUBRECIPIENT MONITORING

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Homeland Security

Disaster Grants - Public Assistance (Presidentially

Declared Disasters)

97.036

Grant Award FEMA–4061-DR–WV
Grant Award FEMA–4236-DR–WV
Grant Award FEMA–4210-DR–WV
Grant Award FEMA–4093-DR–WV
Grant Award FEMA–4221-DR–WV
Grant Award FEMA–4220-DR–WV
Grant Award FEMA–4219-DR–WV
Grant Award FEMA–4273-DR–WV
Grant Award FEMA–4331-DR–WV
Grant Award FEMA–4359-DR–WV

Grant Award FEMA-4378-DR-WV

Criteria:

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 200.331(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:

- (1) Federal Award Identification.
 - (i) Subrecipient name (which must match the name associated with its unique entity identifier);
 - (ii) Subrecipient's unique entity identifier;
 - (iii) Federal Award Identification Number (FAIN);
 - (iv) Federal Award Date (see § 200.39 Federal award date) of award to the recipient by the Federal agency;
 - (v) Subaward Period of Performance Start and End Date;
 - (vi) Amount of Federal Funds Obligated by this action by the pass-through entity to the subrecipient;
 - (vii) Total Amount of Federal Funds Obligated to the subrecipient by the passthrough entity including the current obligation;
 - (viii) Total Amount of the Federal Award committed to the subrecipient by the pass-through entity;
 - (ix) Federal award project description, as required to be responsive to the Federal Funding Accountability and Transparency Act (FFATA);

2019-040 SUBRECIPIENT MONITORING (continued)

- (x) Name of Federal awarding agency, pass-through entity, and contact information for awarding official of the Pass-through entity;
- (xi) CFDA Number and Name; the pass-through entity must identify the dollar amount made available under each Federal award and the CFDA number at time of disbursement;
- (xii) Identification of whether the award is R&D: and
- (xiii) Indirect cost rate for the Federal award (including if the de minimis rate is charged per § 200.414 Indirect (F&A) costs).
- (2) All requirements imposed by the pass-through entity on the subrecipient so that the Federal award is used in accordance with Federal statutes, regulations and the terms and conditions of the Federal award;
- (3) Any additional requirements that the pass-through entity imposes on the subrecipient in order for the pass-through entity to meet its own responsibility to the Federal awarding agency including identification of any required financial and performance reports;
- (4) An approved federally recognized indirect cost rate negotiated between the subrecipient and the Federal Government or, if no such rate exists, either a rate negotiated between the pass-through entity and the subrecipient (in compliance with this part), or a de minimis indirect cost rate as defined in § 200.414 Indirect (F&A) costs, paragraph (f);
- (5) A requirement that the subrecipient permit the pass-through entity and auditors to have access to the subrecipient's records and financial statements as necessary for the pass-through entity to meet the requirements of this part; and
- (6) Appropriate terms and conditions concerning closeout of the subaward."

Condition: For two of the 29 subawards selected for testing for subrecipient monitoring, DHSEM did

not provide documentation to show that the subrecipient was made aware of the award

information required by 2 CFR section 200.331(a).

Questioned Costs: \$237,229 - CFDA #97.036; \$45,803 related to Grant Award FEMA-4359-DR-WV and

\$191,426 related to Grant Award FEMA-4273-DR-WV

Context: Total federal expenditures for the Disaster Grants – Public Assistance (Presidentially

Declared Disasters) program were \$33,259,528 for the year ended June 30, 2019. The two subawards represent \$237,229 of the total \$5,180,696 in subrecipient expenditures selected

for testing.

Cause: DHSEM was not able to provide timely supporting documentation to the auditors.

Effect: DHSEM is not providing required information to their subrecipients and, therefore, not

complying with federal regulations.

Recommendation: We recommend that DHSEM strengthen internal controls and policies and procedures over

pass-through entity requirements to sub-recipients.

Views of Responsible Officials:

2019-041 SUBRECIPIENT CASH MANAGEMENT (Repeat of Prior Year Finding 2018-037)

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Homeland Security

Emergency Management Performance Grant

Grant Award EMW-2015-EP-00050 Grant Award EMP-2016-EP-00002 Grant Award EMP-2017-EP-00005 Grant Award EMP-2018-EP-00003 Grant Award EMP-2019-EP-00001

Criteria:

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)."

97.042

OMB Circular A-133 section 300b states that the non-federal entity is responsible for maintaining "internal control over Federal programs that provides reasonable assurance that management is managing Federal awards in compliance with laws, regulations, and the provisions of contracts or grant agreements that could have a material effect on each of its Federal programs."

2 CFR 200.305(b) requires that "payments methods must minimize the time elapsing between the transfer of funds from the United States Treasury or the pass-through entity and the disbursement by the non-Federal entity."

Additionally, 2 CFR 200.305(b)(3) states that "when the reimbursement method is used, the Federal awarding agency or pass-through entity must make payment within 30 calendar days after receipt of the billing, unless the Federal awarding agency or pass-through entity reasonably believes the request to be improper."

OMB Circular A-110 requires that procedures be implemented to ensure that subrecipients minimize the time elapsing between the transfer of Federal funds from the recipient and the disbursement of funds for program purposes.

Condition:

For 15 of the 15 subrecipient payments selected for testing, the West Virginia Division of Homeland Security and Emergency Management (DHSEM) failed to reimburse the subrecipients within 30 calendar days after receipt of the billing. Additionally, three of the subrecipient payments were not approved before disbursement.

Questioned Costs: N/A

Context: Total federal expenditures for subrecipients and total federal expenditures for the Emergency

Management Performance Grant program were \$1,873,938 and \$4,867,344 respectively, for the year ended June 30, 2019. The 15 instances represent \$485,791 of expenditures out of a

total population tested for subrecipient cash management of \$485,791.

Cause: DHSEM does not have adequate internal controls and policies and procedures in place over

subrecipient payment requests to ensure federal funds are being reimbursed timely for

expenditures incurred.

2019-041 SUBRECIPIENT CASH MANAGEMENT

(Repeat of Prior Year Finding 2018–037) (continued)

Effect: DHSEM is not in compliance with federal statutes, regulations, and the terms of the

conditions of the federal award. By not reimbursing subrecipients for expenditures incurred timely, the completion of projects may be delayed and subrecipients are not being paid timely.

Recommendation: We recommend that DHSEM implement internal controls and policies and procedures over

the subrecipient payment process to ensure that reimbursements are made within 30 calendar

days after receipt of the billing.

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

Responsible Officials:

2019-042 EARMARKING

(Repeat of Prior Year Finding 2018–039)

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Homeland Security

Emergency Management Performance Grants 97.042

Grant Award EMW-2015-EP-00050 Grant Award EMP-2016-EP-00002 Grant Award EMP-2017-EP-00005 Grant Award EMP-2018-EP-00003 Grant Award EMP-2019-EP-00001

Criteria: 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)."

OMB Circular A-133 section 300b states that the non-federal entity is responsible for maintaining "internal control over Federal programs that provides reasonable assurance that management is managing Federal awards in compliance with laws, regulations, and the provisions of contracts or grant agreements that could have a material effect on each of its

Federal programs."

The U.S. Department of Homeland Security's Notice of Funding Opportunity for the Emergency Management Performance Grant (EMPG) allows that a State Emergency Management Agency "may use up to five percent (5%) of the EMPG award for M&A purposes." Management and Administration (M&A) activities are those directly related to

managing and administering the EMPG award.

Condition: The West Virginia Division of Homeland Security and Emergency Management (DHSEM)

charged M&A expenditures to EMPG grants, but DHSEM management did not track these expenditures to ensure compliance with applicable earmarking requirements noted in the

award.

Questioned Costs: Unknown

Context: Total federal expenditures for the Emergency Management Performance Grant program were

\$4,867,344 for the year ended June 30, 2019.

Cause: DHSEM does not have adequate internal controls and policies and procedures in place over

the earmarking process.

Effect: DHSEM may not be in compliance with the federal rules and regulations regarding

earmarking. M&A expenditures could exceed maximum allowable thresholds.

2019-042 EARMARKING

(Repeat of Prior Year Finding 2018–039) (continued)

Recommendation: We recommend that DHSEM implement internal controls and policies and procedures

regarding earmarking and M&A tracking process. At a minimum, DHSEM should implement a tracking system with a documented review and approval process that ensures M&A expenditure amounts do not exceed maximum allowable thresholds. We recommend that the review be performed by an individual independent of the data entry process and evidence of

such review be maintained.

Views of Responsible Officials:

2019-043 PERIOD OF PERFORMANCE MISSING POPULATION

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Homeland Security

Emergency Management Performance Grant 97.042

Grant Award EMW-2015-EP-00050 Grant Award EMP-2016-EP-00002 Grant Award EMP-2017-EP-00005 Grant Award EMP-2018-EP-00003 Grant Award EMP-2019-EP-00001

Criteria: 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 200.508(d) says an auditee must "provide the auditor with access to personnel, accounts, books, records, supporting documentation, and other information as needed for the

auditor to perform the audit required by this part."

Condition: DHSEM was not able to provide a listing of transactions in the latter part of the period of

performance for grants whose period of performance ended during the audit period testing.

Questioned Costs: Unknown

Context: Total federal expenditures for the Emergency Management Performance Grant program were

\$4,867,344 for the year ended June 30, 2019.

Cause: DHSEM was not able to provide a timely population for period of performance to the

auditors.

Effect: Critical data supporting the period of performance compliance requirement is not adequately

maintained by DHSEM for use by management to effectively run the program.

Recommendation: We recommend that DHSEM ensure that all populations for compliance requirements subject

to audit be maintained and readily available if requested. Timely receipt of accurate

populations is crucial for the completion of the audit.

Views of Responsible Officials:

2019-044 REPORTING

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Homeland Security

Emergency Management Performance Grant 97.042

Grant Award EMW-2015-EP-00050 Grant Award EMP-2016-EP-00002 Grant Award EMP-2017-EP-00005 Grant Award EMP-2018-EP-00003 Grant Award EMP-2019-EP-00001

Criteria:

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)."

OMB Circular A-133 section 300b states that the non-federal entity is responsible for maintaining "internal control over Federal programs that provides reasonable assurance that management is managing Federal awards in compliance with laws, regulations, and the provisions of contracts or grant agreements that could have a material effect on each of its Federal programs."

OMB Circular A-133 Section 300a state, "The auditee shall prepare appropriate financial statements including the Schedule of Expenditures of Federal Awards (SEFA)."

Condition:

The West Virginia Division of Homeland Security and Emergency Management's (DHSEM) internal controls are not adequate to ensure that transactions are coded correctly. The total amount of fiscal year 2019 expenditures recorded as expenditures subject to procurement, that were not actually subject to procurement, was \$1,500,932.

Questioned Costs: Unknown

Context: Total federal expenditures for the Emergency Management Performance Grant program were

\$4,867,344 for the year ended June 30, 2019.

Cause: DHSEM has not implemented adequate internal controls to ensure that transactions are coded

to the proper object code. Therefore, we cannot determine that the procurement population is

complete or accurate.

Effect: DHSEM is improperly recording transactions, which could result in DHSEM not following

particular compliance requirements for procurement.

Recommendation: We recommend that DHSEM ensure staff responsible for the coding of expenditure

transactions ensure that all transactions are coded properly upon entry into the accounting

system.

Views of Responsible Officials:

2019-045 REPORTING

(Repeat of Prior Year Finding 2018–041)

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Homeland Security

Emergency Management Performance Grant

Grant Award EMW-2015-EP-00050 Grant Award EMP-2016-EP-00002 Grant Award EMP-2017-EP-00005 Grant Award EMP-2018-EP-00003 Grant Award EMP-2019-EP-00001

Criteria:

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)."

97.042

OMB Circular A-133 section 300b states that the non-federal entity is responsible for maintaining "internal control over Federal programs that provides reasonable assurance that management is managing Federal awards in compliance with laws, regulations, and the provisions of contracts or grant agreements that could have a material effect on each of its Federal programs."

Per 29 CFR section 97.20, "Grantees and subgrantees must maintain records which adequately identify the source and application of funds provided for financially-assisted activities. These records must contain information pertaining to grant or subgrant awards and authorizations, obligations, unobligated balances, assets, liabilities, outlays or expenditures, and income."

Condition:

Management of the West Virginia Division of Homeland Security and Emergency Management (DHSEM) prepared and submitted various performance and special reports required under the Emergency Management Performance Grant program without going through an appropriate review and approval process. Reports submitted without approval included the following:

- SF-PPR, Performance Progress Reports
- BSIR, Biannual Strategy Implementation Reports
- THIRA, Threat and Hazard Identification and Risk Assessment
- SPR, State Preparedness Report
- EOP, Emergency Operations Plan

In addition, there was no documentation to support the amounts reported in all BSIR, *Biannual Strategy Implementation Reports*, selected for testing. Additionally, the PPR, *Performance Progress Reports*, selected for testing did not include all required information as noted in the grant award.

Questioned Costs: N/A

Context: Total federal expenditures for the Emergency Management Performance Grant program were

\$4,867,344 for the year ended June 30, 2019.

