## REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS IN ACCORDANCE WITH THE UNIFORM GUIDANCE AND GOVERNMENT AUDITING STANDARDS

FOR THE YEAR ENDED JUNE 30, 2023

#### SINGLE AUDIT REPORT FOR THE FISCAL YEAR ENDED JUNE 30, 2023

#### **TABLE OF CONTENTS**

	<u>Page</u>
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	1 and 2
Independent Auditor's Report on Compliance for Each Major Federal Program and	
Report on Internal Control over Compliance in Accordance with Applicable	
Sections of the OMB Uniform Guidance and the State Single Audit Implementation Act	3 - 7
Independent Auditor's Report on Compliance for Each Major State Program and	
Report on Internal Control over Compliance in Accordance with Applicable	
Sections of the OMB Uniform Guidance and the State Single Audit Implementation Act	8 - 12
Schedule of Expenditures of Federal and State Awards	13 - 15
Notes to the Schedule of Expenditures of Federal and State Awards	16
Schedule of Findings and Questioned Costs	17 - 21
Schedule of Prior Audit Findings	22
Corrective Action Plan	23 and 24



## 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

## Members of the Board of Commissioners Wake County, North Carolina

We have audited, in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in *Government Auditing Standards* issued by the Comptroller General of the United States, 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 **Wake County, North Carolina** (the "County") as of and for the year ended June 30, 2023, and the related notes to the financial statements, which collectively comprise the County's basic financial statements, and have issued our report thereon dated November 27, 2023. Our report includes a reference to other auditors who audited the financial statements of the Wake County Board of Alcoholic Control (the "ABC Board"), as described in our report on the County's financial statements. The financial statements of the ABC Board were not audited in accordance with *Government Auditing Standards*, and accordingly, this report does not include reporting on internal controls over financial reporting or compliance and other matters associated with the ABC Board or that are reported on separately by those auditors who audited the financial statements of the ABC Board.

#### Report on 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) as a basis for designing 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 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 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 and therefore, material weaknesses or significant deficiencies may exist that were not identified. We identified a certain deficiency in internal control, described in the accompanying schedule of findings and questioned costs as item 2023-001 that we consider to be a material weakness.

#### **Report on 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 financial statements. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of noncompliance or other matters that are required to be reported under *Government Auditing Standards*.

#### Wake County, North Carolina's Response to the Findings

Government Auditing Standards requires the auditor to perform limited procedures on the County's responses to the findings identified in our audit and described in the accompanying schedule of findings and questioned costs. The County's responses were not subjected to the other auditing procedures applied in the audit of the financial statements and, accordingly, we express no opinion on the responses.

#### **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.

Mauldin & Jerkins, LLC

Raleigh, North Carolina November 27, 2023



# INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM AND REPORT ON INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH APPLICABLE SECTIONS OF THE OMB UNIFORM GUIDANCE AND THE STATE SINGLE AUDIT IMPLEMENTATION ACT

To Members of the Board of Commissioners Wake County, North Carolina

Report on Compliance for Each Major Federal Program

#### Opinion on Each Major Federal Program

We have audited **Wake County, North Carolina's** (the "County") compliance with the types of compliance requirements described in the OMB *Compliance Supplement* and the *Audit Manual for Governmental Auditors in North Carolina,* issued by the Local Government Commission, that could have a direct and material effect on each of the County's major federal programs for the year ended June 30, 2023. 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.

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 major federal program for the year ended June 30, 2023.

#### Basis for Opinion on Each Major Federal Program

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* (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance); and the State Single Audit Implementation Act. Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report.

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

#### Responsibilities of Management for Compliance

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

#### Auditor's Responsibilities for the Audit of Compliance

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

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

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

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

#### **Other Matters**

The results of our auditing procedures disclosed an instance of noncompliance, which is required to be reported in accordance with the Uniform Guidance and which is described in the accompanying schedule of findings and questioned costs as item 2022-003. Our opinion on each major federal program is not modified with respect to this matter.

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

#### **Report on Internal Control over Compliance**

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

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 deficiencies, in internal control over compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance.

We consider the deficiencies in internal control over compliance described in the accompanying schedule of findings and questioned costs as item 2023-002 to be a significant deficiency and item 2023-003 to be a material weakness.

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

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

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

## Report on Schedule of Expenditures of Federal and State Awards Required by the Uniform Guidance and the State Single Audit Implementation Act

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 for the year ended June 30, 2023, and the related notes to the financial statements, which collectively comprise the County's basic financial statements. We issued our report thereon dated November 27, 2023, which contained unmodified opinions on those financial statements, and which refers to the work of other auditors. Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the County's basic financial statements. The accompanying schedule of expenditures of federal and state awards is presented for purposes of additional analysis as required by the Uniform Guidance and the State Single Audit Implementation Act 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 and state awards is fairly stated in all material respects in relation to the basic financial statements as a whole.

