

Report on Federal and State Awards

December 31, 2021

Lafayette County
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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

Independent Auditors' Report

To the Finance Committee and Board of Supervisors of Lafayette County

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, each major fund and the aggregate remaining fund information of Lafayette County (the Organization), as of and for the year ended December 31, 2021, and the related notes to the financial statements, which collectively comprise the Organization's basic financial statements, and have issued our report thereon dated September 21, 2022. Our report includes a reference to other auditors who audited the financial statements of Memorial Hospital of Lafayette County, a major enterprise fund of Lafayette County, as described in our report on the Organization's financial statements. This report does not include the results of the other auditors' testing of internal control over financial reporting or compliance and other matters that are reported on separately by those auditors.

Report on Internal Control Over Financial Reporting

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

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

Our consideration of internal control was for the limited purpose described in the first paragraph of this section and was not designed to identify all deficiencies in internal control that might be material weaknesses or significant deficiencies and therefore, material weaknesses or significant deficiencies may exist that have not been identified. We identified a certain deficiency in internal control, described in the accompanying schedule of findings and questioned costs as item 2021-001, that we consider to be a material weakness.

Report on Compliance and Other Matters

As part of obtaining reasonable assurance about whether the Organization'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*.

The Organization's Response to Finding

Baker Tilly US, LLP

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

Purpose of This Report

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

Madison, Wisconsin September 21, 2022



Report on Compliance for Each Major Federal and Major State Program; Report on Internal Control Over Compliance; and Report on the Schedule of Expenditures of Federal and State Awards Required by the Uniform Guidance and the State Single Audit Guidelines

Independent Auditors' Report

To the Finance Committee and Board of Supervisors of Lafayette County

Report on Compliance for Each Major Federal and Major State Program

Opinion on Each Major Federal and Major State Program

We have audited Lafayette County's (the Organization) compliance with the types of compliance requirements identified as subject to audit in the OMB *Compliance Supplement* and the *State Single Audit Guidelines* (the *Guidelines*) that could have a direct and material effect on each of the Organization's major federal and major state programs for the year ended December 31, 2021. The Organization's major federal and major state programs are identified in the summary of auditors' results section of the accompanying schedule of findings and guestioned costs.

In our opinion, the Organization complied, in all material respects, with the compliance requirements referred to above that could have a direct and material effect on each of its major federal and major state programs for the year ended December 31, 2021.

Basis for Opinion on Each Major Federal and Major State Program

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

We are required to be independent of the Organization 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 basis for our opinion on compliance for each major federal and major state program. Our audit does not provide a legal determination of the Organization'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 controls over compliance with the requirements of laws, statutes, regulations, rules and provisions of contracts or grant agreements applicable to the Organization's federal and state programs.

Auditors' 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 Organization'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 Guidelines 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 Organization's compliance with the requirements of each major federal and major state program as a whole.

In performing an audit in accordance with GAAS, *Government Auditing Standards*, the Uniform Guidance, and the *Guidelines*, 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 Organization'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 Organization'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 the *Guidelines*, but not
 for the purpose of expressing an opinion on the effectiveness of the Organization'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 the *Guidelines* and which is described in the accompanying schedule of findings and questioned costs as item 2021-002. Our opinion on each major federal and major state program is not modified with respect to this matter.

Government Auditing Standards requires the auditor to perform limited procedures on the Organization's response to the noncompliance finding identified in our compliance audit described in the accompanying schedule of findings and questioned costs. The Organization'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 Auditors' 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. We did not identify any deficiencies in internal control over compliance that we consider to be material weaknesses. However, as discussed below, we did identify a certain deficiency in internal control over compliance that we consider to be a significant deficiency.

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 or state 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 or state 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 or state 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 deficiency in internal control over compliance described in the accompanying schedule of findings and questioned costs as item 2021-002, to be a significant deficiency.