2019-045 REPORTING

(Repeat of Prior Year Finding 2018–041) (continued)

Cause: DHSEM does not have adequate internal controls and policies and procedures in place over

the reporting process.

Effect: DHSEM is not in compliance with the federal rules and regulations regarding reporting.

Reporting errors could occur and not be identified on a timely basis.

Recommendation: We recommend that DHSEM review its internal controls and policies and procedures over

the report review and approval process. At a minimum, such controls should include a documented review and approval process that ensures reported amounts agree with supporting documentation and all required elements of the report are included. We recommend that the review be performed by an individual independent of the data entry

process and evidence of such review be maintained.

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

Responsible Officials:

2019-046 SPECIAL TESTS AND PROVISIONS - TRAINING AND EXERCISE PLAN REQUIREMENTS (Repeat of Prior Year Finding 2018-044)

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Homeland Security

Emergency Management Performance Grant

Grant Award EMW-2015-EP-00050 Grant Award EMP-2016-EP-00002 Grant Award EMP-2017-EP-00005 Grant Award EMP-2018-EP-00003 Grant Award EMP-2019-EP-00001

Criteria:

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)."

97.042

OMB Circular A-133 section 300b states that the non-federal entity is responsible for maintaining "internal control over Federal programs that provides reasonable assurance that management is managing Federal awards in compliance with laws, regulations, and the provisions of contracts or grant agreements that could have a material effect on each of its Federal programs."

The U.S. Department of Homeland Security's Notice of Funding Opportunity for the Emergency Management Performance Grant (EMPG) requires that recipients "develop a multi-year Training and Exercise Plan (TEP) that identifies a combination of exercises and associated training requirements identified in the Training and Exercise Plan Workshop (TEWP). The recipient must "conduct no less than four quarterly exercises of any type and one full-scale exercise within a 12-month period." The recipient must submit an After Action Report/Improvement Plan (AAR/IP) to report on the required exercises to the Regional EMPG Program Manager no later than 90 days after completion of the exercise or submit all exercises at the end of the 12-month period.

The U.S. Department of Homeland Security's Notice of Funding Opportunity for the Emergency Management Performance Grant (EMPG) also states that "all EMPG Program funded personnel shall complete the following training requirements and record proof of completion: NIMS Training, Independent Study (IS) 100, IS 200, IS 700, and IS 800. In addition, personnel shall complete either the Independent Study courses identified in the Professional Development Series or the National Emergency Management Basic Academy delivered either by the Emergency Management Institute (EMI) or at a sponsored State, local, tribal, territorial, regional or other, designated location." Furthermore, "all EMPG-funded personnel shall participate in no fewer than three exercises in a 12-month period."

Condition:

Although the required exercises were completed and are tracked by the State Exercise Coordinator, there is no documentation of the review of the AAR/IP reports submitted to the Regional EMPG Program Manager. Additionally, the AAR/IP reports were not submitted to the Regional EMPG Program Manager.

For four of the eight employees selected for testing, DHSEM was not able to provide documentation that the employees met the required training and exercise requirements noted above.

2019-046 SPECIAL TESTS AND PROVISIONS - TRAINING AND EXERCISE PLAN REQUIREMENTS (Repeat of Prior Year Finding 2018-044) (continued)

Questioned Costs: N/A

Context: Total federal expenditures for the Emergency Management Performance Grant program were

\$4,867,344 for the year ended June 30, 2019.

Cause: DHSEM does not have adequate internal controls and policies and procedures in place over

the Training and Exercise Plan requirements.

The West Virginia Division of Homeland Security and Emergency Management (DHSEM) does not have internal controls and policies and procedures in place to ensure that all EMPG-funded personnel complete the required training or participate in at least three exercises in a

12-month period.

Effect: DHSEM is not in compliance with the federal rules and regulations regarding the Training

and Exercise Plan requirements. The required AAR/IP reports documenting the exercises are not reviewed and submitted timely. EMPG-funded personnel may not be participating in the required number of exercises or receiving adequate training since sufficient policies and

procedures are not in place to track the training received by each employee.

Recommendation: We recommend that DHSEM implement internal controls and policies and procedures

regarding the Training and Exercise Plan requirements, including implementing policies and procedures over the submission of the AAR/IP reports and over employee training and exercise participation. At a minimum, DHSEM should document review and approval of the AAR/IP reports to ensure they are in compliance with the requirements of the grant award and submitted timely. DHSEM should also implement a tracking system with a documented review and approval process that ensures all EMPG-funded personnel complete the required

training and participate in the required number of exercises.

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

Responsible Officials:

2019–047 SPECIAL TESTS AND PROVISIONS - CLOSEOUT REPORTING REQUIREMENTS (Repeat of Prior Year Finding 2018–043)

Federal Program Information: Federal Agency and Program Name CFDA#

U.S. Department of Homeland Security

Emergency Management Performance Grant 97.042

Grant Award EMW-2015-EP-00050 Grant Award EMP-2016-EP-00002 Grant Award EMP-2017-EP-00005 Grant Award EMP-2018-EP-00003 Grant Award EMP-2019-EP-00001

Criteria:

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)."

OMB Circular A-133 section 300b states that the non-federal entity is responsible for maintaining "internal control over Federal programs that provides reasonable assurance that management is managing Federal awards in compliance with laws, regulations, and the provisions of contracts or grant agreements that could have a material effect on each of its Federal programs."

44 CFR 13.50(b) states that "within 90 days after the expiration or termination of the grant, the grantee must submit all financial, performance, and other reports required as a condition of the grant."

2 CFR 200.343(a) states that "the non-Federal entity must submit, no later than 90 calendar days after the end date of the period of performance, all financial, performance, and other reports as required by the terms and conditions of the Federal award. The Federal awarding agency or pass-through entity may approve extensions when requested by the non-Federal entity."

The U.S. Department of Homeland Security's Notice of Funding Opportunity for the Emergency Management Performance Grant (EMPG) requires that grantees must submit a final closeout reporting package once a grant is closed.

Condition: The West Virginia Division of Homeland Security and Emergency Management (DHSEM)

did not submit the required closeout reporting package within 90 days of the expiration of the

grant award. Further, the required qualitative narrative summary was not submitted.

Questioned Costs: N/A

Context: Total federal expenditures for the Emergency Management Performance Grant program were

\$4,867,344 for the year ended June 30, 2019.

Cause: DHSEM does not have adequate internal controls and policies and procedures in place over

the closeout reporting process.

STATE OF WEST VIRGINIA SCHEDULE OF FINDINGS AND QUESTIONED COSTS for the Year Ended June 30, 2019

2019-047 SPECIAL TESTS AND PROVISIONS - CLOSEOUT REPORTING REQUIREMENTS (Repeat of Prior Year Finding 2018-043) (continued)

Effect: DHSEM is not in compliance with the federal rules and regulations regarding the closeout

reporting requirements. The grant may not be properly closed out resulting in FEMA having to administratively close the award; if this action is taken, consideration for subsequent

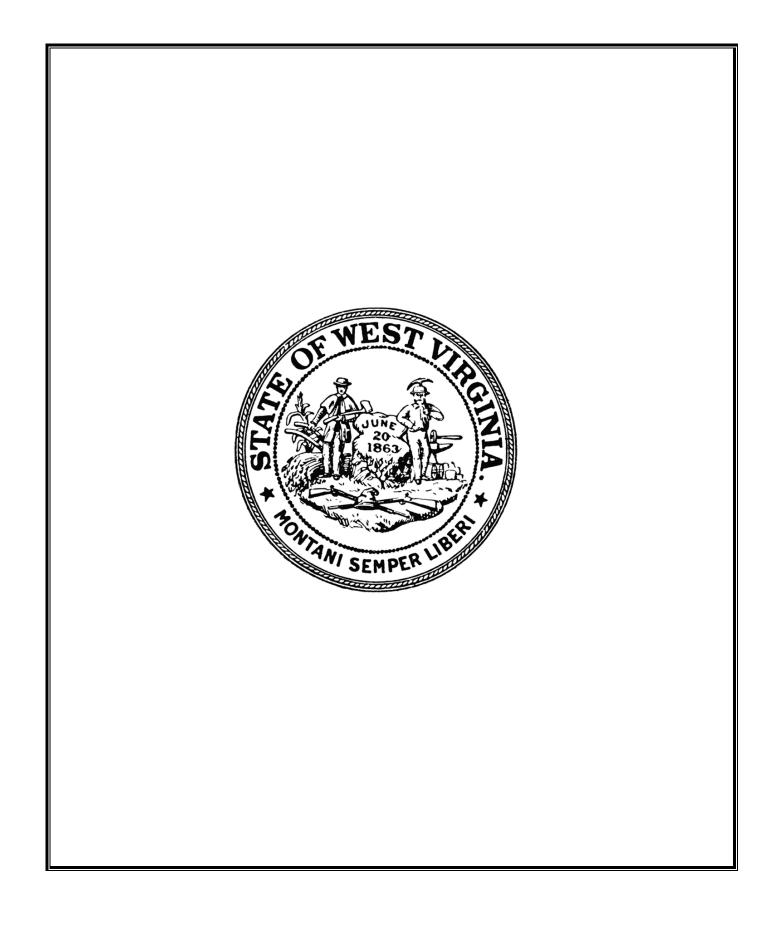
awards to DHSEM may be impacted or restricted.

Recommendation: We recommend that DHSEM review its internal controls and policies and procedures in place

over the close out reporting process. At a minimum, controls should be in place to ensure that all required reports are submitted within the 90 days of the expiration or termination of the

grant award.

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



CORRECTIVE ACTION PLAN



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

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 304-558-4083 ext. 301). E-mail: Betsy.Chapman@wv.gov. The respective state agency identified in each finding is responsible for the corrective action plan.

2019-001 PERIOD OF PERFORMANCE Department of Health and Human Resources (DHHR) CFDA Number 10.557

The two transactions that were charged to the incorrect period of performance were purchasing card transactions. The DHHR Purchasing Card Reconciliation Guide directs cardholders to provide the date they received an item/service, not the date the invoice was received or paid. In the state's accounting system, wvOASIS, the received service "from" and "to" dates are populated from the receipt date field of the purchasing card transaction during reconciliation. This field is used in the service date validation of the major programs, which is in place to prevent a charge to an inappropriate period of performance. This field can be edited. Additionally, there are sub-coordinator reviews as well as central office approvals. The control in the system was not effective because the incorrect date was auto-populated into the system. Due to the volume of transactions being reviewed, the inappropriate date was not identified. The DHHR will work with the wvOASIS team to assess a potential change to strengthen the control in the system. Additionally, the DHHR will assess the ability to strengthen the control that is in place regarding review of the transactions and provide additional training to cardholders and coordinators related to goods received.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2019-002 MATCHING

National Guard Military Operations and Maintenance (O&M) CFDA Number 12.401

In November 2019, O&M Management corrected the error and worked with wvOASIS to make sure the system internal controls were updated to not allow transactions to process with incorrect federal match rates.

2019-003 PERIOD OF PERFORMANCE

National Guard Military Operations and Maintenance (O&M) CFDA Number 12.401

In September 2018, O&M started training staff on how to allocate costs to the appropriate grants and grant periods based on the service dates of each transaction. O&M will also work with wvOASIS to establish additional codes within the system in order to track grant expenditures accurately and within the proper grant period. O&M will continue to perform internal audits to ensure accuracy related to the period of performance.

2019-004

ACTIVITIES ALLOWED OR UNALLOWED; ALLOWABLE COSTS/COST PRINCIPLES; AND PERIOD OF PERFORMANCE INTERNAL CONTROLS

National Guard Military Operations and Maintenance (O&M) CFDA Number 12.401

O&M will enhance internal controls and policies and procedures to ensure all employees' timecards are reviewed and approved prior to the agency's "final sign-off". These changes will be implemented by July 2020.

2019-005

INTERNAL CONTROLS OVER REPORTING

West Virginia Community Advancement and Development Office (WV CAD) CFDA Number 14.228

In June 2019, WV CAD hired and trained a new staff person to complete the Quarterly Performance Report (QPR) process. In October 2019,



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internal controls were implemented to include a manager reviewing and approving the QPR reports before submission to the Disaster Recovery website.

2019-006 ELIGIBILITY

Workforce West Virginia (Workforce) CFDA Number 17.225

WorkForce will implement internal controls to ensure benefits will be calculated and paid correctly. A report will be developed that will provide management a listing of any claims paid outside of the period of eligibility. Workforce will select and test a sample of claims to ensure the system is calculating and paying all payments accurately. In addition, the agency will implement policies and procedures that enhance and monitor payments to ensure they are paid within the period of eligibility. These new internal controls and policies and procedures will be implemented by June 2020.

2019-007

MISSING SUPPORTING DOCUMENTATION FOR ACTIVITIES ALLOWED OR UNALLOWED; ALLOWABLE COSTS/COST PRINCIPLES; AND ELIGIBILITY

Workforce West Virginia CFDA Number 17.225

In January 2020, WorkForce West Virginia implemented additional oversight to ensure Unemployment Compensation claimants that are chosen for an Eligibility Review has the documentation retained for the review process. In addition, the agency will formally communicate to field offices the importance of retaining claim documentation.

