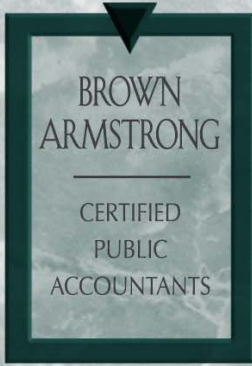


COUNTY OF KERN, CALIFORNIA
SINGLE AUDIT REPORT
FOR THE YEAR ENDED JUNE 30, 2013

**COUNTY OF KERN, CALIFORNIA
SINGLE AUDIT REPORT**

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BROWN ARMSTRONG

Certified Public Accountants

INDEPENDENT AUDITOR’S REPORT ON INTERNAL CONTROL OVER FINANCIAL REPORTING AND ON COMPLIANCE AND OTHER MATTERS BASED ON AN AUDIT OF THE FINANCIAL STATEMENTS PERFORMED IN ACCORDANCE WITH GOVERNMENT AUDITING STANDARDS

To the Honorable Members of
the Board of Supervisors
County of Kern, 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 aggregate discretely presented component units, each major fund, and the aggregate remaining fund information of the County of Kern (the County), as of and for the year ended June 30, 2013, and the related notes to the financial statements, which collectively comprise the County’s basic financial statements and have issued our report thereon dated January 28, 2014.

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.

Our consideration of internal control was for the limited purpose described in the preceding paragraph 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. However, as described in the accompanying schedule of findings and questioned costs, we identified certain deficiencies in internal control that we consider to be material weaknesses.

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. We consider the deficiencies described in the accompanying schedule of findings and questioned costs as findings 2013-1 through 2013-6, all of which are relating to Kern County Medical Center, one of the County’s major enterprise funds, to be material weaknesses.

MAIN OFFICE

4200 TRUXTUN AVENUE

SUITE 300
BAKERSFIELD, CA 93309
TEL 661.324.4971
FAX 661.324.4997
EMAIL info@bacpas.com

560 CENTRAL AVENUE

SHAFTER, CALIFORNIA 93263
TEL 661.746.2145
FAX 661.746.1218

7673 N. INGRAM AVENUE

SUITE 101
FRESNO, CALIFORNIA 93711
TEL 559.476.3592
FAX 559.476.3593

206 S. LOS ROBLES AVENUE

SUITE 326
PASADENA, CALIFORNIA 91101
TEL 626.204.6542
FAX 626.204.6547

5250 CLAREMONT AVENUE

SUITE 237
STOCKTON, CA 95207
TEL 209.451.4833



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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.

Compliance and Other Matters

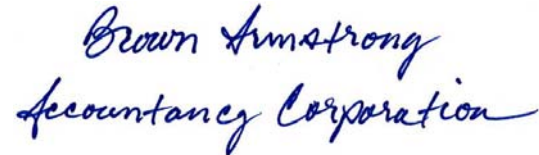
As part of obtaining reasonable assurance about whether the County's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, noncompliance with which could have a direct and material effect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

We noted certain matters that we reported to management of the County in a separate letter dated January 28, 2014.

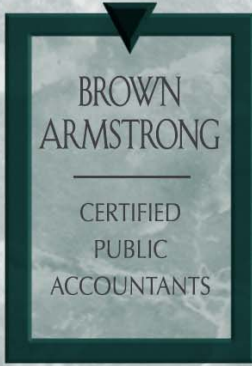
Purpose of this Report

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 to provide an opinion on the effectiveness of the County'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 County's internal control and compliance. Accordingly, this communication is not suitable for any other purpose.

BROWN ARMSTRONG
ACCOUNTANCY CORPORATION

A handwritten signature in blue ink that reads "Brown Armstrong Accountancy Corporation". The signature is written in a cursive style and is positioned below the printed name of the firm.

Bakersfield, California
January 28, 2014



BROWN ARMSTRONG

Certified Public Accountants

INDEPENDENT AUDITOR’S REPORT ON COMPLIANCE FOR EACH MAJOR FEDERAL PROGRAM; REPORT ON INTERNAL CONTROL OVER COMPLIANCE; AND REPORT ON THE SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS REQUIRED BY OMB CIRCULAR A-133

To the Honorable Members of
the Board of Supervisors
County of Kern, California

MAIN OFFICE

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SUITE 300
BAKERSFIELD, CA 93309
TEL 661.324.4971
FAX 661.324.4997
EMAIL info@bacpas.com

560 CENTRAL AVENUE

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TEL 661.746.2145
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SUITE 101
FRESNO, CALIFORNIA 93711
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FAX 559.476.3593

206 S. LOS ROBLES AVENUE

SUITE 326
PASADENA, CALIFORNIA 91101
TEL 626.204.6542
FAX 626.204.6547

5250 CLAREMONT AVENUE

SUITE 237
STOCKTON, CA 95207
TEL 209.451.4833

Compliance

We have audited the County of Kern’s (the County) compliance with the types of compliance requirements described in the U.S. Office of Management and Budget (OMB) Circular A-133 *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, 2013. 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.

Management’s Responsibility

Management is responsible for compliance with the requirements of laws, regulations, contracts, and grants 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 OMB Circular A-133, *Audits of States, Local Governments, and Non-Profit Organizations*. Those standards and OMB Circular A-133 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, 2013.



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Other Matters

The results of our auditing procedures disclosed instances of noncompliance, which are required to be reported in accordance with OMB Circular A-133 and which are described in the accompanying schedule of findings and questioned costs as item 2013-07. 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. 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.

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 OMB Circular A-133, 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 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.

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 the deficiencies in internal control over compliance that might be significant deficiencies or material weaknesses. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, material weaknesses may exist that have not been identified.

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 OMB Circular A-133. Accordingly, this report is not suitable for any other purpose.