Raleigh, North Carolina

December 29, 2023, except for our report on the schedule of expenditures of federal and state awards, for which the date is November 27, 2023

Mauldin & Jenkins, LLC



# INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE FOR EACH MAJOR STATE PROGRAM AND REPORT ON INTERNAL CONTROL OVER COMPLIANCE IN ACCORDANCE WITH APPLICABLE SECTIONS OF THE OMB UNIFORM GUIDANCE AND THE STATE SINGLE AUDIT IMPLEMENTATION ACT

To Members of the Board of Commissioners Wake County, North Carolina

Report on Compliance for Each Major State Program

#### Opinion on Each Major State Program

We have audited **Wake County, North Carolina's** (the "County") compliance with the types of compliance requirements described in the *OMB Compliance Supplement* and the *Audit Manual for Governmental Auditors in North Carolina*, issued by the Local Government Commission, that could have a direct and material effect on each of the County's major state programs for the year ended June 30, 2023. The County's major state programs are identified in the summary of auditor's results section of the accompanying schedule of findings and questioned costs.

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 the major state program for the year ended June 30, 2023.

#### Basis for Opinion on the Major State Program

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* (CFR) Part 200, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards* (Uniform Guidance); and the State Single Audit Implementation Act. Our responsibilities under those standards and the Uniform Guidance are further described in the Auditor's Responsibilities for the Audit of Compliance section of our report. We are required to be independent of the County and to meet our other ethical responsibilities, in accordance with relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a reasonable basis for our opinion on compliance for the each major state program.

Our audit does not provide a legal determination of the County's compliance with the compliance requirements referred to above.

#### Responsibilities of Management for Compliance

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

#### Auditor's Responsibility for the Audit of Compliance

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

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

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

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

#### **Other Matters**

The results of our auditing procedures disclosed an instance of noncompliance, which is required to be reported in accordance with the Uniform Guidance and which is described in the accompanying schedule of findings and questioned costs as item 2022-003. Our opinion on each major federal program is not modified with respect to this matter.

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

#### **Report on Internal Control over Compliance**

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

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 deficiencies, in internal control over compliance with a type of compliance requirement of a federal program that is less severe than a material weakness in internal control over compliance, yet important enough to merit attention by those charged with governance. We consider the deficiencies in internal control over compliance described in the accompanying schedule of findings and questioned costs as item 2023-002 to be a significant deficiency and item 2023-003 to be a material weakness.

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

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

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

## Report on Schedule of Expenditures of Federal and State Awards Required by the Uniform Guidance and the State Single Audit Implementation Act

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 for the year ended June 30, 2023, and the related notes to the financial statements, which collectively comprise the County's basic financial statements. We issued our report thereon dated November 27, 2023, which contained unmodified opinions on those financial statements, and which refers to the work of other auditors. Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the County's basic financial statements. The accompanying schedule of expenditures of federal and state awards is presented for purposes of additional analysis as required by the Uniform Guidance and the State Single Audit Implementation Act 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 and state awards is fairly stated in all material respects in relation to the basic financial statements as a whole.

Raleigh, North Carolina

December 29, 2023, except for our report on the schedule of expenditures of federal and state awards, for which the date is November 27, 2023

