Single Audit Report For the Year Ended June 30, 2019 County of Ventura, California



County of Ventura, California

Single Audit Report

For the Year Ended June 30, 2019

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Independent Auditor's Report 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*

To the Board of Supervisors County of Ventura, California

We have audited, in accordance with the auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, the financial statements of the governmental activities, the business-type activities, the discretely presented component unit, each major fund, and the aggregate remaining fund information of the County of Ventura, California (County), as of and for the year ended June 30, 2019, and the related notes to the financial statements, which collectively comprise the County's basic financial statements, and have issued our report thereon dated February 21, 2020. Our report includes a reference to other auditors who audited the financial statements of the Ventura County Public Financing Authority and the Children and Families First Commission of Ventura County, as described in our report on the County'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.

Internal Control over Financial Reporting

In planning and performing our audit of the financial statements, we considered the County'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 opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the County's internal control. Accordingly, we do not express an opinion on the effectiveness of the County'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 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 and therefore, material weaknesses or significant deficiencies may exist that have not been identified. Given these limitations, during our audit we did not identify any deficiencies in internal control that we consider to be material weaknesses. We did identify a deficiency in internal control, described in the accompanying schedule of findings and questioned costs as item 2019-001 that we consider to be a significant deficiency.

Compliance and Other Matters

As part of obtaining reasonable assurance about whether the County's financial statements are free from 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*.

County's Response to Finding

The County's responses to the findings identified in our audit are described in the accompanying schedule of findings and questioned costs and separate corrective action plan. The County's responses were not subjected to the auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on it.

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.

Ide Sailly LLP

Rancho Cucamonga, California February 21, 2020



CPAs & BUSINESS ADVISORS

Independent Auditor's Report on Compliance for Each Major Federal Program; Report on Internal Control over Compliance; Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance; and the Supplemental Schedule of California State Department of Aging Expenditures of Federal and State Awards

To the Board of Supervisors County of Ventura, California

Report on Compliance for Each Major Federal Program

We have audited the County of Ventura, California's (County) compliance with the types of compliance requirements described in the *OMB Compliance Supplement* that could have a direct and material effect on each of the County's major federal programs for the year ended June 30, 2019. The County's major federal programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

The County's basic financial statements include the operations of the Children and Families First Commission of Ventura County, a discretely presented component unit, which received \$184,074 in federal awards which is not included in the schedule during the year ended June 30, 2019. Our audit, described below, did not include the operations of the Children and Families First Commission of Ventura County because they engaged other auditors.

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 County'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 of America; 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 County'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 opinion on compliance for each major federal program. However, our audit does not provide a legal determination of the County's compliance.

Opinion on Each Major Federal Program

In our opinion, the County 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 major federal programs for the year ended June 30, 2019.

Other Matters

The results of our auditing procedures disclosed 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 item 2019-002. Our opinion on each major federal program is not modified with respect to these matters.

The County's response to the noncompliance findings identified in our audit is described in the accompanying schedule of findings and questioned costs and separate corrective action plan. The County's response was not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

As discussed in Note 4 to the Schedule of Expenditures of Federal Awards (Schedule), this report is replacing the report previously issued on March 27, 2020. The California State Department of Aging requests the following closely related programs identified by CFDA numbers 93.041, 93.042, 93.043, 93.044, 93.045, 93.052 and 93.053 be included in the Aging Cluster for purposes of determining major programs. The Schedule of Findings and Questioned Costs has been revised to include the Aging Cluster as a major federal program.

Report on Internal Control over Compliance

Management of the County 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 County'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 federal 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 County's internal control over compliance.

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. A *significant deficiency in internal control over compliance* is a deficiency or a combination of deficiency, or a combination of deficiency, or detected and corrected, on a timely basis. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, is a deficiency, or a combination of deficience, 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. A *significant deficiency in internal control over compliance* is a deficiency, or a combination of deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

Our consideration of internal control over compliance was for the limited purpose described in the first paragraph of this section 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. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, we identified a certain deficiency in internal control over compliance, as described in the accompanying schedule of findings and questioned costs as item 2019-002 that we consider to be a significant deficiency.

The County's response to the internal control over compliance findings identified in our audit are described in the accompanying schedule of findings and questioned costs and separate corrective action plan. The County's response was not subjected to the auditing procedures applied in the audit of compliance and, accordingly, we express no opinion on the response.

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

Report on Schedule of Expenditures of Federal Awards Required by the Uniform Guidance and the Supplemental Schedule of California State Department of Aging Expenditures of Federal and State Awards

We have audited the financial statements of the governmental activities, the business-type activities, the discretely presented component unit, each major fund, and the aggregate remaining fund information of the County as of and for the year ended June 30, 2019, and the related notes to the financial statements, which collectively comprise the County's basic financial statements. We issued our report thereon dated February 21, 2020, which contained unmodified opinions on those financial statements. Our report included a reference to other auditors who audited the financial statements of the Ventura County Public Financing Authority and the Children and Families First Commission of Ventura County, as described in our report on the County's financial statements. Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the basic financial statements. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by the Uniform Guidance and is not a required part of the basic financial statements. The Supplemental Schedule of California State Department of Aging Expenditures of Federal and State Awards is presented for purpose of additional analysis and is not a required part of the basic financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the basic financial statements or to the basic financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the schedule of expenditures of federal awards and the Supplemental Schedule of California State Department of Aging Expenditures of Federal and State Awards are fairly stated in all material respects in relation to the financial statements as a whole.

ide Sailly LLP

Rancho Cucamonga, California March 27, 2020, except the Summary of Auditor's Results within the Schedule of Findings and Questioned Costs and Note 4, for which the date is June 25, 2021.

U.S. DEPT/PASS-THROUGH AGENCY/ PROGRAM TITLE/CLUSTER	FEDERAL CFDA NUMBER	DIRECT OR PASS-THROUGH ENTITY IDENTIFYING NUMBER ^[1]	FEDERAL EXPENDITURES	FEDERAL AWARDS PASSED THROUGH TO SUBRECIPIENTS
U.S. DEPARTMENT OF AGRICULTURE:				
CHILD NUTRITION CLUSTER Passed-through California Department of Education:				
School Breakfast Program	10.553	03069-SN-56R	\$ 58,343	\$ -
National School Lunch Program Total Child Nutrition Cluster	10.555	03069-SN-56R	108,031 166,374	
SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) CLUSTER				
Passed-through California Department of Aging:				
State Administrative Matching Grants for the Supplemental Nutrition Assistance Program:	10.541	CD 1510 10	11/17	
Supplemental Nutrition Assistance Education Program Supplemental Nutrition Assistance Education Program	10.561 10.561	SP-1718-18 SP-1819-18	11,667 56,121	-
Sub-total			67,788	-
Passed-through California Department of Public Health:				
State Administrative Matching Grants for the Supplemental Nutrition Assistance Program: The Nutrition Education and Obesity Prevention Program	10.561	16-10161	255,848	
The Nutrition Education and Obesity Prevention Program	10.561	16-10161	585,166	
Sub-total			841,014	
Passed-through California Department of Social Services: State Administrative Matching Grants for the Supplemental Nutrition Assistance Program:				
Welfare Fraud CalFresh Admin	10.561	CFL 15/16-15, 40	382,984	-
CalFresh CalWIN	10.561	WCDS 9/28/18	561,393	-
CalFresh Admin CalFresh Employment & Training	10.561 10.561	CFL 18/19-12 CFL 18/19-55	13,612,741 51,761	-
Sub-total	10.501	01210(1) 55	14,608,879	-
Total State Administrative Matching Grants for the Supplemental Nutrition Assistance Program Total Supplemental Nutrition Assistance Program (SNAP) Cluster			15,517,681 15,517,681	
FOREST SERVICE SCHOOLS AND ROADS CLUSTER Passed-through State Controller's Office:				
Schools and Roads - Grants to States:				
Federal Forest Reserve Total Forest Service Schools and Roads Cluster	10.665	9400	43,520 43,520	
Direct Programs:				
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	10.557	N/A	6,063	-
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	10.557	N/A	2,680	
Sub-total Direct Programs			8,743	
Passed-through California Department of Public Health:	10.557	17 10120	1 007 (2(
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	10.557 10.557	17-10130 18-10130	1,097,626 3,543,429	-
Sub-total Total Special Supplemental Nutrition Program for Women, Infants and Children			4,641,055 4,649,798	-
			4,049,798	
Direct Programs: Law Enforcement Agreements:				
2018 Controlled Substance Annual Oper&Fin Plan	10.704	15-LE-11051360-030	16,218	
Watershed Protection and Flood Prevention:				
Beardsley-Ferro Channel	10.904	NR189104XXXXC001	122,628	
Emergency Watershed Protection Program:				
Thomas Fire, Fox Canyon Thomas Fire, Jepson Wash	10.923 10.923	68-9104-18-210 68-9104-18-208	5,729 24,104	-
Thomas Fire, Barlow Canyon	10.923	68-9104-18-209	(750)	
Sub-total Sub-total Direct Programs			29,083 167,929	
			107,929	
Passed-through California Department of Food and Agriculture: Plant and Animal Disease, Pest Control, and Animal Care:				
Glassy Winged Sharp Shooter (GWSS)	10.025	18-8506-0484-CA	783,887	-
Sudden Oak Death (SOD) Light Brown Apple Moth (LBAM)	10.025 10.025	AP18PPQF0000C522 18-0299-000FR	1,600 5,336	-
Sub-total	10.020	10 02// 00011	790,823	-
Passed-through California Department of Education:				
Child & Adult Care Food Program	10.558	04324-CACFP-56-GM-IC 04324-CACFP-56-GM-IC	2,201	-
Child & Adult Care Food Program Sub-total	10.558	04324-CACFP-30-GM-IC	15,201 17,402	
Total U.S. Department of Agriculture			21,353,527	-
U.S. DEPARTMENT OF COMMERCE				
Passed-through Department of Fish and Wildlife:				
Columbia River Fisheries Development Program Fisheries Restoration Grant - Arrundo Free Wtrshd Project GRA	11 420	P1750901	25,848	
Total U.S. Department of Commerce	11.438	F1730901	25,848	
U.S. DEPARTMENT OF EDUCATION				
Passed-through Department of Rehabilitation:				
Rehabilitation Services Vocation Rehabilitation Grants to States: Case Services and Cooperative Program Agreements	84.126	N/A	29,905	
Total U.S. Department of Education	0120	. d / L	29,905	