Report on Schedule of Expenditures of Federal Awards Required by OMB Circular A-133

We have audited the financial statements of the governmental activities, the business-type activities, the aggregate discretely presented component units, each major fund, and the aggregate remaining fund information of the County, as of and for the year ended June 30, 2013, and the related notes to the financial statements, which collectively comprise the County's basic financial statements. We issued our report thereon dated January 28, 2014, which contained unmodified opinions on those financial statements. Our audit was conducted for the purpose of forming opinions on the financial statements that collectively comprise the basic financial statements. The accompanying schedule of expenditures of federal awards is presented for purposes of additional analysis as required by OMB Circular A-133 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

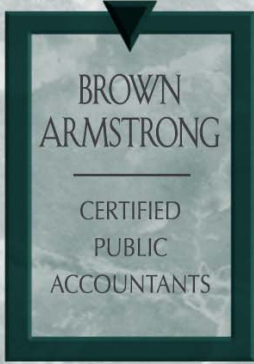
the basic financial statements. The information has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare 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 feral awards is fairly stated in all material respects in relation to the basic financial statements as a whole.

This report is intended for the information of the Board of Supervisors, management, Federal Awarding Agencies, Pass-Through Entities, and the State Controller's Office and is not intended to be, and should not be, used by anyone other than these specified parties.

BROWN ARMSTRONG
ACCOUNTANCY CORPORATION

Brown Armstrong
Accountancy Corporation

Bakersfield, California
March 25, 2014



BROWN ARMSTRONG

Certified Public Accountants

INDEPENDENT AUDITOR'S REPORT ON COMPLIANCE WITH THE COMMON AND SPECIFIC REQUIREMENTS APPLICABLE TO THE PASSENGER FACILITY CHARGES PROGRAM

To the Honorable Members of
the Board of Supervisors
County of Kern, California

MAIN OFFICE

4200 TRUXTUN AVENUE

SUITE 300
BAKERSFIELD, CA 93309
TEL 661.324.4971
FAX 661.324.4997
EMAIL info@bacpas.com

560 CENTRAL AVENUE

SHAFTER, CALIFORNIA 93263
TEL 661.746.2145
FAX 661.746.1218

7673 N. INGRAM AVENUE

SUITE 101
FRESNO, CALIFORNIA 93711
TEL 559.476.3592
FAX 559.476.3593

206 S. LOS ROBLES AVENUE

SUITE 326
PASADENA, CALIFORNIA 91101
TEL 626.204.6542
FAX 626.204.6547

5250 CLAREMONT AVENUE

SUITE 237
STOCKTON, CA 95207
TEL 209.451.4833

Compliance

We have examined management's assertion, included in its representation letter dated March 25, 2014, that the County of Kern complied with the common and specific requirements that are applicable to the Passenger Facility Charges Program during the period July 1, 2012, through June 30, 2013.

Management's Responsibility

As discussed in that representation letter, management is responsible for the County of Kern's compliance with those requirements. Our responsibility is to express an opinion on management's assertion about the County of Kern's compliance based on our examination.

Auditor's Responsibility

Our examination was made in accordance with standards established by the American Institute of Certified Public Accountants and, accordingly, included examining, on a test basis, evidence about the County of Kern's compliance with those requirements and performing such other procedures as we considered necessary in the circumstances. We believe that our examination provides a reasonable basis for our opinion. Our examination does not provide a legal determination on the County of Kern's compliance with specified requirements.

Opinion

In our opinion, management's assertion that the County of Kern complied with the common and specific requirements that are applicable to the Passenger Facility Charges Program during the period July 1, 2012, through June 30, 2013, is fairly stated, in all material respects.

This report is intended solely for the information and use of the Board of Supervisors, management, and the Federal Aviation Administration and is not intended to be, and should not be, used by anyone other than these specified parties.

BROWN ARMSTRONG
ACCOUNTANCY CORPORATION

*Brown Armstrong
Accountancy Corporation*

Bakersfield, California
March 25, 2014



REGISTERED with the Public Company Accounting Oversight Board and MEMBER of the American Institute of Certified Public Accountants

**COUNTY OF KERN, CALIFORNIA
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED JUNE 30, 2013**

FEDERAL GRANTOR/PASS-THROUGH GRANTOR/PROGRAM TITLE	Federal CFDA Number	Supplemental Identifying Number	Total Expenditures
<u>U.S. DEPARTMENT OF AGRICULTURE</u>			
Direct Programs			
Schools and Roads - Grants to Counties	10.666	Kern (County 15)	\$ 106,876
Passed through California Department of Food and Agriculture			
		11-8520-1211-CA / 12-8506-1211-CA 11-8520-1317-CA / 12-8506-1317-CA 12-8506-0484-CA 11-8520-1164-CA / 12-8520-1164-CA 11-8523-0572-CA	
Plant and Animal Disease, Pest Control, and Animal Care	10.025		1,065,250
Comprehensive Obesity Prevention	10.168	12-10171	295,825
Passed through U.S. Department of Education			
School Breakfast Program	10.553	Kern (County 15)	23,752
National School Lunch Program	10.555	Kern (County 15)	715,310
Subtotal - Child Nutrition Cluster			739,062
Passed through California Department of Social Services			
State Administrative Matching Grants for the Supplemental Nutrition Assistance Program (SNAP)	10.561	Kern (County 15)	12,996,225
Passed through California Department of Health Services			
State Administrative Matching Grants for the Supplemental Nutrition Assistance Program (SNAP)	10.561	Kern (County 15)	50,596
Subtotal			13,046,821
Passed through U.S. Forest Service			
Cooperative Forestry Assistance	10.664	Kern (County 15)	8,132
<i>Total U.S. Department of Agriculture</i>			15,261,966
<u>U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT</u>			
Direct Programs			
Community Development Block Grants (CDBG)/Entitlement Grants	14.218	Kern (County 15)	8,233,553
Emergency Shelter Grants Program	14.231	Kern (County 15)	191,709
Supportive Housing Program	14.235	CA0606B9D041104/CA1007B9D041101	53,491
Home Investment Partnerships Program	14.239	Kern (County 15)	1,077,467
Homelessness Preventing and Rapid Re-Housing Program	14.257	Kern (County 15)	284,985
Passed through California Department of Public Health			
Housing Opportunities for Persons with AIDS	14.241	10-10134	358,292
<i>Total U.S. Department of Housing and Urban Development</i>			10,199,497

(Continued)

* Major Program

See Accompanying Notes to Schedule of Expenditures of Federal Awards.