Mauldin & Jerkins, LLC

## SCHEDULE OF EXPENDITURES OF FEDERAL AND STATE AWARDS FOR THE YEAR ENDED JUNE 30, 2023

		State Pass-through	Expenditures			
Grantor/Pass-through Grantor/Program Titles	Federal Assistance Listing Number	Identifying #	Federal (Direct and Pass- through from)	State	Total	Provided to Subrecipients
Federal Awards:	Number	identifying #	through from)	State	Total	Subrecipients
U.S. Department of Agriculture: Passed-through from N.C. Department of Health and Human Services, Division of Social Services: Supplemental Nutrition Assistance Program (SNAP) Cluster: State Administrative Matching Grants for SNAP State Administrative Matching Grants for SNAP	10.561 10.561-COVID		\$ 6,609,147 1,357,856	\$ - -	\$ 6,609,147 1,357,856	\$ - -
Total SNAP Cluster			7,967,003		7,967,003	
Passed-through from N.C. Department of Health and Human Services, Division of Public Health Special Supplemental Nutritional Food Program for Women, Infants, and Children	10.557	403, 415, 416	4,128,328	<u> </u>	4,128,328	
Passed-through from Natural Resources Conservation Service		NC01449.				
Watershed Rehabilitation Program  Total U.S. Department of Agriculture	10.916	NC01450	484,569 <b>12,579,900</b>	<u> </u>	484,569 <b>12,579,900</b>	
U.S. Department of Housing and Urban Development:  CDBG -Entitlement Grants Cluster:  Community Developmental Block Grants/Entitlement Grants  Community Developmental Block Grants/Entitlement Grants  Total CDBG -Entitlement Grants Cluster	14.218 14.218-COVID		2,681,073 607,351 3,288,424	- - -	2,681,073 607,351 3,288,424	250,000 
Emergency Solutions Grants Program Emergency Solutions Grants Program - COVID Home Investment Partnership Program Housing Opportunities for Persons with AIDS - HOPWA Housing Opportunities for Persons with AIDS - HOPWA - COVID	14.231 14.231-COVID 14.239 14.241 14.241-COVID		182,780 548,314 150,186 1,105,215 55,087	- - - - -	182,780 548,314 150,186 1,105,215 55,087	- - - - -
Continuum of Care Program  Passed-through from the City of Raleigh:  Emergency Solutions Grants Program	14.267 14.231		2,052,293	-	2,052,293	-
Passed-through from Court Appointed Special Advocate (CASA): Continuum of Care Program	14.267		154,286	<u>-</u>	154,286	
Total U.S. Department of Housing and Urban Development  U.S. Department of Justice:			7,634,694	<del></del> -	7,634,694	250,000
State Criminal Alien Assistance Program Congressionally Recommended Awards Equitable Sharing Program Body Worn Camera Policy and Implementation Comprehensive Opioid, Stimulant, and other Substances Use Program	16.606 16.753 16.922 16.835		112,481 476,985 121,087 3,600	- - -	112,481 476,985 121,087 3,600	- - - -
(COSSUP)  Passed-through from N.C. Department of Public Safety	16.838		65,671	-	65,671	-
Grants to Encourage Arrest Policies and Enforcement of Protection Orders Program (Office on Violence Against Women)	16.590	2018-WF-AX-0026	295,302	-	295,302	-
Passed-through from City of Raleigh Edward Byrne Memorial Justice Assistance Grant Program Total U.S. Department of Justice	16.738		78,670 <b>1,153,796</b>		78,670 <b>1,153,796</b>	
U.S. Department of Labor Passed-through from N.C. Department of Economic and Community Development, Job Training Partnership Act: WIOA Cluster:						
WIOA - Adult Program WIOA - Youth Activities WIOA - Dislocated Workers Formula Grants Total WIOA Cluster	17.258 17.259 17.278	4010, 4020, 4050 4040, 4050 4030, 4031, 4050	1,730,795 1,785,809 1,287,538 4,804,142	- - - -	1,730,795 1,785,809 1,287,538 4,804,142	1,493,672 1,541,149 988,711 4,023,532
Reentry Employment Opportunities WIOA National Dislocated Worker Grants / WIA National Emergency	17.270		290,099	-	290,099	139,435
Grants  Total U.S. Department of Labor	17.277		689,180 <b>5,783,421</b>	<u>-</u> _	689,180 <b>5,783,421</b>	535,285 <b>4,698,252</b>
ederal Highway Administration Passed-through from N.C. Department of Transportation:						
Formula Grants for Rural Areas (Community Transportation Program) State and Community Highway Safety (Governor's Highway Safety Program)	20.509 20.600	36233.106.17.1 / 36233.106.18.1 22022.6.30 / 22022.6.19	90,929 172,349	231,486	322,415 172,349	-
Highway Planning & Construction Cluster:  Highway Planning and Construction	20.205	37673.1.3 / 48778.4.2	1,187,233	266,862	1,454,095	
Total Highway Planning & Construction Cluster  Passed-through from the City of Raleigh, NC:			1,187,233	266,862	1,454,095	
Federal Transit Cluster:  Federal Transit Formula Grant (FTA 5307)  Federal Transit Formula Grant (FTA 5307) - COVID  Total Federal Transit Cluster	20.507 20.507-COVID		1,731,684 3,490,683 5,222,367	- - - -	1,731,684 3,490,683 5,222,367	- - -
Transit Services Program Cluster:						
Enhanced Mobility of Seniors & Individuals w Disabilities (FTA 5310) Total Transit Services Program Cluster	20.513		28,768 28,768	<u>-</u> -	28,768 28,768	<u>-</u>
Public Transportation Innovation  Total Federal Highway Administration	20.530		155,751 <b>6,857,397</b>	498,348	155,751 <b>7,355,745</b>	<u>-</u>
U.S. Department of the Treasury  Emergency Rental Assistance Program (ERA)  Coronavirus State and Local Fiscal Recovery Funds (ARPA)	21.023-COVID 21.027-COVID		11,861,749 37,644,772	9,924,214 -	21,785,963 37,644,772	21,715,488 6,569,345
Passed-through from N.C. Department of Commerce: Coronavirus State and Local Fiscal Recovery Funds (ARPA)	21.027-COVID		537,511	-	537,511	537,511
Passed-through from the N.C. Department of Health and Human Services, Division of Public Health:  Coronavirus State and Local Fiscal Recovery Funds (ARPA)	21.027-COVID		57,053	-	57,053	-