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

The purpose of this report on internal control over compliance is solely to describe the scope of our testing of internal control over compliance and the results of that testing based on the requirements of the Uniform Guidance and the *Guidelines*. 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 Guidelines

We have audited the financial statements of the governmental activities, the business-type activities, each major fund and the aggregate remaining fund information of the Organization as of and for the year ended December 31, 2021, and the related notes to the financial statements, which collectively comprise the Organization's basic financial statements. We issued our report thereon dated September 21, 2022, 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. Our report includes a reference to other auditors who audited the financial statements of the Memorial Hospital of Lafayette County, a major enterprise fund of Lafayette County, as described in our report on Lafayette County's 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 Guidelines 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 basic 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.

Madison, Wisconsin September 21, 2022

Baker Tilly US, LLP

Grantor Agency / Program Title	Federal FAL Number	Pass- Through Agency	Pass- Through Agency ID	Expenditures
Federal Programs				
U.S. Department of Agriculture SNAP Cluster:		DUO	A1/A	. 00.070
State Administrative Matching Grants for the Supplemental Nutrition Assistance Program	10.561	DHS	N/A	\$ 96,873
Total SNAP Cluster				96,873
Total U.S. Department of Agriculture				96,873
U.S. Department of Justice COVID-19 Coronavirus Supplemental Funding Program	16.034	DOJ	N/A	151,448
Total U.S. Department of Justice				151,448
U.S. Department of Education Special Education-Grants for Infants and Families	84.181	DHS	CARS 550	18,167
Total U.S. Department of Education				18,167
U. S. Department of Health and Human Services Special Programs for the Aging, Title III, Part D, Disease Prevention and Health Promotion Services	93.043	GWAAR	560,510.000	1,988
Aging Cluster: Special Programs for the Aging, Title III, Part B, Grants for Supportive Services and Senior Centers	93.044	GWAAR	560,340.000	31,253
Subtotal				31,253
Total Aging Cluster				31,253
National Family Caregiver Support, Title III, Part E COVID-19 National Family Caregiver Support, Title III, Part E	93.052 93.052	GWAAR GWAAR	560,520.000 560,523.000	14,207 (283)
Subtotal				13,924
Public Health Emergency Preparedness	93.069	DHS	CARS 155015	18,914
Immunization Cooperative Agreements COVID-19 Immunization Supp 3 Cons	93.268 93.268	DHS DHS	CARS 155020 N/A	6,315 21,620
Subtotal				27,935
COVID-19 Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) COVID-19 Enhancing Detection	93.323 93.323	DHS DHS	CARS 155802 N/A	13,000 209,011
Subtotal				222,011
COVID-19 HRSA Uninsured Program	93.461	None	N/A	32,360
COVID-19 Promoting Safe and Stable Families Promoting Safe and Stable Families	93.556 93.556	DCF DCF	SPARC 2021 SPARC 2021	4,449 33,310
Subtotal				37,759
Temporary Assistance for Needy Families	93.558	DHS	CARS 561	39,287
Total TANF				39,287

Grantor Agency / Program Title	Federal FAL Number	Pass- Through Agency	Pass- Through Agency ID	Expenditures
Federal Programs				
Child Support Enforcement	93.563	DCF	SPARC 2021	\$ 141,572
CCDF Cluster: Child Care and Development Block Grant	93.575	DCF	SPARC 2021	25,221
Total CCDF Cluster				25,221
Stephanie Tubbs Jones Child Welfare Services Program	93.645	DCF	437-3413	9,146
Foster Care - Title IV-E COVID-19 Foster Care - Title IV-E	93.658 93.658	DCF DCF	437-3561 437-3561	215,710 1,755
Subtotal				217,465
Adoption Assistance	93.659	DCF	N/A	12,642
Social Services Block Grant	93.667	DHS	CARS 561	73,752
Subtotal				73,752
COVID-19 Testing for Rural Health Clinics COVID-19 Elder Abuse Prevention Interventions Program Children's Health Insurance Program	93.697 93.747 93.767	DHS DHS DHS	N/A N/A CARS 284	148,384 6,162 12,670
U.S. Department of Agriculture: Medicaid Cluster: Medicaid Assistance Program Medical Assistance Program Medical Assistance Program - CLTS Medical Assistance Program - WIMCR	93.778 93.778 93.779 93.778	DHS Green County DHS DHS	N/A N/A N/A N/A	134,791 192,383 95,031 18,090
Subtotal				440,295
Total Medicaid Cluster				440,295
COVID-19 Provider Relief Fund and American Rescue Plan (ARP) Rural Distribution COVID-19 Provider Relief Fund and American Rescue Plan (ARP) Rural Distribution - Infection Control	93.498 93.498	None None	N/A N/A	4,499,512 102,800
Subtotal				4,602,312
COVID-19 Testing and Mitigation for Rural Health Clinics	93.697	None	N/A	300,000
Block Grants for Community Mental Health Services	93.958	DHS	CARS 515, 569	12,459
Block Grants for Prevention and Treatment of Substance Abuse Block Grants for Prevention and Treatment of Substance Abuse	93.959 93.959	DHS DHS	CARS 545, 546, 570 CARS 533291	22,427 10,000
Subtotal				32,427
Preventive Health and Health Services Block Grant funded solely with Prevention and Public Health Funds (PPHF) Maternal and Child Health Services Block Grant to the States	93.991 93.994	DHS DHS	CARS 159220 CARS 159320	5,965 12,592
Total U.S. Department of Health and Human Services				6,478,495