2019-008

REPORTING Workforce West Virginia CFDA Number 17.225

In January 2020, WorkForce West Virginia provided staff with additional training and implemented additional policies and procedures to ensure knowledgeable staff review the report and that documentation is retained and easily obtained for auditing purposes.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2019-009 SPECIAL TESTS AND PROVISIONS – MATCH WITH IRS 940 FUTA TAX FORM Workforce West Virginia CFDA Number 17.225

By May 2020, WorkForce West Virginia will provide staff with additional training and implement internal controls and policies and procedures to ensure the 940 IRS forms are completed accurately and meet the stated criteria for FUTA tax credit allowance.

2019-010 SPECIAL TESTS AND PROVISIONS – UNEMPLOYMENT INSURANCE PROGRAM INTEGRITY – OVERPAYMENTS Workforce West Virginia CFDA Number 17.225

In January 2020, WorkForce West Virginia strengthened internal controls and policies and procedures to reflect which overpayments are set up by overpayment memorandums or the Board of Review's decision. In addition, Workforce West Virginia provided Benefit Payment Control Imaging Operator training to ensure images are easily located, accurately detailed and scanned properly for retention. In March 2020, a field will be added to the Automated Benefit Payment System which will categorize the documentation utilized to establish any overpayment. The overpayment memorandum or the Board of Review decision will be retained in the imaging system.

2019-011 FEDERAL HIGHWAYS ADMINISTRATION PERIOD OF PERFORMANCE Division of Highways (DOH)

CFDA Number 20.205, 20.219, 20.224, 23.003

In March 2019, DOH implemented policies and procedures to address Performance End Dates. DOH will continue to strengthen their procedures to ensure that all project agreements have end dates. Currently, the Project End Date report from Federal Highway Administration/Fiscal Management Information System (FHWA/FMIS) reflecting all projects with impending project end dates is provided to project managers for review. If a revision is required, a request for a



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

project end date extension is then sent to FHWA for approval. DOH worked with wvOASIS to create a new report for program managers to monitor projects and project end dates which is currently being tested. DOH plans to fully roll out the new report to all districts by December 2020.

2019-012 WAGE RATE REQUIREMENTS Division of Highways (DOH) CFDA Number 20.205, 20.219, 20.224, 23.003

DOH will provide continued training for current and newly hired engineers and project supervisors to ensure accurately documenting labor compliance enforcement and reviewing certified payrolls.

2019-013 SPECIAL TESTS AND PROVISIONS – UTILITIES - INCORRECT POPULATION Division of Highways (DOH)

CFDA Number 20.205, 20.219, 20.224, 23.003

In January 2020, DOH implemented policies and procedures revising report parameters that pull the populations provided to the auditors to ensure they are complete and accurate.

2019-014 ADMINISTRATION OF ENGINEERING AND DESIGN-RELATED SERVICE CONTRACTS Division of Highways (DOH) CFDA Number 20.205, 20.219, 20.224, 23.003

In January 2020, DOH implemented policies and procedures related to the verification of indirect cost rates provided by consultants to help ensure that all consultants submit a "Certificate of Final Indirect Costs". Training will be provided to individuals, and groups within DOT to ensure compliance. DOH will also amend existing policy to include a "safe harbor" rate which can be provided to smaller vendors in an effort to further ensure compliance and improve the process.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2019-015 INTERNAL CONTROL OVER REPORTING

West Virginia University at Parkersburg, Mountwest Community and Technical College, and New River Community and Technical College

CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364, 93.925

West Virginia University at Parkersburg (WVU-P) response

Beginning fiscal year 2020, WVU-P implemented policies and procedures to include a monthly reconciliation to the Pell SAS report provided by the Department of Education. WVU-P officials are in the process of codifying the PELL reconciliation process and will ensure that all required documentation is retained and available.

Mountwest Community and Technical College (Mountwest) response

In January 2020, Mountwest implemented policies and procedures regarding Pell submission and reconciliation. The Pell reconciliation is performed daily using Banner reports transmitted to and from the U.S. Department of Education's Common Origination and Disbursement (COD). Daily transmission files to COD are reviewed for rejects or corrections. If there are no rejects or corrections, then no further action is necessary, and the file is moved to a "reviewed" folder. If any rejects or corrections are identified, they are dealt with within the week of disbursement and re-transmitted to COD. All transmission files are maintained in a reviewed folder by aid year.

New River Community and Technical College (New River) response

In November 2019, New River implemented policies and procedures regarding Pell submission and reconciliation. Pell files are transmitted from Banner to Common Origination and Disbursement (COD) electronically through Ed Connect. An origination and disbursement file is created, then reviewed before transmitting. If edits are required, they are completed, and the process is repeated before extracting the file from Banner and transmitting. Once the file is processed by COD, New River gets a processed file through Ed Connect, which is downloaded into Banner. A report is created at the time of download to review for



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

any rejects, etc. Pell reconciliations are performed by running a program that will create a report from Banner and exported to an excel spreadsheet. The Pell spreadsheet compares Banner awards, Student Accounts and COD amounts that are downloaded back into Banner from Ed Connect. Totals are reconciled between the award, student accounts and COD. All spreadsheets and other documents will be maintained, signed by the preparer, reviewed and signed by a second reviewer.

2019-016 SPECIAL TESTS AND PROVISIONS – VERIFICATION

Bluefield State College, Marshall University, West Virginia University at Parkersburg, Shepherd University, and West Liberty University

CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364, 93.925

Bluefield State College (Bluefield) response

In January 2020, Bluefield strengthened internal controls over the verification process. Verification changes that are identified during the initial verification process will be rechecked prior to submission to the Federal Government. Policies and procedures will be reviewed annually to ensure any changes identified during the verification process are accurately submitted to the Federal Department of Education.

Marshall University (Marshall) response

In December 2019, Marshall's Office of Student Financial Aid implemented additional internal controls to include a new step in the internal review process utilizing Ellucian Banner for tracking and documenting the files reviewed. In addition, Marshall will do a secondary review of at least 10% of the files verified by the financial aid staff to ensure all changes identified during the verification process are submitted to the Federal Department of Education.

West Virginia University at Parkersburg (WVU-P) response

Effective January 2020, WVU-P implemented policies and procedures to ensure adequate separation of responsibility and management oversight to ensure changes identified in the verification process will be submitted to the Department of Education ensuring compliance.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

Shepherd University (Shepherd) response

Beginning July 2019, Shepherd updated policies and procedures for verification to include a second review of all verification files that will be made by the assistant director and, if needed, the director. This will ensure any changes are processed and submitted to the Department of Education.

West Liberty University (West Liberty) response

In April 2019, West Liberty updated internal controls for the Assistant Director to second check all verifications before completion with the Central Processing System (CPS) and in Banner. Currently, Counselors complete Verification within Banner. Before updating as "verified" and sending changes to CPS, the Assistant Director checks each verification for accuracy and completeness. Once reviewed and approved, the Counselors complete as verified in Banner and make updates in Financial Aid Administrator Access if needed.

2019-017 SPECIAL TESTS AND PROVISIONS – DISBURSEMENTS TO OR ON BEHALF OF STUDENTS

West Virginia State University, Shepherd University, and West Virginia University at Parkersburg

CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364, 93.925

West Virginia State University (WVSU) response

In December 2018, WVSU implemented a corrective action plan to address this matter. The Office of Student Financial Aid met with the Information Technology Department and updated the student/parent borrower Right to Cancel notification. The updates include borrower specific loan information with the amount and date of disbursement disclosed. All required information is now present on the Right to Cancel notifications. Policies and procedures were updated based upon the corrective action plan. In compliance with the updates, all supporting documentation of sent notifications are maintained and archived by the Office of Financial Aid. WVSU will continue to strengthen internal controls to ensure compliance with federal guidelines.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

Shepherd University (Shepherd) response

In July 2019, Shepherd developed additional policies and procedures to ensure that all Right-To-Cancel Notices (RTCN) are sent to student and parent borrowers. Shepherd implemented internal controls by manually sending out the RTCN to all student and parent borrowers and copying the financial aid manager on all loan disbursement (RTCN) emails in order to maintain documentation evidence. The financial aid manager pulls information from Banner to create a spreadsheet that tracks the student's name, ID, and date delivered before filing the printed copy in the student's file. The financial aid director then spot checks the spreadsheet for accuracy. In addition, RUAMAIL is populated with date the email was sent. Emails are also archived as evidence of Shepherd's compliance.

West Virginia University at Parkersburg (WVU-P) response

Effective July 2019, policies and procedures were implemented so at the time of disbursement, students are sent a disbursement notification which includes the required information concerning aid disbursement produced by the Banner system. It will be documented, maintained, and tracked by student in the system. This new notification process ensures all students are properly notified and allows for evidence of WVU-P's compliance with all federal guidelines.

2019-018 SPECIAL TESTS AND PROVISIONS – RETURN OF TITLE IV FUNDS

West Virginia University, Marshall University, West Liberty University, Bluefield State College, West Virginia School of Osteopathic Medicine, West Virginia Northern Community and Technical College, Fairmont State University, and Pierpont Community and Technical College

CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364, 93.925

West Virginia University (WVU) response

WVU has enhanced the current Return to Title IV policies and procedures with additional internal controls at key points in the process to ensure accurate and timely returns within the 45-day timeframe. These enhancements were in place for the 2019-2020 academic year.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

Marshall University (Marshall) response

Marshall's Office of the Bursar and Office of the Registrar have implemented internal controls to include a new ARGOS report to run and be emailed automatically daily to the Registrar's Office for all withdrawals in which the effective date and entry date do not match. The Registrar's Office will review all backdated withdrawals to verify the proper documentation is presented and reviewed by the Office of Student Financial Aid and the Bursar's Office to support the withdrawal date. Marshall will work on developing an ongoing training program for advisors and deans on the importance of withdrawal dates to ensure the correct amount of federal student financial assistance is returned within the required timeframe by May 2020.

West Liberty University (West Liberty) response

In January 2020, West Liberty Business office implemented a review process related to the return of Title IV funds. West Liberty will reconcile all prepared R2T4 calculations to the list generated by the independent record keeping system (Banner), to all required R2T4 calculations weekly beginning in the fourth week of the term and continuing up to the 45-day point and bi-weekly thereafter until the end of term. West Liberty Controller will review all R2T4 calculations for accuracy, completeness, and timeliness of the return of Title IV funds.

Bluefield State College (Bluefield) response

Beginning in January 2020, Bluefield will refund students every two weeks, including federal financial aid. The refund account will be monitored to ensure an adequate balance is available for refunds. Training of staff will occur to ensure availability of human resources to complete the tasks within the 45-day requirement.

West Virginia School of Osteopathic Medicine response (WVSOM) response

In January 2020, WVSOM will review and improve processes to strengthen internal controls to ensure federal funds are returned within the required 45-day time frame. A knowledgeable employee of the Office of Financial Aid will be responsible for tracking the return of Title IV funds.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

West Virginia Northern Community and Technical College (WVNCC) response

In December 2019, WVNCC strengthened internal controls around the unofficial withdraw R2T4 calculations by updating Banner to accept Last Date of Attendance as reported by faculty so that the R2T4 calculation could be processed in Banner based on these dates and meet the 45-day requirement for return of funds.

Fairmont State University (FSU) response

In January 2020, FSU strengthened internal controls to ensure that the correct amount of federal student financial assistance is returned and is within the required timeframe by adding an additional review of the R2T4 worksheet from COD by a Program Assistant II to ensure the accuracy of data that was input into the worksheet to perform the calculations. The Program Assistant II will also verify the accuracy of the funds in Banner that are returned to the Department of Education by reviewing the TSAAREV form for each student and confirming the funds that were returned from the student's account match those on the R2T4 worksheet from COD.

Pierpont Community and Technical College (PCTC) response

Beginning January 2020, PCTC financial aid staff will complete R2T4 calculations. PCTC will follow policies and procedures to including having an individual that performs the calculation and a second individual that reviews the calculation for accuracy. Both employees will provide documentation of completion/review at the time each calculation is performed to ensure the correct amount of federal student financial assistance is returned within the required timeframe.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2019-019 SPECIAL TESTS AND PROVISIONS – ENROLLMENT REPORTING

West Virginia State University, West Liberty University, Marshall University, Mountwest Community and Technical College, West Virginia University, West Virginia University at Parkersburg, Pierpont Community and Technical College, Fairmont State University, Bluefield State College, and Concord University

CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364, 93.925

West Virginia State University (WVSU) response

In January 2020, WVSU implemented new internal controls to produce accurate and timely submission of enrollment information to the National Student Loan Data System (NSLDS) and the U.S. Department of Education. Thorough edit checks of student data for each semester will be produced by IT. Any errors discovered will be corrected before each enrollment file is produced. Policies and procedures will be updated in January 2020 regarding producing the enrollment file.

West Liberty University (West Liberty) response

In January 2020, West Liberty updated reporting to all graduated students within 20 days through Student Clearinghouse to meet all federal requirements. Before reports are sent to the Clearinghouse, the Director of Financial Aid checks for accuracy and completeness.