## SCHEDULE OF EXPENDITURES OF FEDERAL AND STATE AWARDS FOR THE YEAR ENDED JUNE 30, 2023

		State Pass-through	Expenditures			
	Federal Assistance Listing		Federal (Direct and Pass-			Provided to
Grantor/Pass-through Grantor/Program Titles Passed-through from N.C. Department of Public Safety:	Number	Identifying #	through from)	State	Total	Subrecipients
Coronavirus State and Local Fiscal Recovery Funds (ARPA)  Total U.S. Department of Treasury	21.027-COVID		\$ 66,287 <b>50,167,372</b>	9,924,214	\$ 66,287 <b>60,091,586</b>	\$ 11,233 28,833,577
nstitute of Museum and Library Services (IMLS)  National Leadership Grants  Total Institute of Museum and Library Services (ILMS)	45.312-COVID		3,022 <b>3,022</b>		3,022 <b>3,022</b>	
.S. Department of Education: Passed-through from N.C. Department of Public Instruction						
School Safety National Activities  Total U.S. Department of Education	84.184		58,480 <b>58,480</b>	<u> </u>	58,480 <b>58,480</b>	
.S. Department of the Health and Human Services dministration for Children and Families Passed-through from the N.C. Department of Health and						
Human Services, Division of Social Services:  Promoting Safe and Stable Families Program	93.556		286,070	-	286,070	
Temporary Assistance for Needy Families (TANF) Child Support Enforcement	93.558 93.563		5,805,292 5,928,735	-	5,805,292 5,928,735	- -
Low-Income Home Energy Assistance Low-Income Home Energy Assistance	93.568 93.568-COVID		379,044 3,362,026		379,044 3,362,026	-
Stephanie Tubbs Jones Child Welfare Services Program Social Services Block Grant	93.645 93.667		357,787 2,050,876	(37,875) 156,067	319,912 2,206,943	
Chafee Foster Care Program For Successful Transition to Adulthood	93.674		223,328	34,404	257,732	
Refugee and Entrant Assistance State/Replacement Designee Administered Programs	93.566		45,772	-	45,772	-
<u>Foster Care and Adoption Cluster:</u> Foster Care - Title IV-E	93.658		5,687,175	2,969,890	8,657,065	
Adoption Assistance Total Foster Care and Adoption Cluster	93.659		727,500 6,414,675	103,079 3,072,969	830,579 9,487,644	
Passed-through from the N.C. Department of Health and Human Services, Division of Child Development and Early Education:  Subsidized Child Care Cluster  Child Care Development Fund Cluster:						
Child Care Mandatory and Matching Funds of the Child Care and Development Fund - Administration Total Child Care Development Fund Cluster	93.596		2,438,168 2,438,168	<u>-</u>	2,438,168 2,438,168	
Smart Start	NA		-	111,052	111,052	-
Total Subsidized Child Care Cluster			2,438,168	111,052	2,549,220	
enters for Medicare and Medicaid Services Passed-through from the N.C. Department of Health and Human Services, Division of Medical Assistance:  Medicaid Cluster:						
Medical Assistance Program (Medicaid) Total Medicaid Cluster	93.778		19,529,801 19,529,801	1,421,301 1,421,301	20,951,102 20,951,102	
Children's Health Insurance Program - N.C. Health Choice	93.767		270,289	30,828	301,117	-
Activities to Support State, Tribal, Local and Territorial (STLT) Health	02 201 COVID	NUZEOT000020	1.652.764		1 652 764	
Department Response to Public Health or Healthcare Crises Centers for Disease Control and Prevention Collaboration with Academia to Strengthen Public Health (WorkwithWake)	93.391-COVID 93.967	NH75OT000020	1,652,764 374	-	1,652,764 374	-
Passed-through from the N.C. Department of Health and						
Human Services, Division of Public Health: Public Health Emergency Preparedness	93.069	514	88,000	-	88,000	-
Project Grants and Cooperative Agreements for Tuberculosis Control Programs Injury Prevention and Control Research and State and Community	93.116	551	69,379	72,217	141,596	-
Based Programs Immunization Cooperative Agreements	93.136 93.268	491 510, 715	87,539 72,005	- 52,158	87,539 124,163	-
National and State Tobacco Control Program Well Integrated Screening and Evaluation for Women Across the	93.387	451	56,694	26,973	83,667	
Nation Public Health Emergency Response: Cooperative Agreement for	93.436	465	31,575	-	31,575	-
Emergency Response: Public Health Crisis Response Temporary Assistance for Needy Families (TANF)	93.354-COVID 93.558	620 151	493,751 68,295	-	493,751 68,295	-
Refugee and Entrant Assistance State/Replacement Designee Administered Programs	93.566	583	187,934	-	187,934	-
Cancer Prevention and Control Programs HIV Prevention Activities - Health Department Based	93.898 93.940	452 536, 587, 825	60,500 213,665	77,730 78,000	138,230 291,665	
Sexually Transmitted Diseases Prevention and Control Grants Preventive Health and Health Services Block Grant	93.940 93.977 93.991	534, 610 886	100 30,133	257,690 2,660	257,790 32,793	
ealth Resources and Services Administration	02.047	F74 C44 022	2 (44 422		2 64 4 422	
HIV Care Formula Grants Grants to Provide Outpatient Early Intervention Services with Respect	93.917	574, 611, 822	2,614,432	-	2,614,432	·
to HIV Disease  Maternal and Child Health Services Block Grants to the States	93.918 93.994	101, 151, 318, 351, 352, 834	683,315 746,312	217,822	683,315 964,134	-
ational Institutes of Health	33.334	332, 834	740,312	217,022	504,134	
Passed-through from the Duke University: Cardiovascular Diseases Research	93.837	1UG3HL146935-01A1	3,050	-	3,050	-
pod and Drug Administration Food and Drug Administration Research	93.103		68,640	-	68,640	-
ffice of the Secretary  Community Program to Improve Minority Health (Lit4Wake)	93.137-COVID	CPIMP211289	1,214,983	-	1,214,983	198,384
Office of Assistant Secretary for Health Family Planning Services	93.217	151	192,769	44,863	237,632	-
ubstance Abuse and Mental Health Services Administration Substance Abuse and Mental Health Services Projects of Regional and						
National Significance	93.243		312,106 <b>56,040,178</b>	5,618,859	312,106 <b>61,659,037</b>	198,384