LaFayette County
Schedule of Expenditures of Federal and State Awards
Year Ended December 31, 2021

	Grantor Agency / Program Title	Federal FAL Number	Pass- Through Agency	Pass- Through Agency ID	Expen	nditures
U. S. Department of Homeland Security Emergency Management Performance Grants		97.042	DMA	N/A	\$	144,209
Total U.S. Department of Homeland Security						144,209
Total federal programs					\$ 6,	,889,192

Grantor Agency / Program Title	State ID Number	Pass- Through Agency	Pass- Through Agency ID	Expenditures
State Programs				
Wisconsin Department of Agriculture, Trade and Consumer Protection				
County Staff and Support Land and Water Resource Management	115.150 115.400	N/A N/A	N/A N/A	\$ 15,250 154,180
Total Wisconsin Department of Agriculture, Trade and Consumer Protection				169,430
Wisconsin Department of Natural Resources				
Venison Processing	370.549	N/A	N/A	4,106
All Terrain Vehicle Enforcement	370.551	N/A	N/A	6,415
Wildlife Damage Abatement	370.553	N/A	N/A	8,717
County Conservation	370.563	N/A	N/A	2,000
Snowmobile Trail Aids	370.575	N/A	N/A	32,261
All-Terrain Vehicle Trails	370.576	N/A	N/A	26,533
Total Wisconsin Department of Natural Resources				80,032
Wisconsin Department of Transportation				
Elderly and Handicapped County Aids	395.101	N/A	N/A	79,889
Total Wisconsin Department of Transportation				79,889
Wisconsin Department of Health Services				
Comm Disease Ctrl & Prev	435.155800	N/A	N/A	6,400
IMAA State Share	435.283000	N/A	N/A	57,617
IMAA Federal Share	435.284000	N/A	N/A	1,617
APS-Adult Protective Services	435.312000	N/A	N/A	17,522
Children's COP	435.377000	N/A	N/A	15,424
Alzheimers Family Support	435.381000	N/A	N/A	6,004
Coordinated Services Team Initiative	435.515000	N/A	N/A	14,303
Community Mental Health	435.516000	N/A	N/A	16,299
Birth to Three Initiative	435.550000	N/A	N/A	20,869
Aging & Dis Resource Ctr	435.560100	Green County	N/A	207,006
Senior Community Svs Prog	435.560330	GWAAR	N/A	4,367
Basic County Allocation	435.561000	N/A	N/A	434,894
STATE/COUNTY MATCH	435.681000	N/A	N/A	60,191
CLTS Other GPR	435.871000	N/A	N/A	49,900
CLTS WAIVER CWA ADMIN GPR	435.877000	N/A	N/A	4,613
Total Wisconsin Department of Health Services				917,026
Wisconsin Department of Children and Families				
Food Stamp Agency Incentives	437.0965	N/A	N/A	3,696
Medicaid Agency Incentives	437.0980	N/A	N/A	2,895
CW Kinship Care Program - Benefits	437.3377A	N/A	N/A	20,188
CW Kinship Care Program - Benefits	437.3377B	N/A	N/A	37,943
CW Kinship Care Program - Assessment	437.3380A	N/A	N/A	3,099
CW Kinship Care Program - Assessment	437.3380B	N/A	N/A	935