COUNTY OF KERN, CALIFORNIA
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS (Continued)
FOR THE YEAR ENDED JUNE 30, 2013

FEDERAL GRANTOR/PASS-THROUGH GRANTOR/PROGRAM TITLE	Federal CFDA Number	Supplemental Identifying Number	Total Expenditures
<u>U.S. DEPARTMENT OF JUSTICE</u>			
Direct Programs			
Joint Law Enforcement Operations	16.111	Kern (County 15)	38,864
Public Safety Partnership and Community Policing Grants	16.710	Kern (County 15)	2,465,341
Forensic DNA	16.741	2011-DN-BX-K440	99,122
Edward Byrne Memorial Justice Assistance Grant Program (Target Gang)	16.738	2012-DJ-BX-0264, 2011-DJ-BX-2107	150,060
ARRA - Edward Byrne Memorial Justice Assistance Grant Program	16.804	2009-SB-B9-0538	103,019
Passed through California Emergency Management Agency (CalEMA) ARRA - Edward Byrne Memorial Justice Assistance Grant Program	16.804	Z0009010150	20,653
Subtotal - JAG Program Cluster			273,732
Passed through California Corrections Standards Authority Juvenile Accountability Block Grants	16.523	Kern (County 15)	70,809
Passed through California Emergency Management Agency (CalEMA) Crime Victim Assistance	16.575	Kern (County 15)	214,166
Violence Against Women Formula Grants	16.588	2012-WF-AX-0051	289,164
Paul Coverdell Forensic Sciences Improvement Grant Program	16.742	2012-CD-BX-0043 & 2010-CD-BX-0011	31,703
Passed through Bureau of Justice Assistance Residential Substance Abuse for State Prisoners	16.593	AF11010150	67,324
<i>Total U.S. Department of Justice</i>			3,550,225
<u>U.S. DEPARTMENT OF LABOR</u>			
Direct Programs			
National Farmworker Jobs Program	17.264	AC21976FU/AC21976JV	2,620,286
Passed through Stanislaus County Program of Competitive Grants for Worker Training and Placement in High Growth and Emerging Industry Sectors	17.275	K074178	127,025
Passed through California Department of Employment Development Workforce Investment Act (WIA) Adult Program	17.258	K282476/K386298/K178661/K074142	3,784,567
WIA Youth Activities	17.259	K178661, K282476	4,669,028
WIA Dislocated Workers	17.278	K282476, K074142	570,671
WIA Dislocated Workers	17.278	K178661, K282476, K386298	3,195,840
Passed through Central Valley Back to Work #901 WIA Dislocated Workers	17.278	Kern (County 15)	104,179
Passed through La Cooperativa Campesina de California WIA Dislocated Workers	17.278	R972231	400,618
Passed through City of Southbay WIA Dislocated Workers	17.278	11-W110	59,665
Passed through Tulare County WIA Dislocated Workers	17.278	K074142	128,307
Subtotal			4,459,280
Subtotal - WIA Cluster			12,912,875
<i>Total U.S. Department of Labor</i>			15,660,186

(Continued)

* Major Program

See Accompanying Notes to Schedule of Expenditures of Federal Awards.

COUNTY OF KERN, CALIFORNIA
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS (Continued)
FOR THE YEAR ENDED JUNE 30, 2013

FEDERAL GRANTOR/PASS-THROUGH GRANTOR/PROGRAM TITLE	Federal CFDA Number	Supplemental Identifying Number	Total Expenditures
<u>U.S. DEPARTMENT OF TRANSPORTATION</u>			
Direct Programs			
Airport Improvement Program	20.106	Kern (County 15)	<u>2,960,764</u>
Passed through California Department of Transportation Highway Planning and Construction	20.205	06-5950R	<u>6,758,852</u>
Formula Grants for Other Than Urbanized Areas	20.509	Kern (County 15)	<u>1,334,736</u>
Passed through California Office of Traffic Safety			
State and Community Highway Safety	20.600	18X92044100CA12 & 18X95204100CA11	<u>813,724</u>
Minimum Penalties for Repeat Offenders for Driving While Intoxicated	20.608	Kern (County 15)	<u>127,192</u>
<i>Total U.S. Department of Transportation</i>			<u>11,995,268</u>
<u>U.S. NATIONAL ENDOWMENT FOR THE HUMANITIES</u>			
Direct Programs			
Grants to States	45.310	40-7774	<u>5,554</u>
<i>Total U.S. National Endowment for the Humanities</i>			<u>5,554</u>
<u>U.S. DEPARTMENT OF EDUCATION</u>			
Passed through California Department of Rehabilitation Rehabilitation Services - Vocational Rehabilitation Grants to States	84.126	27818	<u>294,305</u>
<i>Total U.S. Department of Education</i>			<u>294,305</u>
<u>U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES</u>			
Passed through California Department of Aging			
Title VII, Chapter 3 - Programs for Prevention of Elder Abuse, Neglect, and Exploitation	93.041	AP-1213-33	<u>10,300</u>
Title VII, Chapter 2 - Long-Term Care Ombudsman Services for Older Individuals	93.042	AP-1213-33	<u>34,656</u>
Title III, Part D - Disease Prevention and Health Promotion Services	93.043	AP-1213-33	<u>25,693</u>
National Family Caregiver Support, Title III, Part E	93.052	AP-1213-33	<u>300,530</u>
Special Programs for the Aging_ Title IV_ and Title II_ Discretionary	93.048	90MP0020	<u>4,000</u>
Title III, Part B - Grants for Supportive Services and Senior Centers	93.044	AP-1213-33	291,439
Title III, Part C - Nutrition Services	93.045	AP-1213-33	1,563,200
Nutrition Services Incentive Program	93.053	AP-1213-33	<u>286,609</u>
Subtotal - Aging Cluster			<u>2,141,248</u>
Centers for Medicare and Medicaid Services Research, Demonstrations, and Evaluations	93.779	HI-1213-33	<u>109,225</u>
Passed through California Department of Public Health Public Health Emergency Preparedness	93.074	EPO CDC 11-16	<u>1,139,022</u>

(Continued)

* Major Program

See Accompanying Notes to Schedule of Expenditures of Federal Awards.