## SCHEDULE OF EXPENDITURES OF FEDERAL AND STATE AWARDS FOR THE YEAR ENDED JUNE 30, 2023

		State Pass-through	Expenditures Federal (Direct and Pass-		Expenditures		Expenditures		Expenditures		Expenditures					
	Federal Assistance Listing							Provided to								
Grantor/Pass-through Grantor/Program Titles	Number	Identifying #	thr	ough from)	 itate		Total	Subrecipients								
Corporation for National and Community Service (CNCS) - "AmeriCorps":  AmeriCorps Volunteers In Service to America (VISTA)	94.013		\$	31,849	\$ 	\$	31,849 <b>31,849</b>	\$ -								
Total Corporation for National and Community Service (CNCS)  U.S. Department of Homeland Security:				31,849	 		31,849									
Federal Emergency Management Agency																
Disaster Grants - Public Assistance (Presidentially Declared Disasters)	97.036-COVID			696,525	-		696,525	-								
Passed-through from N.C. Department of Public Safety Emergency Management Performance Grant	97.042			62,500	_		62,500	-								
Emergency Management Performance Grant - COVID	97.042-COVID			9,428	-		9,428	-								
Emergency Operations Center  Total U.S. Department of Homeland Security	97.052			301,000 <b>1,069,453</b>			301,000 <b>1,069,453</b>									
Total Federal Awards				141,379,562	 16,041,421		157,420,983	33,980,213								
State Awards:																
N.C. Department of Natural and Cultural Resources: Division of State Library:																
State Aid to Libraries				_	667,500		667,500	-								
Total N.C. Department of Natural and Cultural Resources				-	667,500		667,500	-								
N.C. Department of Health and Human Services:																
Division of Public Health:  Community Health Medical Access				_	136,898		136,898	-								
General Aid to Counties		110		-	167,583		167,683	-								
HIV Non-Traditional Test Site		894		-	30,616		30,616	-								
School Nurse Funding Initiative Improving Community Outcomes for Maternal and Child Health		803 164		-	51,785 243,483		51,785 243,483	-								
Total Division of Public Health		104			630,365		630,465									
<b>Division of Social Services:</b> Energy Assistance Private Grants				-	3,000		3,000	-								
Division of Child Development:																
North Carolina Smart Start  Total N.C. Department of Health and Human Services				-	 632,807 <b>1,266,172</b>		632,807 <b>1,266,272</b>	<u> </u>								
N.C. Department of Transportation: Division of Public Transportation: Rural Operating Assistance Program (ROAP) - Cluster																
Elderly and Disabled Transportation Assistance Program (EDTAP)				-	338,559		338,559	-								
Employment Transportation Assistance Program				-	246,380		246,380	-								
Rural General Public Program (RGP) Total Rural Operating Assistance Program (ROAP) Cluster				<del>-</del>	 706,121		121,182 706,121									
Total N.C. Department of Transportation				-	706,121		706,121									
N.C. Department of Environmental Quality																
Environment Health Food & Lodging				-	158,483		158,483	-								
NC Electronic Recycling Scrap Tire Disposal Program				-	89,120 2,247,864		89,120 2,247,864	-								
White Goods Management Program					 313,965		313,965									
Total N.C. Department of Environmental Quality				-	2,809,432		2,809,432									
N.C. Department of Agriculture and Consumer Services State Farm Grant					24.400		24.400									
Total N.C. Department of Agriculture and Consumer Services				<u>-</u>	24,488 <b>24,488</b>		24,488 <b>24,488</b>									
N.C. Department of Public Instruction																
Public School Building Capital Fund - Lottery Proceeds  Total N.C. Department of Public Instruction				-	11,735,413 11,735,413		11,735,413 11,735,413									
N.C. Department of Public Safety																
·		10 DED 044050 UV			152.000		452.000									
Capital Area Workforce Development Local ReEntry Council Services Tier II Noncompetitive (LEPC Support and BEST Conference)		19-RFP-014850-JJX		-	153,996 853		153,996 853	-								
Juvenile Crime Prevention Programs  Total N.C. Department of Public Safety				-	 2,109,846 <b>2,264,695</b>		2,109,846 <b>2,264,695</b>	1,757,690 <b>1,757,690</b>								
N.C. Department of Military and Veteran Affairs					, , ,,,,,,,,,		,,	_,,								
Division of Veterans Affairs																
Veterans Service Program  Total N.C. Department of Military and Veteran Affairs				<u>-</u>	2,083 <b>2,083</b>		2,083 <b>2,083</b>	<u> </u>								
Total State Awards					 19,475,904			1,757,690								
				444 272 722			19,476,004									
Total Federal and State Awards			\$	141,379,562	\$ 35,517,325	\$	176,896,987	\$ 35,737,903								