^[1] N/A - Not Available

U.S. DEPT/PASS-THROUGH AGENCY/ PROGRAM TITLE/CLUSTER	FEDERAL CFDA NUMBER	DIRECT OR PASS-THROUGH ENTITY IDENTIFYING NUMBER ^[1]	FEDERAL EXPENDITURES	FEDERAL AWARDS PASSED THROUGH TO SUBRECIPIENTS
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES:				
HEALTH CENTER PROGRAM CLUSTER Direct Programs:				
Consolidated Health Centers (Community Health Centers, Migrant Health Centers,				
Health Care for the Homeless, And Public Housing Primary Care):				
Healthcare for the Homeless	93.224	N/A	\$ 22,707	\$ -
Healthcare for the Homeless Healthcare for the Homeless	93.224 93.224	N/A N/A	1,478,210 621,544	-
Sub-total Direct Programs	93.224	IN/A	2,122,461	
Total Health Center Program Cluster			2,122,461	-
AGING CLUSTER				
Passed-through California Department of Aging:				
Special Programs for the Aging - Title VII, Chapter 3 - Programs for Prevention of				
Elder Abuse, Neglect, and Exploitation:				
Title VIIB-Elder Abuse Program	93.041 ^[2]	AP-1819-18	6,992	6,000
Special Programs for the Aging - Title VII, Chapter 2 - Long-Term Care Ombudsman Services for Older Individuals:				
Title VIIA-Ombudsman	93.042 ^[2]	AP-1819-18	45,617	45,617
On the December of the Asian Tide III, Dect D. Discose December and Hadde December Operation				
Special Programs for the Aging Title III, Part D Disease Prevention and Health Promotion Services: Title IIID-Disease Prevention	93.043 ^[2]	AP-1819-18	62,457	
The hip-bisease revenuon	<i>y</i> 5.045	AI =1019=10	02,457	
Special Programs for the Aging Title III, Part B Grants For Supportive Services And Senior Centers:				
Title IIIB-Ombudsman Title IIIB-Supportive Services	93.044 93.044	AP-1819-18 AP-1819-18	31,318 737,752	31,318 115,000
Title IIIB-Supportive Services Admin	93.044	AP-1819-18 AP-1819-18	107,289	- 115,000
Sub-total			876,359	146,318
Special Programs for the Aging Title III, Part C Nutrition Services:				
Title IIIC-Nutrition Services	93.045	AP-1819-18	1,348,989	693,641
Title IIIC-Nutrition Services Admin	93.045	AP-1819-18	188,399	-
Sub-total			1,537,388	693,641
National Family Caregiver Support, Title III, Part E:				
Title IIIE-Family Caregiver Support	93.052 ^[2]	AP-1819-18	330,792	141,254
Title IIIE-Administration	93.052 ^[2]	AP-1819-18	48,698	-
Sub-total			379,490	141,254
Nutrition Services Incentive Program (NSIP)	93.053	AP-1819-18	158,761	
Sub-total passed-through California Department of Aging			3,067,064	1,032,830
Total Aging Cluster			3,067,064	1,032,830
MEDICAID CLUSTER				
Passed-through California Department of Aging:				
Medical Assistance Program: Multipurpose Senior Services Program (MSSP)	93.778	MS-1819-34	685,600	
	22.110	1019 01	000,000	
Passed-through California Department of Health Care Services: Medical Assistance Program:				
Home & Community Based Alternatives	93.778	18-95229	252,158	-
Child Health & Disability Prevention -Foster Care (CHDPFC)	93.778	CHDP Letter 18-03	72,269	-
Child Health & Disability Prevention -Foster Care (CHDPFC)	93.778	CHDP Letter 18-03	261,572	-
Child Health & Disability Prevention -Foster Care (CHDPFC) California Children's Services Admin Allocations (CCS, Healthy Families, & Medi-Cal Admin)	93.778 93.778	CHDP Letter 18-03 Title XIX & XXI	64,055 2,284,488	-
Child Health & Disability Prevention/Early and Periodic Screening, Diagnosis, and Treatment (CHDP/EPSDT)	93.778	Title XIX	469,670	-
Child Health and Disability Prevention (CHDP) - Fluoride Varnish - Oral Health	93.778	Title XIX	343,320	-
RX for Kids (CFS-SPMP) In Home Supportive Services Title XIX, Skilled Prof. Med Personnel (SPMP), Adult & Fam Services	93.778 93.778	CFL 18-19 CFL 18-19	1,351,275 1,022,257	-
Medi-Cal - Admin	93.778	MCAC 2018-19 10	20,006,095	-
Sub-total			26,127,159	-
Passed-through California Department of Social Services:				
Medical Assistance Program:	02 770	WODE AGO HA	1 7/0 1/0	
CalWIN Medi-Cal CWS-IV-E - Health Related	93.778 93.778	WCDS 9/28/18 CFL 18/19-59	1,760,100 4,081,229	-
PA in Home Support Services	93.778	CFL 18/19-45,53,80	534,696	-
In Home Supportive Services Title XIX	93.778	CFL 18/19-53	4,991,141	-
APS/CSBG Sub-total	93.778	CFL 18/19-59	872,377 12,239,543	
			12,237,343	
Passed-through California Department of Public Health:				
Medical Assistance Program: Childhood Lead Poisoning Prevention Program (CLPPP)	93.778	17-10250	135,822	
Total Medicaid Cluster			39,188,124	-

^[1] N/A - Not Available

^[2] Denotes that this program is part of the Aging Cluster at the request of the California Department of Aging

U.S. DEPT/PASS-THROUGH AGENCY/ PROGRAM TITLE/CLUSTER	FEDERAL CFDA NUMBER	DIRECT OR PASS-THROUGH ENTITY IDENTIFYING NUMBER ⁽¹⁾	FEDERAL EXPENDITURES	FEDERAL AWARDS PASSED THROUGH TO SUBRECIPIENTS
	THE SHIDLIN	NUMBER		10 00011101111010
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, CONTINUED: TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) CLUSTER				
Passed-through California Department of Social Services:				
Temporary Assistance for Needy Families: Welfare Fraud CalWORKs	93.558	CFL 15/16-5, 11	\$ 815,983	\$ -
CalWORKs - CalWIN	93.558	WCDS 9/28/18	178,207	ф - -
CalWORKs	93.558	CFL-18/19-17,76	21,800,402	6,018,268
CalWORKs CWS - TANF	93.558 93.558	CA800FED, CA800M CFL 18/19-20	6,688,840 2,017,936	-
Approved Relative Caregiver	93.558	CFL 18-19	151,935	-
CalWORKs Family Stabilization	93.558	CFL 18-19	264,194	-
Cal-Learn Program Total Temporary Assistance for Needy Families (TANF) Cluster	93.558	CFL 18-19	232,027 32,149,524	6,018,268
Direct Programs:				
Increasing Access to Specialized Services and Supports for				
Individuals with Alzheimer's Disease and Related Disorders: AoA-Alzheimer's Disease Program Initiative	93.470	90-ADPI0007-01-00	16,178	-
Sub-total	75.470	<i>yo-HD</i> 10007-01-00	10,170	
Grants to Provide Outpatient Early Intervention Services with Respect to HIV Disease:				
Ryan White Title III, Part C	93.918	H76HA25703	154,091	-
Ryan White Title III, Part C Sub-total	93.918	H76HA25703	34,892 188,983	
Assisted Outpatient Treatment:				
Assisted Outpatient Treatment Grant Program for Individuals with Serious Mental Illness	93.997	N/A	262,179	211,740
Assisted Outpatient Treatment Grant Program for Individuals with Serious Mental Illness Sub-total	93.997	N/A	691,700 953,879	211,740
Sub-total Direct Programs			1,159,040	211,740
Passed-through California Department of Aging:				
Medicare Enrollment Assistance Program:	02.071	NG 1010-10	27.740	
Medical Improvements for Patients & Providers Act Medical Improvements for Patients & Providers Act	93.071 93.071	MI-1819-19 MI-1718-18	37,749 12,352	
Sub-total	201011		50,101	-
Passed-through National Council on Aging:				
Medicare Enrollment Assistance Program	93.071	PO# 685	47,065	-
Medicare Enrollment Assistance Program Sub-total	93.071	90MINC0001	29,114 76,179	
Total Medicare Enrollment Assistance Program			126,280	-
Passed-through California Department of Aging:				
State Health Insurance Assistance Program: Health Insurance Counseling and Advocacy Program (HICAP)	93.324	HI-1718-18	83,729	3,000
Passed-through California Department of Child Support Services:				
Child Support Enforcement:				
Title IV - D: Child Support Enforcement (FFP)	93.563	1804CACSES	14,524,669	
Passed-through California Department of Social Services: Guardianship Assistance:				
FedGAP & KinGAP	93.090	CA800CCR FED, CA800CCR 18+FED	1,794,524	
Promoting Safe/Stable Families	93.556	CFL 18/19-34	540,748	
Refugee and Entrant Assistance State Administered Program:				
Refugee Cash Assistance	93.566	CA 800A FED	4,609	
Adoption Incentive Payments: Adoption Incentives	93.603	CFL 18/19-66	64,098	
Adoption meentives	95.005	CFL 16/19-00	04,098	
Stephanie Tubbs Jones Child Welfare Services Program:				
Children Welfare Services - IV-B	93.645	CFL 18/19-20	390,727	
Foster Care Title IV-E:				
CCR CWD CWS IV-E	93.658 93.658	CFL 18/19-32, 37, 89 CFL 18/19-59	2,041,504 11,008,410	-
Foster Care	93.658	CA800CCR FED, CA800CCR 18+ FED	3.971.075	1,223,252
Foster Care	93.658	CFL 18/19-59	920,625	-
Foster Care (Non CWS) Licensing	93.658 93.658	CFL 18/19-59	269,424 2,888	-
Commercially Sexually Exploited Children (CSEC)	93.658	CFL 18/19-48 CFL 18/19-38	23,255	-
Statewide Automated Child Welfare Information System (SACWIS)	93.658	CFL 18/19-19	326,076	-
Title IV-E - Probation Sub-total	93.658	CFL 11/12-18,24,39	730,781 19,294,038	1,223,252
Adoption Assistance:				
Adoptions	93.659	CFL 18/19-66	869,566	-
Adoptions Sub-total	93.659	CA 800CCR FED	7,909,296 8,778,862	
			0,110,002	
Social Services Block Grant: CWS - Title XX	93.667	CFL 18/19-20	292,344	
Chafee Foster Care Independence Program:				
Independent Living Program	93.674	CFL 18/19-28	128,515	1 000 050
Sub-total passed-through California Department of Social Services			31,288,465	1,223,252