COUNTY OF KERN, CALIFORNIA
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS (Continued)
FOR THE YEAR ENDED JUNE 30, 2013

FEDERAL GRANTOR/PASS-THROUGH GRANTOR/PROGRAM TITLE	Federal CFDA Number	Supplemental Identifying Number	Total Expenditures
<u>U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (Continued)</u>			
Passed through California Department of Public Health (Continued)			
Project Grants and Cooperative Agreements for Tuberculosis Control	93.116	Kern (County 15)	<u>119,924</u>
Immunization Project	93.268	11-10572	<u>403,419</u>
Affordable Care Act (ACA) Maternal, Infant, and Early Childhood Home Visiting Program	93.505	201215	<u>903,381</u>
State Planning and Establishment Grants for the Affordable Care Act's (ACA) Exchange	93.525	Kern (County 15)	<u>10,530</u>
National Bioterrorism Hospital Preparedness Program	93.889	EMS-1154	<u>82,496</u>
HIV Care Formula Grants	93.917	10-95262	<u>533,505</u>
Grants to Provide Outpatient Early Intervention Services with Respect to HIV Disease	93.918	10-95262	<u>25,396</u>
Preventive Health Services - Sexually Transmitted Diseases Control	93.977	11-10039	<u>53,927</u>
Maternal and Child Health Services Block Grant to the States	93.994	2012-15	<u>324,644</u>
PPHF 2012 - Prevention and Public Health Fund (Affordable Care Act)	93.539	11-10764	<u>289,274</u>
HIV Prevention Activities_Health Department Based	93.940	10-95262	<u>232,487</u>
Passed through Department of Health Services Food and Drug Administration Food and Drug Administration Research	93.103	1U18FD004680-01	<u>69,961</u>
Passed through California Centers for Disease Control Community Transformation Grants and National Dissemination and Support for Community Transformation Grants	93.531	1U58DP003616-01	<u>303,652</u>
Passed through California Department of Mental Health Projects for Assistance in Transition from Homelessness	93.150	1946001347J5	<u>216,177</u>
Block Grants for Community Mental Health Services	93.958	1946001347J5	<u>996,200</u>
Passed through California Department of Social Services Guardianship Assistance	93.090	Kern (County 15)	<u>1,382,979</u>
Promoting Safe and Stable Families	93.556	Kern (County 15)	<u>948,928</u>
Temporary Assistance for Needy Families (TANF)	93.558 *	Kern (County 15)	<u>99,560,350</u>
Family Support Payments to States - Assistance Payments	93.560	Kern (County 15)	<u>1,447,772</u>
Refugee and Entrant Assistance - State Administered Programs	93.566	Kern (County 15)	<u>21,758</u>
Passed through Department of Health and Human Services Low-Income Home Energy Assistance	93.568	Kern (County 15)	<u>7,007</u>
Community-Based Child Abuse Prevention Grants	93.590	Kern (County 15)	<u>46,220</u>

(Continued)

* Major Program

See Accompanying Notes to Schedule of Expenditures of Federal Awards.

COUNTY OF KERN, CALIFORNIA
SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS (Continued)
FOR THE YEAR ENDED JUNE 30, 2013

FEDERAL GRANTOR/PASS-THROUGH GRANTOR/PROGRAM TITLE	Federal CFDA Number	Supplemental Identifying Number	Total Expenditures
<u>U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (Continued)</u>			
Passed through Department of Health and Human Services (Continued) Stephanie Tubbs Jones Child Welfare Services Program	93.645	Kern (County 15)	<u>956,682</u>
Foster Care - Title IV-E	93.658	Kern (County 15)	<u>32,728,468</u>
Adoption Assistance	93.659	Kern (County 15)	<u>13,376,849</u>
Social Services Block Grant	93.667 *	Kern (County 15)	<u>5,474,800</u>
Chafee Foster Care Independence Program	93.674	Kern (County 15)	<u>310,446</u>
Passed through California Department of Child Support Services Child Support Enforcement	93.563	Kern (County 15)	<u>14,262,025</u>
Passed through California Department of Health Care Services Children's Health Insurance Program	93.767	Kern (County 15)	<u>83</u>
Passed through California Department of Alcohol and Drug Programs Block Grants for Prevention and Treatment of Substance Abuse	93.959 *	2B08TI010005-13	<u>4,336,431</u>
Passed through California Department of Human Services Medical Assistance Program	93.778	Kern (County 15)	16,253,414
Passed through California Department of Health Care Services Medical Assistance Program	93.778	Kern (County 15)	1,064,346
Passed through California Department of Public Health Medical Assistance Program	93.778	09-86014, 11-10305, 2012-15	<u>998,984</u>
Subtotal Medical Assistance Program			<u>18,316,744</u>
<i>Total U.S. Department of Health and Human Services</i>			<u>201,507,189</u>
<u>U.S. EXECUTIVE OFFICE OF THE PRESIDENT</u>			
Direct Programs High Intensity Drug Trafficking Areas Program	95.001	Kern (County 15)	<u>372,611</u>
<i>Total U.S. Executive Office of the President</i>			<u>372,611</u>
<u>U.S. DEPARTMENT OF HOMELAND SECURITY</u>			
Direct Programs Staffing for Adequate Fire and Emergency Response (SAFER)	97.083	Kern (County 15)	<u>2,318,216</u>
Hazardous Materials Preparedness	97.093	Kern (County 15)	<u>22,386</u>
Passed through Federal Emergency Management Agency Fire Management Assistance Grant	97.046	2970	<u>91,251</u>
Passed through California Emergency Management Agency (CalEMA) Emergency Management Performance Grants	97.042	CalEMA ID #029-00000	<u>373,656</u>
Federal Disaster Assistance to Individuals and Households in Presidential Declared Disaster Areas	97.048	Kern (County 15)	<u>32,794</u>
Metropolitan Medical Response System	97.071	CalEMA ID #029-00000	<u>302,138</u>
State Homeland Security Program	97.073	CalEMA ID #029-00000	<u>190,421</u>
Buffer Zone Protection Program	97.078	CalEMA ID #029-00000	<u>120,593</u>
<i>Total U.S. Department of Homeland Security</i>			<u>3,451,455</u>
TOTAL FEDERAL AWARDS EXPENDED			<u>\$ 262,298,256</u>

* Major Program

See Accompanying Notes to Schedule of Expenditures of Federal Awards.