See notes to schedules of expenditures of federal and state awards

LaFayette County
Schedule of Expenditures of Federal and State Awards
Year Ended December 31, 2021

		Pass-	Pass-	
Grantor Agency /	State ID	Through	Through	
Program Title	Number	Agency	Agency ID	Expenditures
State Programs				
JJ AODA	437.3411	N/A	N/A	\$ 1,460
JJ Youth Aids	437.3413	N/A	N/A	67,181
CW Children and Families Allocation	437.3561	N/A	N/A	230,274
CW Children & Families Allocations	437.3681	N/A	N/A	57
CW WiSACWIS Annual Operation Maintenance Fee	437.3935	N/A	N/A	(2,276)
PDS Partnership Fees	437.3940	N/A	N/A	(758)
CS Additional Funding	437.7335	N/A	N/A	3,170
CS State GPR/PR Funding Allocation	437.7502	N/A	N/A	17,466
CS Medical Support GPR Earned	437.7606	N/A	N/A	361
Total Wisconsin Department of Children and Families				385,691
Wisconsin Department of Justice				
Treatment Alternatives and Diversion	455.279	N/A	N/A	24,383
Treatment Alternatives and Diversion	455.271	N/A	N/A	16,194
Victim and Witness Assistance Program	455.532	N/A	N/A	25,354
vicum and vivuess Assistance i regiani	400.002	IN/A	IN/A	25,554
Total Wisconsin Department of Justice				65,931
Wisconsin Department of Military Affairs				
Emergency Government Response Equipment	465.308	N/A	N/A	7,530
Emergency Planning Grant	465.337	N/A	N/A	8,097
Total Wisconsin Department of Military Affairs				15,627
Wisconsin Department of Veterans Affairs				
County Veterans Service Officer	485.001	N/A	N/A	8,500
Total Wisconsin Department of Veterans Affairs				8,500
Wisconsin Department of Administration				
Land Information Board Grants	505.173	N/A	N/A	121,356
Utility Public Benefits - Low Income Assistance	505.371	N/A	N/A	39,189
Curry I abite Deficite Low mounter resistance	303.371	19/73	13/73	
Total Wisconsin Department of Administration				160,545
Total state programs				\$ 1,882,671
. State programs				¥ .,502,011

Notes to Schedule of Expenditures of Federal and State Awards Year Ended December 31, 2021

1. Basis of Presentation

The accompanying schedule of expenditures of federal and state awards (the Schedule) includes the federal and state award activity of Lafayette County, including Memorial Hospital of Lafayette County, under programs of the federal and state government for the year ended December 31, 2021. The information in this Schedule is presented in accordance with the requirements of Title 2 U.S. Code of Federal Regulations Part 200, Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards (Uniform Guidance) and the *State Single Audit Guidelines*. Because the Schedule presents only a selected portion of the operations of Lafayette County, it is not intended to and does not present the financial position, changes in net position or cash flows of Lafayette County.

2. Summary of Significant Accounting Policies

Expenditures reported on the Schedule are reported on the accrual or modified accrual basis of accounting. Such expenditures are recognized following the cost principles contained in the Uniform Guidance wherein certain types of expenditures are not allowable or are limited as to reimbursement. Negative amounts shown on the Schedule 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 underlying accounting records for some grant programs are maintained on the modified accrual basis of accounting. Under the modified accrual basis, revenues are recorded when susceptible to accrual, i.e., both measurable and available. Available means collectible within the current period or soon enough thereafter to be used to pay liabilities of the current period. Expenditures are recorded when the liability is incurred. The accounting records for other grant programs are maintained on the accrual basis, i.e., when the revenue has been earned and the liability is incurred.

3. Indirect Cost Rate

Lafayette County has not elected to use the 10-percent de minimis indirect cost rate.

4. CARS/SPARC Report Dates

The Schedule of Expenditures of Federal and State Awards includes adjustments through the Community Aids Reporting System (CARS) reports dated March 31, 2022 and SPARC reports for December 2021. Federal/state funding splits for awards passed through Wisconsin Department of Health Services (DHS) are based on the splits provided by DHS on February 4, 2022. Federal/state funding splits for awards passed through Wisconsin Department of Children and Families (DCF) are based on the splits provided by DCF on January 12, 2022.