^[1] N/A - Not Available

U.S. DEPT/PASS-THROUGH AGENCY/ PROGRAM TITLE/CLUSTER	FEDERAL CFDA NUMBER	DIRECT OR PASS-THROUGH ENTITY IDENTIFYING NUMBER ^[1]	FEDERAL EXPENDITURES	FEDERAL AWARDS PASSED THROUGH TO SUBRECIPIENTS
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, CONTINUED:				
Passed-through California Health and Human Services Agency: Block Grants for Prevention and Treatment of Substance Abuse Block Grants for Prevention and Treatment of Substance Abuse Sub-total	93.959 93.959	94-9088447 94-9088447	\$ 1,147,293 3,282,887 4,430,180	\$ 307,572 1,400,902 1,708,474
Passed-through California Department of Mental Health: Projects for Assistance in Transition from Homelessness (PATH): PATH-Homeless	93.150	1946001347J5	74,340	
Block Grants for Community Mental Health Services: Block Grants for Community Mental Health Services-SAMHSA Sub-total passed-through California Department of Mental Health	93.958	1946001347J5	836,523 910,863	750,147
Passed-through California Department of Public Health: Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Aligned Cooperative Agreements: Hospital Preparedness Program (HPP)	93.074	17-10209	588,876	
Public Health Emergency Preparedness (PHEP) Sub-total	93.074	17-10209	276,100 864,976	-
Project Grants and Cooperative Agreements for Tuberculosis Control Programs: Tuberculosis Preventions and Control and Laboratory Program	93.116	1856BASE00	115,637	
PPHF Capacity Building Assistance to Strengthen Public Health Immunization Infrastructure and Performance Financed in Part by Prevention and Public Health Funds: Immunizations Cooperative Agreements	93.539	17-10362	174,022	
HIV Care Formula Grants: Ryan White Title II, Part B	93.917	15-11081	190,396	-
Ryan White Title II, Part B Ryan White Title II, Part B	93.917 93.917	18-10895 16-10862	120,134	-
Ryan White Tute II, Part B Sub-total	93.917 93.917	16-10862	28,056 38,795 377,381	-
Maternal and Child Health Services Block Grant to the States: Maternal, Child & Adolescent Health	93.994	2018-56	1,701,875	-
Adolescent Family Life and Positive Youth Development Sub-total	93.994	2018-56	303,777 2,005,652	<u> </u>
Sub-total passed-through California Department of Public Health			3,537,668	
Passed-through Heluna Health: Epidemiology and Laboratory Capacity for Infectious Diseases (ELC): Infectious Diseases Cooperative	93.323	0187.1890	7,093	
Passed-through National Association of County/City Health Officials: Medical Reserve Corps Small Grant Program: Medical Reserve Corps	93.008	MRC 17-959	3,428	
Passed-through California Department of Health Care Services: Opioid STR: MAT (Medicated Assistance Program)	93.788	796528263	17,233	
Total U.S. Department of Health and Human Services	75.766	170320205	132,615,821	10,947,711
U.S. DEPARTMENT OF HOMELAND SECURITY: Direct Programs: Assistance to Firefighters Grant:				
FY 2016 FPS Smoke Alarm Grant FY 2017 AFG Sub-total Direct Programs	97.044 97.044	EMW2016-FP-00522 EMW2017-FO-03412	68,638 111,535 180,173	
Passed-through California Department of Health Care Services: Crisis Counseling:				
Crisis Counseling Assistance and Training Program Crisis Counseling Assistance and Training Program	97.032 97.032	N/A N/A	223,036 77,890	
Sub-total Passed-through California Governor's Office of Emergency Services:			300,926	
Disaster Grants - Public Assistance (Presidentially Declared Disasters): Public Assistance Grants	97.036	111-91041	6.452.094	
Public Assistance Orants Public Assistance Grants (DR 4363: Thomas Fire and 2018 Debris Flow) Sub-total	97.036	FEMA-4353-DR-CA, Cal OES ID:111-00000	2,171,385 8,623,479	
Hazard Mitigation Grant: Hazard Mitigation Grant	97.039	111-60413	319,667	
Emergency Management Performance Grants: FY 2017 Emergency Management Performance Grant (EMPG) FY 2018 Emergency Management Performance Grant (EMPG) Sub-total	97.042 97.042	2017-0007-111-00000 2018-0008-111-00000	180,789 266,901 447,690	137,632 155,701 293,333
Homeland Security Grant Program:	~ ~ ~ ~	2010 0051 00000		
FY18 HSGP FY 2016 Homeland Security Grant Program (HSGP)	97.067 97.067	2018-0054-111-00000 2016-0102-111-00000	19,625 14,397	-
FY 2017 Homeland Security Grant Program (HSGP) Homeland Security Grant Program	97.067 97.067	2017-0102-111-00000 EMW-2018-SS00054-S01	62,109 29,345	-
FY 2016 Homeland Security Grant Program (HSGP)	97.067	2016-0102-111-00000	455,174	238,996
FY 2017 Homeland Security Grant Program (HSGP) FY 2018 Homeland Security Grant Program (HSGP)	97.067 97.067	2017-0083-111-00000 2018-0054-111-00000	314,191 199,658	31,592
OPSG Joint Operations Reimbursement - 2017 Operation Stonegarden	97.067	2017-0083	208,079	-
Sub-total Sub-total passed-through California Governor's Office of Emergency Services			1,302,578 10,693,414	270,588 563,921
Total U.S. Department of Homeland Security				
Foral U.S. Department of nomerand security			11,174,513	563,921