**COUNTY OF KERN, CALIFORNIA
NOTES TO SCHEDULE OF EXPENDITURES OF FEDERAL AWARDS
FOR THE YEAR ENDED JUNE 30, 2013**

NOTE 1 – GENERAL

The accompanying Schedule of Expenditures of Federal Awards presents the activity of all Federal financial assistance programs of the County of Kern, California. The County of Kern's (the County) reporting entity is defined as follows: the County is presented as the primary government and its component units, as required by Governmental Accounting Standards Board Statement No. 61. A component unit is a legally separate organization which is financially accountable to the primary government. Blended component units are, in substance, part of the County's operations so data from these units are combined with data of the County. Management has determined that the following components should be blended: County Service Areas, Golf Courses, Sanitation Districts, Kern Asset Leasing Corporation, Kern County Tobacco Funding Corporation, and Kern Public Services Financing Authority. Each blended component unit has a June 30 year-end. Management has also determined that the following component units should be discretely presented: First 5 Kern, Housing Authority of the County of Kern, and Tejon Ranch Public Facilities Financing Authority. All Federal financial assistance received directly from Federal agencies as well as Federal financial assistance passed through other government agencies are included in the schedule.

NOTE 2 – BASIS OF ACCOUNTING

Consistent with the County's method of filing Federal financial reports, the accompanying Schedule of Expenditures of Federal Awards is presented using the cash basis of accounting. Differences, if any, between the schedule and the general purpose financial statements (presented on a modified accrual basis of accounting) are not material.

NOTE 3 – RELATIONSHIP TO FEDERAL FINANCIAL REPORTS

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

NOTE 4 – DISCLOSURE FOR CALIFORNIA EMERGENCY MANAGEMENT AGENCY (CalEMA), CALIFORNIA CORRECTIONS STANDARDS AUTHORITY, CALIFORNIA OFFICE OF TRAFFIC SAFETY, AND DEPARTMENT OF JUSTICE GRANTS

The following is the detail of total revenues and expenditures, including all Federal, state, and local funding sources, related to County of Kern CalEMA, California Corrections Standards Authority, and California Office of Traffic Safety and Department of Justice Grants:

Grant Award Number	Program Description	Audit Period	Grant Period	Personnel Services	Operating Expense	Equipment	Total Allowable Expenditures	Total Revenue Earned
VB08060150	Vertical Prosecution Block Grant Program	7/1/2012 - 6/30/2013	7/1/2008 - 6/30/2013	\$ 1,037,854	\$ 20,667	\$ -	\$ 1,058,521	\$ 1,058,521
MH08080150	California Multi-Jurisdictional Methamphetamine Enforcement Team (CAL-MMET)	7/1/2012 - 6/30/2013	8/1/2008 - 6/30/2013	2,199,242	464,291	102,608	2,766,141	2,766,141
RU08100150	Central Valley Rural Crime Prevention Program	7/1/2012 - 6/30/2013	7/1/2008 - 6/30/2013	1,188,475	27,644	-	1,216,119	1,216,119
BSCC 135-12	Juvenile Accountability Block Grants Program: Graffiti Intervention Program	7/1/2012 - 6/30/2013	7/1/2012 - 6/30/2013	78,677	-	-	78,677	78,677
PU12030150	Probation Special Units Program - Violence Against Women	10/1/2012 - 6/30/2013	10/1/2012 - 9/30/2013	128,632	-	-	128,632	128,632
VV12040150	Violence Against Women Vertical Prosecution Program	7/1/2012 - 6/30/2013	7/1/2012 - 6/30/2013	208,024	37,627	-	245,651	245,651
2012-DJ-BX-0264	Edward Byrne Memorial Justice Assistance Grant (JAG) Program	7/1/2012 - 6/30/2013	10/1/2011 - 9/30/2015	150,060	-	-	150,060	150,060
AL1349	Intensive Probation Supervision for High-Risk Felony and Repeat DUI Offenders	11/15/2012 - 6/30/2013	11/15/2012 - 9/30/2013	91,319	-	-	91,319	91,319
AL1355	Alcohol and Drug Impaired Driver Vertical Prosecution Program	10/1/2012 - 9/30/2013	10/1/2010 - 9/30/2013	293,815	-	-	293,815	293,815
CQ10070150	Paul Coverdell National Forensic Sciences Improvement Program (Coverdell 10 Program)	7/1/2012 - 8/31/2012	10/1/2010 - 8/31/2012	82,423	2,304	122,146	206,873	206,873
VW12300150	Victim Witness Assistance Program	7/1/2012 - 6/30/2013	7/1/2011 - 6/30/2012	245,986	213,827	730	460,543	460,543
BSCC 635-12	Anti-Drug Abuse (ADA) Enforcement Team Program	10/1/2012 - 6/30/2013	3/1/2010 - 9/30/2012	179,138	53,909	-	233,047	233,047
20044	Lab Enhances Services in the Battle Against DUI and DUID Drivers	7/1/2012 - 9/30/2012	10/1/2011 - 9/30/2012	-	49,930	393,014	442,944	442,944
20085	Kern County Impaired/Drug Driving Impact Prosecution Program (KIDDIP)	7/1/2012 - 9/30/2012	10/1/2011 - 9/30/2012	362,183	4,155	-	366,338	366,338