#### NOTES TO THE SCHEDULE OF EXPENDITURES OF FEDERAL AND STATE AWARDS

#### NOTE 1. BASIS OF PRESENTATION

The accompanying schedule of expenditures of federal awards (the "Schedule") includes the federal and state grant activity of the County under programs of the federal government for the year ended June 30, 2023. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations (CFR) Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance) and the State Single Audit Implementation Act. Therefore, some of the amounts presented in the Schedule may differ from amounts presented in, or used in, the preparation of the financial statements. Also, because the 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 net position or cash flows of the County.

#### NOTE 2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES:

Expenditures reported on the Schedule are reported on the modified accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance and the State Single Audit Implementation Act, wherein certain types of expenditures are not allowable or are limited as to reimbursement. Negative amounts shown on the Schedule represent adjustments or credits made in the normal course of business to amounts reported as expenditures in prior years. Pass-through entity identifying numbers are presented where available. The County has elected not to use the 10% de Minimis indirect cost rate as allowed under the Uniform Guidance.

#### NOTE 3. CLUSTER OF PROGRAMS

The following are clustered by the NC Department of Health and Human Services and are treated separately for state audit requirement purposes:

Subsidized Child Care and Foster Care Adoption

#### SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED JUNE 30, 2023

#### SECTION I SUMMARY OF AUDIT RESULTS

#### Financial Statements Type of report the auditor issued on whether the financial statements audited were prepared in accordance with GAAP: Unmodified Internal control over financial reporting: Material weakness(es) identified? \_\_X\_ Yes \_\_\_ No Significant deficiency(ies) identified? Yes X None reported Yes X No Noncompliance material to financial statements noted? Federal Awards Internal control over major state programs: \_\_X\_ Yes \_\_\_\_ No Material weakness(es) identified? Significant deficiency(ies) identified? X Yes None reported Type of auditor's report issued on compliance for major federal programs? Unmodified Any audit findings disclosed that are required to be reported in X Yes No accordance with 2 CFR 200.516(a)? Identification of major program: Assistance Listing Number Name of Federal Program or Cluster **Medicaid Cluster** 93.778 21.023 **Emergency Rental Assistance Program** 21.027 Coronavirus State and Local Fiscal Recovery Funds 93.558 Temporary Assistance for Needy Families 93.568 Low-Income Home Energy Assistance Program 20.507 Federal Transit Cluster Community Development Block Grants/Entitlement 14.218 Grants Dollar threshold used to distinguish between type A and

17

\$3,000,000

No

type B programs:

Auditee qualified as low-risk auditee?

#### SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED JUNE 30, 2023

## SECTION I SUMMARY OF AUDIT RESULTS (CONTINUED)

State Awards		
Internal control over major state programs:		
Material weakness(es) identified?	XYesNo	
Significant deficiency(ies) identified?	XYes None reported	d
Type of auditor's report issued on compliance for major state programs?	Unmodified	
Any audit findings disclosed that are required to be reported in accordance with the State Single Audit Implementation Act?	XYesNo	
Identification of major State program:		
Program Name		
Public School Building Capital Fund		

Rural Operating Assistance Program (ROAP)

Other major state programs include Medical Assistance Program (Medicaid) and Emergency Rental Assistance Program which have a state match on the federal program. Therefore, these programs have been included in the major programs above.

#### SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED JUNE 30, 2023

### SECTION II FINANCIAL STATEMENT FINDINGS AND RESPONSES

#### 2023-001 Accounts Payable

*Criteria:* Internal controls should be in place to ensure that financial statements properly present the financial position and results of the County in accordance with generally accepted accounting principles.

**Condition:** A misstatement was detected in the recognition and reporting of liabilities in the County Capital Projects fund as of June 30, 2023.

**Context/Cause:** During our testing of accounts payable, an issue was identified that required an audit adjustment to be posted to properly report the balances. The nature and magnitude of this adjustment is as follows:

An adjustment of \$1,409,110 was made to the County Capital Projects fund to record an expenditure and related accounts payable for an invoice relating to fiscal year 2023.

*Effects:* An audit adjustment for \$1,409,110 was needed to correct the above accounts in the County's general ledger as of and for the year ended June 30, 2023.

**Recommendation:** We recommend the County reconcile the balance sheet, each month, to the subsidiary ledgers in order to timely address variances in the account balance which are outside of expectations.

**Auditee's Response:** The Finance department will review year-end payment procedures with departmental staff and other Finance payment approvers. A systematic review of invoices will be conducted during the annual close process to ensure vendor payments are recorded in the proper fiscal year.