^[1] N/A - Not Available

U.S. DEPT/PASS-THROUGH AGENCY/ PROGRAM TITLE/CLUSTER	FEDERAL CFDA NUMBER	DIRECT OR PASS-THROUGH ENTITY IDENTIFYING NUMBER ^[1]	FEDERAL EXPENDITURES	FEDERAL AWARDS PASSED THROUGH TO SUBRECIPIENTS
U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT: CDBG - ENTITLEMENT GRANTS CLUSTER Divert Demanman				
Direct Programs: Community Development Block Grants/Entitlement Grants:				
Community Development Block Grant - Entitlement 16 Community Development Block Grant - Entitlement 17	14.218 14.218	B-16-UC-06-0507 B-17-UC-06-0507	\$ 5,690 282,392	\$ 5,690 282,392
Community Development Block Grant - Entitlement 18	14.218	B-18-UC-06-0507	824,242	392,100
Sub-total Direct Programs			1,112,324	680,182
Passed-through City of San Buenaventura:				
Community Development Block Grants/Entitlement Grants Total Community Development Block Grants/Entitlement Grants	14.218	95-6000807	65,000	680.182
Total CDBG - Entitlement Grants Cluster			1,177,324	680,182
Direct Programs:				
Emergency Solutions Grant Program: Emergency Solutions Grant Program - State 18	14.231	E-18-UC-06-0507	145,872	73,792
Emergency Solutions Grant Program - State 19	14.231	17-ESG-11842	204,337	204,337
Sub-total			350,209	278,129
Passed-through City of Oxnard:				
Emergency Solutions Grant Program: Homeless Emergency Shelter Grant Program (ESG)	14.231	7900-17-HO / 7901-17-HO	24,751	-
Homeless Emergency Shelter Grant Program (ESG)	14.231	8409 18-HO	25,921	-
Sub-total Total Emergency Solutions Grant Program			50,672 400,881	278,129
Direct Programs: Continuum of Care Program:				
Continuum of Care - Shelter Plus Care Program - Ox/EC	14.267	N/A	59,978	-
Continuum of Care Program-Shelter Plus Care Santa Paula Continuum of Care Program-Shelter Plus Care Oxnard/East County	14.267 14.267	N/A N/A	9,662 207,520	-
Continuum of Care Program-Shelter Plus Care Santa Paula	14.267	N/A	32,084	-
Continuum of Care 18-1 Continuum of Care 18-2	14.267	CA1227L9D111603	15,845	15,845
Continuum of Care 18-2 Continuum of Care 18-3	14.267 14.267	CA1620L9D111600 CA1372L9D111602	8,800 9,478	9,478
Continuum of Care 18-4	14.267	CA1619L9D111600	38,579	38,579
Continuum of Care 19-1 Continuum of Care 19-2	14.267 14.267	CA1619L9D111701 CA1372L9D111703	182,650 16,633	182,650 16,633
Continuum of Care 19-2	14.267	CA1372L9D111703	52,734	52,734
Continuum of Care 19-4	14.267	CA1372L9D111700	99,421	-
Sub-total Direct Programs			733,384	315,919
Passed-through City of Los Angeles: Continuum of Care Program:				
Choices PSH	14.267	CA1618L9D111701	362,211	-
Homeless HUD - VCRRH	14.267	CA1240L9D111704	81,829	-
HMIS CoC 17-18 HMIS CoC 18-19	14.267 14.267	CA0715L9D111609 CA0715L9D111710	21,406 74,059	-
HMIS Expansion-CES CoC 17-18	14.267	CA1521L9D111601	52,340	
HMIS Expansion-CES CoC 18-19	14.267	CA1521L9D111702	111,174	-
Sub-total Total Continuum of Care (CoC) Program			703,019 1,436,403	315,919
Direct Programs:				
Home Investment Partnerships Program:				
HOME Grant 16 HOME Grant 18	14.239 14.239	M-16-UC-06-0540 M-18-UC-06-0540	216,357 66,727	216,357
Sub-total Direct Programs	14.2.39	MI-18-0C-00-0540	283,084	216,357
Passed-through California Department of Public Health:				
Housing Opportunities for Persons with AIDS	14.241	16-10309	370,902	-
Total U.S. Department of Housing and Urban Development			3,668,594	1,490,587
U.S. DEPARTMENT OF JUSTICE:				
Direct Programs:	16 1001	2018 52	20.014	
FY 2018 DEA Domestic Cannabis Eradication Suppression Program FY 2019 DEA Domestic Cannabis Eradication Suppression Program, 2019 55	16.U01 16.U01	2018-53 2019-55	20,014 12,700	-
Sub-total			32,714	-
State Criminal Alien Assistance Program	16.606	N/A	926,737	
DNA Backlog Reduction Program:	16 7 41	2016 DN DV 0057	12.000	
16 DNA Cap Enhance & Backlog Reduction 17 DNA Lab Efficiency Improv-CapEnhance	16.741 16.741	2016-DN-BX-0056 2017-DN-BX-0199	65,829 6,344	-
17 DNA Cap Enhance & Backlog Reduction	16.741	2017-DN-BX-0049	106,565	-
Sub-total			178,738	
Equitable Sharing Program:			A	
Federal Equitable Sharing Agreement F.E.S.A.	16.922 16.922	N/A N/A	261,722 234,415	-
	16.922 16.922 16.922	N/A N/A N/A	261,722 234,415 112,811 608,948	

^[1] N/A - Not Available

U.S. DEPT/PASS-THROUGH AGENCY/ PROGRAM TITLE/CLUSTER	FEDERAL CFDA NUMBER	DIRECT OR PASS-THROUGH ENTITY IDENTIFYING NUMBER ^[1]	FEDERAL EXPENDITURES	FEDERAL AWARDS PASSED THROUGH TO SUBRECIPIENTS
U.S. DEPARTMENT OF JUSTICE, CONTINUED:			_	
Direct Programs, Continued:				
Paul Coverdell Forensic Sciences Improvement Grant Program: Coverdell 17-18 Prog 16COVFSIA	16.742	CQ17130560	\$ 12,408	\$ -
18 Coverdell 18COVFSIA	16.742	CQ18140560	5 12,408 19,886	· ·
Sub-total	10.712	equinissio	32,294	-
Harold Rogers Prescription Drug Monitoring Program:				
Ventura County Opioid Abuse Suppression Taskforce	16.754	N/A	136,839	-
Sub-total Direct Programs			1,916,270	-
Passed-through California Governor's Office of Emergency Services:				
National Institute of Justice Research, Evaluation, and Development Project Grants: Coverdell NFS Improvement Grant	16.560	CQ18010560	29,576	-
Crime Victim Assistance: Victim/Witness Assistance Program	16.575	VW17360560	115,605	-
Victim/Witness Assistance Program	16.575	VW18370560	471,239	-
Unserved/Underserved (XV)	16.575	XV15010560	202,064	
Child Abuse Treatment XT	16.575	XT15010560	208,977	89,582
Elder Abuse Program XE County Victim Services XC Program	16.575 16.575	XE16010560 XC16010560	293,011 454,598	251,887
Child Advocacy Center Program (KC)	16.575	KC17A10560	178,026	231,007
Child Advocacy Center Program (KC)	16.575	KC17010560	138,352	-
Child Advocacy Center Program (KC)	16.575	KC1BA20560	47,873	-
Child Advocacy Center Program (KC)	16.575	KC18020560	30,698	-
Transitional Housing	16.575	XH1800560	2,156,664	-
Sub-total Sub-total passed-through California Governor's Office of Emergency Services			2,156,664 2,186,240	341,469 341,469
Total U.S. Department of Justice			4,102,510	341,469
			.,,	
U.S. DEPARTMENT OF LABOR: WORKFORCE INNOVATION AND OPPORTUNITY ACT (WIOA) CLUSTER				
Passed-through California Employment Development Department:				
WIOA Adult Program:				
WIOA Adult (201) WIOA Adult (201)	17.258 17.258	K8106696 K9110077	1,063 237,930	-
WIOA Adult (201) WIOA Adult (202)	17.258	K8106696	237,930	
WIOA Adult (202)	17.258	K9110077	1,246,893	
Regional Training Coordinator PY 16/17 (1087)	17.258	K7102079	179,944	
Regional Training Coordinator (WDB 1144)	17.258	K9110077	12,897	-
Regional Organizers PY 16/17 (1089)	17.258	K7102079	12,144	-
Regional Plan Implementation (1122) 1080 - High Performance Boards PY16/17	17.258 17.258	K8106696 K7102079	204,355 54,838	
Sub-total	17.250	R/102077	2,180,203	
WIOA Youth Activities:				
WIOA Youth 301	17.259	K8106696	51,993	-
WIOA Youth 301	17.259	K9110077	1,597,077	1,170,651
WAF 6.0 Youth (1117) Sub-total	17.259	K8106696	170,108 1,819,178	1,170,651
WIOA Dislocated Worker Formula Grants:				
Rapid Response 540	17.278	K9110077	40,403	-
Rapid Response 541	17.278	K8106696	13,253	-
Rapid Response 541	17.278	K9110077	199,075	153,851
Rapid Response 292	17.278	K9110077	11,396	-
Rapid Response 293 WIOA DLW 500	17.278 17.278	K9110077 K8106696	44,829 100,000	
WIOA DLW 500	17.278	K8106696	1,626	
WIOA DLW 501	17.278	K9110077	357,434	-
WIOA DLW 502	17.278	K8106696	258,494	-
WIOA DLW 502 Sub-total	17.278	K9110077	1,641,077	152 051
Sub-total Total Workforce Innovation and Opportunity Act (WIOA) Cluster			2,667,587 6,666,968	153,851 1,324,502
Passed-through California Employment Development Department:				
Workforce Investment Act (WIA) National Emergency Grants:	15.055	X0110077	4.102	
NDWG 2018 Temporary Jobs (1143)	17.277	K9110077	4,103	
Passed-through California Department of Aging:				
Senior Community Service Employment Program: Title V - Senior Employment - SCSEP	17.235	TV-1819-19	61,832	61,832
Total U.S. Department of Labor			6,732,903	1,386,334
U.S. DEPARTMENT OF TRANSPORTATION:				
HIGHWAY PLANNING AND CONSTRUCTION CLUSTER				
Passed-through California Department of Transportation: Highway Planning and Construction	20.205	07-VEN-0-CR	1,657,462	-
Total Highway Planning and Construction Cluster	20.205	o, Hero-ek	1,657,462	
			1,007,102	