NOTE 5 – DEPARTMENT OF AGING FEDERAL/STATE SHARE

Beginning with the fiscal year ended June 30, 2005, the California Department of Aging (CDA) required agencies that receive CDA funding to display State-funded expenditures discreetly along with Federal expenditures. The County expended the following State and Federal amounts under these grants:

<u>Program</u>	<u>CFDA #</u>	<u>Federal Expenditures</u>	<u>State Expenditures</u>
Source: California Department of Aging			
Special Programs for the Aging-Title VII-B Elder Abuse, Neglect, and Exploitation Prevention	93.041	\$ 10,300	\$ -
Special Programs for the Aging-Title VII-A Long-Term Care Ombudsman Services	93.042	34,656	-
Special Programs for the Aging-Title III-D Disease Prevention	93.043	25,693	-
Special Programs for the Aging-Title III-B Supportive Services	93.044	291,439	-
Special Programs for the Aging-Title III-C Senior Nutritional Services	93.045	1,563,200	99,500
Special Programs for the Aging-Title III-E Caregiver Support	93.052	300,530	-
Nutrition Services Incentive Program	93.053	286,609	-
Health Insurance Counseling and Advocacy Program	93.779	109,225	177,084
Long-Term Care Ombudsman Special Deposit Fund (SDF)	N/A	-	17,911
Long-Term Care Ombudsman Skilled Nursing Facility Quality & Accountability Fund (SNF)	N/A	-	32,961
Health Care Fraud Prevention, Opportunity (CHA)	93.048	4,000	-
Source: California Department of Human Services			
Medical Assistance Program (5610)	93.778	2,900,683	2,484,994
Medical Assistance Program (9147)	93.778	1,419,331	1,067,439
	Totals	<u>\$ 6,945,666</u>	<u>\$ 3,879,889</u>

NOTE 6 – PASSENGER FACILITY CHARGE (PFC) SCHEDULE OF REVENUES AND EXPENDITURES

In accordance with the “Passenger Facility Charge Audit Compliance and Reporting Guide for Public Agencies,” issued by the Federal Aviation Administration (FAA), the audit of the Passenger Facility Charge (PFC) program of the County of Kern Airport has been conducted in conjunction with the Federal single audit of the County’s Airport Improvement Program (CFDA No. 20.106). The following is a detailed schedule of PFC revenues and expenditures:

Revenues:		Amount Approved	Cumulative Total - June 30, 2012	September 30, 2012	December 31, 2012	March 31, 2013	June 30, 2013	Year Ended June 30, 2013	Cumulative Total - June 30, 2013
Passenger facility charge revenue received			\$ 5,874,319	\$ 110,977	\$ 168,751	\$ 155,419	\$ 150,712	\$ 585,859	\$ 6,460,178
Interest earned			<u>215,273</u>	<u>708</u>	<u>198</u>	<u>257</u>	<u>431</u>	<u>1,594</u>	<u>216,867</u>
Total passenger facility charge revenue received			6,089,592	111,685	168,949	155,676	151,143	587,453	6,677,045
Expenditures:									
Application 01-03-C-00-BFL	March 16, 2001								
Project 1	Land Acquisition of Airport Expansion	\$ -	317,000	***	-	-	-	-	317,000
Project 2	New Passenger Terminal	-	<u>9,086,000</u>	***	-	-	-	-	<u>9,086,000</u>
Total passenger facility charge revenue expended			<u>9,403,000</u>	-	-	-	-	-	<u>9,403,000</u>
PFC Expenditures (Over) / Under Revenues			<u>\$ (3,313,408)</u>	<u>\$ 111,685</u>	<u>\$ 168,949</u>	<u>\$ 155,676</u>	<u>\$ 151,143</u>	<u>\$ 587,453</u>	<u>\$ (2,725,955)</u>

*** Total allowable PFC expenditures for Application 01-03-C-00-BFL are \$9,403,000. Per FAA's recommendation, total construction costs of \$9,403,000 for these projects were recognized as PFC expenditures when the costs were incurred in prior years. Therefore, no additional PFC expenditures were recognized in the current year.

FINDINGS AND QUESTIONED COSTS

**COUNTY OF KERN, CALIFORNIA
SCHEDULE OF FINDINGS AND QUESTIONED COSTS
THE YEAR ENDED JUNE 30, 2013**

FINANCIAL STATEMENTS

Type of auditor's report issued:	Unmodified
Internal control over financial reporting:	
Material weaknesses identified?	Yes
Significant deficiencies identified not considered to be material weaknesses?	No
Noncompliance material to financial statements noted?	No

FEDERAL AWARDS

Internal control over major programs:	
Material weaknesses identified?	No
Significant deficiencies identified not considered to be material weaknesses?	No
Type of auditor's report issued on compliance for major programs:	Unmodified
Any audit findings disclosed that are required to be reported in accordance with OMB Circular A-133, Section .510(a)?	Yes
Identification of major programs:	

No.	CFDA Number	Program
1	93.558	Temporary Assistance for Needy Families (TANF)
2	93.667	Social Services Block Grant
3	93.959	Block Grants for Prevention and Treatment of Substance Abuse

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

Findings Relating to Financial Statements Required Under Generally Accepted Government Auditing Standards

Finding 2013-01

Condition

During the payroll testing of 40 samples at Kern Medical Center (the Medical Center), one of the County's major enterprise funds, we noted three deviations as follows: one employee had overtime that was not approved, one employee's rate per hour was not properly supported or approved, and one employee's hours were charged to the incorrect category.

Recommendation

We recommend that the Kern Medical Center (the Medical Center) build additional controls into the time card system to prevent errors, and provide additional training to employees to identify and resolve potential errors as noted in the prior year.

Management Response

The Medical Center would like to respond to each deviation with an explanation of the cause and corrective measures that will be taken to minimize payroll errors.

Deviation 1, Employee Overtime Not Approved: Currently, the Medical Center has an electronic time-clock system that involves employees having to badge in and out to record time worked. Managers then review and approve the time recorded by each employee. As such, Managers are approving employee's time which includes the overtime recorded as well. The Medical Center believes the finding was due to a pharmacy consultation call, which should have been charged to on call pay and is not part of the electronic time system.