## SECTION III FEDERAL AWARD FINDINGS AND QUESTIONED COSTS

#### 2023-002 Significant Deficiency over Eligibility (Repeat Finding)

**Information on the federal program:** Medicaid Cluster (Medicaid), Assistance Listing Number 93.778, U.S. Department of Health and Human Services, passed through the N.C Department of Health and Human Services (NCDHHS), Division of Medical Assistance.

*Criteria:* Per the North Carolina Medicaid Assistance Program (Medicaid; Title XIX) Compliance Supplement and the DSS manuals (Aged, Blind and Disabled manual, Family and Children Medicaid manual and the Integrated Policy manual), case files for individuals or families receiving assistance are required to retain documentation to service as evidence for the appropriate eligibility determination, including:

- accurate computation of countable income and resources
- verification of unearned income
- verification of earned income

#### SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED JUNE 30, 2023

## SECTION III FEDERAL AWARD FINDINGS AND QUESTIONED COSTS (CONTINUED)

#### 2023-002 Significant Deficiency over Eligibility (Repeat Finding) (Continued)

**Condition:** We noted one instance where the amount of unearned income was verified but not updated in NC FAST Online Verification System. We noted two instances where the applicant's citizenship were not validated at the time of application and two instances where a second proof of state residence verification were not obtained. We noted one instance where the onset date of the applicant's disability did not match the NC FAST Online Verification System.

**Context/Cause:** The County did not retain required documentation in case files at the time eligibility was determined. We noted the above conditions in 6 out of the 60 case files inspected for applicable payments.

**Effects:** Case files not containing all required documentation results in a risk that the County could provide services to individuals not eligible to receive such services or that such services could be denied to eligible individuals. For all 6 cases, subsequent to being notified that required documentation had not been retained in the case file, the County was able to obtain documentation to substantiate that the applicant tested were eligible to receive benefits.

**Recommendation:** We recommend that the County train and monitor employees on the eligibility determination process. We also recommend the County review and amend current policies and procedures in place to ensure that all eligibility determination documentation is completed and retained by the County.

Auditee's Response: We concur with the findings.

#### 2023-003 Material Weakness over Subrecipient Monitoring

*Information on the federal program:* Emergency Rental Assistance Program (ERAP), Assistance Listing Number 21.023, U.S. Department of Treasury

*Criteria:* Per 2 CFR Section 200.332(b), an evaluation of each subrecipient's risk of noncompliance for purpose of determining the appropriate subrecipient monitoring must be performed. An entity should monitor the activities of the subrecipient as necessary to ensure that the subaward is used for authorized purposes, complies with terms and conditions of the subaward, and achieves performance goals per 2 CFR Section 200.332 (d) through (f).

**Condition:** We noted the County had one subrecipient for this program. The County did not perform or document a subrecipient risk assessment or internal control assessment for the subrecipient. Additionally, we noted no on-site visit or desk review was performed of the subrecipient during the fiscal year.

**Context/Cause:** The County did not perform a subrecipient risk assessment or internal control assessment and therefore the requirement for an on-site visit or desk review was not determined or performed. The County did review the subrecipient invoices for services rendered and determined the invoices were allowable and within the period of performance for the ERAP.

## SCHEDULE OF FINDINGS AND QUESTIONED COSTS FOR THE YEAR ENDED JUNE 30, 2023

## SECTION III FEDERAL AWARD FINDINGS AND QUESTIONED COSTS (CONTINUED)

#### 2023-003 Material Weakness over Subrecipient Monitoring (Continued)

**Effects:** Inadequate subrecipient monitoring could lead to unallowable costs or activities, cost occurring in the wrong period of performance, individuals receiving funding that were not eligible, or incorrect quarterly report and close out reports.

**Recommendation:** We recommend that the County create a subrecipient monitoring policy to monitor federal awards in accordance with the contract and Uniform grant guidance. The subrecipient monitoring policy should include performing a risk assessment to determine the level of subrecipient monitoring required. Additionally, we recommend the County conduct site visits and/or perform a random sampling of charges based on the results of the risk assessment.

**Auditee's Response:** The County acknowledges the recommendation on subrecipient monitoring. An organization-wide documented policy is being developed by the newly established Grants Management program officers. The new policy will meet current Federal guidance on subrecipient monitoring and will include resources and recommendations for County Departments to perform a risk assessment, internal control assessment, onsite visits, and desk reviews as applicable. The Housing Department will perform a program closeout monitoring for this program in the coming months.

## SECTION IV STATE AWARD FINDINGS AND QUESTIONED COSTS

Finding 2023-002 and 2023-003 as listed in Section III Federal Award Findings and Questioned Costs are also considered to be state award findings.