Notes to Schedule of Expenditures of Federal and State Awards Year Ended December 31, 2021

5. Pass-Through Agencies

Lafayette County received federal awards from the following pass-through agencies:

DHS Wisconsin Department of Health Services
DCF Wisconsin Department of Children and Families

DMA Wisconsin Department of Military Affairs

GWAAR Greater Wisconsin Agency on Aging Resources

Green County Green County, Wisconsin

DOJ Wisconsin Department of Justice

6. ALN 93.498 Provider Relief Fund and American Rescue Plan (ARP) Rural Distribution

The Health Resources and Services Administration (HRSA) has directed health care providers to report expenditures on the Schedule using Periods that are based on the deadline to use the funds along with the PRF portal reporting time period. In accordance with this guidance, Walworth County has reported expenditures for ALN 93.498 that were incurred between January 1, 2020 and December 31, 2021, which represent Periods 1 and 2 as identified by HRSA, in the accompanying Schedule.

Schedule of Findings and Questioned Costs Year Ended December 31, 2021

Section I - Summary of Auditors' 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? Significant deficiency(ies) identified	X yes no ? yes X none reported
Noncompliance material to financial state	tements noted? yesX_ no
Federal and State Awards	
Internal control over major programs:	
	Federal Programs State Programs
Material weakness(es) identified?	yes <u>X</u> no yes <u>X</u> no
Significant deficiencies identified that not considered to be material weakness(es)?	none X yes reported yes X no
Type of auditor's report issued on comp for major programs:	liance Unmodified Unmodified
Any audit findings disclosed that are rectoo be reported in accordance with sect CFR 200.516(a) of the Uniform Guidanthe State Single Audit Guidelines?	ion 2
Auditee qualified as low-risk auditee?	yes <u>X</u> no yes <u>X</u> no
Dollar threshold used to distinguish betweety	ween \$750,000 \$250,000
Identification of major federal programs:	
Assistance Listing Number	Name of Federal Program or Cluster
93.498	COVID 19 Provider Relief Fund
Identification of major state programs:	
State Numbers	Name of State Program
435.560100 435.561/681 and 437.3561/3681	Aging and Disability Resource Center Basic County Allocation

Schedule of Findings and Questioned Costs Year Ended December 31, 2021

Section II - Financial Statement Findings Required to be Reported in Accordance with Government Auditing Standards

Finding 2021-001: Internal Control Over Financial Reporting

Repeat of Prior Year Finding 2020-001

Criteria: Auditing standards require us to report a material weakness for Lafayette County if material journal entries are detected as part of the financial audit, the auditor prepares the annual financial statements and footnotes or the auditor prepares the schedule of expenditures of federal and state awards (SEFSA).

Condition: Material journal entries were discovered during the course of the audit and we, as your auditors, prepared the annual financial statements. In addition, the auditors prepared the schedule of expenditures of federal and state awards and the data collection form.

Cause: The County does not have the resources required to identify and correct all misstatements in the financial records or to prepare the annual financial statements or the schedule of expenditures of federal and state awards in conformity with generally accepted accounting principles (GAAP).

Effect: A financial statement prepared in accordance with GAAP is not available until the conclusion of the audit. In addition, the schedule of expenditures of federal and state awards is not available to the county until it is completed by the auditors.

Recommendation: We recommend that the county put in place procedures to continue to reduce the number of material audit journal entries as well as determine if resources would be available to prepare a complete set of financial statements without material changes.

Management Response: Lafayette County has an individual qualified to prepare the financial statements and SEFSA. However, due to the technical limitations of Lafayette County's current enterprise software system, it is not equipped to publish comprehensive financial statements. Also, due to staff limitations, Lafayette County does not have the employee hours available to prepare the financial statements. Therefore, out of convenience, the County requests the assistance of the auditors to prepare the financial statements. The draft auditor-prepared financial statements, disclosures and schedules are reviewed and approved by the Lafayette County Finance Director before being issued.