Deviation 2, Incorrect Hourly Rate: As part of the control procedure, hourly rates adjustments, such as payroll increases due to a step increase, are adjusted by the Human Resources Department, while the processing of the payroll is performed through General Accounting Department. The Medical Center believes that the deviation was due a change to an employee's hourly rate not being adjusted in-time to correspond with the processing of payroll. The Medical Center will communicate with Human Resources to process rate changes prior to the payroll being processes.

Deviation 3, Incorrect Hours Charged to Wrong Category: The error was due to payroll staff misunderstanding shift hours assigned for employee. The employee in question was assigned to work a 12 hour shift, while the payroll clerk believed the employee was assigned an 8 hour shift. In addition, the employee was also assigned to work an evening or late shift which allowed the employee to be paid a shift differential. The payroll clerk incorrectly adjusted the employee's time to pay for 8 hours regular with shift differential and 4 hours straight time with no shift differential. However, the employee should have been paid 12 hours straight with all 12 hours paid with shift differential. The payroll clerk was made aware of error and corrected the error in the subsequent pay-period. The payroll clerk has been made of aware of the rule and is following the payroll rule going forward

Finding 2013-02

Condition

During the inventory observation for the Operating Room at the Medical Center, we noted five exceptions out of the 40 items tested. During our inventory observation for the Pharmacy, we noted five exceptions out of the 30 items tested. The count performed by third party (RGIS) was not accurate (under and overstatements in inventory quantities were noted during our counting).

Recommendation

We recommend that the Medical Center educate and communicate with its consultant on inventory counting procedure, so they will produce accurate count sheets. A listing of the exceptions noted by the internal and external auditors should be kept and compared to the final listing before distributing the final listing of inventory. We also recommend more adequate policies and procedures be implemented to increase integrity when taking items from the operating storage room.

Management Response

For the Operating Room (OR) inventory, the Medical Center did not use an outside vendor to conduct the count of the inventory. Due to the errors and finding that resulted from 2012 inventory count in the OR, the Medical Center instead relied on internal staff assigned to the OR to conduct the count. The Medical Center was able to dramatically improve the inventory count for the OR for 2013.

For all inventories, the Medical Center will continue to find ways to improve the process of the annual inventory counts. The Medical Center agrees and will make sure all inventory count procedures are communicated to and understood by RGIS if used in the future.

Finding 2013-03

Condition

The Medical Center implemented a new system called Open Vista, which was implemented on May 10, 2011, at the department level, so doctors could electronically order/prescribe drugs to patients. Open Vista was synched to the STAR system (the general ledger system for the Medical Center) so that the billings department could send a bill for the drugs recorded in STAR. The implementation of Open Vista was a four stage process, and stage four was not implemented correctly at the pharmacy department. This resulted in an Information Technology (IT) glitch in the Open Vista system in which some billings were not synching over into the STAR system and were either billed manually or not included on the claim. This results in an understatement of accounts receivable/revenue in the amount of \$925,341, \$5,053,733, and \$2,840,785 for the years 2011, 2012, and 2013 respectively. Management determined the collectability to be very minimal, and as such, were 100% written off. As such, the net impact to the financials for all three years is zero.

Recommendation

We recommend that the Medical Center test new IT implementations extensively as soon as they are implemented to verify that the program has been implemented properly. There should be oversight from management over the IT department to check on the status of the IT project implementations.

Management Response

The Medical Center agrees to the finding and has identified the accounts that were not able to crossover from Electronic Medical System (Open Vista) to Patient/Financial System (STAR). The issue involved accounts that required a renewing order. The Open Vista System would leave the patient account order blank on renewing orders. These accounts did not cross-over from Electronic Medical Record (EMR) System to the Patient/Financial System to record the charge and eventual drop a bill. The Medical Center has taken corrective action by educating the pharmacy staff to reselect the patient account number, and the Pharmacy Manger is developing a daily fail bill report to identify those accounts that fail to cross-over. the Medical Center has identified the missing charges and a pharmacy technician has been trained to back bill the missing charge items A process has been put in place to to review a failed bill report several times weekly to minimize the time delay in submitting correct charges. The Medical Center is currently under evaluation of new solutions for a comprehensive fully integrated electronic medical record and patient billing system.

Finding 2013-04

Condition

The Medical Center utilized McKesson Corporation to outsource its patient billing. As this is a major service provider, we obtained the latest SSAE 16 SOC 1 which was dated September 30, 2012. The SOC 1 report did not cover the period under audit for the remaining fiscal year of October 1, 2012, through June 30, 2013. We asked for a bridge letter to cover that audit period and management was unable to produce this letter after several attempts to obtain the letter from McKesson Corporation.

Recommendation

We recommend that the Medical Center obtain the SOC 1 report and/or bridge letter for this service provider to cover the entire fiscal year so that management is aware that the controls are properly designed and operating effectively for the fiscal year.

Management Response

The Medical Center did make attempts to obtain the report from our vendor. Per vendor, the bridge letter would not be available until after January 2014. The Medical Center was able to obtain bridge letter as of January 31, 2014.

Finding 2012-05

Condition

During the testing of fully depreciated capital asset at the Medical Center, we noted one missing computer server originally valued at \$332,090. The computer server was purchased and placed into service in June 2004. The capital asset listed did not exist on the Medical Center's general ledger. Physical capital assets were disposed of without General Accounting's knowledge. Old items were traded in or sold and General Accounting did not write it off in the general ledger.

Recommendation

We recommend that the Medical Center write off the balance from general ledger and to perform a full review of capital assets inventory every three years for the County of Kern's policies and procedures. Next fiscal year-end will be the required review for the Medical Center and as such, we recommend that during the three year review gap, the Medical Center's management should ask the department to follow the proper County of Kern policies and procedures to do an annual capital asset inventory check.

Management Response

The Medical Center has written-off the server from the General Ledger, and the change is reflected in the Financial Statements for fiscal year ending 2013. The Medical Center will review current process of capital asset inventory for any improvements. The Medical Center will also share the finding with Department Managers and educate Managers on proper capital asset disposal procedures.