^[1] N/A - Not Available

U.S. DEPT/PASS-THROUGH AGENCY/ PROGRAM TITLE/CLUSTER	FEDERAL CFDA NUMBER	DIRECT OR PASS-THROUGH ENTITY IDENTIFYING NUMBER ^[1]	FEDERAL EXPENDITURES	FEDERAL AWARDS PASSED THROUGH TO SUBRECIPIENTS
U.S. DEPARTMENT OF TRANSPORTATION, CONTINUED:				
HIGHWAY SAFETY CLUSTER Passed-through California Office of Traffic Safety:				
State and Community Highway Safety:				
Selective Traffic Enforcement Program	20.600	68-0297066	\$ 53,378	\$ -
Selective Traffic Enforcement Program Selective Traffic Enforcement Program	20.600 20.600	68-0297066 68-0297066	2,812 28,554	
Selective Traffic Enforcement Program	20.600	68-0297066	11,000	
Sub-total			95,744	-
National Priority Safety Programs:				
Alcohol and Drug Impaired Driver	20.616	DI1717	115,720	-
Alcohol and Drug Impaired Driver	20.616 20.616	DI19026 69A3751830000405bCAH	263,116	-
Child Passenger Safety Program Child Passenger Safety Program	20.616	69A3751830000405bCAH	15,823 38,077	
VC Drugged Driving "Shifting the Trend to Reverse" Campaign	20.616	96-5053908	33,836	-
VC Drugged Driving while Uncertain: Alcohol, Drugs and the Law	20.616	96-5053908	155,417	-
Selective Traffic Enforcement Program	20.616	68-0297066	7,886	-
Selective Traffic Enforcement Program	20.616	68-0297066	89,520 719,395	
Sub-total Sub-total passed-through California Office of Traffic Safety			815,139	
Total Highway Safety Cluster			815,139	
FEDERAL TRANSIT CLUSTER				
Passed-through Ventura County Transportation Commission:				
Federal Transit Formula Grants: Work Reliability Transport Program	20.507	CA-2018-088-00	30,000	
Total Federal Transit Cluster	20.507	CA-2018-088-00	30,000	
TRANSIT SERVICES PROGRAMS CLUSTER Passed-through Ventura County Transportation Commission: Enhanced Mobility of Seniors and Individuals with Disabilities: New Freedom Initiative	20.513	CA-2018-042	116,633	-
New Freedom Initiative	20.513	CA-2019-118	115,306	
Sub-total			231,939	-
Total Transit Services Program Cluster			231,939	
Direct Programs: Airport Improvement Program:				
NE Apron & Hangar Development; CMS 339-36	20.106	N/A	134,628	
Airport Layout Plan Study; OXR 179-035	20.100	N/A N/A	162,886	
Sub-total Direct Programs			297,514	-
Passed-through California Office of Traffic Safety:				
Minimum Penalties for Repeat Offenders for Driving While Intoxicated:	20 (00)	(0.02020()	72.026	
Selective Traffic Enforcement Program Selective Traffic Enforcement Program	20.608 20.608	68-0297066 68-0297066	72,026 1,421	-
Selective Traffic Enforcement Program	20.608	68-0297066	27,794	
Sub-total			101,241	-
Total U.S. Department of Transportation			3,133,295	<u> </u>
U.S. DEPARTMENT OF TREASURY:				
Direct Programs: Volunteer Income Tax Assistance (VITA) Matching Grant Program	21.009	19VITA0123	41,970	41,970
Federal Equitable Sharing Agreement	21.009	N/A	41,970 9,696	41,970
Sub-total Direct Programs	21.016	N/A	51,666	41,970
Total U.S. Department of Treasury			51,666	41,970
U.S. ENVIRONMENTAL PROTECTION AGENCY:				, <u>,,,,,,</u>
U.S. ENVIRONMENTAL PROTECTION AGENCY: Passed-through State Water Resources Control Board:				
Nonpoint Source Implementation Grants:				
Algae TMDL	66.460	D1513402	76,001	
Total U.S. Environmental Protection Agency			76,001	
				¢ 11881.005
TOTAL EXPENDITURES OF FEDERAL AWARDS			\$ 182,964,583	\$ 14,771,992

^[1] N/A - Not Available

Note 1 – Summary of Significant Accounting Policies

1. General

The accompanying Schedule of Expenditures of Federal Awards presents the activity of all Federal award programs of the County of Ventura, California (County) with the exception of the federal award programs of the Children and Families First Commission of Ventura County, a discretely presented component unit, in the amount of \$184,074, which is not included in the schedule during the year ended June 30, 2019, and were subject to separate audits by other independent auditors. The information in this schedule is presented in accordance with the 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). Because this schedule presents only a selected portion of the operations of the County, it is not intended to and does not present the financial position, changes in position, or cash flows of the County. The County's reporting entity is defined in Note 1 of the notes to the County's basic financial statements.

2. Basis of Accounting

The accompanying Schedule of Expenditures of Federal Awards is presented using the modified accrual basis of accounting except for programs recorded in the County's enterprise funds, which are presented using the accrual basis of accounting, which is described in Note 1 of the notes to the County's basic financial statements. Such expenditures are recognized following the cost principles contained in the Uniform Guidance, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Negative amounts shown on the Schedule of Expenditures of Federal Awards represent adjustments or credits made in the normal course of business to amounts reported as expenditures in prior years.

3. Relationship to Comprehensive Annual Financial Report

Federal award expenditures agree or can be reconciled with the amounts reported in the County's basic financial statements.

4. Relationship to Federal Financial Reports

Amounts reported in the accompanying schedule agree with the amounts reported in related federal financial reports.

5. Medicaid Cluster

Except for Medi-Cal administrative expenditures, Medi-Cal and Medicare program expenditures are excluded from the schedule of expenditures of federal awards. These expenditures represent fees for services; therefore, neither is considered a federal award program of the County for purposes of the schedules of expenditures of federal awards or in determining major programs. The County assists the State of California (State) in determining eligibility and provides Medi-Cal and Medicare services through County-owned health facilities.

Medi-Cal administrative expenditures are included in the schedule of expenditures of federal awards as they do not represent fees for services.

Note 2 – Indirect Cost Rate

With the exception of the following programs, the County has not elected to use the 10-percent de minimis indirect cost rate as allowed under the Uniform Guidance.

FEDERAL

CFDA		
 NUMBER	FEDERAL PROGRAM TITLE	COUNTY PROGRAM TITLE
10.557	Special Supplemental Nutrition Program for Women, Infants,	Special Supplemental Nutrition Program for Women, Infants,
	and Children	and Children (WIC)
16.575	Crime Victim Assistance	Victim Witness
16.575	Crime Victim Assistance	Victim Witness
16.575	Crime Victim Assistance	Unserved/Underserved (XV)
16.575	Crime Victim Assistance	Child Abuse Treatment XT
16.575	Crime Victim Assistance	Child Advocacy Center Program (KC)
16.575	Crime Victim Assistance	Child Advocacy Center Program (KC)
16.575	Crime Victim Assistance	Child Advocacy Center Program (KC)
16.575	Crime Victim Assistance	Elder Abuse Program XE
16.575	Crime Victim Assistance	County Victim Services XC Program
20.616	National Priority Safety Programs	Alcohol and Drug Impaired Driver
20.616	National Priority Safety Programs	Alcohol and Drug Impaired Driver

Note 3 - Grant Programs Reimbursed in Arrears

The County participates in several federal programs where payments are received in arrears because eligibility, as determined by the federal agency, is determined in arrears. The County reports actual revenues for these programs in the year that the funds are received, since the County's eligible expenditures are not determinable until reimbursement is received.

Disaster Grants - Public Assistance (Presidentially Declared Disasters), CFDA# 97.036

FY Exp. Incurred	FY Exp. Reimbursed	 Amount
17-18	18-19	\$ 8,623,479

Note 4 – Reissuance of Single Audit Report

This report is replacing the report previously issued on March 27, 2020. The California State Department of Aging requests the following closely related programs identified by CFDA numbers 93.041, 93.042, 93.043, 93.044, 93.045, 93.052 and 93.053 be included in the Aging Cluster for purposes of determining major programs. This report includes the Aging Cluster as a major federal program for the County for the fiscal year ended June 30, 2019.

I. Summary of Auditor's Results

FINANCIAL STATEMENTS

Type of auditor's report issued on whether the financial statements audited	
were prepared in accordance with GAAP:	Unmodified
Internal control over financial reporting:	
Material weakness(es) identified?	No
Significant deficiency(ies) identified?	Yes
Noncompliance material to financial statements noted?	No
FEDERAL AWARDS	
Internal control over major federal programs:	
Material weakness(es) identified?	No
Significant deficiency(ies) identified?	Yes
Type of auditors' report issued on compliance for major federal programs:	Unmodified
Any audit findings disclosed that are required to be reported in accordance with 2 CFR 200.516(a)?	Yes

Identification of major federal programs:

CFDA Number(s)	Name of Federal Program or Cluster	
10.561	SNAP Cluster	
93.041/.042/.043/		
.044/.045/.052/.053	Aging Cluster	
93.659	Adoption Assistance	
97.036	Disaster Grants	
17.258/259/278	Workforce Innovation and Opportunity Act (WIOA) Cluster	

Dollar threshold used to distinguish between Type A and Type B programs: Auditee qualified as low-risk auditee? \$ 3,000,000 Yes

II. Financial Statement Findings

Finding 2019-001

System Procedures Related to Patient Accounts

Criteria:

The Medical Center should maintain policies and procedures to ensure the accuracy and integrity of patient accounts charges, receivables and contractual allowances.

Condition:

During our testing of patient accounts receivable, we noted patient encounters with charges and accounts receivable that pertained to test data. Upon further inquiry, we noted that test data was created in the Medical Center's Electronic Medical Records System (CERNER) production environment to perform testing to ensure charges were being properly processed. As these cases were included within the accounts receivable, the gross accounts receivable was overstated.

In addition, we noted that the CERNER system was not consistently posting contractual allowance adjustments correctly to patient accounts where there was a primary and secondary payor. This resulted in certain patient accounts reflecting credit balances (i.e. negative accounts receivable balances). When a patient with both a primary and secondary payor encounter occurs, a claim is generated and billed to the primary payor. Once payment is received from the primary payor, the payment and contractual adjustment are posted in CERNER. The claim is then automatically crossed over to the secondary payor website. The total billed amount is again contractually adjusted in CERNER instead of adjusting the remaining balance. As a result, certain patient accounts reflect credit balances. For financial reporting purposes however, these credit balances are extracted to arrive at the proper accounts receivable at year end. However, without additional analysis, this process increases the risk of errors in the contractual allowance transactions.

Context:

The CERNER system is utilized by the Medical Center to account for and process all patient charges, contractual allowances and related outstanding balances. The processes and procedures related to revenue recognition and patient accounts receivables were considered as part of the audit process.

Cause:

The Medical Center did not maintain policies and procedures to:

- Test data and/or application changes in a "test" environment as opposed to the production environment, and
- Address the system matters related to CERNER's processing of contractual allowance where there is a primary and secondary payor.

Effect:

There is an increased risk of misstatement for the patient accounts receivable and contractual allowances.