To increase accuracy in reporting, West Liberty has also started manually checking graduated students in NSLDS on day 25 to ensure the federal regulation is met on reporting for graduates.

Marshall University (Marshall) response

To ensure prompt reporting of student graduation status, Marshall's Office of the Registrar will review and correct any status discrepancies or rejected records from student degree reporting transmissions to the National Student Clearinghouse within 30 days of receiving the error resolution report. Resolving errors from degree reporting within 30 days of receipt will ensure that graduated student status changes are



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

reported in a timely and accurate manner. All errors identified related to finding 2019-019 have been subsequently corrected.

Mountwest Community and Technical College (Mountwest) response

In January 2020, Mountwest implemented internal controls for the enrollment reporting process to ensure accurate and timely reporting. All changes to student status are reviewed by multiple employees and all reports are reviewed for any errors before submission to the National Student Loan Clearinghouse. All files are retained electronically and available for audit.

West Virginia University (WVU) response

WVU's Office of the University Registrar has verified each enrollment file sent to the National Student Clearinghouse (NSC) every 30 days. The Enrollment Reporting procedure includes a step for the Registrar's office to compare and verify the enrollment file created by the WVU Information Technology Services office. If any discrepancies are discovered, the issue is identified and corrected. Beginning January 2020, all communications from NSC and reports between WV Information Technology Services and the Registrar will show the verification process has been completed successfully and all errors have been resolved will be retained. The process is conducted for every enrollment file submitted to the NSC.

West Virginia University at Parkersburg (WVU-P) response

Effective January 2020, WVU-P has implemented policies and procedures of the enrollment reporting process for reviewing and approving the information. In addition, a transmittal form will be completed to document the completion of this procedure to ensure the U.S. Department of Education and NSLDS is notified of changes in student status in a timely and accurate manner.

Pierpont Community and Technical College (PCTC) response

Effective January 2020, PCTC strengthened policies and procedures regarding the enrollment reporting process. The Registrar will perform a review of each enrollment file by comparing the number of students enrolled in the file to BANNER. In addition, PCTC will spot check the



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

enrollment information for accuracy, correcting any errors before uploading to the Clearinghouse. The Registrar's office and financial aid will communicate monthly to help ensure that any changes to student's status is updated timely.

Fairmont State University (FSU) response

Beginning January 2020, FSU implemented additional internal controls. The reviewer reviews files to identify and correct any errors, verifies the number of records is correct, and selects a few records for testing to ensure the information uploaded to the Clearinghouse is complete and accurate.

Bluefield State College (Bluefield) response

Beginning January 2020, Bluefield implemented additional internal controls. The enrollment report is reconciled to the student enrollment in BANNER verifying the enrollment numbers are the same. Students will be selected randomly for enrollment and number of hours of enrollment along with withdrawal and graduation dates. Notes will be made on the hard copy of the enrollment reports and errors corrected before uploading to the Clearinghouse.

Concord University (Concord) response

In January 2020, the Registrar implemented additional internal controls for enrollment reporting to the Clearinghouse. Utilizing a new report from the IT system, the Registrar's Office performs spot checks of the printed NSC extract report and documents the reviews/approvals for complete and accurate reporting to the Clearinghouse.

2019-020 SPECIAL TESTS AND PROVISIONS – BORROWER DATA TRANSMISSION AND RECONCILIATION

West Virginia University at Parkersburg, Bluefield State College, and Pierpont Community and Technical College CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364, 93.925

West Virginia University at Parkersburg (WVU-P) response

In January 2020, WVU-P implemented new policies and procedures for the Direct Loan process, including usage of SAS reports in a monthly



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reconciliation. WVU-P utilizes the Direct Loan Reconciliation participant guide provided by the Department of Education to ensure the policies and procedures are compliant and that the approvals will be maintained.

Bluefield State College (Bluefield) response

Beginning in January 2020, Bluefield will review policies and procedures currently in place to reconcile COD record and Banner. Monthly review of reconciliation will occur within time frame of 45 days by the Financial Aid manager and/or Chief Enrollment Officer. Reports from offices involved will be requested and received within 30 days. These reports will be maintained within the records for audit procedures.

Pierpont Community and Technical College (PCTC) response

Beginning in July 2019, PCTC's financial aid staff will complete data transmissions and reconciliations internally. PCTC will follow policies and procedures to have an individual perform the reconciliation and a second individual that reviews for accuracy. Both employees will provide documentation of completion/review at the time each reconciliation is completed. The director of Financial Aid will oversee this process and provide a final review to ensure all data from Common Origination and Disbursement (COD) is maintained within the records.

2019-021 SPECIAL TESTS AND PROVISIONS – PROGRAM ELIGIBILITY INTERNAL CONTROLS

West Virginia University at Parkersburg and Marshall University

CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364, 93.925

West Virginia University at Parkersburg (WVU-P) response

WVU-P is in the process of implementing new policies and procedures for verifying attendance in the distance education programs. The new policies and procedures are expected to be implemented in February 2020.



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Marshall University (Marshall) response

In January 2020, Marshall modified policies and procedures of the Distance Education Program to include attendance verification by the Online Learning and IT staff utilizing Blackboard Analytics to determine and record in Banner the last day of attendance for students receiving an F or W grade weekly. The last date of attendance will be exacted as the last date a student meaningfully contributed to the course by submitting an assignment, completing a quiz, or posting to an assigned discussion forum. This will ensure program eligibility requirements are met.

2019-022 SPECIAL TESTS AND PROVISIONS – GRAMM-LEACH-BLILEY ACT (GLBA) – STUDENT INFORMATION SECURITY

Marshall University, Mountwest Community and Technical College, West Virginia State University, West Virginia University at Parkersburg, BlueRidge Community and Technical College, Shepherd University, West Virginia Northern Community and Technical College, West Liberty University, Fairmont State University, Pierpont Community and Technical College, Bluefield State College, Concord University, West Virginia School of Osteopathic Medicine, New River Community and Technical College, and West Virginia University CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364, 93.925

Marshall University (Marshall) response

Marshall will document internal controls and appropriate safeguards to address this finding. Marshall University is currently seeking to hire an external compliance advisor/consultant and will conduct a GLBA risk assessment for the three key data security requirements, which includes: 1) employee training and management; 2) information systems, network and software design, as well as information processing, storage, transmission and disposal; and 3) detecting, and preventing and responding to attacks, intrusions, or other system failures no later than June 30, 2020.



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Mountwest Community and Technical College (Mountwest) response

Mountwest will consult with West Virginia Network for Educational Telecomputing (WVNET) and West Virginia University to better understand the requirements listed in 16 CFR 314.4 (b) and (c). Subsequent to these consultations, Mountwest will develop a risk assessment model for identifying reasonable foreseeable internal and external risks to the security, confidentiality, and integrity of customer information that could result in the unauthorized disclosure, misuse, alteration, destruction of such information and assesses the sufficiency of the safeguards in place to control these risks. At a minimum, the risk assessment will include consideration of risks in areas such as employee training and management, information management systems, and detecting, preventing and responding to attacks, intrusions, or other system failures. Mountwest will also design and implement safeguards to control the risks identified through risk assessment. This will be implemented by June 2020.

West Virginia State University (WVSU) response

WVSU modified policies and procedures to include all the GLBA requirements and best practices to identify reasonably foreseeable internal and external risks to the security and integrity of student information that could result in unwarranted disclosure, misuse, or alteration. WVSU will develop a plan to implement risk assessment of the network and a review of data storage methods. Employees who work with the campus student data systems will be trained on data privacy procedures. This will be implemented by June 2020.

West Virginia University at Parkersburg (WVU-P) response

WVU-P will implement policies and procedures to ensure compliance with 16 CFR 314.4(b) and (c). WVU-P has completed and documented a GLBA risk assessment; however, the risk assessment has not been evaluated by a third-party consultant. A quote has been requested to evaluate the cost benefit of conducting an outside review of the risk assessment.



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BlueRidge Community and Technical College (BlueRidge) response

BlueRidge completed IT risk assessment in August 2019. The risk assessment included all three relevant areas: (1) employee training and management, (2) information systems, and (3) detecting, preventing and responding to attacks. In the future, BlueRidge will complete the risk assessment during the required timeframe. BlueRidge will use this year's assessment as a baseline for drafting a risk assessment policy that is in compliance with 16 CFR 314.4 (b) and (c) elements.

Shepherd University (Shepherd) response

Effective January 2020, Shepherd University implemented security protocols designed specifically processes and to address risk. Additionally, Shepherd continues to review and improve comprehensive risk assessment plans throughout the year. Each year the IT department works with an independent third-party solutions specialist to review and recommend improvements to a core process. Shepherd will continue to strengthen policies and procedures to ensure compliance with CFR 314.4 (b) and (c).

West Virginia Northern Community and Technical College (WVNCC) response

WVNCC hired an outside vendor to complete a risk assessment and is in the process of responding to the report. WVNCC has scheduled this to be completed again in July 2020, and plans to have the risk assessment done annually.

WVNCC has convened the appropriate committees to review written policies and procedures and to document the internal controls and procedures implemented as a result of the security evaluations. WVNCC plans to have internal controls and policies and procedures finalized in May 2020, so it can be fully evaluated by the upcoming Security Scan and evaluation in July 2020. WVNCC is also negotiating a contract for employee training and management program so that training will be better documented.



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West Liberty University (West Liberty) response

Beginning in January 2020, an internal discovery and vendor interview process will take place. In March 2020, West Liberty will hire a third-party vendor to assess activities and implement internal controls and policies and procedures ensuring compliance with 16 CFR 314.4 (b) and (c).

Fairmont State University (FSU) response

FSU has recently undergone changes in the IT department with a focus on security, including the following actions: (1) changes on the network have been enacted to detect, prevent and report on all attacks, intrusions, or other system failures, and (2) procedural changes have been implemented to ensure all software applications and operating systems are maintained with the latest releases and patches to mitigate potential security issues. Beginning in February 2020, FSU will mandate annual required security training for all employees and is reviewing options to complete the risk assessment. FSU has taken a stronger posture related to security, and commits to investigating problems discovered and implementing new procedures or internal controls to mitigate the risk discovered.

Pierpont Community and Technical College (PCTC) response

PCTC is amid a network disentanglement with FSU. Until the beginning of the disentanglement PCTC did not have its own Information Technology infrastructure. PCTC was a user of FSU's network with no administrative privileges. PCTC has addressed the following areas and will continue to develop a comprehensive risk assessment plan through June 2020.

PCTC will adhere to the "least privileged" access philosophy, meaning users will get access to only what is required to perform their job duties. Privileges to student data information system will only be granted with prior approval from the appropriate vice president and justification detailing the reason for the access. PCTC has contracted with a network provider for full on-site and remote network management support. PCTC will implement policies and procedures including internal controls related to information system security to ensure compliance



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with 16 CFR 314.4 (b) and (c). PCTC hopes to have all internal controls implemented by June 2020.

Bluefield State College (Bluefield) response

Bluefield has designated the Chief Technology Officer (CTO) to coordinate the information security program. The CTO is developing an "Information Security Plan" for the institution which will be completed in February 2020.

The CTO will perform a risk assessment that addresses the three required areas noted in 16 CFR 314.4 (b), which are (1) Employee training and management; (2) Information systems, including network and software design, as well as information processing, storage, transmission and disposal; and (3) Detecting, preventing and responding to attacks, intrusions, or other systems failures. Bluefield is working with an outside company to perform an overall IT security assessment which includes employee training, identifying information systems which an or would be impacted, and intrusion testing and will be completed in Spring 2020. Policies and procedures and documented safeguards are being developed and will be completed in May 2020.

Concord University (Concord) response

Concord will design and implement standard IT Risk Management practices to be performed throughout the calendar year to include: specify the scope to satisfy audit and best practice requirements, determine specific assessments to be performed, schedule assessments on centralized IT calendar, perform scheduled internal audits and assessments, identify risks and assess their criticality, resolve and mitigate discovered risks, prepare documentation and reports of IT Risk Management activities for internal and external auditor consumption, and monitor the IT environment for continued and changing risks. This will ensure Concord is in compliance with 16 CFR 314.4 (b) and (c). This will be completed by March 2020.

West Virginia School of Osteopathic Medicine (WVSOM) response

In January 2020, WVSOM revised policies and procedures to ensure design and implement information safeguards to control the risk



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identified through risk assessment. WVSOM will regularly test and monitor the effectiveness of the safeguards' key controls, systems, and procedures through the use of internal and external resources.

New River Community and Technical College (New River) response

In August 2019, New River management implemented KnowBe4 as a cybersecurity and privacy awareness training solution. In January 2020, New River management completed a risk assessment of enterprise systems using the Federal Financial Institutions Examination Council (FFIEC) Cybersecurity Assessment Tool. New River is now working to assess cybersecurity maturity (and will complete it by May 2020 to bring New River into compliance with 16 CRF 314.4 (b) and (c)).

Prior to May 2020, New River will complete the development of the following policies and procedures: information security procedures, cybersecurity procedures, incident response forms, telework memorandum of agreement, telework procedures, and GLBA compliance training.