Finding 2013-06

Condition

Several state receivables and related revenue at the Medical Center were not properly booked or properly supported in 2013. The state revenue that was not recorded in the current year were recorded as follows: Managed Care IGT-SPD in the amount of \$2,351,036, DSRIP in the amount of \$846,225, Managed Care IGT-Rate Range in the amount of \$1,219,833, and MD SPA in the amount of \$1,986,580 for a total of \$6,403,674 understatement of state revenue and receivables. These balances were not recorded as there is a lack of reconciliation of the revenue and receivables by the different revenue streams. Additionally, the state revenue and related receivables that were overstated are as follows: Coverage Initiative – Low Income Health Plan (CI_LIHP) was improperly overstated based on an overstatement of the estimated administrative costs the Medical Center would receive in the amount of \$3,747,333, Other Receivables and Medi-CAL EMR in the amount of \$3,348,351 could not be supported and was reversed, and Outpatient Hospital Supplement Reimbursement (AB915) was overstated by \$3,000,000 as the current year estimate was not trued up to estimate what was actually going to be paid out in 2014 based on updated information for the 2013 actual. Additionally, DHS finished its audit of finalized its billing in November 2013 related to utilization of Out of Network Emergency Managed Care Expansion (SB335) fees and sent the Medical Center an invoice for \$1,512,514 owed back to DHS. The Medical Center reduced the revenue and booked a related payable to DHS.

Recommendation

We recommend that management separately track each type of revenue stream for each year of revenue with separate general ledger accounts and in a rollforward schedule such that management will be able to properly apply the appropriate accounts receivable accounts when cash is received. Additionally, management should true up the accounts receivable accounts for cash received against the receivable balance to zero out the receivable balance related to that payment. We recommend that management update their estimated revenue and receivables based on the updated formulas and waiver models throughout the year for changes in operations. We recommend that management also update the budget throughout the year based on the updated estimates of future payments.

Management Response

The Medical Center agrees with the finding and recommendations, except for liability for SB335 in the amount of \$1,512,514 dollars. The Medical Center became aware of the liability after being noticed by DHS in November 2013, and since the financials for 2013 were not issued, the Medical Center reported the liability as a subsequent event and recommended it be part of a post-closing entry. However, the Medical Center contracted with a consulting firm, as of July 2013, that specializes with reviewing and preparing the cost reports that determine the Indigent Funding from the State. Along with helping to review the cost reports, the consulting firm is also engaged to help train current staff on how to implement proper procedures to maintain adequate records of Indigent Funding programs, and how to understand funding models from the State and other resources and review periodically the accuracy of the revenue and associated reserves recorded in the books and records. They are also engaged to file corrected cost reports that might be required based on the final audit adjustments. Currently, the Medical Center has created separate receivables accounts for each funding source, and developed mid-year reviews of current receivables to compare to any revised estimates from State. This would allow the Medical Center to revise projections and to timely report on any changes in funding models.

Findings and Questioned Costs for Federal Awards

Finding 2013-07

Program: Block Grant for Prevention and Treatment of Substantive Abuse
CFDA No.: 93.959
Federal Agency: U.S Department of Health and Human Services
Passed Through: State of California Department of Alcohol and Drug Programs
Award Year: Fiscal Year 2012-13
Compliance Requirement: Subrecipient Monitoring
Questioned Costs: None

Criteria:

The March 2013 OMB Circular A-133 *Compliance Supplement* requires for Subrecipient Monitoring that the pass-through entity perform the monitoring procedures prescribed in OMB Circular A-133.

Condition:

We performed subrecipient monitoring procedures by haphazardly selecting a sample of 6 subrecipients out of 16 for testing. Per all the contracts over \$500,000, the Contractor is required to submit an independent audit report of its financial statements no later than nine (9) months after the close of the Contractor's fiscal year. The audit report shall be performed by a Certified Public Accountant licensed by the State of California. The independent audit shall be conducted in conformity with Public Law 98-502, the federal Single Audit Act of 1984, the Single Audit Act Amendments of 1996, OMB Circular A – 133, 2 CFR Parts 215, 220, 225 and 230, and CFR 48 subpart 31.2, the American Institute of Certified Public Accountants, and *Government Auditing Standards*, as applicable. The Schedule of Functional Expenses shall include a breakout of all Department expenses with each program identified separately. Contractor shall provide a Supplemental Schedule to the Statement of Functional Expenses that breaks out all department expenses for each program. If the complete audit report is not submitted to the County by the due date, the County may exercise the option to withhold payments from Contractor until such time as the audit report has been provided. For the 3 contracts over \$500,000 selected for testing, the Mental Health Department did not receive the audit report within the 9 months after the close of the Contractor's fiscal year. The Mental Health Department closely monitored this requirement by sending a submission deadline reminder and late notices if the audit report has not been turned in timely, but was unable to obtain the audit reports in a timely manner.

Context:

The condition noted above was identified during our examination of the County's compliance with subrecipient monitoring.

Effect:

The subrecipient may not be adhering to the agreement entered between the County and the subrecipients.

Cause:

For the 3 contracts over \$500,000 selected for testing, the Mental Health Department did not receive the audit report within a timely manner.

Recommendation

We recommend that the Mental Health Department ensure that all audit reports are completed and received by the Mental Health Department within the 9 months after the close of the Contractor's fiscal year. We also recommend that the Mental Health Department enforce the penalties if the audited financial statement passing the deadlines.

Views of Responsible Officials and Planned Corrective Actions:

Management concurs with the findings and recommendations.

Contact Information of Responsible Official:

Bill Walker, LMFT, Interim Director
Mental Health Department
Telephone: (661) 868-6609
Email: bwalker@co.kern.ca.us

**COUNTY OF KERN, CALIFORNIA
STATUS OF PRIOR YEAR FINDINGS AND QUESTIONED COSTS
THE YEAR ENDED JUNE 30, 2013**

Findings Relating to Financial Statements Required Under Generally Accepted Government Auditing Standards

None.

Findings and Questioned Costs for Federal Awards

None.