#### SUMMARY SCHEDULE OF PRIOR AUDIT FINDINGS FOR THE YEAR ENDED JUNE 30, 2023

#### 2022-001 Significant Deficiency over Eligibility (Repeat Finding)

*Criteria:* Per the North Carolina Medicaid Assistance Program (Medicaid; Title XIX) Compliance Supplement and the DSS manuals (Aged, Blind and Disabled manual, Family and Children Medicaid manual and the Integrated Policy manual), case files for individuals or families receiving assistance are required to retain documentation to serve as evidence for the appropriate eligibility determination, including:

- accurate computation of countable income and resources
- verification of unearned income
- verification of earned income

**Condition:** We noted one instance where the amount of income verified through the NC FAST Online Verification System did not agree to the amount reported in the case file. We noted three instances where a vehicle was not added to the NCFAST dashboard to count towards the applicant's resources. We noted one instance where the applicant's social security number and citizenship was not validated at the time of application.

Current Status: Repeat finding, 2023-002.

## 2022-002 Significant Deficiency over Activities Allowed and Unallowed and Allowable Costs/Cost Principles

*Criteria:* Per the NCDHHS policy manual, salaries, wages, and fringe benefits of Department of Social Service employees hired under the state merit system are allowable. Salaries shall be allocated to programs by time distribution methods and supported by payroll and attendance records for individuals.

**Condition:** Employee's time is tracked through the use of day sheets in which employees track their time by service code in 5-minute increments. Day sheets are used to complete weekly timesheets which are approved by supervisors. We noted three out of six day sheets selected for Chaffee Foster Care and three out of forty day sheets selected for TANF had more program minutes than what was reported on the employee's approved time sheet.

Current Status: Corrected.

#### 2022-003 Material Weakness – Eligibility Second Party Reviews

*Criteria:* Per the DSS Administrative Letter for Economic and Family Service 07-2018, Work First Program Second Party Review Checklists must be completed at application and recertification for no less than 25% of the monthly ongoing Work First cases. The protocol must outline the persons responsible for completing the reviews and the process for follow-up as required. If second party reviews identify a trend in deficiencies; the County process for providing necessary training must also be outlined.

**Condition:** The County was not abiding by the State policy and procedures outlined above. Reviews were not taking place at the frequency level based on number of cases. The County only reviewed 12% of the required cases during the 2022 fiscal year.

Current Status: Corrected.



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#### **December 29, 2023**

Wake County, North Carolina respectfully submits the following corrective action plans for the year ended June 30, 2023.

Name and address of independent public accounting firm:

Mauldin & Jenkins 4208 Six Forks Road, Ste 1000 Raleigh, NC 27609

Audit Period: June 30, 2023

The following Corrective Action Plans are in response to the audit findings reported in the FY 2023 Compliance Audit.

#### Finding 2023-001 Accounts Payable

**Recommendation:** We recommend the County reconcile the balance sheet, each month, to the subsidiary

ledgers in order to timely address variances in the account balance which are outside of

expectations.

Corrective Action Plan: The Finance department will review year-end payment procedures with departmental

staff and other Finance payment approvers. A systematic review of invoices will be conducted during the annual close process to ensure vendor payments are recorded in

the proper fiscal year.

Proposed Completion Date: June 30, 2024

Name of Contact Person: Seth Larson, Accounting Manager

**Finding 2023-002 Significant Deficiency over Eligibility, repeat finding;** Medicaid Cluster (Medicaid), Assistance Listing Number 93.778, U.S. Department of Health and Human Services, passed through the N.C Department of Health and Human Services (NCDHHS), Division of Medical Assistance.

Recommendation: We recommend that the County train and monitor employees on the eligibility

determination process. We also recommend the County review and amend current policies and procedures in place to ensure that all eligibility determination documentation

is completed and retained by the County.

Corrective Action Plan: The county will complete a quarterly review of errors in income, resources, and social

security number and citizenship verification. For those staff identified by the targeted

review with errors in these areas, supervisors will provide refresher training on Medicaid policy requirements. Additional targeted reviews will be completed monthly until the

deficiencies are corrected.

**Proposed Completion Date:** 1/31/2023 for initial quarterly review

2/28/2023 for refresher training for identified staff

7/31/2023 for additional reviews as needed for identified staff

Contact Person: Yolanda McInnis, Economic Services Division Director

**2023-003 Material Weakness over Subrecipient Monitoring;** Emergency Rental Assistance Program (ERAP), Assistance Listing Number 21.023, U.S. Department of Treasury

**Recommendation:** We recommend that the County create a subrecipient monitoring policy to monitor federal

awards in accordance with the contract and Uniform grant guidance. The subrecipient monitoring policy should include performing a risk assessment to determine the level of subrecipient monitoring required. Additionally, we recommend the County conduct site visits and/or perform a random sampling of charges based on the results of the risk

assessment.

Corrective Action: An organization-wide documented policy is being developed by the newly established

Grants Management program officers. The new policy will meet current Federal guidance on subrecipient monitoring and will include resources and recommendations for County Departments to perform a risk assessment, internal control assessment, onsite

visits, and desk reviews as applicable.

Proposed Completion Date: Upon completion and approval of the new subrecipient monitoring policy the County will

implement the procedures within 180 days.

Name of Contact Person: Patrick Flanary, Chief Financial Officer

Sincerely yours,

W Patrick Flanary

W. Patrick Flanary

Chief Financial Officer