II. Financial Statement Findings

Repeat Finding:

This finding is a repeat finding of prior year finding 2018-001.

Recommendation:

We recommend the Medical Center review its current policies and procedures related to the testing of its software applications. We recommend that application testing be segregated and performed outside of the live/production environment to ensure the accuracy of the accounts receivable and patient charges.

Further, we recommend that the Medical Center review the secondary payor electronic posting process to address any system/technical matters related to CERNER.

Views of Responsible Officials and Planned Corrective Actions:

HCA IT Director implemented the Corrective Action Plan on February 8, 2019 with a written policy that governs the use of test patients in production environment. The written policy addresses the following:

- Test Patient Definition
- Limits and Required Approvals for New Test Patients
- Naming Test Patients
- Use of Test Patients
- Clean Up After Use of Test Patients
- Audit and Control

By July 1, 2019 the following additional steps were taken.

- Approximately 1,200 test patients were removed from the production system. There were also approximately 5,000 test patients required for CAP certification that were required to remain.
- Almost 7,000 encounters were identified of which approximately 5,600 were related to the CAP patients. 102 encounters were identified as having charges. Those charges were removed.
- Audit reports were written that run and are reviewed weekly. An occasional test patient has been found and removed. Since this process went into place, only one encounter has been found in the weekly reports that had a charge and the charge was removed.
- HCA IT has a small and tightly managed number of test patients that are only utilized for specific situations as called out in the policy.

HCA Management concurs the CERNER system frequently posts a duplicate, full, contractual allowance to patient accounts upon receipt of a second payment, resulting in certain patient accounts reflecting credit balances (i.e. negative accounts receivable balances). We are in frequent contact with Cerner and Cerner is aware many hospitals are having similar challenges. Although Cerner has been working on a solution that will be included in a future release, Cerner has not yet provided hospitals with an estimated completion date.

As we await a solution from Cerner, we adhere to the interim procedures noted below in order to correct the duplicate posting of a full contractual allowance:

• We currently have a script in place to reverse the duplicate contractual posting on any Medicare claims with a secondary payor. Effective June 1, 2020, Patient Financial Services Leadership will verify this logic is run on a weekly basis, at a minimum (ideally, every business day).

II. Financial Statement Findings

- For our Federally Qualified Health Centers (FQHCs), we have a script that reverses the duplicate contractual posting whenever Gold Coast pays an account that Medi-Cal will also pay. Effective June 1, 2020 Patient Financial Services Leadership will verify this logic is run on a weekly basis (typically every Friday).
- Credit balances outside these two scenarios are reviewed separately. Our current priority is reviewing any credit balances greater than \$5,000. By May 1, 2020, we will have a dedicated credit team for these reviews. The small number of true credits (overpayments) are worked manually and refunded.

See separate corrective action plan.

III. Federal Awards Findings and Questioned Costs

The following findings represent significant deficiencies and/or instances of noncompliance required to be reported in accordance with 2 CFR 200, Subpart F.

Finding 2019-002

Program: Supplemental Nutrition Assistant Program (SNAP) Cluster
CFDA No.: 10.561
Federal Grantor: U.S. Department of Agriculture
Passed-through: California Department of Public Health/Aging/Social Services
Award No. and Year: Various
Compliance Requirements: Activities Allowed or Unallowed and Allowable Costs/Cost Principles

Criteria:

2 CFR 200.403(i), *Standards for Documentation of Personnel Expenses*, states that charges to Federal awards for salaries and wages records must be supported by a system of internal control which provides reasonable assurance that the charges are accurate, allowable, and properly allocated.

Compensation for personal services charged to the programs is supported by the County's use of timecards for employees. The County uses an electronic time system to enter and approve employee time. Once an employee enters time for the pay period, the employee's supervisor reviews and approves the employee's time by "locking" the timecard. If the employee's supervisor does not review the timecard, the timecard is "auto locked" by the electronic time system in order to process payroll. For those timecards that are "auto locked", each decentralized department's payroll clerk sends out an email reminding the supervisor to approve the hours in order to evidence proper approval.

Condition:

Of the 23 employees and payroll transactions selected for testing, we noted one timecard where the employee's timecard was not approved by a supervisor.

Questioned Costs:

No questioned costs were identified as a result of our procedures.

Context:

The SNAP program incurred expenditures from various County departments. The condition noted above, pertained to the Health Care Agency which comprised \$622,786 and 4% of the total federal expenditures for the program.

Effect:

Lack of review for personnel hours could lead to unallowable activities and costs to be charged to the Federal program.

III. Federal Awards Findings and Questioned Costs

Cause:

The County's procedures did not consistently ensure that the review of timecards was documented.

Recommendation:

We recommend that the County modify and/or strengthen its current policies and procedures to ensure that all timecards consistently document evidence of supervisor approval. The procedures should also address the compensating controls for circumstances where obtaining the supervisor's approval is not possible.

Views of Responsible Officials and Planned Corrective Actions:

HCA's VCPH Management will provide additional training to supervisors and managers reinforcing the policy of timecard approval. A process is currently in place where HCA Payroll provides email notification reminders prior and subsequent to close of pay period to the supervisors and managers, including the VCPH Management, detailing any unapproved timecards that are still outstanding. VCPH Management will ensure adherence to the policy and assure timecards are approved.

See separate corrective action plan.

Summarized below is the current status of all audit findings reported in the prior audit's schedule of findings and questioned costs.

Financial Statement Finding

Finding No.	Category	Status of Corrective Action		
2018-001	System Procedures Related to Patient Accounts	In progress. See current year finding 2019-001.		

Federal Award Prior Year Findings

Finding No.	Program	CFDA No.	Compliance Requirements	Status of Corrective Action	
2018-002	Block Grants for Prevention and Treatment of Substance Abuse (SAPT)	93.959	Subrecipient Monitoring	Implemented	
2018-003	Block Grants for Prevention and Treatment of Substance Abuse (SAPT); HOME Investment	93.959 14.239	Subrecipient Monitoring	In progress. Health Care Agency - Documentation is maintained in the contract file as	
	Partnerships Program (HOME)			evidence that 2 CFR Part 200.331 (a) were followed prospectively for contracts that are entered in fiscal year 2019-20.	
				Community Development – HOME policies and procedures manual was revised in February and June of 2019 to address the issue and will be applied prospectively to contracts that are entered in fiscal year 2019-20.	
2018-004	Block Grants for Prevention and Treatment of Substance Abuse (SAPT)	93.959	Procurement and Suspension and Debarment	In progress. Documentation is maintained in the contract file as evidence that procurement procedures were followed prospectively for contracts that are entered in fiscal year 2019-20.	
2018-005	Block Grants for Prevention and Treatment of Substance Abuse (SAPT)	93.959	Activities Allowed or Unallowed and Allowable Costs/Cost Principles	Implemented	

County of Ventura, California Supplemental Schedule of California State Department of Aging Expenditures of Federal and State Awards For the Year Ended June 30, 2019

U.S. DEPT/PASS-THROUGH AGENCY/ PROGRAM TITLE	CFDA NO.	PASS- THROUGH GRANTOR'S NUMBER	FEDERAL EXPENDITURES	FEDERAL AWARDS PASSED THROUGH TO SUBRECIPIENTS	STATE EXPENDITURES
STATE PROGRAMS:					
Ombudsman Initiative	State	AP-1718-18	\$ -	\$ -	\$ 70,697
Total State Programs				-	70,697
U.S. DEPARTMENT OF AGRICULTURE:					
Passed-through California Department of Aging:					
Supplemental Nutrition Assistance Education Program	10.561	SP-1718-18	11,667	-	-
Supplemental Nutrition Assistance Education Program	10.561	SP-1819-18	56,121	-	-
Total U.S. Department of Agriculture			67,788		-
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES:					
Passed-through California Department of Aging:					
Title VIIB- Elder Abuse Program	93.041	AP-1819-18	6,992	6,000	-
Title VIIA- Ombudsman	93.042	AP-1819-18	45,617	45,617	-
Title IIID- Disease Prevention	93.043	AP-1819-18	62,457	-	-
Title IIIB- Ombudsman	93.044	AP-1819-18	31,318	31,318	87,005
Title IIIB- Supportive Services	93.044	AP-1819-18	845,041	115,000	-
Title IIIC- Nutrition Services	93.045	AP-1819-18	1,537,388	693,641	154,548
Title IIIE- Family Caregiver Support	93.052	AP-1819-18	379,490	141,254	-
NSIP-Nutrition Services Incentive	93.053	AP-1819-18	158,761	-	-
Medical Improvements for Patients & Providers Act	93.071	MI-1819-18	37,749	-	-
Medical Improvements for Patients & Providers Act	93.071	MI-1718-18	12,352	-	-
Health Insurance Counseling and Advocacy Program (HICAP)	93.324	HI-1718-18	83,729	3,000	201,455
Multipurpose Senior Services Program (MSSP)	93.778	MS-1819-34	685,600		-
Total U.S. Department of Health and Human Services			3,886,494	1,035,830	443,008
U.S. DEPARTMENT OF LABOR:					
Passed-through California Department of Aging:					
Title V - Senior Employment - SCSEP	17.235	TV-1819-18	61,832	61,832	
Total U.S. Department of Labor			61,832	61,832	-
TOTAL EXPENDITURES OF FEDERAL AND STATE AV	\$ 4,016,114	\$ 1,097,662	\$ 513,705		

CORRECTIVE ACTION PLAN

FOR THE YEAR ENDED JUNE 30, 2019

Compiled by: Jill K. Ward, Deputy Director, Auditor-Controller County of Ventura, California



CORRECTIVE ACTION PLAN

FOR THE YEAR ENDED JUNE 30, 2019

I. FINANCIAL STATEMENT FINDINGS

Finding 2019-001

System Procedures Related to Patient Accounts

Department's Management Response:

A. The Ventura County Health Care Agency (HCA) Management agrees with the recommendations that the Medical Center review its current policies and procedures related to the testing of its software applications.

