Audit	Finding		Finding and
Report	Number		Corrective Action Status
2018 F	003	Finding:	The Department of Health improperly charged \$151 to the Special Supplemental Nutrition Program for Women, Infants and Children grant.
		Corrective Action:	The Department concurs with the finding.
			The Department has been working on a new system, Cascades MIS, which issues benefits on electronic benefit cards. The new system has built-in safeguards, which will prevent loading funds onto a client's
			benefit card if proof of identity/residence and/or income verification is not provided within 30 days after the initial intake appointment.
			By December 2019, the Department will fully implement the Cascades MIS system.
			Additionally, the Department will:
			• Review current program policies to ensure they comply with federal requirements.
			• Clarify policies and rules related to program eligibility with local agencies, and provide training and technical assistance as needed.
			• Consult with the federal grantor to discuss whether the known questioned costs identified in the audit should be repaid.
		Completion Date:	Corrective action is expected to be complete by January 2020
		Agency	Kristina White
		Contact:	External Audit Manager PO Box 47890
			Olympia, WA 98504-7890
			(360) 236-4547
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Audit	Finding		Finding and
Report	Number		Corrective Action Status
2018 F	004	Finding:	The Department of Health improperly charged \$31,051 to the Special Supplemental Nutrition Program for Women, Infants and Children grant.
		Corrective Action:	The Department strengthened internal controls to ensure quarterly time certifications are submitted in a timely manner. This included:
			• Reviewing Department policies and procedures to ensure they meet federal requirements.
			• Evaluating current processes to identify areas that need improvement.
			• Providing training to staff on Department policies and federal regulations related to time certifications.
			The Department consulted with the grantor to discuss whether the questioned costs identified in the audit should be repaid.
		Completion	
		Date:	July 2019, subject to audit follow-up
		Agency Contact:	Kristina White External Audit Manager PO Box 47890 Olympia, WA 98504-7890 (360) 236-4547 <u>kristina.white@doh.wa.gov</u>

Audit	Finding		Finding and
Report	Number		Corrective Action Status
2018 F	005	Finding:	The Department of Health did not have adequate internal controls over and did not comply with federal requirements to ensure subrecipients of the Special Supplemental Nutrition Program for Women, Infants, and Children program received required audits.
		Corrective Action:	The Department concurs with the finding.
			To strengthen internal controls over subrecipient monitoring, the Department will:
			• Review and update the agency process of monitoring subrecipient audits to ensure the Department complies with federal requirements.
			• Improve the agency spreadsheet used to track audit activities to include audit periods and due dates.
			• Implement a process to follow up on subrecipient audit findings and issue timely management decisions.
		Completion	Competing action is supported to be complete by Lawrence 2020
		Date:	Corrective action is expected to be complete by January 2020
		Agency	Kristina White
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Audit	Finding		Finding and
Report	Number		Corrective Action Status
2018 F	006	Finding:	The Department of Health did not have adequate internal controls over and was not compliant with cash management requirements for the Special Supplemental Nutrition Program for Women, Infants and Children grant.
		Corrective Action:	The Department concurs with the finding.
			To strengthen internal controls over program cash management, the Department will:
			• Update the Cash Management Improvement Act agreement to accurately reflect planned cash draw actions.
			• Review and update agency procedures to ensure cash draws are performed in accordance with the Cash Management Improvement Act agreement.
			• Ensure staff understand the federal requirements related to cash management and provide cross-training on processes to ensure compliance with federal regulations.
		Completion	
		Date:	Corrective action is expected to be complete by January 2020
		Agency	Kristina White
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Audit	Finding		Finding and
Report	Number		Corrective Action Status
2018 F	040	Finding:	The Department of Health did not have adequate internal controls to ensure it complied with survey requirements for Medicaid hospitals and home health agencies.
		Corrective Action:	To ensure the Department complies with survey requirements, the Department strengthened internal controls to ensure Statements of Deficiencies are sent to facilities within the 10-day required timeframe. This included:
			• Adding a field to the Integrated Licensing Reporting System to track the due dates of Statements of Deficiencies.
			• Generating a report for management to monitor and notify staff on Statements of Deficiencies that are coming due.
			• Sending written notification to the Centers for Medicare and Medicaid Services when a Statement of Deficiency is expected to be submitted late.
		Completion	
		Date:	October 2019, subject to audit follow-up
		Agency	Kristina White
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Audit	Finding		Finding and
Report	Number		Corrective Action Status
1024307	2018-001	Finding:	The Department of Health did not have adequate internal controls to ensure it followed state requirements and its own policies related to small and attractive assets.
		Corrective Action:	The Department concurs with the finding.
			In response to the audit recommendations, the Department has taken steps to correct the deficiencies identified by the auditors.
			As of June 2019, the Department began scaling up a business project that focused on managing IT, capital, and small and attractive assets. The intended outcomes and deliverables of the project include:
			• Updating agency policies and procedures on small and attractive assets.
			• Defining clear roles and responsibilities.
			• Designating agency inventory control officer(s).
			• Assigning sequential tags to new assets.
			• Conducting inventory of all agency assets to comply with the State Administrative and Accounting Manual requirements.
			As of July 2019, the Department began assigning sequential tags to new IT assets.
		Completion Date:	Corrective action is expected to be complete by January 2020
		Agency	Kristina White
		Contact:	External Audit Manager
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