West Virginia University (WVU) response

WVU formed a project team in December 2019 to begin developing a detailed remediation plan for addressing findings in the GLBA risk assessment. The team is made up of representatives from WVU Financial Aid, WVU Office of Admissions and WVU Information Technology Services. The project team is responsible for prioritizing remediation and tracking progress in WVU's compliance system, Galvanize. A contracted third-party will conduct a risk assessment annually to demonstrate WVU is working towards GLBA compliance.

2019-023 PERIOD OF PERFORMANCE Department of Education CFDA Number 84.027, 84.137

In April 2020, the Department of Education will implement internal controls and policies and procedures to ensure the pre-processing stage



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service date validation is performed to mitigate this type of occurrence and will work with wvOASIS to add these controls with the IT system.

2019-024 ALLOWABILITY AND ELIGIBILITY Department of Health and Human Resources (DHHR) CFDA Number 93.558

In February 2020, the DHHR Bureau for Children and Families (BCF) will send a refresh/training blast covering the policy for Sanctions to Family Support Supervisors to field staff. The BCF will also send a checklist to field staff to include with all TANF applications. The BCF Policy Unit will randomly review applications for completeness and accuracy and will direct any errors to the Family Support Supervisors. Finally, the Policy Unit will work with the BCF Division of Training to review and update the training process surrounding applications.

2019-025 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 Health and Human Resources (DHHR) CFDA Number 93.558

The DHHR Bureau for Children and Families (BCF) Policy Unit sent TANF Reminders regarding the sanction process to field staff in March 2018 and September 2019. The Policy Unit will continue to send those TANF Reminders. The Policy Unit also sent a Sanction Flow Chart / Desk Guide to field staff on October 4, 2019 as a refresh of policy. The Policy Unit will redistribute the Sanction Flow Chart / Desk Guide and will provide additional access to it via SharePoint. Management within the BCF will provide additional training to all staff, with an emphasis on maintaining adequate documentation surrounding the issuance and removal of sanctions against TANF recipients. Finally, The BCF will send a checklist to field staff to include with all TANF sanction. The checklist will be scanned into the OnBase information platform. In addition, reviews of the sanction process will take place through supervisory, peer and BCF Division of Planning and Quality Improvement (DPQI) reviews.



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2019-026 SPECIAL TESTS AND PROVISIONS – PENALTY FOR REFUSAL TO WORK

Department of Health and Human Resources (DHHR) CFDA Number 93.558

For the cases selected for testing whereby there were a variety of issues related to the compliance of recipients and documentation within the Recipient Automated Payment Information Data System, the DHHR Bureau for Children and Families (BCF) Policy Unit will use data from county reviews conducted by the BCF DPQI to determine the areas of policy they need to analyze and the technical assistance they need to provide. The Policy Unit will then coordinate with the DPQI and the Division of Training to ensure technical assistance is provided to field staff through monthly reminders, webinars, and office visits as deemed necessary. For the cases selected whereby the individuals should not have been included in the overall population, the DHHR Office of Internal Control and Policy Development will evaluate the manner by which populations are prepared, reviewed, and approved within the DHHR. Prior to the start of fieldwork for the West Virginia Single Audit for the Year Ended June 30, 2020, the Office of Internal Control and Policy Development will revise the internal process in an effort to increase overall accountability and ensure that populations are complete and accurate. Also, reviews of the participation will be completed through supervisory, peer, and DPQI reviews.

2019-027 DHHR INFORMATION SYSTEM AND RELATED BUSINESS PROCESS CONTROLS

Department of Health and Human Resources (DHHR) CFDA Number 93.558, 93.568, 93.575, 93.596, 93.658, 93.659, 93.767, 93.775, 93.777, 93.778

The DHHR continues to evaluate its options for addressing the risk associated with the lack of segregation of duties within the information management systems. One of those options is the Quality Control process. The DHHR defines Quality Control as "a system for measuring the validity of benefit determinations and payment amounts for DHHR programs of assistance at a given point in time". The DHHR has a



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Quality Control Unit within the Office of Inspector General, the mission of which is to ensure the integrity of DHHR programs through impartial evaluation of program benefit determinations. Quality Control provides statistical measurement of the performance and payment accuracy of programs administered by the West Virginia DHHR through an unbiased review of the case circumstances. Quality Control also measures the compliance of DHHR programs with federal regulations. Each month, Quality Control reviewers re-evaluate a statistically reliable sample of customer benefit cases involving Supplemental Nutrition Assistance Program (SNAP), Medicaid, and the Children's Health Insurance Program (CHIP). The results of these efforts provide a measurement of the integrity in which the DHHR administers its programs. The DHHR will explore the possibility of enhancing the Quality Control process by adding other programs to the overall scope and expanding the populations [for sampling] to include not only all payments processed through the information systems that are initiated and approved by the same person without another level of approval prior to the payment being made, but also to include all case data within the information systems that is entered by one person without another level of approval."

2019-028 ELIGIBILITY Department of Health and Human Resources (DHHR) CFDA Number 93.568

The DHHR Bureau for Children and Families will conduct a random sampling of LIHEAP applications and documentation checklists (described below) during heating season. The LIEAP Coordinator will randomly sample cases from the Pending/Approved/ Denied Report WRRP295A. Samples will be pulled from each of the categories on the report and any errors will be directed to local office supervisors and Community Service Managers. Prior to the start of the LIHEAP season, the BCF will update the wording on the LIHEAP application to match the policy manual. To reinforce the processing and documentation requirements, the BCF will send a desk guide and Blackboard Course to field staff prior to peak season for LIHEAP applications and will send a checklist to field staff to ensure the documentation is present in the file. The checklist for LIHEAP will be tailored to the requirements of the



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LIHEAP Program and will be scanned into the OnBase information platform.

2019-029 MISSING SUPPORTING DOCUMENTATION Department of Health and Human Resources (DHHR) CFDA Number 93.568

In March 2020, BCF will implement additional policies and procedures pertaining to the retention of the LIHEAP performance data report form to help ensure that documentation is easily available for auditing purposes and evidence of compliance with all federal guidelines.

2019-030 SPECIAL TESTS AND PROVISIONS – FRAUD DETECTION AND REPAYMENT INTERNAL CONTROLS Department of Health and Human Resources (DHHR) CFDA Number 93.575, 93.596

To resolve this finding, in September 2018, DHHR implemented a new tracking tool developed by the Bureau for Children and Families (BCF), along with the update to Section 2.3 (Operational and Administrative Requirements) of the Policy and Procedure Manual for Child Care Resource and Referral Services. The purpose of the BCF's tracking tool is to ensure, among other things, that all fraudulent claims are identified in the appropriate fiscal year and that all fraudulent payments identified in a fiscal year are included within the population provided to the State's independent auditors, irrespective of whether any repayments have been received and added to the expenses claimed for the fiscal year. Furthermore, the tracking tool utilized by the BCF relates to all improper payments regardless of whether the payment is deemed fraudulent or not.

Since the finding repeated for the year ended June 30, 2019, the DHHR Office of Internal Control and Policy Development (OICPD) will reach out to the DHHR Office of Inspector General (OIG) in an effort to learn more about the OIG's process for identifying and recovering payments resulting from fraud. If the OIG's system and procedures are more authoritative and thorough than the tracking tool and procedures in place at the BCF, the OICPD will work with the OIG to document BCF's



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internal controls and compliance with this special test and provision during fieldwork for the West Virginia Single Audit for the year ended June 30, 2020.

2019-031 ELIGIBILITY DOCUMENTATION Department of Health and Human Resources (DHHR) CFDA Number 93.659

Children and Adult Services Adoption Assistance Program Specialists and Adoption Policy Specialists will work on an updated Standard Operating Procedure to be distributed to the field no later than March 30, 2020. The updated procedure will highlight each required document, the reason for the document, and the steps needed in order to correctly complete the document.

Prior to March 1, 2020, the Adoption Policy Specialist will update Section 11.1.1 - Placement Day of the Adoption Policy to reflect the need of a signature and date on the Adoption Placement Agreement. The phrase "completed and signed" will be changed to "signed and dated."

The Adoption Assistance Program Specialist and/or the Adoption Policy Specialist will continue to attend "new worker trainings" as they occur. These trainings will cover pre-adoption services as well as post-adoption services and will be a mandatory training for all DHHR workers as well as Specialized Agency workers. During these trainings, these Specialists will go over the forms required in order to have a complete adoption packet and answer any questions these new workers may have. For DHHR workers, the trainings are conducted by the DHHR Bureau for Children and Families, Division of Training. For Specialized Agency Workers, the trainings are conducted by the Specialized Agencies. Trainings occur as needed but occur at least twice a year.

The Adoption Assistance Program Specialist will continue to work with the Office Assistants who archive files to ensure that new files are complete, scanned into the FACTS file cabinet, and archived properly. This will occur immediately with ongoing training as needed.



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The Adoption Assistance Program Specialist will continue to discuss the findings of these audits as well as the importance of proper documentation at each quarterly Adoption Management Oversite Meeting. It is expected that the attendees of this meeting will pass this information on to their employees at the county/regional level.

The new Statewide Automated Child Welfare Information System (SACWIS), PATH, is currently being developed. The Adoption Assistance Program Specialist has been part of the team responsible for ensuring that PATH meets required benchmarks and documentation. During these meetings, the Adoption Assistance Program Specialist discussed the importance of adoption documents being complete and accurate prior to submitting to the Post-Adoption Unit. PATH is currently being built to require workers to complete, scan, and upload these documents prior to submission to the Post-Adoption Unit. After submission, if the documents are not complete and accurate, the case will be returned to the regional worker for correction and/or explanation. Currently, it is estimated that PATH will "go live" in the fall of 2021.

Adoption Assistance Program Specialist will continue to work with Policy Program Manager and Social Services Director to continue developing and making changes to the current Timely Adoption SOP as needed.

While the DHHR continues to receive audit findings for missing documentation, we are confident that the trainings, policy changes, and memorandums to the field are ensuring that adoption documents are processed correctly. It should be noted that the continuing audit errors are from cases prior to these implementations.

2019-032 SPECIAL TESTS AND PROVISIONS – UTILIZATION CONTROL AND PROGRAM INTEGRITY INTERNAL CONTROLS Department of Health and Human Resources (DHHR) CFDA Number 93.775, 93.777, 93.778, ARRA

The Bureau for Medical Services, Office of Program Integrity (OPI), will implement policies and procedures to ensure that case files are reviewed upon closure by a member of management separate from the caseworker



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and that the review is documented. The policy and review of case closures by management, with documentation, are being implemented as of January 1, 2020. In addition, during the first quarter of 2020, management will retro-review case closures that occurred between July 1, 2019 and December 31, 2019 and document the review.

2019-033 SPECIAL TESTS AND PROVISIONS – MEDICAID FRAUD CONTROL UNIT INTERNAL CONTROLS Department of Health and Human Resources (DHHR) CFDA Number 93.775, 93.777, 93.778, ARRA

For acceptance of cases, the process of being informed by the Medicaid Fraud Control Unit (MFCU) changed in 2013, from completion of the last section (page 4) of the Medicaid Fraud Referral Form to automated email notifications from the MFCU's Justware system. The Justware email includes Medicaid case identification, the date the MFCU accepted the case, the MFCU case number, the decision regarding law enforcement exception, and the federal reporting code. Justware emails are attached to the i-Sight case when received by the DHHR Bureau for Medical Services (BMS), OPI.

For one of the five cases selected by the state's independent auditors for review (FAM-19-05-00013-003), the Justware email, dated 5/29/19, was attached to the i-Sight case on 5/30/19 (screenshot available upon request). For two of the referred cases selected by the auditors for review, there is a note and date accepted by the MFCU (FAM-19-02-00005, 2/19/19 and PRV-19-03-0002, 9/25/18) in the Medicaid Fraud Referral log (de-identified excerpt available upon request). An OPI fraud referral spreadsheet has been maintained since at least 1997 and currently includes a "Current Status" text field for information regarding receipt of Justware emails denoting case exception, closure, etc. For the fourth case selected by the auditors, the MFCU declined it during a MFCU/OPI monthly meeting and a note was entered on 07/08/19 into the i-Sight case by the OPI reviewer (documentation available upon request). The fifth case selected by the auditors does not have a note in the Fraud Referral log nor a Justware email in the i-Sight case, despite a 12/13/19 email from the MFCU Director indicating that the case has been accepted.



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Effective January 2020, the OPI will remove page 4, the last section of the Medicaid Fraud Referral form, and use the Justware email as notification of acceptance of a referred case by the MFCU. The Justware email will be attached to the i-Sight case upon receipt. For a referred case that is declined by the MFCU, no Justware email is generated, thus the OPI reviewer will note this decision in the i-Sight case and discuss any further action with the OPI Program Manager. For a referred case that is integrated into an existing MFCU case, no Justware email is generated, thus the OPI reviewer will note the case integration in the i-Sight case.