While HCA agrees with the spirit of the recommendation to segregate and perform testing outside the live/production environment, there are rare times when it is not feasible. The use of test patients in a production environment is a risk trade off that each organization needs to make for themselves. It is dependent on the number of issues that are reported, changes that are made, skills of the people reporting the issues and the skills of those affecting repairs. It also depends on the quality and quantity of data in the development/test/sandbox systems, number of unique external devices that are connected and how easy it is to move these devices from the production system to the test system.

One key example of this for health care systems, is it is generally not permitted to copy production data into the test system to recreate real world situations.

Recognizing that a duplicated test environment mirroring the production environment may be the highest standard, many organizations within the industry do not support multiple environments for various reasons. Therefore, recognizing the potential conflicts that may occur, precautions and other safeguards are put into place as we have done for the Agency.

Therefore, HCA's approach is to substantially reduce the use of test patients in Cerner's production environment and institute controls to prevent any further contamination of financial or quality systems and reports.

B. HCA Management agrees that the Medical Center should review the secondary payor electronic posting process and address any system/technical matters related to the Medical Center's Electronic Medical Records System (CERNER).

View of Responsible Officials and Corrective Action:

- A. HCA IT Director implemented the Corrective Action Plan on February 8, 2019 with a written policy that governs the use of test patients in production environment. The written policy addresses the following:
 - Test Patient Definition
 - Limits and Required Approvals for New Test Patients
 - Naming Test Patients
 - Use of Test Patients
 - Clean Up After Use of Test Patients
 - Audit and Control

CORRECTIVE ACTION PLAN

FOR THE YEAR ENDED JUNE 30, 2019

By July 1, 2019 the following additional steps were taken.

- Approximately 1,200 test patients were removed from the production system. There were also approximately 5,000 test patients required for CAP certification that were required to remain.
- Almost 7,000 encounters were identified of which approximately 5,600 were related to the CAP patients. 102 encounters were identified as having charges. Those charges were removed.
- Audit reports were written that run and are reviewed weekly. An occasional test patient has been found and removed. Since this process went into place, only one encounter has been found in the weekly reports that had a charge and the charge was removed.
- HCA IT has a small and tightly managed number of test patients that are only utilized for specific situations as called out in the policy.
- B. HCA Management concurs the CERNER system frequently posts a duplicate, full, contractual allowance to patient accounts upon receipt of a second payment, resulting in certain patient accounts reflecting credit balances (i.e. negative accounts receivable balances). We are in frequent contact with Cerner and Cerner is aware many hospitals are having similar challenges. Although Cerner has been working on a solution that will be included in a future release, Cerner has not yet provided hospitals with an estimated completion date.

As we await a solution from Cerner, we adhere to the interim procedures noted below in order to correct the duplicate posting of a full contractual allowance:

- We currently have a script in place to reverse the duplicate contractual posting on any Medicare claims with a secondary payor. Effective June 1, 2020, Patient Financial Services Leadership will verify this logic is run on a weekly basis, at a minimum (ideally, every business day).
- For our Federally Qualified Health Centers (FQHCs), we have a script that reverses the duplicate contractual posting whenever Gold Coast pays an account that Medi-Cal will also pay. Effective June 1, 2020 Patient Financial Services Leadership will verify this logic is run on a weekly basis (typically every Friday).
- Credit balances outside these two scenarios are reviewed separately. Our current priority is reviewing any credit balances greater than \$5,000. By May 1, 2020, we will have a dedicated credit team for these reviews. The small number of true credits (overpayments) are worked manually and refunded.

Name of Responsible Persons:

- A. Terrence Theobald, HCA Director Information Technology
- B. Michael Taylor, Chief Financial Officer, HCA

Implementation Date:

- A. Completed October 2019
- B. June 1, 2020 related to interim procedures Cerner software update, date unknown

CORRECTIVE ACTION PLAN

FOR THE YEAR ENDED JUNE 30, 2019

II. FEDERAL AWARDS FINDINGS AND QUESTIONED COSTS

Finding 2019-002

Program: Supplemental Nutrition Assistant Program (SNAP)
CFDA No.: 10.561
Federal Grantor: U.S. Department of Agriculture
Passed-through: California Department of Public Health/Aging/Social Services
Award No. and Year: Various
Compliance Requirements: Activities Allowed or Unallowed and Allowable Costs/Cost Principles

Department's Management Response:

HCA's Ventura County Public Health (VCPH) Management concurs with the finding that a selected payroll transaction was not approved by a supervisor. VCPH Management continues to reinforce supervisors and managers' responsibilities to approve timecards.

View of Responsible Officials and Corrective Action:

HCA's VCPH Management will provide additional training to supervisors and managers reinforcing the policy of timecard approval. A process is currently in place where HCA Payroll provides email notification reminders prior and subsequent to close of pay period to the supervisors and managers, including the VCPH Management, detailing any unapproved timecards that are still outstanding. VCPH Management will ensure adherence to the policy and assure timecards are approved.

Name of Responsible Persons:

Selfa Saucedo, Manager, VCPH Rigoberto Vargas, Director, VCPH

Implementation Date: April 13, 2020



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS

FOR THE YEAR ENDED JUNE 30, 2019

Compiled by: Jill K. Ward, Deputy Director, Auditor-Controller County of Ventura, California



SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS

FOR THE YEAR ENDED JUNE 30, 2019

I. FINANCIAL STATEMENT FINDING

Finding 2018-001

System Procedures Related to Patient Accounts

Status of Corrective Action:

In Progress

Department's Management Response:

A. The Ventura County Health Care Agency (HCA) Management agrees with the recommendations that the Medical Center review its current policies and procedures related to the testing of its software applications.

While HCA agrees with the spirit of the recommendation to segregate and perform testing outside the live/production environment, there are rare times when it is not feasible. The use of test patients in a production environment is a risk trade off that each organization needs to make for themselves. It is dependent on the number of issues that are reported, changes that are made, skills of the people reporting the issues and the skills of those affecting repairs. It also depends on the quality and quantity of data in the development/test/sandbox systems, number of unique external devices that are connected and how easy it is to move these devices from the production system to the test system.

One key example of this for health care systems, is it is generally not permitted to copy production data into the test system to recreate real world situations.

Recognizing that a duplicated test environment mirroring the production environment may be the highest standard, many organizations within the industry do not support multiple environments for various reasons. Therefore, recognizing the potential conflicts that may occur, precautions and other safeguards are put into place as we have done for the Agency.

Therefore, HCA's approach is to substantially reduce the use of test patients in Cerner's production environment and institute controls to prevent any further contamination of financial or quality systems and reports.

B. HCA Management agrees that the Medical Center should review the secondary payor electronic posting process and address any system/technical matters related to the Medical Center's Electronic Medical Records System (CERNER).

View of Responsible Officials and Corrective Action:

- A. HCA IT Director implemented the Corrective Action Plan on February 8, 2019 with a written policy that governs the use of test patients in production environment. The written policy addresses the following:
 - Test Patient Definition
 - Limits and Required Approvals for New Test Patients
 - Naming Test Patients
 - Use of Test Patients
 - Clean Up After Use of Test Patients
 - Audit and Control

SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS

FOR THE YEAR ENDED JUNE 30, 2019

By July 1, 2019 the following additional steps were taken.

- Approximately 1,200 test patients were removed from the production system. There were also approximately 5,000 test patients required for CAP certification that were required to remain.
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- Audit reports were written that run and are reviewed weekly. An occasional test patient has been found and removed. Since this process went into place, only one encounter has been found in the weekly reports that had a charge and the charge was removed.
- HCA IT has a small and tightly managed number of test patients that are only utilized for specific situations as called out in the policy.
- B. HCA Management concurs the CERNER system frequently posts a duplicate, full, contractual allowance to patient accounts upon receipt of a second payment, resulting in certain patient accounts reflecting credit balances (i.e. negative accounts receivable balances). We are in frequent contact with Cerner and Cerner is aware many hospitals are having similar challenges. Although Cerner has been working on a solution that will be included in a future release, Cerner has not yet provided hospitals with an estimated completion date.

As we await a solution from Cerner, we adhere to the interim procedures noted below in order to correct the duplicate posting of a full contractual allowance:

- We currently have a script in place to reverse the duplicate contractual posting on any Medicare claims with a secondary payor. Effective June 1, 2020, Patient Financial Services Leadership will verify this logic is run on a weekly basis, at a minimum (ideally, every business day).
- For our Federally Qualified Health Centers (FQHCs), we have a script that reverses the duplicate contractual posting whenever Gold Coast pays an account that Medi-Cal will also pay. Effective June 1, 2020 Patient Financial Services Leadership will verify this logic is run on a weekly basis (typically every Friday).
- Credit balances outside these two scenarios are reviewed separately. Our current priority is reviewing any credit balances greater than \$5,000. By May 1, 2020, we will have a dedicated credit team for these reviews. The small number of true credits (overpayments) are worked manually and refunded.

Name of Responsible Persons:

- A. Terrence Theobald, HCA Director Information Technology
- B. Michael Taylor, Chief Financial Officer, HCA

Implementation Date:

- A. Completed October 2019
- B. June 1, 2020 related to interim procedures Cerner software update, date unknown

SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS

FOR THE YEAR ENDED JUNE 30, 2019

II. FEDERAL AWARDS FINDINGS AND QUESTIONED COSTS

Finding 2018-002

Program: Block Grants for Prevention and Treatment of Substance Abuse (SAPT)
CFDA No.: 93.959
Federal Grantor: U.S. Department of Health and Human Services
Passed-through: California Health and Human Services Agency
Award No. and Year: 94-9088447
Compliance Requirements: Subrecipient Monitoring

Status: Implemented.