Schedule of Findings and Questioned Costs Year Ended December 31, 2021

Section III - Federal and State Awards Findings and Questioned Costs

Finding 2021-002

Program Federal Assistance Listing and Title: 93.498 COVID-19 Provider Relief Fund

Award Number: N/A

Federal Agency: Department of Health and Human Services

Pass-Through Agency: N/A

Criteria: All recipients of Provider Relief Funds (PRF) payments must comply with the reporting requirements described in the PRF terms and conditions and specified in directions issued by the U.S. Department of Health and Human Services.

Condition/Context: Of the two Provider Relief reports required to be submitted, the Period 2 Provider Relief report was selected for testing. The County elected to use the '2020 Budgeted Revenue' as their lost revenues reporting method. Under this method, the budget used in the calculation must have been approved prior to March 27, 2020. The 2021 budget used in the County's calculation of lost revenues was approved after this deadline, on November 10, 2020. Additionally, when testing the key line items on the Period 2 PRF report, a variance was noted when comparing the 2021 Budgeted Total Revenue/Net Charges from Patient Care included on the PRF report to the 2021 budget adopted by the County Board of Supervisors. This variance caused the 2021 Budgeted Total Revenue / Net Charges from Patient Care to be overstated on the PRF report by \$148,350. A variance was also noted when comparing the 2021 Actual Total Revenue / Net Charges from Patient Care included on the PRF report to the 2021 audited revenue general ledger detail. This variance caused the 2021 Actual Total Revenue / Net Charges from Patient Care to be overstated on the PRF report by \$505,430. Together, these two variances resulted in a lost revenue calculation that was \$357,080 less than what should have been reported. This sample was not statistically valid.

Cause: When calculating lost revenues, the County elected the wrong lost revenues reporting method. If this calculation of lost revenues was preferred, they should have elected to use the 'Alternate Method of Calculating Lost Revenues Attributable to Coronavirus' method. Additionally, when calculating both the 2021 Budgeted and 2021 Actual Total Revenue/Net Charges from Patient Care balances to be included on the PRF report, a few of the revenue and contra revenue general ledger accounts that should have been factored into the County's calculation were omitted.

Effect: The amounts reported to Health Resources & Services Administration (HRSA) were not in accordance with established U.S. Department of Health and Human Services reporting guidance.

Questioned Costs: None.

Recommendation: We recommend that management implement procedures to ensure that the most recent guidance is reviewed and understood and that information used in preparation of the reports is reviewed, with errors addressed, prior to reporting.

Management Response: Lafayette County recognizes that the 2021 budget was not approved prior to March 27, 2020, and that the 2021 revenue was overstated. Due to staff limitations and limited experience and resources for such programs and funding, along with unaudited 2021 financial statements, the 2021 data reported was submitted with errors. Overall, Lafayette County had enough lost patient service revenue and COVID related expenses in 2020 to justify the provider relief funding received, and the audited financial data submitted for 2020 is accurate. Lafayette County now understands zeros can be submitted on the reports where lost revenue is not being claimed, so they will correct the 2021 lost revenue to zero during Reporting Period 3 that is due September 30, 2022.

Schedule of Findings and Questioned Costs Year Ended December 31, 2021

Section IV - Other Issues

Does the auditors' report or the notes to the financial statements include disclosure with regard to substantia doubt as to the auditee's ability to continue as a going concern?	
Does the audit report show audit issues (i.e., material no compliance, non-material non-compliance, questioned costs, material weakness, significant deficiency, management letter comment, excess revenue or exce reserve) related to grants/contracts with funding agent that require audits to be in accordance with the State Single Audit Guidelines:	d ess
Department of Health Services	yes <u>X</u> no
Department of Justice	yes <u>X</u> no
Department of Agriculture, Trade and Consumer Protection	yes no X
Department of Transportation	yes X no
Department of Children and Families	yes X no
Department of Administration	yes X no
Department of Veteran's Affairs	yes X no
Department of Military Affairs	yes X no
Department of Natural Resources	yes X no
Was a Management Letter or other document conveyi	ing
audit comments issued as a result of this audit?	X yes no
Name and signature of partner	amanda Blembry
	Amanda R. Blomberg
Date of report	September 21, 2022