Beginning January 28, 2020, the current status of referred cases not yet accepted will become a specific topic on the OPI/MFCU monthly meeting agenda with a list of the cases to be reviewed. Effective February 1, 2020, the OPI procedures will be revised, to submit Medicaid referrals to MFCU via email with delivery receipt requested, or via hand delivery of data on CD with signature receipt requested. Beginning in February 2020, the OPI will request an update from the MFCU every 30 days on referred cases not yet accepted. Furthermore, prior to April 1, 2020, the OPI will revise the Fraud Referral log to designate specific columns for some of the information currently noted in the "Current Status" text field, to include but not be limited to specific date of a declined case, date of receipt of Justware email, whether a law enforcement exception was invoked by MFCU, and the date of the law enforcement exception.

The OPI policy in Chapter 800B of the Medicaid Policy Manual will be updated to support these changes. Draft changes are already underway. The revised policy will be submitted to the BMS Policy Committee at the next earliest opportunity in 2020.

Lastly, during 2020, the BMS will revisit the current Memorandum of Understanding with the MFCU to identify additional opportunities to improve internal controls.



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2019-034 ELIGIBILITY Department of Health and Human Resources (DHHR) CFDA 93.775, 93.777, 93.778, ARRA, 93.767

For the information system, the DHHR Bureau for Medical Services (BMS) requested an enhancement to the eligibility system to retain historical information obtained from the Federal Data Services Hub.

From the policy perspective, the West Virginia Income Maintenance Manual requires eligibility workers within the DHHR Bureau for Children and Families (BCF) to obtain all pertinent and necessary information through verification, when appropriate, and maintain a case record of all information used to determine eligibility for benefits, including such documentation related to Medicaid and the Children's Health Insurance Program. Until such time as the hub information is retained in the eligibility system, the BMS will develop a new policy/procedure requiring the eligibility worker to print a system screenshot of the hub verification and scan it into the OnBase information platform. The BMS will distribute the new policy to the BCF by February 29, 2020. In January 2015, the BMS, Medicaid Eligibility Policy Unit, issued income verification field guidance to BCF Management for distribution to all eligibility workers. The field guidance will be revisited and issued again by February 7, 2020.

From the training perspective, by February 7, 2020, the BMS will submit a request to the BCF Division of Training to develop a training course for caseworkers regarding the verification procedures, use of the Federal Data Services Hub, and documentation requirements related thereto.

From the legal perspective, in December 2019, the DHHR Office of Internal Control and Policy Development attempted to verify from several sources as to whether the information that the DHHR obtains from the Federal Data Services Hub is considered federal tax information by Internal Revenue Service standards and whether the DHHR can share such information with the independent auditors. The Office of Internal Control and Policy Development will continue with those efforts in February 2020.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2019-035 MATCHING, LEVEL OF EFFORT, EARMARKING Department of Health and Human Resources (DHHR) CFDA 93.788

Although the DHHR did not provide the independent auditors with timely documentation surrounding earmarking, the DHHR does indeed comply with the 5% cap for administrative costs and can document that fact. The DHHR isolates administrative costs for the State Targeted Response to the Opioid Crisis (STR) grant by unit (i.e., cost center). A budget is also established that prevents spending more than 5% of the award for administrative costs. The administrative units for the STR Grant and the State Opioid Response (SOR) grant are 2849, 2899, and 2837. Limiting the budget for those units to no more than 5% of the award ensures that administrative costs do not exceed 5% of the award.

2019-036 SUBRECIPIENT MONITORING Department of Health and Human Resources (DHHR) CFDA 93.788

The checklist in question is formally named, "Checklist of Required Activities for the Award and Monitoring of Grants within the West Virginia Department of Health and Human Resources". The checklist contains 24 subsections (with questions contained therein) that are categorized based on their likely occurrence throughout the typical grant cycle (pre-award, during the award, post-award). The subsections correspond in sequence with the mandatory monitoring activities referenced in Section 400 of DHHR Policy 3801, "Award and Monitoring of Subrecipient Grants". Among many other purposes, the checklist serves as a source of information and tool for DHHR spending units to utilize and ensure that the monitoring activities required per Section 400 of Policy 3801, and other related DHHR directives, are accomplished.

All spending units are required to utilize the checklist, conduct the activities referenced therein, and maintain a completed and signed copy of the checklist within the official grant file as a means to document and certify for auditors, regulators, and reviewers internal and external to



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the DHHR that the spending unit completed all of the mandatory monitoring activities. The underlying goals are to increase overall accountability and lessen the likelihood of a subrecipient committing fraudulent acts or otherwise administering a grant award in a manner that is inconsistent with the terms and conditions of the grant agreement.

As indicated in the finding, one of the checklists was not completed correctly. Question 14a of the checklist requires the spending unit to document whether the subrecipient submitted financial reports within prescribed timeframes. Question 14b documents whether the financial reports were complete and accurate. For one of the six subrecipient awards selected for testing, Questions 14a and 14b were marked with a "yes" even though 3 of the 4 financial reports were not complete, accurate, or submitted by the due date. In response to the finding, the DHHR Office of Internal Control and Policy Development (OICPD) will inform the spending unit of their error and will review additional checklists completed and signed by the spending unit against the documentation within the official grant file. The goal will be to determine whether the error (i.e., incorrect checklist) represents an isolated instance or a systemic problem.

If it represents an isolated instance, the OICPD will send a notice to all DHHR spending units. The purpose of the notice will be to inform applicable staff of the finding and reiterate from the instructions of the checklist, particularly a part therein explaining that unfavorable ("No") answers on the checklist identify situations that could be undesirable but do not necessarily imply that the situation, activity, or lack thereof, All unfavorable ("No") or otherwise questionable is unacceptable. responses must include a reference number next to the particular question, must be fully explained within the "Notes" area of the checklist, and should be cross-referenced (with an auditable trail) to the official grant files. The "Notes" area of the checklist is important to understand because it provides the spending unit with a section on the checklist to document their monitoring efforts in unlimited detail (e.g., emails, telephone calls, and other efforts to ensure that financial reports are submitted timely and accurately) or document their reasoning for not pursuing the unfavorable matter further (e.g., they have a lack of



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

staff and/or made the decision to allow programmatic accomplishments to take precedence over the timeliness of reports).

If the mistake that led to the finding represents a systemic problem, the OICPD will discuss the overall condition with the DHHR Chief Financial Officer and will subsequently take the necessary measures to enhance internal controls (e.g., develop new policies or procedures, provide more technical assistance to spending units, recommend additional staff for monitoring, establish an internal audit function within the office, etc.).

2019-037 SPECIAL TESTS AND PROVISIONS – KEY PERSONNEL Department of Health and Human Resources (DHHR) CFDA 93.788

The DHHR will implement a process whereby the DHHR spending unit must provide a certification to the DHHR Office of Grants Management on a quarterly basis indicating the project director/key personnel for the grant. This will allow the Office of Grants Management to review and determine if any changes need to be submitted to the awarding agency based on the Notice of Award.

2019-038 SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS National Guard Military Operations and Maintenance, School Building Authority CFDA Number 97.036

National Guard Military Operations and Maintenance (O&M) response

O&M will implement additional internal controls and policies and procedures to include additional tracking measures in wvOASIS. O&M will also provide additional training for staff to ensure all federal expenditures are reported accurately and timely. Supporting documentation will be maintained and readily available. These policies and procedures will be in place by April 2020.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

School Building Authority (SBA) response

In May 2019, the SBA hired three employees to specifically oversee its fiduciary obligations for the Federal Emergency Management Agency (FEMA) funds it is receiving for school construction. The new employees have implemented a robust auditing and monitoring process to review and reconcile all federal grant award expenditures. With this new process in place, the SBA is confident the disbursements now being reported are accurate. Additionally, the SBA will utilize the State's financial system, wvOASIS, for all project worksheets related to school construction with the goal of having future transactions in wvOASIS beginning July 2020. The use of wvOASIS will allow for more transparency, strengthened reporting capabilities, and the ability to audit and track payments start-to-finish in the same computer application.

2019-039 INTERNAL CONTROLS OVER REPORTING

Division of Homeland Security and Emergency Management (DHSEM)

CFDA Number 97.036

DHSEM implemented a Reporting Best Practices policy in July 2019, which states that all DHSEM reports, whether programmatic or financial in nature, must be signed and dated by the preparer and a separate reviewer/approver. If the report is submitted in an electronic format or otherwise and does not provide for such signatures, a printed copy of the report or a screen shot will be made, signed, and a copy retained as evidence of the review procedure.

2019-040 SUBRECIPIENT MONITORING

Division of Homeland Security and Emergency Management (DHSEM)

CFDA Number 97.036

Effective July 2019, DHSEM implemented policies and procedures including a checklist and review and approval procedures to ensure all requirements under 2 CFR section 200.331(a) are conveyed to all subrecipients and documentation evidence is maintained on file.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2019-041 SUBRECIPIENT CASH MANAGEMENT Division of Homeland Security and Emergency Management (DHSEM) CFDA Number 97.042

In May 2019, DHSEM implemented policies and procedures. These procedures were updated in November 2019 based on recommendations by FEMA. DHSEM has made substantial progress and will continue to make improvements to disburse subrecipient payment requests within the federally required timeframe. In addition, DHSEM is hiring an additional staff person to focus on this effort. The new hire is expected to be on board by March 2020.

2019-042 EARMARKING

Division of Homeland Security and Emergency Management (DHSEM) CFDA Number 97.042

Effective January 2020, DHSEM developed a method of tracking management and administrative expenses for Emergency Management Performance Grant (EMPG) grants, to ensure they don't exceed 5% of the grant award, as set by the Notice of Funding Opportunity (NOFO). DHSEM will review both the work plan and budget for EMPG and identify personnel and other expenditures directly attributable to management costs. The noted EMPG accountant will detail these costs and correlate them to the budget during each fiscal year. These calculations will be reviewed and approved by a supervisor.

2019-043 PERIOD OF PERFORMANCE MISSING POPULATION Division of Homeland Security and Emergency Management (DHSEM) CFDA Number 97.042

DHSEM is working to establish Period of Performance codes (PPC) within wvOASIS in order to track all transactions by grant year for the EMPG grants. During fiscal year 2020, all PPC codes will be entered for the current year's existing transactions. Effective January 2020, a written policy was implemented requiring all transactions associated



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with EMPG grants that are entered into wvOASIS, the State's accounting system, have all required accounting codes entered on the document. At the time of request to make a purchase, the full accounting code must be entered on the requested document, and the appropriate program manager must initial to show approval for the purchase to be made. This will also include State of WV Purchasing card (P-Card) transactions.

2019-044 REPORTING

Division of Homeland Security and Emergency Management (DHSEM) CFDA Number 97.042

DHSEM held a training course for both the financial and grant management staff to explain the appropriate use of object codes and other coding in wvOASIS, the State's accounting system.

Effective January 2020, a written policy was implemented stating that nothing shall be entered in wvOASIS without all required departmentally determined accounting codes. At the time of request to make a purchase, the full code must be entered on the requested document and the appropriate program manager must initial to show approval for the purchase to be made. In addition, expenditures will be reviewed at least quarterly for proper coding by someone independent from the recording process.

2019-045 REPORTING

Division of Homeland Security and Emergency Management (DHSEM)
CFDA Number 97.042

Effective July 2019, management implemented a Reporting Best Practices policy which states that all DHSEM reports, whether programmatic or financial in nature, must be signed and dated by the preparer and by a separate reviewer/approver. If the report is submitted in an electronic format or otherwise does not provide for such signatures, a printed copy of the report or a screen shot will be made, signed, and a copy retained as evidence of the review procedure.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2019-046 SPECIAL TESTS AND PROVISIONS - TRAINING AND EXERCISE PLAN REQUIREMENTS Division of Homeland Security and Emergency Management (DHSEM) CFDA Number 97.042

DHSEM has identified and required all staff whose payroll is directly funded by EMPG or could be charged to EMPG funding to complete FEMA's Emergency Management Institute's Professional Development Series by December 2019, to ensure compliance with EMPG training requirements. Further, DHSEM will establish policies and procedures to ensure all EMPG-funded personnel complete training and exercise minimum requirements established by the relevant Notice of Funding Opportunities (NOFOs) for all open grants.

DHSEM has also developed a spreadsheet to track all applicable DHSEM personnel and each of the courses for the required core training currently identified in the NOFO. Once an employee completes each of the online training courses required by the NOFO, they receive a certificate from FEMA. The Program Coordinator records when the required course is complete.

Exercises will also be tracked on this spreadsheet. Once the State Exercise Officer announces a required exercise, the Coordinator will add it to the spreadsheet to track in the same manner as the training. Attendance records will be kept at the exercise and provided to the Coordinator for recording. The Coordinator will follow up on noncompliance and will report quarterly the status of employee training and exercises based on the tracker to DHSEMs' Deputy Director.

Effective July 2019, management implemented a Reporting Best Practices policy which states that all DHSEM reports, whether programmatic or financial in nature, must be signed and dated by the preparer and by a separate reviewer/approver. If the report is submitted in an electronic format or otherwise does not provide for such signatures, a printed copy of the report or a screen shot will be made, signed, and a copy retained as evidence of the review procedure.