Finding 2018-003

Program: Block Grants for Prevention and Treatment of Substance Abuse (SAPT), HOME Investment Partnerships Program (HOME)

CFDA No.: 93.959, 14.239

Federal Grantor: U.S. Department of Health and Human Services, U.S. Department of Housing and Urban Development

Passed-through: California Health and Human Services Agency

Award No. and Year: 94-9088447, Various

Compliance Requirements: Subrecipient Monitoring

Status: In Progress.

A. Block Grants for Prevention and Treatment of Substance Abuse (SAPT) Department's Management Response:

HCA Management agrees that for the three subawards selected for testing, required award information and applicable requirements were not provided at the time of subaward. The following information was not provided at the time of subaward:

- Subrecipient's unique entity identifier
- Federal award identification number
- Federal award date of award to the recipient by the Federal agency
- Identification of whether the award is research and development

View of Responsible Officials and Corrective Action:

HCA Management agrees that for three subawards selected for testing, the specified required award information listed above was not communicated to the subrecipient at the time of subaward.

HCA Management's plan of correction included a review of the 2 CFR Part 200.331(a) Requirements for Pass Through Entities regulations to ensure that all subrecipients of Federal Awards received clear identification of the Federal subaward information that is required in accordance with this regulation. This review of the regulations was completed in Fiscal Year 2018-19, policies and procedures were drafted/implemented, and each subrecipient received clear identification/notification of the required Federal subaward information by June 30, 2019. A copy of the notification was placed in the contract file as evidence.

SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS

FOR THE YEAR ENDED JUNE 30, 2019

The Department also ensured that for Fiscal Year 2019-20:

- Each subrecipient's contract contained a subaward exhibit that included all the information that is required to be passed through to a subrecipient as required by the regulations. The exhibit was signed by both the subrecipient and the County upon execution of the contract. Each party to the contract received a fully executed copy of the contract.
- Documentation was placed in the contract file as evidence that 2 CFR Part 200.331(a) Requirements for Pass Through Entities regulations were followed.

Name of Responsible Persons:

Maryza Seal, VCBH Contracts Manager Terri Yanez, VCBH Administrative Division Chief

Implementation Date:

In Fiscal Year 2018-19, subaward identification/notification corrections were completed by June 30, 2019. In Fiscal Year 2019-20, subaward identifications/notifications were included in all Sub-Award contracts by July 1, 2019 or upon execution of the contract by the Board of Supervisors for an effective date of the contract of July 1, 2019.

B. HOME Investment Partnerships Program

Department's Management Response:

Management concurs with the finding that for one subaward selected for testing, required award information was not provided at the time of subaward. The following information was not provided at the time of subaward:

- Subrecipient's unique entity identifier
- Federal award identification number
- Federal award date of award to the recipient by the Federal agency
- CFDA number

View of Responsible Officials and Corrective Action:

The HOME Policies and Procedures Manual was updated in June of 2019 to correct the deficiencies identified above. One new HOME agreement has been executed (January of 2020) which incorporated an exhibit containing the missing subaward information as specified in the HOME Policies and Procedures Manual. Additionally, staff worked with subrecipients of two HOME agreements executed in 2017 (the most recently executed HOME agreements) to modify their agreements to incorporate the required subaward information.

Name of Responsible Persons:

Tracy McAulay, HOME Management Analyst, County Executive Office – Community Development Christy Madden, Senior Deputy Executive Officer, County Executive Office – Community Development

Implementation Date:

Completed mid-April 2019.

SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS

FOR THE YEAR ENDED JUNE 30, 2019

Finding 2018-004

Program: Block Grants for Prevention and Treatment of Substance Abuse (SAPT)
CFDA No.: 93.959
Federal Grantor: U.S. Department of Health and Human Services
Passed-through: California Health and Human Services Agency
Award No. and Year: 94-9088447
Compliance Requirements: Procurement and Suspension and Debarment

Status: In Progress.

Department's Management Response:

HCA Management concurs with the finding. Three contracts selected for testing relied on a sole source justification from the initial procurement of the contract with the vendor and no evaluation of the sole source justification was documented for the current contract term.

View of Responsible Officials and Corrective Action:

HCA Management acknowledges that evidence of the sole source process was not documented in the procurement file. However, VCBH internally followed sole source requirements but did not adequately document the process and the expenditures incurred with the services provided in the contracts were in accordance with the scope of services of the Federal Award.

HCA Management's plan of correction included the review of all contracts funded by Federal Grants to ensure that all future bidding requirements complied with Federal Regulations. The Department was unable to correct the Fiscal Year 2018-19 contracts as per the 2018-004 finding, however, the Department reviewed the regulations and developed new policies and procedures to ensure that procedures were implemented to appropriately manage future contracts. Staff were instructed in these policies and procedures prior to June 30, 2019 to ensure appropriate contracting procedures were followed, however, formal adoption of the policies and procedures occurred in August of 2019.

The Department also ensured that for Fiscal Year 2019-20:

- All sub-recipient contracts either provided evidence of an exception to the bidding process or evidence that the sub-recipient contracts were selected from a competitive bidding process.
- Documentation was placed in the contract file as evidence that the procurement procedures were followed.

Name of Responsible Persons:

Maryza Seal, VCBH Contracts Manager Terri Yanez, VCBH Administrative Division Chief

Implementation Date:

By June 30, 2019, HCA Management completed a review of the federal regulations, drafted new policies and procedures, and trained staff on the new policies and procedures to ensure appropriate procurement methods were followed for Fiscal Year 2019-20 contracts.

SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS

FOR THE YEAR ENDED JUNE 30, 2019

Finding 2018-005

Program: Block Grants for Prevention and Treatment of Substance Abuse (SAPT)
CFDA No.: 93.959
Federal Grantor: U.S. Department of Health and Human Services
Passed-through: California Health and Human Services Agency
Award No. and Year: 94-9088447
Compliance Requirements: Activities Allowed or Unallowed and Allowable Costs/Cost Principles

Status: Implemented.

Management Letter For the Year Ended June 30, 2019 **County of Ventura, California**





CPAs & BUSINESS ADVISORS

To the Board of Supervisors County of Ventura, California

In planning and performing our audit of the basic financial statements of the County of Ventura (County) as of and for the year ended June 30, 2019, in accordance with auditing standards generally accepted in the United States of America, we considered the County's internal control over financial reporting (internal control) as a basis for designing auditing procedures that are appropriate in the circumstances for the purpose of expressing our opinions on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the County's internal control. Accordingly, we do not express an opinion on the effectiveness of the County's internal control.

We have previously reported on the County's internal control in our report dated February 21, 2020, in accordance with *Government Auditing Standards*. This letter does not affect our report dated February 21, 2020, on the financial statements of the County.

During our audit we noted certain matters involving internal control and other operational matters that are presented for your consideration. These observations and recommendations, all of which have been discussed with the appropriate members of management, are intended to improve internal control or result in other operating efficiencies and are summarized as follows:

STATUS OF PRIOR YEAR MANAGEMENT LETTER OBSERVATIONS

Summarized below is the current status of observations reported in the management letter for the year ended June 30, 2018.

PHYSICIAN CONTRACTS AND PAYMENTS – VCMC

OBSERVATION:

During our testing of physician contracts and payments, we noted that payments were supported by invoices. However, we observed that the level of underlying supporting documentation for each compensation type was inconsistent and could be improved. Further, the Medical Center would benefit from formalizing policies and procedures related to these invoices as the support may come from different sources of the operations (i.e. on-call schedules, clinic schedules or electronic health records).

RECOMMENDATION:

We recommend the Medical Center continue to review its current policies and formalize procedures related to the documentation requirements over its physician contracts and invoices.

STATUS OF CORRECTIVE ACTION:

In progress.

HCA management concurs with the recommendation that the Medical Center review current policies and formalize and develop standard policies and procedures related to the documentation requirements over physician contracts and invoices.

HCA supports the development of policies and procedures related to documentation requirements for all compensation types and supports consistent practice throughout the agency. In effort to establish a common understanding and consistent practice for the agency various policies have been drafted. Although not completed at this point, a number of policies have been drafted or are being developed to establish a comprehensive practice for reviewing and approving physician contract and invoices.

It is anticipated that an implementation and training plan will be developed upon the completion of all the relevant policies and procedures relating to physician contracting. The goal is to fully implement a comprehensive policy and practice by December 31, 2020.

In May 2019, a number of policies and procedures were drafted and are summarized as follows:

- HCA Contracted Provider Approval Process Implemented effective: 5/10/2019
- HCA Audit and Monitoring of Physician Payment Draft completed: 5/10/2019
- HCA Provider Contract Requirement for Supporting Documentation Draft in progress
- Reconciliation of Payments Draft in progress

Responsible Party: Barry L. Zimmerman, Chief Deputy Director, Health Care Agency Implementation Date: December 31, 2020

Our audit procedures are designed primarily to enable us to form our opinion on the financial statements, and therefore may not bring to light all weaknesses in policies or procedures that may exist. We aim, however, to use our knowledge of the County gained during our work to make comments and suggestions that we hope will be useful to you.

We would be pleased to discuss these comments and recommendations with you at any time.

This communication is intended solely for the information and use of the Board of Supervisors, management, and others within the County and should not be used by anyone other than these specified parties.

ade Bailly LLP

Rancho Cucamonga, California March 27, 2020