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CORRECTIVE ACTION PLAN FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2019-047 SPECIAL TESTS AND PROVISIONS - CLOSEOUT REPORTING REQUIREMENTS Division of Homeland Security and Emergency Management (DHSEM) CFDA Number 97.042

During fiscal year 2020, DHSEM will establish a method of tracking the period of performance for these reports to ensure timely submission. All grants will be reviewed at least quarterly to track the status and ensure that are reports are submitted within the 90 days of expiration or termination of the grant award. This review will be performed by someone independent from the staff responsible for generating the reports.

SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2018-001 FINANCIAL STATEMENT CLOSE PROCESS

Financial Accounting and Reporting Section

CFDA Number Not Applicable

Resolved

Corrective action taken for FY 2019.

2018-002 PERIOD OF PERFORMANCE

National Guard Military Operations and Maintenance (O&M)

CFDA Number 12.401 Partially Resolved

In September 2018, O&M started training staff on how to allocate costs to the appropriate grants and grant periods based on the service dates of each transaction. O&M will also work with wvOASIS to establish additional codes within the system in order to track grant expenditures accurately and within the proper grant period. O&M will continue to perform internal audits to ensure accuracy related to the period of performance. See current year finding 2019-003.

2018-003 PROGRAM INCOME MONITORING

National Guard Military Operations and Maintenance (O&M)

CFDA Number 12.401

Resolved

Corrective action taken for FY 2019.

2018-004 REPORTING

West Virginia Community Advancement and Development

Office (WVCAD)

CFDA Number 14.228

Resolved



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2018-005 INTERNAL CONTROLS OVER ALLOWABILITY AND PROCUREMENT

West Virginia Community Advancement and Development Office (WVCAD) CFDA Number 14.228

Resolved

Corrective action taken for FY 2019.

2018-006 FEDERAL HIGHWAYS ADMINISTRATION PERIOD OF PERFORMANCE

Division of Highways (DOH) CFDA Number 20.205, 20.219, 20.224, 23.003 Partially Resolved

In March 2019, DOH implemented policies and procedures to address Performance End Dates. DOH will continue to strengthen their procedures to ensure that all project agreements have end dates. Currently, the Project End Date report from Federal Highway Administration/Fiscal Management Information System (FHWA/FMIS) reflecting all projects with impending project end dates is provided to project managers for review. If a revision is required, a request for a project end date extension is then sent to FHWA for approval. DOH worked with wvOASIS to create a new report for program managers to monitor projects and project end dates which is currently being tested. DOH plans to fully roll out the new report to all districts by December 2020. See current year finding 2019-011.

2018-007 INTERNAL CONTROLS OVER SCHEDULE OF EXPENDITURES AND FEDERAL AWARDS
Division of Highways (DOH)
CFDA Number 20.205, 20.219, 20.224, 23.003
Resolved



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2018-008 WAGE RATE REQUIREMENTS
Division of Highways (DOH)
CFDA Number 20.205, 20.219, 20.224, 23.003
Partially Resolved

DOH will provide continued training for current and newly hired engineers and project supervisors to ensure accurately documenting labor compliance enforcement and reviewing certified payrolls. See current year finding 2019-012.

2018-009 INTERNAL CONTROLS OVER SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

New River Community and Technical College (New River)

CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364, 93.925

Resolved

Corrective action taken for FY 2019.

2018-010 INTERNAL CONTROLS OVER CASH MANAGEMENT
West Liberty University and West Virginia Northern
Community and Technical College
CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379,
93.264, 93.342, 93.364, 93.925
Resolved

Corrective action taken for FY 2019.

2018-011 SPECIAL TESTS AND PROVISIONS – DISBURSEMENTS TO OR ON BEHALF OF STUDENTS

West Virginia State University, Shepherd University, and West Virginia University at Parkersburg CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379,

93.264, 93.342, 93.364, 93.925

Partially Resolved



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

West Virginia State University (WVSU) response

In December 2018, WVSU implemented a corrective action plan to address this matter. The Office of Student Financial Aid met with the Information Technology Department and updated the student/parent borrower Right to Cancel notification. The updates include borrower specific loan information with the amount and date of disbursement disclosed. All required information is now present on the Right to Cancel notifications. Policies and procedures were updated based upon the corrective action plan. In compliance with the updates, all supporting documentation of sent notifications are maintained and archived by the Office of Financial Aid. WVSU will continue to strengthen internal controls to ensure compliance with federal guidelines. See current year finding 2019-017.

Shepherd University (Shepherd) response

In July 2019, Shepherd developed additional policies and procedures to ensure that all Right-To-Cancel Notices (RTCN) are sent to student and parent borrowers. Shepherd implemented internal controls by manually sending out the RTCN to all student and parent borrowers and copying the financial aid manager on all loan disbursement (RTCN) emails in order to maintain documentation evidence. The financial aid manager pulls information from Banner to create a spreadsheet that tracks the student's name, ID, and date delivered before filing the printed copy in the student's file. The financial aid director then spot checks the spreadsheet for accuracy. In addition, RUAMAIL is populated with date the email was sent. Emails are also archived as evidence of Shepherd's compliance. See current year finding 2019-017.

West Virginia University at Parkersburg (WVU-P) response

Effective July 2019, policies and procedures were implemented so at the time of disbursement, students are sent a disbursement notification which includes the required information concerning aid disbursement produced by the Banner system. It will be documented, maintained, and tracked by student in the system. This new notification process ensures all students are properly notified and allows for evidence of WVU-P's compliance with all federal guidelines. See current year finding 2019-017.



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2018-012	SPECIAL TESTS AND PROVISIONS – ENROLLMENT
2017-006	REPORTING
2016-008	West Liberty University, Fairmont State University, Pierpont
2015-015	Community and Technical College, West Virginia State
2014-011	University, and West Virginia University at Parkersburg
2013-028	CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379,
2012-43	93.264, 93.342, 93.364, 93.925
2012-47	Partially Resolved
2012-49	
2011-22	

West Liberty University (West Liberty) response

In January 2020, West Liberty updated reporting to all graduated students within 20 days through Student Clearinghouse to meet all federal requirements. Before reports are sent to the Clearinghouse, the Director of Financial Aid checks for accuracy and completeness.

To increase accuracy in reporting, West Liberty has also started manually checking graduated students in NSLDS on day 25 to ensure the federal regulation is met on reporting for graduates. See current year finding 2019-019.

Fairmont State University (FSU) response

Beginning January 2020, FSU implemented additional internal controls. The reviewer reviews files to identify and correct any errors, verifies the number of records is correct, and selects a few records for testing to ensure the information uploaded to the Clearinghouse is complete and accurate. See current year finding 2019-019.

Pierpont Community and Technical College (PCTC) response

Effective January 2020, PCTC strengthened policies and procedures regarding the enrollment reporting process. The Registrar will perform a review of each enrollment file by comparing the number of students enrolled in the file to BANNER. In addition, PCTC will spot check the enrollment information for accuracy, correcting any errors before uploading to the Clearinghouse. The Registrar's office and financial aid will communicate monthly to help ensure that any changes to student's status is updated timely. See current year finding 2019-019.



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

West Virginia State University (WVSU) response

In January 2020, WVSU implemented new internal controls to produce accurate and timely submission of enrollment information to the National Student Loan Data System (NSLDS) and the U.S. Department of Education. Thorough edit checks of student data for each semester will be produced by IT. Any errors discovered will be corrected before each enrollment file is produced. Policies and procedures will be updated in January 2020 regarding producing the enrollment file. See current year finding 2019-019.

West Virginia University at Parkersburg (WVU-P) response

Effective January 2020, WVU-P has implemented policies and procedures of the enrollment reporting process for reviewing and approving the information. In addition, a transmittal form will be completed to document the completion of this procedure to ensure the U.S. Department of Education and NSLDS is notified of changes in student status in a timely and accurate manner. See current year finding 2019-019.

2018-013 SPECIAL TESTS AND PROVISIONS – INTERNAL CONTROLS 2017-007 OVER BORROWER DATA TRANSMISSION AND 2016-006 RECONCILIATION

West Liberty University and West Virginia University at Parkersburg CFDA Number 84.007, 84.033, 84.038, 84.063, 84.268, 84.379, 93.264, 93.342, 93.364, 93.925 Partially Resolved

West Liberty University (West Liberty) response Resolved

Corrective action taken at this institution for FY 2019.

West Virginia University at Parkersburg (WVU-P) response

In January 2020, WVU-P implemented new policies and procedures for the Direct Loan process, including usage of SAS reports in a monthly reconciliation. WVU-P utilizes the Direct Loan Reconciliation participant guide provided by the Department of Education to ensure



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

the policies and procedures are compliant and that the approvals will be maintained. See current year finding 2019-020.

2018-014 **ELIGIBILITY**

Division of Rehabilitation Services (DRS)

CFDA Number 84.126

Resolved

Corrective action taken for FY 2019.

2018-015 REPORTING

Division of Rehabilitation Services (DRS)

CFDA Number 84.126

Resolved

Corrective action taken for FY 2019.

SPECIAL TESTS AND PROVISIONS - COMPLETION OF 2018-016

INDIVIDUAL PLANS FOR EMPLOYMENT (IPES)

Division of Rehabilitation Services (DRS)

CFDA Number 84.126

Resolved

Corrective action taken for FY 2019.

2018-017	DHHR INFORMATION SYSTEM AND RELATED BUSINESS
2017-002	PROCESS CONTROLS
2016-017	Department of Health and Human Resources (DHHR)
2015-025	CFDA Number 93.558, 93.568, 93.575, 93.596, 93.658, 93.659,
2014-016	93.767, 93.775, 93.777, 93.778
2013-034	Partially Resolved
2012-51	
2011-46	
2010-43	
2009-43	
2008-55	
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The DHHR continues to evaluate its options for addressing the risk associated with the lack of segregation of duties within the information



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

management systems. One of those options is the Quality Control The DHHR defines Quality Control as "a system for measuring the validity of benefit determinations and payment amounts for DHHR programs of assistance at a given point in time". The DHHR has a Quality Control Unit within the Office of Inspector General, the mission of which is to ensure the integrity of DHHR through impartial evaluation ofprogram determinations. Quality Control provides statistical measurement of the performance and payment accuracy of programs administered by the West Virginia DHHR through an unbiased review of the case circumstances. Quality Control also measures the compliance of DHHR programs with federal regulations. Each month, Quality Control reviewers re-evaluate a statistically reliable sample of customer benefit cases involving Supplemental Nutrition Assistance Program (SNAP), Medicaid, and the Children's Health Insurance Program (CHIP). The results of these efforts provide a measurement of the integrity in which the DHHR administers its programs. The DHHR will explore the possibility of enhancing the Quality Control process by adding other programs to the overall scope and expanding the populations [for sampling] to include not only all payments processed through the information systems that are initiated and approved by the same person without another level of approval prior to the payment being made, but also to include all case data within the information systems that is entered by one person without another level of approval." See current year finding 2019-027.

2018-018 REPORTING

Department of Health and Human Resources (DHHR) CFDA Number 93.558 Resolved



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2018-019	SPECIAL TESTS AND PROVISIONS - INTERNAL CONTROLS
2017-010	OVER CHILD SUPPORT NON-COOPERATION, PENALTY FOR
2016-016	REFUSAL TO WORK, AND ADULT CUSTODIAL PARENT OF
2015-024	CHILD UNDER SIX WHEN CHILD CARE NOT AVAILABLE
2014-018	Department of Health and Human Resources (DHHR)
2013-036	CFDA Number 93.558
2012-56	Partially Resolved
2011-44	
2010-41	

The DHHR Bureau for Children and Families (BCF) Policy Unit sent TANF Reminders regarding the sanction process to field staff in March 2018 and September 2019. The Policy Unit will continue to send those TANF Reminders. The Policy Unit also sent a Sanction Flow Chart / Desk Guide to field staff on October 4, 2019 as a refresh of policy. The Policy Unit will redistribute the Sanction Flow Chart / Desk Guide and will provide additional access to it via SharePoint. Management within the BCF will provide additional training to all staff, with an emphasis on maintaining adequate documentation surrounding the issuance and removal of sanctions against TANF recipients. Finally, The BCF will send a checklist to field staff to include with all TANF sanction. The checklist will be scanned into the OnBase information platform. In addition, reviews of the sanction process will take place through supervisory, peer and BCF Division of Planning and Quality Improvement (DPQI) reviews. See current year finding 2019-025.

2018-020 SPECIAL TESTS AND PROVISIONS – CHILD SUPPORT NON-COOPERATION

Department of Health and Human Resources (DHHR) CFDA Number 93.558 Resolved



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2018-021	ALLOWABILITY AND ELIGIBILITY
2017-011	Department of Health and Human Resources (DHHR)
2016-018	CFDA Number 93.568
2015-026	Partially Resolved
2014-021	
2013-037	
2012-57	
2011-50	
2010-46	
2009-48	
2008-59	
2007-59	
2006-43	
2005-50	

The DHHR Bureau for Children and Families will conduct a random sampling of LIHEAP applications and documentation checklists (described below) during heating season. The LIEAP Coordinator will randomly sample cases from the Pending/Approved/ Denied Report WRRP295A. Samples will be pulled from each of the categories on the report and any errors will be directed to local office supervisors and Community Service Managers. Prior to the start of the LIHEAP season, the BCF will update the wording on the LIHEAP application to match the policy manual. To reinforce the processing and documentation requirements, the BCF will send a desk guide and Blackboard Course to field staff prior to peak season for LIHEAP applications and will send a checklist to field staff to ensure the documentation is present in the file. The checklist for LIHEAP will be tailored to the requirements of the LIHEAP Program and will be scanned into the OnBase information platform. See current year finding 2019-028.



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2018-022 SPECIAL TESTS AND PROVISIONS – FRAUD DETECTION
2017-014 AND REPAYMENT CONTROLS
2016-021 Department of Health and Human Resources (DHHR)
CFDA Number 93.575 and 93.596
Partially Resolved

To resolve this finding, in September 2018, DHHR implemented a new tracking tool developed by the Bureau for Children and Families (BCF), along with the update to Section 2.3 (Operational and Administrative Requirements) of the Policy and Procedure Manual for Child Care Resource and Referral Services. The purpose of the BCF's tracking tool is to ensure, among other things, that all fraudulent claims are identified in the appropriate fiscal year and that all fraudulent payments identified in a fiscal year are included within the population provided to the State's independent auditors, irrespective of whether any repayments have been received and added to the expenses claimed for the fiscal year. Furthermore, the tracking tool utilized by the BCF relates to all improper payments regardless of whether the payment is deemed fraudulent or not.

Since the finding repeated for the year ended June 30, 2019, the DHHR Office of Internal Control and Policy Development (OICPD) will reach out to the DHHR Office of Inspector General (OIG) in an effort to learn more about the OIG's process for identifying and recovering payments resulting from fraud. If the OIG's system and procedures are more authoritative and thorough than the tracking tool and procedures in place at the BCF, the OICPD will work with the OIG to document BCF's internal controls and compliance with this special test and provision during fieldwork for the West Virginia Single Audit for the year ended June 30, 2020. See current year finding 2019-030.



2013-040 2012-59

STATE OF WEST VIRGINIA DEPARTMENT OF ADMINISTRATION

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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2018-023	ELIGIBILITY DOCUMENTATION
2017-015	Department of Health and Human Resources (DHHR)
2016-022	CFDA Number 93.659
2015-029	Partially Resolved
2014-024	

Children and Adult Services Adoption Assistance Program Specialists and Adoption Policy Specialists will work on an updated Standard Operating Procedure to be distributed to the field no later than March 30, 2020. The updated procedure will highlight each required document, the reason for the document, and the steps needed in order to correctly complete the document.

Prior to March 1, 2020, the Adoption Policy Specialist will update Section 11.1.1 - Placement Day of the Adoption Policy to reflect the need of a signature and date on the Adoption Placement Agreement. The phrase "completed and signed" will be changed to "signed and dated."

The Adoption Assistance Program Specialist and/or the Adoption Policy Specialist will continue to attend "new worker trainings" as they occur. These trainings will cover pre-adoption services as well as post-adoption services and will be a mandatory training for all DHHR workers as well as Specialized Agency workers. During these trainings, these Specialists will go over the forms required in order to have a complete adoption packet and answer any questions these new workers may have. For DHHR workers, the trainings are conducted by the DHHR Bureau for Children and Families, Division of Training. For Specialized Agency Workers, the trainings are conducted by the Specialized Agencies. Trainings occur as needed but occur at least twice a year.

The Adoption Assistance Program Specialist will continue to work with the Office Assistants who archive files to ensure that new files are complete, scanned into the FACTS file cabinet, and archived properly. This will occur immediately with ongoing training as needed.



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

The Adoption Assistance Program Specialist will continue to discuss the findings of these audits as well as the importance of proper documentation at each quarterly Adoption Management Oversite Meeting. It is expected that the attendees of this meeting will pass this information on to their employees at the county/regional level.

The new Statewide Automated Child Welfare Information System (SACWIS), PATH, is currently being developed. The Adoption Assistance Program Specialist has been part of the team responsible ensuring that **PATH** meets required benchmarks During these meetings, the Adoption Assistance documentation. Program Specialist discussed the importance of adoption documents being complete and accurate prior to submitting to the Post-Adoption Unit. PATH is currently being built to require workers to complete, scan, and upload these documents prior to submission to the Post-Adoption Unit. After submission, if the documents are not complete and accurate, the case will be returned to the regional worker for correction and/or explanation. Currently, it is estimated that PATH will "go live" in the fall of 2021.

Adoption Assistance Program Specialist will continue to work with Policy Program Manager and Social Services Director to continue developing and making changes to the current Timely Adoption SOP as needed.

While the DHHR continues to receive audit findings for missing documentation, we are confident that the trainings, policy changes, and memorandums to the field are ensuring that adoption documents are processed correctly. It should be noted that the continuing audit errors are from cases prior to these implementations. See current year finding 2019-031.



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2018-024 ACTIVITIES ALLOWED OR UNALLOWED AND ALLOWABLE COSTS/COST PRINCIPLES

Department of Health and Human Resources (DHHR) CFDA Number 93.775, 93.777, and 93.778 Resolved

Corrective action taken for FY 2019.

2018-025 INTERNAL CONTROLS OVER REPORTING
2017-020 Division of Homeland Security and Emergency Management
2016-025 (DHSEM)
CFDA Number 97.036
Partially Resolved

DHSEM implemented a Reporting Best Practices policy in July 2019, which states that all DHSEM reports, whether programmatic or financial in nature, must be signed and dated by the preparer and a separate reviewer/approver. If the report is submitted in an electronic format or otherwise and does not provide for such signatures, a printed copy of the report or a screen shot will be made, signed, and a copy retained as evidence of the review procedure. See current year finding 2019-039.

2018-026 INTERNAL CONTROL OVER ALLOWABILITY

Division of Highways (DOH) CFDA Number 97.036

Resolved

Corrective action taken for FY 2019.

2018-027 CASH MANAGEMENT

School Building Authority (SBA) CFDA Number 97.036

Resolved



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2018-028 SUBRECIPIENT CASH MANAGEMENT

Division of Homeland Security and Emergency Management

(DHSEM)

CFDA Number 97.036

Resolved

Corrective action taken for FY 2019.

2018-029 SUBRECIPIENT MONITORING

Division of Homeland Security and Emergency Management

(DHSEM)

CFDA Number 97.036

Resolved

Corrective action taken for FY 2019.

2018-030 SUBRECIPIENT CASH MANAGEMENT

Division of Homeland Security and Emergency Management

(DHSEM)

CFDA Number 97.039

Resolved

DHSEM submitted a cash management policy, effective March 2019 and updated July 2019, to FEMA during fiscal year 2019. This policy details the subrecipient payment process, including appropriate review and approval. The policy also emphasizes that payments must be made within 30 calendar days after the receipt of billing. This finding was closed by FEMA in August 2019.

2018-031 SUBRECIPIENT ELIGIBILITY

Division of Homeland Security and Emergency Management

(DHSEM)

CFDA Number 97.039

Partially Resolved

DHSEM submitted a Hazard Mitigation Grant Program's eligibility determination policy, effective March 2019 and updated July 2019, to FEMA. The policy included the necessity of a FEMA-approved



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

Mitigation Plan as well as a procedure for document retention. In September 2019, DHSEM submitted supporting documentation to FEMA for the Questioned Costs associated with the finding.

2018-032 MATCHING

Division of Homeland Security and Emergency Management (DHSEM) CFDA Number 97.039 Partially Resolved

DHSEM submitted a Hazard Mitigation Grant Program Matching policy, effective March 2019 and updated July 2019, which states that payments to subrecipients are maintained so that for each payout of the federal share, payment for the portion of the match percentage is also made. Supporting documentation was also submitted to FEMA in September 2019, for the Questioned Costs associated with the finding,

2018-033 REPORTING

Division of Homeland Security and Emergency Management (DHSEM)
CFDA Number 97.039
Partially Resolved

DHSEM submitted policies and procedures over the report and submission process, effective March 2019 and updated July 2019, to FEMA. Supporting documentation was submitted to FEMA in September 2019, for the Questioned Costs associated with the finding.

2018-034 SUBRECIPIENT MONITORING

Division of Homeland Security and Emergency Management (DHSEM) CFDA Number 97.039 Resolved



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2018-035 SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS

Division of Homeland Security and Emergency Management

(DHSEM)

CFDA Number 97.042

Resolved

Corrective action taken for FY 2019.

2018-036 ALLOWABILITY

Division of Homeland Security and Emergency Management

(DHSEM)

CFDA Number 97.042

Resolved

Corrective action taken for FY 2019.

2018-037 SUBRECIPIENT CASH MANAGEMENT

Division of Homeland Security and Emergency Management

(DHSEM)

CFDA Number 97.042

Partially Resolved

In May 2019, DHSEM implemented policies and procedures. These procedures were updated in November 2019 based on recommendations by FEMA. DHSEM has made substantial progress and will continue to make improvements to disburse subrecipient payment requests within the federally required timeframe. In addition, DHSEM is hiring an additional staff person to focus on this effort. The new hire is expected to be on board by March 2020. See current year finding 2019-041.

2018-038 ELIGIBILITY FOR SUBRECIPIENTS

Division of Homeland Security and Emergency Management

(DHSEM)

CFDA Number 97.042

Resolved



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

2018-039 EARMARKING

Division of Homeland Security and Emergency Management (DHSEM) CFDA Number 97.042 Partially Resolved

Effective January 2020, DHSEM developed a method of tracking management and administrative expenses for Emergency Management Performance Grant (EMPG) grants, to ensure they don't exceed 5% of the grant award, as set by the Notice of Funding Opportunity (NOFO). DHSEM will review both the work plan and budget for EMPG and identify personnel and other expenditures directly attributable to management costs. The noted EMPG accountant will detail these costs and correlate them to the budget during each fiscal year. These calculations will be reviewed and approved by a supervisor. See current year finding 2019-042.

2018-040 MATCHING

Division of Homeland Security and Emergency Management (DHSEM) CFDA Number 97.042 Resolved

Corrective action taken for FY 2019.

2018-041 REPORTING

Division of Homeland Security and Emergency Management (DHSEM)
CFDA Number 97.042
Partially Resolved

Effective July 2019, management implemented a Reporting Best Practices policy which states that all DHSEM reports, whether programmatic or financial in nature, must be signed and dated by the preparer and by a separate reviewer/approver. If the report is submitted in an electronic format or otherwise does not provide for such signatures, a printed copy of the report or a screen shot will be



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

made, signed, and a copy retained as evidence of the review procedure. See current year finding 2019-045.

2018-042 SUBRECIPIENT MONITORING

Division of Homeland Security and Emergency Management (DHSEM) CFDA Number 97.042 Resolved

Corrective action taken for FY 2019.

2018-043 SPECIAL TESTS AND PROVISIONS - CLOSEOUT REPORTING REQUIREMENTS

Division of Homeland Security and Emergency Management (DHSEM)

CFDA Number 97.042 Partially Resolved

During fiscal year 2020, DHSEM will establish a method of tracking the period of performance for these reports to ensure timely submission. All grants will be reviewed at least quarterly to track the status and ensure that are reports are submitted within the 90 days of expiration or termination of the grant award. This review will be performed by someone independent from the staff responsible for generating the reports. See current year finding 2019-047.

2018-044 SPECIAL TESTS AND PROVISIONS - TRAINING AND EXERCISE PLAN REQUIREMENTS

Division of Homeland Security and Emergency Management (DHSEM)

CFDA Number 97.042 Partially Resolved

DHSEM has identified and required all staff whose payroll is directly funded by EMPG or could be charged to EMPG funding to complete FEMA's Emergency Management Institute's Professional Development Series by December 2019, to ensure compliance with EMPG training requirements. Further, DHSEM will establish policies and procedures



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SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE FISCAL YEAR ENDED JUNE 30, 2019

to ensure all EMPG-funded personnel complete training and exercise minimum requirements established by the relevant Notice of Funding Opportunities (NOFOs) for all open grants.

DHSEM has also developed a spreadsheet to track all applicable DHSEM personnel and each of the courses for the required core training currently identified in the NOFO. Once an employee completes each of the online training courses required by the NOFO, they receive a certificate from FEMA. The Program Coordinator records when the required course is complete.

Exercises will also be tracked on this spreadsheet. Once the State Exercise Officer announces a required exercise, the Coordinator will add it to the spreadsheet to track in the same manner as the training. Attendance records will be kept at the exercise and provided to the Coordinator for recording. The Coordinator will follow up on noncompliance and will report quarterly the status of employee training and exercises based on the tracker to DHSEMs' Deputy Director.

Effective July 2019, management implemented a Reporting Best Practices policy which states that all DHSEM reports, whether programmatic or financial in nature, must be signed and dated by the preparer and by a separate reviewer/approver. If the report is submitted in an electronic format or otherwise does not provide for such signatures, a printed copy of the report or a screen shot will be made, signed, and a copy retained as evidence of the review procedure. See current year finding 2019-046.